City of Portland, N	<b>Iaine - B</b> ui	lding or Use	Permi	t Application	n Peri	nit No	Isala Del	1331	EBL:	
389 Congress Street,	04101 Tel:	(207) 874-8703	3, Fax: (	207) 874-871	6	05-1541			90	A011001
Location of Construction: Owner Name:				Owner	Address:	אטא	/ 000	Phone:		
126 Hope Ave Peisner Mich		el B		26 Ov	erse Rd					
Quality		Contractor Name	2:		Contractor Address:				Phone	
		Quality Insula	tion		65 Do	wneast Dr	ive Yarmout	h	1207846	67745
Lessee/Buyer's Name Phone:		Phone:			Permit Type: HVAC					Zone:
Past Use: Proposed Use:					Permit Fee: Cost of Work:				CEO District:	
vF***********************************		Home/ install a replace		FIRE	O VEDATE	Approved	INSPEC			
						Denied Us  To NIPASY  Signature: (ANS (SEE Signature)		Use Gro	se Group: U Type: Hv	
Proposed Project Description	on:				To	Nt	PA SY	STA	TE ME	GAS Re
install a lennox Gas Fir					Signatu	ire: (o N	ഹ (ക്കു	Signatur	·e:	
11190011 0 101111011 0 0 1 11	·p·····				Signature: Signature: Signature: PEDESTRIANACTIVITIES DISTRICT (P.A.D.)					
					Action	: Appro	oved Ap	proved w/C	Conditions [	Denied
Permit Taken By:	D-4- A		•	Signature:				Date:		
ldobson	<b>I</b>	pplied For: 1/2005				Zonin	g Approv	al		
1.	10/2	1.2003	Special Zone or Reviews  Shoreland		iews Zoning Appeal			Historic F	Preservation	
1.						☐ Variance			Not in District or Landma	
2. Building permits d septic or electrical				☐ Wetland		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 ☐ Subdivision			Conditional Use			Requires Review	
						Interpretation			Approved	I
			Site Plan			Approved			Approved w/Conditions	
			Maj Minor MM			☐ Denied			Denied	
			Date: 1//03/05 Dr			late:		lat	late: // '03/05 2~	
1 hereby certify that I an I have been authorized by burisdiction. In addition shall have the authority such permit.	y the owner to, if a permit for	o make this appli or work describe	med proication a	s his authorized application is is	ne propo l agent sued, I	and I agree certify that	to conform the code of	to all app ficial's au	plicable lav athorized re	ws of this epresentative
SIGNATURE OF APPLICAN	T			ADDRESS			DATE		P	HONE
RESPONSIBLE PERSON IN	CHARGE OF V	VORK, TITLE					DATE	,	D.	HONE

DATE

PHONE

## FILL IN AND SIGN WITH INK



## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

390 A11

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/36 HODE AVE	Use of Building Hame Date 10/21/05
Name and address of owner of appliance Douglas B. CAW	BACE, PIESNER Windham Me
Installer's name and address QUALITY TWOULTING  1 Sources Dr. Varmontia, ME	O TUC.
Location of appliance:  Basement Roof  Type of Fuel:	Type of Chimney:  Masonry Lined Factory built
Appliance Name: LENNOX FIREFULE	Factory Built U.L. Listing #  Direct Vent
Will appliance be installed in accordance with the manufacture's installation instructions? Yes \(\sigma\) No	Type Of Fuel Tank  DEPT. OF BUILDING INDICATE  Oil
IF NO Explain:  The Type of License of Installer:	Size of Tank  Number of Tarks
☐ Master Plumber #	
Solid Fuel #	Distance from Tank to Center of Flame feet.
Oil #	Cost of Work: \$ 1300.00
Other	Permit Fee: \$ 35000
<u>Approved</u>	Approved with Conditions
Fire:	See attached letter or requirement
Ele.:	
Bldg.:	Inspector's Signature Date Approved

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

City of Portland, Maine - Building or Use Permit				Permit No:	Date Applied For:	CBL:		
389 Congress	Street, 04101 Tel	: (207) 874-8703, <b>Fax:</b> (	(207) 874-871 <u>6</u>	05-1541	10/21/2005	390 A011001		
Location of Construction: Owner Name:				Owner Address: Phone:				
126 Hope Ave		Peisner Michael B		26 Overset Rd				
Business Name: Contractor Name:			(	Contractor Address: Phone				
	Quality Insulation			65 Downeast Drive	(207) 846-7745			
Lessee/Buyer's Na	me	Phone:	l .	Permit Type: HVAC				
Proposed Use:		•	Proposed	Project Description:				
Single Family F	Home/ install a lenn	ox Gas Fireplace	install	ll a lennox Gas Fireplace				
Dept: Zoning Note:	g Status:	Approved	Reviewer:	Tom Markley	Approval Da	te: 11/03/2005 Ok to Issue:		
Dept: Building Note:  1) The installar		Approved rith the State of Maine Gas		Tom Markley	Approval Da	nte: 11/03/2005 Okto Issue: ✓		
Dept: Fire Note:  1) Install to NF		Approved with Condition	s Reviewer:	Cptn Greg Cass	Approval Da	te: 10/24/2005 Ok to Issue: ✓		