							paragona a como				
City of Por	tland, Main	e - Building or Use	Permi	t Applicatio	n Pe	rmit No:	Issue Vale!	ISSUE	CBL:		
389 Congress Street, 04101 Tel: (207) 874-870					1 •		371 AOIIOOI				
Location of Construction: Owner Name:) wne	r Address:	1 NOV 1	7 2004	Phone:		
1955 Washington Ave Boswell Joanne Wid Wwii Vet			Wwii Vet	195	5 Washington	k ve	established a second				
		Contractor Name	ne:		Contr	actor Address:	Para -	UHIMD	Phone		
Dead Rive		Dead River Co	Company		PO Box 467 Scarborough			rrant	2078839515		
		Phone:	Phone:		Permit Type:			<u> </u>	Zone:		
					HV	AC				12-2	
Past Use: Proposed Use:			•		1			CE	O District:		
single family		gle family Install a Burnham			\$5,200.00						
		Boiler replace	ment sa	me footprint	FIRE	FIRE DEPT Approved INSPECTION: 7					
					Denied Use Group: Type: He				Type:		
						1 1 /			OF IMC		
Proposed Proje	ot Description:				-	119	(pr.	1	1	
	-	lacement same footprint			Signo						
mstan a Bun	mam Boner repr	accinent same rootprint			Signa PEDE	STRIAN ACTIV	VITIES DIST	Signature RICT (P.A.	D.) //	*	
									ed w/Conditions Denied		
								oved w/Con			
					Signa	ature:		Dat	te:		
Permit Taken B	y:	Date Applied For:				Zoning	Approva	1			
dmartin		11/04/2004									
1. This per	mit application of	does not preclude the	Special Zone or Reviews		ews	Zoning Appeal		1	Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.			Shoreland		/	Variance			Not in District or Landmark		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscellar	neous	Does Not Require		equire Review		
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			☐ Flood Zone			Conditional Use Requi		Requires Re	eview		
			Subdivision			Interpretation			Approved		
				Site Plan		Approved			Approved w/Conditions		
			Maj Minor MM		1 🗀	Denied			Denied		
			Date:	11 6 04		late:		Date:	11/16	, 174	
			Jate.	16 0		Tate.		Date.	11/1	101	
									,		
			C	CERTIFICAT	ION						
		owner of record of the na owner to make this appli									
jurisdiction. 1	n addition, if a p	permit for work describer all areas covered by su	d in the	application is i	ssued,	I certify that t	he code offi	cial'sauth	orized rep	resentative	
1											

ADDRESS

SIGNATURE OF APPLICANT

DATE

PHONE

· ·		ding or Use Permit	Permit No: 04-1659	Date Applied For: 11/04/2004	CBL:			
389 Congress Street,	04101 Tel: (207) 874-8703, Fax: (207) 874-871	6 04-1039	11/04/2004	371 AOIIOOI		
Location of Construction:		Owner Name:		Owner Address:		Phone:		
1955 Washington Ave		Boswell Joanne Wid V	Vwii Vet	1955 Washington				
Business Name:		Contractor Name: co		contractor Address:	Phone			
		Dead River Company		PO Box 467 Scarb	orough	(207) 883-9515		
Lessee/Buyer's Name		Phone:		Permit Type:	-			
				HVAC				
Proposed Use:			Propos	ed Project Description:				
single family Install a Burnham Boiler replacement same footprint Install a Burnham Boiler replacement same footprint								
Dept: Zoning	Status: A	pproved	Reviewer	: Tammy Munson	Approval Da	ate: 11/16/2004		
Note:						Okto Issue:		
	 Status: A	 pproved with Conditions	. — —— S Reviewer	Tammy Munson	 Approval Da	 ate: 11/16/2004		
Note:	Diatus. A	pproved with condition.	Reviewei	· Tallilly Wallson	Approvat De	Okto Issue:		
	1 14 200	2.1	. 1 0 . 1 1 0	(10.1115 1511			
(1) installation shall co	mpiy with 200	3 International Mechanic	cai Code and S	tate of Maine Off an	a Sona Fuel Board I	laws and Kules		



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to insta accordance with the Laws of Maine, the Building Code of the	the following heating, cooking or power equipment in the City of Portland, and the following specifications:
	Use of Building Pericential home 11/2/04 Date 11/2/04 Date 11/2/04
Installer's name and address Place RIVER Co. 73 Pleasant Hill	Rd Schrittigh, ME 04074 Rd Schrittigh 883-9515
Location of appliance:	Type of Chimney:
Basement	Masonry Lined
☐ Attic ☐ Roof	Factory built
Type of Fuel:	☐ Metal
O Gas 🗹 Oil 🚨 Solid	Factory Built U.L. Listing #
U.L. Approved Yes O No Some got Print	Direct Vent Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? Yes No	Oil
	☐ Gas
IF NO Explain:	Size of Tank <u>275</u>
	N 1 6m 1 /
The Type of License of Installer: Master Plumber #	Number of Tanks
Solid Fuel #	Distance from Tank to Center of Flame feet.
Oil # M5 30008710	
☐ Gas #	Cost of Work: \$ <u>5,200.</u>
Other	Permit Fee: \$ <u>75</u>
<u>Approved</u>	Approved with Conditions
Fire:	☐ See attached letter or requirement
Ele.:	1
Bldg.: Signature of Installer	Inspector's Signature Date Approved
White - Inspection Yellow - File P	Pink - Applicant's Gold - Assessor's Copy