

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

Location of Construction: 389 Congress St - Portland ME 04101		Owner: 7. [unclear]		Phone:		Permit No: 960688			
Owner Address: 389 Congress St - Portland ME 04101		Leasee/Buyer's Name:		Phone:		Business Name:			
Contractor Name: * [unclear] Construction Inc		Address: 389 Congress St - Portland ME 04101		Phone: 773-1679		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: JUL 17 1996 CITY OF PORTLAND </div>			
Past Use: school interior renovations		Proposed Use:		COST OF WORK: \$ 50,000 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: E Type: 3B Signature: [unclear]				PERMIT FEE: \$ 300 Signature: [unclear]	
Proposed Project Description: school interior renovations				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/> Signature: _____ Date: _____				Zoning Approval: Zone: CBL: 61-F-003 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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: L Chase		Date Applied For: 7/12/96							

1. This permit application doesn't 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..

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: _____

Inspector #1's 33-3000
 33-3007
 33-3000
 33-3000

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 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: _____ PHONE: _____

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

CEO DISTRICT

COMMENTS

7/25/90 Inspection yields ~~_____~~ plumbing has been installed and flush ~~_____~~ reported without calling for inspection. Job supt. (Aaron) from Wright/Ryan informed that I require inspection prior to patching. Also, installing interior steel studs for wall framing.

7/30/90 Electricians on site. Interior framing w/ informed Aaron that sprinkler heads will need to be relocated to accommodate the sheetrock and proper coverage of spray area. Shall take a closer look. Some masonry on side, repointing lintels, etc.

8/7/90 Haven't relocated sprinkler heads yet, nor have they changed the hangers on the 4" pre. Interior walls sheetrocked and taped. 8/29/90 OK to occupy. 165° heads: ~~8~~ new 2 ea Bath; 2 ea Clost. Fire's sealed @ furnace room.

Inspection Record		Date
Type		
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

BUILDING PERMIT REPORT

DATE: 16 July 196 ADDRESS: 360 Spring ST.
 REASON FOR PERMIT: To make interior renovation (only)
 BUILDING OWNER: Wayn Flete School
 CONTRACTOR: Wright-Ryan APPROVED: 6, 8, 11, 12, 13,
 PERMIT APPLICANT: _____ DENIED: 14, 15, 16 and 18

63-F-002-3

CONDITION OF APPROVAL OR DENIAL

1. Before concrete for foundation is placed, approvals from the Development Review Coordinator and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection)
2. Precaution must be taken to protect concrete from freezing.
3. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
4. All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with selfclosers.
5. Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- * 6. The boiler shall be protected by enclosing with one(1) hour fire-rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 sq. feet per sprinkler.
7. Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside without the use of special knowledge or separate tools. Where windows are provided as means of egress or rescue, they shall have a sill height not more than 44 inches (1118mm) above the floor. All egress or rescue windows from sleeping rooms shall have a minimum net clear opening height dimension of 24 inches (610mm). The minimum net clear opening width dimension shall be 20 inches (508 mm), and a minimum net clear opening of 5.7 sq. feet.
- * 8. A portable fire extinguisher shall be located as per NFPA #10. They shall bear the label of an approved agency and be of an approved type.
9. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the City's building code Chapter 9, section 19, 919.3.2(BOCA National Building Code/1993), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):

1. In the immediate vicinity of bedrooms
2. In all bedrooms
3. In each story within a dwelling unit, including basements

In addition to the required AC primary power source, required smoke detectors in occupancies in Use Groups R-2, R-3 and I-1 shall receive power from a battery when the AC primary power source is interrupted.

10. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1993)

X11. Guardrail & Handrails-A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Groups 42", except Use Group R which is 36". In occupancies in Use Group A, B, E-4, I-1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

X12. All exit signs, lights, and means of egress lighting shall be done in accordance with Chapter 10, section & subsections 1023. & 1024. of the City's building code. (The BOCA National Building Code/1993)

X13. Stair construction in Use Group R-3 & R-4 is a minimum of 9" tread and 8-1/4" maximum rise. ~~All other Use Group minimum 11" tread, 7" maximum rise.~~

X14. Headroom in habitable space is a minimum of 7'6".

