

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-1089	Issue Date: AUG - 7 2006	Permit Issued: 013 G010001
Owner Name: MAJE IN MAINE LLC	Owner Address: APT H 605 8617 PINE ST	Phone:
Contractor Name: Pine State Plumbing & Heating	Contractor Address: PO Box 6308 Scarborough	Phone: 2073212261
Lessee/Buyer's Name	Phone:	Permit Type: HVAC
		Zone:

Past Use: Residential 3 unit	Proposed Use: Residential 3 unit install a Baxi Luna w/ direct vent, natural gas	Permit Fee: \$210.00	Cost of Work: \$18,500.00	CEO District: 1	
Proposed Project Description: Install a Baxi Luna w/ direct vent, natural gas		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied NFPA 54	INSPECTION: Use Group: HVAC Type: 2/31/06 Signature: [Signature]		
		Signature: [Signature]			
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)					
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied					
Signature: _____ Date: _____					

Permit Taken By: dmartin	Date Applied For: 07/20/2006	Zoning Approval		
-----------------------------	---------------------------------	------------------------	--	--

<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 type="checkbox"/> MM <input type="checkbox"/> Date: _____	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 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: _____
---	---	---	---

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.

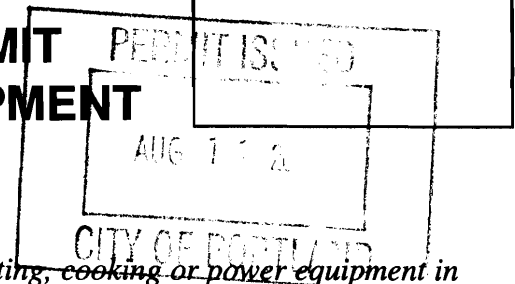
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



FILL IN AND SIGN WITH INK

13 G 10

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 223 Congress st 13G10 Trokay Use of Building Apt. Bldg. Date 7/20/06
 Name and address of owner of appliance Mike Salisbury 223 Congress st Portland
 Installer's name and address Pine State P+H Telephone 883-1200

Location of appliance:
 Basement Floor walking each unit
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: Baxi Luna HT 330-F
 U.L. Approved Yes No

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

IF NO Explain: _____

The Type of License of Installer:
 Master Plumber # _____
 Solid Fuel # _____
 Oil # _____
 Gas # PAT 1218
 Other _____

Type of Chimney:
 Masonry Lined
 Factory built _____
 Metal
 Factory Built U.L. Listing # _____
 Direct Vent out Rear of Building
 Type _____ UL# Through wall.

Type of Fuel Tank
 Oil
 Gas

Size of Tank Natural gas.

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 18,500

Permit Fee: \$ 210^{00/00}

Approved

Approved with Conditions

Fire: _____
 Ele.: _____
 Bldg. [Signature]

See attached letter or requirement

 Inspector's Signature Date Approved

Signature of Installer [Signature]