					PERI	MIT IS	SUFD		
City of Portland, Main	e - Building or Use	Permit Application	on Pe	rmit No:	Issue Date		CBL:		
389 Congress Street, 0410	01 Tel: (207) 874-8703	3, Fax: (207) 874-87	16	06-0877		c		A005001	
Location of Construction:	Owner Name:		Owne	r Address:	701	V Z 0	Phone:		
2273 CONGRESS ST	REW REALT		PO I	BOX 3889					
Business Name:	Contractor Name		1	Contractor Address: CITY OF)F P()	Phone D		
	Avery Service	es, Inc.		omas Drive	Westbrook		2077728	3 687	
Lessee/Buyer's Name	Phone:		Permi HV	t Type:				Zone:	
Past Use:	Proposed Use:			it Fee:	Cost of Wor	k: [6	CEO District:		
Commercial	I -	install a carrier		\$219.00	\$21,6		3		
	Furnace & A/6	C unit removing	FIRE	DEDE	Approved		SPECTION;		
	existing equip	from above ceiling			Denied	Use Gro	e Group: Type:		
				t - 4 - 5			1/0/	100	
			ے ا	tba c	to B		6/20	χ	
Proposed Project Description:								1 lung	
install a carrier Furnace & A ceiling	C unit removing existing	g equip from above		1 1 1			Signature //		
			Action			•	ved w/Conditions Denied		
				– **	ripi			Demed	
Permit Taken By:	Date Applied For:	1	Signa				Date:		
ldobson	06/19/2006			Zoning	g Approva	al			
		Special Zone or Revi	iews	Zon	ing Appeal	Γ	Historic Pro	eservation	
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance		[Not in District or Landman		
2. Building permits do not septic or electrical work		Wetland Miscellaneous		[Does Not Require Review				
3. Building permits are voi within six (6) months of	id if work is not started	Flood Zone		Conditional Use		[Requires Re	eview	
False information may in permit and stop all work	nvalidate a building	Subdivision		Interpre	etation	[Approved		
		Site Plan		Approv	ed		Approved w	//Conditions	
		Maj Minor MM	1 🔲	Denied			Denied		
		Date:		Date:)aı	te:		
I hereby certify that I am the of I have been authorized by the			he prop						
jurisdiction. In addition, if a shall have the authority to ent such permit.	permit for work describe	d in the application is i	ssued,	I certify that	the code off	icial's au	ithorized rep	resentative	
SIGNATURE OF APPLICANT		ADDRES	SS		DATE		PHO	ONE	
RESPONSIBLE PERSON IN CHA	RGE OF WORK TITLE				DATE		Div	ONE	
TEST OF STREET FERSON IN CHA	NOL OF HUNK, IIILE				DAIE		FIL	シュリレ	

City of Portland, M	laine - Building or Use Perm	it		Permit No:	Date Applied For:	CBL:
389 Congress Street, 0	04101 Tel: (207) 874-8703, Fax:	(207) 874	4-8716	06-0877	06/19/2006	238A A005001
Location of Construction:	Owner Name:		O	vner Address:		Phone:
2273 CONGRESS ST	REW REALTY LLC		P	O BOX 3889		
Business Name:	Contractor Name:		Co	ontractor Address:		Phone
	Avery Services, Inc.		7	Thomas Drive W	estbrook	(207) 772-8687
Lessee/Buyer's Name	Phone:	ļ		rmit Type:		·
			I	HVAC		
Proposed Use:	•		roposed]	Project Description:		
Commercial/ install a call equip from above ceiling	urrier Furnace & A/C unit removing o	existing	install a above co		ZA/C unit removing	existing equip from
Dept: Building	Status: Approved	Rev	iewer:	Mike Nugent	Approval D	
Note:						Ok to Issue:
1) No structural implic	ations and existing ductwork					
Dept: Fire	Status: Approved with Conditio	ns Rev	iewer:	Cptn Greg Cass	Approval D	ate: 06/20/2006
Note:						Ok to Issue:
1) Install shall comply	with NFPA 90 B					
Comments:		1				
0/21/2000-mjn: left a m	essage for doug from avery services	, nave a qu	estion re	garuing submissic	ons	

