

109. BROADWAY (339-5.4)
181-183



SHAW-WALKER

First cut # 9201R • Half cut # 9202R • Third cut # 9203R • Full cut # 9203R



FILL IN AND SIGN WITH INK

PERMIT ISS
JUN 23 1960
CITY of PORT

APPLICATION FOR PERMIT FOR
HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, June 23, 1960

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 153 Broadway Use of Building Dwelling No. Stories 1 Max. Build Existing " "
Name and address of owner of appliance Mary McDonald, 103 Broadway
Installer's name and address Pallotta Oil Co. 112 Exchange St. Telephone

General Description of Work

To install Oil burning equipment in connection with existing gravity hot water heating system (conversion)

IF HEATER, OR POWER BOILER

Location of appliance Any burnable material in floor surface or beneath?
If so, how protected? Kind of fuel?
Minimum distance to burnable material, from top of appliance or casing top of furnace
From top of smoke pipe From front of appliance From sides or back of appliance
Size of chimney flue Other connections to same flue
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?

IF OIL BURNER

Name and type of burner Fluid-Heat-gun type 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 1 1/2"
Location of oil storage basement Number and capacity of tanks 1-27 gal.
Low water shut off Make No.
Will all tanks be more than five feet from any flame? yes 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

Amount of fee enclosed? 2.00 (\$3.00 for one heater, etc., 50 cents additional for each additional heater, etc., in building at same time.)

APPROVED
[Signature]
June 23 1960

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

Pallotta Oil Co.
by: [Signature]

CS 300

INSPECTION COPY

Signature of Installer

F.M.

Permit No. 601
 Location 103 E. Broadway
 Owner Mary McDonald
 Date of permit 6/27/69
 Approved J.P. Lee

NOTES

1 Vent Pipe	/
2 Flue	/
3 Chimney	/
4 Name Plate	/
5 Stack Cap	/
6 Blast	/
7 Pressure Control	/
8 Air Flow	/
9 Valves in Supply Line	/
10 Quality of Work	/
11 Regulator & supports	/
12 Test & Distances	/
13 Oil Case	/
14 Test Card	/
15 Low Water Switch	/

City of New York
 Department of Buildings
 Office of the Building Inspector
 100 Nassau Street, New York 10038

Name of Applicant: _____
 Name of Contractor: _____
 Name of Inspector: _____
 Date of Inspection: _____
 Description of Work: _____
 Remarks: _____
 Signature of Inspector: _____
 Title: _____