City of Portland, Maine	- Building or Use	Permit Applica	tion Pe	rmit No:	Issue Date:	CBL:	
389 Congress Street, 04101	0			013-01943		041 A016001	
Location of Construction:	Owner Name:	Owner Name:		ddress:	Phone:		
252 COMMERCIAL ST	WATERFROM	WATERFRONT MAINE		INE ST BRU			
Business Name:	Contractor Name	Contractor Name:		or Address:	Phone		
King's Head Restaurant		Atlantic Comfort Systems acsinc2@maine.rr.com		x 665 Biddefo	(207) 284-6360		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:	
			HVAC			WCZ	
Past Use:	Proposed Use:		Permit F	ee:	Cost of Work:	CEO District:	
Restaurant in suite 100 unit L	Same: Restaur unit L	ant in suite 100	INSPECT	\$390.00	\$37,000	.00 2	
Proposed Project Description: HVAC; install LG w/Electric	PEDESTRIAN ACTIVITIES DISTRICT (P.A.		A.D.) w/Conditions 🗌 Denied				
					Date:		
Permit Taken By:		Zoning Approval					
bjs	08/28/2013						
1. This permit application de	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	
3. Building permits are void within six (6) months of t	Flood Zone		Conditional Use		Requires Review		
False information may invalidate a building permit and stop all work		Subdivision		Interpre	tation	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
PESDONSIBLE DEDSON IN CHADGE OF WORK TITLE		DATE	PHONE