389 Congress S		_					01-1096	issue Date		342 AC	014001	
389 Congress Street, 04101 Tel: (207) 874-8703 Location of Construction: Owner Name:			7,147. (207) 074 071			Owner Address:			Phone:			
31 Maggie Ln W A One						Po Box 10127			n/a			
			or Name	2:			Contractor Address:			Phone		
n/a Gros		Grosso	Grosso, Vincent			P.	P.O. Box 343 Gray Permit Type:			2076576	2076576088	
Lessee/Buyer's Name Phone:						Per				Zone:		
n/a n/a			HVAC									
Past Use: Multi Fam. 2 Unit Proposed Use: Same: Install 1			Heating System		Pe	rmit Fee:	Cost of Wo	Cost of Work: CI				
					L	_		\$0.00	1			
						FI	RE DEPT:	Approved Denied	Use G	roup:	Туре:	
Proposed Project De	_							11.	K	toll		
Install Heating S	ystem					Signature:						
						PEDESTRIAN ACTIVITIES DESPRICE						
						Ac	tion: App	roved Ap	proved w	/Conditions	Denied	
						Sig	gnature:			Date:		
Permit Taken By:		Date Applied For	:				Zoning Approval					
cih		09/05/2001		<u> </u>								
1. This permit application does not preclude the				Special Zone or Reviews Shoreland		ews	Zoning Appeal			Historic Preservation		
Applicant(s) from meeting applicable State an Federal Rules.		te and	☐ Variance				Not in District or Landmar					
	 Building permits do not include plumbing, septic or electrical work. 		Wetland		Misce	Miscellaneous		☐ Does Not Require Review				
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		Cond	Conditional Use		Requires Review				
			☐ Subdivision		☐ Interp	☐ Interpretation		Approved				
				☐ Sin	te Plan		Appro	oved		Approved w	/Conditions	
			Maj Minor MM [1 🗌	Denied			Denied			
			Date:		Date:		r	Date:				
I hereby certify th I have been autho jurisdiction. In ac shall have the auth such permit.	rized by the oldition, if a pe	owner to make the ermit for work d	iis appl escribe	med pro ication a d in the	as his authorize application is	he produced age	ent and I agre d, I certify tha	e to conform at the code of	to all a	pplicable laws authorized rep	of this resentative	
SIGNATURE OF AF	PLICANT			·	ADDRES	25		DATE	,	DITE	NNE	
					ADDRE	J		DATE	•	PHC	ME	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



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 in	astall the following heating, cooking or power equipment in
accordance with the Laws of Maine, the Building Code of	
Location Maggie Lane #22	Use of Building Date9-5-01_
Name and address of owner of appliance	f
Installer's name and address VINGNT GAGSSO J P. O. BOX 343 GMY ME 04	12 P+H 039 Telephone 657-6088
Location of appliance:	Type of Chimney:
Basement	Masonry Lined
□ Attic □ Roof	Factory built
	ractory bunt
Type of Fuel:	☐ Metal
☐ Gas 💆 Oil ☐ Solid	Factory Built U.L. Listing #
Appliance Name: Bonnam	_ □ Direct Vent
U.L. Approved Yes \ \ \ No	Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? Yes \(\bar{\text{\text{\$\sigma}}} \) No	oil /
, (3	Gas
IF NO Explain:	22501
	Size of Tank 275 GAL
The Type of Lieense of Installer: Master Plumber # 07427	Number of Tanks
Solid Fuel #	20
Oil# Needs Licens	Distance from Tank to Center of Flame feet.
Gas#Needs Licens	7
Other	´
	30,
Approved	Approved with Conditions
Fire:	☐ See attached letter or requirement
Ele.:	/
Bldg.:	
Signature of Installer	X

Pink - Applicant's Gold - Assessor's Copy

White - Inspection

Yellow - File



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

CED ! !

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.	342 A 014
	ll the following heating, cooking or power equipment in
accordance with the Laws of Maine, the Building Code of th	
2.0~	
Location Maggic Lance #22 Use	of Building Date _ 9-5.01
Location Maggie Lane #22 Use Name and address of owner of appliance Jin wolf	
Installer's name and address VINUNT GROSSO JR	D+H
P.O. Box 343 Gry ME 0403	Telephone 657-6488
Location of appliance:	Type of Chimney:
Basement Floor	Masonry Lined
☐ Attic ☐ Roof	Factory built
	Tuotory built
Type of Fuel:	☐ Metal
☐ Gas 🙀 Øil ☐ Solid	
	Factory Built U.L. Listing #
Appliance Name: Bunkan	CD Division Maria
	Direct Vent
U.L. Approved Yes \ \ No	Type UL#
Will and in the installed in accordance with the survey of	
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? Yes D No	Oil
TENO E 11	Gas
IF NO Explain:	2000
· ,	Size of Tank
	, /
The Type of License of Installer: Master Plumber # / 07427	Number of Tanks
□ Solid Fuel #	Distance from Tank to Center of Flame20 feet.
Gas#Needs License	
· ·	· .
☐ Other	30,0
Approved	Approved with Conditions
Fire:	☐ See attached letter or requirement
Ele.:	— See attached letter of requirement
Plda ·	

White - Inspection

Signature of Installer

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy