

City of Portland, Maine - Building or Use Permit Application

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

Permit No:	Issue Date:	CBL:
06-1631	PERMIT ISSUED	341 G021001

Location of Construction: 2 CARRIAGE LN	Owner Name: DA BRACKETT & COMPANY IN	Owner Address: 84 COUNTRY LN	Phone:
Business Name:	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Dwellings	Zone: R-5

Past Use: Duplex	Proposed Use: Duplex - install 1 500 Gallon propane tank	Permit Fee: \$35.00	Cost of Work: \$2,750.00	CEO District: 5
Proposed Project Description: install 1 500 Gallon propane tank		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB IRC 2003	
		Signature:	Signature: Jm 11/13/06	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 11/07/2006	Zoning Approval		
<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>		Special Zone or Reviews <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: 11/9/06	Zoning Appeal <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:	Historic Preservation <input checked="" 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:

Scanned

CERTIFICATION

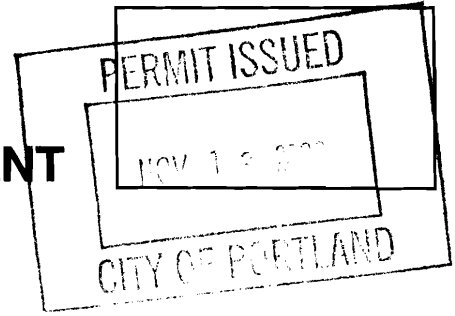
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



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 341-6-21 Use of Building RESIDENTIAL Date 11-7-06
 Name and address of owner of appliance DWIGHT BRACKETT
2A & 2B CARRIAGE LANE
 Installer's name and address DEAD RIVER COMPANY
PO BOX 467 SCARBOROUGH, ME 04074 Telephone 883-9515

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name:

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 # _____
- Gas # 1149
- Other _____

Type of Chimney:

- Masonry Lined
Factory built _____
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____

Type of Fuel Tank

- Oil
- Gas

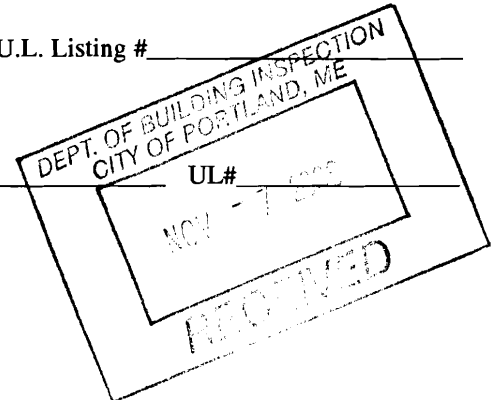
Size of Tank 500 GALLON

Number of Tanks 1

Distance from Tank to Center of Flame + 30 feet.

Cost of Work: \$ 2750.00

Permit Fee: \$ _____



Approved

Fire: _____
 Ele.: _____
 Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer DEAD RIVER COMPANY BY [Signature] Inspector's Signature _____ Date Approved _____