

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 050822
JUL - 5 2005
CITY OF PORTLAND

This is to certify that 415 Congress Street Property Group/Nason Mechanical System

has permission to install new Trane A/C unit in commercial space

AT 415 Congress St. City of Portland, Oregon 97201. 027 B007001

provided that the person or persons who apply for or accept this permit shall comply with all of the provisions of the Statutes of the State of Oregon and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission procedure is complete this building or part thereof shall be closed or otherwise closed-in. 4 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS:
Fire Dept. Jan Kelley, P.F.D. 6/24/05
Health Dept. _____
Appeal Board _____
Other _____
Department Name _____

[Signature] 6/29/05
Director - Building Inspection Services

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-0822	Issue Date: JUL 15 2005	CBL: 027 B007001
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Location of Construction: 415 Congress St	Owner Name: 415 Congress Street Properties Lp	Owner Address: 134 Main St Ste 2a	Phone: 820707
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Business Name:	Contractor Name: Nason Mechanical Systems	Contractor Address: 194 Merrow Road Auburn	Phone: 820707
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Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: 3-3
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Past Use: commercial space	Proposed Use: commercial space with new Trane a/c unit	Permit Fee: \$667.00	Cost of Work: \$62,500.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>[Signature]</i>	INSPECTION: Use Group: U Type: AC unit IBC 2003 Signature: <i>[Signature]</i>
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Proposed Project Description:
install new Trane A/C unit in commercial space

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: jharris	Date Applied For: 06/22/2005	Zoning Approval		
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1. 2. Building permits do not include plumbing, septic or electrical work. 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..	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"/> MIM <input type="checkbox"/> Date: <i>6/23/05</i>	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:
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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

Permit No: 05-0822	Date Applied For: 0612212005	CBL: 027 B007001
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Location of Construction: 415 Congress St	Owner Name: 4 15 Congress Street Properties Lp	Owner Address: 134 Main St Ste 2a	Phone:
Business Name:	Contractor Name: Nason Mechanical Systems	Contractor Address: 194 Merrow Road Auburn	Phone (207)782-0707
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	
Proposed Use: commercial space with new Trane a/c unit		Proposed Project Description: install new Trane A/C unit in commercial space	

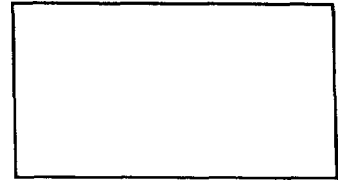
Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 0612912005
Note: **Ok to Issue:**
1) This permit is approved based on the findings and statement by Tim Shelley in his letter dated June 8, 2005. His statement *must* be completed and complied with.

Dept: Fire **Status:** Approved **Reviewer:** Jay Kelley **Approval Date:** 0612412005
Note: **Ok to Issue:**



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



027 B007

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 415 CONGRESS ST. Use of Building COMMERCIAL Date 6/22/05
 Name and address of owner of appliance HARRERS DEVELOPMENT 134 MAIN ST. SUITE 2A
WINTHROP, MAINE 04364
 Installer's name and address NASON MECHANICAL SYSTEMS
194 MERION RD, AUBURN, ME 04210 Telephone 207-782-0727

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: TRANE MAKE UP AIR UNIT

U.L. Approved Yes No

air conditioner / Heating

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 # PNT 1363
- Other _____

Type of Chimney:

- Masonry Lined
Factory built _____
- Metal
Factory Built U.L. Listing # _____
- Direct Vent
Type _____

Type of Fuel Tank

- Oil
- Gas

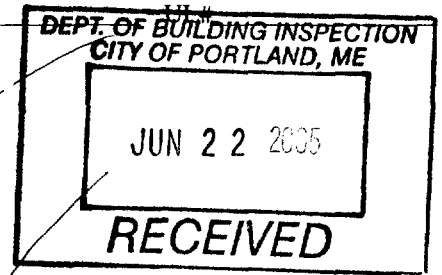
Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 62,500.00 588.00

Permit Fee: \$ 683.50 + Gate Fee 100.00



Approved

Approved with Conditions Total =

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement 688.00

Inspector's Signature

Date Approved

Signature of Installer

Philip C. Meyer FOR NASON MECHANICAL SYSTEMS

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy