City of Portland, Maine - 389 Congress Street, 04101			<u> </u>	mit No: 06-1829	Issue Date:	CBL : 341 H0	18001
Location of Construction:	Owner Name:		Owne	r Address:		Phone:	
86 RUBY LN	DA BRACKE	TT & COMPANY IN	1 84 C	OUNTRYL	N		
Business Name:	Contractor Name	:	Contra	actor Address:		Phone	
	Dead River Co	ompany	PO I	Box 467 Scar	borough	20788395	15
Lessee/Buyer's Name	Phone:			t Type: ks - Dwelling	gs		Zone:
Past Use:	Proposed Use:		Perm	it Fee:	Cost of Work:	CEO District:	1
Single Family Home	Single Family	Home - install a 500		\$35.00	\$1,000.00	5	
	Gallon Tank		FIRE	DEPT:	Approved INSI	PECTION:	
					Denied Use	Group: £-3	Type: 58
	originalh	1045epermit + 06-1222				RC-20	23 8
Proposed Project Description:		t 1112.2.7				NAM	
install a 500 Gallon Tank	, ,		Signa			ature: 4 37 (M-
			PEDE	STRIAN ACT	IVITIES DISTRICT	Г (P.A.D f)	
			Actio	n: Appro	ved Approved	w/Conditions	Denied
			Signa	ture:		Date:	
Permit Taken By:	Date Applied For:			Zoning	g Approval		
ldobson	12/27/2006						•
1. This permit application do	es not preclude the	Special Zone or Reviews		s Zoning Appeal		Historic Preservation	
Applicant(s) from meeting Federal Rules.	applicable State and	Shoreland				Tot in District or Landmark	
2. Building permits do not indexe septic or electrical work.	clude plumbing,	Wetland		Miscellaneous		Does Not Require Review	
3. Building permits are void i within six (6) months of the		Flood Zone		Conditional Use		Requires Review	
False information may invalidate a building permit and stop all work		Subdivision		Interpretation		Approved	
		Site Plan		Approv	ed	Approved w/	Conditions
			M 🗌	Denied		Denied	\bigcirc
		Date: 12/27/U		Date:		Date:	\geq

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

City of Portland, Maine - Bui	lding or Use Permit	t	Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel:	(207) 874-8703, Fax: (207) 874-8716	06-1829	12/27/2006	341 H018001
Location of Construction:	Owner Name:		Owner Address:		Phone:
86 RUBY LN	DA BRACKETT & C	OMPANY IN	84 COUNTRY LN		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Dead River Company		PO Box 467 Scarb	orough	(207) 883-9515
Lessee/Buyer's Name	Phone:		Permit Type:		
			Tanks - Dwellings		
Proposed Use:		Propose	ed Project Description:		
Single Family Home - install a 500 C	Gallon Tank	install	a 500 Gallon Tank		
Dept: Zoning Status:	Approved	Reviewer	Marge Schmucka	l Approval D	ate: 12/27/2006
Note:					Ok to Issue:
Dept: Building Status:	Approved with Condition	s Reviewer :	Chris Hanson	Approval D	ate: 01/09/2007
Note:					Ok to Issue:
1) The installation must comply wit	h the State of Maine Gas	Regulations.			

Comments:

12/27/2006-mes: original house permit #06-1222



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 4/ - H - 18	Use of Building Date $12-37.06$
Name and address of owner of appliance DW 6141 BIACIA	đł
	CRILAND
13 PLOBENT HILL' RD SCARBONEVEN,	ME
Location of appliance:	Type of Chimney:
BasementFloor	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 UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type of Fuel Tank Gas
The Type of License of Installer: Image: Master Plumber # Image: Solid Fuel # Image: Solid Fuel # Image: Oil # Image: Solid Fuel #	Size of Tank $1 - 5 collipsi qAuctive Number of Tanks 1Distance from Tank to Center of Flame \frac{+50}{-} feet.Cost of Work: \frac{-0}{-}Permit Fee: \frac{35}{-}$
Approved	Approved with Conditions
Fire:	\Box See attached letter or requirement
Ele.: Bldg.:	Inspector's Signature Date Approved
Signature of Installer DEAD RIVER GAMPANY	& which N

White - Inspection

Yellow - File

Pink	-	Applicant's	Go
*		ripphound 5	00

PROPASED 50 GLON NIG PROFINE TANK + PROPERTY LINE +101 10^{T} +101 PROPERTY LINE PROPERTY LINE DWIGHT BZICKRIT LOT #5 RUBY LANE PONTIAND RUBY LANE

7,4119

Form # P 01

ELECTRICAL PERMIT City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications: A .

Date 2 CBL# 401-A-5

	CBL# <u>701-A-S</u>
LOCATION: North Port Plazing	МЕТЕR МАҚЕ,& #
CMP ACCOUNT #	OWNER LLBCar
CMP ACCOUNT #	PHONE #

						тот	TAL EACH	FEE
OUTLETS	25	Receptacles		Switches		Smoke Detector	.20	5
			<u> </u>			2		
FIXTURES		Incandescent	30	Fluorescent		Strips	.20	6-
		Quarkaad					15.00	-
SERVICES		Overhead		Underground		TTL AMPS <800	15.00	
		Overhead		Underground		>800	25.00	
Temporary Service		Overhead		Underground		TTL AMPS	25.00	
							25.00	
METERS		(number of)					1.00	
MOTORS		(number of)					2.00	
RESID/COM		Electric units					1.00	
HEATING		oil/gas units		Interior		Exterior	5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens	2.00	
		Insta-Hot		Water heaters	;	Fans	2.00	
		Dryers		Disposals		Dishwasher	2.00	
		Compactors		Spa		Washing Machine	2.00	
		Others (denote)		-			2.00	
MISC. (number of)		Air Cond/win					3.00	
	2	Air Cond/cent				Pools	10.00	20
	<u> </u>	HVAC		EMS		Thermostar	5.00	~~~
		Signs					\$10.00	
		Alarms/res				158 8 70.	\$ 5.00	
	_	Alarms/com					7 15.00	
		Heavy Duty(CRKT)					2.00	
		Circus/Carnv					25.00	
		Alterations			-	1 100	5.00	
		Fire Repairs			\leftarrow	1851	15.00	
		E Lights					1.00	
		E Generators					20.00	
			\sim					
PANELS	(1)	Service	$\left(\right)$	Remote		Main 🗸	4.00	4-
TRANSFORMER	6	0-25 Kva	0				5.00	
i	(D)	25-200 Kva					8.00	8-
		Over 200 Kva					10.00	
						TOTAL AMOUNT DUE		
		MINIMUM FEE/CO	MME	RCIAL 55.00		MINIMUM FEE 45.	00	55-
ONTRACTORS NAM	NE]		<u> </u>	Lorough		_MASTER LIC. # MCC	0017 5	71
ELEPHONE 88	3~0	1595	<u> </u>				X	F1893
GIGNATURE OF CON	ITRA		ر	\mathcal{N}				101-

White Copy - Office •

Yellow Copy - Applicant

Form # P 01

ELECTRICAL PERMIT City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the City of Portland Electrical Ordinance, National Electrical Code and the following specifications:

Date <u>12-27-06</u> Permit # <u>5164</u> CBL# <u>344-6-3</u>

LOCATION: 18 BREWSTER ST	_ METER MAKE & #
CMP ACCOUNT #	OWNER MCLAUGHLINI
TENANT	_PHONE #

					то	TAL EACH	FEE
OUTLETS	Ø	Receptacles	Switches	7	Smoke Detector	.20	3,40
FIXTURES		Incandescent	Fluorescent		Strips	.20	
FIATURES		Incandescent	Fluorescent			.20	
SERVICES	1	Overhead	Underground		TTL AMPS <800	15.00	1500
	/	Overhead	Underground		>800	25.00	15-
Temporary Service		Overhead	Underground		TTL AMPS	25.00	
· · ·						25.00	
METERS	\mathbf{T}	(number of)				1.00	100
MOTORS		(number of)				2.00	_/
RESID/COM		Electric units				1.00	
HEATING		oil/gas units	Interior		Exterior	5.00	
APPLIANCES		Ranges	Cook Tops		Wall Ovens	2.00	
		Insta-Hot	Water heaters	\$	Fans	2.00	
		Dryers	Disposals		Dishwasher	2.00	
		Compactors	Spa		Washing Machine	8,00	
		Others (denote)				2.00	
MISC. (number of)		Air Cond/win				3.00	
,		Air Cond/cent			Pools And	5 10.00	\rightarrow
		HVAC	EMS		Thermostat	5,00	/
		Signs				10.00/	
		Alarms/res				15.00	
<u> </u>		Alarms/com			ART C	15.00	
		Heavy Duty(CRKT)				2.00	
		Circus/Carnv				~ /	
		Alterations				5.00	
		Fire Repairs				15.00	
		E Lights			·	1.00	
		E Generators				20.00	
PANELS		Service	Remote		Main	4.00	1,00
TRANSFORMER		0-25 Kva		-/-		5.00	400
		25-200 Kva				8.00	
		Over 200 Kva				10.00	
					TOTAL AMOUNT DUE		77 10
		MINIMUM FEE/COM	MERCIAL 55.00			.00	23,40
DDRESS <u>Mo Box</u> ELEPHONE	<u> </u>	ANIE FLYNN 82 SACO ME	282-8896 332-1497		_MASTER LIC. # <u>929</u> _ LIMITED LIC. #	I-ME	lat
IGNATURE OF CON	TRA	CTOR <u>au</u>	UN			0	

White Copy - Office -

Yellow Copy - Applicant