

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 02-1384 Issue Date: OCT 23 2002 CBL: 425 I013001

Location of Construction: 116 Providence St	Owner Name: Pompeo Jenna M	Phone: 2078383025
Business Name:	Contractor Name: Charles Aceto	Contractor Address: 744 Brighton Avenue Portland
Lessee/Buyer's Name:	Permit Type: HVAC	Zone:

Past Use:
Duplex
 Proposed Use:
Duplex

Permit Fee: \$30.00 Cost of Work: \$30.00 CEO District: 2
 FIRE DEPT: Approved Denied

INSPECTION Use Group: *R-3* Type: *Heating*
 Signature: *[Signature]* Date: *10/15/2002*

Proposed Project Description:
 Install Heating system in Basement/275 Gallon Oil Tank

Permit Taken By: *gad* Date Applied For: 10/15/2002

<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> <p><input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Sid Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: _____</p>	<p>Zoning Appeal</p> <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> <p>Date: _____</p>	<p>Historic Preservation</p> <p><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</p> <p>Date: _____</p>
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Action: Approved Approved w/Conditions Denied
 Signature: _____ Date: _____

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

Application ID Number: 2-1184

Department: Building

Status: Approved with Conditions

Reviewer: Tommy Munson

Approval Date: 10/22/2002

Comments:

Given On Date: 10/22/2002

OK to Issue Permit

Name: Tommy Munson

Date: 10/22/2002

Date 2:

Conditions Section:

Agree Now

Add New Condition

Delete Condition

Installation shall comply with 1993 BOCA Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules.

Create Date: 10/17/2002 By: god

Update Date: 10/22/2002 By: lmm

Buttons: Delete, Save, Close



FILL IN AND SIGN WITH INK

02-1184

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED
OCT 23 2002

CITY OF PORTLAND

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:

425 I-013

Location 116-118 Providence Use of Building Duplex house Date _____
Name and address of owner of appliance _____

Installer's name and address Charles D Aceto
244 Brighton Ave

Telephone 838-3025

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Newport Steel Boiler
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 # NIS 30001380
- Solid Fuel # _____
- Oil # _____
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
- Factory built Power Vent
- Metal
- Factory Built U.L. Listing # _____
- Direct Vent
- Type _____ UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275 Gal
Number of Tanks 2 Tank vented

Distance from Tank to Center of Flame 6 feet.

30.00

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer Chel Co. Aceto

PLUMBING APPLICATION

PROPERTY ADDRESS
Town Or Plantation: PORTLAND
Street: 116 PROVIDENCE ST
Subdivision Lot #: 8308

PROPERTY OWNERS NAME
Last: POMEROY First: LOUISA
Applicant Name: C. DAVID KEG & HTS, INC.
Mailing Address of Owner/Applicant (if Different): 14 JONES BEST DR - PORTLAND, ME 04103

PORTLAND Date Issued: 06/10/12 TOWN COPY
8223 \$ 1121610 FEE Charged
L.P.I. # 06180
Local Plumbing Inspector Signature: [Signature]

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 Inspector to deny a Permit.
Signature of Owner/Applicant: [Signature] Date: 9/10/12

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: [Signature] Date Approved: 12-5-12

PERMIT INFORMATION

This Application is for:

1. NEW PLUMBING
 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 # 117167

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number		Number	
HOO-K-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOO-K-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	2	Hosebibb / Sillcock	2	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	2	Sink
		Drinking Fountain	4	Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	2	Clothes Washer
		Grease / Oil Separator	2	Dish Washer
		Dental Cuspidor	2	Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
Fixtures (Subtotal) Column 2		18	Fixtures (Subtotal) Column 1	
Fixtures (Subtotal) Column 2		2	Fixtures (Subtotal) Column 2	
Total Fixtures		20	Total Fixtures	
Transfer Fee (\$6.00)		\$ 120.00	Fixtures Fee	
		\$	Hook Fee	
		\$	Total	
		\$ 120.00		

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE