



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, October 30, 1987

PERMIT ISSUED

NOV 2 1987

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:

Location Corner Casco & Congress of Building office No. Stories New Building Existing
Name and address of owner of appliance Hampstead Outlook Hampstead Hospital - Phil Kubiuk
Installer's name and address Don Brown - John Roberts Road, Portland Telephone 797-2919

General Description of Work

To install oil burner

IF HEATER, OR POWER BOILER

Location of appliance basement Any burnable material in floor surface or beneath? no.
If so, how protected? Kind of fuel? #2
Minimum distance to burnable material, from top of appliance or casing top of furnace 4'
From top of smoke pipe 4' From front of appliance concrete From sides or back of appliance concrete
Size of chimney flue 14" Other connections to same flue no
If gas fired, how vented? Rated maximum demand per hour
Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Carlin 801 CRD Labeled by underwriters' laboratories? yes
Will operator be always in attendance? Does oil supply line feed from top or bottom of tank? bottom
Type of floor beneath burner concrete Size of vent pipe
Location of oil storage vault to left side Number and capacity of tanks 1 tank 4,000 gal
Low water shut off yes Make McDonald Miller No
Will all tanks be more than five feet from any flame? yes How many tanks enclosed? 1
Total capacity of any existing storage tanks for furnace burners 4,000

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? Forward or gravity?
If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed: 95.00 15,000 est. cost

APPROVED

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

INSPECTION FILE APPLICANT'S ASSESSOR'S COPY
Signature of Installer Alan J. Onellito

500509

CITY OF PORTLAND

BUILDING PERMIT APPLICATION

1100 Front St. Portland, OR 97203  
775-2535  
SUBCONTRACTOR

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

Use: \_\_\_\_\_

Inside Div. Index \_\_\_\_\_

Map Code \_\_\_\_\_

Type: \_\_\_\_\_

Estimated Cost \_\_\_\_\_

Value: \_\_\_\_\_

Fee: \_\_\_\_\_

Subdivision: \_\_\_\_\_

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

Address: \_\_\_\_\_

Block: \_\_\_\_\_

Permit Registration: \_\_\_\_\_

Ownership: \_\_\_\_\_

Type of Use: 10 tents for Volkswagen

Roof: \_\_\_\_\_

Foundation: \_\_\_\_\_

Columns: \_\_\_\_\_

Heating: \_\_\_\_\_

Electrical: \_\_\_\_\_

Plumbing: \_\_\_\_\_

Swimming Pools: \_\_\_\_\_

Zoning: \_\_\_\_\_

1. Ceiling Joist Size: \_\_\_\_\_
2. Ceiling Strapping Size: \_\_\_\_\_
3. Type Ceiling: \_\_\_\_\_
4. Insulation Type: \_\_\_\_\_
5. Ceiling Height: \_\_\_\_\_

1. Truss or Rafters Size: \_\_\_\_\_
2. Sheathing Type: \_\_\_\_\_
3. Roof Covering Type: \_\_\_\_\_
4. Other: \_\_\_\_\_

- Type: \_\_\_\_\_
- Type of Heat: \_\_\_\_\_
- Service Entrance Size: \_\_\_\_\_

1. Approval of soil test if required: \_\_\_\_\_
2. No. of Tubs or Showers: \_\_\_\_\_
3. No. of Fixtures: \_\_\_\_\_
4. No. of Lavatories: \_\_\_\_\_
5. No. of Other Fixtures: \_\_\_\_\_

1. Type: \_\_\_\_\_
2. Pool Size: \_\_\_\_\_
3. Must conform to National Electrical Code and State Law: \_\_\_\_\_

Permit Received By: Joyce M. Rinaldi

Signature of Applicant: Michael W. [Signature]

Signature of CEO: \_\_\_\_\_

Date: 11 May 1988

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

1. Sills Size: \_\_\_\_\_
2. Girders Size: \_\_\_\_\_
1. Lally Column Spacing: \_\_\_\_\_
4. Joists Size: \_\_\_\_\_
5. Framing Type: \_\_\_\_\_
6. Floor Sheathing Type: \_\_\_\_\_
7. Other Material: \_\_\_\_\_
1. Spacing Size: \_\_\_\_\_
2. No. windows: \_\_\_\_\_
3. No. Doors: \_\_\_\_\_
4. E. after Glass: \_\_\_\_\_
5. E. after Glass: \_\_\_\_\_
6. Corner Posts Size: \_\_\_\_\_
7. Insulation Type: \_\_\_\_\_
8. Sheathing Type: \_\_\_\_\_
9. Siding Type: \_\_\_\_\_
10. Masonry Materials: \_\_\_\_\_
11. Other Materials: \_\_\_\_\_
1. Spacing: \_\_\_\_\_
2. Header Size: \_\_\_\_\_
3. Wall Covering Type: \_\_\_\_\_
4. Fire Wall if required: \_\_\_\_\_
5. Other Material: \_\_\_\_\_

1100 Front St

White Tax Assessor

Yellow GPCOG

Inspection Date

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