

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

Permit No: 06-1362	Issue Date:	CBL: 027 C010001
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Location of Construction: 21 CHESTNUT ST	Owner Name: CHESTNUT STREET LOFTS LLC	Owner Address: ONE INDIA ST	Phone:
Business Name:	Contractor Name: Air Temp	Contractor Address: 11 Wallace Ave South Portland	Phone 2077742300
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Residential multi-unit 37 res. Condominiums with commercial on 1st floor	Proposed Use: Residential multi-unit wall hung boiler in each unit & gas fired unit in recycling room	Permit Fee: \$2,420.00	Cost of Work: \$240,000.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type
Proposed Project Description: wall hung boiler in each unit & gas fired unit in recycling room		Signature:		Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied				
Signature:		Date:		

Permit Taken By: dmartin	Date Applied For: 09/14/2006	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 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 Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied
	Date:	Date:	Date:

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 APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO

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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 09/20/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Michael A. Collins	Approval Date: 10/19/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Equipment must be installed in compliance with the manufacturer's specifications			
2) Maintain proper setback(s) from property lines/buildings and proper clearances from verticle openings when direct venting.			
3) The installation must comply with the State of Maine Gas Regulations.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Cptn Greg Cass	Approval Date: 10/10/2006
Note: awaiting Info 9-25-06 Recieved 10-10-06			Ok to Issue: <input checked="" type="checkbox"/>
1) A NFPA 54 compliance letter will be required from the installer upon completion of job.			
2) Installation shall comply with NFPA 54 I don't have venting clearances available at plan review. Will be field verified.			

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