

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0101	Issue Date:	CBL: 014 J020001
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Location of Construction: 65 Congress St	Owner Name: Papi Peter M &	Owner Address: 111 Regan Ln	Phone:
Business Name:	Contractor Name: ACL Plumbing & Heating Inc.	Contractor Address: P.O. Box 2679 So. Portland	Phone 2077678080
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: <b>R-5</b>

Past Use: Multi-family	Proposed Use: Multi-family; install direct-vent Rinnai 556 gas floor heater in Unit 1-F	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 1
<p><i>Legal 4. DU - NO change of use permitted</i></p> <p>Proposed Project Description: Install heating system</p>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>NA</i> Type:	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i> <b>2/20/03</b>	

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: kwd	Date Applied For: 02/12/2003	<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><b>Special Zone or Reviews</b></p> <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: <i>2/13/03</i>	<p><b>Zoning Appeal</b></p> <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:	<p><b>Historic Preservation</b></p> <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 \_\_\_\_\_



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



014 5020

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 65 CONGRESS ST Unit 1F Use of Building Multi-Family Date 2/12/03

Name and address of owner of appliance PETER PADI  
111 REGAN LANE PORTLAND

Installer's name and address ACL PUBG+HTG INC  
PO BOX 2679 S PORTLAND ME 04116 Telephone 767-8080

### Location of appliance:

- Basement
- Floor
- Attic
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: RINNAI 556

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 # 1046
- Other \_\_\_\_\_

### Type of Chimney:

Masonry Lined  
Factory built \_\_\_\_\_

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

Direct Vent  
Type RINNAI UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

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

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

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

30.00

### Approved

### Approved with Conditions

Fire: 4.11.07

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

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

See attached letter or requirement

Signature of Installer Allen G. Smith

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

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

Permit No: 03-0100	Issue Date:	CBL: 014 J020001
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Location of Construction: 65 Congress St	Owner Name: Papi Peter M &	Owner Address: 111 Regan Ln	Phone:
Business Name: n/a	Contractor Name: ACL Plumbing & Heating Inc.	Contractor Address: P.O. Box 2679 So. Portland	Phone 2077678080
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-6

Past Use: Multi-family	Proposed Use: Multi-family; install direct-vent Rinnai 1004 gas floor heater in 3rd floor unit	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 1
<p><i>legal 4 DU. - No change of use permitted</i></p>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>N/A</i> Type: <i>NA</i>	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
Proposed Project Description: Install heating system		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Signature: <i>[Signature]</i> Date: <i>[Signature]</i>	

Permit Taken By: kwd	Date Applied For: 02/12/2003	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: <i>OK 2/13/03</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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: <i>[Signature]</i>
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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

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

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

<b>Permit No:</b> 03-0102	<b>Date Applied For:</b> 02/12/2003	<b>CBL:</b> 014 J020001
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<b>Location of Construction:</b> 65 Congress St	<b>Owner Name:</b> Papi Peter M &	<b>Owner Address:</b> 111 Regan Ln	<b>Phone:</b>
<b>Business Name:</b> n/a	<b>Contractor Name:</b> ACL Plumbing & Heating Inc.	<b>Contractor Address:</b> P.O. Box 2679 So. Portland	<b>Phone:</b> (207) 767-8080
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> HVAC	

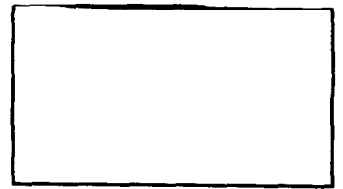
<b>Proposed Use:</b> Multi Family / Install gas heater on 2nd floor - To remain 4 dwelling units - this is not permission to change the use	<b>Proposed Project Description:</b> Install Heating System
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 02/13/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Mike Nugent	<b>Approval Date:</b> 02/20/2003
<b>Note:</b> 1) Must comply with State Gas Regs			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Lt. McDougall	<b>Approval Date:</b> 02/18/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input type="checkbox"/>



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# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



