

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

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

Permit No: 04-1538	Issue Date: 10/13/2004	CBL: 284 D008001
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Location of Construction: 65 Devon St	Owner Name: Woytkewicz Margaret L	Owner Address: 65 Devon St	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Boyer's Name	Phone:	Permit Type: HVAC TANK	Zone: R3

Past Use: Single family home	Proposed Use: Single family home w/new 275 gallon tank	Permit Fee: \$39.00	Cost of Work: \$1,375.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: TANK	

Proposed Project Description: install new 275 gallon tank in single family home	Signature:	Signature: JMB 10/27/04
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: dmm	Date Applied For: 10/13/2004	<b>Zoning Approval</b>	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan <i>JMB</i></p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>JMB 10/27/04</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>JMB</i></p>
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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 \_\_\_\_\_



# 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 65 DEVON ST. 284-D-8 Use of Building RES. Date 10/14  
 Name and address of owner of appliance MARGARET WOYTEWICZ  
65 DEVON ST. PORTLAND, ME 04102  
 Installer's name and address DEAD RIVER CO. 73 PLEASANT HILL RD. SCARBOROUGH, ME  
 Telephone 883-9515

### Location of appliance:

- Basement
- Attic
- Floor
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

### Appliance Name:

U.L. Approved  Yes  No

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

IF NO Explain: \_\_\_\_\_

### The Type of License of Installer:

- Master Plumber # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # MS30008710
- 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 16' feet.

Cost of Work: \$ 1,375.00

Permit Fee: \$ 39.00



### Approved

### Approved with Conditions

Fire: \_\_\_\_\_

Ele.: \_\_\_\_\_

Bldg.: JMB

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer

David Clletting - DEAD RIVER CO.