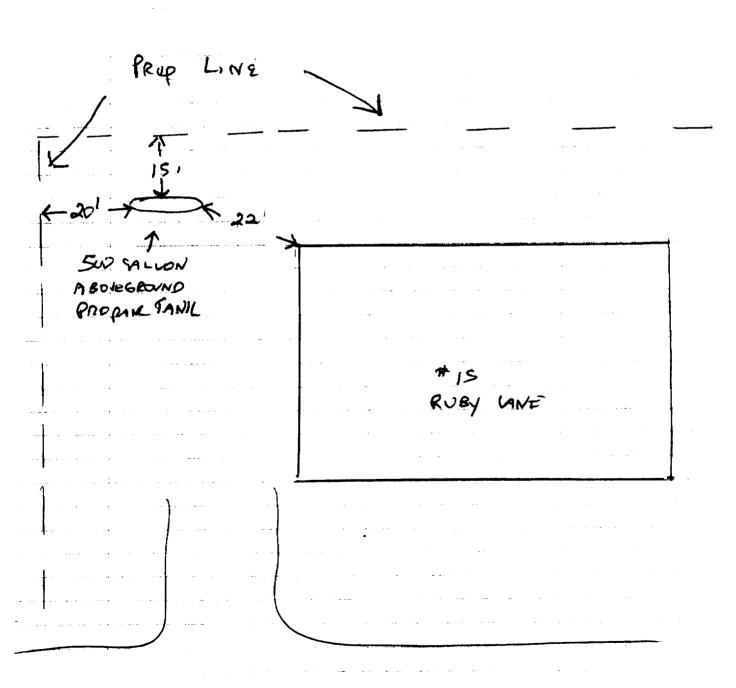
City of Portland,	Maine - Bui	lding or Use I	Permi	t Application	n Per	rmit No:]]	ssue Date	AIT I	CC PPh		٦
389 Congress Street,	04101 Tel: ((207) 874-8703	, Fax:	(207) 874-871	6	06-0545			Y 1 1 1	342	B034	4 0 01
Location of Construction:		Owner Name:			Owner	r Address:				Phone:	T	T
		TT & COMPANY IN 84		84 C	OUNTRY	LN	API	7 2 1	2003			
Business Name:		Contractor Name: Dead River Company			Contra	actor Addre	s:	_		Phone	 	
					PO Box 467 Scarboraughy OF				r no	20788	3951	.5
		Phone:			Permit Type:					THAN		Zone:
		1			HV	AC						
Proposed Use:		Proposed Use:			Permit Fee: Cost of Works		k:	CEO Distri	ct:			
Single Family Sing		Single Family	Single Family set 1) 500 gal above			İ '				ı	ľ	
		ground tank			FIRE DEPT: Approved INS				INSPE	PECTION:		
						DLI II		pproved enied	Use Gr	oup: /	7	Гуре:
						_		_	ļ	U_{7}	.79	MK
					70	NE	PA	58		4/2	EX.	06
Proposed Project Descript	ion:				1					779	7/	7
1) 500 gal above ground tank					Signature Seco (, S			Signatu	gnature M. Chuze			
					'EDESTRIAN ACTIVITIES DISTRIC				RICT (T (P.A.D.)		
					Action Approved Approved				roved w	d w/Conditions Denied		
											_	
			,		Signat	ture:				Date:		
'ermit Taken By:		Applied For:				Zoning Approval						
dmartin	04/20	0/2006	a	. 17						TT'-4	D	
1.	1.		Spe	ecial Zone or Revie	ews	ws Zoning Appeal				Historic Preservation		
			SI	noreland	☐ Variance				Not in District or Landma			
			_									
2.		Wetland			Miscellaneous				Does Not Require Review			
3.		Flood Zone			Conditional Use				Requires Review			
		 	ıbdivision	Interpretation					Approved			
				ibuivision						Approved		
			☐ Si	te Plan	Approved					Approved w/Conditions		
			51	te i ian		l L Mppi	oved			Арргоче	u w/Cc	Julions
			 Мај [☐ Minor ☐ MM	☐ Denied				Denied			
					L_	🗀 =						
			late			Date:				ate:		
			Tate			Jaic.			L´	arc.		
			(CERTIFICATI	ON							
I hereby certify that I a	m the owner of	record of the na	med pro	operty, or that th	ne prop	osed work	is au	thorized	by the	owner of r	ecord	and that
I have been authorized	by the owner to	o make this appli	cation	as his authorized	d agent	t and I agre	ee to c	onform	to all a _l	pplicable la	aws o	f this
jurisdiction. In additio												
shall have the authority such permit.	to enter all are	eas covered by su	ich perr	nit at any reasoi	nable h	our to enfo	orce 1	the provi	sion of	the code(s) appl	licable to
saon permit.												
SIGNATURE OF APPLICANT			ADDRESS			DATE				PHONE		
RESPONSIBLE PERSON I	N CHARGE OF #	ORK TITI E						DATE			PHON	F
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE								DAIL				_

15 RVBY GNE LOT #16

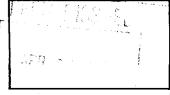
DWIGHT BIZACKOTT



RUBY LANE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



342 B 034

To the INSPECTOR	OF BUILDINGS	, PORTLAND, ME.
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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 10+16 Ruby Lane (75) use of Building residential Date 4-11-06 Name and address of owner of appliance Dwight Bracket							
Installer's name and address Decod River Co. 73 Pla	easant Hill Rd Scarborough ME 04074 Telephone 207-883-9515						
Location of appliance: Basement Floor Attic Roof	Type of Chimney: Masonry Lined Factory built						
Type of Fuel: Gas Gil Solid	☐ Metal Factory Built U.L. Listing #						
U.L. Approved ☐ Yes ☐ No	☐ Direct Vent Type uL#						
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No No Explain:	Type of Fuel Tank Oil Gas Size of Tank 500 above ground						
The Type of License of Installer: Master Plumber #	Number of Tanks feet. Distance from Tank to Center of Flame feet. Cost of Work: \$						
Approved	Approved with Conditions See attached letter or requirement						
Signature of Installer Qlad Ques Co. by Jan	Inspector's Signature Date Approved						

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy