City of Portland, N	Maine - Bui	lding or Use	Permit Application	on Permit No:	Issue Date:	CBL:		
389 Congress Street,		_				342 B	053001	
		Owner Name:		Owner Address:		Phone:		
		DRESSER DA	ANA W	12 WHISPERS WAY				
Business Name:		Contractor Name	e:	Contractor Addres	s:	Phone		
		Quality Insula	ition	65 Downeast D	rive Yarmouth	2078467745		
Lessee/Buyer's Name		Phone:		Permit Type:			Zone:	
				HVAC			12-5	
Past Use:		Proposed Use:		Permit Fee:	Cost of Work:	CEO District:		
Residential / Single Family		1 .	Single Family install	\$40.00	\$1,460.0	1		
		Residential / Single Family install Lennox Direct Vent Fireplace			77.57.57.57.5			
			· · · · · · · · · · · · · · · · · · ·	2	Approved	co Group: 12	Type: HV	
					Denied	State Gas		
Nicural Smeles	trong, O.	under #	06-0757	/	\mathcal{U}	1-1.1	200	
Proposed Project Description	-144 V	7 0 00 (\dashv / \cup //	′ _	STATE	ja s	
Install Lennox Direct V				Signature:		Crd		
Instant Bonnox Birect	em i nepiaee				TIVITIES DISTRIC	CT (P A II)		
				BBBSTRINIVAC)	
				Action: Appr	oved Approve	ed w/Conditions	Denled	
				Signature:		Date:		
Permit Taken By:	Date A	pplied For:						
dmartin	1	2/2007		Zoning Approval				
This manage was it was allow			Special Zone or Rev	iews Zoi	ning Appeal	Historic Preservation		
 This permit application does not preclude the Applicant(s) from meeting applicable State a Federal Rules. Building permits do not include plumbing, 		•	l		<u> </u>			
		cable State and Shoreland		Variance		Not in District or Landmark		
		plumbing,	Wetland	[] Misce	Miscellaneous		Does Not Require Review	
septic or electrical work.								
3. Building permits are void if work is not started			Flood Zone	Conditional Use		Requires Review		
within six (6) months of the date of issuance. False information may invalidate a building				Interpretation				
permit and stop all		c a bunding	Subdivision	[_ Interp	retation	Approved		
parisis and a sap and				ļ , ,		1	10 1111	
			Site Plan	Appro	oved	Approved v	v/Conditions	
DE	DEAT ISS	JED						
PERMIT ISSUED			Maj Minor M	Denied		Denied		
			all I	>			<u>_</u>	
			Date: 750	Date:	Date:		Date:	
			•	/				
		71.63.13						
l CIT'	(1,- 61)							
			CERTIFICAT	ION				
I hereby certify that I an								
I have been authorized by								
jurisdiction. In addition shall have the authority								
such permit.	to enter an are	Las covered by Si	uch permit at any reast	Shabic hour to cillo	ree the provision	tor the code(s) a	ppricable to	
p								
						- <u> </u>		
SIGNATURE OF APPLICA	NT		ADDRE	ADDRESS		PH	ONE	
DESCONCIDI E DEDSON O	J CHARCE OF Y	VODV TITLE			DATE	DIT	ONE	
RESPONSIBLE PERSON IN	Y CHARGE OF V	YUKK, HILE			DATE	PH	ONE	

City of Portland, M	laine - Bui	lding or Use Permit	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 0	04101 Tel: ((207) 874-8703, Fax: (207) (207) (207) (207) (207)	207) 874-8716	07-0121	02/02/2007	342 B053001	
Location of Construction: Owner Name:			0	Owner Address:		Phone:	
17 RUBY LN DRESSER		DRESSER DANA W	RESSER DANA W 1		12 WHISPERS WAY		
Business Name:		Contractor Name:		Contractor Address:		Phone	
		Quality Insulation	16	65 Downeast Driv	e Yarmouth	(207) 846-7745	
Lessee/Buyer's Name		Phone:	P	Permit Type: HVAC			
Proposed Use:			Proposed	Project Description:			
Dept: Zoning	Status: A	Approved	Reviewer:	Marge Schmucka	al Approval D	Date: 02/07/2007	
Note:						Ok to Issue:	
Dept: Building Note:		Approved with Conditions		Tammy Munson	Approval D	Oate: 02/09/2007 Ok to Issue: ✓	
1) The installation mus	t comply with	h the State of Maine Gas	Regulations.				



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

342 B C53

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 17 RUBY LANE Name and address of owner of appliance FLOYD BROWN	Use of Building Hame Date 21167			
Installer's name and address QUALITY INSCIPATION YARMOUTH, ME: 54096	CoINC			
Location of appliance: Basement Roof	Type of Chimney: Masonry Lined Factory built			
Type of Fuel: Gas Oil Solid	☐ Metal Factory Built U.L. Listing #			
Appliance Name: LENNOX DIRECT VENT FIRE PLACE U.L. Approved Yes \(\text{No INPD 3530 CPM} \)	METAL UL#			
Will appliance be installed in accordance with the manufacture's installation instructions?	Type of Fuel Tank Oil Gas			
IF NO Explain:	Size of Tank			
The Type of License of Installer:	Number of Tanks			
☐ Master Plumber #				
□ Solid Fuel #	Distance from Tank to Center of Flame feet.			
Oil #	Cost of Work: 8 1460.00			
Other	Permit Fee: \$ <u>40.</u>			
Fire: Approved RECEIVA	Approved with Conditions			
Ele.:				
Bldg.:	Inspector's Signature Date Approved			
White - Inspection Yellow - File Pi	nk - Applicant's Gold - Assessor's Copy 125			