

PERMIT ISSUED

Permit No:	Issue Date:	CBL:
0510521	MAY 23 2005	341 0029001

City of Portland, Maine - Building or Use Permit Application

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

Location of Construction:	Owner Name:	Owner Address:	Phone:
38 Carriage Ln	Cgb Properties Llc	84 County Ln	
Business Name:	Contractor Name:	Contractor Address:	Phone:
	Jerry's Plumbing & Heating	22 Ridgeview Drive Bideford	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:
		HVAC	2-5

Past Use:	Proposed Use:	Permit Fee:	Cost of Work:	CEO District:
Single Family	Single family install a Burnham Boiler	\$57.00	\$4,000.00	
Proposed Project Description:		FIRE DEPT:	INSPECTION:	
Install a Burnham boiler		<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	Use Group: <i>V</i> Type: <i>Heating</i>	

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

Permit Taken By:	Date Applied For:	<b>Zoning Approval</b>		
dmartin	05/05/2005	Special Zone or Reviews	Zoning Appeal	Historic Preservation

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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.

<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input checked="" type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> MM Date:	<input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input checked="" type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	<input 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:
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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 \_\_\_\_\_ PHONE \_\_\_\_\_

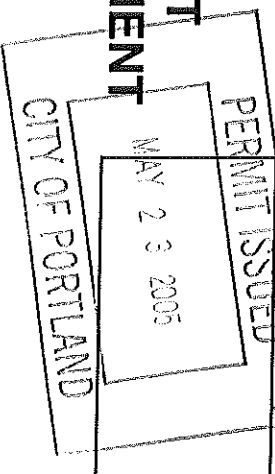
DATE \_\_\_\_\_ DATE \_\_\_\_\_ DATE \_\_\_\_\_

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



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



3419-0229

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:

*Carrige Lane Lot*

Location / CBL \_\_\_\_\_ Use of Building Rental Date 5/20/05

Name and address of owner of appliance Bassett Construction

Lot 9 1st Carrige Lane

Installer's name and address Seamus Blag & Htg 22 Ridgewood Dr

BLOOMFIELD, ME 04005 Telephone 282-2319

### Location of appliance:

- Basement
- Floor
- Attic
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: \_\_\_\_\_

U.L. Approved  Yes  No

Will appliance be installed in accordance with the manufacturer's installation instructions?  Yes  No

IF NO Explain: \_\_\_\_\_

### The Type of License of Installer:

- Master Plumber # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # 511600 7253
- Gas # \_\_\_\_\_
- Other \_\_\_\_\_

### Type of Chimney:

- Masonry Lined
- Factory built \_\_\_\_\_

- Metal
- Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent Power Vent  
Type Isenlund UL# STD 378

### Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame 5'-4" feet.

Cost of Work: \$ 4000

Permit Fee: \$ 500

**Approved**

**Approved with Conditions**

See attached letter or requirement

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

Inspector's Signature \_\_\_\_\_

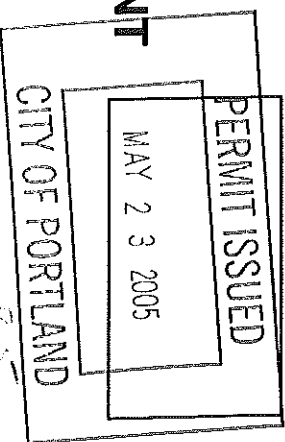
Date Approved \_\_\_\_\_

Signature of Installer \_\_\_\_\_



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:

*Carriage Lane Lot*

Location / CBL \_\_\_\_\_

Use of Building Rental Date 5/2/05

Name and address of owner of appliance \_\_\_\_\_

Beachcroft Construction

Lot 9 1st Carriage Lane

Installer's name and address \_\_\_\_\_

Jacqui's Plumbing & Htg

23 Ridgewood Dr

31005 ERIE ME 04005

Telephone 282-2319

### Location of appliance:

- Basement
- Floor
- Attic
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

### Appliance Name:

U.L. Approved  Yes  No

Will appliance be installed in accordance with the manufacturer's installation instructions?  Yes  No

