City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716							06-0012	Issue Date:		CBL:	0001	
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		00-0012			342 B02	8001	
Location of Construction: 52 RUBY LN			Owner Name: OAK RIDGE DEVELOPMENT INC			Owner Address: PO BOX 10127			Phone:			
Business Name:			Contractor Name: Steve Faucher				Contractor Address: 134 South Street Biddeford			Phone 207284453	Phone 2072844532	
Lessee/Buyer's Name			Phone:			Permit Type: HVAC					Zone:	
Single Family Home S			Proposed Use: Single Family			Perr	mit Fee: \$66.00	Cost of Wo	ork: 0			
			Trianco Newport Oil Fired Boiler in Basement w/ 275 gallon tank		Approved			INSPECTION: Use Group Type				
Proposed Project Description: install a Trianco Newport Oil Fired Boiler in Basemen					w/ 275 gallon tank					Signature:		
						Action Approved Approved Approved				ed w/Condition Denied		
				Signature:				Date:				
Permit Taken By: Date Applied I 12/29/2005				Zoning Approval								
1.	This permit application	does not	preclude the	Spec	Special Zone or Revie		ws Zoning Appeal			Historic Preservation		
Applicant(s) from meeting applic Federal Rules.		able State and	☐ Si	noreland		☐ Variance			Not in District or Landn			
2.	Building permits do not septic or electrical work	lumbing,	Wetland			Miscellaneou			☐ Does Not Require Revie			
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 Zon		Conditional Us			Requires Review			
			a building	☐ Subdivision ☐ Site Plan			☐ Interpretati			Approved		
							Approved			Approved w/Condition		
			Ma [	Mino M		Denied			Denied			
				Date:			Date:			Date:		
I ha juris shal	reby certify that I am the ve been authorized by the sdiction. In addition, if a Il have the authority to er uch permit.	e owner to permit for	o make this appli r work described	med procession and the second	as his authorize application is is	he pro d agen sued, l	nt and I agree to I certify that the	to conform ne code offi	to all app cial's aut	olicable laws of horized repres	of this sentative	
SIG	NATURE OF APPLICAN				ADDRES	SS		DATI	 E	P	НО	

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Lessee/Buyer's Name	Phone:		Permit Type: HVAC	1 20,2000	Zone:	
Dept: Zoning Status Note:	: Pending	Reviewe	-: Ap	proval Date: Ok to Issue	val Date: Ok to Issue:	
Dept: Building Status Note:	: Pending	Reviewe	∵: <b>А</b> р	proval Date: Ok to Issud	: Ok to Issue:	
I hereby certify that I am the owne I have been authorized by the owne jurisdiction. In addition, if a permi shall have the authority to enter all to such permit.	er to make this application to the control of the c	on as his authorize ne application is is	he proposed work is authorized d agent and I agree to conform t sued, I certify that the code office	o all applicable laws or cial's authorized repres	of this sentative	
SIGNATURE OF APPLICAN		ADDRES	S DATE	PI	HO	