

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 04-1492	Issue Date: 10/05/2004	CBL: 185 G009001
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Location of Construction: 67 Hastings St	Owner Name: Beach Bonnie G	Owner Address: 67 Hastings St	Phone:
Business Name:	Contractor Name: Mainely Plumbing & Heating	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone: R3

Past Use:	Proposed Use: system	Permit Fee:	Cost of Work:	CEO District:
		FIRE DEFT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: HVAC	
		Signature:	Signature: JMB 10/21/04	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: dmartin	Date Applied For: 10/05/2004	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: JMB 10/21/04	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmarl <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied N/A Date: JMB
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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

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Lessee/Buyer's Name	Phone:	Permit Type: HVAC	

Proposed Use: single family Install a Boxi Luna system	Proposed Project Description: Install a Boxi Luna system
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Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 10/21/2004
Note:			Ok to Issue: <input type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 10/21/2004
Note:			Ok to Issue: <input checked="" type="checkbox"/>

