•	,	Building or Use Pe Tel: (207) 874-8703,			Pe	rmit No: 06-1056	Issue Date	e:	CBL: 037 F005	5001
Location of Con 28 PREBLE ST	cation of Construction: Owner Name: B PREBLE ST EARL APART					Owner Address: 104 GRANT ST			Phone:	
		Contractor Nan Portland Airco	t ractor Name: tland Airconditioning, Inc.		Contractor Address: 205 Lincoln St. S. Portland				Phone 2077674567	
Lessee/Buyer's Name		Phone:	Phone:		Permit Type: HVAC					Zone:
Past Use: Commercial			Proposed Use: Commercial install a Bryant 4 way furnace direct vent		-	nit Fee: \$150.00	Cost of Wo \$12,40	00.00	CEO District: 1	
		furnace direct			FIRE	DEPT:	Approved Denied	INSPEC' Use Gro		Туре
Proposed Project Description: Install a Bryant 4 way furnace direct vent			Signature: PEDESTRIAN ACTIVITIES DIST		0	Signature: RICT (P.A.D.)				
					Actio	on 🗌 Approv	ved 🗌 App	proved w/0	Condition	Denied
			1		Signa	ture:]	Date:	
Permit Taken By dmartin	· •	Date Applied For: 07/19/2006		Zoning Approval						
 This permit application does not preclude th Applicant(s) from meeting applicable States Federal Rules. 					ews	s Zoning Appeal			Historic Preservation	
		g applicable State and			Variance			Not in District or Landma		
2. Building permits do not include plumbing, septic or electrical work.			Wetland Misce		Miscella	aneous 🗌 Does Not I		Does Not Re	quire Revie	
 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 			Flood Zon			Conditional Us			Requires Review	
			Subdivision		Interpretatio			Approved		
			Site Plan		Approved			Approved w/Condition		
			Maj 🗌 I	Mino 🗌 MM		Denied			Denied	
		Date:			Date:		Dat	te:		

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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	РНО

Location of Construction: 28 PREBLE ST			Owner Address: 104 GRANT ST		Phone:	
Business Name:	-	ontractor Name: Portland Airconditionir		Contractor Address: 205 Lincoln St. S. Port	2077674567	
Lessee/Buyer's Name	PI	hone:		Permit Type: HVAC		Zone:
Dept: Building Note: 1) The installation must		proved with Condition		0	Approval Date (: 07/25/2006 Ok to Issue: 🗹
Dept: Fire Note: 1) Install shall comply v		proved with Condition	s Reviewer :	Cptn Greg Cass	Approval Date (: 07/25/2006 Dk to Issue: 🗹

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