

**City of Portland, Maine - Building or Use Permit Application**  
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

<b>Permit No:</b> 05-1555	<b>Issue Date:</b>	<b>CBL:</b> 293 A001001
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<b>Location of Construction:</b> 30 Warren Ave	<b>Owner Name:</b> Salvation Army The	<b>Owner Address:</b> 440 West Nyack Rd	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Avery Services, Inc.	<b>Contractor Address:</b> 7 Thomas Drive Westbrook	<b>Phone</b> 2077728687
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Past Use:</b> Salvation Army	<b>Proposed Use:</b> Salvation Army to install 6 Direct vent gas hanging units & 1 rooftop unit	<b>Permit Fee:</b> \$381.00	<b>Cost of Work:</b> \$39,989.00	<b>CEO District:</b> 5
		<b>FIRE DEPT:</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: Type	

<b>Proposed Project Description:</b> Install 6 Direct vent gas hanging units & 1 rooftop unit	Signature:	Signature:
<b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied		
Signature:	Date:	

<b>Permit Taken By:</b> GG	<b>Date Applied For:</b> 10/24/2005	<b>Zoning Approval</b>		
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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..	<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland  <input type="checkbox"/> Wetland  <input type="checkbox"/> Flood Zon  <input type="checkbox"/> Subdivision  <input type="checkbox"/> Site Plan  Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>  Date:	<b>Zoning Appeal</b> <input type="checkbox"/> Variance  <input type="checkbox"/> Miscellaneous  <input type="checkbox"/> Conditional Us  <input type="checkbox"/> Interpretatio  <input type="checkbox"/> Approved  <input type="checkbox"/> Denied  Date:	<b>Historic Preservation</b> <input type="checkbox"/> Not in District or Landma  <input type="checkbox"/> Does Not Require Revie  <input type="checkbox"/> Requires Review  <input type="checkbox"/> Approved  <input type="checkbox"/> Approved w/Condition  <input type="checkbox"/> Denied  Date:
	Signature: _____ 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.

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SIGNATURE OF APPLICAN \_\_\_\_\_ ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_ PHO \_\_\_\_\_

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RESPONSIBLE PERSON IN CHARGE OF WORK, TIT \_\_\_\_\_ DATE \_\_\_\_\_ PHO \_\_\_\_\_

<b>Location of Construction:</b> 30 Warren Ave	<b>Owner Name:</b> Salvation Army The	<b>Owner Address:</b> 440 West Nyack Rd	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Avery Services, Inc.	<b>Contractor Address:</b> 7 Thomas Drive Westbrook	<b>Phone</b> 2077728687
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> HVAC	<b>Zone:</b>

<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 10/24/2005
<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		
<b>Dept:</b> Building	<b>Status:</b> Approved	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 11/07/2005
<b>Note:</b> 10/24/05 spoke w/Avery to see if replacing in kind, or new, rooftop unit is new, the 6 hanging units replace existing similar units. Left vm w/Cptn. Mark U. @ sal army for more details. 10/28 He called back left vm with questions 11/01 Left vm w/Cptn.Mark U. About structural details of roof for the new rooftop hvac units. 11/7 Received structurals on 11/4, ok to issue 1) The installation must comply with the State of Maine Gas Regulations.	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		
<b>Dept:</b> Fire	<b>Status:</b> Approved	<b>Reviewer:</b> Cptn Greg Cass	<b>Approval Date:</b> 10/24/2005
<b>Note:</b> 1) Must be installed per NFPA 54	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		

**Comments:**  
10/24/2005-GG: Need ASAP permit, no heat. /gg

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SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO