

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

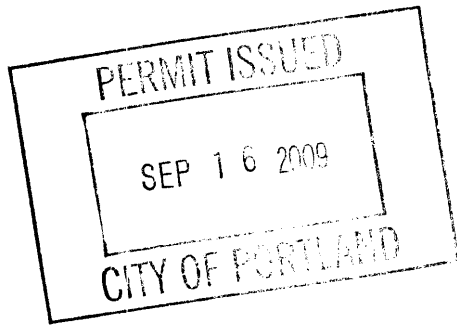
Permit No: 09-0921	Issue Date:	CBL: 056 G026001
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Location of Construction: 44 SPRUCE ST	Owner Name: PRICE JACQUELINE	Owner Address: 5279 ISLA KEY BLVD S # 309	Phone:
Business Name:	Contractor Name: Charlie Burnham Heating	Contractor Address: PO Box 382 Freeport	Phone 2078659010
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-6

Past Use: Multi- Family	Proposed Use: Multi-Family - install a Triangle Tube, Solo 250 replacement system	Permit Fee: \$630.00	Cost of Work: \$60,500.00	CEO District: 2
Proposed Project Description: install a Triangle Tube, Solo 250 replacement system  <i>leg use: 6 residential dwelling units * See Conditions</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: U Type: HVAC	
		Signature: <i>(Signature)</i>	Signature: <i>(Signature)</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____				

Permit Taken By: Ldobson	Date Applied For: 08/26/2009	<b>Zoning Approval</b>
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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 Major <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <input checked="" type="checkbox"/> Denied Date: <i>8/26/09</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Date: _____	Historic Preservation <i>within</i> <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: <i>any exterior work needs a separate review and approval</i>
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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

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<b>Permit No:</b> 09-0921	<b>Date Applied For:</b> 08/26/2009	<b>CBL:</b> 056 G026001
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<b>Location of Construction:</b> 44 SPRUCE ST	<b>Owner Name:</b> PRICE JACQUELINE	<b>Owner Address:</b> 5279 ISLA KEY BLVD S # 309	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Charlie Burnham Heating	<b>Contractor Address:</b> PO Box 382 Freeport	<b>Phone</b> (207) 865-9010
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

<b>Proposed Use:</b> Multi-Family - Six D. U.-- install a Triangle Tube, Solo 250 replacement system	<b>Proposed Project Description:</b> install a Triangle Tube, Solo 250 replacement system
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 08/26/2009  
**Note:** **Ok to Issue:**

- 1) This is NOT an approval for an additional dwelling unit. You SHALL NOT add any additional kitchen equipment including, but not limited to items such as stoves, microwaves, refrigerators, or kitchen sinks, etc. Without special approvals.
- 2) This property shall remain a six family dwelling. Any change of use shall require a separate permit application for review and approval.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 09/16/2009  
**Note:** **Ok to Issue:**

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

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Capt Keith Gautreau      **Approval Date:** 08/27/2009  
**Note:** **Ok to Issue:**

- 1) Install shall comply with all manufacture's specifications.
- 2) Install shall comply with NFPA 54.  
A compliance letter is required

**BUILDING PERMIT INSPECTION PROCEDURES**

**Please call 874-8703 or 874-8693 (ONLY )**

**to schedule your inspections as agreed upon**

**Permits expire in 6 months, if the project is not started or ceases for 6 months.**

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

**By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.**

**A Pre-construction Meeting will take place upon receipt of your building permit.**

  X   **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

**If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.**

**CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.**

\_\_\_\_\_  
Signature of Applicant/Designee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date

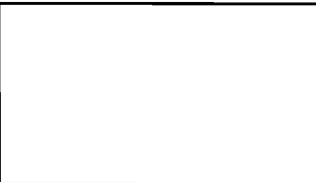
*Mailed*





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 44-46 Spruce Str. 56 G 26 Use of Building Apartment building Date 8-26-09  
Name and address of owner of appliance Jim Price P.O. Box 10226 Portland, ME 04104

Installer's name and address Charlie Kurnham Heating Service Inc.  
P.O. Box 382 Freeport, ME 04032 Telephone 865-9010

**Location of appliance:**  
 Basement       Floor  
 Attic             Roof

**Type of Fuel:**  
 Gas       Oil       Solid

**Appliance Name:** Triangle Tube Solo 250  
 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 # PNT 6050  
 Other \_\_\_\_\_

**Type of Chimney:**  
 Masonry Lined  
 Factory built \_\_\_\_\_

Metal  
 Factory Built U.L. Listing # \_\_\_\_\_

Direct Vent  
 Type IV CPVC UL# \_\_\_\_\_

**Type of Fuel Tank**  
 Oil  
 Gas

**Size of Tank** \_\_\_\_\_

**Number of Tanks** \_\_\_\_\_

**Distance from Tank to Center of Flame** \_\_\_\_\_ feet.

**Cost of Work:** \$60,500.00

**Permit Fee:** \$ 630.00

AUG 26 2009

**Approved**

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

**Approved with Conditions**  
 See attached letter or requirement

Inspector's Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

Signature of Installer [Signature]

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