| C:4 | of Doutland Mart | D.::13! | Donate A 12 41 | per Per | mit No: | PERMIT Issue Date | ISSUE | CBL: | | |
|----------------------|-----------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------------------------------------------|------------------------|---------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------|--|
| _ | of Portland, Maine Congress Street, 04101 | _ | | VII | 03-1190 | 207 | - | 056 G0 | 38001 | |
| | on of Construction: | Owner Name: | , rax: (207) 674-6 | | Address: | W. 1 | 0 2003 - | Phone: | | |
| | | | | | | | | 450-3611 | | |
| | Spring St | David Mulque | <u> </u> | | ew Road C | TYNFP | · IDIV Asia | _ | _ | |
| Busine | ess Name: | Contractor Name | | | Contractor Address: | | The state of the s | | / | |
| | 77 - 1-37 | Avery Service | s, inc. | _ | 7 Thomas Drive Westbrook | | | 2077728687 | | |
| Læssec | /Buyer's Name | Phone: | | Permit HV A | | | | | Zone: | |
| Past U | | Proposed Use: | | Permi | t Fee: | Cost of Wor | k: CI | O District: | 7 | |
| Mult | i Family / 4 Units | Multi Family / | 4 Units; Install | | \$39.00 | \$2.00 | 00.00 | 3 | | |
| | • | | nai direct vent | FIRE | - | Approved | INSPECT | ION: | | |
| | | | the first floor and | | | | Use Group | $\mathbb{Z} \mathcal{Q}$ | Type~/ | |
| | | two on the sec | ond floor. | | . L | Denied | | 100 | [4] | |
| 1.4 | aluse i A.G | amile & 11 | | | | | / | 10 | MHQ | |
| Propt | ed Project Description: | Wind British | | | | | / | M/X | | |
| Insta | ll Gas Direct Vent Heatin | ig System | | Signati | ure: 1 | A HW | Signature: | My | Lluy), | |
| | | ~ , | | | STRIAN ACT | IVITIES DIST | | .D.) 7 | | |
| | | | | | | | | | | |
| | | | | Action | : Appro | ved App | proved w/Co | nditions [| Denied | |
| | | | | Signat | ure: | | D | ate: | | |
| Permi | t Taken By: | Date Applied For: | | | Zoning | Approva | al | | | |
| gg | | 09/30/2003 | Secolal Zana an Da | I | 771 | 11 | | Historic Pres | | |
| | This permit application do | | Special Zone or Re | views | Zoni | ng Appeal | | Historic Pres | ervation | |
| | Applicant(s) from meeting | g applicable State and | ☐ Shoreland | - | Variance | e | | Not in Distric | et or Landma | |
| | Federal Rules. | | to rema | ر ب | Λ. | | | | | |
| | Building permits do not in septic or electrical work. | nclude plumbing, | Wetland Well | 1 dwg | Miscell | aneous | | Does Not Re | quire Review | |
| | Building permits are void within six (6) months of the | | ☐ Flood Zone - | my | √ ☐ Conditi | onal Use | | Requires Rev | riew | |
| | False information may inv permit and stop all work | validate a building | Subdivision | | ☐ Interpre | etation | | Approved | - | |
| | , | | Site Plan | | Approv | ed | - 2 | Approved w/ | Conditions | |
| | | | Maju Minor | MATERIAL STATES | Denied | | Than | Denied | 1/ | |
| | | | | | | | نه ا | To A | 10/1/02 | |
| | | | OV Tal | 69 | ъ. | | | יי,ע ס | 10/4/07 | |
| | | | Date: 1.0 | • / | Date: | | Date | : | | |
| | | | • | | | | N | Ly, a | ray | |
| | | | | | | | | | vers . | |
| | | | CERTIFICA | ΓΙΟΝ | | | | DA | dows | |
| hav urisc hall | by certify that I am the over been authorized by the cliction. In addition, if a pehave the authority to enterpermit. | owner to make this applermit for work describe | ication as his authori d in the application i | zed agent s issued, | t and I agree I certify that | to conform the code of | to all app ficial's aut | licable laws horized rep | of this resentative | |
| | | | | | | | | | | |
| | ATURE OF APPLICANT | | ADDR | F.0.0 | | DATE | | PHO | NATE: | |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

03-1199

056-6-038

| To the INSPECTOR OF BUILDINGS, PORTLAND, ME. | |
|-----------------------------------------------------------------------------------------------------|-----------------|
| The undersigned hereby applies for a permit to install the following heating, cooking or power | er equipment in |
| accordance with the Laws of Maine, the Ruilding Code of the City of Portland, and the following spi | cifications |

| accordance with the Laws of Maine, the Duttaing Code of the | |
|------------------------------------------------------------------|--------------------------------------------------|
| Location / CBL 241 SPRING ST. | Use of Building Apartheuts Date 9/30/63 |
| Name and address of owner of appliance David Mulqueen | 31 NEW ROAD -SCARBORDUM, 450-36/1 |
| | rttaf Ne |
| Installer's name and address AUFNU SERVICES, IN | |
| 7 Thomas DRIVE - WESTBROOK, Me OU | 1092 Telephone 772-8687- 1344 874-0933 |
| | |
| Location of appliance: | Type of Chimney: |
| ☐ Basement ☐ Floor | Masonry Lined |
| Attic Roof | Factory built |
| 2 on 1st floor, 2 on 2nd floor | |
| Type of Fuel: | ☐ Metal |
| ☑ Gas □ Oil □ Solid | Factory Built U.L. Listing # |
| | |
| Appliance Name: RIMMAi - DIRECT VENT HEATER | Direct Vent |
| U.L. Approved 2 Yes D No | Type UL# |
| Will appliance be installed in accordance with the manufacture's | Type of Fuel Tank |
| installation instructions? Yes No | Oil |
| | Gas - NATURAL |
| IF NO Explain: | G Gas F IV (VVIII) |
| | Size of Tank |
| | , |
| The Type of License of Installer: | Number of Tanks |
| ☐ Master Plumber # | |
| □ Solid Fuel # | Distance from Tank to Center of Flame feet. |
| Oil # | Cost of Work: \$ 2000.00 |
| Gas # PNT 1431 | |
| ☐ Other | Permit Fee: \$ <u>39.00</u> |
| Approved | Approved with Conditions |
| Fire: Stam, | |
| | See attach CITY OF PORTLAND, ME |
| Ele.: | |
| Bldg.: | Inspector's Signature SEP 3 0 2000 Date Approved |
| Signature of Installer | |
| Signature of Installer | THE BEINE |
| White - Inspection - Yellow - File D | ink - Applicant's Gold - Assessor's Copy |

