

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-1134-EP	Issue Date: 20 2001	CBL: 256 B006001
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Location of Construction: 1551 Westbrook St	Owner Name: Baker Molly K	Owner Address: 1551 Westbrook St CITY OF PORTLAND	Phone: n/a
Business Name: n/a	Contractor Name: Waynes Plumbing and Heating	Contractor Address: 158 St. John St Portland	Phone: 2077747849
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Same: Install Heating System	Permit Fee:	Cost of Work: \$0.00	CEO District: 3
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Proposed Project Description: Install Heating System	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:
	Signature:	Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: cjh	Date Applied For: 09/14/2001	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"/> Date:	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 Date:	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:
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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.

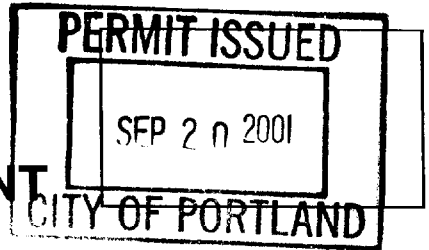
_____	_____	_____	_____
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE

_____	_____	_____	_____
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



256.B.C

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 1549 WESTBROOK ST PORTLAND Use of Building RESIDENCE Date 9/13/01
 Name and address of owner of appliance DAVID BAKER
1549 WESTBROOK ST PORTLAND
 Installer's name and address WAYNE'S PLUMBING & HEATING CO
158 St. John St. Port. 04102 Telephone 9947849

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: WELL MCLAIN

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 # 1568
- Solid Fuel # 1002
- Oil # 1002
- Gas # NNT 76
- Other _____

Type of Chimney:

Masonry Lined
Factory built MASONRY LINED

Metal
Factory Built U.L. Listing # _____

Direct Vent
Type _____ UL# _____

Type of Fuel Tank

- Oil N/A
- Gas N/A

Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

Approved

Fire: [Signature]
 Ele.: _____
 Bldg.: _____

Approved with Conditions

See attached letter or requirement

30.0

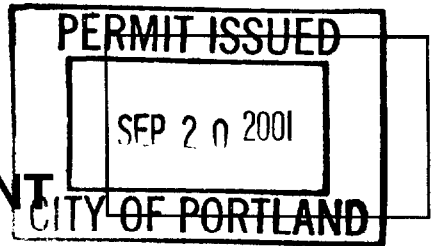
Signature of Installer _____

CU
9.14.01



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1549 WESTBROOK ST PORTLAND
 Installer's name and address WAYNE'S PLUMBING + HEATING CO
158 St. John St. Port 04102 Telephone: 2242849

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: WELL MELVIN
 U.L. Approved Yes No

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

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The Type of License of Installer:
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Type of Chimney:
 Masonry Lined
 Factory built MASONRY LINER
 Metal
 Factory Built U.L. Listing # _____
 Direct Vent
 Type _____ UL# _____

Type of Fuel Tank
 Oil N/A
 Gas N/A

Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

Approved
 Fire: _____
 Ele.: _____
 Bldg.: _____
 Signature of Installer _____

Approved with Conditions
 See attached letter or requirement
30.0
 C4
 9.14.01