Cit	y of Portland, Maine - B	Building or Use	Permit App	plication Pe	ermit No:	Issue Date:		CBL:	
	Congress Street, 04101 Te	el: (207) 874-8703	, Fax: (207)	874-8716	07-0111	01/3	1/2007	131 H02	27001
		Owner Name:	Jame:		Owner Address:			Phone:	
58 BERKELEY ST RUTHE MER				58 BERKELEY ST					
Dead Lessee/Buyer's Name Phone:			Contractor Name:		Contractor Address:			Phone	
			Dead River Company		PO Box 467 Scarborough			2078839515	
		Phone:			Permit Type:			Zone:	
					HVAC				
Single Family Home S		Proposed Use:	Proposed Use: Single Family Home - install a Lennox Furnace replacement		Permit Fee: Cost of Work:			O District:	
					\$60.00 \$3,500.00 FIRE DEPT: Approved INSPE			4	
		Lennox Purnac	le replacemen		DEPT:	Approved	NSPECTION Use Group:	RZ	Type: B
						Denied	• •		
]							Meur	e Jolid	fail
Prop	osed Project Description:								
-	all a Lennox Furnace replacen	2		Signature: S		Signature: Jon 01/31/87			
	·			PEDESTRIAN ACTIVITIES DISTRICT		RICT (P.A.	Γ (P.A.D.)		
			Action: Approved A		ved 🗌 Appro	pproved w/Conditions 🗌 Denied			
				/ total					Benneu
				Signa	ature:		Da	te:	
Permit Taken By: Date Applied For:				Zoning Approval					
	•				Zoning	g Approval			
	•	te Applied For: 1/31/2007							
	This permit application does	1/31/2007 not preclude the	Special Zo	ne or Reviews		g Approval		Historic Pres	ervation
ldo	This permit application does Applicant(s) from meeting ap	1/31/2007 not preclude the	Special Zo			ng Appeal			ervation ct or Landmark
ldo	This permit application does	1/31/2007 not preclude the			Zoni	ng Appeal e		Not in Distric	et or Landmark
ldo	This permit application does Applicant(s) from meeting ap Federal Rules. Building permits do not inclu	not preclude the oplicable State and			Zoni	ng Appeal e			et or Landmark
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CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

Fill IN AND S	Sign with Ink				
Letter States	I FOR PERMIT WER EQUIPMENT				
accordance with the Laws of Maine, the Building Code of th Location / CBL <u>JE BerkeleySt</u> , Portfary Name and address of owner of appliance <u>Merul Rist</u> <u>BerkeleySt</u> , Port Installer's name and address NMA River (CMDA)	Use of Building Residential Date 1/30/07				
Location of appliance: Basement D Floor	Type of Chimney:				
Attic Roof	Masonry Lined Factory built				
Type of Fuel: Gas Gas Jance Name: Lennox Funce Lennox Jance Yes No	 Metal Factory Built U.L. Listing # Direct Vent Type UL# Type of Fuel Tank Oil 				
IF NO Explain:	Size of Tank				
Image: Master Plumber # Image: Master Plumber # Image: Solid Fuel # Image: Solid Fuel # Image: Oil # Image: Oil # Image: Oil # Image: Other Image: Other	Number of Tanks / Distance from Tank to Center of Flame feet. Cost of Work: \$				
<u>Approved</u> Fire: Ele.:	Approved with Conditions See attached letter or requirement				
Bldg.: Inspector's Signature Date Approved					
White - Inspection Yellow - File Pink - Applicant's Gold - Assessor's Copy					