

**City of Portland, Maine - Building or Use Permit Application**

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

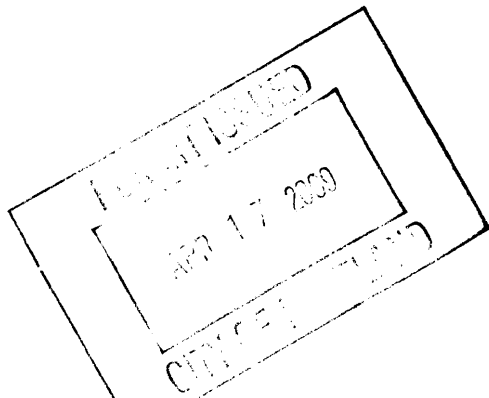
Permit No: 09-0303	Issue Date: 4/17/09	CBL: 070 A001001
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Location of Construction: 70 ST JOHN ST	Owner Name: ST JOHN STREET ASSOCIATES	Owner Address: PO BOX 4821	Phone:
Business Name:	Contractor Name: AAA Energy Service	Contractor Address: 4 Commercial Road, Po Box 908 Scar	Phone 2077725719
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Commercial - Barbar Foods	Proposed Use: Commercial - Barbar Foods - Install a York unit on Roof of Bio Lab	Permit Fee: \$110.00	Cost of Work: \$8,687.00	CEO District: 2
Proposed Project Description: Install a York unit on Roof of Bio Lab		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: F2 2B IBC-2003 IMC-2003	
		Signature:		Signature: CR
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: 04/10/2009	<b>Zoning Approval</b>		
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: 4/17/09</p>	<p><b>Zoning Appeal</b></p> <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 <p>Date:</p>	<p><b>Historic Preservation</b></p> <input type="checkbox"/> Not in District or Landmark <input checked="" 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 <p>Date: 4/17/09</p>
	<p>O.K.</p>		



**CERTIFICATION**

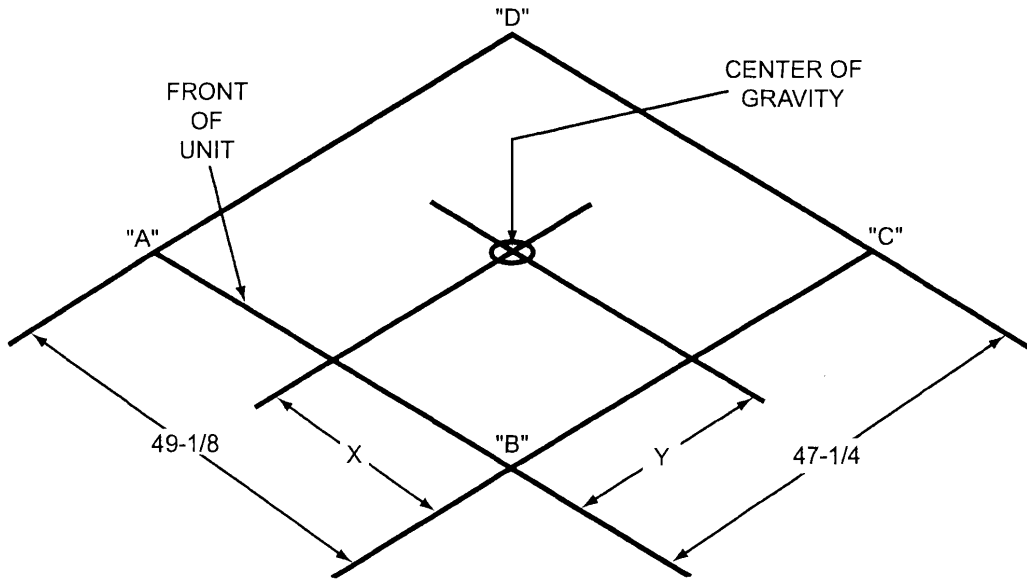
I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition,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

