

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-0062	Issue Date: FEB 10 2003	CBL: 389 E016001
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Location of Construction: 21 Pamela St	Owner Name: Menario Jay M	Owner Address: 21 Pamela Rd	Phone:
Business Name: n/a	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: 2078839515
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone: R-2

Past Use: Single Family	Proposed Use: Single Family / Install one 275 gallon oil burner in the basement	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 2
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Proposed Project Description: Install Heating System	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: R3 Type: Heat Signature: JMB 2/3/03 BOCA 1993
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: gg	Date Applied For: 01/28/2003	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <i>Bldg construction 1967</i> <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>2/3/03</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: _____
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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
FEB 10
CITY OF PORTLAND

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND
JAN 28 2003
RECEIVED

389 E 016

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 21 PAMELA RD. Use of Building SINGLE FAM Date 1/28/03
Name and address of owner of appliance JAY MIENARIO
21 PAMELA RD. PORTLAND, ME
Installer's name and address DEAD RIVER CO.
73 PLEASANT HILL RD SCARBOROUGH, ME Telephone 883-9515

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: BURNHAM V84-T CAST BOILER

U.L. Approved Yes No

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 # MS20006017
- Gas # _____
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame _____ feet.

Approved

Approved with Conditions

Fire: _____

See attached letter or requirement

Ele.: _____

Bldg.: _____

Signature of Installer Shirley M. [Signature] for Dead River Co.

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Business Name: n/a	Contractor Name: Dead River Company	Contractor Address: PO Box 467 Scarborough	Phone: (207) 883-9515
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	

Proposed Use: Single Family / Install one 275 gallon oil burner in the basement	Proposed Project Description: Install Heating System
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Dept: Zoning Status: Approved Reviewer: Marge Schmuckal Approval Date: 02/03/2003
 Note: Ok to Issue:

Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 02/03/2003
 Note: Ok to Issue:

2) Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules

ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date 4-17-02
 Permit # 2002-4303
 CBL# 389-E-016

LOCATION: 21 Pamela Rd METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Jay Merario
 TENANT _____ PHONE # _____

OUTLETS	2	Receptacles	8	Switches	(Smoke Detector		TOTAL EACH FEE
								.20
FIXTURES	10	Incandescent		Fluorescent		Strips		.20
SERVICES		Overhead		Underground		TTL AMPS	<800	15.00
		Overhead		Underground			>800	25.00
Temporary Service		Overhead		Underground		TTL AMPS		25.00
METERS		(number of)						25.00
MOTORS		(number of)						1.00
RESID/COM		Electric units						2.00
HEATING		oil/gas units		Interior		Exterior		1.00
APPLIANCES	1	Ranges		Cook Tops		Wall Ovens		5.00
		Insta-Hot		Water heaters		Fans		2.00
		Dryers	1	Disposals	1	Dishwasher		2.00
		Compactors		Spa		Washing Machine		2.00
		Others (denote)						2.00
MISC. (number of)		Air Cond/win						3.00
		Air Cond/cent				Pools		10.00
		HVAC		EMS		Thermostat		5.00
		Signs						10.00
		Alarms/res						5.00
		Alarms/com						15.00
		Heavy Duty(CRKT)						2.00
		Circus/Carnv						25.00
		Alterations						5.00
		Fire Repairs						15.00
		E Lights						1.00
		E Generators						20.00
PANELS		Service		Remote		Main		4.00
TRANSFORMER		0-25 Kva						5.00
		25-200 Kva						8.00
		Over 200 Kva						10.00
							TOTAL AMOUNT DUE	
							MINIMUM FEE/COMMERCIAL 45.00	
							MINIMUM FEE	35.00

35

CONTRACTORS NAME Hannan's Electric Inc MASTER LIC. # 16842
 ADDRESS 897 Broadway S.P. LIMITED LIC. # _____
 TELEPHONE 7672471

SIGNATURE OF CONTRACTOR Larry Hannan