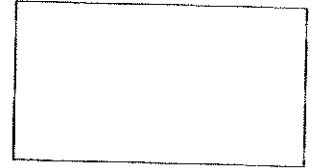




FILL IN AND SIGN WITH INK

# Application for Heating, Ventilation, Air Condition (HVAC) Cooking or Power Equipment



To the Inspector of Buildings, Portland Maine:

The undersigned hereby applies for a permit to install the following HVAC, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Address/CBL: 47 INDIA STREET, PTLD Use of Building: RETAIL/GROCIER Date: 11/19/2014  
 Name and Address of Owner: INDIA MIDDLE ST. JUNCTION LLC 207 FORE ST. #12 PTLD, ME 04101 J. PORTA  
 Phone Number Owner: 207-553-1701 E-Mail: Owner: JPORTA@BOULOS.COM  
 Name and Address of Installer: HVAC SERVICES 73 BRADLEY DR. WESTBROOK, ME 04092  
 Phone Number Installer: 207-854-4822 E-Mail: Installer: BGRASS@HVACSERV.COM

<p>Location of Appliance:</p> <p><input type="checkbox"/> Basement <span style="margin-left: 150px;"><input type="checkbox"/> Floor</span></p> <p><input type="checkbox"/> Attic <span style="margin-left: 150px;"><input checked="" type="checkbox"/> Roof</span></p> <p>Type of Fuel:</p> <p><input checked="" type="checkbox"/> Gas <span style="margin-left: 100px;"><input type="checkbox"/> Oil</span> <span style="margin-left: 100px;"><input type="checkbox"/> Solid</span></p> <p>Appliance Name: <u>TRANE GAS / ELECTRIC</u></p> <p>UL Approved: <input checked="" type="checkbox"/> Yes <span style="margin-left: 50px;"><input type="checkbox"/> No</span></p> <p>Will appliance be installed in accordance with the manufacturer's installation instructions? <input checked="" type="checkbox"/> Yes <span style="margin-left: 50px;"><input type="checkbox"/> No</span></p> <p>Type of License of Installer: Master Plumber #: _____</p> <p>Solid Fuel #: _____</p> <p>Oil #: _____</p> <p>Gas #: <u>PNT 1058 (ERIC)</u></p> <p>Other: _____</p>	<p>Type of Venting: (Plan required for submittal)</p> <p><input type="checkbox"/> Masonry Lined</p> <p><input type="checkbox"/> Factory Built: <u>N/A</u></p> <p><input type="checkbox"/> Metal</p> <p><input type="checkbox"/> Factory Built UL Listing: _____</p> <p><input type="checkbox"/> Direct Vent</p> <p>Type: _____ UL #: _____</p> <p># of Tanks: <u>N/A</u></p> <p>Type of Fuel Tank:</p> <p><input type="checkbox"/> Gas <span style="margin-left: 150px;"><input type="checkbox"/> Oil</span></p> <p>Size of Tank: _____</p> <p>Distance from tank to center of flame: _____</p> <p>Cost of Work: \$ <u>31,450</u></p> <p>Permit Fee: \$ _____</p>
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Signature of Installer:

E-Mail: DSHUMAN@HVACSERV.COM