City of Portland, Maine - Building or Use Permit Application
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No:		CBL:
05-1767		065 A022001

PERMIT ISSUED

CITY OF PORTLAND

Location of Construction:	Owner Name:	Owner Address	Phone:
995 CONGRESS ST	MAINE MEDICAL CENTER	22 BRAMHALL ST	

Business Name:	Contractor Name:	Contractor Address:	Phone:
	Nason Mechanical Systems	194 Merrow Road Auburn	2077820707

Lessee/Buyer's Name	Phone:	Permit Type:	Zone:
		HVAC	

Past Use:	Proposed Use:	Permit Fee:	Cost of Work:	CEO District:
Commercial	Commercial/ install a trane gas/electrical units on roof	$156.00	$14,335.00	3

FIRE DEPT: ☑ Approved ☐ Denied

TO NFPA 90B

Signature: Greg Cass

INSPECTION:
Use Group: U   Type: HVAC
IBC 2003/State Gas

Signature: [signature]

Proposed Project Description:
install a trane gas/electrical units on roof

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: ☐ Approved ☐ Approved w/Conditions ☐ Denied

Signature: Date:

Permit Taken By:	Date Applied For:
ldobson	12/02/2005

Zoning Approval

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

Special Zone or Reviews
- ☐ Shoreland
- ☐ Wetland
- ☐ Flood Zone
- ☐ Subdivision
- ☐ Site Plan

Maj ☐ Minor ☐ MM ☐

Date:

Zoning Appeal
- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

Date:

Historic Preservation
- ☐ Not in District or Landmark
- ☐ Does Not Require Review
- ☐ Requires Review
- ☐ Approved
- ☐ Approved w/Conditions
- ☐ Denied

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