	_			•	Г	Permit No:	<u> </u>	PERM	AHT	ISSI	ED.		<b> </b>
City of Portland, Ma						05-00	<b>k</b> 1	Issue Date			398	A00	1001
<b>389</b> Congress Street, 04 Location of Construction:	101 10	Owner Name:	, rax:	(201) 874-871		vner Address:		JAN		2 201	Phone		1001
83 Summit St		White Paul G				Lester Dr		Į OAII		_ 200	[ [ao4		
Business Name:		Contractor Name		<b>:</b>		ntucatan Add	ess:				Phone	•	
Avery Service				7 Thomas Dr ve Westbrook F			FP(	ORTU2010728687					
Lessee/Buyer's Name 'hone:		'hone:			_	rmit Type:							Zone:
					F	IVAC							RZ
Past Use: Proposed Use:													
			Single Family Home- Install Carrier Heating & cooling system		<u> </u>	\$237.0	00	\$23,9			5		
		Heating & coo			FI	RE DEPT:		Approved	INSI	PECTI	ON:		Het
								Denied	Use	Group:	ドラ		Type     V
									ME	10	( 15/16/2)	Ru	les
Proposed Project Description:					ł				100		<i>&gt; 202</i>	<b>,</b>	 
Install Carrier Heating &		o system			FIRE DEPT: Approved Use Group: R 3 Type ME Group: R						1 boos		
Instan Carrier Heating &	Cooming	, system			Signature: Sig			TRIC	T (P.A.D.)				
						ction: \( \to \Delta	nnrove	ed 🗆 Ar	nroved	- Lw/Cor	ditions		Denied
					Action: Approved Approve			proved	ed w/Conditions Denied				
		_			Si	ignature:				Da	te:		
Permit Taken By:		te Applied For:				Zon	ing	Approv	al				
ldobson		01/11/2005	Sne	ecial Zone or Revi	NI C		Zonin	a Anneal	-	1	Historia	Proce	rvation
1. This permit application			l		ews				Historic Preservation				
Applicant(s) from meeting applicable State and Federal Rules.			Shoreland			Variance			Not in District or Landma				
2. Building permits do not include plumbing, septic or electrical work.			Wetland Misc		scellar	aneous Doe		Does N	oes 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 ☐ Site Plan		Conditional Use			Requires Review					
						Interpretation			Approved				
						Approved				Approved w/Conditions			
			Maj Minor MM			Denied Date:				Denied Date: Denied			
			,		<b>^</b>	т							
I homohy comtifee the t	h o a	m of moond -f.tl-		CERTIFICATI			le !:	outh a -!-	1 h (	ha	m o m - r		المامية
I hereby certify that I am t I have been authorized by jurisdiction. In addition, i shall have the authority to such permit.	the owr f a perm	ner to make this applinit for work describe	ication d in the	as his authorize application is i	d ag	gent and I aged, I certify	gree t that t	o conform	to al	l appli 's auth	icable iorized	laws o	of this esentative
SIGNATURE OF APPLICANT	,			ADDRES	S			DAT	E			PHO	NE

City of Portland, Maine - Bu	Permit No:	Date Applied For:	CBL:					
<b>389</b> Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 05-0031 01/11/2005 398 A001001								
Location of Construction:	struction: Owner Name:			Owner Address:				
83 Summit St	White Paul G		5 Lester Dr					
Business Name:	Contractor Name:		ontractor Address:	Phone				
	Avery Services, Inc.		7 Thomas Drive W	(207) 772-8687				
essee/Buyer's Name Phone:		P	ermit Type:					
			HVAC					
Proposed Use:	Proposed Project Description:							
Single Family Home- Install Carrier Heating & cooling system  Install Carrier Heating & cooling system								
		<u></u>						
Dept: Zoning Status:	Approved	Reviewer:	Jeanine Bourke	Approval Da	ote: 01/11/2005			
Note:					Ok to Issue: 🛚			
<b>Dept:</b> Building <b>Status:</b>	Approved	Reviewer:	Jeanine Bourke	Approval Da	ote: 01/11/2005			
Note:					Ok to Issue:			
1) The installation must comply with the State of Maine Gas Regulations.								
1) The instantation must comply wi	th the State of Maine Gus	Regulations.						



## **APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT**

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:

Name and address of owner of appliance S3 Summit	Use of Building Home Date 1-11-05				
Installer's name and address Avery Stavices I 7 I NOMAS DE WESTWOOK ME	WC:				
Location of appliance:  Basement	Type of Chimney:  Masonry Lined Factory built				
Type of Fuel:  Gas  Oil  Solid  Appliance Name:  U.L. Approved  Yes  No  Will appliance be installed in accordance with the manufacture's installation instructions?  Yes  No	Direct Vent Type  Type of Fuel Tank  Gas  Gas				
The Type of License of Installer:  Master Plumber #  Solid Fuel #  Oil #  Gas # Phyll 1996  Other	Number of Tanks  Distance from Tank to Center of Flame feet.  Cost of Work: \$2.75  Permit Fee: \$2.37				
Approved  Fire:  Ele.:  A  Bldg.:  Signature of Installer	Approved with Conditions  See attached letter or requirement  Inspector's Signature  Date Approved				
	Pink - Applicant's Gold - Assessor's Copy				