

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-1652	Issue Date:	CBL: 224 A010001
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Location of Construction: 294 CAPISIC ST	Owner Name: BRODER BERNARD J III	Owner Address: 49 PHINNEY ST	Phone:
Business Name:	Contractor Name: Quality Insulation	Contractor Address: 65 Downeast Drive Yarmouth	Phone: 2078467745
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R3

Past Use: Single Family Home	Proposed Use: Single Family Home- Lennox Direct Vent Fireplace	Permit Fee: \$40.00	Cost of Work: \$1,825.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB IRC 2003	

Proposed Project Description: Lennox Direct Vent Fireplace	Signature	Signature: Jan 11/14/06
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: Idobson	Date Applied For: 11/13/2006	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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 <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied
	Date:	Date:	Date:



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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

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Business Name:	Contractor Name: Quality Insulation	Contractor Address: 65 Downeast Drive Yarmouth	Phone: (207) 846-7745
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family Home- Lennox Direct Vent Fireplace	Proposed Project Description: Lennox Direct Vent Fireplace
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Dept: Zoning **Status:** Not Applicable **Reviewer:** **Approval Date:**
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tom Markley **Approval Date:** 11/14/2006
Note: **Ok to Issue:**

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