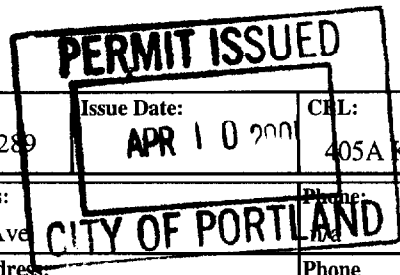


City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 01-0289 Issue Date: APR 10 2001 CHL: 405A K001001



Location of Construction: 2 Liberty Way	Owner Name: Pines Of Portland Inc	Owner Address: 426 Forest Ave	Phone: n/a
Business Name: n/a	Contractor Name: Bill Recs Builders Insulation	Contractor Address: 515 Riverside Industrial Parkw Portlan	Phone: 2078786600
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: HVAC	Zone:

Past Use: Heat	Proposed Use: Heat	Permit Fee: \$30 w/ \$0.00	Cost of Work: \$0.00	Area 2
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:
Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>

Proposed Project Description:
HVAC

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)
 Action: Approved Approved w/Conditions Denied
 Signature: Date:

Permit Taken By: cjh	Date Applied For: 03/27/2001	Zoning Approval	
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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:	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 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:
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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.

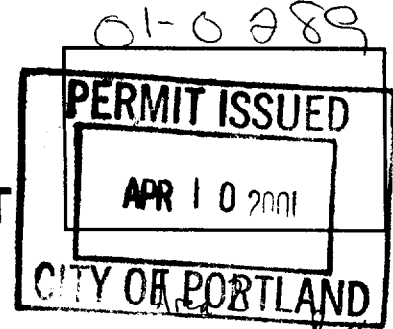
SIGNATURE OF APPLICANT ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE



FILL IN AND SIGN WITH INK

APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT



To the INSPECTOR OF BUILDINGS, PORTLAND, ME. CBLE 405AK001

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 #2 Liberty Way Lot 19 Use of Building Home Date 3/27/01

Name and address of owner of appliance The Pines of Portland
428 Forest Ave.

Installer's name and address Builders Insul Portland
515 Riverside Ind. Parkway Portland 04103 Telephone 878-6600

Location of appliance:

- Basement
- Floor
- Attic
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: FMI

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 3025
- Other _____

Type of Chimney:

- Masonry Lined
- Factory built _____

NA Metal
Factory Built U.L. Listing # _____

Direct Vent
Type Horiz. UL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Approved

Approved with Conditions

Fire: M407

Ele.: _____

Bldg.: James Crotwell

See attached letter or requirement \$30.00

Signature of Installer Bill Rees

PLUMBING APPLICATION

405 AK 001 #9 AR 400
 Department of Human Sciences
 Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: Norland
 Street Subdivision Lot #: 2 Liberty way, lot 19
 Last: Mulkern First: Dany
 Applicant Name: James Gedaro
 Mailing Address of Owner/Applicant (if Different): 28 Tenney Ln Scarborough

PORTLAND 7595 TOWN COPY
 Date Permit Issued: 5/26/01 \$ 8410.00 If Double Fee Charged
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 01124

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.

Signature of Owner/Applicant: [Signature] Date: 5/26/01

Caution: Inspection Required

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

Local Plumbing Inspector Signature: Jeannie Bourke Date Approved: 5/27/01

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER - SPECIFY _____	Plumbing To Be Installed By: 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>2622</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system. PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR TRANSFER FEE [\$6.00]	2	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	3	Wash Basin
		Indirect Waste	3	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
	Fixtures (Subtotal) Column 2		17	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			17	Fixtures (Subtotal) Column 2
			14	Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			84	Permit Fee (Total)

ELECTRICAL PERMIT

City of Portland, Me.



