

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 05-1650	<b>Issue Date:</b>	<b>CBL:</b> 344 E042001
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<b>Location of Construction:</b> 332 ALLEN AVE	<b>Owner Name:</b> FEENEY THERESA & ROBERT L FE	<b>Owner Address:</b> 334 ALLEN AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Dead River Company	<b>Contractor Address:</b> PO Box 467 Scarborough	<b>Phone</b> 2078839515
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Commercial	<b>Proposed Use:</b> Commercial/ install a replacement boiler - Burnham V83T	<b>Permit Fee:</b> \$75.00	<b>Cost of Work:</b> \$5,200.00	<b>CEO District:</b> 5
		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type	

<b>Proposed Project Description:</b> install a replacement boiler - Burnham V83T	Signature:	Signature:
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied		
Signature:	Date:	

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 11/10/2005	<b>Zoning Approval</b>		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.  2. Building permits do not include plumbing, septic or electrical work.  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..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland  <input type="checkbox"/> Wetland  <input type="checkbox"/> Flood Zon  <input type="checkbox"/> Subdivision  <input type="checkbox"/> Site Plan  Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>  Date:	<b>Zoning Appeal</b> <input type="checkbox"/> Variance  <input type="checkbox"/> Miscellaneous  <input type="checkbox"/> Conditional Us  <input type="checkbox"/> Interpretatio  <input type="checkbox"/> Approved  <input type="checkbox"/> Denied  Date:	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landma  <input type="checkbox"/> Does Not Require Revie  <input type="checkbox"/> Requires Review  <input type="checkbox"/> Approved  <input type="checkbox"/> Approved w/Condition  <input type="checkbox"/> Denied  Date:

**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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

<b>Location of Construction:</b> 332 ALLEN AVE	<b>Owner Name:</b> FEENEY THERESA & ROBERT L FE	<b>Owner Address:</b> 334 ALLEN AVE	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Dead River Company	<b>Contractor Address:</b> PO Box 467 Scarborough	<b>Phone</b> 2078839515
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 11/21/2005
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 11/21/2005
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules			
<b>Dept:</b> Fire	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Cptn Greg Cass	<b>Approval Date:</b> 11/10/2005
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Install to comply with NFPA 31			

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SIGNATURE OF APPLICAN

\_\_\_\_\_  
ADDRESS

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DATE

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PHO

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

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DATE

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