City of Portland, Maine	e - Building or Use Permi	t		Permit No:	Date Applied For:	CBL:
•	1 Tel: (207) 874-8703,Fax: (4-8716	06-0877	06/19/2006	238A A005001
Location of Construction:	ruction: Owner Name:			wner Address:		Phone:
2273 CONGRESS ST	REW REALTY LLC		P	O BOX 3889		
Business Name:	Contractor Name:		C	ontractor Address:		Phone
	Avery Services, Inc.		7	Thomas Drive W	/estbrook	(207) 772-8687
Lessee/Buyer's Name	Phone:		Pe	ermit Type:		•
]	HVAC		
Proposed Use:		1	Proposed	Project Description:	<u> </u>	
Commercial/install a carrier	Furnace & A/C unit removing ex	xisting	install a	carrier Furnace &	A/C unit removing	existing equip from
equip from above ceiling	_	_	above co	eiling		
Dept: Fire St	atus: Approved with Condition	ns Re	viewer:	Cptn Greg Cass	Approval D	ate: 06/20/2006
Note:					• •	Ok to Issue:
1) Install shall comply with 1	NEDA 90 R					<u> </u>
1) Histair sharr compry with	THI A JU D					
Comments:						

6/21/2006-mjn: left a message for doug from avery services , have a question regarding submissions

PROPOSAL

AVERY SERVICES, INC. 7 Thomas Drive WESTBROOK, MAINE 04092 (207) 772-8687

Page 1 of 2

FAX (207) 874-0933

TO:	Portland Board of Realtors
	Attn: Kelly Craig
	585 Brighton Avenue
	Portland ME 04102

PHONE	DATE
775-1097	5/17/06
JOB NUMBER	JOB PHONE
DCA 4680433	
DCA #689933	(F) 774-8880

We hereby submit specifications and estimates for:

Avery Services, Inc. is pleased to quote, as requested, on the replacement of your existing HVAC systems. Scope of work to include:

Remove and dispose of your existing fan coils, refrigerant piping, and condensers, as per EPA laws.

Supply and install two (2) Carrier 58MVB (2-stage) Hi-efficiency gas furnaces with variable speed blowers (12 time quieter and uses 80% less electricity than a standard unit) set in mechanical closets, as per plan and site visit.

Supply and install one (1) cooling coil for each furnace (one (1) 5-ton, and one (1) 3-ton).

Supply and install one (1) Carrier 24ANA7, 5-ton (2-speed) Puron condenser for the store/classroom/kitchen area, one (1) Carrier 24ANA7, 3-ton (2-speed) Puron condenser for the offices/conference room areas; includes: reuse of existing disconnects, whips (if adequate), and new interconnecting refrigerant piping. Condensers to be set on existing concrete pads.

Supply and install one (1) Carrier mechanical air cleaner and PHI cell air purifier for each system.

Supply and install PVC flue/vent lines from the furnaces out the sidewall of the building.

Supply and install gas piping fi-om a regulator to the furnaces (regulator/tanks to be supplied by others).

Supply and install a Carrier Infinity Zone System for each system, the store/classroom/kitchen - with two (2) zones, and the offices conference room - with three (3) zones; includes two (2) Master Controls, three (3) remote room sensors, low voltage wiring, and dampers (this will allow you to have independent dehumidification features). Tie in new units to existing duct work system, with some minor modifications and replace existing diffusers.. Price includes; Start up and test, freight, taxes, and permit.

We Propose hereby to furnish material and labor — complete in according to the second section Γ	rdance with the above specifications, for the sum of.
- <u>nt'd</u> Payment to be made as follows	dollars (\$ Cont'd
25% upon acceptance - Progress billing/net ten (10) days	- All balances due upon substantial completion.
If payment is not made as outlined above, a service onarge of 2% per including attorney's less will be out.	month on the overque balance plus all reasonable costs of collection,
All material is guaranteed to be as specified All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon wrihen orders and will become an extra costs will be executed only upon wrihen orders.	- Authorized a Signature
charge over and above the estimate All agreements contingent upon strikes, accidents of delays beyond our control Owner to carry file tornado and other necessary insurance Outworkers are fully covered by Workers Compensation insurance	
$\label{eq:Acceptance} \begin{tabular}{ll} Acceptance of P roposal- The above prices specifications anticonditions are satisfactory and are hereby accepted You are authorized to do the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified Payment will be made 2s outlined above $$P$ accepted to the work as specified to t$	Signature William Communication Communicatio
Date of Acceptance 6/2/04	Signature

PROPOSAL

AVERY SERVICES, INC. 7 Thomas Drive WESTBROOK, MAINE 04092 (207) 772-8687

Page 2 of 2

FAX (207) 874-0933

TO:	Portland Board of Realtors
	Attn: Kelly Craig
	585 Brighton Avenue
	Portland ME 04102

PHONE
775-I097
5/17/06

JOB NAME / LOCATION

HVAC System Replacements at
2271 Congress Street, Portland, ME

JOB NUMBER
DCA #6 80433

(F) 774-8880

	JOB NUMBE DCA	#680433	JOB PHONE (F) 774-8880
We hereby submit specifications and estimates for:	7 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
EXCLUSIONS: Structural, power wiring, carpentry, so existing systems.	ffiting, ceiling wo	ork, painting, fire	dampers, and adequacy o
			0.05.419 Pd. 45.419 CA #8635
We Propose hereby to furnish material and Laboi — coinplete in account twenty One Thousand Six Hundred Seventy Nine and 00		pecifications, for the SU	01 (50 00
Payment to be made 2s follows 25% upon acceptance - Progress billing/net ten (10) days If payment is not made as outlined above, a service charge of 2% perincipality attorner's fees will be paid.			
All materials guaranteed to be as specified All work to be completed in a professional inconscience/advince/constantial/deparaeticities/ of the complete of th	1	Zecolina (7 Mars
charge over and above the estimate All agreements contingent upon strikes, accidents of delays beyond our control. Owner to carry lire tornado and other necessary insurance. Our workers are fully covered by Wolkers Compensation insurance.	r	propogal may be accepted within	30 days.
$\label{eq:Acceptance of Proposal} \begin{tabular}{ll} Acceptance of Proposal - The above prices specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as spectried Payment will be made 2s outlined above. \\ \end{tabular}$	Signature	2 soll	
$(a \mid x \mid \alpha)$	Signature		

Date of Acceptance

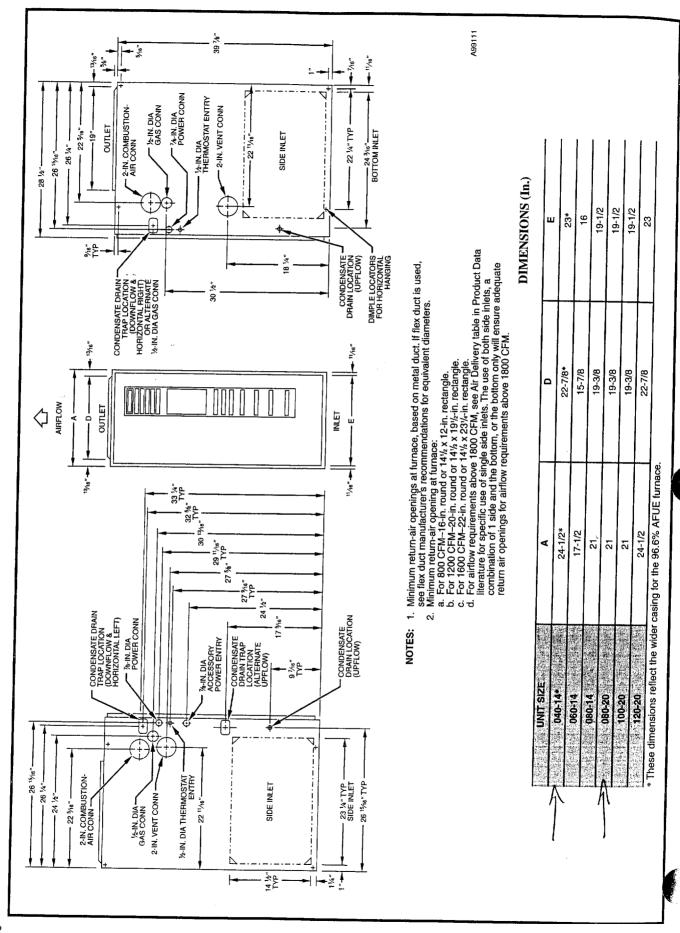
Physical d	ata
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			W			V		
UNIT SIZE		Harant Sir.	040-14	060-14	080-14	080-20	100-20	120-20
OUTPUT CAPACITY BTUH* (ICS)	Low	Upflow	25,000	37,000	49,000	49,000	61,000	73,000
(Shaded capacities are		Downflow	25,000	36,000	49,000	49,000	61,000	73,000
specified on rating plate)		Horizontal	25,000	36,000	49,000	49,000	61,000	73,000
	High	Upflow	38,000	57,000	75,000	75,000	94,000	113,000
		Downflow	37,000	56,000	75,000	75,000	94,000	113,000
		Horizontal	37,000	56,000	75,000	75,000	93,000	112,000
AFUE%*		Upflow	96.6	94.1	94.1	94.1	94.1	94.1
		Downflow	95.0	92.7	92.7	92.7	92.7	92.7
		Horizontal	96.1	93.7	93.7	93.7	93.7	93.7
INPUT BTUH†		Low	26,000	39,000	52,000	52,000	65,000	78,000
		High	40,000	60,000	80,000	80,000	100,000	120,000
SHIPPING WEIGHT (Lb)			205	170	182	204	203	234
CERTIFIED TEMP RISE RANGE (°F)		Low	25 — 55	50 — 80	50 — 80	50 80	50 80	50 — 80
• •		High	30 60	35 — 65	35 — 65	35 65	45 75	45 75
CERTIFIED EXT STATIC PRESSURE	(ESP)	Heating	0.10	0.12	0.15	0.15	0.20	0.20
(In. wc)		Cooling	0.50	0.50	0.50	0.50	0.50	0.50
AIRFLOW CFM‡	ŀ	leating Low	585(690**)	500 (590**)	720 (850**)	705 (830**)	920 (1085**)	1160 (1370**)
	Ŧ	leating High	800	1065	1500	1500	1525	1880
	Co	ooling (Max)	1400	1400	1395	1990	2000	2100
LIMIT CONTROL					SP	ST		
HEATING BLOWER CONTROL (Off I	Delay)			Selecta	able 90, 120, 15	0, or 180 Sec In	itervals	
BURNERS (Monoport)			2	3	4	4	5	6
GAS CONNECTION SIZE					1/2-in	. NPT		
GAS VALVE (Redundant) Manufacturer			White-Rodgers					
Minimum Inlet Pressure (In. wc)			4.5 (Natural Gas)					
Maximum Inlet Pressure (In. wc)			13.6 (Natural Gas)					
IGNITION DEVICE					Hot S	urface		

