	ne - Building or Use	Permit Applicatio	n <sup>Permi</sup>	t No:	Issue Date:	CBL:
389 Congress Street, 041	-			08-1272		157 D004001
			Owner A	ddress:		Phone:
263 CLIFTON ST	BONNEY WI	BONNEY WESTON WWII VET &		JFTON ST		
Business Name:	Contractor Name	Contractor Name:		or Address:	Phone	
	Jim Godbout I	Jim Godbout Plbg & Htg		anite Street	2072831200	
Lessee/Buyer's Name	Phone:		Permit T HVAC			Zone: R-2
Past Use: Proposed Use:			Permit Fee: Cost of Work: CEO D			CEO District:
Single Family Home Single Family		ard variable speed FIRE DEPT.		\$5,000.00 Approved Use Denied	PECTION: Group: OR Stype: Hi A. H. Czas Ke	
Proposed Project Description:			$+ \mathcal{N}$	/ / [`		Ante cas ke
install an American standa	rd variable speed condensi	ng furnace	<b>.</b>	Signature: Signature:		natu <del>re:</del> Γ (P.A.D.)
Permit Taken By:	Date Applied For:		Action: Signature			I w/Conditions Denied
Idobson 10/08/2008		Zoning Approval				
1. This permit applicatio	n does not preclude the	Special Zone or Revie	ews	Zoning	g Appeal	Historic Preservation
	eting applicable State and	Shoreland	sm	Variance		Not in District or Landmar
2. Building permits do not include plumbing, septic or electrical work.		Wetland Wetland		Miscellan	eous	Does Not Require Review
3. Building permits are void if work is not started within six (6) months of the date of issuance.		[] Flood Zone JA will		Conditional Use		Requires Review
within six (6) months						
	invalidate a building	Subdivision		Interpreta	tion	Approved
within six (6) months False information may permit and stop all wo	invalidate a building	<ul> <li>Subdivision</li> <li>Site Plan</li> </ul>		Approved		<ul> <li>Approved</li> <li>Approved w/Conditions</li> </ul>

## 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 SIGN WITH INK

## APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

To the INSPECTOR OF BUILDINGS, PORTLAND, ME. The undersigned hereby applies for a permit to insta accordance with the Laws of Maine, the Building Code of th Location / CBL <u>263 (1747, St</u> 157D4 Name and address of owner of appliance <u>1645</u> Konney	· · · · · · · ·
Installer's name and address Jivy Godbut Pr/A	
Location of appliance: Basement I Floor Attic I Roof	Type of Chimney:         Image: Masonry Lined Factory built
Type of Fuel:	Metal Factory Built U.L. Listing #
Appliance Name: AMerican Standard Variable U.L. Approved D Yes D No "April Lindinsing fundale	Direct Vent Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? If Yes INO IF <u>NO</u> Explain:	Type of Fuel Tank
The Type of License of Installer:	Size of Tank
Master Plumber #         Solid Fuel #         Oil #         Gas # $f^{N,7}/ii30$ Other	Distance from Tank to Center of Flame feet. Cost of Work: <u>\$</u> Permit Fee: <u>\$</u>
Approved           Fire:	Approved with Conditions See attached letter or requirement
Bldg.:Signature of Installer	Inspector's Signature Date Approved The Applicant's Gold - Assessor's Copy

•	<b>iine - Building or Use Pe</b> 101 Tel: (207) 874-8703, F		Permit No: 08-1272	<b>Date Applied For:</b> 10/08/2008	CBL: 157 D004001	
Location of Construction:	Owner Name:	Owner Name: O		Owner Address:		
263 CLIFTON ST	BONNEY WEST	BONNEY WESTON WWII VET & 2		263 CLIFTON ST		
Business Name: Contractor Name:			Contractor Address:		Phone	
	Jim Godbout Plb	Jim Godbout Plbg & Htg		183 Granite Street Biddeford		
Lessee/Buyer's Name	Phone:	Permit Type: HVAC				
condensing furnace		-			_	
Dept: Zoning Note:	Status: Approved	Revi	ewer: Marge Schmuck	al Approval 1	Date: 10/09/2008 Ok to Issue: ♥	
<b>Dept:</b> Building <b>Note:</b>	<b>Status:</b> Approved with Con comply with the State of Main		ewer: Tammy Munsor	n Approval I	Date: 10/10/2008 Ok to Issue:	