SW

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 5-8-01
 Permit # 1452
 CBL# 405 A K001

SITE LOCATION: 2 LIBERTY WAY LOT 19

OWNER PINES OF PORTLAND **TENANT** _____

							TOTAL EACH FEE		
OUTLETS	Receptacles		Switches		Smoke Detectors			.20	
FIXTURES	incandescent		fluorescent		Strips			.20	
SERVICES	Overhead		Underground	<input checked="" type="checkbox"/>	TTL AMPS <800	<input checked="" type="checkbox"/>	15.00	15.00	
	Overhead		Underground		>800		25.00		
Temporary Service	Overhead		Underground		TTL AMPS		25.00		
							25.00		
METERS	(number of)	1					1.00	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		
	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	<input checked="" type="checkbox"/>	4.00	4.00
TRANSFORMER		0-25 Kva					5.00		
	25-200 Kva						8.00		
	Over 200 Kva						10.00		
							45.00	TOTAL AMOUNT DUE	35.00
							35.00	MINIMUM FEE	-25.00 35.00

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME DANIEL MERCHANT **MASTER LIC. #** 60014285
ADDRESS 100 SABBADY PT. RD. WINDHAM 04062 **LIMITED LIC. #** _____
TELEPHONE 838-5243 / 892-5532

SIGNATURE OF CONTRACTOR Daniel G. Merchant

ELECTRICAL PERMIT

City of Portland, Me.



SF AE

(K)

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 11-02-00
Permit # 980
CBL# 405A-K-001

LOCATION: ~~#170~~ LIBERTY WAY Lot 19 METER MAKE & # _____
CMP ACCOUNT # _____ OWNER _____
TENANT THE PINES PHONE # _____

							TOTAL	EACH FEE	
OUTLETS	75	Receptacles	25	Switches	7	Smoke Detector	.20	21.40	
FIXTURES	15	Incandescent	5	Fluorescent		Strips	.20	4.00	
SERVICES		Overhead	X	Underground		TTL AMPS <800	15.00	15.00	
		Overhead		Underground		>800	25.00		
Temporary Service		Overhead		Underground		TTL AMPS	25.00		
							25.00		
METERS	1	(number of)					1.00	1.00	
MOTORS		(number of)					2.00		
RESID/COM		Electric units					1.00		
HEATING		oil/gas units		Interior		Exterior	5.00		
APPLIANCES	1	Ranges		Cook Tops		Wall Ovens	2.00	2.00 2.00 2.00 2.00	
		Insta-Hot		Water heaters	1	Fans	2.00		
	1	Dryers	1	Disposals	1	Dishwasher	2.00		
		Compactors		Spa	1	Washing Machine	2.00		
MISC. (number of)		Others (denote)					2.00		
		Air Cond/win					3.00		
		Air Cond/cent				Pools	10.00		
		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	100	Service		Remote		Main	4.00	4.00	
TRANSFORMER		0-25 Kva					5.00		
		25-200 Kva					8.00		
		Over 200 Kva					10.00		
TOTAL AMOUNT DUE									
MINIMUM FEE/COMMERCIAL 45.00							MINIMUM FEE	35.00	57.40

INSPECTION: Will be ready will call or will call _____

CONTRACTORS NAME RONALD LAUGHTON MASTER LIC. # MS60014174
ADDRESS P.O. BOX 129 SCARBORO ME LIMITED LIC. # _____
TELEPHONE 803-5050 3291032

SIGNATURE OF CONTRACTOR Ronald Laughton

ELECTRICAL PERMIT

City of Portland, Me.



S/F Steve

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 2/1/01
 Permit # 1199
 CBL# 405 A K001

LOCATION: Lot 19 Liberty Way METER MAKE & # _____
 CMP ACCOUNT # _____ OWNER Michael Whitlock (future homeowner)
 TENANT _____ PHONE # 508 867 5294

					TOTAL EACH FEE		
OUTLETS	Receptacles	Switches	Smoke Detector			.20	
FIXTURES	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
		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 45.00					MINIMUM FEE	35.00	
					35.00		

INSPECTION: Will be ready _____ or will call _____

CONTRACTORS NAME ADT Bill Lamson MASTER LIC. # _____
 ADDRESS 15 Pleasant Hill Rd Scarborough LIMITED LIC. # 50016551
 TELEPHONE 207-396-5715

SIGNATURE OF CONTRACTOR William Lamson