

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0092	Issue Date:	CBL: 194 C056001
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Location of Construction: 34 EASTFIELD RD	Owner Name: BRIGHT CLARA R	Owner Address: 34 EASTFIELD RD	Phone:
Business Name:	Contractor Name: Down East Energy	Contractor Address: 172 Main Street South Portland	Phone 2077995585
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Dwellings	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home - install a 57 gallon propane tank	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>HVAC</i>	

Proposed Project Description:
install a 57 gallon propane tank

Signature: *[Signature]*
Signature: *[Signature]*
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: *Idobson*
Date Applied For: *01/31/2008*

Zoning Approval

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

Special Zone or Reviews

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan

Maj Minor MM

Date: *2/11/08*

Zoning Appeal

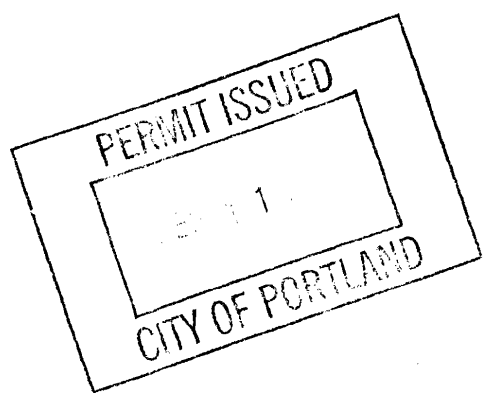
Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Date: _____

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review
 Approved
 Approved w/Conditions
 Denied

Date: *2/11/08*



CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

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Permit No: 08-0092	Date Applied For: 01/31/2008	CBL: 194 C056001
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Location of Construction: 34 EASTFIELD RD	Owner Name: BRIGHT CLARA R	Owner Address: 34 EASTFIELD RD	Phone:
Business Name:	Contractor Name: Down East Energy	Contractor Address: 172 Main Street South Portland	Phone: (207) 799-5585
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Dwellings	

Proposed Use: Single Family Home - install a 57 gallon propane tank	Proposed Project Description: install a 57 gallon propane tank
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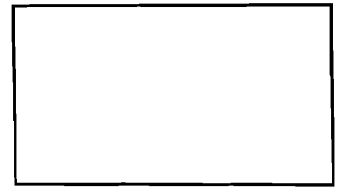
Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 02/11/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>

1) The installation must comply with the State of Maine Gas Regulations.



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



080092

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location / CBL 194-C-56 Use of Building Private Date 1/31/08
 Name and address of owner of appliance Melisa Kim 34 Eastfield Rd
Portland
 Installer's name and address Devoz East Energy 172 Main St
South Portland Telephone _____

Location of appliance:

- Basement Floor
 Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name:

U.L. Approved Yes No

Will appliance be installed in accordance with the manufacture's installation instructions? Yes No

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
 Solid Fuel # _____
 Oil # _____
 Gas # PNT 1445
 Other _____

Type of Chimney:

- Masonry Lined
 Factory built _____
 Metal
 Factory Built U.L. Listing # _____
 Direct Vent
 Type _____ UL# _____

Type of Fuel Tank

- Oil
 Gas

Size of Tank 57

Number of Tanks 1

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ _____

Permit Fee: \$ 30.00

Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

- See attached letter or requirement

Signature of Installer

[Signature] Inspector's Signature _____ Date Approved _____

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

DAY OF INSTALL
DATE
TIME

APPOINTMENT	
DATE	TIME
SALES REP	<i>Steve T</i>

PROPANE INSTALLATION FORM

NAME:	<i>Melisa King</i>	ACCOUNT#	
ADDRESS:	<i>34 Fairfield Rd</i>	PHONE#	
DIRECTIONS:	<i>Road here</i>		
		OIL CUSTOMER?	

QUOTE: (Y/N) LABOR: PART:

JOB DESCRIPTION

WORKORDER#(S) _____ TICKETS _____

TANK SIZE	<i>57</i>	TRENCH REQ	<i>NO</i>	TRENCH DUG BY																
HOT WORK	<input checked="" type="checkbox"/>	INST HOOK	<input checked="" type="checkbox"/>	UNIT:	<i>Stove</i>	SHOP CUST	<input checked="" type="checkbox"/>	REQUIRE CONVERSION												
WALK SAFE	<input checked="" type="checkbox"/>	INSTALL LOCATION	<input checked="" type="checkbox"/>	KITCH	<input checked="" type="checkbox"/>	LVRM	<input type="checkbox"/>	BDRM	<input type="checkbox"/>	BATH	<input type="checkbox"/>	GAR	<input type="checkbox"/>	BASE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>			
** UNSAFE COND.	<input checked="" type="checkbox"/>	ASBESTOS	<input checked="" type="checkbox"/>	CONFINED	<input checked="" type="checkbox"/>	WATER	<input checked="" type="checkbox"/>	ANIMALS	<input checked="" type="checkbox"/>	ELECTRIC WIRES	<input checked="" type="checkbox"/>	OTHER *	<input checked="" type="checkbox"/>							
ELECTRIC GRD.	<input checked="" type="checkbox"/>	DESCRIPTION:																		
CRAWL SPACE *	<input checked="" type="checkbox"/>																			
LADDER WRK *	<input checked="" type="checkbox"/>																			
REMOVAL REQUIRED	<input checked="" type="checkbox"/>	TOTAL BTU LOAD					FURTHEST APPLIANCE													
PIPE SIZE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PLASTIC	<input type="checkbox"/>
VENTING REQUIRED	<input type="checkbox"/>	NOTES: ** (SIDING/TILE/ETC)																		
PARTS/EQUIPMENT:		DISCUSSED W/ CUST:																		
		SPECIAL TOOLS:																		
		#TECHS																		