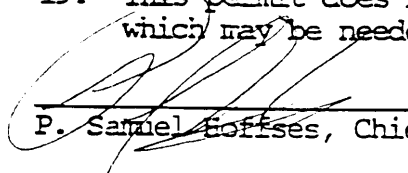
X15. The minimum headroom in all parts of a stairway shall not be less than 80 inches.

X16. All construction and demolition debris must be disposed at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final Certificate of Occupancy is issued or demolition permit is granted.

17. Section 25-135 of the Municipal Code for the City of Portland states, "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

X18. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

19. This permit does not excuse the applicant from obtaining any license which may be needed from the City Clerk's Office.


P. Samuel Foffes, Chief of Inspection Services

/el 3/16/95

Inspection Services
P. Samuel Hoffses
Chief



Planning and Urban Development
Joseph E. Gray Jr.
Director

CITY OF PORTLAND

16 July 1996

Wright- Ryan Construction
10 Danforth St.
Portland, Me. 04101

RE: 360 Spring St.

Dear Sir:

Your application to make interior renovations has been reviewed and a permit is herewith issued subject to the following requirements: This permit does not excuse the applicant from meeting applicable State and Federal laws.

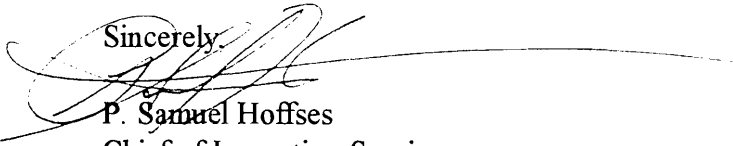
No Certificate of Occupancy will be issued until all requirements of this letter are met.

Building and Fire Code Requirements

1. The fire alarm system shall be maintained to NFPA # 72 standards.
2. The sprinkler system shall be maintained to NFPA #13 Standards.
3. Please read and implement items 6,8,11,12,13,14, 15, 16, & 18 of the attached building permit report.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

cc Lt. McDougall PFD



**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM**

I. D. Number _____

Address: _____

Applicant _____

Application Date _____

Applicant's Mailing Address _____

Project Name/Description _____

Consultant/Agent _____

Address of Proposed Site _____

Applicant or Agent Daytime Telephone, Fax _____

Assessor's Reference: Chart-Block-Lot _____

Proposed Development (check all that apply): New Building Building Addition Change of Use Residential
 Office Retail Manufacturing Warehouse/Distribution Other (specify) _____

Proposed Building Square Feet or # of Units _____ Acreage of Site _____ Zoning _____

Check Review Required:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Site Plan (major/minor) | <input type="checkbox"/> Subdivision # of lots _____ | <input type="checkbox"/> PAD Review | <input type="checkbox"/> 14-403 Streets Review |
| <input type="checkbox"/> Flood Hazard | <input type="checkbox"/> Shoreland | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> DEP Local Certification |
| <input type="checkbox"/> Zoning Conditional Use (ZBA/PB) | <input type="checkbox"/> Zoning Variance | <input type="checkbox"/> Single-Family Minor | <input type="checkbox"/> Other _____ |

Fees paid: site plan _____ subdivision _____

Approval Status:

Reviewer D. Andrews

- Approved **Approved w/Conditions** listed below Denied
- see attached form from Jim Seymour for conditions
 - _____
 - _____
 - _____

Approval Date 7/15/96 Approval Expiration _____ date Extension to _____ date Additional Sheets Attached

Condition Compliance _____ signature _____ date _____

Performance Guarantee Required* Not Required submitted 7/15/96

* No building permit may be issued until a performance guarantee has been submitted as indicated below

<input type="checkbox"/> Performance Guarantee Accepted	_____ date _____	<u>\$ 9,700</u> amount	_____ expiration date
<input checked="" type="checkbox"/> Inspection Fee Paid	<u>7/15/96</u> date	<u>\$ 79.90</u> amount	_____ expiration date
Performance Guarantee Reduced	_____ date _____	_____ remaining balance	_____ signature
Performance Guarantee Released	_____ date _____	_____ signature	_____
Defect Guarantee Submitted	_____ submitted date _____	_____ amount	_____ expiration date
Defect Guarantee Released	_____ date _____	_____ signature	_____



