Cit	y of Portland, Main	e - Build	ling or Use Pe	ermit A	Application		Permit No:	Issue Dat	e:	CBL:	
389	Congress Street, 0410	1 Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-0233			396 E00	1001
Location of Construction: Owner Name:					Owner Address:				Phone:		
32 Heather Rd			Beale James W &			71 Pineloch Dr					
Business Name:			Contractor Nam	ne:		Co	ntractor Address	s:		Phone	
			Bissonette Plus	mbing a	and Heating	Portland					
Less	see/Buyer's Name	Phone:	hone:			Permit Type:				Zone:	
						HVAC					
Past	Use:		Proposed Use:			Permit Fee: Cost of Work:		rk:	CEO District:		
Single Family Single			Single Family	Single Family w/oil heating sytem,			\$75.00	\$75.00 \$6,000		00 5	
			tank in basement					Approved	INSPE	CTION:	
								Denied Use Gr		roup:	Type
							Beined				
	posed Project Description										
Inst	tall oil heating sytem, tar	nk in base	ment						gnature:		
						PEDESTRIAN ACTIVITIES DISTRIC			FRICT (CT (P.A.D.)	
						Action: Approved Approved				l w/Condition Denied	
										Date	
	** T 1 D	In	11.15			Signature:				Date:	
kw	nit Taken By:		pplied For:		Zoning Approval						
KW		03/10/2004		Special Zone or Revie		owe	ews Zoning Appeal			Historic Preservation	
1.	This permit application		•	l <u> </u>		iews	_			_	
	Applicant(s) from meeting applicable State Federal Rules.		able State and	Shoreland			Variance			Not in District or Landma	
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland		☐ Miscella	Miscellaneous		☐ Does Not Require Revie		
3.	3. Building permits are void if work is not started within six (6) months of the date of issuance.			☐ Flood Zon		Conditional Us			Requires Review		
							_			<u> </u>	
False information may invalidate a building permit and stop all work			Subdivision			Interpretatio			Approved		
			Site Plan								
						☐ Approved			Approved w/Condition		
				Maj ☐ Minor ☐ MM ☐			□ □ Denied			☐ Denied	
						· Ш					
				Date:			Date:		Г	Date:	
				Date.							
					CERTIFICATION	ON					
I he	reby certify that I am the	owner of	record of the na	med pro	operty, or that the	he p	roposed work is	authorized	by the	owner of recor	d and that
	ve been authorized by the										
	sdiction. In addition, if a										
	l have the authority to er	nter all are	eas covered by su	ich per	mit at any reaso	nab	le hour to enfor	ce the prov	ision o	f the code(s) ap	plicable
to st	ach permit.										
SIG	NATURE OF APPLICAN				ADDRES	S		DATE	Ε	PI	НО

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction:	Owner Name:		Owner Address:	Phone:		
32 Heather Rd	Beale James W &	Beale James W &		71 Pineloch Dr		
Business Name:	Contractor Name:		Contractor Address:	Phone		
	Bissonette Plumbi	ng and Heating	Portland			
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			HVAC			
-						
Dept: Zoning	Status: Approved	Reviewer:	Jeanine Bourke	Approval Dat	e: 03/	11/2004
Note:					Ok to Issue	: V
Dept: Building	Status: Approved	Reviewer:	Jeanine Bourke	Approval Dat	e: 03/	11/2004
Note:					Ok to Issue	: ✓
1) Installation shall comp	oly with 1993 BOCA Mechanica	l Code and State of I	Maine Oil and Solid Fu	el Board Laws and	Rules	

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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK TIT	DATE	PHO	