



Permitting and Inspections Department
Michael A. Russell, MS, Director

General Building Permit Application

Project Address: 360 Spring Street (associated site work submitted with 061 F00 1001 -7001, 17 Fletcher Street)

Tax Assessor's CBL: 061 F00 8001 **Cost of Work:** \$ 0
Chart # Block # Lot #

Proposed use (e.g., single-family, retail, restaurant, etc.): Partial temporary classroom use

Current use: EDUCATIONAL, ASSEMBLY **Past use, if currently vacant:** N/A

Commercial **Multi-Family Residential** **One/Two Family Residential**

Type of work (check all that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> New Structure | <input type="checkbox"/> Foundation Only | <input type="checkbox"/> Change of Ownership - Condo Conversion |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Fence | <input checked="" type="checkbox"/> Change of Use |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Pool - Above Ground | <input type="checkbox"/> Change of Use - Home Occupation |
| <input type="checkbox"/> Amendment | <input type="checkbox"/> Pool - In Ground | <input type="checkbox"/> Radio/Telecommunications Equipment |
| <input type="checkbox"/> Shed | <input type="checkbox"/> Retaining Wall | <input type="checkbox"/> Radio/Telecommunications Tower |
| <input type="checkbox"/> Demolition - Structure | <input type="checkbox"/> Replacement Windows | <input type="checkbox"/> Tent/Stage |
| <input type="checkbox"/> Demolition - Interior | <input type="checkbox"/> Commercial Hood System | <input type="checkbox"/> Wind Tower |
| <input type="checkbox"/> Garage - Attached | <input type="checkbox"/> Tank Installation/Replacement | <input type="checkbox"/> Solar Energy Installation |
| <input type="checkbox"/> Garage - Detached | <input type="checkbox"/> Tank Removal | <input type="checkbox"/> Site Alteration |

Project description/scope of work (attach additional pages if needed):

Work includes the temporary change of use from Assembly Use (Gymnasium and Art Gallery) to Educational (classroom) spaces for select areas within the existing building. No construction is required.

Applicant Name: Scott Simons Architects **Phone:** (207) 772 - 4656

Address: 75 York Street, Portland ME 04101 **Email:** julia@simonsarchitects.com

Lessee/Owner Name (if different): Waynflete School **Phone:** (207) 774 - 5721

Address: 360 Spring Street, Portland ME 04102 **Email:** ahagstrom@waynflete.org

Contractor Name (if different): n/a **Phone:** (_____) _____ - _____

Address: _____ **Email:** _____

I hereby certify that I am the owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: Date: 24 April 2017

Review of this application will not begin until the permit payment is received. This is not a permit. Work may not commence until the permit is issued.