· ·	ine - Building or Use 101 Tel: (207) 874-8703		ication	Vermit No: 05-0022	Issue Dat	4/200	CBL:	002001
Location of Construction:	Owner Name:	o, rax. (207) 8			101/1	7/200		
98 Portland St Trail Under Fo				Owner Address: 255 Main St			Phone:	
Business Name: Contractor Name							Phone	
Restaurant Equ				Contractor Address: 75 York Street Portland			2077737	1276
Lessee/Buyer's Name Phone:					Ortialia		2011131	
Stante	i none.		1	Permit Type: Zone: HVAC				Zone.
Past Use: Proposed Use:			Peri	mit Fee: Cost of Work:		I	CEO District:	
Commercial Commercial re		eplace hood		\$129.00	\$12,0	00.00	1	
			FIR	FIRE DEPT: Approved		INSPEC		_ ,
				Denied Use		Use Group: Type:///		
							HODE TEM	
						1	·· >//	9
Proposed Project Description:							1/14	480
replace hood			Signature:			Signature:		
			PED	PEDESTRIAN ACTIVITIES VISTRICT (P.A.D.)				1.
			Acti	on: Appro	oved Ap	proved w/	Conditions [Denied
			Sign	nature:			Date:	
Permit Taken By:	Date Applied For:	Applied For:		Zoning Approval				
dmartin	01/07/2005				5 FF ·			
1. This permit application	on does not preclude the	Special Zone	or Reviews	Zoni	ing Appeal		Historic Preservation	
	eting applicable State and	Shoreland		☐ Variano	Variance		Not in District or Landma	
2. Building permits do n septic or electrical wo	2. Building permits do not include plumbing,		☐ Wetland		Miscellaneous		Does Not Require Review	
	void if work is not started of the date of issuance.	Flood Zone		Conditional Use			Requires Review	
* *	y invalidate a building	Subdivision		Interpretation			Approved	
			Site Plan		Approved		Approved w/Conditions	
		Maj Minor	MM	_ Denied			Denied	
		Date:		Date:		Da	ate:	
			os Well	2.01	14/0	5		
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if shall have the authority to esuch permit.	he owner to make this appl	amed property, concertion as his aud in the applicat	thorized age ion is issued	nt and I agree, I certify that	to conform the code of	to all ap	pplicable laws uthorized rep	s of this presentative
SIGNATURE OF APPLICANT		A	ADDRESS		DATI		PH	ONE
RESPONSIBLE PERSON IN C	HAD OF OF WORK THEE				DATI			ONE

City of Portland, Maine - Bu 389 Congress Street, 04101 Tel	-		Permit No: 05-0022	Date Applied For: 01/07/2005	CBL: 036 H002001
Location of Construction:	Owner Name:	Owner Name:		Owner Address:	
98 Portland St	Trail Under Foot Inc	Trail Under Foot Inc		255 Main St	
Business Name:	Contractor Name:	Contractor Name:		Contractor Address:	
	Restaurant Equipement of Maine		75 York Street Portland		(207) 773-7376
Lessee/Buyer's Name	Phone:]	Permit Type: HVAC		
Proposed Use:		Propose	d Project Description:		
Commercial replace hood		replace	e hood		
Dept: Building Status: Note: 1) Replacement of exisiting in a m	Approved with Condition		Mike Nugent	Approval D	Oate: 01/14/2005 Ok to Issue: ✓
Dept: Fire Status: Note: 1) the hood shall be installed in ac	Approved with Condition cordance with the manufa		Lt. MacDougal	Approval D	Oate: 01/11/2005 Ok to Issue: ✓

City of Portland, Ma	ine - Bu	ilding or Use Permit	t		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04	101 Tel:	(207) 874-8703, Fax: ((207) 874	4-8716	05-0022	01/07/2005	036 H002001
Location of Construction:	n of Construction: Owner Name: C		O	Owner Address:		Phone:	
98 Portland St		Trail Under Foot Inc		2	255 Main St		
Business Name:		Contractor Name:		C	Contractor Address:		Phone
		Restaurant Equipemen	t of Main	ie 7	75 York Street Por	tland	(207) 773-7376
Lessee/Buyer's Name		Phone:			ermit Type: HVAC		
Proposed Use:				Proposed	Project Description:		
Commercial replace hood				replace	hood		
Dept: Building Note: 1) Replacement of exisiti		Approved with Condition ore code compliant manner		iewer:	Mike Nugent	Approval D	oate: 01/14/2005 Ok to Issue: ✓
Dept: Fire Note: 1) the hood shall be insta		Approved with Condition cordance with the manufacture.			Lt. MacDougal	Approval D	Ok to Issue: ✓

2 mecHAIN ica Toints STATE OF THE STATE ML Welded

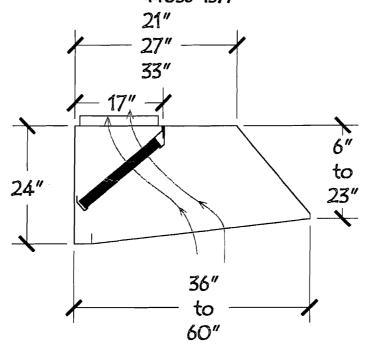
6 50 yee 5 20 20

6 50 yee 5 20

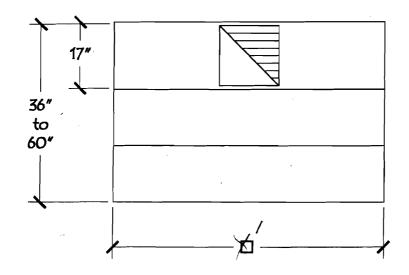
Nork Nork 3m STAND OH 1661 00001 200001 1600 TOSOUTY MUP RIR 18 Cy 2 m --

AMERICAN HOOD SYSTEMS INC.

177 REASER COURT / P.O. BOX 1377 ELYRIA, OHIO 44036-1377



SECTION VIEW





CONFORMS TO UL STD 710

STANDARD FEATURES:

- 1. 16 GAUGE ALUMINIZED OR STAINLESS STEEL
- 2. ALL JOINTS SEAMLESSLY TIG/MIG WELDED
- 3. ALUMINIZED POLISHED PAINTED SEMI-GLOSS STAINLESS #4 POLISHED FINISH
- 4. GALVANIZED BAFFLE FILTERS ARE UL LISTED
- 5. VAPOR PROOF LIGHTS ARE UL LISTED (OPTIONAL)
- 6. STAINLESS STEEL GREASE CATCH PAN
- 7. MEETS AND EXCEEDS NFPA #96





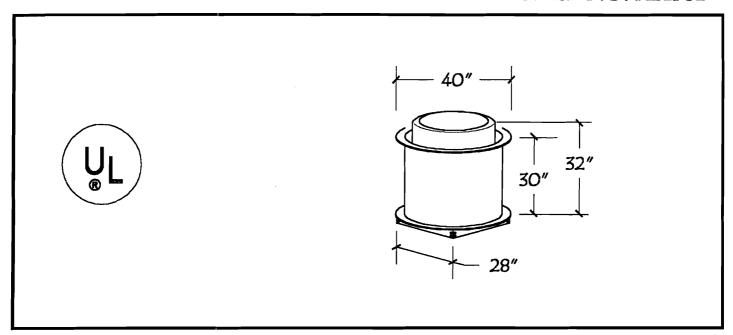


LOW CEILING TAPERED EXHAUST HOOD				
ТОЦ	DATE	SCALE	MATL	
PARTS#				

AMERICAN HOOD SYSTEMS, INC.

P.O. BOX 1377 ELYRIA, OHIO 44036-1377

MODEL NO. AH56B



STANDARD FEATURES:

- 1. HEAVY GAUGE ALUMINUM
- 2. 3 YEAR LIMITED WARRANTY ON ALL ELECTRIC MOTORS
- 3. FACTORY SET DRIVE
- 4. BELT DRIVE MOTORS ARE ENCLOSED IN WEATHER-TIGHT COMPARTMENTS
- 5. CFM RANGE: 4600-6000
- 6. MOTOR HORSEPOWER: 1-1/2
- 7. RPM: 1000-1400
- 8. VOLTS: 115/208/230
- 9. AMPS: 15/7.9/7.5
- (440) 365-4567
- 1 (800) 854-3267
- FAX (440) 365-2100



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

1			- 1
			- 1
- 1			
- 1			
i i			
1			
1			

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

□ Master Plumber # □ Solid Fuel # □ Oil # □ Was # PloP → Note	Distance from Tank to Center of Flame feet. Cost of Work: \$\frac{12,000,00}{200} Permit Fee: \$
The Type of License of Installer:	Size of Tank
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No	Type of Fuel Tank Oil Gas
Appliance Name: 100 Replace & Ver U.L. Approved Yes \(\sigma \) No	Direct Vent Type UL#
Type of Fuel: Oil Solid	Metal Factory Built U.L. Listing # UL STO 710
Location of appliance: Basement Roof	Type of Chimney: Masonry Lined Factory built
	Telephone 15erv.