City of Portland, Maine - E	Building or Use	Permit Applicat	tion	Permit No:	Issue Date:	CBL:
389 Congress Street, 04101 Te	el: (207) 874-8703	Fax: (207) 874-8	3716	2013-02536		123 C005001
Location of Construction:	Owner Address:		<del>_</del>	Phone:		
94 GLENWOOD AVE	CLORAN JOI	94 GLENWOOD AVE POR' ME 04103		VE PORTLAN	ND,	
Business Name:	Contractor Name	Contractor Name:		actor Address:	Phone	
		Mainely Plumbing & Heating jim@mainelyplumbing.com		Main Street Go	(207) 854-4969	
Lessee/Buyer's Name	Phone:	Phone:		Type: AC	Zone: R5	
Past Use:	Proposed Use:	Proposed Use:		t Fee:	Cost of Work:	CEO District:
3 Family Dwelling	Same: 3 Famil	Same: 3 Family Dwelling		\$110.00		00.00 7
Proposed Project Description:			INSPE	CTION:		
Install Weil Mclain EG-45 boiler	and water heater (p	lumbing permit				
separate.)	PEDESTRIA		STRIAN ACTIVI	RIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action: Approved Approved Approved Signature:		ved Approv	roved w/Conditions Denied	
					Date:	
Permit Taken By: Date Applied For: 11/13/2013		Zoning Approval				
This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Special Zone or Reviews		Zoni	ng Appeal	Historic Preservation
		Shoreland		☐ Varianc	e	Not in District or Landmar
2. Building permits do not incluse septic or electrical work.	☐ Wetland		Miscell	aneous	Does Not Require Review	
3. Building permits are void if within six (6) months of the o	☐ Flood Zone		Condition	onal Use	Requires Review	
False information may invalid permit and stop all work	Subdivision		Interpre	tation	Approved	
	Site Plan		Approv	ed	Approved w/Conditions	
	Maj Minor MM		Denied		Denied	
	Date:		Date:		Date:	
		CERTIFICA	ATION			
I hereby certify that I am the owner I have been authorized by the own jurisdiction. In addition, if a permishall have the authority to enter all such permit.	ner to make this appl nit for work describe	lication as his authord in the application	rized a	gent and I agreeded, I certify that	e to conform to t the code offic	all applicable laws of this ial's authorized representative
SIGNATURE OF APPLICANT		ADDRESS			DATE	PHONE
RESPONSIBLE PERSON IN CHARGE (	OF WORK, TITLE				DATE	PHONE