IF NO Explain: \_\_\_\_\_

### The Type of License of Installer:

- Master Plumber # \_\_\_\_\_
- Solid Fuel # \_\_\_\_\_
- Oil # TY1660 7253
- Gas # \_\_\_\_\_
- Other \_\_\_\_\_

### Type of Chimney:

- Masonry Lined
- Factory built \_\_\_\_\_

Metal

Factory Built U.L. Listing # \_\_\_\_\_

Direct-Vent Power-Vent

Type Iron Lined U.L.# STD 378

### Type of Fuel Tank

- Oil
- Gas

Size of Tank 275

Number of Tanks 1

Distance from Tank to Center of Flame 5' feet

Cost of Work: \$ 4000

Permit Fee: \$ 57

Approved

Approved with Conditions

See attached letter or requirement

Fire: \_\_\_\_\_

Ele.: \_\_\_\_\_

Bldg.: \_\_\_\_\_

Inspector's Signature \_\_\_\_\_

Date Approved \_\_\_\_\_

Signature of Installer \_\_\_\_\_

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy



# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation: Portland  
 Street: Lot 92 Garrison Ln  
 Subdivision Lot #: Lot 92 Garrison Ln  
**PROPERTY OWNERS NAME**  
 Last: Brockett Construction First: \_\_\_\_\_  
 Applicant Name: Frank's Plumbing  
 Mailing Address of Owner/Applicant (if Different): 22 Ridge Road Wiscasset

**Owner/Applicant Statement**  
 I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.  
 Signature of Owner/Applicant: Frank's Plumbing Date: 5/2/05

PORTLAND PERMIT # 9372 TOWN COPY

Date Permit Issued: 5/15/05 \$ 1514.00  Double Fee  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 06003 FEE Charged

**Caution: Inspection Required**  
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

341 G 029

## PERMIT INFORMATION

**This Application is for:**

1.  NEW PLUMBING  
 2.  RELOCATED PLUMBING

**Type of Structure To Be Served:**

1.  SINGLE FAMILY DWELLING  
 2.  MODULAR OR MOBILE HOME  
 3.  MULTIPLE FAMILY DWELLING  
 4.  OTHER - SPECIFY \_\_\_\_\_

**Plumbing To Be Installed By:**

1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG.D. HOUSING DEALER/MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 5.  PROPERTY OWNER

LICENSE # 02241

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	1	Hosebibb / Sillcock	1	Bathub (and Shower)
		Floor Drain	0	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	0	Garbage Disposal
		Bidet	0	Laundry Tub
		Other: _____	1	Water Heater
<b>OR</b> TRANSFER FEE (\$6.00)		Fixtures (Subtotal) Column 2	7	Fixtures (Subtotal) Column 1
		Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Fixtures (Subtotal) Column 2	8	Fixtures (Subtotal) Column 1	1
<b>Total Fixtures</b>	<b>8</b>		
Fixture Fee	54	Transfer Fee	-
Hook-Up & Relocation Fee	54	Permit Fee	-
<b>(Total)</b>	<b>54</b>		

30.8 = 24  
 50.6 = 30  
54

19/34 (64)

TOWN COPY

# PLUMBING APPLICATION

## PROPERTY ADDRESS

Town or Plantation: Portland  
 Street: 1st 9th Garrison Ln.  
 Subdivision Lot #: PROPERTY OWNERS NAME  
Brackett Construction  
 Last: \_\_\_\_\_ First: \_\_\_\_\_

Applicant Name: Francis D'Byatt  
 Mailing Address of Owner/Applicant (if different): 22 Ridgeview Dr. Bannockburn IL 60015

### Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Signature of Owner/Applicant: Francis D'Byatt Date: 5/16/15

## PERMIT INFORMATION

This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG/D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>00244</u>
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**Caution: Inspection Required**  
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

PORTLAND PERMIT # 9371 TOWN COPY  
 Date Permit Issued: 5/15/15 \$ 151.00  If Double Fee Charged  
 Local Plumbing Inspector Signature: Francis D'Byatt L.P.I. # 0623

