City of Portland, Maine	- Building or Use	Permit Applicatio	n Permit No:	Issue Date:	CBL:		
389 Congress Street, 04101				370 B005001			
Location of Construction:					Phone:		
415 PALMER AVE	BURR RAND	OLPH S	415 PALMER A	415 PALMER AVE			
Business Name:	Contractor Name	e:	Contractor Address	:	Phone		
	Down East Er	nergy	172 Main Street	172 Main Street South Portland			
Lessee/Buyer's Name Phone:			Permit Type:	Zone:			
			HVAC				
Past Use:	Proposed Use:		Permit Fee:	CEO District:			
Single family home	Single family	Single family home with 120 gallon		\$0.00	5		
	gas tank		FIRE DEPT:	Approved INSPI	CTION:		
				Denied Use G	roup: L Type:		
			1 . /	7	111.20		
				1	LICHC 1		
Proposed Project Description:				L I			
install 120 gallon tank			Signature:	e. Mal			
	•		PEDESTRIÁN ACT	<b>IVITIES DISTRICT</b>	(P.A.D.)		
			Action: Appro	oved Approved v	v/Conditions 🔲 Denied)		
			Signature:		Date:		
Permit Taken By:	Date Applied For:		Zonin	g Approval			
lmd	01/30/2008		Lonn	5 PPI 01 m			
1. This permit application d	oes not preclude the	Special Zone or Revie	ews Zon	ing Appeal	Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland	🗌 Varian	ce	Not in District or Landma		
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		U Wetland	Miscel	laneous	Does Not Require Review		
3. Building permits are void	if work is not started	Flood Zone	Condit	ional Use	Requires Review		
within six (6) months of t	he date of issuance.						
False information may invalidate a building		subdivision	Interpretation		Approved		
permit and stop all work.	and the second se						
permit and stop all work.	and the second se	Site Plan	Approv	/ed	Approved w/Conditions		
	and the second se	Site Plan	Аррго	/ed	Approved w/Conditions		
permit and stop all work.	SUED	☐ Site Plan Maj ☐ <sub>f</sub> Minor ☐ MM			Approved w/Conditions Denied y		
permit and stop all work.	SUED	Maj Minor MM			Denied /		
permit and stop all work.	SUED						

## 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	
<b>RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE</b>		DATE	PHONE	





## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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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 370 BOO5 - 415 PALMER Name and address of owner of applyance Randy	Use of Building Private Date 189/05 Burr 415 Perfore Due
Installer's name and address Agua first	Every 12 Turnst
South Farthand	Telephone
Location of appliance:	Type of Chimney:
Basement   Floor	Masonry Lined
C Attic C Roof	Factory built
Type of Fuel:	Metal
Gas Gil Solid	Factory Built U.L. Listing #
Appliance Name:	Direct Vent
U.L. Approved D Yes D No	Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions?   IF NO Explain:   The Type of License of Installer:   Image: Master Plumber #	Type of Fuel Tank Gas Size of Tank
Approved Fire: Ele.:	Approved with Conditions See attached letter or requirement
Bldg.:	Inspector's Signature Date Approved
	nk - Applicant's Gold - Assessor's Copy

DAY OF INS		V	2	9 r 16/0	ip NRN	APPO DATE SALE	·	12/17			0.
PROPANE INSTALLATION FORM											
<u>NAME:</u> Randt Burd <u>ACCOUNT#</u> <u>ADDRESS:</u> 4/5 Palmer ave <u>PHONE#</u> <u>DIRECTIONS:</u> Perland Smo											
929 2011											
OIL CUSTOMER?											
QUOTE: (Y/N) LABOR: PART:											
JOB DESCRIPTION											
WORKOR	DER#(S)	)				ן	TICKETS			<u>     .                               </u>	
· /·	fan	Ma	Tula								
TANK SIZE		17 1		TRENCI	HREQ		TE	ENCH DU	GBY		
HOT WORK	HOO		JNIT:	B	ene	reter	<b>\</b>	HOP		QUIRE VERSION	
WALK SAFE	IN	NSTALL CATION	KI	СН	LVRM	BDRM	BATH	GAR	BASE	OTHE	R
** UNSAFE COND.		BESTOS	CON	FINED	WAT	ER	ANIMALS	ELECT		OTHER *	
ELECTRIC GRD.	DES	CRIPTIC	<u>DN:</u>		_ L	<u>_</u> :					
CRAWL. SPACE * LADDER				B	enl	rat	$\overline{\mathcal{N}}$ ,	15	K	n	
WRK * REMOVAL	тот	TAL BTU	LOAD			FURTHE	ST APPLIAN	ICE			
REQUIRED	3/8	1/2	5/8	1/2BI	3/4BI	1BI	TRAC		PLAS	TIC	— <u> </u>
PIPE SIZE			•								
VENTING REQUIRED						NOTES:	** (SIDING/	FILE/ETC)			
PARTS/EQ	UIPME	<u>NT</u> :									
						DISCUSSED W/ CUST:					
						SPECIAL TOOLS:					
<u>#TECHS</u>							1				