**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM**

I. D. Number _____

Playground School
Applicant

12 June 1996
Application Date

Applicant's Mailing Address
3001 1st Ave And

Project Name/Description
300 Spring St ADA 17 Playground St

Consultant/Agent
Scott Smith - 773-4030

Address of Proposed Site
001-1-004

Applicant or Agent Daytime Telephone, Fax

Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply):
 New Building Building Addition Change of Use Residential
 Office Retail Manufacturing Warehouse/Distribution Other (specify) School

Proposed Building Square Feet or # of Units 2000 sq ft Acreage of Site 27,005 sq ft Zoning _____

Check Review Required:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Site Plan (major/minor) | <input type="checkbox"/> Subdivision # of lots _____ | <input type="checkbox"/> PAD Review | <input type="checkbox"/> 14-403 Streets Review |
| <input type="checkbox"/> Flood Hazard | <input type="checkbox"/> Shoreland | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> DEP Local Certification |
| <input type="checkbox"/> Zoning Conditional Use (ZBA/PB) | <input type="checkbox"/> Zoning Variance | <input type="checkbox"/> Single-Family Minor | <input type="checkbox"/> Other _____ |

Fees paid: site plan 300.00 subdivision _____

Approval Status: Reviewer JAMES SEYMOUR

- Approved Approved w/Conditions listed below Denied

- PLEASE SEE ATTACHED CONDITIONS AS NOTED IN MEMO TO DEB ANDREWS DATED 7/12/96
- PRIOR TO OCCUPANCY CERTIFICATES BEING RELEASED THE ENTRANCE/EXIT LOOP
- SHALL BE REVIEWED AND REPAIRED AS DETERMINED BY THE DIV. REV. COORD.
- FOLLOWING CONSTRUCTION THE CATCH BASIN IN THE SOUTH CORNER OF THE PLAYGROUND AREA

Approval Date 7/15/96 Approval Expiration 7/15/97 Extension to _____ date
 Additional Sheets Attached shall be cleaned of sediment and debris.

Condition Compliance _____ signature _____ date _____

Performance Guarantee Required* Not Required

* No building permit may be issued until a performance guarantee has been submitted as indicated below

<input checked="" type="checkbox"/> Performance Guarantee Accepted	<u>7/15/96</u> date	<u>4,700.00</u> amount	<u>July 15, 1998</u> expiration date
<input checked="" type="checkbox"/> Inspection Fee Paid	<u>7/15/96</u> date	<u>79.90</u> amount	
Performance Guarantee Reduced	_____ date _____	_____ remaining balance _____	
Performance Guarantee Released	_____ date _____	_____ signature _____	

Address:



**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM**

I. D. Number _____

Waynefleet School
Applicant _____

12 June 1996
Application Date #96108 Lkr Rm Add

Applicant's Mailing Address
Scott Simons Architects

Project Name/Description
360 Spring St AKA 17 Fletcher St

Consultant/Agent Scott Simons - 772-4656

Address of Proposed Site 061-F-004

Applicant or Agent Daytime Telephone, Fax _____

Assessor's Reference: Chart-Block-Lot _____

Proposed Development (check all that apply):
 ___ New Building Building Addition ___ Change of Use ___ Residential
 ___ Office ___ Retail ___ Manufacturing ___ Warehouse/Distribution ___ Other (specify) School
 2200 Sq Ft 27,605 Sq Ft R-4
 Proposed Building Square Feet or # of Units Acreage of Site Zoning

Check Review Required:

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> Site Plan (major/minor) | <input type="checkbox"/> Subdivision # of lots _____ | <input type="checkbox"/> PAD Review | <input type="checkbox"/> 14-403 Streets Review |
| <input type="checkbox"/> Flood Hazard | <input type="checkbox"/> Shoreland | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> DEP Local Certification |
| <input type="checkbox"/> Zoning Conditional Use (ZBA/PB) | <input type="checkbox"/> Zoning Variance | <input type="checkbox"/> Single-Family Minor | <input type="checkbox"/> Other _____ |

Fees paid: site plan 300.00 subdivision _____

Approval Status: Reviewer Marge Schmuckert

- Approved Approved w/Conditions listed below Denied
1. _____
 2. _____
 3. _____
 4. _____

Approval Date 7/16/96 Approval Expiration _____ date Extension to _____ date Additional Sheets Attached

