

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-1544	Issue Date:	CBL: 438 A007001
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Location of Construction: 70 Yale St	Owner Name: Mks Development Inc	Owner Address: 7 Terra Way	Phone:
Business Name:	Contractor Name: Jim Jackson	Contractor Address: 30 Bolton Street Portland	Phone 2078311810
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R3

Past Use: single family home	Proposed Use: single family home w/direct vent gas furnace	Permit Fee: \$57.00	Cost of Work: \$3,500.00	CEO District: 4
Proposed Project Description: install direct vent gas furnace		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: HVAC ME Gas Rules	
		Signature:	Signature: JMB 10/27/04	
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: dmm	Date Applied For: 10/13/2004	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: JMB 10/27/04</p>	<p>Zoning Appeal</p> <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 <p>Date: _____</p>	<p>Historic Preservation</p> <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 <p>Date: JMB</p>
	<p><i>orig permit #04-0560</i></p> <p><i>OK</i></p>		

CERTIFICATION

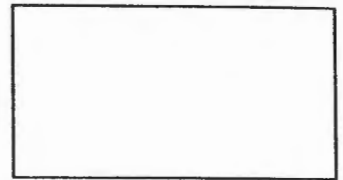
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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



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 / CBL 72 Yale St Portland Use of Building Single Dwell Date 10-12-04
 Name and address of owner of appliance 72 Yale St Cris Ballard
 Installer's name and address Jim Jackson 30 BOTTEN ST PORTLAND Telephone 831-1810

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: WEL McCLAIN
 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 # 2731
 Solid Fuel # _____
 Oil # _____
 Gas # PNT 1604
 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 _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 3,500

Permit Fee: \$ _____

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg.: JMB

See attached letter or requirement

Inspector's Signature _____ Date Approved _____

Signature of Installer James Jackson

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

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Business Name:	Contractor Name: Jim Jackson	Contractor Address: 30 Bolton Street Portland	Phone 2078311810
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 10/27/2004
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Jeanine Bourke	Approval Date:
Note:			Ok to Issue: <input checked="" type="checkbox"/>

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ADDRESS

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO

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CITY OF PORTLAND, MAINE
Department of Building Inspections

10-12 20 04

Received from

Jim Jackson 509

Location of Work

10-12 York St

Cost of Construction

\$ 3500

Permit Fee

\$ 2

Building (U) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other

HVAC

CBL:

138 A 7

Check #:

Cash

Total Collected \$

57

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy