

Location of Construction: 152 Tucker Avenue		Owner: Design Dwellings Inc.		Phone: 839-2631		Permit No: <b>990323</b>	
Owner Address: 65 Main St. Gorham, ME 04038		Lessee/Buyer's Name: Robert Jitcomb		Phone:		BusinessName:	
Contractor Name: Design Dwellings, Inc.		Address: 65 Main St. Gorham, ME 04038		Phone: 839-2631		Permit Issued: <b>AUG 5 1999</b>	
Past Use:  Vacant		Proposed Use:  Single Family Dwelling		COST OF WORK: \$ 75,000.00		PERMIT FEE: \$ 474.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: <i>93</i> Type: <i>EB</i>	
				Signature:		Signature: <i>Hoffman</i>	
Proposed Project Description:  Build 28x40 Split Foyer				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		Zone: <i>P-2</i> CBL: 330-B-015	
				Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		Zoning Approval: <i>ok with conditions</i> <b>Special Zone or Reviews:</b>	
				Signature:		<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"/>	
Permit Taken By:  Kathy		Date Applied For:  JULY 22, 1999					

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..

**PERMIT ISSUED  
WITH REQUIREMENTS**

**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

July 22, 1999

SIGNATURE OF APPLICANT ADDRESS: DATE: 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

**Zoning Appeal**

Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**

Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**

Approved  
 Approved with Conditions  
 Denied

Date: *[Signature]*

CEO DISTRICT 1