



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: 4 Milk Street 2nd floor Use of Building: office Date: 11/26/14

Name and Address of Owner: Silver Street Development Group 4 Milk Street, Portland

Phone Number Owner: _____ E-Mail: Owner: _____

Name and Address of Installer: Airtemp 11 Wallace Ave. South Portland

Phone Number Installer: 207-774-2300 E-Mail: Installer: plewis@comfortsystemsusa.com

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| <p>Location of Appliance:</p> <p><input type="checkbox"/> Basement <input type="checkbox"/> Floor</p> <p><input type="checkbox"/> Attic <input checked="" type="checkbox"/> Roof</p> <p>Type of Fuel:</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Solid</p> <p>Appliance Name: <u>York</u></p> <p>UL Approved: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will appliance be installed in accordance with the manufacturer's installation instructions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Type of License of Installer: Master Plumber #: _____</p> <p>Solid Fuel #: _____</p> <p>Oil #: _____</p> <p>Gas #: _____</p> <p>Other: <u>Universal Refrigerant #8506</u></p> | <p>Type of Venting: <i>(Plan required for submittal)</i></p> <p><input type="checkbox"/> Masonry Lined</p> <p><input type="checkbox"/> Factory Built: _____</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: _____</p> <p>Type of Fuel Tank:</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Oil</p> <p>Size of Tank: _____</p> <p>Distance from tank to center of flame: _____</p> <p>Cost of Work: \$ <u>8000</u></p> <p>Permit Fee: \$ <u>102</u></p> |
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Signature of Installer: peter.lewis@comfortsystemsusa.com Digitally signed by peter.lewis@comfortsystemsusa.com
DN: cn=peter.lewis@comfortsystemsusa.com
Date: 2014.11.26 12:55:35 -0500 E-Mail: 11/26/14