

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 08-1577	Issue Date: 01/05/09	CBL: 272 B013001
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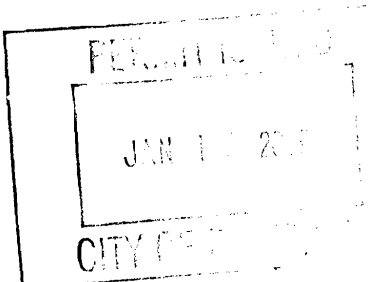
Location of Construction: 258 HOLM AVE	Owner Name: CGB PROPERTIES LLC	Owner Address: 84 COUNTRY LN	Phone:
Business Name:	Contractor Name: Jerrys Plumbing & Heating	Contractor Address: 22 Ridgeview Drive Biddeford	Phone 2072822319
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home - Baxi ACA Approved in basement	Permit Fee: \$70.00	Cost of Work: \$5,000.00	CEO District: 3
Proposed Project Description: Baxi ACA Approved in basement		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: JB JMC-2003 NFAA-211	
		Signature: <i>Cl</i> 1/5/09		
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: 12/30/2008	<b>Zoning Approval</b>		
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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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input checked="" type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>1/5/09 Cl</i>	Date: _____	Date: <i>Cl 1/5/09</i>



**CERTIFICATION**

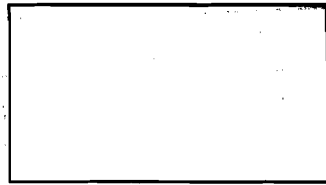
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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



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 256 Holm Ave 972-3-15 Use of Building Residential Date 12/29/08  
Name and address of owner of appliance Brackett Construction / ~~XXXXX XXXXX~~

Installer's name and address Jerry's Plbg + Htg.  
22 Ridgeview Drive, Biddeford, ME Telephone 590-5469

**Location of appliance:**

- Basement
- Attic
- Floor
- Roof

**Type of Fuel:**

- Gas
- Oil
- Solid

Appliance Name: Baxi  
U.L. Approved  Yes  No  
ACA approved

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 # \_\_\_\_\_
- 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 By gas company

Number of Tanks 1

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

Cost of Work: \$ 5000.00

Permit Fee: \$ 70.-

**Approved**

Fire: \_\_\_\_\_  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

**Approved with Conditions**

- See attached letter or requirement

[Signature] 1/5/09  
Inspector's Signature Date Approved

Signature of Installer Jerry Gouster

# ELECTRICAL PERMIT

## City of Portland, Me.

2- AIR FAULTS.  
Gerry  
CITY OF PORTLAND MAINE

THURSDAY  
Friday - AM. Gerry

To the Chief Electrical Inspector, Portland Maine:  
The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date 1/5/09  
Permit # 2009-4005  
CBL# 272-B-013

LOCATION: 258 Holm Rd METER MAKE & # \_\_\_\_\_  
CMP ACCOUNT # 441 182 4515 001 OWNER Dwight Brackett  
TENANT Dwight Brackett PHONE # \_\_\_\_\_

					TOTAL EACH FEE
OUTLETS	<del>40</del> Receptacles	<del>40</del> <sup>25</sup> Switches	<del>35</del> <sup>6</sup> Smoke Detector		.20
FIXTURES	<sup>15</sup> Incandescent	Fluorescent	Strips		.20
SERVICES	<input checked="" type="checkbox"/> Overhead	Underground	TTL AMPS <u>100</u> <800		15.00
	Overhead	Underground	>800		25.00
Temporary Service	Overhead	Underground	TTL AMPS		25.00
					25.00
METERS	<u>1</u> (number of)				1.00
MOTORS	(number of)				2.00
RESID/COM	Electric units				1.00
HEATING	<u>1</u> oil/gas units	<input checked="" type="checkbox"/> Interior	Exterior		5.00
APPLIANCES	<u>1</u> Ranges	Cook Tops	Wall Ovens		2.00
		Insta-Hot	Water heaters	Fans	2.00
	<u>1</u> Dryers	<u>1</u> Disposals	<u>1</u> Dishwasher		2.00
	<del>3</del> Compactors	Spa	<u>1</u> Washing Machine		2.00
	Others (denote)				2.00
MISC. (number of)	Air Cond/win				3.00
	Air Cond/cent		Pools		10.00
	HVAC	EMS	Thermostat		5.00
	Signs				10.00
	Alarms/res				5.00
	Alarms/com				15.00
	<u>JAN 2009</u> Heavy Duty(CRKT)				2.00
	Circus/Carnv				25.00
	Alterations				5.00
	Fire Repairs				15.00
E Lights				1.00	
E Generators				20.00	
PANELS	<u>1</u> Service	Remote	<u>1</u> Main		4.00
	TRANSFORMER	0-25 Kva			5.00
	25-200 Kva				8.00
	Over 200 Kva				10.00
TOTAL AMOUNT DUE					
MINIMUM FEE/COMMERCIAL 55.00					MINIMUM FEE 45.00

54.20

CONTRACTORS NAME B+G Electric MASTER LIC. # \_\_\_\_\_  
ADDRESS 15 chute rd, Windham LIMITED LIC. # LM20030395  
TELEPHONE 650-6763

SIGNATURE OF CONTRACTOR Lowell S. Lavery Gerry Lavery  
White Copy - Office • Yellow Copy - Applicant

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

## PROPERTY OWNERS NAME

Last:	First:
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Applicant Name:	
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Mailing Address of Owner/Applicant (If Different)	
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### Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant	Date
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**PORTLAND**

**PERMIT # 10851 TOWN COPY**

Date Permit Issued: 12/30/08 \$ 11.00  # Double Fee Charged

[Signature] Local Plumbing Inspector Signature L.P.I. # 10617

### Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature	Date Approved
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## PERMIT INFORMATION

<p><b>This Application is for</b></p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure To Be Served:</b></p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER - SPECIFY _____</p>	<p><b>Plumbing To Be Installed By:</b></p> <p>1. <input type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # _____</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<b>OR</b>		Urinal		Sink
		Drinking Fountain		Wash Basin
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste		Water Closet (Toilet)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
<b>OR</b>		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
<input type="checkbox"/> TRANSFER FEE [\$6.00]		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>				Fixtures (Subtotal) Column 2
				<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				<b>Permit Fee (Total)</b>