

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-1146	Issue Date: OCT 01 2003	CBL: 277 F035001
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Location of Construction: 35 Brookview Ter	Owner Name: Allen Marlene A & Robert A Jts	Owner Address: 35 Brookview Ter	Phone:
Business Name: n/a	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single Family / Install 275 gallon oil heating system in the basement.	Permit Fee: \$75.00	Cost of Work: \$5,425.00	CEO District: 3
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Proposed Project Description: Install Oil Heating System	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: R3 oil Heat Type: BOCA 1993 Signature: JMB 10/1/03
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: gg	Date Applied For: 09/19/2003	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: JMB 10/3/03	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 checked="" 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: JMB
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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

03-146

PERMIT ISSUED
OCT 01 2003
CITY OF PORTLAND

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

277-F035

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 35 BROOKVIEW TERR Use of Building RES. Date 9/19/03

Name and address of owner of appliance ROBERT ALLEN
35 BROOKVIEW TERR PORTLAND, MAINE

Installer's name and address DEAD RIVER CO. (207)
73 PLEASANT HILL RD SCARBOROUGH, ME. 04070 Telephone 883-9575

Location of appliance:

- Basement Floor
- Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name: BURNHAM V83T CAST BOILER

U.I.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 # MS20006017
- 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 275

Number of Tanks 1

Distance from Tank to Center of Flame 22 feet.

Cost of Work: \$ 5425.00

Permit Fee: \$ 75.00

Approved

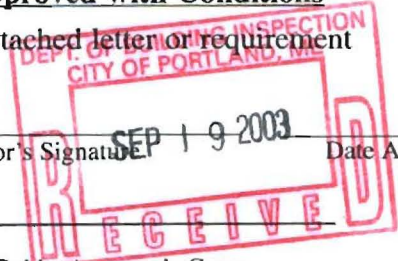
Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

See attached letter or requirement

Signature of Installer David Cloutier - DEAD RIVER CO.

Inspector's Signature _____ Date Approved _____



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Business Name: n/a	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: (207) 883-9515
Lessee/Buyer's Name: n/a	Phone: n/a	Permit Type: HVAC	

Proposed Use: Single Family / Install 275 gallon oil heating system in the basement.	Proposed Project Description: Install Oil Heating System
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Dept: Zoning **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 10/01/2003
Note: **Ok to Issue:**

1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 10/01/2003
Note: **Ok to Issue:**

1) Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules