Cit	y of Portland, Maine -	Building or Use	Permit A	Application	n Pe	rmit No:	Issue Date:		CBL:	
	Congress Street, 04101	•				07-1440	}		423 A	033001
	ation of Construction:	<u></u> _	Owner Address:				Phone:			
l			l.		30 L	LEDGEWOO	D DR			
Business Name: Contractor Nam Dead River C			me:		Contractor Address: PO Box 467 Scarborough				Phone	
									2078839515	
Less	ee/Buyer's Name	Phone:			Permit Type:					Zone:
					HV	'AC				1-1-
Past	Use:	Proposed Use:			Perm	nit Fee:	Cost of Work:	CEC	District:	7
			l Storage Space - with stank			\$30.00	\$0.0	00	4	1/
					Approved			SPECTIO	PECTION:	
					Denied		-	Group: Type:		
		l			TO NEPA SE Signature: Green Care Sign					
										NP
Prop	oosed Project Description:					r		_		
Ins	tall 100 gallon gas tank				Signa	iture: Urcc	si Cares si	gnature:	II	\leq
					PEDESTRIAN ACTIVITIES DISTRICT			CT (P.A.I	Γ (P.A. b ()	
1					Actio	on: Approv	ved 🗌 Approv	ed w/Cone	d w/Conditions Denied	
					Signature:			Dat	Date:	
Pern	nit Taken By:	Date Applied For:			Zoning Approval					
lm	d	11/20/2007			Zoning Approva					
1.	This permit application doe	es not preclude the	Specia	l Zone or Revie	ws	Zoni	ng Appeal	F	listoric Pre	servation
••	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance		D	Not in District or Landmark		
2.	Building permits do not include plumbing, septic or electrical work.		Wetla	nd Miscelland		nneous		Does Not Require Review		
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		Flood Zone Conditional U		onal Use	Requires Review				
False information may invalidate a building permit and stop all work			Subdivision Site Plan			[Interpretation			Approved	
					Approved			Approved w/Conditions		
. 40			Mai 🗌	Minor MM		Denied			Denied (
			Date:	20/1	<u> </u>	Date:		Date:		2
	:	: -								
		;								
:	1	\$ e								
7										
••			CEI	RTIFICATION	ON					
I hav juris shall	reby certify that I am the own we been authorized by the own diction. In addition, if a peri I have the authority to enter a permit.	ner to make this appli mit for work described	med prope cation as h I in the app	erty, or that th nis authorized plication is is	ne prop l agen sued,	t and I agree and I certify that	to conform to a the code officia	all applical's autho	able laws orized rep	of this resentative
SIGN	NATURE OF APPLICANT			ADDRESS	<u> </u>		DATE		РНС	ONE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland Mai	ne - Building or Use Permit		Permit No:	Date Applied For:	CBL:
•	01 Tel: (207) 874-8703, Fax: (20	07) 874-8716	07-1440	11/20/2007	423 A033001
Location of Construction:	Owner Name:	0	Owner Address:		Phone:
314 PRESUMPSCOT ST	T INC 30 LEDGEWOOD DR				
Business Name: Contractor Name:		(Contractor Address:		Phone
	Dead River Company	[:	PO Box 467 Scarb	orough	(207) 883-9515
Lessee/Buyer's Name		Permit Type:			
			HVAC		
Proposed Use:		1 -	Project Description:		
Commmercial Storage Spa	ace - with 100 gallon gas tank	Install	100 gallon gas tani	k	
					
Dept: Zoning Note:	Status: Approved	Reviewer:	Marge Schmucka	d Approval I	Ok to Issue:
Note:	Status: Approved with Conditions	Reviewer:	Tammy Munson	Approval I	Oate: 12/04/2007 Ok to Issue: ✓
1) The tank installation m	ust comply w/ NFPA 58.				
2) The tank must be prote	cted form vehicular traffic.				
Note: 1) Install shall comply wi		Reviewer:	Capt Greg Cass	Approval I	Ok to Issue:
A compliance letter is i	equited				

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

413 A033	
ERMIT	
QUIPMENT	

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a	permit to install the follow	ving heating, cooking or pow	er equipment in
accordance with the Laws of Maine, the Build	ding Code of the City of Po	ortland, and the following spe	ecifications:

Location / CBL	Use of Building SCM 68 Date 11 20 07				
Name and address of owner of appliance Jakes Deveug	ement inc				
314-316 PRESUMD	516, 51				
Installer's name and address DEAD RIVER CO. 13 PLACED HUL RD SCORBERCY					
13 rigation Hur (C) State BETTON	Telephone 33 95/				
Location of appliance:	Type of Chimney:				
☐ Basement ☐ Floor	☐ Masonry Lined				
☐ Attic ☐ Roof	Factory built				
Type of Fuel:	☐ Metal				
Gas Oil Solid	Factory Built U.L. Listing #				
	ructory Built G.B. Blotting "				
Appliance Name:	☐ Direct Vent				
U.L. Approved □ Yes □ No	Type UL#				
	Type of Fuel Tank				
Will appliance be installed in accordance with the manufacture's	Type of Fuel Tank				
installation instructions?	Type of Fuel Tank Oil				
	✓ Gas				
IF NO Explain:	Size of Tank 100 61400				
	Size of Tank 100 GILLON				
The Type of License of Installer:	Number of Tanks				
☐ Master Plumber #	Number of Tanks				
□ Solid Fuel #	Distance from Tank to Center of Flame feet.				
	~ M -				
Oil #	Cost of Work: \$				
Other	Permit Fee: \$ 3000				
Approved	Approved with Conditions				
	See attached letter or requirement				
Fire:	See attached letter of requirement				
Ele.:					
Bldg.:	Interpreter's Signature Date Approved				
Signature of Installer De Signature Of Installer De Signature	(nla) lend				
White - Inspection Yellow - File Pi	ink - Applicant's Gold - Assessor's Copy				

PROP LINE PROPOSED 100 GAIL PROPANT TANK JAKES DEVELOPMENT INC 314.316 PRESURPSIOT ST

PRESUMPSION STREET