City of Portland, Maine -	O			Per	rmit No: 07-1452	Issue Dat	e:	CBL: 371 A0	05001
389 Congress Street, 04101 Tel: (207) 874-8703									
Location of Construction: 1895 WASHINGTON AVE Owner Name: CLARK CHRI		STINE BLANCHARD		Owner Address: 1887 WASHINGTON AVE			Phone:		
Business Name:		Contractor Name:		Contractor Address:				Phone 2076426662	
Lessee/Buyer's Name	Donald Leclair essee/Buver's Name Phone:		1		221 Milt Brown Rd Standish Permit Type:			20704200	Zone:
				HV					
Past Use: Proposed U		: y Home - install a Weil		Permit Fee: Co \$90.00		Cost of Wo	ork: 00.00		
Single Family Home		McLain God Gas Dire		FIRE		Approved		CTION:	
						Denied	Use G		Type
						_			
Proposed Project Description:									
install a Weil McLain God Gas	Direct vent Boiler			Signature:		Signature:			
				PEDE	STRIAN ACTI				
				Actio	on Appro	ved App	proved w	//Condition	Denied
	Signature:				Date:				
Permit Taken By: ldobson	Date Applied For: 11/29/2007		Zoning Approval			1			
This permit application do	es not preclude the	Special Zone or Reviews		ews	Zoning Appeal			Historic Preservation	
Applicant(s) from meeting Federal Rules.	applicable State and	Shoreland		Variance			Not in District or Landm		
2. Building permits do not include plumbing, septic or electrical work.		Wetland		Miscellaneous			☐ Does Not Require Revie		
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			☐ Flood Zon		Conditional Us			Requires Review	
			ubdivision		☐ Interpretatio			Approved	
		☐ Si	te Plan		Approv	ed		Approved w	//Condition
			Maj 🔲 Mino 🔲 MM 🛭		☐ Denied			☐ Denied	
		Date:			Date:		D	ate:	
I hereby certify that I am the ow I have been authorized by the ov jurisdiction. In addition, if a per shall have the authority to enter to such permit.	wner to make this applemit for work described	med proication a	as his authorized application is iss	ne prop l agent sued, I	t and I agree certify that the	to conform t he code offic	to all ap	pplicable laws othorized repre	of this esentative
SIGNATURE OF APPLICAN			ADDRESS	5		DATE	<u> </u>	P	РНО

1895 WASHINGTON AV	E CLARK CHRISTINE B	LANCHARD 1887 WASH	INGTON AVE	
Business Name:	Contractor Name:	Contractor A	ddress:	Phone
	Donald Leclair	221 Milt Bro	own Rd Standish	2076426662
Lessee/Buyer's Name	Phone:	Permit Type: HVAC		Zone:
Dept: Zoning Note:	Status: Approved with Condition	ns Reviewer: Jeanine Bo	Tr	te: 11/29/2007 Ok to Issue: 🔽
	main a single family dwelling. Any c	change of use shall require a s		
Dept: Building	Status: Approved with Condition	ns Reviewer: Jeanine Bo	ourke Approval Date	te: 11/29/2007
Note:				Ok to Issue: 🔽
1) The installation must	comply with the State of Maine Gas	Regulations.		

Owner Address:

Phone:

Owner Name:

Location of Construction:

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 APPLICAN	ADDRESS	DATE	PHO
-			
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT		DATE	PHO