

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

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

|                              |                    |                            |
|------------------------------|--------------------|----------------------------|
| <b>Permit No:</b><br>05-1731 | <b>Issue Date:</b> | <b>CBL:</b><br>339 J055001 |
|------------------------------|--------------------|----------------------------|

|  |  |                                       |               |
|--|--|---------------------------------------|---------------|
| <b>Location of Construction:</b><br>90 FARRAGUT ST | <b>Owner Name:</b><br>MARTIN JEFFREY Y & KIRSTEN V | <b>Owner Address:</b><br>131 HOPE AVE | <b>Phone:</b> |
| <b>Business Name:</b>                              | <b>Contractor Name:</b>                            | <b>Contractor Address:</b>            | <b>Phone:</b> |
| <b>Lessee/Buyer's Name</b>                         | <b>Phone:</b>                                      | <b>Permit Type:</b><br>HVAC           | <b>Zone:</b>  |

|   |   |  |                                    |  |
|---|---|--|------------------------------------|--|
| <b>Past Use:</b><br>single Family Home  | <b>Proposed Use:</b><br>Single Family Home/ install an Viessman Boiler in basement w/ 275 Gallon oil tank | <b>Permit Fee:</b><br>\$93.00  | <b>Cost of Work:</b><br>\$7,500.00 | <b>CEO District:</b><br>5                        |
|   |   | <b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied  |                                    | <b>INSPECTION:</b><br>Use Group _____ Type _____ |
| <b>Proposed Project Description:</b><br>install an Viessman Boiler in basement w/ 275 Gallon oil tank |   | Signature: _____ Signature: _____  |                                    |  |
|   |   | <b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b><br>Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied<br>Signature: _____ Date: _____ |                                    |  |

|                                    |  |                        |  |
|------------------------------------|--|------------------------|--|
| <b>Permit Taken By:</b><br>ldobson | <b>Date Applied For:</b><br>11/30/2005 | <b>Zoning Approval</b> |  |
|------------------------------------|--|------------------------|--|

|  |  |   |  |
|--|--|---|--|
| 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.<br><br>2. Building permits do not include plumbing, septic or electrical work.<br><br>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.. | <b>Special Zone or Reviews</b><br><input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zon<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br>Ma <input type="checkbox"/> Mino <input type="checkbox"/> M <input type="checkbox"/> | <b>Zoning Appeal</b><br><input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Us<br><input type="checkbox"/> Interpretati<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied | <b>Historic Preservation</b><br><input type="checkbox"/> Not in District or Landma<br><input type="checkbox"/> Does Not Require Revie<br><input type="checkbox"/> Requires Review<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Condition<br><input type="checkbox"/> Denied |
|  | Date: _____  | Date: _____   | Date: _____  |

**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.

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SIGNATURE OF APPLICAN \_\_\_\_\_ ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_ PHO \_\_\_\_\_

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT \_\_\_\_\_ DATE \_\_\_\_\_ PHO \_\_\_\_\_

|  |  |                                       |               |
|--|--|---------------------------------------|---------------|
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| <b>Business Name:</b>                              | <b>Contractor Name:</b>                            | <b>Contractor Address:</b>            | <b>Phone</b>  |
| <b>Lessee/Buyer's Name</b>                         | <b>Phone:</b>                                      | <b>Permit Type:</b><br>HVAC           | <b>Zone:</b>  |

|                       |                        |                  |                       |  |
|-----------------------|------------------------|------------------|-----------------------|--|
| <b>Dept:</b> Zoning   | <b>Status:</b> Pending | <b>Reviewer:</b> | <b>Approval Date:</b> | <b>Ok to Issue:</b> <input type="checkbox"/> |
| <b>Note:</b>          |                        |                  |                       |  |
| <b>Dept:</b> Building | <b>Status:</b> Pending | <b>Reviewer:</b> | <b>Approval Date:</b> | <b>Ok to Issue:</b> <input type="checkbox"/> |
| <b>Note:</b>          |                        |                  |                       |  |

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SIGNATURE OF APPLICAN

ADDRESS

DATE

PHO

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED  
 NOV 30 2005  
 CITY OF PORTLAND  
 05-1731

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 90 Farrigent 339JS Use of Building SFH Date 11-29-05  
 Name and address of owner of appliance JEFF MARTIN  
131 Hojze Pointe ME 04103  
 Installer's name and address Gabriel Plumbing & Heating LLC PO Box 1872  
Gray Me 04039 Telephone 650 8984

### Location of appliance:

- Basement  Floor  
 Attic  Roof

### Type of Fuel:

- Gas  Oil  Solid

Appliance Name: VIOSMANN

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 # \_\_\_\_\_  
 Solid Fuel # \_\_\_\_\_  
 Oil # 05579  
 Gas # \_\_\_\_\_  
 Other \_\_\_\_\_

### Type of Chimney:

- Masonry Lined  
 Factory built \_\_\_\_\_  
 Metal  
 Factory Built U.L. Listing # \_\_\_\_\_  
 Direct Vent  
 Type \_\_\_\_\_ UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil  
 Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame over 5 feet.

Cost of Work: \$ 7500-

Permit Fee: \$ 93

### Approved

Fire: \_\_\_\_\_  
 Ele.: \_\_\_\_\_  
 Bldg.: \_\_\_\_\_

### Approved with Conditions

- See attached letter or requirement

Inspector's Signature \_\_\_\_\_

Date Approved \_\_\_\_\_

Signature of Installer [Signature]