389 Congress Street, 04101 Tel: (207) 874-8703					09-0844 8/14/09		9 027 A001001	
Location of Construction: 320 Cumberland Ave Owner Name: 25 Preble Stre				er Address:	01	P	Phone:	
	Contractor Name			Fore St Ste 3	<u> </u>		hone	
		ort Systems		Box 665 Bide	leford		none 207284636	.0
Lessee/Buyer's Name	Phone:			nit Type:			—	Zone:
•				VAC			1	B-
Past Use:	Proposed Use:			mit Fee:	Cost of World	k: CEO	District:	
Commercial		Install Mitsubishi		\$7,690.00	\$767,00		1	
	Heat Pumps in	the ceiling.	FIR	E DEPT:	Approved	INSPECTION	V:	0
					Denied	Use Group:	R .	ype: SIS
			*	& See Co	udition		IMC-	2005
Proposed Project Description	 :				20			
Install Mitsubishi Heat P	umps in the ceiling.		Sign	Signature: Sig		Signature:	gnature:	
			PED	ESTRIAN ACT	IVITIES DIST	TRICT (P.A.D.)	CT (P.A.D.)	
			Acti	on: Appro	ved App	proved w/Condi	tions 🔲 I	Denied
			Sign	nature:		Date:		
Permit Taken By:	Date Applied For:			Zoning	Approva			
gg	08/19/2009							
	ion does not preclude the	Special 2	Zone or Reviews	Zoning Appeal		His	Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shorela	nd	☐ Variance		N	Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		Wetlan	1	Miscellaneous		D	☐ Does Not Require Review	
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		☐ Flood 2	one	Conditi	onal Use	R	equires Revie	w
		Subdiv	sion	Interpre	tation	A ₁	pproved	
		Site Pla	n	Approve	ed	A ₁	pproved w/Co	onditions
Promis	1108010	Maj M	linor MM	Denied		Do	enied	L
///2 1 S		Date:	9/10/04	Date:		Date:		\nearrow
			01.1					
CITY	Anna company () 1							
And the second s	н.							
		CED	TIEICATION					
hereby certify that I am t	the owner of record of the na		TIFICATION Type or that the pro-	onosed work is	s authorized	by the owne	r of record	and that
	the owner to make this appli							
	if a permit for work describe							
shall have the authority to such permit.	enter all areas covered by su	ich permit a	any reasonable	nour to enforce	the provi	sion of the co	ode(s) appi	icable to
·								
SIGNATURE OF APPLICANT	Γ		ADDRESS		DATE		PHON	<u>———</u> Е
RESPONSIBLE PERSON IN C	CHARGE OF WORK, TITLE				DATE		PHON	

				D 4 N	In	T cmt
City of Portland, Maine - Buil	lding or Use Permi	ıt		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04101 Tel: ((207) 874-8703, Fax:	(207) 87	4-8716	09-0844	08/07/2009	027 A001001
Location of Construction:	Owner Name:			Owner Address:		Phone:
320 Cumberland Ave	25 Preble Street Llc]:	280 Fore St Ste 301	1	
Business Name:	Contractor Name:			Contractor Address:		Phone
	Atlantic Comfort Syst	tems	[]	PO Box 665 Biddet	ford	(207) 284-6360
Lessee/Buyer's Name	Phone:		P	Permit Type:		
]		HVAC		
Proposed Use:		_	Proposed	d Project Description:		
Commercial / Install Mitsubishi Heat	Pumps in the ceiling.		Install 1	Mitsubishi Heat Pu	imps in the ceiling.	
Dept: Zoning Status: A	Approved with Condition	ns Rev	viewer:	Marge Schmuckal	d Approval Da	ate: 08/10/2009
Note:	·PP·		• • • • • • • • • • • • • • • • • • • •		• •	Ok to Issue:
1) All previous conditions on the ori	icinal normit are still in	force				OR 10 13340. —
All previous conditions on the ort	gmai permit are sum in i	iorce.				
Dept: Building Status: A	Approved with Condition	ns Rev	viewer:	Chris Hanson	Approval Da	nte: 08/14/2009
Note:					• •	Ok to Issue: ✓
1) At the completion of the work, a occupation by the public.	licensed engineer is req	uired to si	ign off o	on the installation a	nd that the structure	is fit for
2) Equipment must be installed in co	ompliance per the manuf	facturer's :	specifica	ations		
3) All penetratios through rated asse or UL 1479, per IBC 2003 Sectio	•	d by an a	pproved	firestop system ins	stalled in accordance	with ASTM 814
4) Installation shall comply with 200)3 International Mechan	ical Code				
1 Instanation shan comply with 200	75 International Prechair	lear code	,			
Dept: Fire Status: A	Approved with Condition	ns Rev	viewer:	Capt Keith Gautre	eau Approval Da	ite: 08/14/2009
Note:				-		Ok to Issue: 🔽
1) Install shall comply with all manu	ıfacture's specifications.					

