| City of Portland, Maine | - Building or Use | Permit Applicatio | n Per | mit No: | Issue Date | : | CBL: | |
|---|--|---|----------------------------|---------------------------------------|------------------------|-------------------------------------|-----------------------------------|------------------------|
| 389 Congress Street, 04101 | Tel: (207) 874-8703 | Fax: (207) 874-87 | | | <u>MIT ISSI</u> | JED | 312 A0 | 02001 |
| Location of Construction: Owner Name: | | | Owner Address: | | | | Phone: | |
| 525 RIVERSIDE ST WARREN K. | | ILE JR 52: | | RIVERSIDE ST | | | | |
| Business Name: | Contractor Name | Contractor Name: | | Contractor Address: | | | Phone | |
| Silver L | | Line Plb & Htg | | Portland | | | | |
| Lessee/Buyer's Name Phone: | | | Permit Type ITY OF PORTLAN | | | AND | | Zone: |
| Past Use: Proposed Use: | | | Permit Fee: Cost of Work: | | k: | CEO District: | | |
| Commercial / Office Commercial | | / Office Install a | | \$40.00 \$1,640.00 | | 10.00 | 5 | |
| | Rinnai Furnace | Rinnai Furnace | | RE DEPT: Approved INS | | INSPE | PECTION: | |
| "Nenta Husbard" | | | | Denied | | | Group: Type: // VA | |
| | | To | | TO NIPA 58 Signature Carea Cross Sign | | | State Gas | |
| | | | | | | (| | |
| Proposed Project Description: | | | | | 0 | < | Idd - | |
| Install a Rinnai Furnace | | | Signat | Signature: Signature: Signature: | | | | |
| | | | PEDE | PEDESTRIAN ACTIVITIES DISTRIC | | | Γ (P.A.D.) | |
| | | | Action | ı: Appro | ved App | proved w | I w/Conditions Dented | |
| | | | Signat | ture: | | | Date: | |
| Permit Taken By: | Date Applied For: | Γ | Zoning Approval | | | | | |
| dmartin | 02/01/2007 | | | Zoning | g Approva | ŧl | | |
| This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. | | Special Zone or Revi | ews | Zoni | Zoning Appeal | | Historic Preservation | |
| | | Shoreland | Shoreland Variance | | | Not in District or Landmark | | |
| 2. Building permits do not include plumbing, septic or electrical work. | | Wetland | | Miscellaneous | | | Does Not Require Review | |
| 3. Building permits are void if work is not started within six (6) months of the date of issuance. | | Flood Zone | | Conditional Use | | | Requires Review | |
| False information may invalidate a building permit and stop all work | | Subdivision | | Interpretation | | | Approved | |
| | | Site Plan | | Approved | | | Approved w/Conditions | |
| | | Maj Minor MM | | Denied | | ł | Denied | |
| | | 014 | | | | | Asin | |
| | | Date: 3/5/07 ABM | | | Date: | | Date: | |
| I hereby certify that I am the ov I have been authorized by the o jurisdiction. In addition, if a pe shall have the authority to enter such permit. | wner to make this appliermit for work describe | ication as his authorized in the application is | the proped agent | and I agree I certify that | to conform the code of | to all a _l ficial's a | pplicable laws authorized repi | of this resentative |
| | | | | | · | | | |
| SIGNATURE OF APPLICANT | ADDRES | RESS DATE | | | PHONE | | | |
| RESPONSIBLE PERSON IN CHARG | GE OF WORK, TITLE | | | | DATE | | PHC | ———— DNE |



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

| Commence of the Commence of th | |
|--|--|
| PERMIT ISSUED | |
| | |

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 525 /1 arsen Ave | Use of Building Office Date 2-/-07 | | | | | | |
|--|---|--|--|--|--|--|--|
| Name and address of owner of appliance Kaile Warren | , RAH LKC | | | | | | |
| 525 Riverside St. Partland ME | 0403 | | | | | | |
| Installer's name and address Silver I'me Plumber | ny + Heating 14 Graces hory | | | | | | |
| Windham, ME 04062 | Telephone | | | | | | |
| Location of appliance: | Type of Chimney: | | | | | | |
| Basement D Floor | ☐ Masonry Lined | | | | | | |
| ☐ Attic ☐ Roof | Factory built | | | | | | |
| | Tuotoly built | | | | | | |
| Type of Fuel: | ☐ Metal | | | | | | |
| ☐ Gas ☐ Oil ☐ Solid | Factory Built U.L. Listing # | | | | | | |
| 0 | , | | | | | | |
| Appliance Name: Kinnia | ☐ Direct Vent | | | | | | |
| U.L. Approved □ Yes □ No | Type UL# | | | | | | |
| | | | | | | | |
| Will appliance be installed in accordance with the manufacture's | Type of Fuel Tank | | | | | | |
| installation instructions? Yes | □ Oil | | | | | | |
| | ☐ Gas | | | | | | |
| IF NO Explain: | | | | | | | |
| | Size of Tank | | | | | | |
| | | | | | | | |
| The Type of License of Installer: | Number of Tanks | | | | | | |
| Master Plumber # | | | | | | | |
| Solid Fuel # | Distance from Tank to Center of Flame feet. | | | | | | |
| Gas # PNT 2534 DEPT. OF BUILD CITY OF P. | | | | | | | |
| | | | | | | | |
| Other | Permit Fee: \$ | | | | | | |
| | | | | | | | |
| Approved | EIVED S Approved with Conditions | | | | | | |
| Fire: | See attached letter or requirement | | | | | | |
| Ele.: | | | | | | | |
| Bldg.: | | | | | | | |
| | Inspector's Signature Date Approved | | | | | | |
| Signature of Installer (Cu Cuc | <i></i> | | | | | | |
| White - Inspection Yellow - File | Pink - Applicant's Gold - Assessor's Copy | | | | | | |