

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

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

Permit No: 10-0960	Issue Date:	CBL: 013 K045001
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Location of Construction: 109 SHERIDAN ST	Owner Name: NOBILE LINDA R & MICHAEL P	Owner Address: 41 JOHANSEN ST	Phone:
Business Name:	Contractor Name: Mike MacDonald Heating Service	Contractor Address: 87 Penn Ave South Portland	Phone: 2073187079
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-1

Past Use: 3 Unit Residential <i>Legal 3 unit</i>	Proposed Use: 3 Unit Residential - install 3 new Heating unit(s) in each apartment Rinnai	Permit Fee: \$170.00	Cost of Work: \$14,889.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>*See Conditions</i>	INSPECTION: Use Group: <i>U</i> Type: <i>HVAC</i> <i>State Gas Reg's</i>	

Proposed Project Description: install 3 new Heating unit(s) in each apartment Rinnai	Signature: <i>[Signature]</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: 08/06/2010	<b>Zoning Approval</b>	
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: <i>8/11/10</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>8/11/10</i></p>	<p>Historic Preservation</p> <p><input checked="" type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>[Signature]</i></p>
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**PERMIT ISSUED**

AUG 17 2010

City of Portland

**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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<b>Permit No:</b> 10-0960	<b>Date Applied For:</b> 08/06/2010	<b>CBL:</b> 013 K045001
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<b>Location of Construction:</b> 109 SHERIDAN ST	<b>Owner Name:</b> NOBILE LINDA R & MICHAEL P	<b>Owner Address:</b> 41 JOHANSEN ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Mike MacDonald Heating Service	<b>Contractor Address:</b> 87 Penn Ave South Portland	<b>Phone:</b> (207) 318-7079
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

<b>Proposed Use:</b> 3 Unit Residential - install 3 new Heating unit(s) in each apartment Rinnai	<b>Proposed Project Description:</b> install 3 new Heating unit(s) in each apartment Rinnai
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 08/11/2010
<b>Note:</b>			<b>Ok to Issue:</b> ✓
1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.			
2) This property shall remain a three family dwelling. Any change of use shall require a separate permit application for review and approval.			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 08/17/2010
<b>Note:</b>			<b>Ok to Issue:</b> ✓
1) The installation must comply with the State of Maine Gas Regulations.			
<b>Dept:</b> Fire	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Capt Keith Gautreau	<b>Approval Date:</b> 08/13/2010
<b>Note:</b>			<b>Ok to Issue:</b> ✓
1) Install shall comply with all manufacture's specifications.			
2) Install shall comply with NFPA 54. A compliance letter is required			

**PERMIT ISSUED**

AUG 17 2010

City of Portland



FILL IN AND SIGN WITH INK

PERMIT ISSUED  
AUG 17 2010

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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 / CBL 109-111 Sheridan St Use of Building Apartment Building Date 8-6-10  
 Name and address of owner of appliance David Hoops 109- Apt # 1 (First Floor)  
Portland, Me.  
 Installer's name and address Mike McDonald Heating Service LLC 160 Fellows  
St. Jo. Portland, Me. 04106 Telephone 828-1608 318-7079

**Location of appliance:**

- Basement
  - Floor
  - Attic
  - Roof
- gas first and second*

**Type of Fuel:**

- Gas
- Oil
- Solid

**Appliance Name:**

Binnai

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 # PNT5249
- Other \_\_\_\_\_

**Type of Chimney:**

- Masonry Lined
- Factory built

Metal

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

Direct Vent

Type \_\_\_\_\_ UL# \_\_\_\_\_

**Type of Fuel Tank**

- Oil
- Gas Natural

Size of Tank N/A

Number of Tanks N/A

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

Cost of Work: \$ 14889.98

Permit Fee: \$ 170

**Approved**

**Approved with Conditions**

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

Ele.: \_\_\_\_\_

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

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer

*Mike McDonald*

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy