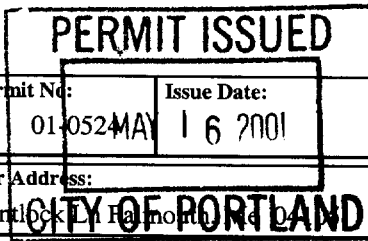


**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716



Permit No: 01-0524	Issue Date: MAY 16 2001	CBL: 347 C038001
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<b>Location of Construction:</b> 22 Mugwhy Ln	<b>Owner Name:</b> Jandie Development Corp	<b>Owner Address:</b> 2 Flintlock Rd Falmouth	<b>Phone:</b> n/a
<b>Business Name:</b> n/a	<b>Contractor Name:</b> CW Baldwin and Sons	<b>Contractor Address:</b> 100 Winn Road Falmouth	<b>Phone:</b> 2077975511
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Single Family	<b>Proposed Use:</b> Same: HVAC	<b>Permit Fee:</b>	<b>Cost of Work:</b> \$0.00	<b>CEO District:</b> 2
<b>Proposed Project Description:</b> Install Heating System		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: A-3 Type: 54 BOCA/mec/93	

Signature: *[Handwritten Signature]*

**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Permit Taken By:</b> cjh	<b>Date Applied For:</b> 05/09/2001	<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 Zone <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 Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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**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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

8/22/01

OK

*JK*

347-C-38

01-0524



FILL IN AND SIGN WITH INK

01-0534  
PERMIT ISSUED  
MAY 16 2001  
CITY OF PORTLAND

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

347 C 038

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 Box 13 Musky Rd Use of Building Res Date 5-9-01

Name and address of owner of appliance Ardy DeRice 0120+14 Musky

Installer's name and address El Baldwin + son Telephone 797-5544  
100 Winn Rd Falmouth

### Location of appliance:

- Basement
- Floor
- Attic
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Bunker

U.L. Approved  Yes  No

Will appliance be installed in accordance with the manufacture's installation instructions?  Yes  No

IF NO Explain: \_\_\_\_\_

### The Type of License of Installer:

- Master Plumber # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # \_\_\_\_\_
- Gas # 1369
- Other \_\_\_\_\_

### Type of Chimney:

Masonry Lined  
Factory built \_\_\_\_\_

Metal  
Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

Size of Tank \_\_\_\_\_

Number of Tanks \_\_\_\_\_

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

\$ 30.00

### Approved

Fire: thy  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

### Approved with Conditions

- See attached letter or requirement

Signature of Installer Neil Bode