



State of Maine

DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
BOARD OF ELEVATOR AND TRAMWAY SAFETY

**REGISTRATION # EL36495**  
MAIN LAND STRUCTURES

MAIN LAND STRUCTURES  
WILSON HEIGHTS CONDO  
PORTLAND

Type: PASSENGER  
Speed Allowed (FPM): 40  
Capacity Allowed (lbs): 2500

To Report an Accident involving this elevator, call: 1-888-580-5754  
To Speak with Board Staff regarding this elevator, call: 207/624-8672

ISSUE DATE  
Sep 14, 2006

*Anne L. Head*

Director, Office of Licensing & Registration  
Authorizing signature

EXPIRATION DATE  
Aug 31, 2007

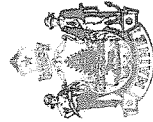
ME302619

Please make note of your registration number and reference this number in any future correspondence with the BOARD OF ELEVATOR & TRAMWAY SAFETY. Should you require further information, please call (207) 624-8629.

**NOTICE OF ACCIDENTS:** Pursuant to 32 M.R.S.A. § 15211 each elevator or tramway accident caused by equipment failure resulting in injury to a person or in substantial damage to equipment, must be reported by the owner or lessee to the Office of Licensing and Registration at **1-888-580-5754 immediately**. This telephone number is available 7 days a week, 24 hours a day.

PLEASE NOTE: 32 M.R.S.A. § 15229 requires that elevators or tramways that do not have a current and valid certificate displayed in the elevator or tramway be taken out of service.

Website: [www.MaineProfessionalReg.org](http://www.MaineProfessionalReg.org)



**City of Portland, Maine - Building or Use Permit**

589 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Location of Construction:		Permit No:	Date Applied For:	CBI:
56 Wilson St		05-0632	05/25/2005	003 N009001
Business Name:		Owner Address:	Phone:	
Portland Airconditioning, Inc.		5 Webster Rd		
Lease/Buyer's Name		Contractor Address:	Phone:	
		205 Lincoln St. S. Portland	(207) 767-4567	
		Permit Type:		
		ITVAC		
Proposed Use:		Proposed Project Description:		
4 unit Condo install a Direct Vent Gas Baxi Luna Boiler		install a Direct Vent Gas Baxi Luna Boiler		

Dept: Zoning Status: Approved  
 Note:

Reviewer: Tammy Munson Approval Date: 06/09/2005  
 Ok to Issue:

Dept: Building Status: Approved with Conditions  
 Note:

Reviewer: Tammy Munson Approval Date: 06/09/2005  
 Ok to Issue:

1) The installation must comply with the State of Maine Gas Regulations.

Dept: Fire Status: Approved  
 Note:

Reviewer: Jay Kelley Approval Date: 05/25/2005  
 Ok to Issue:

1) Install to manufactures specifications

Dept: Fire Status:  
 Note:

Reviewer: Approval Date:  
 Ok to Issue:

# PLUMBING APPLICATION

Date Permit Issued: 5/11/05 \$ 125.00 Double Fee Charged

Local Plumbing Inspector Signature: Janice Bork L.P.I. # 01712

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER TWO YEARS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

PROPERTY ADDRESS  
 Town or Platination: Portland, Maine  
 Street: 160 Wilson Street  
 Subdivision Lot #: 160 Wilson Street

PROPERTY OWNERS NAME  
 Last: McDonald First: MECHIE  
 Applicant Name: Portland Airconditioning  
 Mailing Address of Owner/Applicant (If Different): 205 Lincoln St  
Portland, ME 04106

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 Inspectors to deny a permit.  
 Signature of Owner/Applicant: [Signature] Date: 5/11/05

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved: \_\_\_\_\_  
 Caution: Inspection Required  
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

## PERMIT INFORMATION

This Application is for

1.  NEW PLUMBING  
 2.  RELOCATED PLUMBING

Type of Structure To Be Served:  
 1.  SINGLE FAMILY DWELLING  
 2.  MODULAR OR MOBILE HOME  
 3.  MULTIPLE FAMILY DWELLING  
 4.  OTHER - SPECIFY \_\_\_\_\_

Type of Structure To Be Installed By:  
 1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG. HOUSING DEALER/MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 PROPERTY OWNER

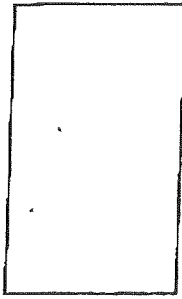
DEPT. OF BUILDING INSPECTION  
 CITY OF PORTLAND, ME  
 MAY 11 2005  
 RECEIVED  
 LICENSE # M590909362

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.  OR  HOOK-UP: to an existing subsurface wastewater disposal system.  PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Hosebibb / Sillcock	8	Bathub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	8	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	8	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	4	Clothes Washer
		Grease / Oil Separator	4	Dish Washer
		Dental Cuspidor	4	Garbage Disposal
		Bidet		Laundry Tub
		Other:	4	Water Heater
TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2	40	Fixtures (Subtotal) Column 1
		SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			252	Permit Fee (Total)



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

003/10/09

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 / CBL 22 Lehigh Ave ME Use of Building RETAIL Date 12/19/05

Name and address of owner of appliance 22 Lehigh Ave Portland ME

Installer's name and address Wesley J. Wessels 1000 1/2 St Portland ME Telephone 503-763-4653

**Location of appliance:**  
 Basement  Floor  
 Attic  Roof

**Type of Fuel:**  
 Gas  Oil  Solid

**Appliance Name:** Water Heater  
 UL Approved  Yes  No

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

IF NO Explain: \_\_\_\_\_

**Type of Chimney:**  
 Masonry Lined  
 Factory built \_\_\_\_\_

Metal  
 Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
 Type UV UL# \_\_\_\_\_

**Type of Fuel Tank**  
 Oil  
 Gas

Size of Tank \_\_\_\_\_

Number of Tanks \_\_\_\_\_

Distance from Tank to Center of Flame \_\_\_\_\_ feet

Cost of Work: \$ 20,000.00

Permit Fee: \$ \_\_\_\_\_

**The Type of License of Installer:**  
 Master Plumber # \_\_\_\_\_  
 Solid Fuel # \_\_\_\_\_  
 Oil # \_\_\_\_\_  
 Gas # WNT434  
 Other \_\_\_\_\_

**Approved**

Fire: \_\_\_\_\_

Elec.: \_\_\_\_\_

Bldg.: \_\_\_\_\_

**Approved with Conditions**

See attached letter or requirement

Inspector's Signature \_\_\_\_\_ Date Approved \_\_\_\_\_