•	<u>'</u>	Tel: (207) 874-8703, Fax: (207) 874-87				
Location of Construction:		Owner Name:			↓	
82 Yale St Mks Developmen		-		erra Way .	<u> </u>	
Business Name: Contractor Nam			Cont	tractor Address:	Phone	
Jim Jackson				`. T	l a	
Lessee/Buyer's Name		Phone:		Permit Type: Zone: HVAC 7 - ~		
		1 7 7	111	AC		
Past Use: Proposed Single Family Home Single		oposed Use: ngle Family Home.	/Install a Wail	\$57.00 \$3.5	00.00 4	
		cLain direct vent (		FIRE DEPT: Approved INSPECTION: Use Group: T  State Gas		
'roposed Project Description				/		
Install a Weil McLain	direct vent Gas Bo	iler		Ature: / I	Signature:	
			'EDI	ESTRIAN ACTIVITIES DIS	TRICT (P.A.D.)	
			Actio	on: Approved Approved Approved	proved w/Conditions Denied	
			Sign	nature:	Date:	
Permit Taken By:	Date Applie	applied For:		Zoning Approv	al /	
ldobson	11/22/20			<del> </del>		
		Sp	pecial Zone or Reviews	Zoning Appeal	Historic Preservation	
			Shoreland	☐ Variance	Not in District or Landma	
			Vetland	Miscellaneous	Does Not Require Review	
		F	Tood Zone	Conditional Le	Requires Review	
			ubdivision	☐ Interpretation	Approved	
			Site Plan	Approved	Approved w/Conditions	
		Мај	Minor MM	Denied	Denied	
		late:		late:	late: 128/04	
					1	

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

City of Portland, Maine - Buil	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel: (	04-1732	11/22/2004	438 AOIOOOI		
Location of Construction:	ocation of Construction: Owner Name:		Owner Address:		Phone:
82 Yale St Mks Development Inc			7 Terra Way		
Business Name:	Contractor Name:		Contractor Address:		Phone
	Jim Jackson		30 Bolton Street Po	ortland	(207) 831-1810
_essee/Buyer's Name	Phone:		Permit Type:		
			HVAC		
Proposed Use: Proposed Project Description:					
Single Family Home/Install a Weil McLain direct vent Gas Boiler Install a Weil McLain direct vent Gas Boiler					
Dept: Zoning Status: A	pproved	Reviewer:	Tammy Munson	Approval Da	te: 12/08/2004
Note:			·		Ok to Issue:
Dept: Building Status: A	pproved with Condition	- Reviewer	Tammy Munson	Approval Da	te: 12/08/2004
Note:	pprotea that condition	io Reviewel.	- winning ividinson	• •	Ok to Issue:
1) The installation must comply with	the State of Maine Gas	Pagulations			
1) The installation must comply with	the State of Maine Gas	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:

Location / CBL Pargland Valent LA 10	Use of Building Lingle Date 11-19-04		
Name and address of owner of appliance Rale	land		
Installer's name and address Jem Jackbor 3	Bollo A Portland		
Location of appliance:  Basement	Type of Chimney:  Masonry Lined Factory built		
Type of Fuel:  Gas O Oil Solid  Appliance Name: Mul Malaur  U.L. Approved Ves No  Will appliance be installed in accordance with the manufacture's installation instructions? Ves O No  IF NO Explain:	O Metal Factory Built U.L. Listing #  Direct Vent Type UL#  Type of Fuel Tank  □ Oil □ Gas		
The Type of License of Installer:    Master Plumber # 2731	Number of Tanks  Distance from Tank to Center of Flame feet.  Cost of Work: \$  Permit Fee: \$		
Approved  Fire:  Ele.:  Bldg.:  Signature of Installer  Approved	Approved with Conditions  See attached letter or requirement  Inspector's Signature  Date Approved		
	Pink - Applicant's Gold - Assessor's Copy		