City of Portland, N	<b>Aaine - Build</b>	ling or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street,	04101 Tel: (2	07) 874-8703	Fax: (207) 874-8	3716	2014-01929		121 F010001
Location of Construction:		Owner Name:		Owne	wner Address:		Phone:
176 CALEB ST		WAGNER ELIZABETH S			CALEB ST P 02	ME (207) 772-8812	
Business Name:							
Lessee/Buyer's Name		Phone:		Perm	it Type:	Zone:	
				HVAC			R3
Past Use:		Proposed Use:			nit Fee:	Cost of Work:	CEO District:
Single Family Home		Single Family	Home	INCD	\$69.00	\$4,9	943.00 6
				INSPECTION:			
Proposed Project Description							
install a Fujitsu 12RLS (electric) one indoor	e heat pump	PEDESTRIAN ACTIVITIES DISTRIC					
(electric) one muoor				ITIES DISTRICT			
				oved Approv	ved w/Conditions Denied		
				S	ignature:		Date:
Permit Taken By: dmc  Date Applied For: 08/27/2014				Zoning Approval			
This permit application does not preclude to			Special Zone or R	eviews Zoning App		ning Appeal	Historic Preservation
Applicant(s) from Federal Rules.			Shoreland		☐ Variar	nce	Not in District or Landmar
<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		Misce	llaneous	Does Not Require Review
			Flood Zone		Condi	tional Use	Requires Review
			Subdivision		☐ Interp	retation	☐ Approved
			Site Plan		Appro	ved	Approved w/Conditions
			Maj Minor MM		Denied	d	Denied
			Date:		Date:		Date:
			CEDEUC	, ETO	. T		
I haraby cartify that I as	n the owner of	record of the n	CERTIFICA			r is outhorized b	by the example of record and the
							by the owner of record and that all applicable laws of this
jurisdiction. In addition	n, if a permit for	work describe	ed in the application	is issu	ied, I certify the	at the code offic	cial's authorized representative
shall have the authority such permit.	to enter all area	as covered by s	uch permit at any re	easona	ble hour to enfo	orce the provisi	on of the code(s) applicable to
SIGNATURE OF APPLICANT			ADDRESS			DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE						DATE	PHONE