

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

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

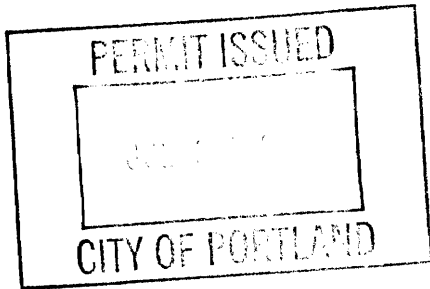
Permit No: 07-0873	Issue Date:	CBL: 283 D015001
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Location of Construction: 448 LUDLOW ST	Owner Name: HICKEY MATTHEW J & CATHE	Owner Address: 448 LUDLOW ST	Phone:
Business Name:	Contractor Name: Main Gas	Contractor Address: 908 Roosevelt Trail Windham	Phone: 2078926744
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-3

Past Use: Singel Family	Proposed Use: Single Family set a 50 gal tank	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 3
Proposed Project Description: Set a 50 gal tank		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>0</i> Type: <i>tank</i> <i>State Cross</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
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: dmartin	Date Applied For: 07/18/2007	<b>Zoning Approval</b>
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..



<b>Special Zone or Reviews</b> <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: _____	<b>Zoning Appeal</b> <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: _____	<b>Historic Preservation</b> <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: _____
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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

283 D 015  
PERMIT ISSUED  
JUL 18 2007  
CITY OF PORTLAND

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 448 Ludlow ST Use of Building RES. Date 7-18-07  
Name and address of owner of appliance John & Kim HARRISON  
448 Ludlow ST Portland  
Installer's name and address MAINGAS  
See Business Card Wadham me 892-6244 Telephone 892-6244

### Location of appliance:

- Basement
- Attic
- Floor
- Roof

### Type of Fuel:

- L.P. Gas
- Oil
- Solid

### Appliance Name:

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 # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # \_\_\_\_\_
- Gas # MAINGAS
- 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 50 GAL

Number of Tanks 1

Distance from Tank to Center of Flame 25 feet.

Cost of Work: \$ \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_

DEPT. OF BUILDING INSPECTION  
CITY OF PORTLAND, ME  
JUL 18 2007  
RECEIVED

### Approved

### Approved with Conditions

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

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer: MAINGAS Wadham ME

White - Inspection    Yellow - File    Pink - Applicant's    Gold - Assessor's Copy

*cc*

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<b>Permit No:</b> 07-0873	<b>Date Applied For:</b> 07/18/2007	<b>CBL:</b> 283 D015001
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<b>Location of Construction:</b> 448 LUDLOW ST	<b>Owner Name:</b> HICKEY MATTHEW J & CATHE	<b>Owner Address:</b> 448 LUDLOW ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Main Gas	<b>Contractor Address:</b> 908 Roosevelt Trail Windham	<b>Phone</b> (207) 892-6744
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

<b>Proposed Use:</b> Single Family set a 50 gal tank	<b>Proposed Project Description:</b> Set a 50 gal tank
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 07/18/2007
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 07/26/2007
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) The installation must comply with the State of Maine Gas Regulations.			

**Maingas (Branch #17)  
Customer Site Plan**

<b>New Account:</b>	
<b>Existing Account:</b>	
<b>Date :</b>	7-18-07
<b>Phone # :</b>	650-2329
<b>Work # :</b>	

CUSTOMER NAME: John & Kim Harrison  
 STREET ADDRESS: 448 Ludlow ST  
 TOWN: BOSTON

DELIVERY INSTRUCTIONS:

**Appliance(s) being installed:** (1)Type: Range Btu's: \_\_\_\_\_ (2)Type: \_\_\_\_\_ Btu's: \_\_\_\_\_  
 (3)Type: \_\_\_\_\_ Btu's: \_\_\_\_\_ (4)Type: \_\_\_\_\_ Btu's: \_\_\_\_\_

