

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

Permit No: 09-0567	Issue Date:	CBL: 063 B010001
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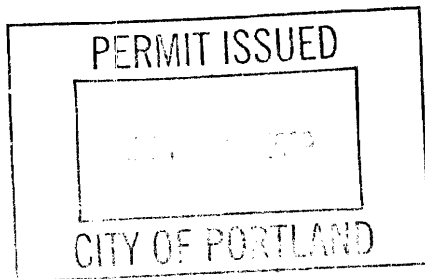
Location of Construction: 208 VAUGHAN ST	Owner Name: 210 VAUGHAN STREET LLC	Owner Address: 81 COUSINS RD	Phone:
Business Name:	Contractor Name: Dan Libby	Contractor Address: 271 Milt Brown Rd. Standish	Phone: 2076424768
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-6

Past Use: Mixed Use Commercial	Proposed Use: Mixed Use Commercial - Install Prestige Direct Vent Natural Gas Heater.	Permit Fee: \$120.00	Cost of Work: \$10,000.00	CEO District: 2
Proposed Project Description: Install Prestige Direct Vent Natural Gas Heater. <i>LEGAL USE: 4 residential DU with DTS office on The 1st floor - 3 DU in the Principal Bldg come DU in the Rear carriage house</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied * See Conditions	INSPECTION: Use Group: B/R2 Type HVAC IMC-2003 Signature: JMB 6/24/09	
		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: lmd	Date Applied For: 06/05/2009	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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input checked="" type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>6/8/09</i>	Date: _____	Date: <i>6/11/09</i>



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

063-B-010

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 208 Vaughn ST Use of Building Mult. Use Date 6-3-07
 Name and address of owner of appliance 200 Vaughn LLC - Mike Carter
81 Cousins Rd Buxton, Me. 04093
 Installer's name and address Dan Libby
271 Milt Brown Rd Standish, Me. 04084 Telephone 207-642-4768

Location of appliance: MAIL PERMIT TO:

Basement Floor
 Attic Roof

Type of Fuel:
 Gas Oil Solid

Appliance Name: Prestige
 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 56
 Other _____

Type of Chimney:

Masonry Lined
 Factory built _____

Metal
 Factory Built U.L. Listing # _____

Direct Vent
 Type PVC UL# _____

Type of Fuel Tank

Oil
 Gas Natural

Size of Tank NA

Number of Tanks NA

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 10,000.00

Permit Fee: \$ _____

Approved **Approved with Conditions**

Fire: _____ See attached letter or requirement

Ele.: _____

Bldg.: _____

Signature of Installer Dan Libby Inspector's Signature _____ Date Approved _____

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

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Permit No: 09-0567	Date Applied For: 06/05/2009	CBL: 063 B010001
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Location of Construction: 208 VAUGHAN ST	Owner Name: 210 VAUGHAN STREET LLC	Owner Address: 81 COUSINS RD	Phone:
Business Name:	Contractor Name: Dan Libby	Contractor Address: 271 Milt Brown Rd. Standish	Phone: (207) 642-4768
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Mixed Use Commercial - Install Prestige Direct Vent Natural Gas Heater.	Proposed Project Description: Install Prestige Direct Vent Natural Gas Heater.
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Dept: Historic	Status: Approved with Conditions	Reviewer: Deborah Andrews	Approval Date: 06/11/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) * Approved with the understanding that all exterior vents will be located on the rear of the building, not visible from the street.			
Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 06/08/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.			
2) 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.			
3) This property shall remain a four residential dwelling units with Doctor's offices on the first floor. Three dwelling units are in the principal building and one dwelling unit is in the rear carriage house. Any change of use shall require a separate permit application for review and approval.			
4) 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: Jeanine Bourke	Approval Date: 06/24/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) The appliance shall be installed in accordance with the UL listing, IMC 2003 and NFPA 211.			
2) The installation must comply with the State of Maine Gas Regulations.			
Dept: Fire	Status: Approved with Conditions	Reviewer: Capt Keith Gautreau	Approval Date: 06/16/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Install shall comply with NFPA 90B.			
2) Install shall comply with all manufacture's specifications.			

Comments:
6/12/2009-gg: received permit from historic as of 6/12/09. /gg

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

Signature of Inspections Official

Date

Date

6/24/09

CBL: 063 B010001

Building Permit #: 09-0567