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UNIT SIZE	040-14	060-14	080-14	080-20	100-20	120-20
M)	1/2	1/2	1/2	1	1	1
			[· ·
RPM (Nominal) - SPEEDS	Variable 250 — 1300					
BLOWER WHEEL DIAMETER x WIDTH (In.)	11 x 10	10x7	11 x 10	11 x 10	11 x 10	11 x 10
				(1) 20 x 25 x 1		(1) 24 x 25 x 1



Physical	Aete
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Physical data		V		THE STATE OF THE S		\mathcal{Y}
UNIT SIZE - SERIES	024-30	036-30	037-30	048-30		060-31
OPERATING WEIGHT (Lb)	171	228	276	266		311
REFRIGERANT Cooling Control			Puron® (R-410A) TXV			10.4
Charge (Lb)	6.0	8.9	12.3	11.5		13.1
CONDENSER FAN Air Discharge		. Pr	opeller Type, Direct Vertical	Drive .		
Air Qty (CFM) Motor HP Motor RPM	1500 1/15 825	2500 1/8 825	2750† 1/5 840†	3000 1/5 825		3100 1/5 825
CONDENSER COIL		Copp	er Tube, Aluminum F	Plate Fin		
Face Area (Sq Ft) Fins per in. Rows	10.8 25 1	18.2 25 1	18.2 20 2	18.2 20 2		18.2 20 2
Circuits	2/1	3/1	4/1	5/1		5/1
VALVE CONNECT. (In. ID) Vapor Liquid	5/8	3/4	Sweat 7/8 3/8	7/8	1	7/8
Vapor Liquid	5/8	314	7/8 318	718	1	1-118
LONG LINE REFRIGERANT TUBES (In. OD) Vapor Liquid	3/4	7/8	718	718	ı	1-1/8

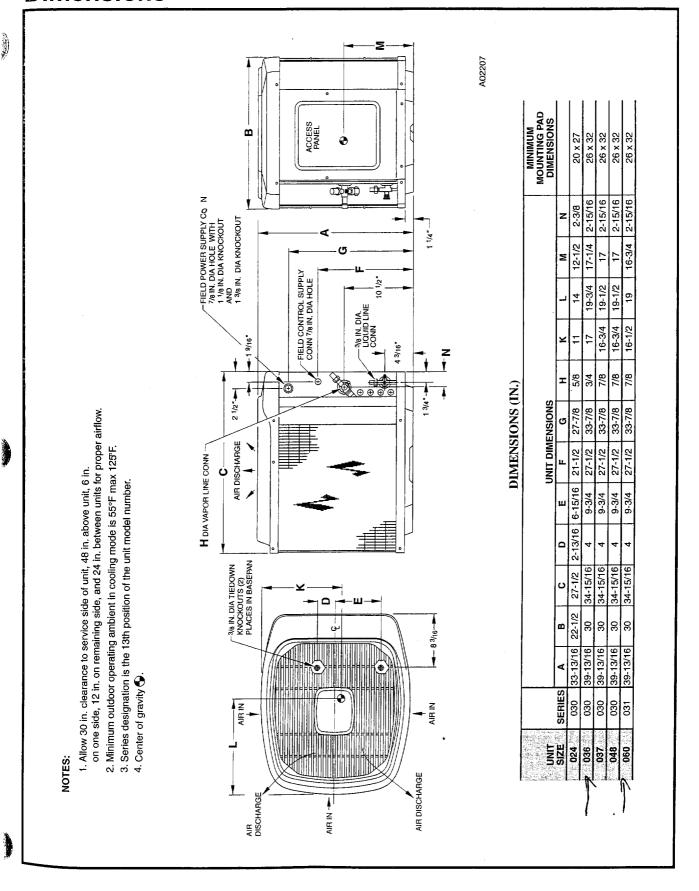
Accessories

ORDERING NO.	DESCRIPTION
KAACF0801MED	Coastal Filter — Sizes 024-060
KSASF0101AAA	Support Feet (4)
KSATX0201PUR	Bi-flow Balance Port TXV (Hard Shut Off)-Size 024
KSATX0301PUR	Bi-flow Balance Port TXV (Hard Shut Off)-Size 036
KSATX0401PUR	Bi-flow Balance Port TXV (Hard Shut Off)-Size 048
KSATX0501PUR	Bi-flow Balance Port TXV (Hard Shut Off)-Size 060

THERMOSTAT	DESCRIPTION			
TSTATCCPRH01-B	Carrier Thermidistat™ Control — Non-Programmable/Programmable Thermostat with Humidity Control (For use in Dual Fuel, AC, HP, and 25 applications, Includes Outdoor Air Temperature Sensor.)			
TSTATCCP2S01-B	Carrier Thermostat, Auto Changeover, 7-Day Programmable, °F/°C, 2-Stage Heat/2-Stage Cool in AC Mode, 3-Stage Heat/2-Stage Cool in HP mode			
TSTATCCN2S01-B	Carrier Thermostat, Auto Changeover, Non-Programmable, °F/°C, 2-Stage Heat/2-Stage Cool in AC Mode, 3-Stage Heat/2-Stage Cool in HP mode			
TSTATXXSEN01-B	Outdoor Temperature Sensor			
TSTATXXNBP01	Backplate for Non-Programmable Thermostat			
TSTATXXPBP01	Backplate for Programmable Thermostat			
TSTATXXCNV10	Thermostat Conversion Kit (4 to 5 Wire) — 10 Pack			

INFINITY™ CONTROLS	DESCRIPTION	
SYSTXCCUID01	Infinity Control Deluxe 7-Day Programmable (Wall-mountedsystem control.)	
SYSTXCCUIZ01	Infinity Control Deluxe Zoning 7-Day Programmable (Wall-mounted control for a multi-zone system.)	
SYSTXCC4ZC01	Z Infinity 4-Zone Damper Control Module (Wall-mounted control for a four-zone system.)	
SYSTXCCSMS01	O Infinity Smart Sensor (Optional wall control used to monitor temperature and/or fan control in an individual zone.)	
SYSTXCCRRS01	Infinity Remote Room Sensor (Monitors temperature in an individual zone)	
SYSTXCCSAM01	G inity System Access Module (Hardware for wireless access and control via phone or internet.)	
SYSTXCCNIM01+	Infinity Network Interface Module (Connects Heat Recovery and Energy Recovery Ventilators or older two- speed outdoor models to system.)	
SYSTXXXBPU01	Decorative Back Plate for Infinity Control (Decorative wall plate.)	

Dimensions



207-286-6102, 207-879-9800 office 07 '7019-98' LNC.
Thomas Drive
WESTBROOK, MAINE 04092
(207) 772-8687 SHEET NO. 2271 CONGRESS ST FAX (207,) 874-0933 2 STAGE HEAT W/ VALLE 24 AVA 13360 PMCE OUT Parce out I STATE HEAT WI VALLABIE : 1 60 [34] 12/12/12/1 OFACE office

P BOARD OF REACTORS





APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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JUN	2	6	2000	
 			F . 9 6 10	

CHY OF POLITER

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:

Name and address of owner of appliance Portum	Portland, me
Location of appliance: Basement Roof Type of Fuel: Gas Oil Solid Appliance Name: Turnace, At & U.L. Approved Yes No	Type of Chimney: Masonry Lined Factory built Metal Factory Built U.L. Listing # Direct Vent Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes	Type of Fuel Tank Oil Gas Size of Tank Number of Tanks Distance from Tank to Center of Flame Cost of Work: \$ 21,679 Permit Fee: \$
Fire: Ele.: Bldg.: White - Inspection Yellow - File Pin	Approved with Conditions See attached letter or requirement Inspector's Signature Date Approved Melay nk - Applicant's Gold - Assessor's Copy