FORM # P 04 DISDLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

DISPLAI IIIIS CA	AND ON FRINCIPAL PRO	WATE CITY OF THE
CI	TY OF PORTLA	N B'ERMIT ISSUED
Please Read Application And Notes, If Any, Attached Aves A Fore Lives This is to certify that York-cumberland Housing	PERMITA LUCATION	Permit Number: 050452
This is to certify thatYork-cumberland Housing	ng /T ter Corp	CITY OF PORTLAND
has permission to3 story 20 unit apt. Bldg.		AND
AT 57 Frederic St		067-K019001
		ng this permit shall comply with al s of the City of Portland regulating
the construction, maintenance as		res, and of the application on file in
this department.		
Apply to Public Works for street line and grade if nature of work requires such information.	N dication inspect in must go hand with an permission procuble re this I ding or the thereof land or company of the Reservice IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept. P.FD. 40905 Health Dept.		
Appeal Board		Mixtung Theor
Department Name	THAT TY FOR REMOVING THE	Director - Building & Maspection Services
Pi	ENALTY FOR REMOVING THIS C	ARD '

City of Portland,	Maine - Buil	ding or Use	Permi	t Applicatio	n Per	mit No:	Issue Date	:	CBL:	
389 Congress Street,		_			- 1	05-0235	03.	/10/200	5 076 AC	001001
Location of Construction:		Owner Name:			Owner	Address:			Phone:	
50 Frederic St		Avesta Housin	ıg		307 (Cumberland	Ave			
Business Name:		Contractor Name	:		Contra	actor Address:			Phone	
		Pine State Plus	mbing &	& Heating	PO E	30x 6308 Sc	arborough		2073212	261
Lessee/Buyer's Name		Phone:			Permit	t Type:				Zone;
				1	HV	AC				C31/26
Past Use:		Proposed Use:		-	Permi	it Fee:	Cost of Wor	<u></u> k:	CEO District:	777
<u> </u>		30 Units Single Room Occupancy		\$669.00 \$72,000.0			00.00	3	Ì	
							NSPECTION:			
							Use Gr	Ise Group: RZ Type: HVAC		
		Ì					Dented	}	1/2	HUAC
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Proposed Project Descript	ion:				٦			11	MC-2003	2
Install HVAC central	system				Signat	ure:		Signatu	ire MB 3	3/10/05
	•					STRIAN ACT	IVITIES DIST			
					Action	n: 🗀 Appro	wad 🗔 An	anawad w	Conditions (Denied
					Action	т Аррго	veu App	noveu w	Conditions [Deffied
					Signat	ture:			Date:	
Permit Taken By:	Date A	pplied For:				Zoning	Approva	1		
jmb	03/10	0/2005				Zoning	, ripprovi	••		
1. This permit appli	cation does not	preclude the	Spe	cial Zone or Revi	ews	Zoni	ng Appeal		Historic Pre	servation
Applicant(s) from] r	Shoreland		│	· A		Not in District or Landmar	
Federal Rules.	i meeting appin	dance State and	311	loreland		Variano		/	A MOLIII DISII	ict or Landinai
Duilding normita	do not include a	u lumahin a	$ \Box w$	etland	Same	Miscell	aneous	1	Does Not Re	equire Review
2. Building permits		plumbing,	{	M. C.	permil	I WITSCOM	ancous	}	_ Does Not Re	equire review
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			ood Zone	Conditional Use		ł	Requires Review Approved			
] ' ' ' '	#Ni							
			bdivision							
permit and stop a		Z		~~		i interpre			Прриотеа	
			∫ _{□ Sit}	te Plan		Approv	ed	1	Approved w	/Conditions
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			(ERTIFICATI	ION					
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I have been authorized										
jurisdiction. In additio										
shall have the authority										
such permit.		-	-	-			-			
SIGNATURE OF APPLICA	A NT			ADDRES	28		DATE		DIT	ONE
SIGNATORE OF AFFLICA	3111			ADDRES	0.0		DATE		PHC	JINE;
NSIBLE PERSON	IN CHARGE OF W	ORK, TITLE					DATE		РНО	ONE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a	permit to install the fol	llowing heating, cooki	ng or power equipment in
accordance with the Laws of Maine, the Build	ding Code of the City o	of Portland, and the fol	lowing specifications:

Location / CBL 52 FREDRICK ST. Name and address of owner of appliance AVESTA HOUS ORTLAND, MG. 04101	ING 307 CUMBERLAND AVE.
Installer's name and address PINE STATE PEH 18 5 INDUSTRY RD SO. PORTLAND ME.	
Location of appliance: Basement	Type of Chimney: Masonry Lined Factory built
Type of Fuel: Gas Oil Solid Appliance Name: Type of Fuel: Oil Solid	☐ Metal Factory Built U.L. Listing # MAR 9 2005 Direct Vent
U.L. Approved ✓ Yes ☐ No Will appliance be installed in accordance with the manufacture's installation instructions? ✓ Yes ☐ No IF NO Explain:	Type of Fuel Tank Oil Gas Nation of States o
The Type of License of Installer: Master Plumber #	Number of Tanks Distance from Tank to Center of Flame feet.
Oil #	Cost of Work: \$ 72,000 Permit Fee: \$
Approved Fire:	Approved with Conditions ☐ See attached letter or requirement
Ele.: Bldg.: Signature of Installer would have	Inspector's Signature Date Approved
White - Inspection Yellow - File Pi	ink - Applicant's Gold - Assessor's Copy