City of Portland, Maine -	<ul> <li>Building or Use 1</li> </ul>	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101	Fax: (207) 874-8	3716	2014-00068		087 HH046001	
Location of Construction:		Owner Address:			Phone:	
95 HERMAN AVE FLAGLER JA		MES A		95 HERMAN AVE PEAKS ISLAND, ME 04108		ND,
Business Name:	Contractor Name	Contractor Name:		actor Address:	Phone	
		Revision Energy LLC Christine@revisionenergy.com		Presumpscot str 1	E (207) 221-6342	
Lessee/Buyer's Name	Phone:	Phone:		t Type:	Zone:	
				AC	IR-2	
Past Use: Proposed Use:			Perm	Permit Fee: Cost of Work:		CEO District:
Single Family Same: Single		Family	INSPI	\$190.00 ECTION:	\$17,0	00.00 3
Proposed Project Description:	120,652 4 1 9 44					
HVAC; installing Fujitsu ASU	-		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				ed w/Conditions Denied		
			Si	gnature:		Date:
Permit Taken By: bjs	Date Applied For: 01/14/2014	Zoning Approva				
This permit application does not preclude the		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
Applicant(s) from meeting applicable State and Federal Rules.				☐ Varianc	e	Not in District or Landman
<ol> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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</li> </ol>		Wetland		Miscell	aneous	Does Not Require Review
		Flood Zone		Condition	onal Use	Requires Review
		Subdivision		Interpre	tation	
	Site Plan		Approv	ed	Approved w/Conditions	
	Maj Minor MM		_ Denied		☐ Denied	
	Date:		Date:		Date:	
I hereby certify that I am the ow I have been authorized by the or jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this appl rmit for work describe	ication as his authord in the application	nat the rized a is issu	proposed work gent and I agree ed, I certify that	e to conform to t the code offici	all applicable laws of this al's authorized representative
			ADDRESS			

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE