City of Portland, Maine - Building or Use Permit 389 Congress Street, 04101 Tel: (207) 874-8703, Fax:				ermit .	Application	Pe	rmit No:	Issue Dat	e:	CBL:		
				Fax: (207) 874-8716		05-0444				013 K028001		
Location of Construction: Owner Name:					Owner Address:				Phone:			
117 Sheridan St Fort Sumner Llo				С	e 12 Simonton St		imonton St					
Business Name: Contr				Contractor Name:			Contractor Address:			Phone		
			Pine State Plun	nbing &	k Heating	PO Box 6308 Scarborough				207321226	51	
Less	see/Buyer's Name		Phone:				it Type:				Zone:	
						HV	AC					
Past	t Use:		Proposed Use:	P		Perm	nit Fee:	Cost of Wo	rk:	k: CEO District:		
Co	ndo		Condo install a	Luna Wall hung		\$399.00 FIRE DEPT:		\$41,6	\$41,600.00 1 Approved INSPECTION:			
			boiler					Approved			•	
								Denied	Use Gr	roup:	Type	
								_ Deliled				
Proj	posed Project Description	1:	•			1						
Ins	tall a Luna Boiler wall hu	ıng				Signature: Signa			Signatu	nature:		
						PEDESTRIAN ACTIVITIES DISTRIC			TRICT (CT (P.A.D.)		
									proved w	ed w/Condition Denied		
						Signa				Date:		
D		Dodo A				Signature:				Date.		
	mit Taken By: nartin		pplied For: /2005		Zoning Approval				I			
				Special Zone or Reviews		OWC	Zoning Appeal			Historic Preservation		
1.	This permit application		•			CWS	_			<u> </u>		
	Applicant(s) from meeting applicable Star Federal Rules.		cable State and	Shoreland			☐ Variance			Not in District or Landm		
2.	Building permits do not include plumbing, septic or electrical work.			Wetland			Miscellaneous			☐ Does Not Require Revie		
3.				☐ Flood Zon			Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work				Subdivision			☐ Interpretatio			Approved		
			☐ Site Plan Maj ☐ Minor☐ MM ☐			☐ Approved			Approved w/Condition			
						☐ Denied			☐ Denied			
					Date:		Date:		D	Date:		
									•			
					CERTIFICATION	ON						
I ha juris shal	reby certify that I am the ve been authorized by th sdiction. In addition, if a Il have the authority to en uch permit.	e owner to permit fo	o make this appli r work described	med procation a	operty, or that the as his authorized application is is	ne prop d agen sued, I	t and I agree certify that the	to conform the code office	to all ap cial's au	oplicable laws of thorized repres	of this sentative	
SIG	NATURE OF APPLICAN				ADDRES	S		DATE	1	P	НО	

Location of Construction:	Owner Name:	Owner Address:	Phone:	
117 Sheridan St	Fort Sumner Llc	12 Simonton St		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Pine State Plumbing & Heating	PO Box 6308 Scarborough	2073212261	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		HVAC		

Dept:	Zoning	Status:	Approved	Reviewer:	Jeanine Bourke	Approval Date:	12/19/2005
Note:						Ok to	o Issue: 🗹
Dept:	Building	Status	Approved with Conditions	Reviewer:	Jeanine Bourke	Approval Date:	12/23/2005
Note:	Dunanig	Status.	Approved with conditions	Reviewer.	Jeannie Bourke		o Issue:
1) The installation must comply with the State of Maine Gas Regulations.							
Dept:	Fire	Status:	Approved with Conditions	Reviewer:	Cptn Greg Cass	Approval Date:	12/22/2005
						o Issue: 🗹	
1) Install to comply with NFPA 54 or 58 which ever is applicable. Application did not state L/P or Natural gas.							

Comments:

05/02/2005-dmartin: Talked to Terry said he'd send the specs for hanging unit. Left VM that we still have not gotten them. Pine State Plumbing called 4/25 said they were going to send them, today 5/2 they still have not come in, putting permit on hold in the "hold filing cabinet"

12/19/2005-jmb: Reviewing permits for CO's, did not receive the info requested, left vm w/Terry to send specs.

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 APPLICAN	ADDRESS	DATE	РНО	
RESPONSIBLE PERSON IN CHARGE OF WORK TIT		DATE	РНО	