City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716 Location of Construction: Phone: ****22 Codman Street 04103 Gregory DeWitt& Barbara DeWitt 879-1066 Owner Address: Lessee/Buyer's Name: Phone: BusinessName: 22 Codman St. Permit Issued: Contractor Name: Address: Phone: 72 Main St. Westbrook, ME 854-0219 Joseph Gallant 13144 COST OF WORK: **PERMIT FEE:** Past Use: Proposed Use: \$ 3,000 \$ 42.00 **FIRE DEPT.** □ Approved INSPECTION: 1-Family Same ☐ Denied Use Group: 73 Type: 5-13 Zone: CBL: BOCA961 129-H-005 Signature: Proposed Project Description: Zoning Approval: PEDESTRIAN ACTIVITIES DISTRICT (Action: Approved Rebuilding of front porch to existing foundation. Special Zone or Rev Approved with Conditions: ☐ Shoreland Denied □ Wetland ☐ Flood Zone Signature: Date: □ Subdivision ☐ Site Plan maj ☐minor ☐mm ☐ Date Applied For: Permit Taken By: 8-31-99 UB **Zoning Appeal** □ Variance This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules. ☐ Miscellaneous Building permits do not include plumbing, septic or electrical work. ☐ Conditional Use Building permits are void if work is not started within six (6) months of the date of issuance. False informa-☐ Interpretation ☐ Approved tion may invalidate a building permit and stop all work... □ Denied Send to: Gregory & Barbara DeWitt 22 Codman Street Historic Preservation Portland, ME 04103 **B**-Not in District or Landmark □ Does Not Require Review ☐ Requires Review Action: **PERMIT ISSUED** WITH REQUIREMENTS CERTIFICATION □ Appoved 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 ☐ Approved with Conditions 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, □ Denied 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 Date: areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit 8-31-99 SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT

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