PHONE	DATE	ADDRESS	RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	RESPONSIBLE PERSON IN C
s authorized representative of the code(s) applicable to	e hour to enforce the provision of	ch permit at any reasonabl	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	shall have the au such permit.
the owner of record and that all applicable laws of this	roposed work is authorized by the ent and I agree to conform to all	CERTIFICATION  med property, or that the p cation as his authorized ag in the application is issue	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 of the conformation is issued.	I hereby certify t I have been auth jurisdiction. In a
Date: [2/28/0]	Date: [2/28/07	Date: 12/20/07		
Denied	Denied	Maj 🔲 Minor 🗀 MM 🔲		
Approved w/Conditions	Approved	Site Plan		
Approved	Interpretation	Subdi	within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work	
Does Not Require Review	Miscallaneous	☐ Wetland	Building permits do not include plumbing, septic or electrical work.  Building permits are void if work is not started.	<ol> <li>Building person of the septic or el</li> <li>Building person of the septic or el</li> </ol>
Historic Preservation  Not in District or Landmark	Zoning Appeal  Variance	Special Zone or Reviews  Shoreland	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.	<ol> <li>This permit ap Applicant(s) f Federal Rules.</li> </ol>
	Zoning Approval		12/20/2001	gg
Date:	Signature:	\$2:	Total Control	
1000	CRIAN ACTIVITIES DISTI	> P 2		ţ
		, in the same	Oescription: System	Install Heating System
INSPECTION: Use Group: Type:	FIRE DEPT: Approved INSI		Samon On 1 aux.	
	30.00	Install Burnham 275	Single Family	Single Family
CEO District	Permit Fee:   Cost of Work.		Proposed Use:	Past Use:
Zone:	Permit Type:	Pe	me Phone:	Lessee/Buyer's Name
2073290015	42 Memory Lane South Portland			n/a
Ī	ess:		Contractor Name	Business Name:
Phone:	Owner Address:		ruction: Owner Name:  Messer James E Jr	Location of Construction: 174 Broadway
2001   339   K003001	Permit No: Issue Date: 01-1555 □ □□□ 2 8	- Building or Use Permit Application Tel: (207) 874-8703, Fax: (207) 874-8716		389 Congress Street, 04101
			• • • • • • • • • • • • • • • • • • •	3

#### City of Portland, Me. MLMCTRICAL PERMIT

To the Chief Electrical Inspector, The undersigned hereby applies in accordance with the laws of N

National Electrical Code and the

SITE LOCATION: 2

Portland Maine:  Tor a permit to make electrical installations  Aaine, the City of Portland Electrical Ordinance,  Formit #  CBL#	
10 10 10 10 10 10 10 10 10 10 10 10 10 1	Z NAME OF THE PROPERTY OF THE

OWNER JIM	RSSOV							
OUTLETS	Receptacles	3	Switches	Smoke Detectors	2	JAE	EACH FEE	EE
FIXTURES	incandescent	ì	† fluorescent	1 1	k			
		C						7:0
SERVICES	Overhead (2010)		Underground	TTL AMPS	800		15.00	7
	Overhead ,		Underground		>800		25.00	
Temporary Service	Overhead		Underground	TTL AMPS			25.00	
							25.00	
MOTORS INC.	(number of)	-					1.00	7.0
	(number of)						2.00	
XTVID/COM	Electric units						1.00	
HEATING	oil/gas units	5000	Interior	Exterior			5.00	
APPLIANCES	Ranges	1	Cook Tops	Wall Ovens			2.00	
	Insta-Hot	11.42	Water heaters	Fans			2.00	0,
	Dryers	Mara:	Disposals	Dishwasher			2.00	
	Compactors		Spa	Washing Machine	-		2.00	بر
	Others (denote)				**		2.00	9
	All Cond/Win						3.00	
	All Coflorcent			Pools			10.00	
	Signs Signs		EMC.	Thermostat			5.00	
	Alarms/ras						10.00	
	Alarms/com						5.00	
	Heaw Duty(CRKT)	+					15.00	
	Circus/Carny						2.00	
	Alterations						22.00	
	Fire Repairs						15 00	
	E Lights						1 2	
	E Generators						20.00	
PANELS	Service		Bemoto					
TRANSFORMER	0-25 Kva			Mail		•	4.00	7.0%
	25-200 Kva			^			5.00	
	Over 200 Kva						30.00	
				7				
INSPECTION:	Will be ready	C E S	CHCIAL 35.00	MINIMUM FEE		25.00	1	464
	S Carry			or will call				
	CHELOR	N/		MASTER LIC # 1/2	7	3	177	~
	Mill Saimpo		O.	LIMITED LIC #	i	001	1//	"
IELEPHONE 765	5-7297							
		,	1 11					

SIGNATURE OF CONTRACTOR



### FILL IN AND SIGN WITH INK

# HEATING OR POWER EQUIPMENT APPLICATION FOR PERMIT

20-4-003



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications: The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in

YPOH OND	Signature of Installer from the
12 Manony in	Bldg.:
See attached letter or requirement	Ele.:
	Fire: Approved
	>
	O Other
teet.	
Distance from Tank to Center of Plans	Solid Fuel#
Number of Tanks	The Type of License of Installer:   Master Plumber #
Size of Tank 275	
☐ Gas	IF NO Explain:
\ <b>n</b>	installation instructions?  Yes
	Will appliance be installed in accordance with the manufacture?
TypeUL#UL#	Appliance Name: <u>方心内内似山</u> , U.L. Approved ② Yes □ No
I ACOLY BUIL O.L. LISHING #	
Metal     Factor, Built III I Indiana	Type of Fuel:  Gas Goil Golid
ractory built	
2 Masonry Lined	☐ Attic ☐ Roof
Type of Chimney:	)
Telephone 378 0015 July Com	47 Memory Lt. So. Dowx.
	Installer's name and address Robert S Dove
55.6% Date 171 11.61	address of owner of appliance 7 445 M
Use of Building	Location 174 Krozd WXX



#### FILL IN AND SIGN WITH INK

# HEATING OR POWER EQUIPMENT APPLICATION FOR PERMIT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications: The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in

ピーキーとい

Sel Sinot Cuich	Signature of Installer
2 P P P P P P P P P P P P P P P P P P P	Ele.:
Approved with Conditions  See attached letter or requirement	Approved Fire:
	□ Gas #
Distance from Tank to Center of Flame	□ Master Plumber # □ Solid Fuel # □ SS77 9 □ Oil # □ C S77 9
Number of Tanks	The Type of License of Installer:
Gas 77	IF NQ Explain:
	Will appliance be installed in accordance with the manufacture's installation instructions?  Yes  No
☐ Direct Vent  Type UL#	Appliance Name: Konhollum.  U.L. Approved & Yes O No
☐ Metal Factory Built U.L. Listing #	Type of Fuel:  Gas Gold Solid
Type of Chimney:  Masonry Lined Factory built	Location of appliance:  Basement I Floor Attic I Roof
Telephone 378 0015 July my	Installer's name and address Kobert S Dou U.J. Mic mayory Ld. So. Nov.X.
Use of Building Date 17/1/101	Location 174 Knows We of Bui Name and address of owner of appliance Journey We 355e u

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy\_