

**PERMIT ISSUED**

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

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

Permit No: 01-0394	Issue Date: <b>APR 10 2001</b>	CBL: 315 B001001
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<b>Location of Construction:</b> 636 Warren Ave / Riverside(245)	<b>Owner Name:</b> Hd Development Of Maryland Inc	<b>Owner Address:</b> 2455 Paces Ferry Rd <b>CITY OF PORTLAND</b>	<b>Phone:</b> n/a
<b>Business Name:</b> Home Depot	<b>Contractor Name:</b> William Hola Rose	<b>Contractor Address:</b> No. Berwick	<b>Phone:</b> 2076708412
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Commercial	<b>Proposed Use:</b> Commercial / Carrier hot air furnace	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$30.00	<b>CEO District:</b> 3
		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type:	

<b>Proposed Project Description:</b> Heating	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i> 4/6/01
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<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

<b>Permit Taken By:</b> gg	<b>Date Applied For:</b> 04/05/2001	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<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 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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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FILL IN AND SIGN WITH INK

FF3

01-0304

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED  
APR 10 2001

CITY OF PORTLAND

586 - 688 Warren Ave

237 - 281 Riverside

815

800

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 Home Depot 245 Riverside Use of Building \_\_\_\_\_ Date 4/3  
Name and address of owner of appliance CORNER Riverside & WARREN AV.

Installer's name and address William H. Rose North Berwick Me. 06903  
Kelley Mechanical Telephone 676 8412

### Location of appliance:

- Basement
- Floor
- Attic
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: CARRIER Hot Air Furnace  
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 # M 59000982
- Solid Fuel # \_\_\_\_\_
- Oil # \_\_\_\_\_
- Gas # 1701
- Other \_\_\_\_\_

### Type of Chimney:

Masonry Lined  
Factory built \_\_\_\_\_

Metal  
Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
Type PVC UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

Size of Tank \_\_\_\_\_

Number of Tanks \_\_\_\_\_

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

\$ 30.00

### Approved

### Approved with Conditions

Fire: [Signature]

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

Bldg.: [Signature] FOR K.C.

See attached letter or requirement

Signature of Installer [Signature]