City of Portland, Ma	aine - Building or Use	Permit Applicatio	n Permit No:	IREBMIT	ISSUED.:
389 Congress Street, 04	4101 Tel: (207) 874-8703	3, Fax: (207) 874-87	16 05-18	<b>4</b> 1	382A D026001
Location of Construction:	Owner Name:		Owner Address:	JAN 1	3 200 Phone
17 LONGVIEW DR	NIAL CONST	TRUCTION INC	191 STATE	D#2	3 //(0
Business Name: Contractor Name Fielding's Oil		e:	Contractor Addi	ess:	Phone
		& Propane	P.O. Box 364	Scar GT Tygt OF P	ORT AND 33194
Lessee/Buyer's Name	Phone:	hone:			Zone:
			Tanks - Dwe	llings	,2-2
Past Use: Proposed Use:			Permit Fee:	Cost of Work:	CEO District:
Single Family Home	Single Family Gallon LP tan	Single Family Home/ install a 56		00 \$75.00	0 5
Proposed Project Description:					PECTION: e Group: R V Type: Tang PPA Shife Gas
install a 56 Gallon LP tar				/ T	nature:
mistan a 50 Ganon Er tar	III.		Signature: PEDESTRIAN	CTIVITIES DISTRIC	
		Action: App		pproved Approve	oved Approved w/Conditions Denied
			Signature:		Date:
Permit Taken By: Date Applied For:			Zon	ing Approval	
ldobson	12/30/2005				
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Revi	ews 2	Zoning Appeal	Historio Treservation
		Shoreland	☐ Vai	riance	Not in District or Landmark
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> </ol>		Wetland	☐ Mi:	scellaneous	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 Zove	Con	nditional Use	Requires Review
		Subdivision	Inte	erpretation	Approved
		Site Plan	App	proved	Approved w/Conditions
		Maj Minor MM	I Dei	nied	Denied //3
		Date: 1   13   06	Date:		Date: 01/16/06

## **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

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE

ADDRESS

DATE

PHONE

City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-				Permit No: 05-1841	Date Applied For: 12/30/2005	CBL: 382A D026001	
Location of Construction: Owner Name:			Owner Address:		Phone:		
17 LONGVIEW DR	ONGVIEW DR NIAL CONSTRUCTION IN		ION INC	NC 191 STATE RD # 2			
Business Name:		Contractor Name:		Contractor Address:		Phone	
		Fielding's Oil & Propane		P.O. Box 364 Scarborough		(207) 883-3194	
Lessee/Buyer's Name		Phone:		Permit Type:			
				Tanks - Dwellings	3		
Proposed Use:			Propos	ed Project Description:			
Dept: Zoning Note:	Status:	Approved	Reviewer	Tammy Munson	Approval D	Pate: 01/13/2006 Ok to Issue: ☑	
		Approved with Condition		Tammy Munson	Approval D	Ok to Issue:	
Note:				•		Ok to Issue:	



Signature of Installer

## 2 ATT: Kev.'N Carroll 3 FILL IN AND SIGN WITH INK

**APPLICATION FOR PERMIT** 

PERMIT ISSUED

HEATING OR POWER EQUIPMENT

[Niol construction of 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	
Location/CBL 17 Longview Drim 382 AD 24	Use of Building Res. Int. a Date 12-27-05
Name and address of owner of appliance Fieldings  P. O. Bex 364 Scarborough	ME. 04090-0364
Installer's name and address	(1
	Telephone (201) 883-3194
Location of appliance:  Basement Roof  Boof	Type of Chimney:  Masonry Lined Factory built
Type of Fuel: Gas Oil Solid	☐ Metal Factory Built U.L. Listing #
Appliance Name: 56 bollow L.P. Twk U.L. Approved Yes \( \sigma\) No	Type UL# When the Chy Of the Original Name of the Chy Of the O
Will appliance be installed in accordance with the manufacture's installation instructions? Yes  No	Type of Fuel Tank  Gray OF BUILDING NSPECTION  CITY OF PORTLAND, ME  DEC 2 8
IF NO Explain:	Size of Tank SPACHAVED PING
The Type of License of Installer:	Number of Tanks
☐ Master Plumber # ☐ Solid Fuel #	Distance from Tank to Center of Flame 15+ 1 feet.
Oil #	Cost of Work: \$ 75.00
Other	Permit Fee: \$
Approved	Approved with Conditions
Fire:	<ul> <li>See attached letter or requirement</li> </ul>
Ele.:	
Bldg.:	Inspector's Signature Date Approved

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

DEC-50-2005 09:20 AM FIELDINGS OIL & PROPANE 005 0296

318-4020

F.O. BOX 384 - 12. 3. ROUTE 1
SCARGEROUGH, MARINE BOX20316
883-3194

PAX MEND

DAYTE 12-30-05

TD C:14 of Fortland

ATTN: DOWNO

BUBLIECT 17 FOUND OF ME

FIELDING'S GIL FAX \* 207-805-0295

# OF PAGES INCLUDING COVER LETTER 2

COMMISSIONS.

P.02

Augusta Auburn Biddeford Scarborough

623-3322 782-1362 283-6633 883-3194

P.O. Box 364 • 420 U.S. Route 1 Scarborough, Maine 04070-0364

ATT: DONNO

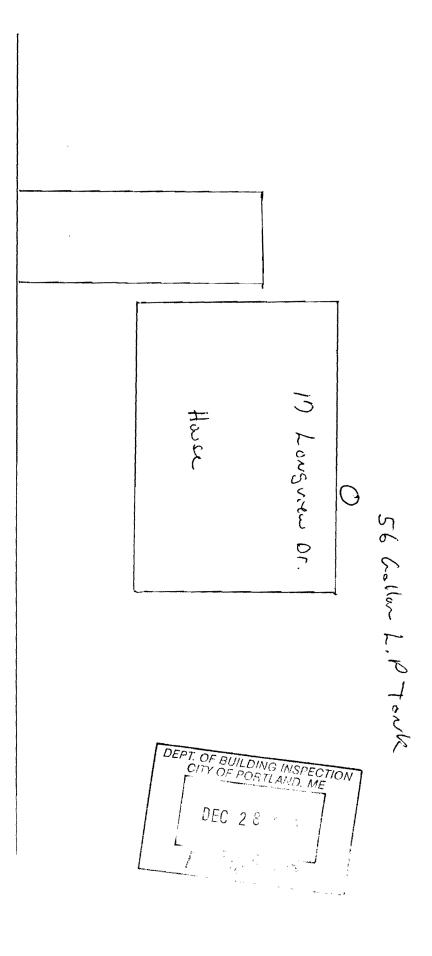
Dielding's
OIL & PROPANE CO.

56 Gollon tank L.P Tank 17 Longview Dr

COMMUNICATION No:50 PAGE. 2

Longuier Drive.

DEC. 30 '05 (SAT) 10:12



Longue Prive



## CITY OF PORTLAND, MAINE Department of Building Inspections

Received from	
Location of Work 17 This Control St.	
Cost of Construction \$  Permit Fee \$	
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2) Other	
CBL: <u>388 11 536</u> Check #: <u>387 11 536</u> Total Collected \$ 367 3	
Check #:   Iotal Collected \$	_
THIS IS NOT A PERMIT  No work is to be started until PERMIT CARD is actually poste upon the premises. Acceptance of fee is no guarantee that permit wi	

be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy