Cit	y of Portland, Maine	- Build	ling or Use Pe	ermit A	Application	Pe	rmit No:	Issue Dat	e:	CBL:		
389	Congress Street, 04101	Tel: (2	207) 874-8703,	Fax: (2	207) 874-8716		04-0959			058 F013	3001	
Location of Construction: Owner Name:				(Owne	Owner Address:			Phone:		
24 Brackett St Mesden Llc						28 C	Chestnut St					
Busi	iness Name:		Contractor Nan	Contractor Name:			ractor Address	s:		Phone		
			Spencer Gould			8 Homeword Gray			207657376	3		
Less	see/Buyer's Name		Phone:	1			Permit Type:			I	Zone:	
	·					HVAC						
Past	t Use:		Proposed Use:			Permit Fee: Cost of Work:		rk:	CEO District:	1		
Cor	ndo Direct Vent Fireplace		Condo Direct V	Vent Fireplace - no			\$93.00	\$8,0	00.00	2		
			change of use			FIRE DEPT:		_ Approved Use G		CTION:	Туре	
										oup:		
						Defined		_ Dellieu				
Prop	posed Project Description:		•			7						
Cor	ndo Direct Install a Simps	on Direc	t Vent Fireplace	on the	floor	Signature: Sign			Signatur	nature:		
						PEDESTRIAN ACTIVITIES DISTRICT			TRICT (F	Γ (P.A.D.)		
						Action: Approved Approved w/Condition				/Condition	Denied	
										_		
				1		Signa	gnature:			Date:		
Permit Taken By: Date Applied 2 07/13/2004					Zoning Approval							
				Spec	Special Zone or Review		vs Zoning Appeal			Historic Preservation		
1.	This permit application of		•			CWS	_			_		
Applicant(s) from meeting application Federal Rules.			eable State and	Shoreland			☐ Variance			☐ Not in District or Landm		
2.	2. Building permits do not include plumbing, septic or electrical work.			☐ Wetland		Miscellaneous			Does Not Require Revie			
3. Building permits are void if work is not started within six (6) months of the date of issuance.			Flood Zon			Conditional Us			Requires Review			
False information may invalidate a building				Subdivision		☐ Interpretatio			Approved			
permit and stop all work			☐ Site Plan Maj ☐ Minor☐ MM ☐									
						Approved			Approved w/Condition			
						☐ Denied			☐ Denied			
				Date:	Date:		Date:		Da	ate:		
					CERTIFICATIO	N						
	reby certify that I am the o											
	ve been authorized by the											
	sdiction. In addition, if a p											
	I have the authority to ent uch permit.	er all are	eas covered by si	ucii peri	um at any reaso	павіе	nour to enfor	ce the prov	181011 01	me code(s) ap	рисавіе	
10 81	uen permit.											
SIGNATURE OF APPLICAN				ADDRESS		S	DATE		Ξ	РНО		

DATE

PHO

RESPONSIBLE PERSON IN CHARGE OF WORK, TIT

Location of Construction: Owner Name:		Owner Address:	Phone:	
24 Brackett St	Mesden Llc	28 Chestnut St		
Business Name:	Contractor Name:	Contractor Address:	Phone	
	Spencer Gould	8 Homeword Gray	2076573763	
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:	
		HVAC		

07/14/2004 Dept: Zoning Status: Approved **Reviewer:** Marge Schmuckal **Approval Date:** Ok to Issue: ✓ Note: four legal condominium dwelling units Dept: **Building Status:** Approved with Conditions Tammy Munson **Approval Date:** 08/05/2004 **Reviewer:** Ok to Issue: ✓ Note: Dept: Fire **Status:** Approved with Conditions Reviewer: Lt. MacDougal **Approval Date:** 07/19/2004 Ok to Issue: Note: 1) fireplace shall be installed in accordance with the manufactors instructions

Comments:

7/19/04-mjn: Need Fire separation assembly information, Left message with the applicant

8/5/04-tmm: ok to issue - rating enclosure submitted and inspected for vent.

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	