

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 08-0273	Issue Date: 03/26/2006	CBL: 283 E008001
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Location of Construction: 106 Longwood Dr	Owner Name: Goldfarb Matthew S &	Owner Address: 106 Longwood Dr	Phone:
Business Name:	Contractor Name: Aero Heating and Ventilating	Contractor Address: 378 Presumpscot Portland	Phone: 2077612092
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Single Family	Proposed Use: Single Family / Install 275 gallon oil tank in the basement.	Permit Fee: \$270.00	Cost of Work: \$24,255.00	CEO District: 3
Proposed Project Description: Install Heating System		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB IMC 2003 UFPA 211 Signature: CLM 3/24/06	
		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: gg	Date Applied For: 03/26/2008	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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 <i>O.K.</i> 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 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 <i>OK</i>
	Date: <i>CLM</i>	Date:	Date: <i>CLM</i>

Scanned



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



283 E008

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 106 LONGWOOD DR. Use of Building SINGLE FAMILY Date 3/26/08
 Name and address of owner of appliance Mrs. & MRS. MATT GOLD FARB, ESQ.
106 LONGWOOD DRIVE, PORTLAND, ME 04102
 Installer's name and address AERO HEATING & VENTILATING, INC. (AUGUST FUEL)
378 TREBURNPOWISST, PORTLAND, ME 04103 Telephone 761-2092 FAX 761-4471

Location of appliance:
 Basement Floor
 Attic Roof

Type of Fuel: ELECTRIC A/C
 Gas Oil Solid

Appliance Name: UNICO SYSTEM - IN SERIES
 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 # _____
 Other REF. HANDLING CERT.
#029203976



Type of Chimney: N/A
 Masonry Lined
 Factory built _____

Metal
 Factory Built U.L. Listing # _____

Direct Vent
 Type _____ UL# _____

Type of Fuel Tank: N/A
 Oil
 Gas

Size of Tank 275 GAL.

Number of Tanks 1

Distance from Tank to Center of Flame 15 feet.

Cost of Work: \$ 24,255.
 Permit Fee: \$ 270.00

Approved Sub. Jim LaCombe, for Aero Heating

Approved with Conditions See attached letter or requirement

Fire: _____
 Ele.: _____
 Bldg.: _____

Chita L. M.
 Inspector's Signature

3/26/08
 Date Approved

Signature of Installer [Signature]

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Permit No: 08-0273	Date Applied For: 03/26/2008	CBL: 283 E008001
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Location of Construction: 106 Longwood Dr	Owner Name: Goldfarb Matthew S &	Owner Address: 106 Longwood Dr	Phone:
Business Name:	Contractor Name: Aero Heating and Ventilating	Contractor Address: 378 Presumpscot Portland	Phone (207) 761-2092
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: Single Family / Install 275 gallon oil tank in the basement.	Proposed Project Description: Install Heating System
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Dept: Zoning	Status: Approved	Reviewer: Chris Hanson	Approval Date: 03/26/2008
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 03/26/2008
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Tanks shall be installed per NFPA 58			
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			

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation: Portland
Street Subdivision Lot #: 106 Longwood

PROPERTY OWNERS NAME

Last: Budreau First: William
Applicant Name: William Budreau
Mailing Address of Owner/Applicant (If Different): Portland

203-8-8

PORTLAND PERMIT # 10621 TOWN COPY
Date Permit Issued: 5/17/08 \$ 11.24 If Double Fee Charged
Jeanne Bouke Local Plumbing Inspector Signature L.P.I. # 0732
2008-8123

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspectors to deny a Permit.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner/Applicant

Date

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

1. NEW PLUMBING
2. RELOCATED PLUMBING

Type of Structure To Be Served:

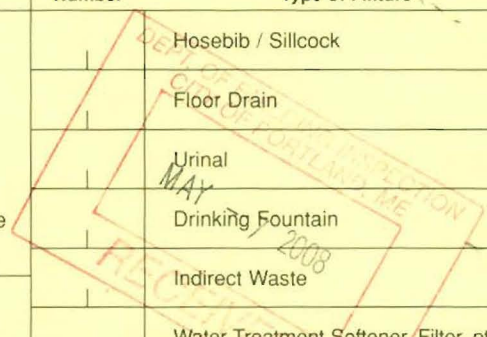
1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY _____

Plumbing To Be Installed By:

1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D. HOUSING DEALER/MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # 1146

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain		Wash Basin
OR <input type="checkbox"/> TRANSFER FEE [\$6.00]		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee (Total)



7521 SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE 24 + 1/34

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ELECTRICAL PERMIT

City of Portland, Me.



To the Chief Electrical Inspector, Portland Maine:
 The undersigned hereby applies for a permit to make electrical installations
 in accordance with the laws of Maine, the City of Portland Electrical Ordinance,
 National Electrical Code and the following specifications:

Date _____
 Permit # 2008-4205
 CBL# 283-E-008

LOCATION: 106 Longwood DR. METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER GoldFARB
 TENANT _____ PHONE # _____

							TOTAL EACH FEE		
OUTLETS	<u>2</u>	Receptacles	<u>2</u>	Switches		Smoke Detector		.20	
FIXTURES	<u>2</u>	Incandescent		Fluorescent		Strips		.20	
SERVICES		Overhead		Underground		TTL AMPS <800		15.00	
		Overhead		Underground		>800		25.00	
Temporary Service		Overhead		Underground		TTL AMPS		25.00	
								25.00	
METERS		(number of)						1.00	
MOTORS		(number of)						2.00	
RESID/COM		Electric units						1.00	
HEATING		oil/gas units		Interior		Exterior		5.00	
APPLIANCES		Ranges		Cook Tops		Wall Ovens		2.00	
		Insta-Hot		Water heaters		Fans		2.00	
		Dryers		Disposals		Dishwasher		2.00	
		Compactors		Spa		Washing Machine		2.00	
		Others (denote)						2.00	
	MISC. (number of)		Air Cond/win						3.00
			Air Cond/cent				Pools		10.00
	<u>1</u>	HVAC		EMS		Thermostat		5.00	
		Signs						10.00	
		Alarms/res						5.00	
		Alarms/com						15.00	
		Heavy Duty(CRKT)						2.00	
		Circus/Carnv						25.00	
		Alterations						5.00	
		Fire Repairs						15.00	
		E Lights						1.00	
		E Generators						20.00	
PANELS		Service		Remote		Main		4.00	
TRANSFORMER		0-25 Kva						5.00	
		25-200 Kva						8.00	
		Over 200 Kva						10.00	
							TOTAL AMOUNT DUE		
							MINIMUM FEE/COMMERCIAL 55.00		
							MINIMUM FEE	<u>45.00</u>	

MAR 27 2008

CONTRACTORS NAME J. Hayman MASTER LIC. # MS60003077
 ADDRESS PO Box 282 LIMITED LIC. # _____
 TELEPHONE 582-3319
 SIGNATURE OF CONTRACTOR J. Hayman #1807



CITY OF PORTLAND, MAINE

Department of Building Inspections

March 26 2008

Received from Richard Miller

Location of Work 106 Langwood Dr.

Cost of Construction \$ _____

Permit Fee \$ _____

Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other Heating

CBL: 283 E008

Check #: 2688

Total Collected \$ 570.00

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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

May 6