

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 08-0002	Issue Date:	CBL: 386A B034001
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Location of Construction: 38 ARMSTRONG HEIGHTS	Owner Name: ARMSTRONG JULIE L	Owner Address: 38 ARMSTRONG HEIGHTS	Phone:
Business Name:	Contractor Name: Quality Insulation	Contractor Address: 65 Downeast Drive Yarmouth	Phone: 2078467745
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R-2

Past Use: Single Family Home	Proposed Use: Single Family Home - install a Lennox Direct Vent heating unit	Permit Fee: \$60.00	Cost of Work: \$3,060.00	CEO District: 5
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Proposed Project Description: install a Lennox Direct Vent heating unit	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <input checked="" type="checkbox"/> Type: HVAC Signature: <i>[Signature]</i> Signature: <i>[Signature]</i>
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: Idobson	Date Applied For: 12/27/2007	<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..	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 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 1/2/08 <i>ABM</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 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 Date: <i>ABM</i>
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JAN - 2 2008

Scanned

**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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Business Name:	Contractor Name: Quality Insulation	Contractor Address: 65 Downeast Drive Yarmouth	Phone (207) 846-7745
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

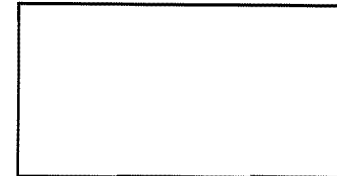
Proposed Use: Single Family Home - install a Lennox Direct Vent heating unit	Proposed Project Description: install a Lennox Direct Vent heating unit
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<b>Dept:</b> Zoning	<b>Status:</b> Approved	<b>Reviewer:</b> Ann Machado	<b>Approval Date:</b> 01/02/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 01/02/2008
<b>Note:</b>			<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
1) The installation must comply with the State of Maine Gas Regulations.			



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 38 ARMSTRONG HEIGHTS 386-ABJY Use of Building HOME Date 12/27/07  
Name and address of owner of appliance HERB OSGOOD

Installer's name and address QUALITY INSULATION  
365 DOWNEAST DR. YARMOUTH, ME. Telephone 207-846-7745

**Location of appliance:**

- Basement
- Floor
- Attic
- Roof

**Type of Fuel:**

- Gas
- Oil
- Solid

Appliance Name: LENNOX DIRECT VENT

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 # PNT 4272
- Other \_\_\_\_\_

**Type of Chimney:**

- Masonry Lined  
Factory built \_\_\_\_\_

- Metal  
Factory Built U.L. Listing # \_\_\_\_\_

- Direct Vent  
Type \_\_\_\_\_ UL# \_\_\_\_\_

**Type of Fuel Tank**

- Oil
- Gas

Size of Tank \_\_\_\_\_

Number of Tanks \_\_\_\_\_

Distance from Tank to Center of Flame \_\_\_\_\_ feet.

Cost of Work: \$ 3060.00

Permit Fee: \$ \_\_\_\_\_

DEC 27 2007

**Approved**

Fire: \_\_\_\_\_  
Ele.: \_\_\_\_\_  
Bldg.: \_\_\_\_\_

**Approved with Conditions**

- See attached letter or requirement

Inspector's Signature \_\_\_\_\_

Date Approved \_\_\_\_\_

Signature of Installer Jerry Anderson

White - Inspection    Yellow - File    Pink - Applicant's    Gold - Assessor's Copy

# LENNOX®

HEARTH PRODUCTS

## INSTALLATION INSTRUCTIONS

### DIRECT VENT MPD-33/35/40/45 SERIES

VENTED GAS FIREPLACE HEATERS - DIRECT VENT MODELS  
P/N 850,014M REV. L 10/2004

RETAIN THESE INSTRUCTIONS  
FOR FUTURE REFERENCE

This appliance may be installed in an aftermarket permanently located, manufactured home (USA only) or mobile home, where not prohibited by local codes. This appliance is only for use with the type of gas indicated on the rating plate. This appliance is not convertible for use with other gases, unless a certified kit is used.

#### MODELS

##### Millivolt Models

MPDT-3328CNM  
MPDT-3328CPM  
MPDR-3328CNM  
MPDR-3328CPM  
MPD-3530CNM  
MPD-3530CNM-B  
MPD-3530CPM

MPD-4035CNM  
MPD-4035CNM-B  
MPD-4035CPM  
MPD-4540CNM  
MPD-4540CNM-B  
MPD-4540CPM

##### Electronic Models

MPDT-3328CNE  
MPDT-3328CPE  
MPDR-3328CNE  
MPDR-3328CPE  
MPD-3530CNE  
MPD-3530CPE

MPD-4035CNE  
MPD-4035CPE  
MPD-4540CNE  
MPD-4540CPE

**WARNING: IF THE INFORMATION IN THIS MANUAL IS NOT FOLLOWED EXACTLY, A FIRE OR EXPLOSION MAY RESULT CAUSING PROPERTY DAMAGE, PERSONAL INJURY OR LOSS OF LIFE.**

**FOR YOUR SAFETY:** Do not store or use gasoline or other flammable vapors or liquids in the vicinity of this or any other appliance.

**FOR YOUR SAFETY:** What to do if you smell gas:

- DO NOT light any appliance.
- DO NOT touch any electrical switches.
- DO NOT use any phone in your building.
- Immediately call your gas supplier from a neighbor's phone. Follow your gas suppliers instructions.
- If your gas supplier cannot be reached, call the fire department.

Installation and service must be performed by a qualified installer, service agency or the gas supplier.

**AVERTISSEMENT: ASSUREZ-VOUS DE BIEN SUIVRE LES INSTRUCTIONS DONNÉES DANS CETTE NOTICE POUR RÉDUIRE AU MINIMUM LE RISQUE D'INCENDIE OU POUR ÉVITER TOUT DOMMAGE MATÉRIEL, TOUTE BLESSURE OU LA MORT.**

**POUR VOTRE SÉCURITÉ:** Ne pas entreposer ni utiliser d'essence ni d'autre vapeurs ou liquides inflammables dans le voisinage de cet appareil ou de tout autre appareil.

**POUR VOTRE SÉCURITÉ:** Que faire si vous sentez une odeur de gaz:

- Ne pas tenter d'allumer d'appareil.
- Ne touchez à aucun interrupteur. Ne pas vous servir des téléphones se trouvant dans le bâtiment où vous vous trouvez.
- Evacuez la pièce, le bâtiment ou la zone.
- Appelez immédiatement votre fournisseur de gaz depuis un voisin. Suivez les instructions du fournisseur.
- Si vous ne pouvez rejoindre le fournisseur de gaz, appelez le service des incendies.

L'installation et service doit être exécuté par un qualifié installateur, agence de service ou le fournisseur de gaz.



GTL Test Laboratories, Inc.

GTL Report No. 115-F-13-4

NOTE: DIAGRAMS & ILLUSTRATIONS NOT TO SCALE

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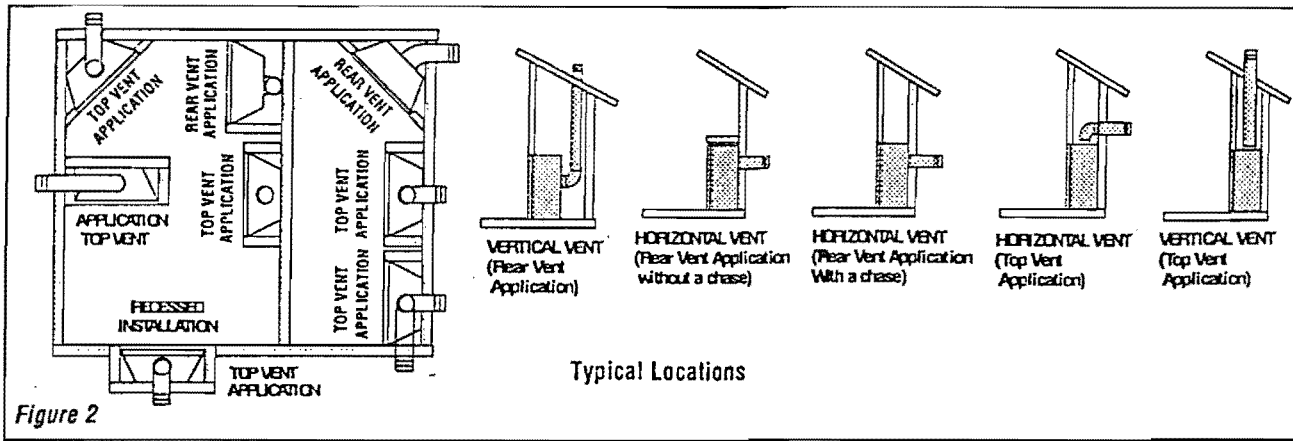


Figure 2

**LOCATION**

In selecting the location, the aesthetic and functional use of the appliance are primary concerns. However, vent system routing to the exterior and access to the fuel supply are also important. Consideration should be given to traffic ways, furniture, draperies, etc., due to elevated surface temperatures (Figure 2). The location should also be free of electrical, plumbing or other heating/air conditioning ducting.

