Form # 2P ON

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And Notes, If Any, Allached

BU

PERMIT

Permit Number: 101403

This is to certify thatKicin Christian M /n.	/ ∗		
has permission toInstall 47 sq. ft self	Contained with	7	
AT _14 Oakley St		CR 168	-F019001
	e of Mage and of th	10-00-0	this permit shall comply with all of the City of Portland regulating o, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	give nd writte per befor this but no	ectic must be missi procured or no hereof i sed-In. 2 IEQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS			
Health Dept	-— - —		
Appeal Board			// //

PENALTY FOR REMOVING THIS CARD

City of Portland, Ma	~	1.	,,,	Permit No:	Impr Dace:		CNI.;	
389 Congress Street, 04	101 Tel: (207) 874-8703	3, Fax: (207) 874-87	16 📙	10-1403			168 FQ	9001
Location of Construction:	Owner Name:	<u> </u>	Own	er Address:			Phone:	
14 Oakley St	Klein Christia	n M _	14	Oakley St			207-831-4	4409
Business Name:	Contractor Name	#:	Соп	trattor Address:			Phuoe	_
 	u √ #		Po	tland				
Lemce/Bayer's Name	Phone:			nit Type:		_		Zone:
<u> </u>			A	<u> Nerations - Dwe</u>	ellings			R-5
Past Use:	Proposed Coc:		Per	mit Fee:	Cost of Work:	CE	O District:	7
		/ Install 47 sq. ft. self		\$60.00	\$4,000.0	Ю.	4	
	contained bot	·		E DEFT:	Landa III Carrer I	SPECTION		
			\	N/#□	Desired U	se Group.		Type:
				$-\gamma_f$		þ	<i>۱/ کو</i>	73-
			4		ľ	E	29 200	
Proposed Project Description:		I			1_	_		
i instatt 47 sq. n. seit cottu	ينم Ander hot hub. الم barde من في المنطقة	N ⊲		talture:		Ensture:	4/ /	<u></u>
			ט, דינ	ESTRIAN ACTT	VILLEN DISTRE		γo	
			Act	rou. 🔲 Abbian	ed 🗌 Approv	ed Cor	iditions 🔲	Denied
 			Sign	nature:		De	te:	
Permit Taken By:	Date Applied For:	<u> </u>		Zoning	Approval			
gg	11/10/2010							
I. This permit application	on does not preclude the	Special Zone or Rev	icws	Zomin	g Appeal	T^{-1}	Historic Pres	er#Biloo
- ''	eting applicable State and	☐ Shoreland		☐ Veriance	•	⊿	Not io Distric	t or Landment
2. Building permits do n sepric or electrical wo		☐ Wallend		M(RX)la	05745		Does Not Rec	quire Revuew
3. Building permits are vithin six (6) months	void if work is not started of the date of issuance.	☐ Flood Zons		☐ Condition	oal Use		Roquires Rev	i. "
False information may permit and stop all we	y invalidate a building ork	Subdivision		interpret	Sèn		Approved	
		Site Plan			d		Apprined wA	Condition
PERMIT IS	SSUED	Maj Minor Mo	4 🗆	☐ Demical			Denied Jesus	
		Ok al codulor	d				AGN	
NOV 3 0	$\mathcal{L}_{\mathcal{L}}$	Date: 11 w/w	и	Dete:		Date		
107 00	,							
•								

City of Portland

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is anthorized 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, it 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.

MGNATURE OF APPLICANT	ADORESS	DATE	PHONE

	y of Portland, Maine	-			ermot (VO:	lasue Date:		CBL:	
389	Congress Street, 04 [01	Tel; (207) 874-8703	. Fax: (207) 874-871	6 L	10-1403	l		168 F01	1000
Loça	tion of Construction:	Owner Name:		Own	er Address:			Phone:	_
14 (Oakley St	Klein Christian	n M	14 (Onkley St			207-83 t⊸4	1409
Brair	чезя Магос:	Contractor Name	•	Cont	tractor Address:	_		Phone	
		n√a		_	rdand				
Less	tt/Buyer's Name	Phane:		1	nit Type:				Zone:
				Ale	terations - Dwel	llings			R
Pari	lbe:	Proposed Use:		Pen	nii Fee:	Coat of Work:	ĈE.) District:	ī
Single Family Single Family contained hot to		Install 47 sq. ft. self bub.		260.00	\$4,000.		4		
				E DEPT:	Approved IN	SPECTIO	ON:		
\		ì		Approved Approved		Denied	Use Group: Type: V		Type: U
					- '''		P	6-1 / Sp	14
				╛			FI	25 260	
	osed Project Description:	1	r	l					
lns	stall 47 sq. ft. self containe	d hot tyb. YA balde pu	N o		Mire:		ignature:		<u> </u>
				PED	ESTRIAN ACTIV	TITES DISTRI	CTOPA	מע	
				Аси	іюп: 🔲 Арргоче	Appro	ved 🖟 Can	dinons 🗌	Denied:
				Sign	Dapping.		De	le:	
Pera	pli Taken By:	Date Applied For:			Zoning	Approval		_	
gg		11/10/2010							
١.	This permit application d	ees not preclude the	Special Zone or Revie	241	Zenine	Appeal	י	Historic Pres	€LASDOF
	Applicant(s) from meetin		Shoreland		☐ Veriance			Not in Distric	a or Landmark
	Federal Rules.		l				-		
2.	Building permits do not i	nclude plumbing.	☐ Watend		Misseller	TANDUA .		Does Mat Rea	quire Review
	septic or electrical work.		Į						
3.		if work is not started	☐ Flood Zone		Conditional Use		☐ Requires Review		
	within six (6) menths of				_				
	False information may in		Subdivision		[] Interpreta	T iùn		Approved	
	permit and stop all work.	•							
	=		Site Plan		Approved	d		Approved w/	Conditions
	PERMIT IS	SSUED					Ì		
			Maj Minoy Minoy Minoy	1 []	Denied			Denied	
	NOV 3 0	0000	OK witcodylow					160	
	71 U T T	2010	Date 11 0 /18	<u> </u>	Dutc:	_	Date:		
	2								
	City of Port	liand							
		···— / -							

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 explorm 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 as any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE

City of Portland, Main	e - Building or Use Permit		Permit No:	Date Applied For:	CBL:
389 Congress Street, 0410	! Tel: (207) 874-8703, Fax: (207	7) 874-8716	10-1403	11/10/2010	168 F01900t
Location of Construction:	Owner Name:		water Address:		Phone:
14 Oakley St	Klein Christian M	1	4 Oakley St		207-831-4409
Business Name:	Contractor Name:	c	outractor Address:		Phone
	n/ s		Portland		
Lessee/Buyer's Name	Phune:	Pe	ermit Type:		
<u>_</u>			Alterations - Dwe	llings	
Proposed Use:		Proposed	Project Description	<u></u>	
Single Family / Install 47 sq.	it, self contained but tub.	[nete][-	47 sq. ft. self con	ained hot tub.	
Dept: Zoning S Note: Hot tub is going on	tatus: Approved with Conditions	Reviewer:	Ann Machado	Approval	Date:
- +	in a single family dwelling. Any chan	ige of use shal	I ге дите а зерата	te permit applicațion	
 This permit is being appropriately. 	noved on the basis of plans submitted	. Any devian	ons shall require :	r a≼berape abbto∧aj j	pefore starting that
Dept: Building S	tatus: Approved with Conditions	Reviewer:	Jonathan Rioux	Approval I	Date: 1./30/2010 Ok to Issue: 12
1) As discussed, submit doc	zunentation stating that the hot tob se	Jety cover co	mplies with ASTI	M F 1346, as listed i	n Section AG107.
2) Pool and barrier installat	ion shall meet the code requirements	in Appendix	Gofthe IRC 200	3.	
	•	T. J. T. P. W. J. T. W.	5 51 ···· 200		
2) Sebauste bemute and tedi	tired for any electrical installation.				

