

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read  
Application And  
Notes, If Any,  
Attached

BUILDING DEPARTMENT

## PERMIT

**PERMIT ISSUED**  
Permit Number: 050390  
**APR 28 2005**  
**CITY OF PORTLAND**

This is to certify that Griswold Stephen L. & /Gelin HVAC S INC

has permission to Install a Lennox boiler

AT 31 Chandlers Wharf 031 J00203

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 work on permit in progress before this building or part thereof is opened or closed-in. **48 HOUR NOTICE 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]*  
4/27/05  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

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

Permit No: 05-0390	Issue Date: APR 25 2005	<b>PERMIT ISSUED</b> CBL	031 J002031
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<b>Location of Construction:</b> 31 Chandlers Wharf	<b>Owner Name:</b> Griswold Stephen L &	<b>Owner Address:</b> 9 Hemlock Crk	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Gelinas HVAC Services INC	<b>Contractor Address:</b> 2 Washington Ave Scarborough	<b>Phone:</b> 2078830771
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Condo	<b>Proposed Use:</b> Condo Install a Lennox boiler	<b>Permit Fee:</b> \$30.00	<b>Cost of Work:</b> \$500.00	<b>CEO District:</b> 1
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<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>[Signature]</i>	<b>INSPECTION:</b> Use Group: <i>[Signature]</i> Type: <i>Heating</i> Signature: <i>[Signature]</i>
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**PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)**

Action:  Approved  Approved w/Conditions  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Permit Taken By:</b> dmartin	<b>Date Applied For:</b> 04/13/2005	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<p align="center"><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland <input checked="" 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: _____	<p align="center"><b>Zoning Appeal</b></p> <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: _____	<p align="center"><b>Historic Preservation</b></p> <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

<b>Permit No:</b> 05-0390	<b>Date Applied For:</b> 04/13/2005	<b>CBL:</b> 031 5002031
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<b>Location of Construction:</b> 31 Chandlers Wharf	<b>Owner Name:</b> Griswold Stephen L &	<b>Owner Address:</b> 9 Hemlock Crk	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Gelinas HVAC Services INC	<b>Contractor Address:</b> 2 Washington Ave Scarborough	<b>Phone</b> (207) 885-0771
<b>Tenant/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

<b>Proposed Use:</b> Condo Install a Lennox boiler	<b>Proposed Project Description:</b> Install a Lennox boiler
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**Dept:** Zoning      **Status:** Approved      **Reviewer:** Tammy Munson      **Approval Date:** 04/27/2005  
**Note:**      **Ok to Issue:**

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 04/27/2005  
**Note:**      **Ok to Issue:**

1) The installation must comply with the State of Maine Gas Regulations.



FILL IN AND SIGN WITH INK

31 J 002  
[Empty Box]

# 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 301 Chandler Wharf (Ptd) Use of Building Living Date 4/11/05

Name and address of owner of appliance STEVE W SWOLD 301 Chandler Wharf, Ptd, Me.

Installer's name and address CELINAS HVAC SERVICES INC  
2 Washington Ave Scarborough, Me 01074 Telephone (207) 885-0771

### Location of appliance:

- Basement
- Attic
- Floor
- Roof
- RELOCATING APPLIANCE

### Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Lennox

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 # PN T1078
- Other \_\_\_\_\_

### Type of Chimney:

- Masonry Lined  
Factory built \_\_\_\_\_
- Metal  
Factory Built U.L. Listing # BVENT (Existing)
- Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

### Type of Fuel Tank

- Oil
- Gas

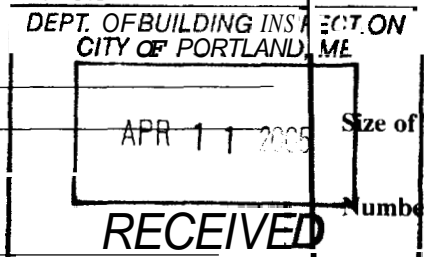
Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

Cost of Work: \$ 500<sup>00</sup>

Permit Fee: \$ 30



### Approved

Fire: \_\_\_\_\_  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

### Approved with Conditions

- See attached letter or requirement

Inspector's Signature \_\_\_\_\_

Date Approved \_\_\_\_\_

Signature of Installer [Signature]