

City of Portland, Maine - Building or Use Permit Application

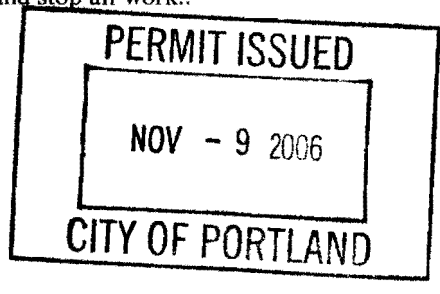
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-1615 Issue Date: CBL: 382 B014001

Location of Construction: 39 CLAYTON ST	Owner Name: WILLEY JAMMIE & JAQUELINE	Owner Address: 39 CLAYTON ST	Phone:
Business Name:	Contractor Name: Down East Energy	Contractor Address: 172 Main Street South Portland	Phone: 2077995585
Lessee/Buyer's Name:	Phone:	Permit Type: HVAC	Zone: R-3

Past Use: Single Family	Proposed Use: Single Family Install a 120 gal tank	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 5
Proposed Project Description: Install a 120 gal tank		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Tanks</i> <i>DEPPA</i>	
		Signature:	Signature:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied		
		Signature:	Date:	

Permit Taken By: dmartin	Date Applied For: 11/03/2006	Zoning Approval		
<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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.</p>		Special Zone or Reviews <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: <i>11/3/06</i>	Zoning Appeal <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:	Historic Preservation <input checked="" 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: <i>9</i>



Scanner

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

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Business Name:	Contractor Name: Down East Energy	Contractor Address: 172 Main Street South Portland	Phone: (207) 799-5585
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family Install a 120 gal tank	Proposed Project Description: Install a 120 gal tank
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Dept: Zoning Status: Approved Reviewer: Marge Schmuckal Approval Date: 11/03/2006
Note: Ok to Issue:

Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 11/08/2006
Note: Ok to Issue:

1) The tank must not be subject to vehicular traffic.



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

382 B 014
PERMIT ISSUED
NOV - 9 2006
CITY OF PORTLAND

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 39 Clayton Use of Building Private Date 11/6/06
Name and address of owner of appliance Jamie Wiley 39 Clayton St
Installer's name and address Paul Jay Energy 170 Main St South Berwick Telephone 799-5585

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid Fuel

Appliance Name: _____
 U.L. Approved Yes No

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

IF NO Explain: _____

The Type of License of Installer:
 Master Plumber # _____
 Solid Fuel # _____
 Oil # _____
 Gas # PMT 1445
 Other _____

Type of Chimney:
 Masonry Lined
 Factory built _____

Direct Vent
 Type _____ UL# _____

Type of Fuel Tank
 Oil
 Gas

Size of Tank 120

Number of Tanks 1

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ _____
Permit Fee: \$ 31.00

Approved **Approved with Conditions**
 See attached letter or requirement

Fire: _____
 Ele.: _____
 Bldg.: _____

Inspector's Signature _____ Date Approved _____

Signature of Installer [Signature]

