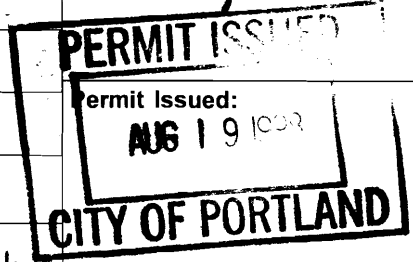


980928

Location of Construction: 23 Newton St		Owner: Gulick, Dave		Phone:		Permit No: 980928	
Owner Address:		<del>XXXX</del> Buyer's Name: Tim Higgins		Phone:		Business Name:	
Contractor Name: Timothy A. Higgins		Address: 106 Caron St Ptld, ME 04103		Phone: 776-2268		Permit Issued: AUG 19 1998	
Past Use: <del>XXXX</del> Vacant Land		Proposed Use: 1-fam w/garage		COST OF WORK: \$ 95,000.00		PERMIT FEE: \$ 495.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type: <i>OK with conditions</i> Signature: <i>8/18/98</i>	
Proposed Project Description:  Construct Single Family Dwelling w/Garage				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zone: <i>R-3</i> CBL: <i>H</i> 338-H-015 Zoning Approval: <i>OK with conditions 8/18/98</i> <b>Special Zone or Reviews.</b> <input type="checkbox"/> Shoreland <i>N/A</i> <input type="checkbox"/> Wetland <i>N/A</i> <input type="checkbox"/> Flood Zone <i>N/A Zone C</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: MG		Date Applied For: 06 August 1998		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..



**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

07 August 1998

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

**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  
*ARDC*