| City of Portland, Main | Q | | | Permit No: | Issue Date: | 1, | CBL: | |
|-------------------------------------------------------|-----------------------------------|----------------------|--------------------------------------------------------|-----------------------------------------|---------------|------------------------|--------------------------|--|
| 389 Congress Street, 0410 | 1 Tel: (207) 874-870 | 3, Fax: (207) 87 | 4-8716 <u>[</u> | 03-1190 | | | 056 G038001 | |
| Location of Construction: | tion of Construction: Owner Name: | | | Owner Address: | | | Phone: | |
| 241 Spring St | David Mulqueeny | | | 31 New Road | | | 450-3611 | |
| Business Name: | Contractor Nam | e: | Co | ntractor Address: | | Pi | hone | |
| | Avery Service | es, Inc. | 7 | Thomas Drive V | 2 | 2077728687 | | |
| Lessee/Buyer's Name | Phone: | | Per | Permit Type: | | | | |
| | | | I. | HVAC | | | | |
| Past Use: | Proposed Use: | | | Permit Fee: Cost of Work: CEO District: | | | | |
| Multi Family / 4 Units | · | | | \$39.00 | 0.00 | 3 | | |
| • | | nnai direct vent | FI | | | NSPECTION | | |
| | | the first floor and | d | _ | · · · | Use Group: | 22 TypeNA | |
| | two on the sec | cond floor. | | ٠ | Denied | | 11/1/ | |
| leaseuse i Af | Family D. W. | . – | | | | |) Joy He | |
| Proposed Project Description: | 77.0 | · | | | | | 11.18 % | |
| Install Gas Direct Vent Heat | ing System | | Sig | nature: | CMK 1 | Signature | Wylley | |
| | | | PE | DESTRIAN ACTI | VITIES DIST | RICT (P.A.D.) | | |
| | | | Ac | tion: Approv | red | oved w/Condit | ions Denied | |
| | | | Sig | mature: | | Date: | | |
| Permit Taken By: | Date Applied For: | | | Zoning | Approval | | | |
| gg | 09/30/2003 | | | | | | | |
| 1. This permit application | does not preclude the | Special Zone o | r Reviews | Zonin | g Appeal | His | toric Preservation | |
| Applicant(s) from meeting | ng applicable State and | Shoreland | • | ☐ Variance | • | ☐ No | ot in District or Landma | |
| Federal Rules. | | +oren | 120- | ~ l^ | | | | |
| 2. Building permits do not septic or electrical work. | | Wetland | Wetland Wetland De | | | oes Not Require Review | | |
| 3. Building permits are voi | d if work is not started | ☐ Flood Zone | tf m | Conditio | | ☐ Re | quires Review | |
| within six (6) months of False information may in | | | | Y | | | | |
| permit and stop all work | | Subdivision | | Interpret | ation | L Ap | pproved | |
| | | Site Plan | | ☐ Approve | d . | _ [V] Ap | proyed w/Conditions | |
| | | _ | | - " | | | ed a ride | |
| | | Maju Minor | MM | Denied | • | | nied 1 | |
| | | 107-4 | 15, | | | 1 | TA 10/4/03 | |
| | | Date: | 6107 | Date: | | Date: | District 12 | |
| | | | | | | pl fra | y, away | |
| | | | | | | - | chiners in | |
| | | CERTIFI(| CATION | | | 1 | 1 The duns | |
| hereby certify that I am the o | wher of record of the na | | _ | roposed work is | authorized h |) verthe owner | of record and that | |
| I have been authorized by the | owner to make this appl | ication as his auth | orized ag | ent and I agree t | o conform to | all applicat | ble laws of this | |
| urisdiction. In addition, if a p | permit for work describe | d in the application | on is issue | d, I certify that t | he code offic | cial's authori | ized representative | |
| shall have the authority to ent | er all areas covered by si | uch permit at any | reasonable | e hour to enforce | e the provisi | ion of the co | de(s) applicable to | |
| such permit. | | | | | | | | |
| | | | | | | | | |
| SIGNATURE OF APPLICANT | | ΑT | DRESS | | DATE | | PHONE | |
| | | 12 | | | | | - | |

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

| JILY OI | Portland. M | uaine - Du | ilding or Use Permi | t | | Permit No: | Date Applied For: | CBL: | |
|----------------------------------------------|----------------------------------------------------|-----------------------------------|--------------------------------------------------------------|-----------|-------------------------------|--------------------------------------|-------------------|----------------------------------------------------------------------|-------------------------|
| • | • | | : (207) 874-8703, Fax: | | 4-8716 | 03-1190 | 09/30/2003 | 056 G038 | 3001 |
| ocation o | of Construction: | | Owner Name: | | | Owner Address: | | Phone: | |
| 241 Spr. | ing St | | David Mulqueeny | | | 31 New Road | | () 450-3611 | |
| Business N | Name: | | Contractor Name: | | Contractor Address: | | | Phone | |
| | | | Avery Services, Inc. | | | 7 Thomas Drive W | estbrook | (207) 772-8 | 687 |
| essee/Bu | yer's Name | | Phone: | | | Permit Type: | | | |
| | | | | | | HVAC | | | |
| roposed | Use: | | | | Propose | d Project Description: | | | |
| ⁄Iulti Fa | amily / 4 Units: | Install natu | ral gas Rinnai direct vent | heater. | Install | Gas Direct Vent H | eating System | | |
| | | | | | | | | | |
| Note: | Historical | | Approved with Conditio | | viewer: | Deborah Andrew | s Approval D | Pate: 10/10 Ok to Issue: | |
| Note: | st be installed on | sides only, | away from front corners. | | | Deborah Andrew Marge Schmucka | | Ok to Issue: | ✓ |
| Note: 1) Mus Dept: | | sides only, Status: | •• | | | | | Ok to Issue: | √ /200: |
| Note: 1) Mus Dept: Note: | st be installed on Zoning | Status: | away from front corners. | Re | viewer: | | | Ok to Issue: Oate: 10/06 Ok to Issue: | /2003 /2003 |
| Note: 1) Muss Dept: Note: Dept: Note: | Zoning legal 4 family D | Status: Status: | away from front corners. Approved | Re | viewer: | Marge Schmucka | d Approval D | Ok to Issue: Date: 10/06 Ok to Issue: | /2003 /2003 |
| Note: 1) Mus Dept: Note: Dept: Note: 1) Mus | Zoning legal 4 family D Building st comply w/ Sta | Status: O.U. Status: te Gas Regs | Approved with Condition | Rent NFPA | viewer: viewer: applica | Marge Schmucka | d Approval D | Ok to Issue: Ok to Issue: Ok to Issue: Ok to Issue: Ok to Issue: | /2003 /2003 /2003 |
| Note: 1) Mus Dept: Note: Dept: Note: | Zoning legal 4 family D Building st comply w/ Sta | Status: O.U. Status: te Gas Regs | Approved Approved with Conditions, Manufacturer's Specs and | Rent NFPA | viewer: viewer: applica | Marge Schmucka Mike Nugent ble codes | Approval D | Ok to Issue: Oate: 10/06 Ok to Issue: Oate: 10/14 Ok to Issue: | /2003 /2003 /2003 |

10/3/2003-gg: call appllicant when permit is ready. /gg

9/25/03

PROPOSAL

Cell#450-3611

AVERY SERVICES, INC.

7 Thomas Drive WESTBROOK, MAINE 04092 (207) 772-8687

FAX (207) 874-0933

TO: Dave Mulqueeney

| 31 New Road Scarborough ME 04074 | Rinnai direct vent | direct vent heaters with new direct vent heaters provided by customer oring St Portland, ME | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--|--|
| | DOR NUMBER | JOB PHONE | | |
| We hereby submit specifications and estimates for: | Service of the servic | <u> </u> | | |
| Avery Services, Inc. is pleased to quote on a time & ma (1) in each of your (4) apartments. Scope of work to in | terial basis, the installation o clude: | f (4) Rinnai direct vent heaters; | | |
| Assisting in removal of the existing failed direct vent he | eaters. | | | |
| Install (1) Rinnai direct vent natural gas heater (heater s | supplied by customer) in each | of the (4) apartments. | | |
| Reconnect to existing natural gas piping system. | | | | |
| Start up & test. | | | | |
| systems | | | | |
| We Propose hereby to furnish material and labor — complete in a Two Thousand and 00/100 Dollars | accordance with the above specifications | s, for the sum of: dollars (\$ | | |
| Payment to be made as follows: | | | | |
| All balances due on completion. If payment is not made as outlined above, a service charge of 29 | & ser mouth on the overdue holes. | to plus all representation costs of collection | | |
| including attorney's fees will be paid. | | e plus all reasonable costs of conection, | | |
| All material is guaranteed to be as specified. All work to be completed in a profes manner according to standard practices. Any alteration or deviation from above spe tions involving extra costs will be executed only upon written orders, and will become at charge over and above the estimate. All agreements contingent upon strikes, accide delays beyond our control. Owner to carry fire, tornado, and other necessary insurance workers are fully covered by Worker's Compensation insurance. | nextra Signature | | | |
| Acceptance of Proposal — The above prices, specifications a conditions are satisfactory and are hereby accepted. You are authorized to do the was specified. Payment will be made as outlined above. | and Signature | | | |
| Date of Acceptance: | <u> </u> | | | |
| | To Reorder: -6380 or nebs.com | a | | |