City of Portland, Maine	- Building or Use	Permit Application	1 Permit N	o:	Issue Date:		CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	, Fax: (207) 874-871	6 06	-1137	<b>DRILAND</b>	110	1037 EC	03001
Location of Construction:	n: Owner Name:		Owner Add	ress:			Phope:	<b>†</b>
10 CONGRESS SQ PLZ	PLAZA ASSC	CIATES AT CONG	491 HUM	IPHREY	ST	1 00		
Business Name: Contractor N		:	Contractor	Address:	S. C. Barris	1 212	Phone	
Granite Const		ruction	Portland				2076321	124
Lessee/Buyer's Name	Phone:	:		2:	01000	[ BRAIN [ -	1	Zone:
			HVAC Permit Fee	ў				<u> </u>
Past Use:	1 *	Proposed Use:			Cost of Work:		O District:	
Commercial		Commercial install a rooftop Trane unit, gas w/ direct venting		40.00	\$12,000		1	
			FIRE DEP	Approved		Use Group	e Group: ///ACType: //3/057	
Proposed Project Description:						/	×, ((	at
Install a rooftop Trane unit, ga		e			Signature			
			PEDESTRI	<b>VITIES DIST</b>	STRICT (P.X.D.) /			
		Action: Approved Approv			oved w/Co	ed w/Conditions Denied		
					Da	Date:		
Permit Taken By:	Date Applied For:		Zoning Approval					
dmartin	08/03/2006	Town Prehrows						
1. This permit application do	bes not preclude the	Special Zone or Reviews		Zoning Appeal			Historic Preservation	
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Variance			🗌 Not in District or Landmark	
2. Building permits do not include plumbing, septic or electrical work.		Wetland	Miscellaneous			Does Not Require Review		
<ol> <li>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</li> </ol>		Flood Zone		Conditional Use			Requires Review	
		Subdivision		Interpretation			Approved	
		Site Plan		Approved			Approved w/Conditions	
		Maj 🗌 Minor 🗍 MM		Denied			Denied	
		Date:		Date:			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 APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

FILL IN AND S	IGN WITH INK
APPLICATION HEATING OR POV	
accordance with the Laws of Maine, the Building Code of the Location / CBL <u>iv</u> <u>Confightess</u> <u>Square</u> <u>PLAZA</u> Name and address of owner of appliance <u>PLAZA ASSOC. AT CON</u> 491 <u>HUMPHREY ST.</u> SWAMPSCOTT, MA 019	Use of Building <u>RESIDENTIAL</u> Date 7/28/06 VILESS SQ. L.P. FACS, LLC 175 GEAL. PARTNER
Location of appliance:       Basement     Floor       Attic     Attic	Type of Chimney:          Image: Comparison of the second
Type of Fuel:       Oil       Solid         Appliance Name:       TRANE       MODEL # GRAA70PDL         U.L. Approved       Yes       No         Will appliance be installed in accordance with the manufacture's installation instructions?       Yes       No         IF NO Explain:       Yes       No       No         The Type of License of Installer:       Master Plumber #	□ Metal Factory Built U.L. Listing # To Direct Vent UN IT VENTS DIRECTLY To ATMOSPHERE Type UL# Type of Fuel Tank — NG PIPE LINE □ Oil □ Gas Size of Tank Number of Tanks Distance from Tank to Center of Flame feet. Cost of Work: $\frac{12,000}{140}$
Approved         Fire:         Ele.:         Bldg.:         Bldg.:         White - Inspection         Yellow - File	Approved with Conditions See attached Teleprover requirement STECTION CITY OF PORTLAND, ME Inspector's Signature AUG 3 Date: Approved Applicant's Gold - Assessor's Copy