

**City of Portland, Maine – Building or Use Permit Application**

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

Location of Construction: 151 Cumberland Ave		Owner: *** Goodwill Industries		Phone: 761-8455		Permit No: <b>000215</b>
Owner Address: SAA		Lessee/Buyer's Name:		Business Name:		
Contractor Name: Gelina's HVAC Service		Address: P.O. Box 2136 Scarb. ME 04070		Phone: 885-0771		Permit Issued: <b>MAR 22 2000</b>
Past Use:  Office		Proposed Use:  same		COST OF WORK: \$15,000		
				PERMIT FEE: \$114.00		CITY OF PORTLAND
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		
				INSPECTION: Use Group: Type:		Zoning Approval: CBL: 033-K-001
				Signature: <i>[Signature]</i>		
Proposed Project Description:  HVAC system duct alterations				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		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"/>
				Signature: _____ Date: _____		
Permit Taken By: GD		Date Applied For: March 16 2000 K				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

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..

\*\*\*\*\* Please Call 885-0771\*\*\*\*\*  
For Pickup....

**PERMIT ISSUED  
WITH REQUIREMENTS**

**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 provisions of the code(s) applicable to such permit

March 16 2000

SIGNATURE OF APPLICANT	ADDRESS:	DATE:	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		PHONE:	

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**PERMIT ISSUED  
WITH REQUIREMENTS  
CEO DISTRICT**

~~1/12/01~~

1/12/01

OK

A. Rowe

CBL: 23-R-1

Permit # 000215

**Inspection Record**

**Type**

**Date**

Foundation: \_\_\_\_\_

\_\_\_\_\_

Framing: \_\_\_\_\_

\_\_\_\_\_

Plumbing: \_\_\_\_\_

\_\_\_\_\_

Final: \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_