	y of Portland, Maine	O			Per	mit No: 08-0002	Issue Dat	e:	CBL: 386A B0	034001
389 Congress Street, 04101 Tel: (207) 874-8703, Location of Construction: Owner Name:				207) 874-8716	0					
Location of Construction: 38 ARMSTRONG HEIGHTS Owner Nam ARMSTRO						Owner Address: 38 ARMSTRONG HEIGHTS			Phone:	
Bus	iness Name:		Quality Insulation			Contractor Address:			Phone	
		-			65 Downeast Drive Yarmouth				2078467745	
Lessee/Buyer's Name Phone:			Permit Type: HVAC					Zone:		
	t Use:	Proposed Use:	Proposed Use: Single Family Home - install a Lennox Direct Vent heating unit		Permi	nit Fee: Cost of Wor				
Sin	gle Family Home							060.00 5		
		Eciniox Bricet						NSPECTION: Jse Group: Type		
							Denied	Osc Gi	oup.	Турс
Pro	posed Project Description:									
ins	tall a Lennox Direct Vent he	eating unit			Signature:		Signature:			
					PEDESTRIAN ACTIVITIES DISTRI			TRICT (ICT (P.A.D.)	
					Action Approved Approved Approved			oroved w	ed w/Condition Denied	
					Signati	ure:			Date:	
Permit Taken By: Date Applied For: ldobson 12/27/2007				Zoning Approval						
			Special Zone or Reviews		ews	ews Zoning Appeal			Historic Preservation	
1.	This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		c ws	☐ 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.		☐ Flood Zon		Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work			Subdivision			☐ Interpretatio			Approved	
			Site Plan			Approved			☐ Approved w/Condition	
			Maj Mino MM			Denied			☐ Denied	
			Date:			Date:		D	ate:	
I ha juri: shal	reby certify that I am the o we been authorized by the o sdiction. In addition, if a po Il have the authority to ente uch permit.	owner to make this appliermit for work described	med proication a	as his authorized application is iss	ne prope d agent sued, I o	and I agree t certify that th	o conform to ne code office	to all ap cial's au	plicable laws thorized repre	of this sentative
SIC	GNATURE OF APPLICAN			ADDRESS	S		DATE	E	P	НО

Location of Construction: 38 ARMSTRONG HEIGHTS	Owner Name: ARMSTRONG JULIE L	Owner Address: 38 ARMSTRONG HEIGHTS	Phone:	
Business Name:	Contractor Name: Quality Insulation	Contractor Address: 65 Downeast Drive Yarmouth	Phone 2078467745	
Lessee/Buyer's Name	Phone:	Permit Type: HVAC	Zone:	

Dept: Note:	Zoning	Status:	Approved	Reviewer:	Ann Machado	Approval Date: Ok to	01/02/2008 • Issue: 🗹
Dept:	Building	Status:	Approved with Conditions	Reviewer:	Tammy Munson	Approval Date:	01/02/2008
Note: Ok to Issue: ✓							
1) The installation must comply with the State of Maine Gas Regulations.							

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