

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

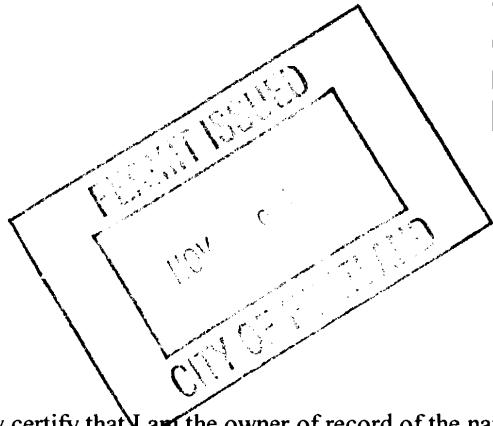
Permit No: 07-1360	Issue Date: 11/06/07	CBL: 014 C011001
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Location of Construction: 39 LAFAYETTE ST	Owner Name: BROOKMAN GARY M	Owner Address: 61 ISLAND AVE	Phone: 766-2661
Business Name:	Contractor Name: Christopher Gormley Inc.	Contractor Address: 77 Webster Road Freeport	Phone: 2078467979
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Building	Zone: R-6

Past Use: Single family home	Proposed Use: Single Family home - remove existing house and remove 15 * 10 shed. Build new home separate permit application (07-1361)	Permit Fee: \$60.00	Cost of Work: \$4,000.00	CEO District: 1
Proposed Project Description: Remove existing house and remove 15 * 10 shed. Build new home - separate permit application		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R-3 Type: SB IRC-2003 Demo-only Signature: 11/4/07 CL	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: lmd	Date Applied For: 10/30/2007	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. 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.. 	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"/> Date: 11/1/07 <i>AGM</i>	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 Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>KBM</i> Date: _____
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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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT _____ ADDRESS _____ DATE _____ PHONE _____

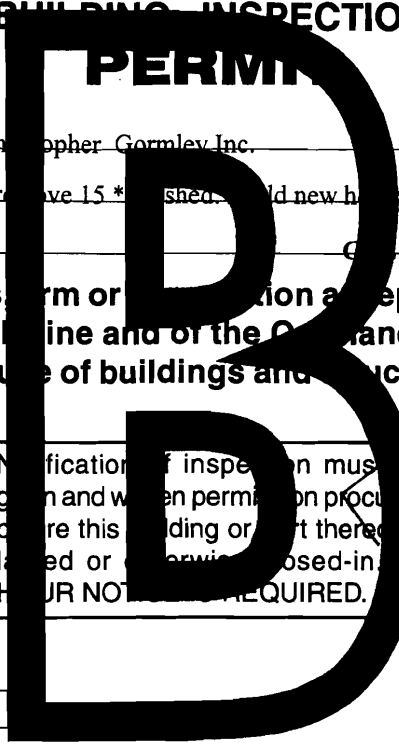
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ DATE _____ PHONE _____

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

Please Read Application And Notes, If Any, Attached

Permit Number: 071360



This is to certify that BROOKMAN GARY M / Christopher Gormley Inc.

has permission to Remove existing house and re-build 15 * shed - old new house - separte permit application

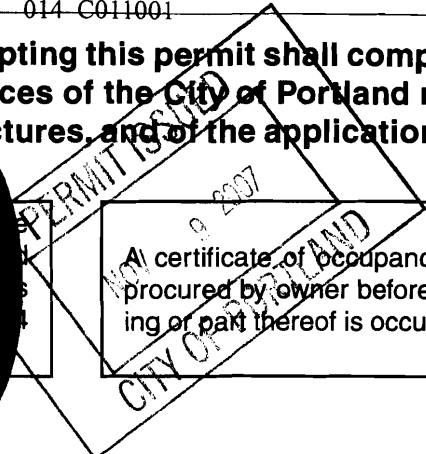
AT 39 LAFAYETTE ST 014 C011001

provided that the person or persons firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and when permission is procured before this building or part thereof is leased or otherwise closed-in. 24 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.



OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

DEMO ONLY *CH*

11/10/07 *Chater* *AK*

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 07-1360	Date Applied For: 10/30/2007	CBL: 014 C011001
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Location of Construction: 39 LAFAYETTE ST	Owner Name: BROOKMAN GARY M	Owner Address: 61 ISLAND AVE	Phone: () 766-2661
Business Name:	Contractor Name: Christopher Gormley Inc.	Contractor Address: 77 Webster Road Freeport	Phone: (207) 846-7979
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Building	

Proposed Use: Single Family home - remove existing house and remove 15 * 10 shed. Build new home seperate permit application	Proposed Project Description: Remove existing house and remove 15 * 10 shed. Build new home - seperate permit application
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Dept: Zoning	Status: Approved with Conditions	Reviewer: Ann Machado	Approval Date: 11/01/2007
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Your present structure is legally nonconforming as to setbacks. If you are to demolish this structure on your own volition, you will only have one (1) year to replace it in the same footprint (no expansions), with the same height, and same use. Any changes to any of the above shall require that this structure meet the current zoning standards. The one (1) year starts at the time of removal. It shall be the owner's responsibility to contact the Code Enforcement Officer and notify them of that specific date.			
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 11/05/2007
Note: Please measure			Ok to Issue: <input checked="" type="checkbox"/>
1) Demolition permit only. No other construction activities allowed.			

Comments: 11/1/2007-amachado: Gave permit to Lannie to schedule predemolition inspection.



Demolition of a Structure Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>39 Lafayette Street</u>		
Total Square Footage of Proposed Structure <u>1350 sqft</u>	Square Footage of Lot <u>4500 sqft</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>14</u> Block# <u>C</u> Lot# <u>11</u>	Owner: <u>Gary Brookman</u>	Telephone: <u>766-2661</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Christopher Gosmiley Inc.</u> <u>77 Webster Rd</u> <u>Freeport Me 04032</u> <u>865-6463 846-7979</u>	Cost Of Work: \$ <u>4000 -</u> Fee: \$ _____
Current legal use: (i.e. garage, warehouse) <u>Vacant - single family home</u> If vacant, what was the previous use? <u>Residence</u> How long has it been vacant?: <u>More than 1 year ±</u>		
Project description: <u>Remove existing house and build new one</u> <u>Remove existing 15'x10± Shed</u>		
Contractor's name, address & telephone: <u>Christopher Gosmiley Inc. 77 Webster Rd. Freeport Me 04032</u> <u>846-7979</u>		
Who should we contact when the permit is ready: <u>Chas Gosmiley</u> Mailing address: <u>77 Webster Rd</u> <u>Freeport Me 04032</u> Phone: <u>846-7979</u>		

007 30 2007

Please submit all of the information outlined in the Demolition call list. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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 of applicant: <u>Christopher Gosmiley</u>	Date: <u>10-30-07</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



Demolition Call List & Requirements

Site Address: 39 Lafayette St.

Owner: Gary Brookeman

Structure Type: Residence

Contractor: Chris Gormley

Utility Approvals	Number	Contact Name/Date
Central Maine Power	1-800-750-4000	<u>April Cooper</u> 10.18.07
Northern Utilities	797-8002 ext 6241	<u>Mark Allen</u> 10.18.07
Portland Water District	761-8310	<u>Donna Burns</u> 10.18.07
Dig Safe	1-888-344-7233	<u># 2007-440-36-75</u> 10.30.07

After calling Dig Safe, you must wait 72 business hours before digging can begin.

- DPW/ Traffic Division (L. Cote) <004 874-8891 GARY DOBSON 10.18.07
 - DPW/ Sealed Drain Permit (C. Merritt) 874-8822 CLIFF FARRIS 10.18.07
 - Historic Preservation 874-8726 Deb. Andrews 9.25.07 - 10.5
 - Fire Dispatcher 874-8576 Jim Richards 10.18.07
- CAN PRIOR

Additional Requirements

- ✓ 1) Written Notice to Adjoining Owners
- ✓ 2) A Photo of the Structure(s) to be demolished
- ✓ 3) Certification from an asbestos abatement company

- DEP – Environmental (Augusta) 287-2651 Sandy Moody 10.30.07

U.S. EPA Region 1 – No Phone call required. Just mail copy of State notification to:

Demo / Reno Clerk
US EPA Region I (SEA)
JFK Federal Building
Boston, MA 02203

I have contacted all of the necessary companies/departments as indicated above and attached all required documentation.