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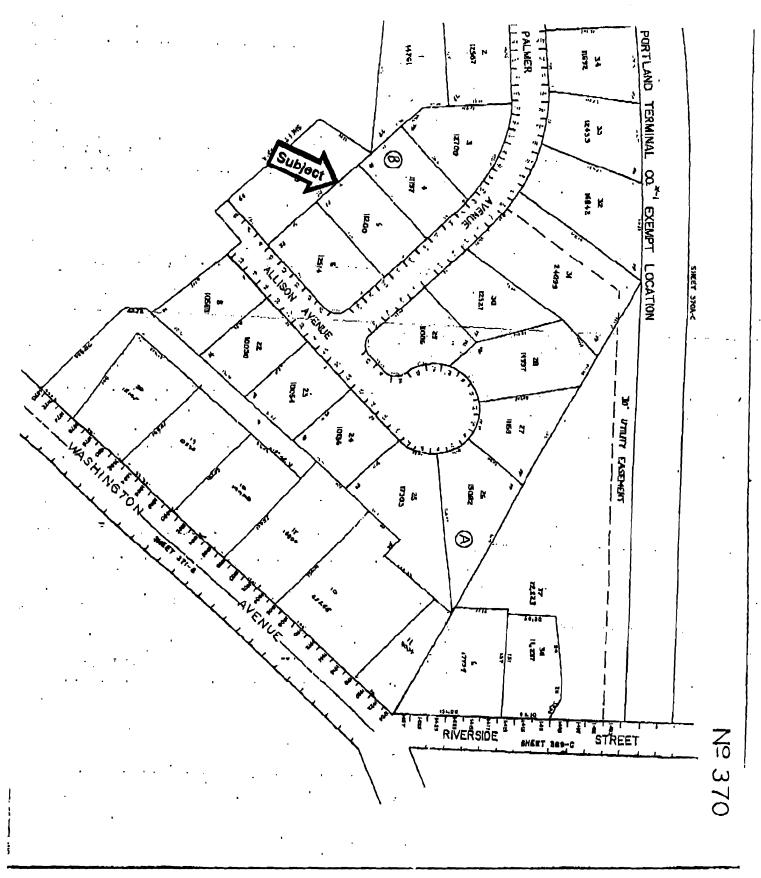
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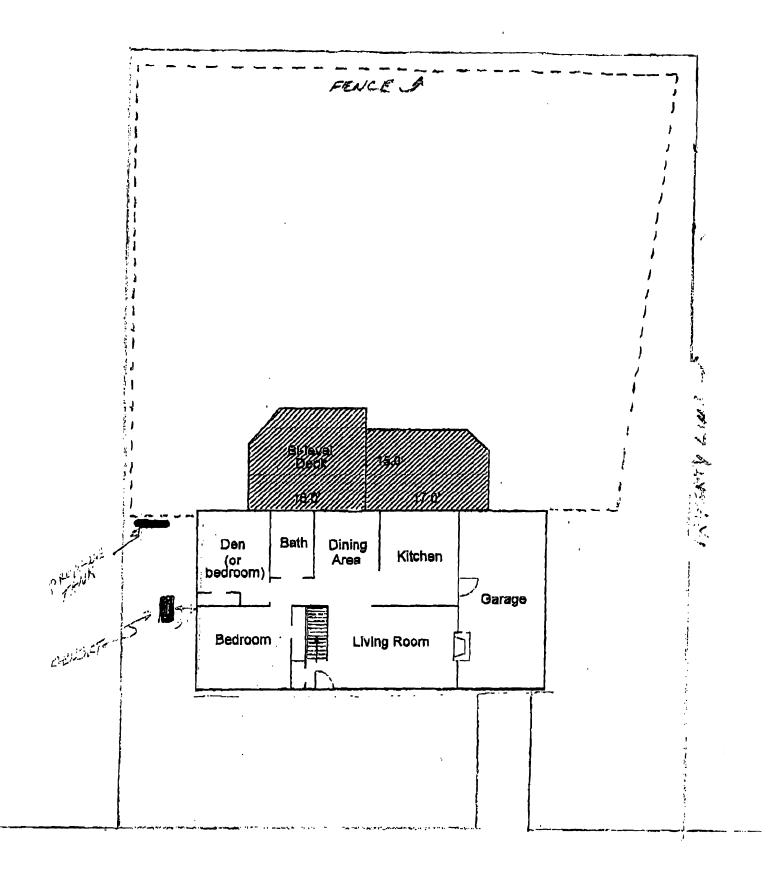
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Randy Burr 2078991564



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JAN 28, 08 07:55 FMDS FAX PORT #1 **P1** --==>> OFFICE SUPPORT SYSTEMS ((==--Taken 07:54 am 01/28/08 Operator 04 TO: RON ALLARD FROM: DAVID CLAYTON FIRM: TEL#: 046 1117 REG: PLEASE CALL End Of Messages 1 Message Sent 07:54:54 am 0 01/28/08