These direct vent appliances are uniquely suited for installations requiring a utility shelf positioned directly above the fireplace. Utility shelves like these are commonly used for locating television sets and decorative plants.

To provide for the lowest possible shelf surface use the alternate rear vent outlet with attached venting routed in a way to minimize obstructions to the use of the space above the appliance. Do not insulate the space between the appliance and the area above it. See Figure 3. The minimum height from the base of the appliance to the underside of combustible materials used to construct a utility shelf in this fashion is shown in the table in Figure 3.

The appliance should be mounted on a fully supported base extending the full width and depth of the unit. The appliance may be located on or near conventional construction materials. However, if installed on combustible materials, such as carpeting, vinyl tile, etc., a metal or wood barrier covering the entire bottom surface must be used.

**APPLIANCE AND VENT CLEARANCES**

The appliance is approved with zero clearance to combustible materials on all sides (as detailed in Table 2) with the following exceptions. When the unit is installed with one side flush with the wall, the wall on the other side of the unit must not extend beyond the front edge of the unit. In addition, when the unit is recessed, the side walls surrounding the unit must not extend beyond the front edge of the unit. See Figure 2.

Model No.	Shelf Height inches (mm)			
	Top Vent - with One 90 Degree Elbow		Rear Vent - Straight Out the Back	
	Secure Vent	Secure Flex	Secure Vent	Secure Flex
MPDT-3328	44 1/8 (1121)	45 7/8 (1165)	N/A	N/A
MPDR-3328	N/A	N/A	33 1/4 (845)	33 1/4 (845)
MPD-3530	46 1/8 (1172)	47 7/8 (1216)	35 1/4 (895)	35 1/4 (895)
MPD-4035				
MPD-4540	51 1/8 (1298)	52 7/8 (1343)	40 1/4 (1022)	40 1/4 (1022)

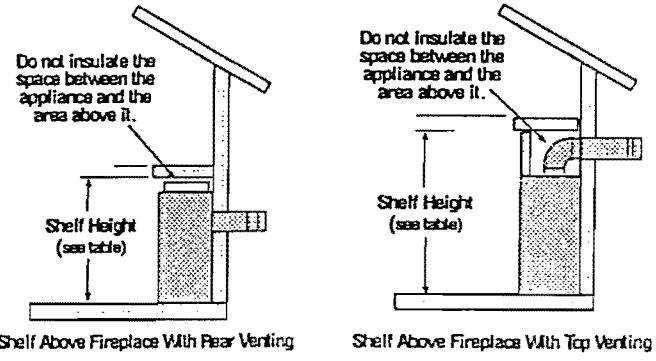


Figure 3

BACK	1/2 in. (13 mm) 0 in. (0 mm) spacers
SIDES	1/2 in. (13 mm)** 0 in. (0 mm) spacers
TOP SPACERS	0 in. (0 mm)
FLOOR	0 in. (0 mm)
From Bottom of Unit to Ceiling	84 in. (2134 mm)
VENT	1 in. (25.4 mm)*
<b>SERVICE CLEARANCES</b>	
FRONT	3 Feet. (0.9 meters)

Table 2

\*Note: 3 in. (75 mm) above any horizontal inclined vent component.

\*\*Note: See page 8, step 3, for venting requirements to be used for range hooded in each case of the unit and any other needs as applicable.

NOTE: DIAGRAMS & ILLUSTRATIONS NOT TO SCALE

If the terminus of the last section is not within this distance, use the telescopic vent section SV4.5LA, as the last vent section. For wall thicknesses greater than that shown in Figure 33, refer to table 4 on page 17. This table lists the additional venting components needed (in addition to the termination and adapter) for a particular range of wall thicknesses.

**K. Attach termination adapter** - Attach the adapter (adapter - SV4.5RCH - provided with the termination) to the vent section or telescoping vent section, elbow or appliance collar as shown in Figure 33 in the same manner as any SV4.5 vent component (refer to Step E).

**L. Install Firestop/Spacer at exterior wall** - When using the square termination, install SV4.5HF (Secure Vent), SF4.5HF (Secure Flex) Firestop/Spacer over the opening at the exterior side of the framing, long side up, with the 3 inch spacer clearance at the top as shown in Figure 33, and nail into place.

(The Firestop/Spacer may also be installed over the opening at the interior side of the framing.) When using the round termination, a separate firestop/spacer is not required since this termination has integral spacers which provide the same function as a separate firestop/spacer.

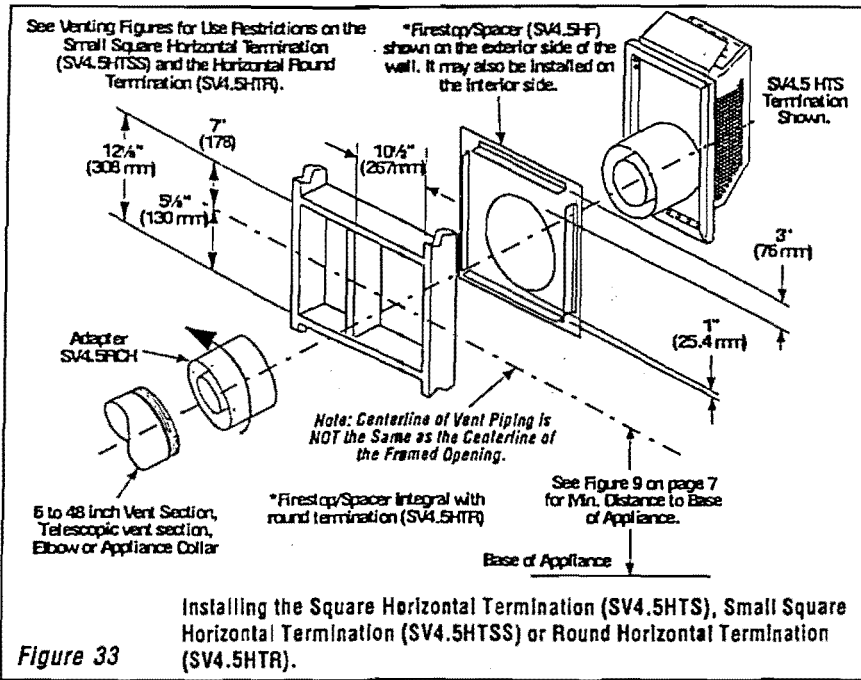
**M. Install the desired termination** - See the horizontal venting figures for application restrictions on the round termination (SV4.5HTR) and the small square horizontal termination (SV4.5HTSS).

**1. Install the square termination (SV4.5HTS) or (SV4.5HTSS)** - For the last step, from outside the exterior wall, slide the collars of the termination onto the adapter (the outer over the outer and the inner inside the inner) until the termination seats against the exterior wall surface to which it will be attached. Orient the housing of the termination with the arrow pointed upwards. Secure the termination to the exterior wall. The horizontal termination must not be recessed into the exterior wall or siding by more than the 1/4" (32 mm) as shown in Figure 32.

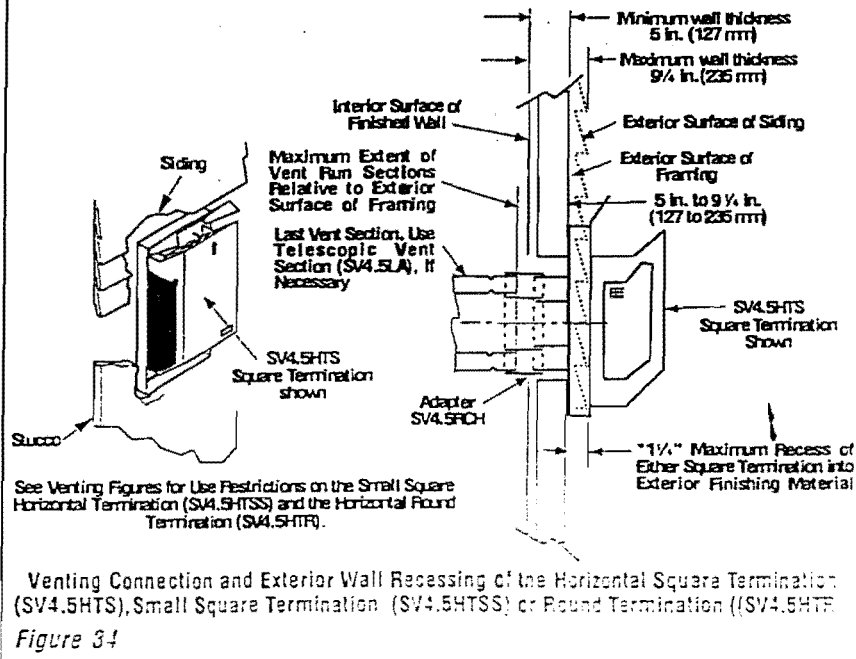
**2. Install the round termination (SV4.5HTR)** - See Figure 35 for an illustration of the round termination. For the last step, from outside the exterior wall, slide the collars of the termination onto the adapter (the outer over the outer and the inner inside the inner) until the termination seats against the exterior wall surface to which it will be attached. Orient the housing of the termination with the arrow pointed upwards. Secure the termination to the exterior wall.

