

City of Portland, Maine - Building or Use Permit Application

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

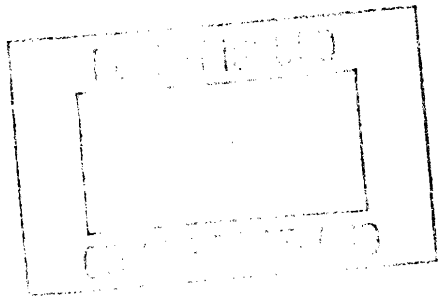
Permit No: 07-1489	Issue Date: 12/26/07	CBL: 156 F006036
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Location of Construction: 610 BAXTER BLVD	Owner Name: CIANCHETTE FAMILY LLC	Owner Address: 42 MARKET ST	Phone:
Business Name:	Contractor Name: S. P. Plumbing & Heating Inc.	Contractor Address: 721 Maine St South Portland	Phone 2077757277
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-3

Past Use: Condominium unit #36	Proposed Use: Condominium unit #36 - Embassy AXIA gas direct vent attic unit	Permit Fee: \$150.00	Cost of Work: \$12,500.00	CEO District: 4
Proposed Project Description: Embassy AXIA gas direct vent attic unit <i>total legal # of res. condos: 65</i>		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-2 Type: SB IMC 2003 NFPA Signature: 12/26/07 C.M.	
		Signature: <i>Greg Carr</i> 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: Idobson	Date Applied For: 12/10/2007	Zoning Approval
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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"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied	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: <i>12/10/07</i>	Date: _____	Date: _____



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

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Business Name:	Contractor Name: S. P. Plumbing & Heating Inc.	Contractor Address: 721 Maine St South Portland	Phone (207) 775-7277
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Condominium unit #36 - Embassy AXIA gas direct vent attic unit	Proposed Project Description: Embassy AXIA gas direct vent attic unit
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 12/10/2007**Note:** **Ok to Issue:**

- 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.
- 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 entire property shall remain sixty-five (65) residential condominium dwelling units.. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 12/26/2007**Note:** **Ok to Issue:**

- 1) The installation must comply with the State of Maine Gas Regulations.
- 2) The appliance shall be installed in accordance with the IMC 2003 and NFPA 211
- 3) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules
- 4) Maintain proper setback(s) from property lines/buildings and proper clearances from verticle openings when direct venting.

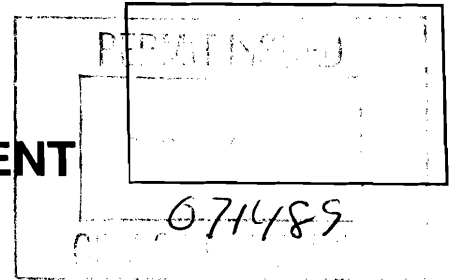
Dept: Fire **Status:** Approved **Reviewer:** Capt Greg Cass **Approval Date:** 12/13/2007**Note:** **Ok to Issue:** **Comments:**

12/10/2007-mes: Total legal number of residential condominiums on site is 65



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 610 Baxter Blvd unit 36 ^{156 F-006-36} Use of Building Residential Date 12/10/07
 Name and address of owner of appliance Cianchette Family LLC
178 Woodville Rd Fal, ME 04105
 Installer's name and address S.P. Plumbing & Heating Inc
120 Thaddeus St Suite 8 So. Portland, ME 04106 Telephone 775-7377

Location of appliance:

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: EMBASSY AXIA

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 1383
- Other _____

Type of Chimney:

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

Type of Fuel Tank

- Oil
- Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 12,500.00

Permit Fee: \$ 150.00

DEC 10

Approved

Approved with Conditions

Fire: _____

Ele.: _____

Bldg.: _____

See attached letter or requirement

Inspector's Signature

Date Approved

Signature of Installer

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