Cit	y of Portland, Maine - B	Building or Use	Permit Applicat	tion	Permit No:	Issue Date:		CBL:
389	Congress Street, 04101 Te	1: (207) 874-8703	s, Fax: (207) 874-8	716	2014-00498			396 C021001
	ntion of Construction: PINELOCH DR		Owner Name: THIMS JOSEPH T & COURTNEY M BERUBE JTS		Owner Address: 24 PINELOCH DR PORTLAND, ME 04103			Phone:
							ni ni	
Busi	ness Name:		B and B Heating and AC service@bbheating.net		Contractor Address: 6 Little Ossipee Landing Waterboro ME 04061			Phone
Less	ee/Buyer's Name	Phone:	Phone:		Permit Type: HVAC			Zone: R2
Past	Use:	Proposed Use:	Proposed Use:		Permit Fee: Cost of Work:		CEO District:	
Sin	gle Family	Same: Single	Same: Single Family		\$60.00	\$60.00 \$3,200.00		8
_	posed Project Description:	(amaganay)	INSPECTION:					
HV	AC; installing New Yorker Bo	_		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
				Signature:			Date:	
Permit Taken By: Date Applied For: bjs 03/13/2014				Zoning Approval				
This permit application does not preclude			Special Zone or R	eviews Zoning Appeal		ng Appeal	Historic Preservation	
1.	Applicant(s) from meeting applicable Sta Federal Rules.		☐ Shoreland ☐ Wetland		☐ Variano	☐ Variance		Not in District or Landmar
2.	Building permits do not incluseptic or electrical work.	Miscell			Miscellaneous		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		Conditi	Conditional Use		Requires Review
	False information may invalid permit and stop all work	Subdivision		Interpre	Interpretation		Approved	
			Site Plan		Approv	Approved		Approved w/Conditions
		Maj Minor MM		Denied	☐ Denied ☐		Denied	
		Date:		Date:	Date:		Date:	
I ha juris shal	reby certify that I am the owne ve been authorized by the own sdiction. In addition, if a perm I have the authority to enter all n permit.	er to make this appl it for work describe	lication as his authored in the application	at the rized a is issu	proposed work agent and I agree aed, I certify tha	e to conform to t the code offic	all appl ial's autl	icable laws of this horized representative
SIG	NATURE OF APPLICANT	ADDRESS			DATE		PHONE	
RES	SPONSIBLE PERSON IN CHARGE (OF WORK, TITLE				DATE		PHONE