

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0958	Issue Date:	CBL: 286 A036001
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Location of Construction: 92 Four Winds Rd	Owner Name: Morris Carson A Vn Vet &	Owner Address: 92 Four Winds Rd	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone 2078839515
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single Family	Permit Fee: \$66.00	Cost of Work: \$4,890.00	CEO District: 3
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>V</i> Type: <i>Heating</i> <i>BOLA Mechanical</i> <i>1993</i>	

Proposed Project Description:
Install Oil Heating System in Basement

Signature: *[Signature]* Signature: *[Signature]*
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
Action: Approved Approved w/Conditions Denied
Signature: _____ Date: _____

Permit Taken By: gad	Date Applied For: 08/11/2003	Zoning Approval
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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> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: _____</p>	<p>Zoning Appeal</p> <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 <p>Date: _____</p>	<p>Historic Preservation</p> <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 <p>Date: _____</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

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Permit No: 03-0958	Date Applied For: 08/11/2003	CBL: 286 A036001
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Location of Construction: 92 Four Winds Rd	Owner Name: Morris Carson A Vn Vet &	Owner Address: 92 Four Winds Rd	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone (207) 883-9515
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family	Proposed Project Description: Install Oil Heating System in Basement
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Dept: Zoning **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 08/12/2003
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/12/2003
Note: **Ok to Issue:**

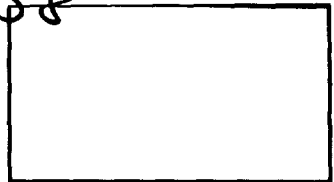
1) Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules



FILL IN AND SIGN WITH INK

03-2708

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



286 A03-6

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 92 FOUR WINDS RD Use of Building RES. Date 8/8/03
 Name and address of owner of appliance LOUANN T CARSON MORRIS
92 FOUR WINDS RD PORTLAND, ME
 Installer's name and address DEAD RIVER CO
73 PLEASANT HILL RD. SCARBOROUGH ME Telephone 882-9515

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: BURNHAM BOILER

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 # 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 _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 4890.00

Permit Fee: \$ 66.00

Approved

Fire: _____

Ele.: _____

Bldg.: _____

Signature of Installer [Signature]

Approved with Conditions

- See attached letter or requirement

Inspector's Signature _____

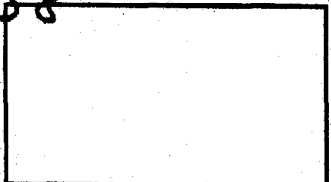
Date Approved _____



FILL IN AND SIGN WITH INK

03-0958

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286 A03-6

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Approved with Conditions

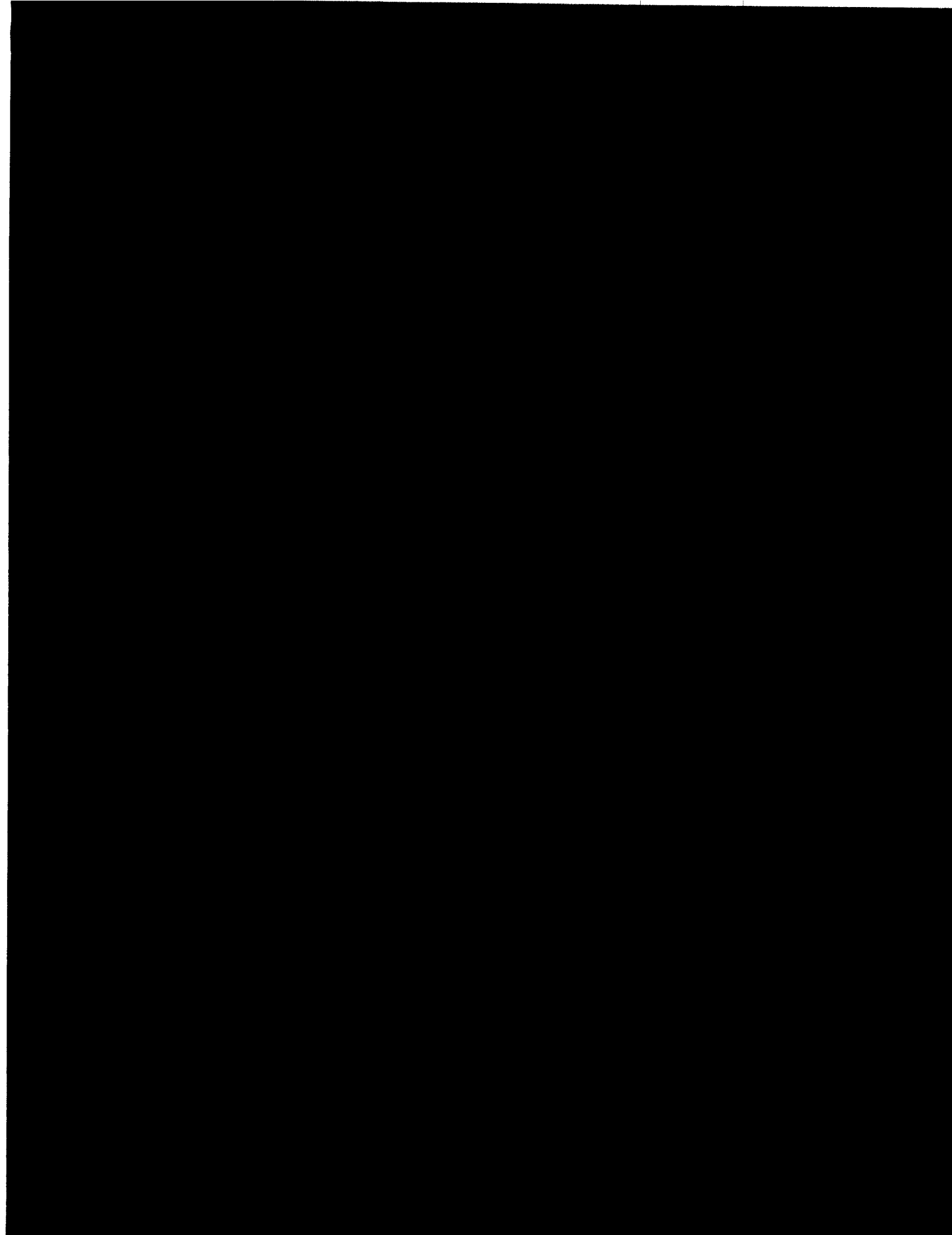
Fire: _____
 Ele.: _____
 Bldg.: _____

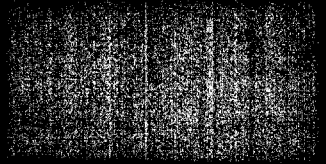
See attached letter or requirement

Signature of Installer [Signature]

Inspector's Signature _____

Date Approved _____





954-463-4

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