City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716					Р	ermit No: Issue Date: 06-0462		CBL: 438 A01	CBL: 438 A015001	
		Owner Name: WESCOTT & T			Owner Address: 240 HARVARD ST				Phone:	
			Contractor Name: James Jackson		Contractor Address: 30 Bolton Portland			Phone 2078131810		
Lessee/Buyer's Name Ph		Phone:	Phone:			rmit Type: IVAC				Zone:
Past Sing	Use: de Family home		Proposed Use: Single Family Home/ install a weil Mclain direct vent natural gas boiler in basement		Per	mit Fee: \$57.00	Cost of Wo \$3,5	00.00	CEO District: 4	
					Appioved			PECTION: e Group Type		
Proposed Project Description: install a weil Mclain direct vent natural gas boiler in ba				sement Signature: S PEDESTRIAN ACTIVITIES DISTR Action Approved Appro		FRICT (
					Signature:				Date:	
Permit Taken By:Date Applied For:ldobson04/07/2006			Zoning Approval							
1.	1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		_	pecial Zone or Reviews		Zoning Appeal Uariance			Historic Preservation	
2. Building permits do not include plumbing, septic or electrical work.			U Wetland		Miscellaneou			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	
			Subdivision		Interpretati			Approved		
			🗌 Si	te Plan		Approv	ved		Approved w/	Condition
			Ma	Mino M		Denied			Denied	
			Date:			Date:		D	ate:	

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	РНО
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	РНО	

Location of Construction: 114 YALE ST		Owner Name: WESCOTT & PAYSON II		Owner Address: 240 HARVARD ST		Phone:	
Business Name:		Contractor Name: James Jackson		Contractor Address: 30 Bolton Portland		Phone 2078131810	
Lessee/Buyer's Name		Phone:		Permit Type: HVAC			Zone:
Dept: Zoning Status: Note: Image: Control of the second s		Pending Reviewer		:		Approval Date: Ok to Issue:	
Dept: Building Note:	Status:	Pending	Reviewer	:	Approval Dat	te: Ok to Issue	e: 🗆

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SIGNATURE OF APPLICAN	ADDRESS	DATE	РНО
			DUO