The SV4.5HTR Round Termination may not be used when the appliance is vented directly out the wall from the rear. Do not recess the SV4.5HTR round termination at all.

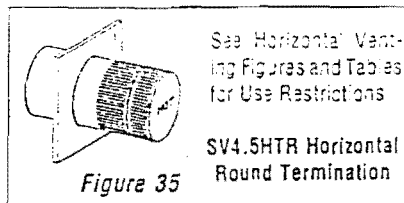
**SFHRK Snorkel Cap** - The snorkel cap is designed to be fitted into a casement window box. The SFHRK cap is for use with flex vent pipe.



\*Note - The SV4.5HTR Horizontal Round Termination may NOT be recessed at all.



The vertical distance between the inside outer edge of the cap is 2 3/4" (71.1 mm).



Distance Range of Last Vent Section to Termination Mounting Surface *		
Models	X inches (mm)	Y inches (mm)
MPDT-3328	6 (152)	10 1/4 (260)
MPDR-3328	5 (127)	9 1/4 (235)

Table 3

\*See Figure 34.

NOTE: DIAGRAMS & ILLUSTRATIONS NOT TO SCALE.

**HORIZONTAL VENT FIGURES/TABLES**

Note: Secure Vent components (rigid vent pipe and terminal) are shown in the figures; Secure Flex components (flexible vent pipe and terminal) may also be used.

Note: Two 45 degree elbows may be used in place of one 90 degree elbow. The same rise to run ratios, as shown in the venting figures for 90 elbows, must be followed if 45 degree elbows are used.

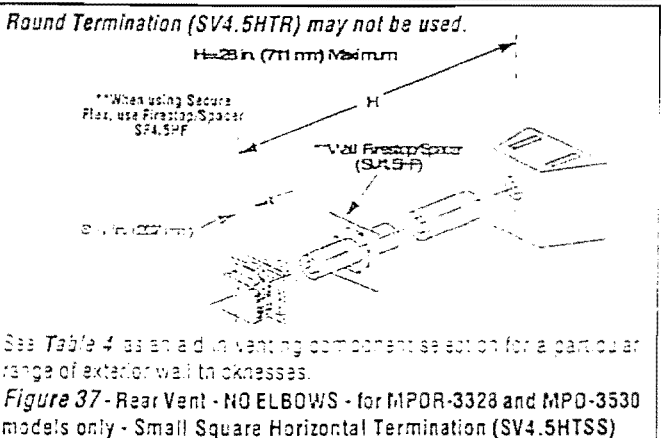
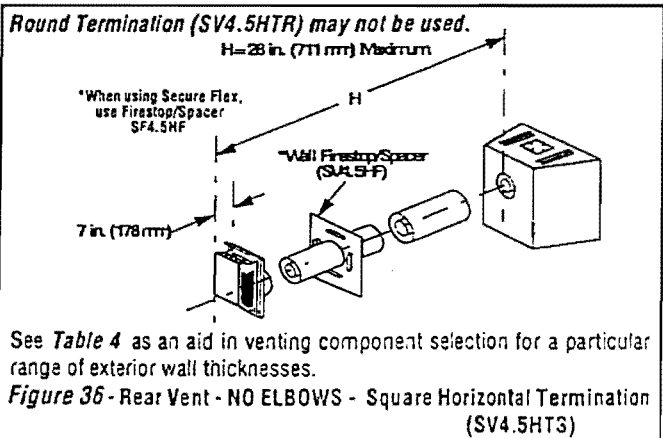
Note: SV4.5BF (Secure Vent), SF4.5BF (Secure Flex) firestop/spacer must be used anytime vent pipe passes through a combustible floor or ceiling. SV4.5HF (Secure Vent), SF4.5HF (Secure Flex) firestop/spacer must be used anytime vent pipe passes through a combustible wall.

