	y of Portland, Mai Congress Street, 041		_			Perm	03-1500	Issue Date	•	274 IO	01001	
Location of Construction: Owner Name:				, 1 4/1.			Address:			Phone:		
23	Godfrey St (73 &75Joss	slyn)	Portland Housing Authority			14 Baxter Blvd						
Busi	ness Name:	Contractor Name	· · · · · · · · · · · · · · · · · · ·			Contractor Address:				Phone		
n/a Bellino, John Lessee/Buyer's Name Phone: n/a n/a						980 Riverside St. Portland				2078782087		
						Permit Type:					Zone:	
						HVAC				KS		
Past Use: Proposed Use:					1	Permit Fee: Cost of Work:						
-			Apartments / Install Gas fuel Heating Sytem			\$102.00 \$8,500.00						
			Tieuming Sylvin				peri:	Approved Denied	Use G	- 1/	Type: Head	
	posed Project Description:				=					1th		
Install Heating System					Ŀ					gnature:		
						PEDESTRIAN ACTIVITIES DISTRICT (P				P.A.D.)		
						Action: Approved Approved w/Conditions Denied					Denied	
						Signature:				Date:		
Permit Taken By: Date Applied For:					Zoning Approval							
gg 12/11/2003			1/2003									
1.	This permit application	preclude the	clude the Special Zon		'S	Zoning Appeal			Historic Preservation			
Applicant(s) from meeting applic Federal Rules.			able State and	☐ Shoreland			☐ Variance			Not in District or Landmark		
2.	Building permits do not include plumbing, septic or electrical work.			☐ Wetland			☐ Miscellaneous		:	Does Not Require Review		
3. Building permits are void if work is within six (6) months of the date of				☐ Flood Zone			Conditional Use			Requires Review		
False information may invalidate a building permit and stop all work				☐ Su	abdivision	☐ Interpretation				☐ Approved		
				☐ Si	te Plan	Approved				Approved w/Conditions		
				Мај [Minor MM	Denied			l	☐ Denied		
					12/18	Date:			L	Date:		
I hav juris shall	reby certify that I am the ve been authorized by the sdiction. In addition, if a I have the authority to en permit.	ne owner to a permit fo	make this appli or work described	med proication a	as his authorized application is iss	e propo agent a ued, I	and I agree certify that	to conform the code of	to all a ficial's	pplicable law: authorized rep	s of this presentative	
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE			

PHONE

DATE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE