

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 09-0207	Issue Date: 3/17/09	CBL: 398 A003001
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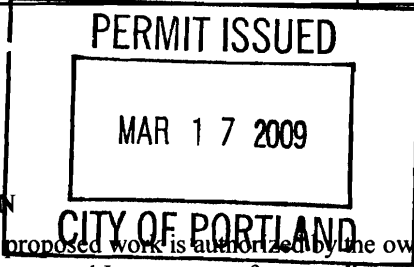
Location of Construction: 17 SUMMIT ST	Owner Name: HATT DANNY R & DONALD J C	Owner Address: 17 SUMMIT ST	Phone:
Business Name:	Contractor Name: Architectural Fireplaces	Contractor Address: 15 Colonial Drive E Harpstead	Phone 6033620020
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: 2 Unit Residential	Proposed Use: 2 Unit Residential - install a Heat & Glo fireplace insert	Permit Fee: \$50.00	Cost of Work: \$2,995.00	CEO District: 5
Proposed Project Description: install a Heat & Glo fireplace insert		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB IRC-2003 IMC-2003 Signature: [Signature] 3/17/09	
		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: Ldobson	Date Applied For: 03/17/2009	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 Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: 3/17/09 CSH	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 type="checkbox"/> Not in District or Landmark <input checked="" 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: 3/17/09 CSH
	Date: 3/17/09 CSH		

MAR 17 2009



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

130 Mon-Fri 8-4

FILL IN AND SIGN WITH INK

39-0207



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



389 Congress St.
Rm. 315

398-A-003

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 17 Summit St. Use of Building _____ Date _____

Name and address of owner of appliance Dan Hatt
17 Summit St., Portland, ME

Installer's name and address Architectural Fireplaces
15 Colonial Dr, E. Hampstead, NH Telephone 603 362-0020

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Heat and Glow

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 _____

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: \$ 2995 00

Permit Fee: \$ 50

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Christy M
Inspector's Signature

3/17/09
Date Approved

Signature of Installer Matthew J. [Signature]

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

 X **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.



Signature of Applicant/Designee

 3-17-09
Date

Signature of Inspections Official

Date

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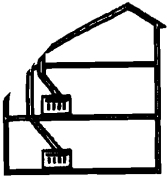
Location of Construction: 17 SUMMIT ST	Owner Name: HATT DANNY R & DONALD J C	Owner Address: 17 SUMMIT ST	Phone:
Business Name:	Contractor Name: Architectural Fireplaces	Contractor Address: 15 Colonial Drive E Harpstead	Phone (603) 362-0020
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: 2 Unit Residential - install a Heat & Glo fireplace insert	Proposed Project Description: install a Heat & Glo fireplace insert
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Dept: Zoning **Status:** Approved **Reviewer:** Chris Hanson **Approval Date:** 03/17/2009
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 03/17/2009
Note: **Ok to Issue:**

- 1) This appliance/stove shall be installed, operated and maintained per the manufacturers specifications and the UL listing
- 2) The installation must comply with the State of Maine Gas Regulations.
- 3) Installation shall comply with 2003 International Mechanical Code.



ARCHITECTURAL FIREPLACES

of New England, Inc.

Distributor of Heatilator & Heat-N-Glo

Site View

Date of Site View: <u>8/12/09</u>		Met With: <u>Dan</u>		Site View Completed By: <u>PO</u>	
Type of FP: <u>WOOD GL</u>	If Gas LP or Nat: <u>LP</u>	SP or Electronic: <u>1PI</u>	Did you adv. bldr of any problems?	DRAWING OF LAYOUT AND PIPE CONFIGURATION	
Is this an outside chase? Y <input checked="" type="checkbox"/> N			Y N		
* Total Height				<p>Do not offset in attic unless you need to get away from a rafter.</p> <p>DO NOT CUT CARPET BIDR WILL CUT IT</p>	
* 2x4 or 2x6					
* Amt. offsets					
Is there enough clearance for pipe? 15" - Y N 17" - Y N			Y N		
If All Fuel or Bvent in same chase: Have room? Y N Size: _____			Y N		
Is there floor in chase? Y N			Y N		
Is there a baffle:			Y N		
1st Floor? Y N					
2nd Floor? Y N					
Is there plywood on top of chase? Y N			Y N		
Did you mention insulation? Y N			Y N		
US THEM					
Flash dimensions - Trim on - Good to go? Y N			Y N		
Roof pitch if roof flash?			Y N		
Is fireplace framed? Y N			Y N		
Dimensions _____					
Is FP platform built? Y N					
Is add'l pipe required to meet 7' code? Y N					
Does builder want air kit? Y N					
How far? _____					
Where can it run? _____					
Does builder want fan kit? Y N					
Advise how to wire? Y N					
Did you draw on floor? Y N					
Advise builder to run gas pipe? Y N					
Directions OK? Y N					
Power at site? Y N					
Need 40' ladder? Y N					
Reminders:					
* Did you quote price? Y N \$ _____					
* Did you sked. install? Y N Date: _____					
* Did you draw flash? Y N					

Revision Date 06/12/08

*mantel can be removed
can cut sheetrock behind mantel*

All Offices:

- 15 Colonial Drive, East Hampstead, NH 03826, 603-362-0020, na@arc-fire.com
- 4 Washington Street, Auburn, MA 01501, 508-757-0622, so@arc-fire.com
- 19 Maple Street, Union, NH 03887, 603-473-2821, nh@arc-fire.com
- 4 Little Brook Road, Wareham, MA 02576, 508-273-0280, cape@arc-fire.com



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

3-17 20 09

Received from Matthew Henne / Architectural

Location of Work 175 South St.

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ 50 Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 50

Building (I1) _____ Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other HVAC

CBL: 398 A 3

Check #: 3012 2009 -16353 Total Collected \$ 50

No work is to be started until permit issued.

If permit is Withdrawn or Denied, amount of the Refund is based on \$20.00 or 20% of the fee, (whichever is greater)

In order to receive a refund, you **MUST** present the Original Receipt.

Taken by: [Signature]

WHITE - Applicant's Copy

YELLOW - Office Copy

PINK - Permit Copy