

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 06-0059	Issue Date:	CBL: 032 F002001
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Location of Construction: 36 MARKET ST	Owner Name: 36 MARKET ST	Owner Address: 20 MILK ST	Phone:
Business Name:	Contractor Name: Gelinac HVAC Services Inc.	Contractor Address: 2 Washington Ave Scarborough	Phone 2078850771
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:

Past Use: Commercial - legal use: restaurant on 1st floor with offices above 1st floor	Proposed Use: Commercial/ Replace existing units w/ Lennox RTV's	Permit Fee: \$210.00	Cost of Work: \$20,500.00	CEO District: 1
Proposed Project Description: Replace existing units w/ Lennox RTV's		FIRE DEPT: <div><input type="checkbox"/> Approved</div> <div><input type="checkbox"/> Denied</div>		INSPECTION: Use Group: Type
		Signature:		Signature:
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied		
		Signature:		Date:

Permit Taken By: ldobson	Date Applied For: 01/12/2006	Zoning Approval		
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 Zon <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Mino <input type="checkbox"/> MM <input type="checkbox"/> Date:	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Us <input type="checkbox"/> Interpretatio <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landma <input type="checkbox"/> Does Not Require Revie <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Condition <input type="checkbox"/> Denied Date:

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

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

DATE

PHO

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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 01/19/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 01/23/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Fire	Status: Approved with Conditions	Reviewer: Cptn Greg Cass	Approval Date: 01/20/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Install to comply with NFPA 90 B. And NFPA 54.			

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