Signed: Chris Gormley

Date: 10.30.07

For more information or to download this form and other permit applications visit the Inspections Division on our website at www.portlandmaine.gov

Hello neighbors,

My name is Gary Brookman and I purchased 39 Lafayette Street a little over a year ago. I am looking forward to making it my long term home and to that end I need to remove the existing structure.

I have lived on Peaks Island for the last 22 years but for the last few years I've wanted to move to Munjoy Hill. My ideal house is small, low maintenance and energy efficient but it was rare to see any single family house come up for sale on the hill let alone one that fit my criteria. So my intent is to remove the current building, which as you know is in rather rough shape, and build a small contemporary home. As part of the permit to remove the existing building I am required to contact you. I am just in the permitting phase now but if all goes well I hope construction can start this fall.

I have met some of you already and look forward to meeting the rest of my new neighbors. I'm excited to be joining you soon on the hill. If you have any questions please feel free to contact me.

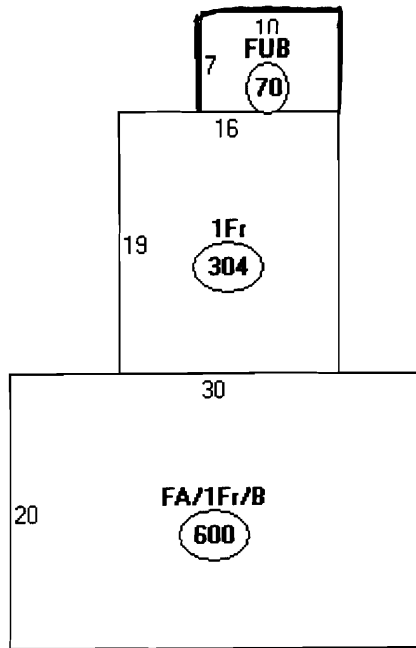
Gary Brookman
61 Island Avenue
Peaks Island ME 04108

766-2661

Sent Oct 17

To Eugene McKeever 43 Lafayette
Robert Witham 45 Lafayette
International Christian Fellowship 35 Lafayette
Gene Stone 34 Merrill
James Dibisce / P Francesca 14 Birchwood So. Portland





Descriptor/Area

A: FA/1Fr/B
600 sqft

B: 1Fr
304 sqft

C: FUB
70 sqft

**ASBESTOS DEMOLITION
IMPACT SURVEY**

at

**Vacant Residential Building
39 Lafayette Street
Portland, Maine**



Prepared for:

**Chris Gormley
77 Webster Street
Freeport, Maine 04032**

By:

**MORRISSEY ENVIRONMENTAL
Lewiston, Maine 04241-1568**

October 15, 2007

Asbestos Project Notification 2004 Revision	State of Maine Department of Environmental Protection Lead & Asbestos Hazard Prevention Program 17 State House Station, Augusta, ME 04333 TEL (207) 287-2651 FAX (207) 287-7826	FORM N Page 1 of 3
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Important Notice: The notification submitter must send a complete notification including any applicable fee which is postmarked at least 10 calendar days or received by the Department at least 5 working days prior to the start of an asbestos abatement project. This notification must be typewritten or easily legible. An incomplete notification is not acceptable & therefore not of record.