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

PROPANE INSTALLATION FORM

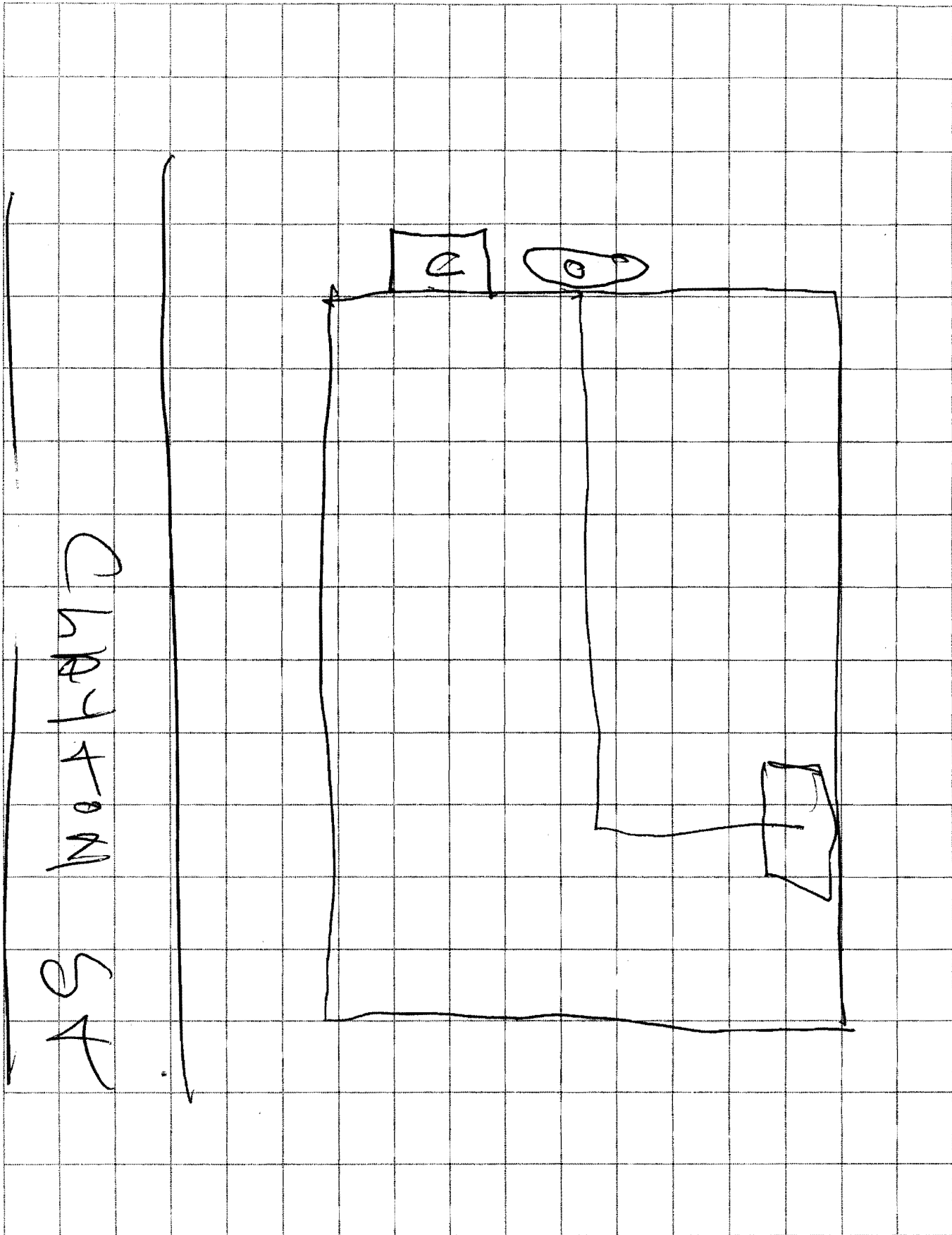
NAME JAMIE WILLEY ACCOUNT # _____
ADDRESS 39 CLAYTON ST. PORTLAND PHONE # _____
SALES REP RSA INSTALL DATE _____ TIME 9:00
QUOTE JOB Y N LABOR _____ PARTS _____
DIRECTIONS _____

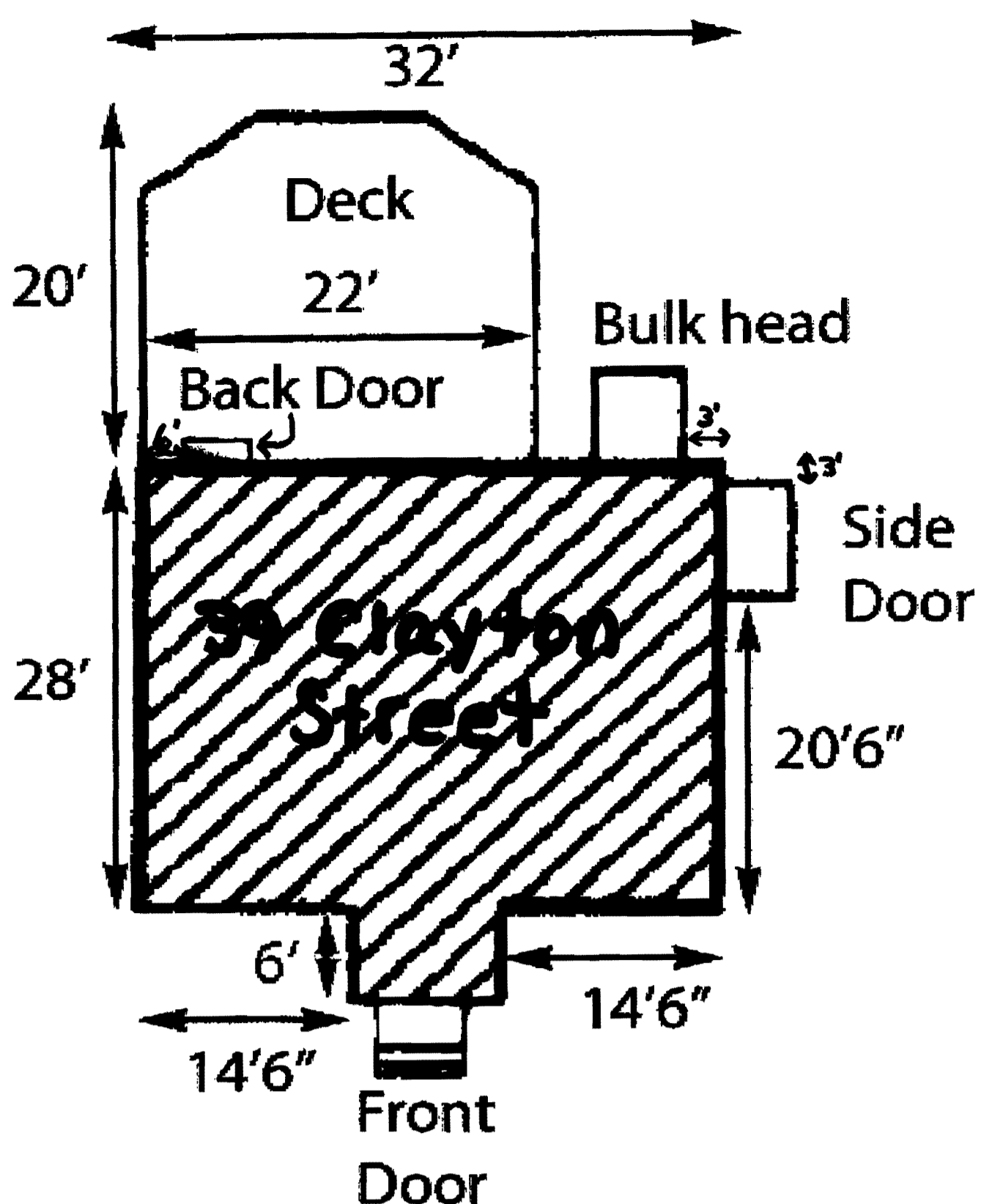
APPOINTMENT ACTION DATE
Date 10/16/06 Set up acct _____
Time 9:00 AM Added Tank _____
Acct # _____ WO#/TICKET _____ TANK _____ SVC _____ PRODUCT _____