**Total System (Btu) load:** \_\_\_\_\_ Btu's:

**Tank/Regulator Information:** Tank Size:  Regulator(s): Twin  1st  2nd

Additional tank/reg. Info.: \_\_\_\_\_

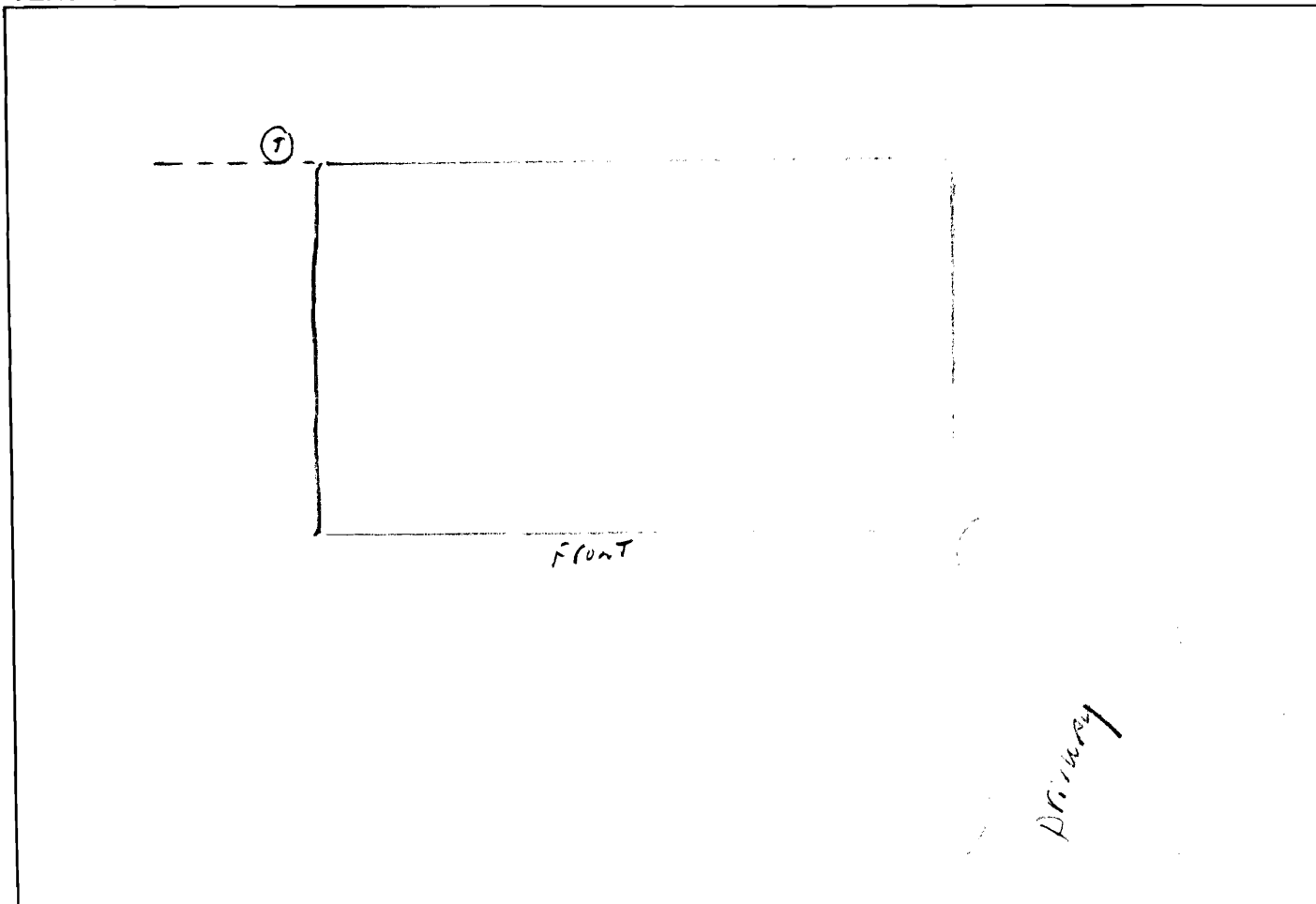
**Piping Information:** Type: \_\_\_\_\_ Size: \_\_\_\_\_ Quantity: \_\_\_\_\_

Additional piping information: \_\_\_\_\_

**Parts/Fittings Information:** \_\_\_\_\_

**Special tools required:** \_\_\_\_\_

**VENTING**



**Additional Instructions/Comments:**

Ludlow ST