

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3626

PROPERTY ADDRESS

Town Of Plantation: Portland

Street Subdivision Lot #: Lot 2, Allen Ave

PROPERTY OWNERS NAME

Last: Libby First: Bob

Applicant Name: Carl J. Henriksen

Mailing Address of Owner/Applicant (If Different):
250 11th St, Cape College, Me
04107

PORTLAND PERMIT # 3,173 TOWN COPY

Permit Issued: 11-10-87 Fee: 13.14/10.0 Double Fee Charged:

Local Plumbing Inspector Signature: _____ L.P.I. # 171213

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and I persist in that any falsification is reason for the revocation of this permit.

Signature of Owner/Applicant: _____ Date: 11-10-87

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: _____ Date Approved: MAY 4 1988

PERMIT INFORMATION

This Application is for:

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

LICENS. # 01983

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HCOOK-UP: to public sewer, in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HCOOK-UP: to an existing subsurface wastewater disposal system.	2	Hosebibb / Sillcock	2	Bathtub (incl. Shower)
		Floor Drain		Shower (Separate)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
Number of Hook-Ups & Relocations: _____ Hook-Up & Relocation Fee: _____		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Grease/Oil Separator	1	Dish Washer
		Dental Cusplac	1	Garbage Disposal
	Bidot		Laundry Tub	
	Other: _____		Water Heater	
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
			Fixtures (Subtotal) Column 2	
			Total Fixtures	
			Fixtures Fee	
			Hook-Up & Relocation Fee	
			Permit Fee (Total)	

TOWN COPY



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, March 22, 1989

PERMIT 138

MAR 23 1989

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 Lot #2 Allen Ave Use of Building single family No. Stories 1 New Building Existing
Name and address of owner of appliance Dennis Lebbey same
Installer's name and address Joe Henrikson 39 High View Rd Cape Elizabeth Telephone 799-7449

General Description of Work

To install new heating system forced hot water

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?
Minimum distance to burnable material, from top of appliance or casing top of furnace 5 to 5
From top of smoke pipe 4 From front of appliance 4 From sides or back of appliance 5 to 6
Size of chimney flue 8 Other connections to same flue no
If gas fired, how vented? no 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 Labelled by underwriters' laboratories? yes
Will operator be always in attendance? yes 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 at 275 gallons
Low water shut off yes Make Honeywell 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 275

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 smoke pipe
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?

APPROVED: [Signature]

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] 01943