389 Congress Street, 04101 Tel: (207) 874-8703		, 1 u.A. (201) 01+ 0	/10		033 K004001
Location of Construction:	Owner Name:				Phone:
343 Cumberland Ave	ve Preble Street Resource Center				
Business Name: Contractor Name Johnson & Jor		:	Contractor Addres	ss:	Phone
		dan	18 Mussey Roa	d Scarborough	2078838345
Lessee/Buyer's Name	Phone:		Permit Type: HVAC		B3
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:
Preble Street Resource Center	Preble Street F	Preble Street Resource Center		\$30.00	2
Proposed Project Description: Install Gas Heating System in Roc	oftop VAR	Wed	Action: App	Denied Use Use Use	PECTION: Group: Type: PLRMI+PPPI/CH
			Signature:		Date:
Permit Taken By: Date Applied For: gad 03/25/2003			Zonii	ng Approval	
2		Special Zone or Re	views Zo	ning Appeal	Historic Preservation
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.			Varia		Not in District or Landmark
2. Building permits do not include plumbing, septic or electrical work.		Wetland	Misc	ellaneous	Does Not Require Review
 Building permits are void if work is not started within six (6) months of the date of issuance. 		Flood Zone		litional Use	Requires Review
False information may invalid permit and stop all work.		Subdivision	Inter	pretation	Approved
		Site Plan		oved	Approved w/Conditions
				ed	
2		Date: 3/2	7/03 Date:		Date:
	\leq		in No	4	

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 S	Sign with Ink 03 - 0233				
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 <u>343 CuMber and AVE</u> Use of Building <u>Date</u> <u>03/25/03</u> Name and address of owner of appliance <u>HEDIE St. RESCUTCE CENTER</u> Installer's name and address <u>Johnson</u> + Jordan <u>18 Mussey of Scatborough</u> <u>ME</u> <u>Russell Chorte</u> Location of appliance: Type of Chimney:					
Basement Floor Attic Roof	Masonry Lined Factory built				
Type of Fuel: Gas Oil Solid Appliance Name: Kork Root top Unit U.L. Approved Q Yes Q No	 Metal Factory Built U.L. Listing # Direct Vent Type UL# 				
Will appliance be installed in accordance with the manufacture's installation instructions? May Yes INO	Type of Fuel Tank				
The Type of License of Installer:	Number of Tanks				
Master Plumber # Solid Fuel # Oil # Gas # $P N T I 2 4 I$ Other	Distance from Tank to Center of Flame feet.				
Approved Fire:	Approved with Conditions Generative See attached letter or requirement DECATORS ink - Applicant's Gold - Assessor's Copy				