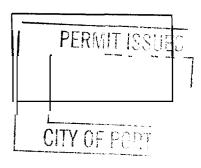
				PERMIT ISSUED					
City of Portland, M 389 Congress Street, C		0		1 1	Issue Dat	te:	dBL:	059001	
. — — — — — — — — — — — — — — — — — — —		Owner Name:	5, 1 ax. (207) 874-871	Owner Address		1 6000	Phone:	1032001	
0 RIVERS EDGE DR		STROUDWA	STROUDWATER FARMS ASSOC		n RD				
Business Name:		i	Contractor Name:		Contractor Address CITY OF PURITLA Protone				
Lessee/Buyer's Name			Jiminos Plumbing &Heating Phone:		1407 Riverside Street Portland 2077973174 Permit Type: Zone:				
bessed buyer's Ivanie		none.		HVAC				Zone: 2	
Past Use:		Proposed Use:	Proposed Use:		Permit Fee: Cost of Work: CEO District:				
Sr			Single Family Home / install HB Smith Oil Boiler in Basement Lot #29		00 \$3,5	500.00	3		
					Approved	Use Group		Tune	
					Denied	Ose Group	KY	HIM	
						1 tm	1-20	03 11	
						Use Group: (27 Type: W/N) IM (-2003)			
install HB Smith Oil Boiler in Basement				Signature: Signature: NIP 5/1			2 7/11/0		
				Action:	Approved Ap	pproved w/Co	nditions [Denied	
				Signature:		•	ate:		
Permit Taken By: Date Applied For:		te Applied For:	1	Zoning Approval					
ldobson	0.5	5/13/2005							
			Special Zone or Revie	l <u> </u>	Zoning Appeal	\ <u></u>		reservation	
			Shoreland	L V	ariance		Not in Dis	strict or Landma	
			Wetland	M	iscellaneous	X	Does Not	Require Review	
			Flood Zone	C	Conditional Use		Requires Review		
			Subdivision	☐ In	terpretation		Approved		
			☐ Site Plan	A ₁	pproved		Approved	w/Conditions	
			Maj Minor MM Denied		enied	Denied			
)ate: \$105 17	CS Date:		Date:	DWA	}	
				•			V		
			CERTIFICATION	ON					
I hereby certify that I am									
I have been authorized by jurisdiction. In addition,									
shall have the authority to									
such permit.									
SIGNATURE OF APPLICANT			ADDRESS		DATE	DATE PHONE		HONE	
RESPONSIBLE PERSON IN	<u></u>	DATI	<u></u> E	PI	HONE				



HEATING OR POWER EQUIPMENT



LOT#29 2187859___

Installer's name and address Jimino's Plunbing & Heating Telephone 797-3/74							
	Telephone 777 377						
Location of appliance:	Type of Chimney:						
Basement	Masonry Lined						
Attic	Factory built						
Type of Fuel:	a Metal						
O Gas 🔏 Oil 🗖 Solid	Factory Built U.L. Listing #						
Appliance Name: HB Sm4h U.L. Approved Yes D No	☐ Direct Vent Type UL#						
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank A Oi Gas Size of Tank 275 GAL						
The Type of License of Installer: O Master Plumber # 05683 Solid Fuel #3516	Number of Tanks						
☐ Oil # ☐ Gas #	Cost of Work: § 3500,00						
☐ Gas # ☐ Other	Cost of Work: \$ <u>3500.00</u> Permit Fee: \$ <u>576</u>						
<u>Approved</u>	Approved with Conditions						
Fire:	☐ See attached letter or requirement						
Ele.: Bldg.: Signature of Installer	Inspector's Signature Date Approved						
White - Inspection Yellow - File	Pink - Applicant's Gold - Assessor's Copy						