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon
Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place up	pon receipt of your building permit.
X Final inspection required at comple	etion of work.
Certificate of Occupancy is not required for certa your project requires a Certificate of Occupancy.	. All projects <u>DO</u> require a final inspection.
If any of the inspections do not occur, the pro REGARDLESS OF THE NOTICE OR CIRC	
CERIFICATE OF OCCUPANICES MUST BE THE SPACE MAY BE OCCUPIED.	BE ISSUED AND PAID FOR, BEFORE
Signature of Applicant/Designee	Date
Signature of Inspections Official	Date
Wa.	MOTE TO THE PROPERTY OF THE PARTY OF THE PAR

CBL: 027 A001001

Building Permit #: 09-0844

FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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To the	he	INSPECTOR	OF BUILDING	GS,	PORTLAND, ME.
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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 320 Cumberland Avenue	
Name and address of owner of appliance Portland Public Mark Portland, Maine 0410	
Installer's name and address Atlantic Comfort Sy Biddeford, Maine 04005	stems, Inc., 392 Hill Street, P.O. Box 665
Location of appliance: D Basement D Floor CELLIDG Attic D Roof	Type of Chimney: □ Masonry Lined Factory built □
Type of Fuel: ELECTIZIC Gas G Oil Solid	□ Metal □ ↓ ↓ ↓ ↓ Factory Built U.L. Listing #
Appliance Name: MITSUSISHI ITEAT PUMPS U.L. Approved The Yes P. No ME275 U.L. STANDARDS Will appliance be installed in accordance with the manufacture's	Type UL#
installation instructions? Yes	Type of Fact Tank O Oil Gas AUG - / 2009 Size of Tank
The Type of License of Installer: M. Mester Plumber # M.590012617	Number of Tanks
☐ Solid Fuel #	Distance from Tank to Center of Flamefeet. Cost of Work: \$ 700.000
Approved	Permit Fee: \$
Fire: Ele.: Bldg.:	See attached letter or requirement Inspector's Signature Date Approved
Signature of Installer White Inspection Yellow - File Pin	nk - Applicant's Gold - Assessor's Copy

FAX 10	Monte Compat Sustem Fax Number: 284-6377 From: Lacy Lieuter Fax Number: Date: 7/09
RILATIO	Regarding: Total Number Of Pages Including Cover:
	Phone Number For Follow-Up:

Comments:

Clty Of Portland, Maine
Inspections Division Services
389 Congress St Room 315 Portland Me 04101-3509
Phone: (207) 874-8703 or (207)874-8693
Fax: (207) 874-8716

http://www.portlandmaine.gov/

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H	Λ	



To: (talanter omfort Sustem
Fax Number: 284 -6377
From: Jay Cuester
Fax Number:
Date:
Regarding:
Total Number Of Pages Including Cover:
Phone Number For Follow-Up:

Comments:

City Of Portland, Maine
Inspections Division Services
389 Congress St Room 315 Portland Me 04101-3509
Phone: (207) 874-8703 or (207)874-8693
Fax: (207) 874-8716
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