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

Location of Construction:	Owner:	Barald	Phone:		Permit No: 980213
Owner Address:	Lessee/Buyer's Name:	Phone:	Business	sName:	PERMIT ISSUED
Contractor Name:	Address: 7 Thomas Dr.	Westhrook, ME Phone	04092	777-8687	Permit Issued:
Past Use:	Proposed Use:	COST OF WORK	Κ:	PERMIT FEE: \$ 75.00	MAR 2 1998
1-tam	Suma	FIRE DEPT. I	Approved Denied	INSPECTION: Use Group: Type:	CITY OF PORTLAND
		Signature:		Signature:	Zoning Approval:
Proposed Project Description: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved Approved with Conditions: Denied					Special Zone or Reviews: Shoreland Wetland Flood Zone Subdivision
Permit Taken By:	Date Applied For:	Signature:		Date:	☐ Site Plan maj ☐minor ☐mm ☐
 This permit application does not preclude th Building permits do not include plumbing, Building permits are void if work is not start tion may invalidate a building permit and s 	septic or electrical work. ed within six (6) months of the date				□ Miscellaneous □ Conditional Use □ Interpretation □ Approved □ Denied Historic Preservation □ Not in District or Landmark □ Does Not Require Review □ Requires Review
					Action:
I hereby certify that I am the owner of record of t authorized by the owner to make this application if a permit for work described in the application areas covered by such permit at any reasonable	as his authorized agent and I agre is issued, I certify that the code offi	osed work is authorized by the e to conform to all applicable icial's authorized representati	laws of thive shall hav	s jurisdiction. In addition,	☐ Approved ☐ Approved with Conditions ☐ Denied Date:
SIGNATURE OF APPLICANT Den Lagur	ADDRESS:	DATE:		PHONE:	
RESPONSIBLE PERSON IN CHARGE OF WO	RK TITI F			PHONE:	OFO DIOTRIOT
	Permit Dock Green-Assessor's				CEO DISTRICT

	SEENERS CONTRACTOR OF STREET	
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11/18/99 (heche	I AC unit.	is installed a	>
	per plan	- OK Denis	
		Inspection Rec	gara kan basa katan ba Katan basa katan basa k

	Inspection Record
	Type Date
Foundation: _	
Framing:	
Plumbing:	
Final:	
Other:	

RESIDENTIAL Central AC & Humidification Ist floor sidewall return Buct Chose to Master & Bebroom AIR HANDLER Hot 1/20 supply t return from existing Bailer -8 refrigerent lines ZONE 2 DAMPER HOT H20 ZONE 1 DAMPER CONDENS-凶