

**City of Portland, Maine - Building or Use Permit Application**

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 02-1185	Issue Date: 23 OCT 2002	CBL: 428 A014001
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Location of Construction: 141 Sherwood St	Owner Name: Bowen Keith C	Owner Address: 141 Sherwood St <b>CITY OF PORTLAND</b>	Phone:
Business Name:	Contractor Name: Stovey, Charles B.	Contractor Address: Portland	Phone: 2078296604
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R

Past Use: Two Family	Proposed Use: Two Family	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 2
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Proposed Project Description: Install Heating System in Basement/275 Gallon Oil Tank	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: Heating BOCA 1993M Signature: JMB 10/22/02
	Signature: _____ Date: _____	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Permit Taken By: gad	Date Applied For: 10/15/2002	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: 10/22/02	<b>Zoning Appeal</b> <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<b>Historic Preservation</b> <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: 10/22/02
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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.

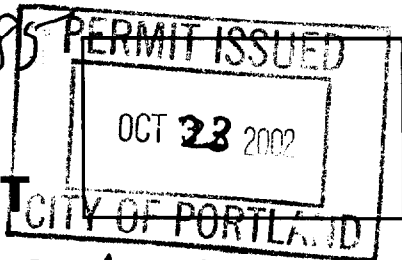
\_\_\_\_\_  
SIGNATURE OF APPLICANT ADDRESS DATE PHONE

\_\_\_\_\_  
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE



FILL IN AND SIGN WITH INK

02-1185



# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

428 A014

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 139 141 Sherwood St Use of Building Apt. Date 10.15.02  
 Name and address of owner of appliance Keith Bowen  
3 Country Lane Falmouth, Me  
 Installer's name and address Charles B. Stoney  
55 Middle Rd Cumberland Me Telephone 829 6601

**Location of appliance:** 04011  
 Basement  Floor  
 Attic  Roof

**Type of Fuel:**  
 Gas  Oil  Solid

**Appliance Name:** Burner  
 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 # 1578  
 Solid Fuel # \_\_\_\_\_  
 Oil # \_\_\_\_\_  
 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 1-2 75

Number of Tanks 1

Distance from Tank to Center of Flame 8' feet.

\$30.00

Approved Approved with Conditions

Fire: \_\_\_\_\_  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

See attached letter or requirement

Signature of Installer Charles B. Stoney  
White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

