

PERMIT ISSUED

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

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|------------------------------|-----------------------|---------------------|
| Permit No: 01-1561 IAN | Issue Date: 3 2002 | CBL: 415 A001001 |
|------------------------------|-----------------------|---------------------|

| | | | |
|--|---|---|----------------------|
| Location of Construction: 6 Ledgewood | Owner Name: Piersol, Mathew | Owner Address: 6 Ledgewood | Phone: |
| Business Name: n/a | Contractor Name: Flinks Plumbing & Heating | Contractor Address: 358 Preble Street South Portland | Phone: 2077412848 |
| Lessee/Buyer's Name: n/a | Phone: n/a | Permit Type: HVAC | Zone: |

| | | | | |
|----------------------------|---|--|---|--------------------|
| Past Use: Single Family | Proposed Use: Single Family / Install Peerless / with Beckett 275 gallon oil tank. | Permit Fee: \$30.00 | Cost of Work: \$0.00 | CEO District: 2 |
| | | FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied N/A | INSPECTION: Use Group: R3 Type: SB Heating Signature: TMM/SW | |

| | | |
|--|------------|------------|
| Proposed Project Description: Install Heating System | Signature: | Signature: |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | | |
| Signature: | Date: | |

| | | |
|------------------------|---------------------------------|------------------------|
| Permit Taken By: gg | Date Applied For: 12/27/2001 | Zoning Approval |
|------------------------|---------------------------------|------------------------|

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|--|---|---|--|
| 1. This permit application does not 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.. | Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: | Zoning Appeal <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 Date: | Historic Preservation <input checked="" 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: |
|--|---|---|--|

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.

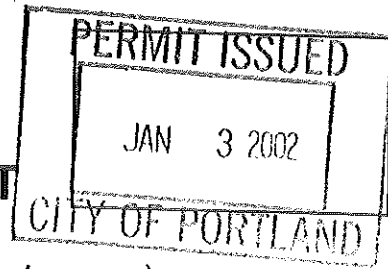
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|------------------------|---------|------|-------|
| SIGNATURE OF APPLICANT | ADDRESS | DATE | PHONE |
|------------------------|---------|------|-------|

| | | |
|---|------|-------|
| RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE | DATE | PHONE |
|---|------|-------|



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



415 A001

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 #6 Edgewood Portland ME Use of Building Single Dwelling Date 10/27/01
Name and address of owner of appliance MATT PERISSI

Installer's name and address Frank's plumbing & heating 358 PEEBLE ST SWIT PORTLAND ME
Telephone 741-2848

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: PERISSI/WITHBECKETT

U.L. Approved Yes No

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

IF NO Explain: _____

The Type of License of Installer:

- Master Plumber # _____
- Solid Fuel # _____
- Oil # MS 20005928
- Gas # _____
- Other _____

Type of Chimney:

- Masonry Lined
- Metal
- Direct Vent

Factory built _____

Factory Built U.L. Listing # _____

Type _____ UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank 275 Gallon

Number of Tanks 01

Distance from Tank to Center of Flame 75 feet.

30.00

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer [Signature]