

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: * 117 Wolcott Street		Owner: Rufus H. Webb Jr. & Gertrude B. Webb		Phone: 774-4817		Permit No:	
Owner Address: SAA		Lessee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Mike Weitetti		Address: Saco, ME		Phone:		Permit Issued: <i>Never Issued</i>	
Past Use: 1-Family		Proposed Use: Same		COST OF WORK: \$ 1,175		PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature:		Signature:	
Proposed Project Description: Construct wheelchair ramp.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>			
Permit Taken By: sp				Date Applied For: 1/4/99			
				Signature: _____ Date: _____			

1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
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..

1/11/99 - Contractor informed me that the husband Does Not want A ramp on the front of the house - Thus to drop the permit

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: 1/4/99 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

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

Zone: <i>R-3</i>	GBL: 192-K-038
Zoning Approval:	
Special Zone or Reviews:	
<input type="checkbox"/> Shoreland	
<input type="checkbox"/> Wetland	
<input type="checkbox"/> Flood Zone	
<input type="checkbox"/> Subdivision	
<input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
9,7889	
Zoning Appeal	
<input type="checkbox"/> Variance	
<input type="checkbox"/> Miscellaneous	
<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Interpretation	
<input type="checkbox"/> Approved	
<input type="checkbox"/> Denied	
Historic Preservation	
<input checked="" type="checkbox"/> Not in District or Landmark	
<input type="checkbox"/> Does Not Require Review	
<input type="checkbox"/> Requires Review	
Action:	
<input type="checkbox"/> Approved	
<input type="checkbox"/> Approved with Conditions	
<input type="checkbox"/> Denied	
Date: <i>9</i>	

TR/MW
CEO DISTRICT 3