		3, Fax: (207) 874-8716	05-0967	286 E008001					
Location of Construction:	Owner Name:			2 2005 Phone:					
358 Ludlow St	Cox John &		Ludlov St						
Business Name:	Contractor Name	e: Contr	ractor A dress:	Phone					
	Dead River Co		Box 467 Scalbbrough F P	URILAND 8839515					
Lessee/Buyer's Name	Phone:	?ermi	it Type:	Zone:					
'ast Use:	Proposed Use:	Perm	nit Fee: Cost of Work:	CEO District:					
Single Family		install a Burnham	perf: \(\frac{1}{2}\) \(\frac{1}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{2}\) \(\frac{1}{						
	Boiler in bases	ment FIRE	E DEPT: Dpproved	Use Group: 3 Type-Head TMC 2003					
				IMC 2003					
roposed Project Description:	ļ		/ / "	- late /					
Install a Burnham Boiler in	n basement	Ciana	Signature: (Signature:						
			'EDESTFUAN ACTIVITIES DISTRICT (P.A.D.)						
		Actio		ved w/Conditions Denied					
		Actio	m. Approved Appro	ved w/Conditions Denied					
		Signa	ature:	Date:					
'ermit Taken By:	Date Applied For:		Zoning Approval						
dmartin	07/15/2005	Contain D	7	ppeal Historic Preservation					
		Special Zone of Reviews	Zoning Appeal						
		Shoreland	☐ Variance	Not in District or Landmarl					
		Wetland	Miscellaneous	Does Not Require Review					
		□ Rood Zane	Conditional Use	Requires Review					
		Subdivision	Interpretation	Approved					
		Site Plan	Approved	Approved w/Conditions					
		Maj Minor MM	Denied	Denied					
		1 11/	1	1 .11/					

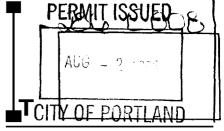
CERTIFICATION

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 EQUIPME TCITY OF PORTLAND



Tu the INSPECTOR OF BUILDINGS, PORTLAND, ME.

								/									
	The	under	rsigned	hereb	y appl	ies fo	or a peri	nit to	install	the fol	llowing	heating	g, cook	ing oi	rpower	· equipmer	nt in
accoi	rdance	with t	the Lav	vs of I	Maine.	the l	Building	Code	e of the	City a	€ Portla	ınd, and	d the fo	llowii	ng spec	ifications	:

Location / CBL 358 LUDIOW ST.	Use of Building SING FRANKY Date 7/15/05					
Location / CBL 358 LUDIOU ST. Use of Building SING FAMILY Date 7/15/05 Name and address of owner of appliance JOHN COX - 358 LUDIOU ST. PORTIAND, ME 04/02						
Installer's name and address DEAD RIVER CO. 73 f	Telephone 883-9375					
Location of appliance: Basement	Type of Chimney: Masonry Lined Factory built					
Type of Fuel: Gas Oil O Solid	☐ Metal Factory Built U.L. Listing #					
Appliance Name: BURNIHAN U83-T BOILER BELLETT BURNET U.L. Approved Yes \(\sigma\) No	Type DEPT. OF BUILDING INSPECTION CITY OF PORTLAND, ME					
Will appliance be installed in accordance with the manufacture's installation instructions'? Yes No	Type of Fuel Tank Oil Gas JUN 1 5 2005					
IF NO Explain:	Size of Tank					
The Type of License of Installer:	Number of Tanks					
☐ Master Plumber #	Distance from Tank <i>to</i> Center of Flame feet. Cost of Work: \$ 5, 250.00 Permit Fee: \$ 75.00					
Approved Fire: Ele.:	Approved with Conditions ☐ See attached letter or requirement					
Bldg.: Signature of Installer Will Will TEASA	Inspector's Signature Date Approved					
/•	Pink - Applicant's Gold - Assessor's Copy / CD540					