City of Portland, Mai	ine - Buil	lding or Use 1	Permit Applica	tion	Permit No:	Issue Date:		CBL:	
389 Congress Street, 041	Fax: (207) 874-8	8716	2014-00641			122 E009001			
Location of Construction:	Owner Name:	wner Name:		r Address:			Phone:		
85 RACKLEFF ST		JIM & KAREN NADEAU		85 RACKLEFF ST PORTLAND, M 04103			ME		
Business Name:		Contractor Name:			actor Address:	Phone			
		Energy Services energyservicesllc@yahoo.com		38 Herford Avenue South Portland I 04106			i ME	(207) 615-6404	
Lessee/Buyer's Name Past Use:		Phone:		Permit Type: HVAC				Zone: R5	
		Proposed Use:		Permit Fee: Cost of Work:			CEO District:		
Single Family		Same: Single l	Family		\$90.00	\$7,000.00		7	
				INSPECTION:					
Proposed Project Description:	••								
HVAC; install Penzotti Bo	PED		DEDUCATION AND A COMMUNICATION OF A D.						
			PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)						
		Action: Approved Approved w/C				nditions Denied			
Permit Taken By: Date Applied For:						Zoning Approval			
bjs	Zoming Approvai								
bjs 04/04/2014 1. This permit application does not preclude the			Special Zone or Reviews		Zoni	Zoning Appeal		Historic Preservation	
Applicant(s) from me Federal Rules.		Shoreland		☐ Variance	☐ Variance		Not in District or Landman		
2. Building permits do not include plumbing, septic or electrical work.			Wetland		Miscell	llaneous		Does Not Require Review	
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			Flood Zone		Conditi	Conditional Use		Requires Review	
			Subdivision		Interpre	☐ Interpretation		Approved	
			Site Plan		Approv	Approved		Approved w/Conditions	
	Maj Minor MM		Denied	☐ Denied		Denied			
			Date:		Date:		Date:		
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if shall have the authority to exact permit.	the owner to a permit for	o make this appl or work describe	lication as his authord in the application	nat the orized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	all app cial's aut	licable laws of this thorized representative	
SIGNATURE OF APPLICANT			ADD	RESS		DATE		PHONE	