PERMIT ISSUED

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginepections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please rend the consistions of approval that is attached to this permit!! Contact this office if
 you have any questions.
- Permits expire in 6 months, if the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and an bequent release to continue with construction.
- X Yerify patio/ hot tub location; final inspection required at cumpletion of work.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

PERMIT ISSUED

NOV 3 0 110

City of Portland

CBL: 188 F019001 Building Permit #: 10-1403



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

		Λ)
		100.10 2010
Received from		Jan Klund
Location of Work	14	On sur Sa
Cost of Construction	\$	Building Fee:
Permit Fee	\$	Site Fee:
	C	ertificate of Occupancy Fee:
/		Total:
Building (IL) Plun	nbing (15) Electrical (I2) Site Plan (U2)
Other		
CBL: 168 F	-010	
Check #:	7	Total Collected s
No work is	to b	e started until permit issued.
Please kee	p orio	ainal receipt for your records.

Taken by:

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

General Building Permit Application

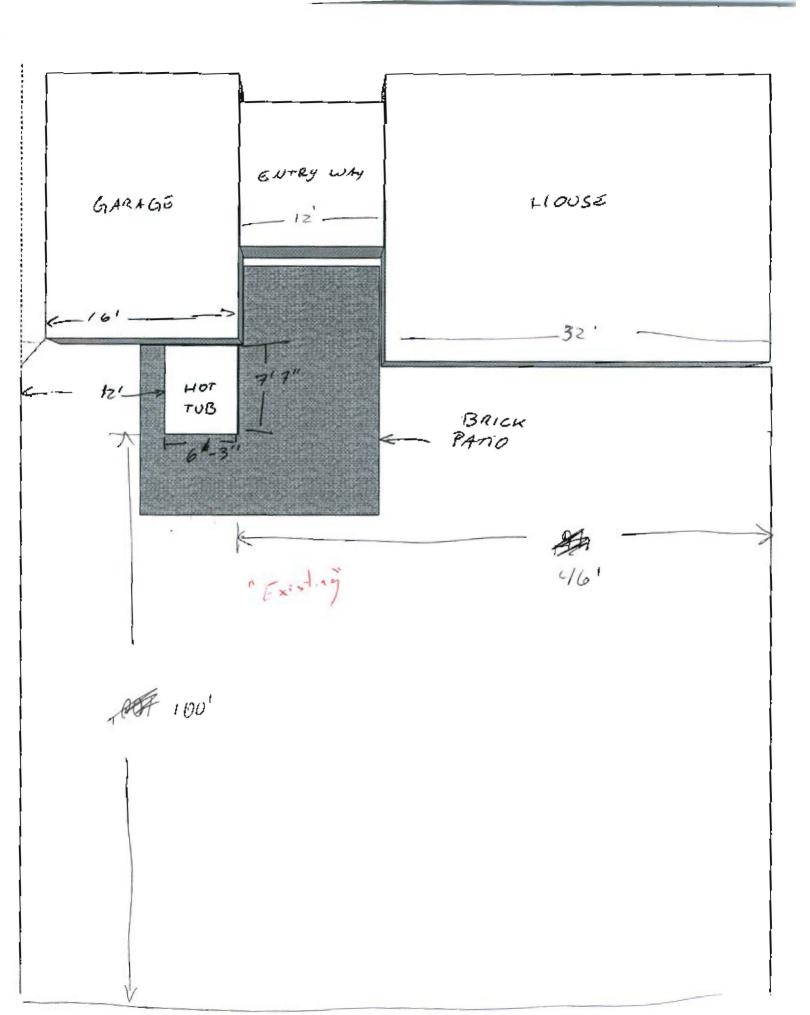
If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Total Square Footage of Proposed Structu		Number of Stories
Tax Assessor's Chart, Block & Lot	Applicant *must be owner Lessee or B	uyer Telephone:
Chart# Block# Lot#	Name Christian KLEIN	207-831-440
168 I 119	Address 14 OAKLEY ST.	
100 1 017	City, State & Zip PORTLAND, ME O	4103
essee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of
	Name	Work: \$ 4,000.00
	Address	C of O Fee: \$
	Ciry, State & Zip	Total Fee: \$ 60.00
		[[A 1] Lang S [A 1] [] [] [] []
If vacant, what was the previous use?	Number of Reside	ential Units
If vacant, what was the previous use? Proposed Specific use:	SINGLE FAMILY Number of Reside	ential Units1
If vacant, what was the previous use?Proposed Specific use:	D If yes, please name	f Contained
If vacant, what was the previous use?	D If yes, please name STALL UN SEFT Set	ential Units1
If vacant, what was the previous use?Proposed Specific use:	O If yes, please name STALL 47 Sq. FT Set	RECEIVE
If vacant, what was the previous use?Proposed Specific use:	O If yes, please name STALL 47 Sq. FT Set	RECEIVE
If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision?	D If yes, please name	RECEIVE Telephone: Telephone: Telephone: Telephone: Telephone: Telephone NOV 10 2010
If vacant, what was the previous use? Proposed Specific use: Is property part of a subdivision?	D If yes, please name	RECEIVE Telephone: Telephone NOV 10 2010 Dept. of Building Inspec

this form and other applications visit the Inspections Division on-line at www.portlando Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of rethat I have been authorized by the owner to make this application as his/her authorized agent laws of this jurisdiction. In addition, if a permit for work described in this application is issued authorized representative shall have the authority to enter all areas covered by this permit at a provisions of the codes applicable to this permit.

10/26/10 Date: Signature: This is not a permit; you may not commence ANY work until Need Permit by 15th of November, Please



Electrical Tasks After Spa Delivery, Continued

Installing a 3-Wire 240 VAC Connection for 880 Altamar, Cameo, Capri, Majesta, Marin, Maxxus, Optima Models, 780 Camden, Certa, Cheisee, Hamilton Models, and 680 Burlington, Hartford and Hawthorne Models

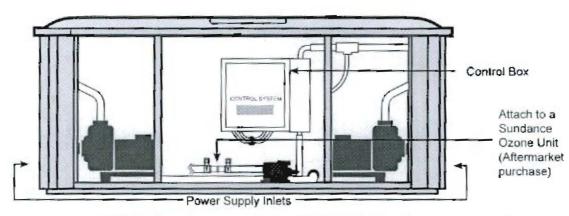
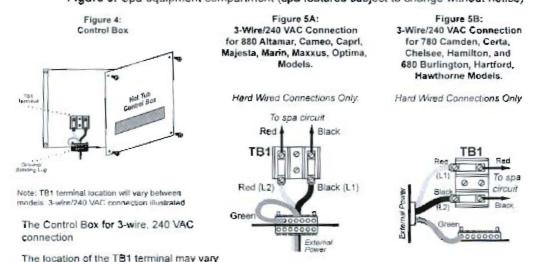


Figure 3: Spa equipment compartment (spa features subject to change without notice)



Spa Dimensions and Specifications

Useful Details About the Spa

The tables below provide the spa dimensions and specifications that may be helpful when installing your spa. These specifications are approximate.

The filled weight specifications vary depending on the height of the spa's water. The filled weight is the weight of the spa (empty), plus the weight of the water at its maximum potential capacity (filled to the point of overflowing). The filled weight specifications do not include the weight of potential hot tub users who might be inside the hot tub. To ensure proper operation, the spa's water should always be above all the jets, and approximately one inch below all the pillows.

NOTE

Always measure your spa before making critical design or delivery pathway decisions.

NOTE

These specifications are subject to change without notice and are for reference only.

880 Series							
Model	Width	Length	Depth	Filled Weight	Min. Pad Size		
Altamar	81 in. (206 cm)	86 in. (218.5 cm)	37 5 in. (95.5 cm)	4618 lb. (2095 kg)			
Cameo	89 in. (226 cm)	89 in. (226 cm)	37.5 in. (95.5 cm)	4691 lb. (2128 kg)			
Capri	69 in. (175.5 cm)	82 in. (208.5 cm)	30.5 in. (77.5 cm)	3215 lb. (1458 kg)			
Majesta	81 in. (206 cm)	86 in. (218.5 cm)	37.5 in. (95.5 cm)	4331 lb. (1965 kg)	4 in. (102 mm)		
Marin	75 in. (190.5 cm)	91 in. (231 cm)	33 in. (84 cm)	4178 lb. (1895 kg)			
Maxxus	90 in. (229 cm)	110 in. (279.5 cm)	41.5 in. (105.5 cm)	6708 lb. (3043 kg)			
Optima	89 in. (226 cm)	89 in. (226 cm)	37.5 in. (95.5 cm)	5361 lb. (2432 kg)			



Important: When installed in the United States, the electrical wiring of this spa must meet the requirements of the National Electric Code (NEC) and any applicable state or local codes. The electrical circuit must be installed by an electrical contractor AND approved by a local building/electrical inspector.

Power Configurations for 880 Altamar, Cameo, Majesta, Marin, and Optima Models (North America, 60Hz)

This section describes the power configuration choices (Standard 50 Amp, Alternate 40 Amp, or Alternate 60 Amp) for Altamar, Cameo, Majesta, Marin, and Optima hot tub models.

Note

Wire size must meet NEC recommendations and is determined by maximum current draw and length or run.

Important: All of the alternative electrical configurations require a qualified technician to perform minor circuit board modifications. To avoid damage to the spa, do not activate power to the spa until these modifications have been made. We recommend Square-D or Cutler Hammer circuit breakers.

Config. #1

Config. #2

Standard 50A Configuration (factory setting)

- 240 VAC/50A 3-wire configuration (2 hots and ground)
- 50A dual-pole GFCI breaker (hard wired only)
- Maximum electrical current draw of 40A

In this Standard 50A configuration, the heater does not operate while both jets pumps are running.

Alternate 40A Configuration

(For homes where 240 VAC/50A or 240 VAC/60A power is unavailable).

- 240 VAC/40A 3-wire configuration (2 hots and ground)
- 40A dual-pole GFCI breaker (hard wired only)
- Maximum electrical current draw of 26A

If your home electrical service does not have 240V/50A power available, the spa may be connected to a 240V/40A power source after a qualified electrician makes a minor circuit board modification.

In this configuration, the heater yields the same rapid temperature rise as in the 50A configuration, but does not operate while either jets pump are running or when the blower is running.

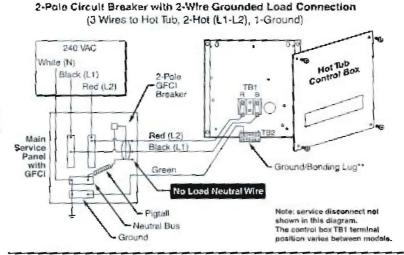
Alternate 60A Configuration

- 240 VAC/60A 3-wire configuration (2 hots and ground)
- 60A dual-pole GFCI breaker (hard wired only)
- Maximum electrical current draw

In the Alternate 60A configuration, the heater operates while both jets pumps and the blower are running.

Connection Configuration #1 240 VAC Connections for 880 Altamar, Cameo, Capri, Majesta, Marin, Optima, Maxxus, 780 Camden, Certa, Chelsee, Hamilton Models, 680 Burlington, Hartford, Hawthorne Models (North America 60 Hz)

A pressure sensitive terminal block (bonding fug) is attached to the outside surface of the load box. This permits the connection of a bonding wire between this point and any metal equipment chassis, metal water pipe, or metal conduit within 5 ft (1.5m) of the spa. The bonding wire must be at least #8 AWG (8.4 mm²) solid copper wire.



Main Panel with Secondary GFCI Shut-Off Box Using a 2-Pole GFCI Breaker with 2-Wire Grounded Connection (3 Wires to Hot Tub, 2-Hot (L1-L2), 1-Ground)

Main Panel*

GFCI Sub Panel*

Green (Ground)

Green (Ground)

Green (Ground)

No Load Notitral Wire

Note: service disconnect not shown in this diagram.

The control box TB1 terminal position varies between models.

corbettej@gmail.com.

Milton's Spas of Maine

438 U.S. Rt. 1 Yarmouth, Maine 04096

OTY.	DESCRIPTION	AMOUNT
	Sundance Marin	
_	Salety Couls:	
	127 177	
	500# Snowload	
	4 Locking Ruckels.	

Signature		
	Home Owner	
Signature		
	Milton's Spa's of Maine	