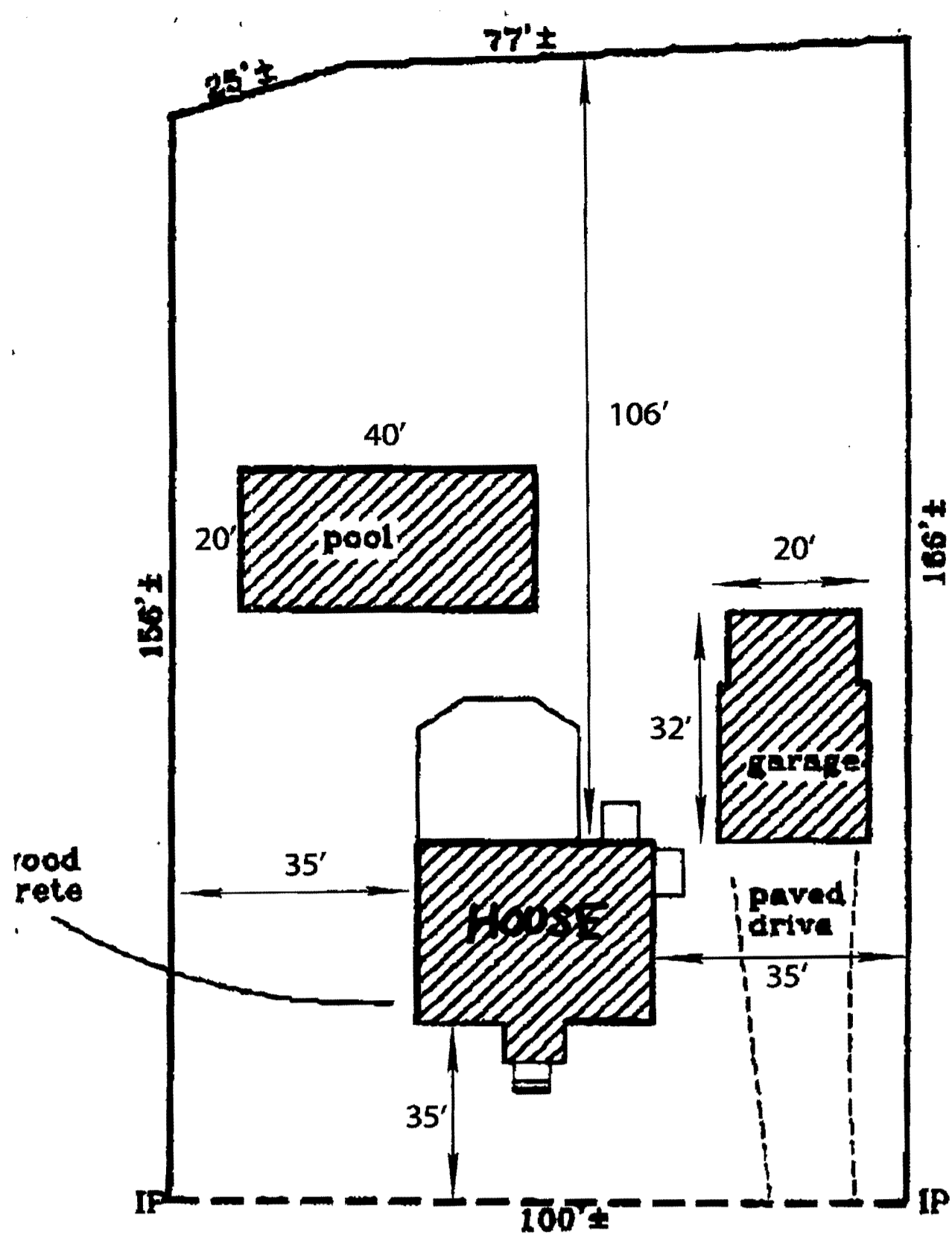
SAFETY

PROPERTY HAZARDS:	COMMENT/NEEDS
ARE PORCHES, ENTRYWAYS AND STAIRS SAFE TO WALK ON AND FREE OF OBSTRUCTIONS?	_____
ARE THERE ANY LOW OVERHEAD OBSTRUCTIONS THAT MAY INHIBIT SAFE DELIVERY?	_____
WILL MATERIAL HANDLING OR RIGGING EQUIPMENT BE NEEDED FOR SAFE DELIVERY? IF YES, WHAT?	_____
ARE THERE ANY OTHER CONDITIONS THAT MAY PREVENT SAFE DELIVERY?	_____
HOW MANY PEOPLE WILL BE REQUIRED TO SAFELY DELIVER AND INSTALL THE EQUIPMENT?	_____
ARE THE ELECTRICAL RECEPTACLES THREE PRONG GROUNDED TYPE?	_____
ARE ELECTRICAL RECEPTACLES COVERS IN PLACE?	_____
IS HOT WORK REQUIRED AND IS THERE A FIRE EXTINGUISHER FOR THE APPLICATION IN THE AREA ?	_____
IS REMOVAL OF OLD FURNACE/BOILER ETC. REQUIRED OR SPECIAL EQUIPMENT NEEDED?	_____
DO CONDITIONS EXIST THAT MIGHT CREATE UNSAFE WORK CONDITIONS? (ASBESTOS, CONFINED SPACES, WATER, ANIMALS ETC..)?	_____

DIAGRAM / SPECIAL NOTES:







39 Clayton Street