

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT PERMIT

PERMIT ISSUED
Permit Number: 051080
AUG 19 2005
CITY OF PORTLAND

This is to certify that Yc Portland Lp /Granite Corporation
has permission to install gas boiler in multi family residence
AT 57 Frederic St 067 K019001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification inspection must given and when permission procured before this building or part thereof is occupied or closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. Capt. Greg Cass 8-10-
Health Dept. _____
Appeal Board _____
Other _____
Department Name

[Signature] 8/16/05
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-1080	Issue Date: PERMIT ISSUED	CBL: 057-K019001
-----------------------	-------------------------------------	---------------------

Location of Construction: 57 Frederic St	Owner Name: Yc Portland Lp	Owner Address: 307 Cumberland Ave	Phone: [Redacted]
Business Name:	Contractor Name: Granite Corporation	Contractor Address: PO Box 370 Oakland	Phone: 2074659229
Tenant/Buyer's Name	Phone:	Permit Type: HVAC	Zone: C-31
Past Use: multi unit residence	Proposed Use: multi unit residence with HB Smith gas boiler	Permit Fee: \$561.00	Cost of Work: \$59,225.00
Legal use: 20 unit apt Bldg (05-0452) Proposed Project Description: install gas boiler in multi family residence		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: U Type: Heating State Gas Regs
		Signature: <i>Chapt. Cross</i> Signature: _____ PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions Signature: _____ Date: _____	

Permit Taken By: jharris	Date Applied For: 08/09/2005 7/28/05	Zoning Approval
-----------------------------	---	------------------------

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 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MMT <input checked="" type="checkbox"/> Date: <i>8/9/05</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 type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" 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: _____
	No change busl <i>ok 8/9/05</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

City of Portland, Maine - Building or Use Permit

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

Permit No: 05-1080	Date Applied For: 07/28/2005	CBL: 067 K019001
------------------------------	--	----------------------------

Location of Construction: 57 Frederic St	Owner Name: Yc Portland Lp	Owner Address: 307 Cumberland Ave	Phone:
Business Name:	Contractor Name: Granite Corporation	Contractor Address: PO Box 370 Oakland	Phone: (207) 465-9229
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	
Proposed Use: multi unit residence 20 unit D.U. with HB Smith gas boiler		Proposed Project Description: install gas boiler in multi family residence	

Dept: Zoning **Status:** Approved **Reviewer:** Marge Schmuckal **Approval Date:** 08/09/2005

Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/16/2005

Note: **Ok to Issue:**

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

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 08/10/2005

Note: **Ok to Issue:**

1) Instalation to comply with NFPA 54



FILL IN AND SIGN WITH INK

67 K 019

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 63 Frederic St Use of Building Multi Family Housing Date _____
Name and address of owner of appliance Fore River Housing LP

Installer's name and address Granite Corp Po Box 370 OAKLAND, ME. 04963
Telephone 465-9229

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: H.B. Smith 19A-S/W-4 Boilers

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 # PNT3466
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank N/A

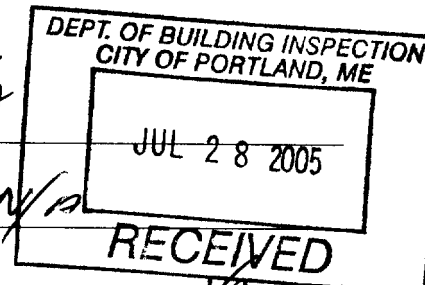
Number of Tanks N/A

Distance from Tank to Center of Flame N/A feet.

Cost of Work: \$ 59,225

Permit Fee: \$ 384.00 (\$561.00)

OWRS \$177.00



Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer [Signature]