

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-0174	Issue Date:	CBL: 155 E008001
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Location of Construction: 44 BAY ST	Owner Name: MGW CONSULTING AND DEVE	Owner Address: 46 IRVING ST	Phone:
Business Name:	Contractor Name: Builders Insulation/ Builders Installe	Contractor Address: 515 Riverside Industrial Parkw Portlan	Phone 2078786600
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-3

Past Use: Single Family Home	Proposed Use: Single Family Home - install a FMI Direct-Vent Fireplace	Permit Fee: \$40.00	Cost of Work: \$1,225.00	CEO District: 4
		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>HVAC</i> <i>State Gas Regs</i>	

Proposed Project Description: install a FMI Direct-Vent Fireplace	Signature:	Signature:
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: 02/25/2010	Zoning Approval
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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 style="font-size: 24pt; font-weight: bold; text-align: center;">PERMIT ISSUED</p> <p style="font-size: 18pt; text-align: center;">MAR - 4 2010</p> <p style="font-size: 18pt; text-align: center;">City of Portland</p>	<p>Special Zone or Reviews</p> <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"/> MM <input type="checkbox"/> Date: <i>oil 2/24/10</i>	<p>Zoning Appeal</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 Date:	<p>Historic Preservation</p> <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:
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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

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

PERMIT ISSUED

MAR - 4 2010

City of Portland

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 44 Box St 155-E-8 Use of Building Home Date 2/25/10
 Name and address of owner of appliance Jared Robie PO Box 1508
Kindham, ME 04062
 Installer's name and address Saidors Installed Prod.
515 Riverside Ind. Pkwy. Portland Telephone 878-6600

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: FMS 36" Victorian

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 # PdT-3025
- Other _____

Type of Chimney:

- Masonry Lined

Factory built _____

- Metal

Factory Built U.L. Listing # _____
Dept. of Building Inspections
City of Portland Maine

- Direct Vent

Type Horizontal UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank N/A

Number of Tanks N/A

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 1225⁰⁰

Permit Fee: \$ 90

Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

- See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer [Signature]

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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 02/26/2010	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 03/02/2010	Ok to Issue: <input checked="" type="checkbox"/>
Note: 1) The installation must comply with the State of Maine Gas Regulations.				