

**Department of Permitting and Inspections****HVAC / Power Equipment
Application & Checklist**

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

Is this an EXACT replacement? (ie: SAME PRODUCT in the SAME LOCATION?)

If so, you do NOT need to provide any plans, etc, just the application form.

(NOTE: a final inspection is still a requirement)

- A floor plan that includes structural details, size and dimensions of the floor and location where the equipment is going to be installed.
- Information on how the unit is being vented & hanging details if appropriate.
- Details of the specific equipment being installed; ie; specifications and any heating technical specifications. (Often this information can be obtained from the manufacturer's spec sheet or retail advertisements.)
- A plot plan showing the shape and dimension of the lot, with the distance from the actual property lines, and the principal structure, or structures, may be required if venting to the outside.
- Proof of ownership is required if it is inconsistent with the assessor's records.
- All documents as individual PDFs and named appropriately

*** All HVAC installations shall comply with applicable state and local codes. ***

Separate permits are required for plumbing and electrical installations, as required.

Separate permits are also required based on different properties
(Different Chart, Block and Lot.)

Permit Fee: \$25.00 for the first \$1000.00 construction cost, \$15.00 per additional \$1000.00 cost

This is not a Permit; you may not commence any work until the Permit is issued.



FILL IN AND SIGN WITH INK

Application for Heating, Ventilation, Air Conditioning (HVAC) or Power Equipment

To the Inspector of Buildings, Portland Maine:

The undersigned hereby applies for a permit to install the following HVAC, or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Address and CBL: 190 LANCASTER ST Use of Building: office Date: 1/30/2017

Name & Address of Owner: Bayside I, LLC c/o Brooks Asset Management
One Canal Plaza, St. 200, Portland, ME

Phone # of Owner: (207) 871-1290 Email: bbrooks@brooks.com 04101

Name & Address of Installer: GAMMON CORPORATION

Phone # of Installer: 207-286-3400 Email: EDBE@GAMMONSHVAC.COM

Is this an EXACT replacement? (ie: SAME PRODUCT in the SAME LOCATION?)

(If so, you do NOT need to provide any plans, etc, just this form. NOTE: a final inspection is still a requirement)

<p>Location of Appliance:</p> <p><input type="checkbox"/> Basement <input type="checkbox"/> Floor <input type="checkbox"/> Wall</p> <p><input type="checkbox"/> Attic <input checked="" type="checkbox"/> Roof</p> <p>Fuel or Power Source:</p> <p><input checked="" type="checkbox"/> Gas <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Solid</p> <p>Appliance Name: <u>York Rooftops</u></p> <p>Name of Listed Approval Entity (ie; UL Approval):</p> <p>_____</p> <p>Will appliance be installed in accordance with the manufacturer's instructions? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Type of License of Installer:</p> <p>Master Plumber#: _____</p> <p>Solid Fuel : _____</p> <p>Oil #: _____</p> <p>Gas #: _____</p> <p>Other: _____</p>	<p>Type of Venting: (Plan required for submittal)</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 Listing #: _____</p> <p><input type="checkbox"/> Direct Vent</p> <p style="text-align: right;">Type: _____ (ie: UL)</p> <p># of Tanks: _____</p> <p>Type of Fuel Tank:</p> <p><input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> K1 <input type="checkbox"/> N/A</p> <p>Size of Tank: _____</p> <p>Distance from tank to center of flame: _____</p> <p>Cost of Work: \$ <u>107,783</u></p> <p>Permit Fee: \$ <u>1,615.00</u></p>
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Signature of Installer: E. Bouffard

Date: 1/30/2017



Department of Permitting and Inspections

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding that this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the selections below.

1. Once the complete application package has been received by us, and entered into the system
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

- provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment
- call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone
- hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall
- deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland
Department of Permitting and Inspections
389 Congress Street, Room 315
Portland, Maine 04101**

By signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. **No work shall be started until I have received my permit.**

Applicant Signature: *E. R. [Signature]* Date: 1/30/2017
PROSOL ENGINEER

I have provided digital copies and sent them on: Date: 2/2/2017

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.