389 Congress Street,		_				07-0042		329 A003	3001	
Location of Construction: Owner Name:				Owner Address:		Phone:				
54 EVERGREEN DR IMMUCE		IMMUCELL (CORPORATION		56 EVERGREEN DR					
Business Name:		Contractor Name:			Contractor Address:			Phone	Phone	
		Main Gas			908 Roosevelt Trail Windham			207892674	4	
Lessee/Buyer's Name		Phone:			1			Zone:		
				<u> </u>		nks - Commerc			<u> </u>	
Commercial "Immucell"		Proposed Use:		Pern		Cost of Work:	CEO District:			
		Commercial "Immucell" Install a 1000 gallon propane tank			\$35.00 \$35.00 FIRE DEPT: Approved INSPECT Use Grou					
								Гуре: Т		
							Denied		31	
								NEPA 1	1	
Proposed Project Descript	ion:	I			1	\(L>01)	5/07			
Install a 1000 gallon p	propane tank				Signature: Sig		gnature:			
					PEDESTRIAN ACTIVITIES DISTRICT (P.A			CT (P.A.D.)		
					Action: Approved Approved w/Conditions			ed w/Conditions	enied	
					Sign	ature:		Date:		
Permit Taken By:	Date A	pplied For:			8		Annroval			
ldobson				Zoning Approval						
This permit applie	preclude the			Zoning Appeal Variance		, Appeal	Historic Preser	vation		
Applicant(s) from Federal Rules.						Not in District	or Landm			
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellaneous		Does Not Requ	iire Revie		
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			☐ Flood Zone ☐ Subdivision			Conditional Use		Requires Revie	:w	
					☐ Interpretation		Approved			
			☐ Si	te Plan		Approved	l	Approved w/Co	onditions	
PERMIT ISSUED			Maj Minor Minor Minor		9	Denied		Denied	\bigcup	
						Date:		Date:	7	
JAN	3 1 3 37		Date:							
					~					
CITY OF	F PORTLAN	in l				ML				
CITTO	OMILIA				•	~ 111.	~			
			(CERTIFICATI	ON		·			
I hereby certify that I a	m the owner of	record of the na				nosed work is	authorized by	the owner of record	l and tha	
I have been authorized										
jurisdiction. In addition										
shall have the authority such permit.	y to enter all are	eas covered by si	uch perr	nit at any reaso	nable	nour to enforce	the provision	n of the code(s) appl	ncable t	
such permit.										
SIGNATURE OF APPLICANT			ADDRESS				DATE	PHON	 iE	
	- · ·									
DECDONGINI E DEDCOM	IN CHARGE OF T	VODV mimi c	_				DATE	PHON		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE							DATE	PHON	L	



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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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 POCILIAND 329-A-3	Use of Building <u>GENEYAFOR</u> Date ノーノトゥク						
Name and address of owner of appliance <u>Fourth CELL</u>							
56 EVERGREEN Dr POUTLAND							
Installer's name and address Moint Gas 908							
Windham ME 64009	Telephone 852-6744						
Location of appliance:	Type of Chimney:						
☐ Basement ☐ Floor	☐ Masonry Lined						
☐ Attic ☐ Roof	Factory built						
Type of Fuel:	☐ Metal						
Gas Oil Solid	Factory Built U.L. Listing #						
Appliance Name:	□ Direct Vent						
U.L. Approved Yes No	Type						
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank Gas Gas Gas Gas Gas Gas Gas Ga						
The Type of License of Installer:	Size of Tank ORO CALLED Number of Tanks Number of Tanks						
☐ Master Plumber #	Number of Tanks / /// 17.52						
□ Solid Fuel #	Distance from Tank to Center of Flame <u>Cycr 25 FF</u> feet.						
Y Gas # 1979- NG 19 S	Cost of Work: \$						
□ Other	Permit Fee: \$ 35 %						
<u>Approved</u>	Approved with Conditions						
Fire:	☐ See attached letter or requirement						
Ele.:	-						
Bldg.:	Inspector's Signature Date Approved						
Signature of Installer Maincy							

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy