

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 05-1166	Issue Date: PERMIT ISSUED SEP - 5 2005	DBL: 189 A031001
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Location of Construction: 1230 CONGRESS ST	Owner Name: OLYMPIA EQUITY INVESTORS	Owner Address: 280 FORE ST STE 202	Phone:
Business Name:	Contractor Name: Bellino - Grasso	Contractor Address: 980 Riverside St Portland	Phone: 2078782087
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: C-19

Past Use: Commercial	Proposed Use: Commercial/ Install a Direct vent gas trane unit in attic	Permit Fee: \$237.00	Cost of Work: \$24,000.00	CEO District: 3
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied TO NEPA 90A	INSPECTION: Use Group B Type HVAC	

Proposed Project Description:
Install a Direct vent gas trane unit in attic

Signature: *Capl. Case* Signature: *JMB 9/7/05*

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 08/15/2005	Zoning Approval	
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Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <i>JK</i> <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>JMB 9/7/05</i>	Zoning Appeal <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: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmar <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>JMB</i>
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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

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Permit No: 05-1 166	Date Applied For: 08/15/2005	CBL: 189 A031001
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Business Name:	Contractor Name: Bellino - Grasso	Contractor Address: 980 Riverside St Portland	Phone (207) 878-2087
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Commercial/ Install a Direct vent gas trane unit in attic	Proposed Project Description: Install a Direct vent gas trane unit in attic
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Dept: Zoning **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 09/07/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved **Reviewer:** Jeanine Bourke **Approval Date:** 09/07/2005
Note: **Ok to Issue:**

1) The installation must comply with the State of Maine Gas Regulations.

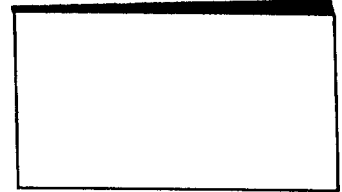
Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 08/18/2005
Note: **Ok to Issue:**

1) Install to manufacturer's specifications.
Install to NFPA 90A



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 848 Congress St Use of Building Office Date _____
 Name and address of owner of appliance MAINE HEART SURGICAL ASSOCIATES
887 Congress St Portland, Maine 04101
 Installer's name and address Bellino-Grosso Inc, 980 Riverside St, Portland Me
04103 Telephone 207-878-2087

Location of appliance:

- Basement Floor
 Attic Roof

Type of Fuel:

- Gas Oil Solid

Appliance Name: TRANE

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 # PNT2300
 Other _____

Type of Chimney:

- Masonry Lined
 Factory built _____

- Metal
 Factory Built U.L. Listing # _____

- Direct Vent
 Type B Gas Vent

Type of Fuel Tank

- Oil
 Gas

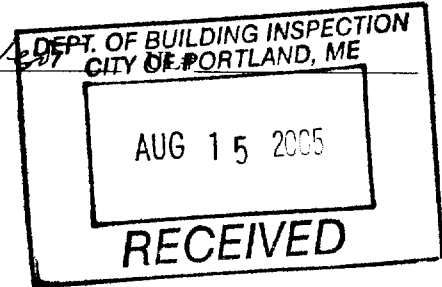
Size of Tank NATURAL

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 24,000

Permit Fee: \$ 237



Approved

Fire: _____

Ele.: _____

Bldg.: [Signature]

Signature of Installer [Signature]

Approved with Conditions

- See attached letter or requirement

Inspector's Signature _____

Date Approved _____