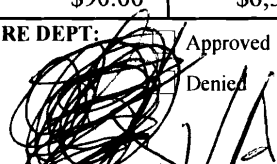


City of Portland, Maine - Building or Use Permit Application

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

Permit No: 08-1138	Issue Date:	CBL: 045 E019001
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Location of Construction: 68 WINTER ST	Owner Name: PULASKI MICHAEL & AMY GR	Owner Address: 68 WINTER ST	Phone:
Business Name:	Contractor Name: Ocean Gate Plumbing & Heating	Contractor Address: 21 Ridge Terrace Drive Casco	Phone 2074186006
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Single Family Home	Proposed Use: Single Family Home - install a vitodens 100-W	Permit Fee: \$90.00	Cost of Work: \$6,500.00	CEO District: 2
Proposed Project Description: install a vitodens 100-W		FIRE DEPT:  Approved Denied	INSPECTION: Use Group: <u>U</u> Type: <u>HVAC</u> <i>State Gas Reg's</i>	
		Signature:	Signature:	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

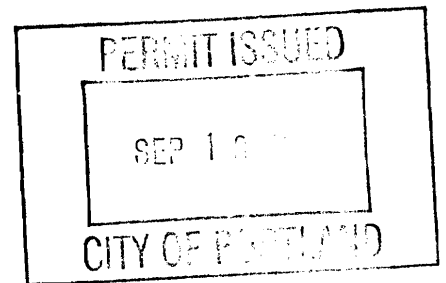
Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: ldobson	Date Applied For: 09/09/2008	Zoning Approval
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- 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: <u>9/10/08</u>	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 checked="" type="checkbox"/> Approved <i>OK per S. Hanson</i> <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <u>9/10/08</u>
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CERTIFICATION

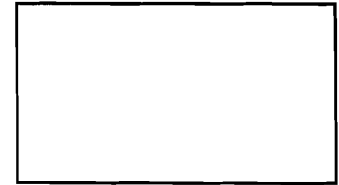
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, 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



FILL IN AND SIGN WITH INK

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 45 E 19 Use of Building _____ Date 9/9/08
 Name and address of owner of appliance Michael Pulaski 628 Winter St. Portland ME 04103
 Installer's name and address Ocean Gate Plumbing and Heating 21 Ridge Terrace Dr. CASCO ME Telephone 207-418-6006

Location of appliance:

- Basement Floor
 Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name: ~~Michael Pulaski~~ Viessmann
 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 # PNT3962
 Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
 Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$6,500⁰⁰

Permit Fee: \$ _____

Approved

Fire: _____
 Ele.: _____
 Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer _____

Inspector's Signature _____

Date Approved _____

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

City of Portland, Maine - Building or Use Permit

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

Permit No: 08-1138	Date Applied For: 09/09/2008	CBL: 045 E019001
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Location of Construction: 68 WINTER ST	Owner Name: PULASKI MICHAEL & AMY GR	Owner Address: 68 WINTER ST	Phone:
Business Name:	Contractor Name: Ocean Gate Plumbing & Heating	Contractor Address: 21 Ridge Terrace Drive Casco	Phone (207) 418-6006
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family Home - install a vitodens 100-W	Proposed Project Description: install a vitodens 100-W
---	--

Dept: Zoning	Status: Approved	Reviewer: Tammy Munson	Approval Date: 09/10/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 09/10/2008
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) The installation must comply with the State of Maine Gas Regulations.			

Side Wall Venting Layouts

Layout with basic coaxial vent kit componentry

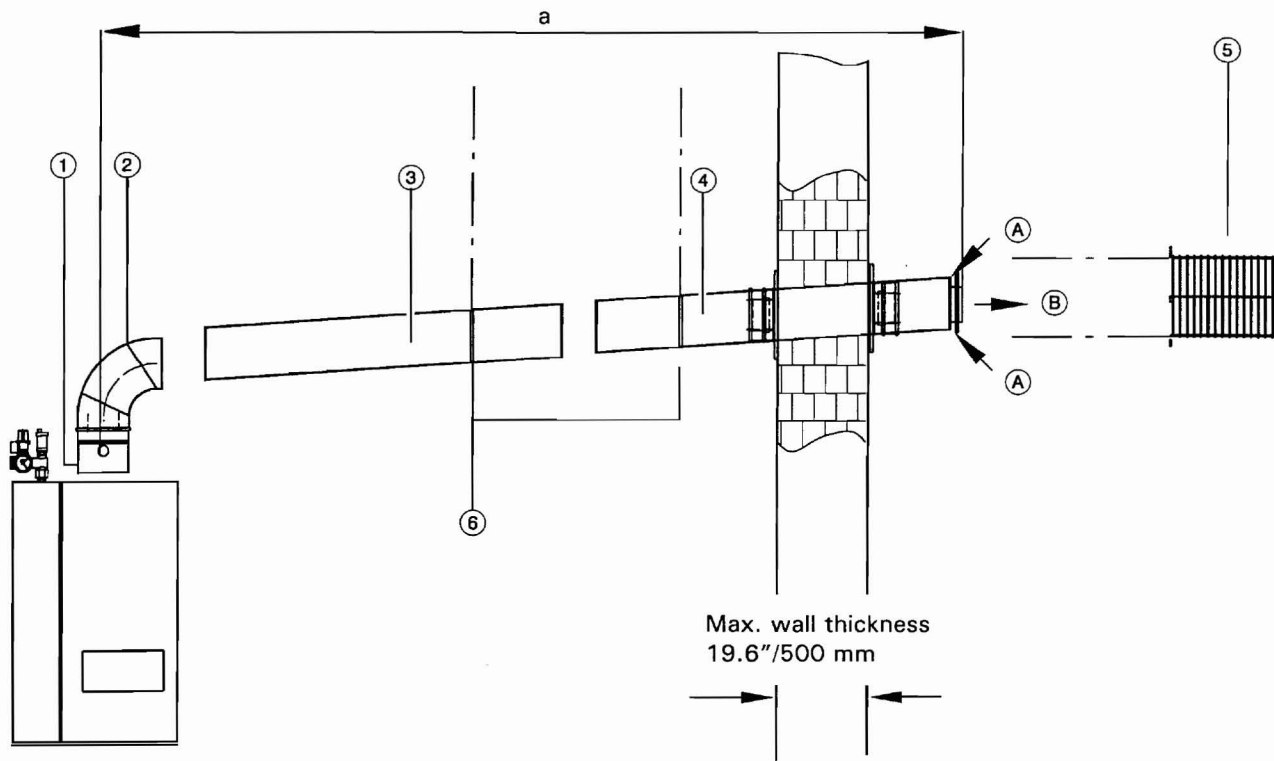


Fig. 2
Standard side wall venting layout, using basic vent kit components for vent systems 60/100, 80/125 and 10/150

- | | |
|-----|--|
| ① | Vent pipe adaptor |
| ② | Elbow, 87° (1 per carton) |
| ③ | Straight pipe
3.3 ft./1 m long |
| ④ | Vent termination
(incl. wall flashings)
Important!
Total length of vent termination pipe is 31"/787 mm. If required, the vent termination pipe may be shortened by max. 12"/305 mm (min. vent termination length is 19"/483 mm). |
| ⑤ | Protective screen
Warning!
Protective screen MUST be installed. |
| ⑥ | Mounting clip, white (use at least 2) |
| ⑦ | Brass adaptor (M8 x 5/16" - 18) and Set of screws (#8 x 3/8") (shown on following page) |
| (A) | Combustion air intake |
| (B) | Flue gas outlet |
| a | Total vent length** |

**See section Vent Length Requirements on page 21 in this manual.

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Side Wall Venting

Layout with basic coaxial ven

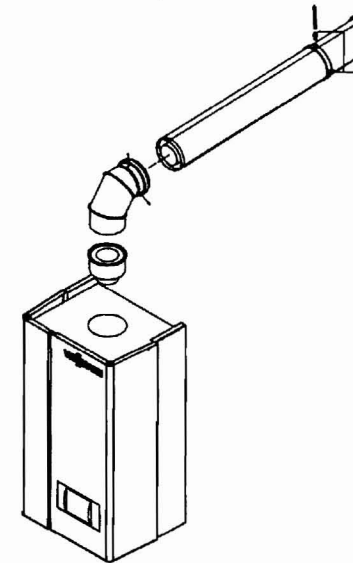


Fig. 3
Side wall venting layout, using basic vent kit components for vent systems 60/100, 80/125 and 10/150

5285 268 v3.6