

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: 051420
OCT 11 2005
CITY OF PORTLAND

This is to certify that Wellin & Co/HVAC Service Inc.
has permission to Install an above ceiling, Electric WSH Rating System.
AT 50 Monument Sq L 027 F001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is laid out or otherwise used-in.
HOWEVER NOTIFICATION IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept.
Health Dept.
Appeal Board
Other Department Name

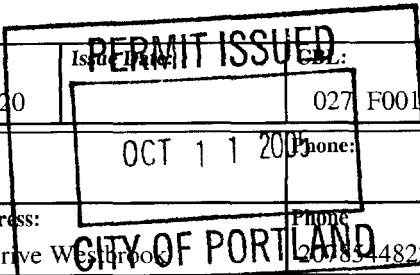
Signature: [Handwritten Signature] 10/5/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-1420	Issue Date: OCT 11 2005	City: 027	Zone: F001001
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Location of Construction: 50 Monument Sq	Owner Name: Wellin & Co	Owner Address: Po Box 533	Phone:
Business Name:	Contractor Name: HVAC Services, Inc.	Contractor Address: 73 Bradley Drive Westbrook	Phone: 207-834-4823
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Office Space	Proposed Use: Office Space	Permit Fee: \$228.00	Cost of Work: \$23,000.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>NA</i> Type: <i>W/B</i> <i>HVAC</i> <i>10/5/05</i>	
		Signature:	Signature:	
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: ead	Date Applied For: 09/29/2005	Zoning Approval	
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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"/> MM <input type="checkbox"/> Date:	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 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: 05-1420	Date Applied For: 09/29/2005	CBL: 027 F001001
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Location of Construction: 50 Monument Sq	Owner Name: Wellin & Co	Owner Address: Po Box 533	Phone:
Business Name:	Contractor Name: HVAC Services, Inc.	Contractor Address: 73 Bradley Drive Westbrook	Phone (207) 854-4822
Tenant/Ressee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Office Space	Proposed Project Description: Install an above ceiling, Electric WSHP heating system.
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Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 10/05/2005
Note:			Ok to Issue: <input type="checkbox"/>
1) Must be installed in conformity with the manufacturer's specs			

September 23, 2005

Monahan Woodworks, Inc.
100 Commercial Street Suite 105
Portland, ME 04101-4724
Attention: Brad Finlay

Dear Brad:

On September 22, 2005 I met with you on the fourth floor of the building at 50 Monument Square in Portland, Maine. You showed me the locations where four new HVAC units are to be installed on the underside of the floor joists of the fifth floor. We measured the floor joists and the attachment locations of the new HVAC units. We also went up on the fifth floor to verify that the loads on the floor are general office live loads and there are no significant concentrated loads above the locations where the new HVAC units are to be installed.

For my analysis of the floor joists I used the following loads:

- Floor live load (IBC 2005, Table 1607.1) 50 psf
- Dead load, partitions, miscellaneous: 20 psf
- Units #1, #2 & #3 (includes 15 lbs. water) 303 lbs.
- Unit #4 (includes 22 lbs. water) 420 lbs.

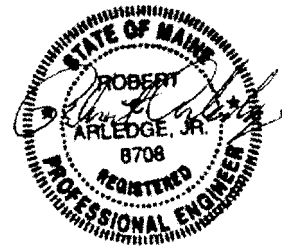
Based on my analysis I have determined that, for all four new HVAC units, the loads will not exceed the design capacity of the existing structure.

If you have any questions regarding this analysis, or if you require any further services on this project, please feel free to contact me.

Sincerely,



Robert Arledge, P.E.
Structural Engineer





FILL IN AND SIGN WITH INK

27 F001

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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 50 MONUMENT SQ. 4th FLOOR Use of Building OFFICE Date 9/28/05
 Name and address of owner of appliance 50 MONUMENT SQUARE LLC
OXFORD ST PORTLAND ME
 Installer's name and address HVAC SERVICES INC
73 Bradley DR. WESTBROOK ME 04092 Telephone 207-854-4822

Location of appliance:

- Basement
- Attic
- Above Ceiling
- Floor
- Roof

Type of Fuel:

- Gas
- Electric
- Oil
- Solid
- WSHF

Appliance Name: Carri

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:

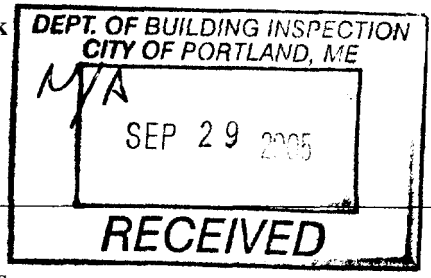
- Master Plumber # _____
- Solid Fuel # _____
- Oil # _____
- Gas # PNT 896
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas



Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 23,000

Permit Fee: \$ 228.00

Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer [Signature]

White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy

4/80