

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-1319	Issue Date: NOV 2 2001	EBL: 398 A013001
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Location of Construction: 696 Allen Ave	Owner Name: Music Barbara G	Owner Address: 16 Sumac St	Phone: CITY OF PORTLAND
Business Name: n/a	Contractor Name: Sheldons Plumbing & Heating	Contractor Address: 31 Peary Terrace South Portland	Phone: 2077996211
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single Family / Install 275 gallon New Yorker oil tank	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 2
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB BOCA 1999	

Proposed Project Description: Install Heating System	Signature: <i>[Handwritten Signature]</i>	Signature: <i>T. Munson</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: <i>N/A</i> Date:		

Permit Taken By: gg	Date Applied For: 10/22/2001	Zoning Approval	
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>N/A</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>11/2/01</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <i>N/A</i> <input type="checkbox"/> Conditional Use <i>N/A</i> <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: <i>11/2/01</i>	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <i>N/A</i> <input type="checkbox"/> Requires Review <i>N/A</i> <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>11/2/01</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.

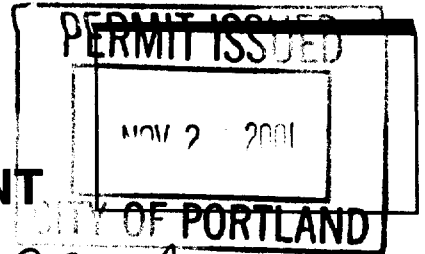
SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



01 1319

398 A 036

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 704 ALLEN AVE. Use of Building Single Family Date 10/22/01

Name and address of owner of appliance _____

Installer's name and address SHELDON'S PLUMBING & HEATING
31 DEARY TERRACE SO. PORTLAND ME Telephone 799-6211

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: NEW YORKER

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 # MS 2362
- Solid Fuel # _____
- Oil # MS 30602800
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
- Factory built _____

- Metal
- Factory Built U.L. Listing # _____

- Direct Vent
- Type _____ UL# _____

Type of Fuel Tank

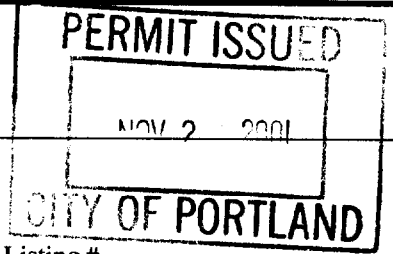
- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame _____ feet.

\$30.00



Approved

Approved with Conditions

Fire: AMM

- See attached letter or requirement

Ele.: _____

Bldg.: _____

Signature of Installer Aldon Williams

Application ID Number: 1-1319

Delete

Save

Close

Department: Building

Status: Approved

Reviewer: Tammy Munson

Comments:

Approval Date: 11/02/2001

Given On Date: 11/02/2001

OK to Issue Permit

Name: Tammy Munson

Date: 11/02/2001

Date 2:

Conditions Section:

Add New Condition From

Add New Condition

Delete Condition

Must comply with State Oil Burner Rules



Create Date: 11/02/2001

By: jodinea

Update Date: 11/02/2001

By: dgc