

Permit No. _____
 Zone: _____ CBL: _____
 Zoning Approval: 01/012/013
 Special zone or reviews: _____
 11/3/96

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: 11/30/96

CEO DISTRICT

7

K. Carrillo

Location of Construction: 360 Ray Street Units 11, 12, 13, Bldg. D Ray Street Owner: Rtsbara Bros, Const, Co. Phone: 883-5528		Owner Address: P.O. Box 485, Scarborough 04074 Contractor Name: Rtsbara		Past Use: Vacant Lot	
Proposed Use: 3 Condo Units		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: _____ Type: 54		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Signature: _____ Date: _____	
COST OF WORK: \$195,000.00 PERMIT FEE: \$95.00		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Proposed Project Description: Construct 3 Condo Units - foundation is already in place Fallbrook Condominiums	
Address: _____ Phone: _____		Date Applied For: 10/30/96		Permit Taken By: Vicki Dover	

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 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 provisions of the code(s) applicable to such permit

Call Robin Lamb 883-5528 for P/U

PERMIT ISSUED WITH REQUIREMENTS

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
 2. Building permits do not include plumbing, septic or electrical work.
 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.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

 PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

SIGNATURE OF APPLICANT

 P.O. Box 485, Scarborough, ME 04074
 ADDRESS: _____
 DATE: 10/30/96
 PHONE: 883-5528

B111 Weeks



FILL IN AND SIGN WITH INK 970040



APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine,

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. 17 January 1997

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

Location Unit #11 Fallbrook Use of Building Condo No. Stories New Building Existing "
Name and address of owner of appliance Bisbara Construction
Installer's name and address Henrikson P. & H. P.O. Box 255 Cape Cottage Branch C.E. Telephone 799-2606
General Description of Work 04107
To install Gas fired Boiler

IF HEATER, OR POWER BOILER

Location of appliance 1st floor Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? natural gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 5'
From top of smoke pipe 4' From front of appliance 3' From sides or back of appliance 3'
Size of chimney flue Other connections to same flue
If gas fired, how vented? Power Vent Rated maximum demand per hour 103,000
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? Yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Cost of Work: 4,000.00 40.00 Permit Fee

Carl Henrikson: Master Plumber #1943

Amount of fee enclosed:



970041

FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine,

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. 17 January 1997

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 Unit #12 Fallbrook Use of Building Wondo No. Stories New Building Existing " 799-2506
Name and address of owner of appliance Risbera Construction Telephone 04107
Installer's name and address P.O. Box 255 Cape Cottage Branch C.E.
To install Gas fired boiler General Description of Work

IF HEATER, OR POWER BOILER

Location of appliance 1st floor Any burnable material in floor surface or beneath? no
If so, how protected? Kind of fuel? natural gas
Minimum distance to burnable material, from top of appliance or casing top of furnace 5'
From top of smoke pipe 4' From front of appliance 3' From sides or back of appliance 3'
Size of chimney flue Other connections to same flue
If gas fired, how vented? Power Vent Rated maximum demand per hour 103,000
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

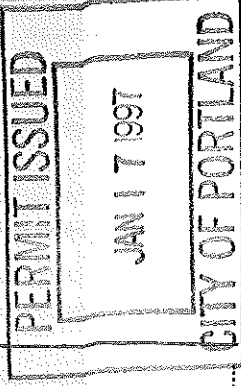
Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Cost of Work: 4,000.00 40.00 Permit Fee

Carl Henrikson Master Plumber #1943

Amount of fee enclosed?





970042

FILL IN AND SIGN WITH INK

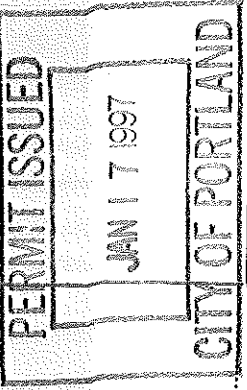
APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine,

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. 17 January 1997

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 Unit #13 Fallbrook Use of Building Condo No. Stories No. Building Existing "
Name and address of owner of appliance Risbara Construction
Installer's name and address Henrikson P & H
P.O. Box 255 Cape Eottage Branch C.E 04107 Telephone 799-2606
General Description of Work Gas Boiler



IF HEATER, OR POWER BOILER

Location of appliance 1st floor Any burnable material in floor surface or beneath? no
If so, how protected?
Minimum distance to burnable material, from top of appliance or casing top of furnace 5' Kind of fuel? natural gas
From top of smoke pipe 4' From front of appliance 3' From sides or back of appliance 3'
Size of chimney flue Other connections to same flue
Power Vent Rated maximum demand per hour 103,000
If gas fired, how vented?
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? Yes

IF OIL BURNER

Name and type of burner Labelled by underwriters' laboratories?
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank?
Type of floor beneath burner Size of vent pipe
Location of oil storage Number and capacity of tanks
Low water shut off Make No.
Will all tanks be more than five feet from any flame? How many tanks enclosed?
Total capacity of any existing storage tanks for furnace burners

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Height of Legs, if any
Skirting at bottom of appliance? Distance to combustible material from top of appliance?
From front of appliance From sides and back From top of smokepipe
Size of chimney flue Other connections to same flue
Is hood to be provided? If so, how vented? Forced or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Cost of Work: \$4000.00 40.00 Permit Fee

Carl Henrikson Master Plumber #1943

Amount of fee enclosed?