014 5020

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 65 Congress St 3rd Floor Use of Building Mult. - Family Date 2/12/03  
 Name and address of owner of appliance PETER PAPI  
111 REGAN LANE PORTLAND  
 Installer's name and address ACE PLBG + HTG INC  
PO Box 2679 S. PORTLAND ME 04116 Telephone 767-8080

**Location of appliance:**

- Basement
- Floor
- Attic
- Roof

**Type of Fuel:**

- Gas
- Oil
- Solid

Appliance Name: RINNAI 1004

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 # 1046
- Other \_\_\_\_\_

**Type of Chimney:**

- Masonry Lined  
Factory built \_\_\_\_\_
- Metal  
Factory Built U.L. Listing # \_\_\_\_\_
- Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

**Type of Fuel Tank**

- Oil
- Gas

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

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

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

30.00

**Approved**

**Approved with Conditions**

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

See attached letter or requirement

Signature of Installer [Signature]

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

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

Permit No: 03-0102	Issue Date:	CBL: 014 J020001
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Location of Construction: 65 Congress St	Owner Name: Papi Peter M &	Owner Address: 111 Regan Ln	Phone:
Business Name: n/a	Contractor Name: ACL Plumbing & Heating Inc.	Contractor Address: P.O. Box 2679 So. Portland	Phone: 2077678080
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone: R-6

Past Use: Multi Family / Second Floor	Proposed Use: Multi Family / Install gas heater	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>N/A</i> Type: <i>N/A</i> <i>2/29/03</i>
Signature: <i>Hym</i>	Signature: <i>[Signature]</i>

*legal 4 D.U. - No change of use permitted*

Proposed Project Description:  
Install Heating System

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Signature:	Date:	

Permit Taken By: gg	Date Applied For: 02/12/2003	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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: <i>OK 2/13/03</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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

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

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

<b>Permit No:</b> 03-0100	<b>Date Applied For:</b> 02/12/2003	<b>CBL:</b> 014 J020001
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<b>Location of Construction:</b> 65 Congress St	<b>Owner Name:</b> Papi Peter M &	<b>Owner Address:</b> 111 Regan Ln	<b>Phone:</b>
<b>Business Name:</b> n/a	<b>Contractor Name:</b> ACL Plumbing & Heating Inc.	<b>Contractor Address:</b> P.O. Box 2679 So. Portland	<b>Phone</b> (207) 767-8080
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

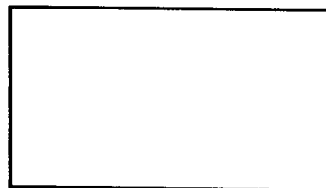
<b>Proposed Use:</b> Multi-family; install direct-vent Rinnai 1004 gas floor heater in 3rd floor unit - no change of use permitted - to remain 4 D.U.	<b>Proposed Project Description:</b> Install heating system
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 02/13/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Mike Nugent	<b>Approval Date:</b> 02/20/2003
<b>Note:</b> 1) Must comply with State Gas Regs			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Lt. McDougall	<b>Approval Date:</b> 02/18/2003
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>



FILL IN AND SIGN WITH INK

# APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

014 J 020

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 65 Congress St 2<sup>ND</sup> FLOOR Use of Building MULTI FAMILY Date 2/12/03  
 Name and address of owner of appliance PETER PADI  
111 REGAN LANE PORTLAND  
 Installer's name and address ACE PLUMBING & HEATING INC  
PO BOX 2679 SOUTH PORTLAND, ME 04116 Telephone 767-8080

### Location of appliance:

- Basement
- Attic
- Floor
- Roof

### Type of Fuel:

- Gas
- Oil
- Solid

### Appliance Name:

WAL MCLAIN BOILER, RICH BOYER

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 # 1046
- Other \_\_\_\_\_

### Type of Chimney:

- Masonry Lined  
Factory built NEW LINETZ (STAINLESS)
- Metal  
Factory Built U.L. Listing # \_\_\_\_\_
- Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

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

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

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

30.00

### Approved

Fire: [Signature]  
 Ele.: \_\_\_\_\_  
 Bldg.: \_\_\_\_\_

### Approved with Conditions

- See attached letter or requirement

Signature of Installer [Signature]