City of Portland, Mai	ine - Buil	ding or Use	Permi	t Application	1 Pei	rmit No:	Issue Date	:	CBL:		
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-871				- 1	08-0914			033 NO	20001		
		Owner Name:	Owner Name:			Owner Address:			Phone:		
2 CEDAR ST SALVAT		SALVATION	TION ARMY THE		88 PREBLE ST				l		
Business Name:		Contractor Name	:		Contractor Address:				Phone		
		Titan Mechani	ical Inc.		PO F	3927 Por	rtland				
Lessee/Buyer's Name		Phone:			Permit Type:					Zone:	
					HV.	AC				16-3	
Past Use: Propo		Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:			k:	CEO District:		
Commercial - Salvation Army		Commercial - Salvation Army -				\$1,520.00 \$150,000.0			1		
		Install Trane: Climate Changers Air Handler & HB Smith							SPECTION:		
								Use Gr	e Group:6/A3 Type: A		
					Denied					HUNK	
		l l						TMC-2003			
Proposed Project Description:					1 +100				110000		
Install Trane: Climate Cha	ngers Air I	Handler & HB Si	mith		Signature: Sign			Signatu	nature: MB 128 108		
					PEDESTRIAN ACTIVITIES DISTRIC			TRICT (I	CT (P.A.D.)		
					Action: Approved Approve				ed w/Conditions		
					/ Kotio	п лърго	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	Conditions	Democ	
					Signa	ture:			Date:		
Permit Taken By:	Date A _l	pplied For:			Zoning Approval						
ldobson	07/28	8/2008	_								
1. This permit application	n does not	preclude the	Spe	cial Zone or Revie	ws Zoning Appeal				Historic Preservation		
Applicant(s) from meeting applicab		able State and	☐ Sh	oreland	☐ Variance				Not in District or Landmar		
Federal Rules.								<i>Y</i>			
2. Building permits do not include plumbing,		plumbing,	Wetland			Miscellaneous			Does Not Require Review		
septic or electrical work.			Flood Zone Conditional Use				Requires Review				
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				ood Zone	Conditional Use			Requires Review			
			☐ Subdivision		☐ Interpretation			Approved			
			l □ □ Sit	te Plan		Approve	ed		Approved w/0	Conditions	
							-				
			 Maj	Minor MM	☐ Denied				Denied		
The later to the same of the s			Date: Date:			Date:					
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	1										
The second to th	-1 1/3 (i)										
1 cm											
The second section of the second section of the second sec			C	ERTIFICATION	ON						
I hereby certify that I am the	e owner of	record of the na	med pro	operty, or that th	e prop	osed work is	authorized	by the	owner of record	d and that	
I have been authorized by the											
jurisdiction. In addition, if											
shall have the authority to e such permit.	mer all are	as covered by su	cn pern	nit at any reason	iable h	iour to enforc	the provi	sion of	tne code(s) app	oncable to	
ouen permit.											
SIGNATURE OF APPLICANT				ADDRESS	S DATE				PHONE		
RESPONSIBLE PERSON IN CH	HARGE OF W	ORK TITLE					DATE		PHON		
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE							DAIL		11101	•=	

FILL IN AND SIGN WITH INK



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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			A TOTAL STREET, STREET	

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersig	ned hereby ap	pplies for a pe	rmit to insta	ll the fo	llowing h	neating,	cooking o	or power	equipment	in
accordance with the	Laws of Main	e, the Buildin	g Code of th	e City o	of Portlan	id, and i	the follow	ing speci	fications:	
					- 1					

Location / CBL PORTLAND ME. 33 N	Use of Building Date Date					
Name and address of owner of applianceSALVATION AT	emy					
CUMBERIANO AVENUE	PORTCANO ME					
Installer's name and address	AL - 232 KIVERSION IND. PKWY.					
PORTLAND ME.	Telephone (707) 878-5323					
Location of appliance:	Type of Chimney:					
Basement	☐ Masonry Lined					
☐ Attic ☐ Roof	Factory built					
Type of Fuel: ELECTRIC	☐ Metal					
□ Oil □ Solid	Factory Built U.L. Listing #					
Appliance Name: IRANE: CLIMATE CHANGERS U.L. Approved Yes \(\Omega\) No AIR HANDICAL	☐ Direct Vent					
	Type UL#					
Will appliance be installed in accordance with the manufacture's	m					
installation instructions? Yes No	Type of Fuel Tank					
installation instructions: W 105 G No	Oil Gas					
IF NO Explain:	Gas					
	Size of Tank					
The Type of License of Installer:	Number of Tanks					
☐ Master Plumber #						
□ Solid Fuel #	Distance from Tank to Center of Flame feet.					
	Cost of Works S (50)					
Gas # 7NT5616	Cost of Work: \$ 150,000					
Other	Permit Fee: \$					
Approved	Approved with Conditions					
Fire:	☐ See attached letter or requirement					
Ele.:	•					
Bldg.:						
	Inspector's Signature Date Approved					
Signature of Installer School A Jelek	an (TITAN MECHANICAL)					
White - Inspection Yellow - File	Pink - Applicant's Gold - Assessor's Copy					