City of Portland, Main	ne - Buil	ding or Use	Permi	t Applicatio	n Pe	rmit No:	Issue Date	:	CBL:	
389 Congress Street, 04101 Tel: (207) 874-87					1	08-0506			339 D0	09001
Location of Construction:		Owner Name:			Owne	Owner Address:			Phone:	
35 BARCLAY AVE		MADD LLC			543	543 ALLEN AVE				
Business Name:		Contractor Name:			Contr	Contractor Address:			Phone	
		Mark O'Brien Plumbing & Heating			9 Broadway Drive Cumberland				2078295	158
Lessee/Buyer's Name		Phone:		Permit Type:				Zone:		
					HV	AC				\ ^
Past Use:		Proposed Use:			Permit Fee: Cost of V		Cost of Wor	k:	CEO District:	
Single Family Home		Single Family Home - Install Slant Fin Riello Heating System		\$70.00 \$4,800		00.00	5			
				I Apployed I			CTION:			
					Denied		Use Gr	roup: R3	Type:	
									trone	
									Duc-2003	
Proposed Project Description:] // [DMC-2003 Signature MB 5/14/06	
Install Slant Fin Riello Hea	ating Syste	em								
					PEDESTRIAN ACTIVITIES DISTRICT (R.A.D.)	' /	
					Action: Approved Approved v				/Conditions	Denied
					G:				Date:	
	In				Signa				Date:	
Permit Taken By: lmd	_ I	oplied For: 1/2008				Zoning	g Approva	al		
			Sne	cial Zone or Revi	ws	Zoni	ng Appeal		Historic Pres	servation
1. This permit application		-	l '		. 113					
Applicant(s) from meeting application Federal Rules.		able State and Shoreland		☐ Variance			7	Not in District or Landma		
							Y			
2. Building permits do no		olumbing,	Wetland		Miscellaneous		1	Does Not Require Review		
septic or electrical work.			Flood Zone Conditional Use		and Ha	Paguiros Paujour				
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			ubdivision 1	☐ Interpretation			Approved			
permit and stop all wor			A .							
1			Site Plan		Approved			Approved w/Conditions		
										00111110110
PERMIT ISSUED MAY 1 5 2003			Maj Minor MM		Denied		ľ	Denied 0		
					<u> </u>					
			Date	n/25/14/	08 Date:				Date: Syrul	3
			H				, <u> </u>		//\	
CITY OF	PORTU	AND								
			C	ERTIFICATI	ON					
I hereby certify that I am the	owner of	record of the na	med pro	operty, or that the	ne pro	posed work i	s authorized	by the	owner of reco	rd and that
I have been authorized by the	e owner to	make this appl	ication a	as his authorize	d agen	t and I agree	to conform	to all a	pplicable laws	of this
jurisdiction. In addition, if a	permit fo	r work describe	d in the	application is i	ssued,	I certify that	the code of	ficial's a	authorized rep	resentative
shall have the authority to ensuch permit.	ner an are	as covered by su	icn pern	nit at any reaso	nable I	nour to entor	ce the prov	ision of	tne code(s) ap	plicable to
onen permit.										
SIGNATURE OF APPLICANT			ADDRESS				DATE	DATE PHO		NE
RESPONSIBLE PERSON IN CHA	ARGE OF W	ORK. TITLE					DATE	-	PHC	DNE
		. ,							- 110	

•		ilding or Use Permit (207) 874-8703, Fax: (20	07) 874-8716	Permit No: 08-0506	Date Applied For: 05/14/2008	CBL: 339 D009001
Location of Construction:		Owner Name:		Owner Address:	<u> </u>	Phone:
35 BARCLAY AVE		MADD LLC		543 ALLEN AVE		
Business Name:		Contractor Name:		Contractor Address:	Phone	
		Mark O'Brien Plumbing	& Heating	9 Broadway Drive	Cumberland	(207) 829-5158
Lessee/Buyer's Name		Phone:]	Permit Type: HVAC		
Single Family Home -	Install Stant	Fin Riello Heating System	instal	Slant Fin Riello F	leating System	
Dept: Zoning Note:	Status:	Approved	Reviewer:	Jeanine Bourke	Approval I	Oate: 05/14/2008 Ok to Issue: ✓
Dept: Building Note: 1) Installation shall c		Approved with Conditions 003 International Mechanica	Reviewer:		Approval I	Ok to Issue: 🗹



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

	i
	1

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

Name and address of gwner of appliance Installer's name and address Mark G Brown Relations Plant Control Cont	The undersigned hereby applies for a permit to instact accordance with the Laws of Maine, the Building Code of the	all the following heating, cooking or power equipment in the City of Portland, and the following specifications:				
Name and address of gwner of appliance Installer's name and address Walk G Risk	Location / CBL	Use of Building Sector 19m Date				
Location of appliance: Basement Floor Masonry Lined Factory built Type of Fuel: Gas Coil Solid Solid Factory Built U.L. Listing # Type of Fuel: Type of Fuel: Type of Fuel: Direct Vegt Type Statutes U.L. Approved Yes No Roll Rol		y Ave				
Type of Chimney: Masonry Lined Factory built Metal Factory Built U.L. Listing # Appliance Name: Standard	of Beard more De C	um non refresephone 2328797				
Masonry Lined Factory built Metal Factory Built U.L. Listing # Direct Veat Type of Fuel: Direct Veat Type of Fuel Tank Oil Gas						
Type of Fuel: Gas Oil Solid Factory built Gas Oil Solid Factory Built U.L. Listing # Appliance Name: S/9 / - C / A						
Appliance Name: Gas						
Appliance Name: S/9 ~ (- C) ~ (Type of Fuel:	☐ Metal				
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No	☐ Gas Oil ☐ Solid	Factory Built U.L. Listing #				
Approved Approved with Conditions Fire: Bldg.: Bldg.: Inspector's Signature Date Approved	Will appliance be installed in accordance with the manufacture's installation instructions? Yes No No IF NO Explain: Master Plumber # 2.22/ Solid Fuel # Oil # Gas #	Size of Tank 2 2 5 Number of Tanks (1) or re Distance from Tank to Center of Flame feet.				
Fire: Bldg.: See attached letter or requirement Inspector's Signature Date Approved	Annroyed					
Ele.: Bldg.: Inspector's Signature Date Approved	- • · · · · · · · · · · · · · · · · · ·					
Bldg.: Date Approved		See attached letter of requirement				
		Inspector's Signature Date Approved				