Condition Compliance _____ signature _____ date _____

Performance Guarantee Required* Not Required

* No building permit may be issued until a performance guarantee has been submitted as indicated below

- | | | | |
|---|----------------------|-------------------------|-----------------------|
| <input type="checkbox"/> Performance Guarantee Accepted | _____ date | _____ amount | _____ expiration date |
| <input type="checkbox"/> Inspection Fee Paid | _____ date | _____ amount | |
| Performance Guarantee Reduced | _____ date | _____ remaining balance | _____ signature |
| Performance Guarantee Released | _____ date | _____ signature | |
| Defect Guarantee Submitted | _____ submitted date | _____ amount | _____ expiration date |
| Defect Guarantee Released | _____ date | _____ signature | |

Address: 360 Spring St Waynefleet School AKA 17 Fletcher St



CITY OF PORTLAND
Planning and Urban Development Department

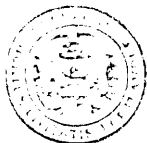
MEMORANDUM

TO: DEB ANDREWS
FROM: JIM SEYMOUR, ACTING DEVELOPMENT REVIEW COORDINATOR
DATE: 7/12/96
RE: WAYNEFLETE ADDITION

I HAVE REVIEWED THE SKETCH PLAN AND VISITED THE PROPOSED SITE LOCATED ON SPRING STREET AND SHALL PROVIDE YOU WITH MY CONCERNS AND COMMENTS:

1. THE APPLICANT SHALL CLEARLY INDICATE THE ELEVATIONS DISCHARGE LOCATIONS, AND PIPE TYPE OF THE PROPOSED PERIMETER DRAIN.
2. THE APPLICANT SHALL PROVIDE DETAILS OF PAVEMENT, CURBING, AND CLEARLY INDICATE THE DIRECTION, AND GRADES PROPOSED TO DIRECT SURFACE RUNOFF AWAY FROM THE PROPOSED FOUNDATION AND WITHIN THE WALKWAY (COURT) AREA.
3. BASED ON MY OBSERVATIONS OF SEVERAL TREES BUFFERING THE ABUTTING PROPERTY THE APPLICANT SHOULD CONSIDER LANDSCAPING AROUND THE NORTH END OF THE ADDITION.

THESE DETAILS ARE NOT DIFFICULT TO ADDRESS AND I WOULD SUGGEST THAT THESE MAY BE ADDRESSED AS A CONDITIONAL APPROVAL OR AS A CONDITION THAT SHALL BE APPROVED PRIOR TO CONSTRUCTION AND ISSUANCE OF A CERTIFICATE OF OCCUPANCY.



CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM

I. D. Number

Waynfleet School

12 June 1996

Applicant

Application Date
#96108 Lkr Rm Add

Applicant's Mailing Address

Scott Simons Architects

Project Name/Description

360 Spring St AKA 17 Fletcher St

Consultant/Agent

Scott Simons - 772-4656

Address of Proposed Site

061-F-004

Applicant or Agent Daytime Telephone, Fax

Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply): New Building Building Addition Change of Use Residential
 Office Retail Manufacturing Warehouse/Distribution Other (specify) School

2200 Sq Ft

27,605 Sq Ft

Proposed Building Square Feet or # of Units

Acreage of Site

Zoning

Check Review Required:

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> Site Plan (major/minor) | <input type="checkbox"/> Subdivision # of lots _____ | <input type="checkbox"/> PAD Review | <input type="checkbox"/> 14-03 Streets Review |
| <input type="checkbox"/> Flood Hazard | <input type="checkbox"/> Shoreland | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> DEP Local Certification |
| <input type="checkbox"/> Zoning Conditional (ZBA/PB) | <input type="checkbox"/> Zoning Variance | <input type="checkbox"/> Single-Family Minor | <input type="checkbox"/> Other _____ |

Fees paid: site plan 300.00 subdivision _____

Approval Status:

Reviewer [Signature]

- Approved Approved w/Conditions listed below Denied

Approval Date 7/16/96 Approval Expiration _____ date Extension to _____ date

Additional Sheets Attached

Condition Compliance _____ signature _____ date

Performance Guarantee Required* Not Required

* No building permit may be issued until a performance guarantee has been submitted as indicated below

Performance Guarantee Accepted _____ date _____ amount _____ expiration date

Inspection Fee Paid _____ date _____ amount _____

Performance Guarantee Reduced _____ date _____ remaining balance _____ signature _____

Performance Guarantee Released _____ date _____ signature _____

Defect Guarantee Submitted _____ submitted date _____ amount _____ expiration date

Defect Guarantee Released _____ date _____ signature _____

Address: 360 Spring St Waynfleet School AKA 17 Fletcher St

8/30/96

300 Spring St. Waynflete
Basement Renovation - #960088

Pls ck:

Bsmt. & 1st fl bath - water temp.s

Bsmt. - small leak @ right side
Bathroom sink drain

Bsmt. - Exit sign - bulb burnt out

Bsmt. - a missing junction box
covers near furnace

Founders Hall; small - Relocate junction box from
~~Bsmt~~ Bath added under stairs ?? Mike C?

Aaron > Wright-Ryan, Inc.
is running Founders Hall Job

Kevin-Wright Ryan or Joe
is running the Gymnasium Addition
Job

Permit # 960689

8/1/96 Need to provide additional hangers - not sufficient.

Department of Human Services
Division of Health Engineering
(207) 289-3826

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation: PORTLAND, ME.
Street Subdivision Lot #: 360 SPRING ST. LOWER SCHOOL

PROPERTY OWNERS NAME

Last: WAYNFLETS First: SCHOOL

Applicant Name: ADRIAN

Mailing Address of Owner/Applicant (If Different): 11 WALLACE AVE. ST. PORTLAND, ME. 04106

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is a violation of the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 8/1/96

PERMIT # 5825 STATE COPY
Date Permit issued: 8/1/96 \$ 12 FEE Double Fee Charged
L.P.I. # 0124
Local Plumbing Inspector Signature: _____

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: _____

Date Approved: _____

PERMIT INFORMATION

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type Of Structure To Be Served:

- 1. SINGLE FAMILY DWELLING
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER - SPECIFY SCHOOL

Plumbing To Be Installed By:

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D. HOUSING DEALER / MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # 05685

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
HOOK-UP: to an existing subsurface wastewater disposal system.		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
Number of Hook-Ups & Relocations		Bidet		Laundry Tub
		Other: _____		Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	3	Fixtures (Subtotal) Column 1
			0	Fixtures (Subtotal) Column 2
\$			3	Total Fixtures
			\$ 12	Fixture Fee
OR			\$ -	Transfer Fee
			\$ -	Hook-Up & Relocation Fee
TRANSFER FEE (\$6.00)			\$ -	Permit Fee (Total)
			\$ 12	

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

Ck Water Temp

PROPERTY ADDRESS

Town Or
Plantation

PORTLAND, ME

Street
Subdivision Lot #

360 SPRING ST. *FOUNDERS HALL*

PROPERTY OWNERS NAME

Last: *WAYNFLETE SCHOOL*
First:

Applicant
Name:

AIRTEMP 7A2300

Mailing Address of
Owner/Applicant
(if Different)

11 WALLACE AVE.
S. PORTLAND, ME. 04106

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

[Signature]
Signature of Owner/Applicant

8/28/96
Date

PORTLAND

PERMIT # 5854

STATE COPY

Date
Permit
Issued:

8/28/96

\$

12.5

Double Fee
Charged
FEE

334
Local Plumbing Inspector Signature

L.P.I. # *01624*

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

[Signature]
Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

- NEW PLUMBING
- RELOCATED PLUMBING

Type Of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER — SPECIFY *SCHOOL*

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER / MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # *05685*

Founder's Hall

Hook-Up & Piping Relocation Maximum of 1 Hook-Up		Column 2		Column 1	
		Number	Type of Fixture	Number	Type of Fixture
<p>HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.</p> <p>OR</p> <p>HOOK-UP: to an existing subsurface wastewater disposal system.</p>	<p>PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p>		Hosebibb / Sillcock		Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
			Drinking Fountain	1	Wash Basin
			Indirect Waste	1	Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.		Clothes Washer
			Grease / Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
			Bidet		Laundry Tub
			Other: _____		Water Heater
			Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 1
				0	Fixtures (Subtotal) Column 2
				2	Total Fixtures
				\$ 12.5	Fixture Fee
				\$	Transfer Fee
				\$	Hook-Up & Relocation Fee
				\$ 12.5	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE