

Location of Construction: 14-25 York St - 3rd flr		Owner: J. L. Chase & Gas		Phone:	
Owner Address:		Leasee/Buyer's Name:		Phone:	
Contractor Name: A. M. K. Maine Air Conditioning Co		Address: 23 Warren Ave		Phone: 707-7117	
Past Use: office bldg		Proposed Use: office bldg w MAC syst		COST OF WORK: \$ 21,310 PERMIT FEE: \$ 125 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: <u>B</u> Type: <u>3B</u> Signature: <i>[Signature]</i>	
Proposed Project Description: install MAC syst - 3rd flr		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/> Signature: _____ Date: _____		Signature: _____ Date: _____ Signature: <i>[Signature]</i>	
Permit Taken By: L Chase		Date Applied For: 5/3/96			

Permit No: **960535**

PERMIT ISSUED

JUN 19 1996

CITY OF PORTLAND

Zone: B-3 CBL: 040-F-011

Zoning Approval: _____

Special Zone or Reviews:

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan maj minor mm

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action:

Approved
 Approved with Conditions
 Denied

Date: _____

PERMIT ISSUED WITH LETTER

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 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

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

CEO DISTRICT **2**