

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-1747	Issue Date:	CBL: 013 G010001
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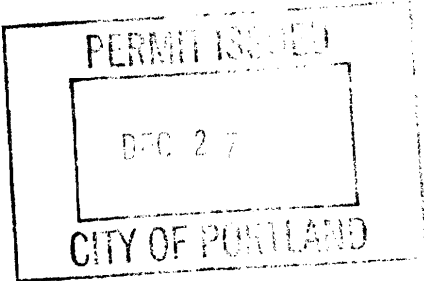
Location of Construction: 223 CONGRESS ST	Owner Name: MAJE IN MAINE LLC	Owner Address: APT H 605 8617 PINE ST	Phone:
Business Name:	Contractor Name: Pine State Plumbing & Heating	Contractor Address: PO Box 6308 Scarborough	Phone 2073212261
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: B2b

Past Use: Multi Use - Legal use: 1st floor tavern with office and 3 residential dwelling units in the rest of the building	Proposed Use: Multi Use - install a Direct Vent Baxi Luna Boiler	Permit Fee: \$150.00	Cost of Work: \$12,490.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied N.F.P.A. 54	INSPECTION: Use Group: U Type: HVAC State Gas Reg's	

Proposed Project Description: install a Direct Vent Baxi Luna Boiler	Signature: <i>Craig Cass</i>	Signature: <i>[Signature]</i>
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: Idobson	Date Applied For: 12/04/2006	Zoning Approval
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<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: 12/5/06	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:
	to remain same as scanned		



CERTIFICATION

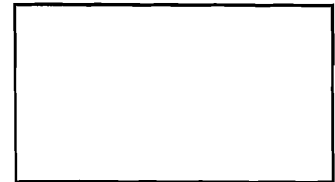
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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

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 225 Congress St. Use of Building Apt. building Date 12/4/06
 Name and address of owner of appliance Mike Salisbury Maje in Maine LLC.
 Installer's name and address Pine State P+H PO Box 6308 Scarborough ME
04070-6308 Telephone 883-1200

Location of appliance:

- Basement Floor
 Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name: Baxi Luna

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 # PNT1218
 Other _____

Type of Chimney:

- Masonry Lined
 Factory built _____

- Metal
 Factory Built U.L. Listing # _____

- Direct Vent
 Type concentric UL# _____

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: \$ 12,490.00

Permit Fee: \$ 150

Approved

Fire: _____
 Ele.: _____
 Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer [Signature]

Inspector's Signature _____

Date Approved _____

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation	
Street	
Subdivision Lot #	

PROPERTY OWNERS NAME

Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

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 _____ Date _____

PORTLAND PERMIT # 10095 TOWN COPY

Date Permit Issued: 11 22 06 \$ 3400 If Double Fee Charged

Jeanie Bouke L.P.I. # 0733
Local Plumbing Inspector Signature

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 _____

PERMIT INFORMATION

This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # _____
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)