**WARNING: UNDER NO CIRCUMSTANCES MAY SEPARATE SECTIONS OF CONCENTRIC FLEXIBLE VENT PIPE BE JOINED TOGETHER.**

Note: It is very important that the horizontal/Inclined run be maintained in a straight (no dips) and recommended to be in a slightly elevated plane, in a direction away from the fireplace of 1/4" rise per foot (20 mm per meter) which is ideal, though rise per foot run ratios that are smaller are acceptable all the way down to at or near level.

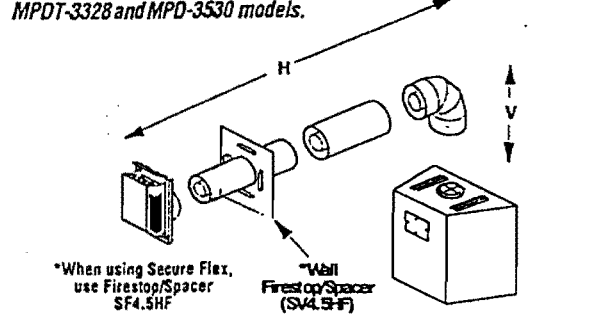
Venting Components Required	Exterior Wall Thickness Inches (mm)	
	MPD-3530 MPD-4035 MPD-4540	MPDT-3328 MPDR-3328
Termination Kit Only	5 to 9 1/4 (127 to 235)	6 to 10 1/4 (152 to 260)
Termination Kit and 6 in. vent section (SV4.5L6)	9 1/4 to 13 3/4 (235 to 349)	10 1/4 to 14 3/4 (260 to 375)
Termination Kit and 12 in. vent section (SV4.5L12)	15 3/4 to 19 3/4 (400 to 502)	16 3/4 to *20 3/4 (425 to *527)
Termination Kit and Telescopic section (SV4.5LA) and 6 in. vent section (SV4.5L6)	10 3/4 to 20 3/4 (273 to 527)	11 3/4 to *21 3/4 (298 to *552)

\*Note: See Figure 34 for wall thickness range reductions when using SV4.5HTS and Figure 35 when using SV4.5HTSS terminations.



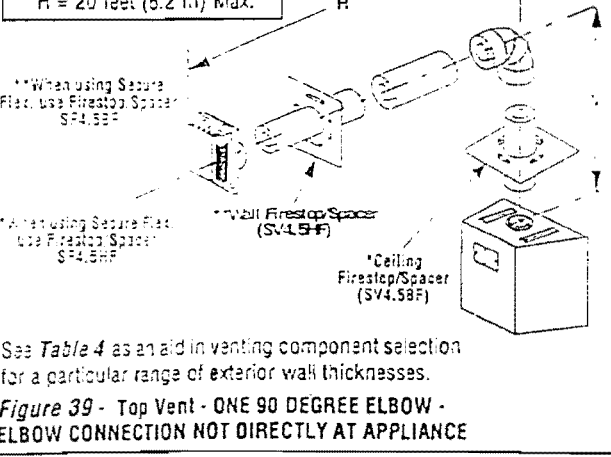
Square termination (SV4.5HTS) shown; Round Termination (SV4.5HTR) may also be used. Small Square termination (SV4.5HTSS) may only be used on MPDT-3328 and MPD-3530 models.

V = One 90 degree elbow
H = 3 feet (0.914 m) Max.



V Minimum		H Maximum	
feet	(m)	feet	(m)
1	(0.305)	5	(1.52)
2	(0.61)	10	(3.1)
3	(0.914)	15	(4.65)
4	(1.22)	20	(6.2)

V + H = 40 feet (12.4 m) Max.  
H = 20 feet (6.2 m) Max.



NOTE: DIAGRAMS & ILLUSTRATIONS NOT TO SCALE.

HERB OSGOOD

ADDITION  
38 ARMSTRONG HEIGHTS, PORTLAND

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GAS FIREPLACE      \$3060.00  
4540 CPM

PROPANE

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**CITY OF PORTLAND, MAINE**  
 Department of Building Inspections

12-21 20 07

Received from ① MASCO CONTRACTORS

Location of Work 36 Elm Street

Cost of Construction \$ \_\_\_\_\_

Permit Fee \$ 60

Building (IL) \_\_\_\_\_  Plumbing (IS) \_\_\_\_\_  Electrical (I2) \_\_\_\_\_  Site Plan (U2) \_\_\_\_\_

Other \_\_\_\_\_

CBL: 386-AB-37

Check #: CC Total Collected \$ 60

**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