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2	Number	Column 1
		Type of Fixture		Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  <b>OR</b> HOOK-UP: to an existing subsurface wastewater disposal system.  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	1	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor	0	Garbage Disposal
		Bidet	0	Laundry Tub
		Other: _____	1	Water Heater
Fixtures (Subtotal) Column 2		7	Fixtures (Subtotal) Column 1	
Fixtures (Subtotal) Column 2		8	Fixtures (Subtotal) Column 1	
Total Fixtures		1	Fixtures (Subtotal) Column 2	
TRANSFER FEE [(\$6.00)]		1	Transfer Fee	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Fixture Fee	54
Transfer Fee	1
Hook-Up & Relocation Fee	54
Permit Fee (Total)	109

300 = 28  
 500 = 30  
 54

TOWN COPY

# ELECTRICAL PERMIT

## City of Portland, Me.



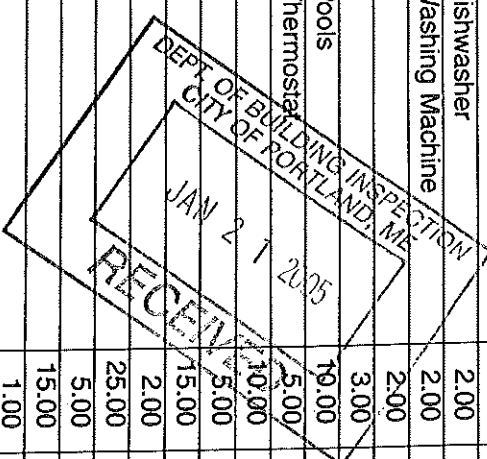
To the Chief Electrical Inspector, Portland Maine:  
 The undersigned hereby applies for a permit to make electrical installations  
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,  
 National Electrical Code and the following specifications:

Date 1.21.05  
 Permit # 2005 4071  
 CBL # 341625

LOCATION: 38 Carriage Lane. Lot 9 METER MAKE & # \_\_\_\_\_  
 CMP ACCOUNT # \_\_\_\_\_ OWNER D.A. Brackett  
 TENANT \_\_\_\_\_ PHONE # \_\_\_\_\_

TOTAL EACH FEE

OUTLETS	Receptacles	30	Switches	10	Smoke Detector	20
FIXTURES	10 Incandescent		Fluorescent		Strips	.20
SERVICES	Overhead	1	Underground		TTL AMPS	<800 15.00 >800 25.00
Temporary Service	Overhead		Underground		TTL AMPS	25.00
METERS	3 (number of)					25.00
MOTORS	(number of)					25.00
RESID/COM	Electric units		Interior		Exterior	1.00
HEATING	oil/gas units		Cook Tops		Wall Ovens	5.00
APPLIANCES	Ranges	2	Water heaters	2	Fans	2.00
	Insta-Hot		Disposals	2	Dishwasher	2.00
	Dryers		Compactors	2	Washing Machine	2.00
	Others (denote)					2.00
MISC. (number of)	Air Cond/win				Pools	3.00
	Air Cond/cent				Thermostats	19.00
	HVAC		EMS			5.00
	Signs					10.00
	Alarms/res					5.00
	Alarms/com					15.00
	Heavy Duty(CRKT)					2.00
	Circus/Carry					25.00
	Alterations					5.00
	Fire Repairs					15.00
	E Lights					1.00
	E Generators					20.00
PANELS	Service	3	Remote		Main	4.00
TRANSFORMER	0-25 Kva					5.00
	25-200 Kva					8.00
	Over 200 Kva					10.00
	MINIMUM FEE/COMMERCIAL	45.00			TOTAL AMOUNT DUE	
					MINIMUM FEE	35.00
						80.00



CONTRACTORS NAME Kella Grant MASTER LIC. # \_\_\_\_\_  
 ADDRESS 34 HETS way - Gorham - LIMITED LIC. # 52016780  
 TELEPHONE 833-8200  
 SIGNATURE OF CONTRACTOR [Signature]