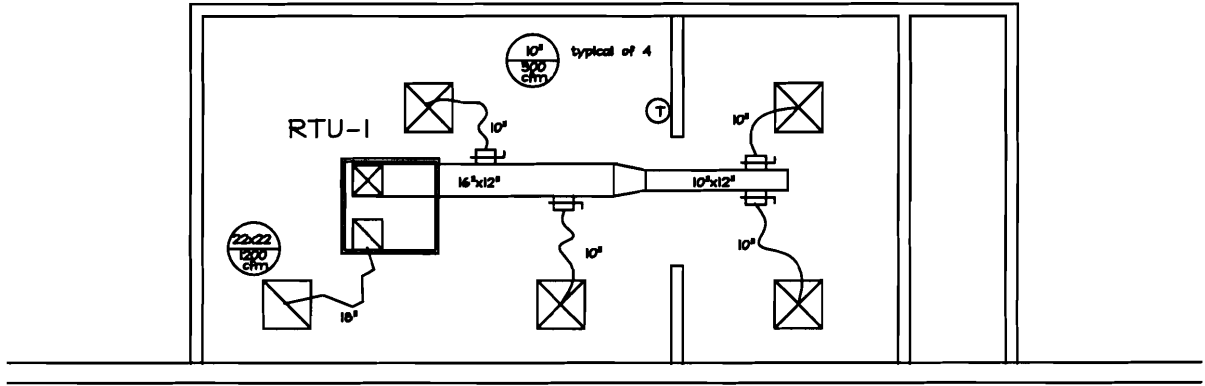
## Weights and Dimensions

### DNX, DNY and DNZ Unit Weights

#### Unit 4 Point Load Weight



Size (Tons)	Model	Weight (lbs.)		Center of Gravity		4 Point Load Location (lbs.)			
		Shipping	Operating	X	Y	A	B	C	D
024 (2.0)	DNZ	365	360	24	25	91	92	89	88
	DNY	405	400	20	24.5	116	84	84	117
	DNX	445	440	20	24.5	127	93	93	127
030 (2.5)	DNZ	395	390	24	24.75	98	99	97	96
036 (3.0)	DNZ	400	395	24	25	100	101	98	96
	DNY	445	440	20	24.25	126	91	93	129
	DNX	485	480	20	24	136	98	103	143
042 (3.5)	DNZ	470	465	21	24.8	131	103	101	129
048 (4.0)	DNZ	475	470	21	24.8	133	104	102	130
	DNY	505	500	20	24	142	102	107	149
	DNX	505	500	20	24	142	102	107	149
060 (5.0)	DNZ	545	540	20	24	153	110	116	161
	DNY	545	540	20	24	153	110	116	161



TAG	MAKE	MODEL	COOLING	HEATING	VOLT	PHASE
RTU-1	YORK	D2NZ030N03606	30,000 BTU	36,000 BTU	208/230	3

Unit to be charged with R410A and equipped with factory roof curb and itegrated economizer



Barber Food CLIENT	70 St John St Portland, Me
BioLab PROJECT	
M-1 DRAWING TITLE	

**ENERGY SERVICE CO.**

4 Commercial Road • P.O. Box 908  
 Scarborough, ME 04070-0908  
 (207) 883-1473 • FAX (207) 883-8371

"QUALITY IS HARD TO DEFINE BUT EASY TO RECOGNIZE"

#	REVISIONS	DATE
1.	Owner's Review	12/12/02

**City of Portland, Maine - Building or Use Permit**

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<b>Permit No:</b> 09-0303	<b>Date Applied For:</b> 04/10/2009	<b>CBL:</b> 070 A001001
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<b>Business Name:</b>	<b>Contractor Name:</b> AAA Energy Service	<b>Contractor Address:</b> 4 Commercial Road, Po Box 908 Scar	<b>Phone</b> (207) 772-5719
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	

<b>Proposed Use:</b> Commercial - Barbar Foods - Install a York unit on Roof of Bio Lab	<b>Proposed Project Description:</b> Install a York unit on Roof of Bio Lab
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 04/17/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Chris Hanson	<b>Approval Date:</b> 04/17/2009
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules			

## 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

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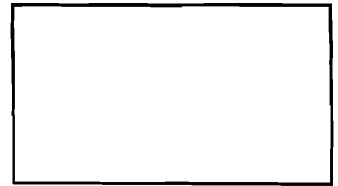
\_\_\_\_\_  
Signature of Inspections Official

\_\_\_\_\_  
Date



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 70 ST JOHN ST 70 A1 Use of Building INDUSTRIAL Date 4/10/09  
Name and address of owner of appliance BARKER FOOD 70 ST JOHN ST PORTLAND ME

Installer's name and address AAA ENERGY SERVICE PO BOX 908  
4 COMMERCIAL RD SCARBOROUGH ME 04074 Telephone 207-883-1473

**Location of appliance:**

- Basement
- Attic
- Floor
- Roof

**Type of Fuel:**

- Gas
- Oil
- Solid

Appliance Name: YORK

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 # PNT1022
- Other \_\_\_\_\_

**Type of Chimney:**

- Masonry Lined  
Factory built INTERNAL
- Metal  
Factory Built U.L. Listing # NA
- Direct Vent  
Type NA UL# \_\_\_\_\_

**Type of Fuel Tank**

- Oil
- Gas

Size of Tank NATURAL GAS

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

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

Cost of Work: \$ 8,687

Permit Fee: \$ 110

Approved

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

Approved with Conditions

- See attached letter or requirement

[Signature]  
Inspector's Signature

4/10/09  
Date Approved

Signature of Installer [Signature]