City of Portland, Maine	e - Building or Use	Permit Applicatio	n ^{Per}	mit No:	Issue Date:		CBL:	
389 Congress Street, 0410	, Fax: (207) 874-871	6	09-1355			375 A03	0001	
Location of Construction:	Owner Name:		Owner	· Address:			Phone:	
72 Auburn St	burn St Fall Gregory A		130 Huston Rd					
Business Name:	Contractor Name	:	Contra	actor Address:			Phone	
Dead River Co		ompany	PO Box 467 Scarborough			2078839515		
essee/Buyer's Name Phone:			Permit Type: Tanks - Commercial				Zone: B-/	
Past Use: Proposed Use:			Permi	t Fee:	Cost of Work:	CE	O District:]
Commercial	Commercial /	ommercial / Install two 120 gallon		\$30.00 _ \$30.00			5	
gas tanks.		FIRE DEPT: Approved Denied Ser Conditions		Denied U	Use Group: Use Group: Type: Tom			
Proposed Project Description: Install two 120 gallon gas tan		Signature: KG Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A Action: Approved Approved w/Con						
			Signature: Da			ate:		
Permit Taken By: gg	11/24/2000			Zoning Approval				
1. This permit application of	loes not preclude the	Special Zone or Reviews		Zoning Appeal			Historic Preservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		Not in District	or Landmark	
2. Building permits do not septic or electrical work.	• · · · ·			Miscellaneous		Does Not Require 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			Requires Review	
		Subdivision					Approved	
		Site Plan	1	Approved			Approved w/C	onditions
PERMIT ISSUED								
		Date: 12/110	4	Date:		Date:	<u> </u>	<u> </u>

City of Portiano

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

City of Portland, Ma 389 Congress Street, 04		0		Permit No: 09-1355	Date Applied For: 11/24/2009	CBL: 375 A030001
Location of Construction:	01	vner Name:		Owner Address:		Phone:
72 Auburn St	F	all Gregory A		130 Huston Rd		
usiness Name: Contractor Name:		(Contractor Address:	Phone		
	D	ead River Company		PO Box 467 Scarb	oorough	(207) 883-9515
Lessee/Buyer's Name	Lessee/Buyer's Name Phone:		I	ermit Type:		
				Tanks - Commerce	cial	
Proposed Use:			Proposed	l Project Description:		
Commercial / Install two	120 gallon gas	tanks.	Install	two 120 gallon gas	s tanks.	
Dept: Zoning Note:	Status: App	roved	Reviewer:	Marge Schmucka	al Approval I	Date: 12/01/2009 Ok to Issue: 🗹
Dept: Building	Status: App	roved with Condition	ns Reviewer:	Tammy Munson	Approval I	Date: 12/22/2009
Note:						Ok to Issue:
1) The tanks shall be situ	ated so they ar	e not subject to vehic	cular traffic.			
Dept: Fire	Status: App	roved with Condition	s Reviewer:	Capt Keith Gautr	reau Approval E	Date: 12/15/2009
Note:				-		Ok to Issue:
 Install shall comply w A compliance letter is 						

PERMIT ISSUED

City of Portland



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

-- **1**

31,5 A 030

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	Use of Building Date //-24-09
Name and address of owner of appliance	
72 AUBURN SÍRZEÍ	· · · · · · · · · · · · · · · · · · ·
Installer's name and address DEAD RIVER Company	/ +Xmail
73 PLEASANT HUL RD - SCARBOROVEN	
Location of appliance:	
Basement G Floor	Type of Chimney:
	Masonry Lined Factory built
Type of Fuel:	Metal
Gas Oil Solid	Factory Built U.L. Listing #
Appliance Name:	Direct Vent
U.L. Approved 🖸 Yes 🗅 No	Type UL#
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank
installation instructions? Yes No	Oil
	🗙 Gas
IF <u>NO</u> Explain:	
	Size of Tank ONE HUNDRED TWENTY 64HON
The Type of License of Installer:	Number of Tanks 100
Master Plumber #	
Solid Fuel #	Distance from Tank to Center of Flame $- \frac{15}{5}$ feet.
• Oil #	
Gas #	Cost of Work: <u>\$</u>
Other	Permit Fee: \$
Approved	Approved with Conditions
Fire:	See attached letter or requirement
Ele.:	*

Bldg.: Signature of Installer EAD RIGHT COMPANY BI	Inspectoris Signature	Date Approved
White - Inspection Yellow - File	Pink - Applicant's Gold Assessor's Copy	

PROPERTY LINES Propari-PROPOSED 2-120 YALLON LPTANKS J ()72 AUBURN SI Noth - Not Avery Accurate Sota Alfin - Blody doesn't] Lock like This AUBURN SIRLET • - - -

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