

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING INSPECTION

PERMIT

PERMIT ISSUED
Permit Number: 051070
AUG 19 2005
CITY OF PORTLAND

This is to certify that Peninsula Community Lp / Granite Corp
has permission to Install new Munchkin gas direct vent heater in basement of the permit residence
AT 133 Anderson St

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is laid or occupied closed-in.
HEAVY NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Capt. Greg Cass 8-10-05
Health Dept.
Appeal Board
Other

Handwritten signature and date 8/14/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-1070	Issue Date: PERMIT IS DEAD	CBL: 012 B009001
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Location of Construction: 133 Anderson St	Owner Name: Peninsula Community Lp	Owner Address: 707 Sable Oaks Dr	Phone: f
Business Name:	Contractor Name: Granite Corporation	Contractor Address: PO Box 370 Oakland	Phone: 2074659229
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: B-5

Past Use: three unit residence	Proposed Use: three unit residence with new Munchkin gas direct vent heater in basement	Permit Fee: \$147.00	Cost of Work: \$14,000.00	CEO District: 1
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Proposed Project Description: Install new Munchkin gas direct vent heater in basement of three unit residence <i>legal use; entire property consists of 2-Three family bldgs with conditions</i>	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>Chad Carr</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Heating</i> <i>State Gas Regs</i> Signature:
	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied Signature: Date:	

Permit Taken By: jharris	Date Applied For: 07/28/2005
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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 checked="" type="checkbox"/> MM <input type="checkbox"/> Date: <i>8/19/05</i>	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:
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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.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

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Permit No: 05-1070	Date Applied For: 07/28/2005	CBL: 012 B009001
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Location of Construction: 133 Anderson St	Owner Name: Peninsula Community Lp	Owner Address: 707 Sable Oaks Dr	Phone:
Business Name:	Contractor Name: Granite Corporation	Contractor Address: PO Box 370 Oakland	Phone (207) 465-9229
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: three unit residence with new Munchlun gas direct vent heater in basement	Proposed Project Description: Install new Munchkin gas direct vent heater in basement of three unit residence
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Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 08/09/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/16/2005
Note: **Ok to Issue:**

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

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 08/10/2005
Note: **Ok to Issue:**

1) Instalation to comply with NFPA 54



FILL IN AND SIGN WITH INK

12 B 909

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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 / CBL 31 Anderson St 12 B 9 Use of Building Apartment Date 7/7/05
 Name and address of owner of appliance Peninsula Community LP LLC 510 Cumberland Ave Portland ME
 Installer's name and address Granite Corp PO Box 370 Oakland ME 04963 Telephone 207.465.9229

Location of appliance:

- Basement Floor
 Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name: Munchkin 199,000 BTU

U.L. Approved Yes No

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

IF NO Explain: N/A

The Type of License of Installer:

- Master Plumber # _____
 Solid Fuel # _____
 Oil # _____
 Gas # DNT 3466
 Other _____

Type of Chimney:

Masonry Lined N/A
Factory built _____

Metal N/A
Factory Built U.L. Listing # _____

Direct Vent PVC
Type _____

Type of Fuel Tank

- Oil N/A
 Gas N/A

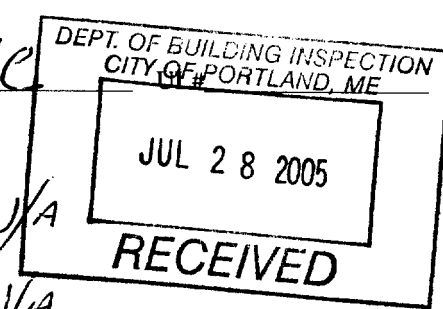
Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

Cost of Work: \$ 14,000

Permit Fee: \$ 147.00



Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy