City of Portland, Mair	ne - Building or Use	Permit Application							
389 Congress Street, 0410	01 Tel: (207) 874-8703	3, Fax: (207) 874-871	6 04-1252 r	339 L003001					
Lncation of Construction:	(Owner Name:		Owner Address:	Phone:					
169 Broadway	Nappi Ben J &	ž	169 Broadway	No. i.					
Business Name:	Contractor Name	2:	ContractorAddress:	Phone					
	Builders Insul	ation	5 15 Riverside Industrial F	Parkw Portlan 2078786600					
Lessee/Buyer's Name	ee/Buyer's Name Phone:			Permit Type: Zone: HVAC Zone:					
Past Use:	Proposed Use:			i					
Single Family Home Single Family Home / Instacraftsman Wood Fireplace			\$30.00 \$ FIRE DEPT: Approved Denied	Use Group: 0.3/// Type: 147					
Proposed Project Description:	ı			Doctor of					
Install FMI craftsman Wood	d Fireplace		Signature:	Signature:					
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						
			Action: Approved Approved w/Conditions Denied						
	_		Signature:	Date:					
Permit Taken By:	Date Applied For:		Zoning Appr	oval					
ldobson 08/25/2004		Special Zone or Revie	ews Zoning Appea	l Historic Preservation					
1.									
		Shoreland	Variance	Not in District or Landma					
 Building permits do not include plumbing, septic or electrical work. 		☐ Wetland	Miscellaneous	Does Not Require Review					
•	oid if work is not started	☐ Floo	Conditional Use	Requires Review					
False information may permit and stop all wor	invalidate a building	Subdi si n	[Interpretation	Approved					
		Site Plan	Approved	Approved w/Conditions					
		Maj Minor MM	Denied	☐ Denied					
		late: 90 hV	late:	Date: 9904					
			-						

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

STATE OF MAINE CHIMNEY OR FIREPLACE DISCLOSURE

Dear Consumer: State law, specifically 32 M.R.S.A., Chapter 33, requires chimney or fireplace installers, as of January 1, 1992, to provide you with this <u>Disclosure</u> prior to the installation work being done on your chimney or fireplace. The purpose of this Disclosure is to help you, as a consumer, make an informed decision as to the abilities of the installer and under what requirements the installation must comply. It is important to note that the State of Maine does not require registration or licensure of chimney or fireplace installers; however, it is just as important to realize that many fires are caused each year by improperly constructed fireplaces and chimneys. For further information bout this law, call the Division of Licensing & Registration at 624-8629 or write to the Division at #35 State House Station, Augusta, Maine 04333.

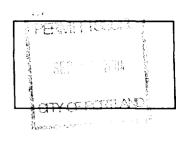
INSTALLER INFORMATION

Name of Installer (if incorporated) D.B.A. D.B.A.	(City or Town) O4103 (Zip Code)
Legal Address 5/5 Riverside Ind. Phy. Rob (Street and No.) (Street and No.) Home Telephone Business Telephone Years of experience doing fireplace or chimney installations CONSUMER IDENTIFICATION Mailing Address 10: 100 1	(City or Town) O4103 (Zip Code)
Legal Address 5/5 Riverside Ind. Phy. Rob (Street and No.) (Street and No.) Home Telephone Business Telephone Years of experience doing fireplace or chimney installations CONSUMER IDENTIFICATION Mailing Address 10: 100 1	(City or Town) O4103 (Zip Code)
Legal Address S S S S S S S S S	(City or Town) O4103 (Zip Code)
(State) (County) Home Telephone	<u> </u>
Home Telephone	04/03 (Zip Code) 1 878 1 6600
Home Telephone	(Zip Code) 1 878 1 6600
CONSUMER IDENTIFICATION Consumer's Name Mike Mittor Mailing Address 10. 130x 2742 Sc. 18st 120 (Street and No.) (Street and No.) (State) (County) Home Telephone (M. 12321/959 Business Telephone M.	<u> 1878 6600</u>
CONSUMER IDENTIFICATION Consumer's Name	
Mailing Address & So. Box 2742 So. Box Hand (Street and No.) (Street and No.) (State) (County) Home Telephone (!! 12321/959 Business Telephone/	
Mailing Address 80. Box 2742 So. Box 1/and (Street and No.) (State) (County) Home Telephone (2/1 12321/959 Business Telephone/	
(Street and No.) (State) (County) Home Telephone Cell 12321/959 Business Telephone	/
(State) (County) Home Telephone Cell 12321/959 Business Telephone/	(City or Town)
(State) (County) Home Telephone Cell 12321/959 Business Telephone/	0411/4
•	(Zip Code)
Installer, please give a brief description of installation being offered.	
Manufactured Wood burning	g fire place.
true to the best of my knowledge. I also understand that if I fail to conform with the shall be subject to penalties as outlined under Title 32, Chapter 33, Oil and Solid F	
Signature Sill Rec D	1 2 / / -

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

7	The undersign	ied hereby	applies for	· a perm	it to install	thefollowing	heating,	cooking	orpower	equipment	in
accorda	nce with the <mark>l</mark>	aws of M	aine, the Bi	uilding (Code of the	City of Portle	and, and	thefollow	ving speci	ifications:	

$\mathcal{D} \otimes \mathcal{D} = \mathcal{D} \otimes $	sulation 575 Riverside Inc. P
Location of appliance: Basement Floor Roof Type of Fuel: Gas Oil Solid Wood Appliance Name: Fm Crafts man Wood Fice place	Type of Chimney: Masonry Lined Factory built Metal No Soaf T induces or Eles. Factory Built U.L. Listing #
U.L. Approved Yes No Will appliance be installed in accordance with the manufacture's installation instructions? Yes No IF NO Explain:	Type UL# Type of Fuel Tank Gas Sue of Tank
The Type of License of Installer: Master Plumber # Solid Fuel # Oil # Gas # Other	Number of Tanks Distance from Tank to Center of Flame feet. Cost of Work: \$
Approved Fire:	Approved with Conditions ☐ See attached letter or requirement ☐ Inspector's Signature ☐ Date Approved
Signature of Installer	inspector's Signature Date Approved

City of Portland, Ma	ine - Building or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 04	101 Tel: (207) 874-8703, Fax: (2	.07) 874-871 <u>6</u>	04-1252	08/25/2004	339 L003001
Location of Construction:	Owner Name:	0	wner Address:	!	Phone:
169 Broadway	Nappi Ben J &	1	69 Broadway		
Business Name:	Contractor Name:	C	ontractor Address:		Phone
	Builders Insulation	5	15 Riverside Ind	ustrial Parkw Portlan	(207) 878-6600
_essee/Buyer's Name	Phone:	Pe	ermit Type:		•
		_1	HVAC		
Proposed Use:		Proposed	Project Description	;	
Single Family Home Ins	tall FMI craftsman Wood Fireplace	Install F	MI craftsman W	ood Fireplace	
Dept: Zoning	Status: Approved	Reviewer:	Tammy Munson	Approval Da	ote: 09/09/2004
Note:					Ok to Issue: 🗹
Dept: Building	Status: Approved with Conditions	Reviewer:	Tammy Munson	Approval Da	nte: 09/09/2004
Note:			-	- -	Ok to Issue:
1) Installation must be do	one per manufacturers specifications.				

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read

Application And Notes, If Any, Attached	PERMIT	Permit Number 041252
This is to certify that Nappi Ben J &/Builders has permission to Install FMI craftsman V		SE
AT 169 Broadway		L003001 OTY OF PG NO
of the provisions of the Statutes the construction, maintenance at this department.	of I ine and of the ances	g this permit shall comply with all of the City of Portland regulating as, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	N fication inspect in must go and with a permission procuble re this I ding or at thereoder to sed-in. H IR 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		2/2/04
Appeal Board Other DepartmentName	ENALTY FOR REMOVINGTHISCA	Director Building Inspection Services
		\ /

I Factory-B	uilt Chimney a	nd Chimn	ey Units.	•				
	•	- ** * * * * * * * * * * * * * * * * *						
Factory-bu enditions of the lis	ilt chimney ar	ad chimney	y units shall	be listed an	d shall be i	nstalled in	accordance v	with the tempe
encitions of the us		TO THE COURT	a s mstruci	TOUS MILL MIT	redmene	IIS OI IVI I	ri 221 lui dii	инсуз, жеры
ZIIS AIMI SOULI IGEI	appnances.	* (100 - 12) * (100 - 12)				er rel igie		
Masonry C	himner							•
				و المساور المساور المساور				
Masonry c	himneys shall	be designe	d, anchore	d, supported	and re-enf	orced as re	quired by NF	PA 211 for
imneys, fireplaces				6 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1				
1								
Metal Chin	mey.		343 37-14					
				with N	CDA 211 a	nd shall or	mly good end	ineering pract
necessary for:	neàs suam de (CONSTRUCTE	i iii accord	The Mill M	FFA 211, a	nu snan aj	,bry Boog ens	'Weer I'' P brane
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1. Strength	to resist stres	S			- War in 1.	1		
2. Adequat	te anchoring a					are and		
3. Durabili								
	against leakages					and the second	S. A. S. A.	
J. Allowan	ces for therms	n expansio		A Description			Sept. 16 Annie 17 Ann	
Factory But	ilt Fireplace.			4.7	i in in the second of the seco			
AND MANY TO THE	Service Service				494		Court feet	
		all be liste	d and shall	be installed	in accorda	nce with th	e terms of its	listing and all
licable sections o	fNFPA 211.	100						
				K LETTE Y				Part Carre
Masonry Fi	replace.							
Masoney fir	eplaces shall r	neet the re	mirements	of NFPA 2	1. Chapter	7 and all	other pertinen	t sections.
Masomy III	Chieres and I		den enteres		,			
Other		en a	The second					
Ower				and the state of the second of the state of	7		and the second second	

CONSUMER CHECKLIST

- 1. Have you asked for references to be provided by the installer?
- 2 Is the installer familiar with the NFPA 211 codes and does the installer carry a code book?
- 3. If the installation is a pre-fabricated or fireplace, is its manufacturer registered with the Maine Oil & Solid Fuel Bd.
- 4. Does the installer provide any type of written guarantee for the product installation being proposed?
- 5. Has the installer provided you with a written contract? 10 M.R.S.A. Chapter 219-A requires written contracts for any home remodeling or construction with an estimated cost in excess of \$1,400.
- 6. Have you asked the local fire department or code enforcement officials to inspect the installation during and after completion?

Revised 5/97