

City of Portland, Maine - Building or Use Permit Application

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

Location of Construction: 15 Alice Ct		Owner Name: Gilbert Heather L &		Permit No: 05-1043		Issue Date: AUG - 3		CBL: 386A B035001	
Business Name:		Contractor Name: Dead River Company		Owner Address: 1851 Washington Ave		Phone:		PERMIT ISSUED	
Lessee/Buyer's Name		Phone:		Contractor Address: PO Box 467 Scarborough		Phone: 2078839515		Zone:	
Past Use: Single family		Proposed Use: Single family set 2 100 gal tanks		Permit Type: Tanks - Dwellings		CITY OF PORTLAND		Zone:	
Proposed Project Description: Set 2 100 gal tanks				Permit Fee: \$30.00		Cost of Work: \$30.00		CEO District: 5	
				FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>N/A</i>		INSPECTION: Use Group: <i>R-3/v</i> Type: <i>How</i> <i>State Gas Reg</i> Signature: <i>[Signature]</i>		4	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____					
Permit Taken By: dmartin		Date Applied For: 08/03/2005		Zoning Approval					

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>8/3/05</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 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>8/3/05</i>
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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



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED

AUG - 3 2005

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 15 ALICE COURT Use of Building SING RES Date 8/1/05
Name and address of owner of appliance CHRIS GILBERT
15 ALICE COURT - PORTLAND, MAINE
Installer's name and address DEAD RIVER CO. 73 PLEASANT HILL RD SCARBOROUGH, ME
Telephone _____

Location of appliance:

- ☐ Basement ☐ Floor
☐ Attic ☐ Roof

Type of Fuel:

PROPANE ☒ Gas ☐ Oil ☐ Solid

Appliance Name: 2 100 GALLON PROPANE TANKS

U.L. Approved ☒ Yes ☐ No

TANKS
Will appliance be installed in accordance with the manufacture's installation instructions? ☒ Yes ☐ No

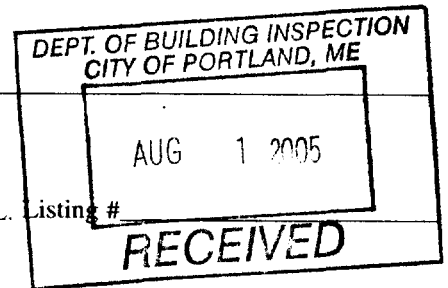
IF NO Explain: _____

The Type of License of Installer:

- ☐ Master Plumber # _____
☐ Solid Fuel # _____
☐ Oil # _____
☒ Gas # PNT1449
☐ Other _____

Type of Chimney:

- ☐ Masonry Lined
Factory built _____
☐ Metal
Factory Built U.L. Listing # _____
☐ Direct Vent
Type _____ uL# _____



Type of Fuel Tank

- ☐ Oil
☒ Gas PROPANE

Size of Tank 2-100 GALLON

Number of Tanks 2

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ NO CHARGE TO CUST.

Permit Fee: \$ 30.00

Approved

Fire: _____

Ele.: _____

Bldg.: _____

Approved with Conditions

- ☐ See attached letter or requirement

Signature of Installer Shoulder Inspection - Dead River Co.

Inspector's Signature _____

Date Approved _____

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

CR

FAX**Dead River Company**

73 Pleasant Hill Road
PO Box 467
Scarborough, ME 04070
Telephone #: 883-9515
Fax #: 883-5921

Date 8/3/05
Number of pages including cover sheet

TO:

DONNA
CITY OF PORTLAND
DEPT OF BUILDING INSPECTIONS.

FROM:

HAL WESTUNG.

Phone #

Fax #

CC:

874-3716

Phone#

Fax #

☐ Urgent☐ For your review/comments☐ Reply ASAP

PLEASE REFER TO PLOT PLAN FOR 15
ALICE COURT TO SUPPORT APPLICATION FOR
PERMIT FOR PLACEMENT OF 2 - 100 GALLON
PROPANE TANKS. HAVE PAID THE \$30.00
FEE (SEE ATTACHED RECEIPT)

PLEASE CALL ME WHEN PERMIT HAS BEEN
ISSUED AND I WILL PICK-UP.

THANKS AGAIN FOR YOUR HELP

HAL

**CITY OF PORTLAND, MAINE****Department of Building Inspections**

Received from

Dead River Co Aug 1 20 05

Location of Work

15 Alice Ct

Cost of Construction \$

Permit Fee

\$ 30 00Building (IL) Plumbing (IS) Electrical (IE) Site Plan (U2)

Other

HVACCBL: 386 AB 035

Check #:

CASHTotal Collected \$ 30 00granted the amount of the fee will ~~refunded upon~~ turn of theDonna

WHITE - Applicant's Copy

YELLOW - Office Copy

RECEIVED

