

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-1251	Issue Date: 08/25/2006	CBL: 438 A023001
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Location of Construction: 154 YALE ST	Owner Name: MJ DEVELOPMENT CO LLC	Owner Address: 50 THORNHURST RD	Phone: 207.874.1310
Business Name:	Contractor Name: James Jackson	Contractor Address: 30 Bolton Portland	Phone: 207.874.1310
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Fast Use: Single Family Home	Proposed Use: Single Family Home/ install a Weil Mclain direct vent gas boiler	Permit Fee: \$60.00	Cost of Work: \$3,500.00	CEO District: 4
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Proposed Project Description: install a Weil Mclain direct vent gas boiler	<p>FIRE DEPT: <input type="checkbox"/> Approver <input type="checkbox"/> Denied</p> <p>INSPECTION: Use Group R-3 Type <i>HURB</i></p> <p>Signature: <i>[Signature]</i></p> <p>Signature: <i>[Signature]</i></p> <p>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</p> <p>Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied</p> <p>Signature: _____ Date: _____</p>
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Permit Taken By: Idobson	Date Applied For: 08/25/2006	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p>Date: _____</p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation</p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>
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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.

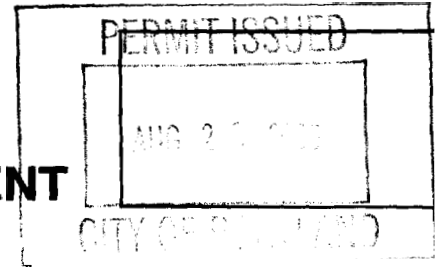
SIGNATURE OF APPLICANT ADDRESS DATE PHONE

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.

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 438 Adams York St Portland ME 04103 Use of Building Single Dw Date 8-24-08
Name and address of owner of appliance Jim McLaughlin

Installer's name and address Portside P-H Portland Telephone 831-1810

Location of appliance

- Basement
- Attic
- Floor
- Roof

Type of Fuel:

- Gas
- Oil
- Solid

Appliance Name: Wall mount
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 # MS 2231
- Solid Fuel # _____
- Oil # _____
- Gas # PNT 1604
- Other _____

Type of Chimney:

- Masonry Lined
Factory built NA
- Metal
Factory Built U.L. Listing # NA
- Direct Vent
P p e _____ uL# _____

Type of Fuel Tank

- Oil
- Gas

Size of Tank _____

Number of Tanks _____

Distance from Tank to Center of Flame _____ feet.

Cost of Work: \$ 350.00

Permit Fee: \$ _____

Approved

Fire: _____
Ele.: _____
Bldg.: _____

Approved with Conditions

- See attached letter or requirement

Signature of Installer [Signature] Inspector's Signature _____ Date Approved _____

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Business Name:	Contractor Name: James Jackson	Contractor Address: 30 Bolton Portland	Phone (207) 813-1810
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

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Dept: Zoning **Status:** Approved**Note:****Dept:** Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 08/25/2006**Note:** **Ok to Issue:**

1) The installation must comply with the State of Maine Gas Regulations.