1. Project Code BIO- 07-336	2. Type of Notification <input checked="" type="checkbox"/> Standard (O) <input type="checkbox"/> Facility O&M (Annual) <input type="checkbox"/> Emergency (E) <input type="checkbox"/> Courtesy (Not Regulated)	3. Type of Activity <input checked="" type="checkbox"/> Demolition (D) <input type="checkbox"/> Renovation (R) <input type="checkbox"/> Repair	4. Variances (Check all that apply) <input type="checkbox"/> Non-Standard (NS) <input checked="" type="checkbox"/> Standard (S) <input type="checkbox"/> Notification Waiver (10 day)
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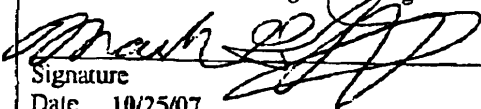
5. Asbestos Contractor Name BIOSAFE Environmental Services, Inc. Address 5 Delta Drive City Westbrook State Maine Zip 04092 Contact Mark P. Coleman TEL 207-854-5262 FAX 207-854-2609	6. Facility Owner Name Gary Brookman Mailing Address 39 Lafayette Street City Portland State Maine Zip 04101 Contact Christopher Gromley TEL 846-7979 FAX
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7. Facility Location (Where removal is to take place) BLDG Name Single Family Floor and/or Rm.# Basement, 1st & 2nd floor Physical Address 39 Lafayette Street City Portland State Maine Zip 04101	8. Facility Description Present Use Single Family Prior Use Single Family BLDG Size 700 sq/ft +/- No. Floors 2 BLDG Age 1940's
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9. Notification Fees (Required fees must accompany notification) <input type="checkbox"/> \$100.00 = ACM amounts 100 SqFt/100 LnFt to 1000 SqFt/5000 LnFt. <input type="checkbox"/> \$200.00 = ACM amounts greater than 1000 SqFt/5000 LnFt. <input checked="" type="checkbox"/> Not Required or Not Included (Complete Block #9A)	9A. Notification Fee Not Included <input checked="" type="checkbox"/> Single family home exemption <input type="checkbox"/> ACM amount less than 100 SqFt/100 LnFt <input type="checkbox"/> Fees paid quarterly (Non-Scheduled O&M only) <input type="checkbox"/> BGS exemption	10. Project Work Hours AM to PM (Show actual hours) Weekdays (Check all that apply) <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> T <input checked="" type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F Weekend (Check all that apply) <input type="checkbox"/> Sat <input type="checkbox"/> Sun
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11. Scheduled Dates for Asbestos Project
 Project Start Date **11/5/07** Project Completion Date **11/8/07**
 ACM Removal Dates (from) **11/5/07** (to) **11/8/07**

12. Asbestos (ACM) Removal			ME DEP USE ONLY
ACM Type	Amount	Measurement	Postmark/ FAX/ hand delivered
Kitchen and Hall Floor tiles	285	SqFt XXX LnFt	_____
Bathroom Linoleum	60	SqFt XXX LnFt	Date Received _____
Paper on duct seams	90	SqFt LnFt XXX	Check # _____
Window Glazing	4 Sashes	SqFt _____ LnFt _____	NESHAP _____
		SqFt _____ LnFt _____	State _____
		SqFt _____ LnFt _____	Variance _____

Asbestos Project Notification 2004 Revision	State of Maine Department of Environmental Protection Lead & Asbestos Hazard Prevention Program 17 State House Station, Augusta, ME 04333 TEL (207) 287-2651 FAX (207) 287-7826	FORM N Page 2 of 3
Project Code BIO-07-336 (As listed on page 1)	13. Demolition (complete as applicable) <input type="checkbox"/> Ordered demolition (structurally unsound) by State or local government (attach copy of order and name of professional engineer who determined building structurally unsound) <input checked="" type="checkbox"/> All other demolitions Demolition Dates: <u>TBA November</u> to _____	
14. Procedure Used to Detect Presence of Asbestos Testing <input type="checkbox"/> Assumed Positive <input checked="" type="checkbox"/> Tested Positive Method <input checked="" type="checkbox"/> PLM <input type="checkbox"/> TEM Sampled By <u>Morrissey</u> (Print Name) Company <u>Morrissey</u>	15. Project Clearance Visual evaluation by: (Air Monitor (if known) and Company) Environmental Management Air Clearance by: (Air Monitor (if known) and Company) Environmental Management	
Note: Whenever building materials are assumed to contain asbestos, signed bulk sampling disclosure forms must be at the asbestos abatement project site and available for review by the Department.		
16. Asbestos Abatement Methods (check all that apply & submit variance request (Form V) if required) <input type="checkbox"/> Regulated area with containment consisting of 2-layers 4 mil poly on walls & ceiling & 2 layers 6 mil poly on floors <input type="checkbox"/> Regulated area with containment consisting of 1-layer 6 mil poly on walls & ceiling & 2 layers 6 mil poly on floors <input checked="" type="checkbox"/> Regulated area with Exclusion zone <input type="checkbox"/> Multiple non-contiguous glovebags (variance required) <input type="checkbox"/> Contiguous glovebags less than 30 Ln/ft (variance required) <input checked="" type="checkbox"/> Wrap & cut- TSI in good condition (no containment)(variance required) <input type="checkbox"/> Wrap & cut- TSI not in good condition (containment required) <input type="checkbox"/> Flooring by mechanical equipment/ice scrapers/pry bars <input type="checkbox"/> Intact flooring demo by heavy equipment <input type="checkbox"/> Adhesive by grinding or bead blasting <input type="checkbox"/> Enclosure <input type="checkbox"/> Encapsulation <input type="checkbox"/> Roofing removal by mechanical saws/cutters <input type="checkbox"/> Other (specify)		
17. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter) Name <u>Service Transport Group, Inc.</u> Address <u>58 Pyles Lane</u> City <u>New Castle</u> State <u>DE</u> Zip <u>19720</u> Contact <u>Thomas Gaudet</u> TEL <u>302-778-5930</u> FAX <u>302-778-0446</u>	18. Disposal Site Name <u>A & L Salvage</u> Address <u>11225 State Route 45</u> City <u>Lisbon</u> State <u>Ohio</u> Zip <u>44432</u> TEL <u>330-424-3739</u> FAX <u>330-424-5318</u>	
19. Certification (Notification Submitted by) I certify that to the best of my knowledge, the information contained in this notification is true and accurate, and that the asbestos abatement contractor will be/has been contracted to implement work practices as required by Maine DEP Chapter 425, the Asbestos Management Regulations. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;">  Signature Date <u>10/25/07</u> </div> <div style="width: 45%; text-align: center;"> <u>Mark Griffith</u> Print Name </div> </div> Mailing Address <u>5 Delta Drive</u> City <u>Westbrook</u> State <u>Maine</u> Zip <u>04092</u> TEL <u>207-854-5262</u> FAX <u>207-854-2609</u>		

Asbestos Project Variance Request BIO- 07-336 Project Code	State of Maine Department of Environmental Protection Lead & Asbestos Hazard Prevention Program 17 State House Station, Augusta, ME 04333 TEL (207) 287-2651 FAX (207) 287-7826	FORM V Page 1 of 2 2004 Revision #1
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Standard Variance(s) Requested by Maine Certified Asbestos Design Consultant

Check all that apply. Written Department approval is not required prior to implementation. Standard variances submitted during or before the project due to unforeseeable conditions shall not be implemented until 5 days after the variance is received by the Department unless otherwise approved by the Department.

1. Wetting ACM (during removal phase only) is not required when:

- Temperature inside regulated area below 32°F & heating not feasible nor practical
- Electrical conditions exist that would create shock/electrocution hazard
- Operational high-pressure steam lines are being abated/repaired

2. Exhausting to Ambient Air is not feasible when:

- Distance too great Health & Safety concerns (limited egress)

3. Aggressive Air Clearances in dirt crawl spaces only are not required when:

- Dirty or dusty conditions exist not related to asbestos activities exist inside or outside the regulated area and will likely result in count overloads (Static Air Samples are required)

4. Containment and air clearances not necessary when:

- Enclosure activities do not impact ACM
- Removal of TSI components that utilize "wrap & cut" methods, provided that an Asbestos Inspector has determined the components to be in good condition & not likely to release fibers during removal, & has recorded this determination in the project design. By signing below, the Design Consultant attests that an Inspector has determined the TSI is in good condition.
- Removal or repair of ACM using multiple non-contiguous glovebags that are no larger than 60 inches by 60 inches
- Removal or repair, using contiguous glovebags, that involve a total of no more than 30 1/ft of ACM on a single pipeline, or any amount of ACM that can be removed within 10 glovebags for pipelines running parallel to each other

5. Remote decontamination unit is needed:

Explain: **Demo Building**

6. Smaller than standard decontamination unit needed in residential structure:

A variance to the requirements for minimum decontamination unit size is allowed in residential structures where construction of a decontamination unit meeting minimum size requirements is not possible due to room size and configuration, HVAC system component locations, or restriction of safe egress for residents.

Note: A detailed floor plan showing the work area, decontamination unit n and room dimensions must be submitted with the requested variance.

Design Consultant Sign-off for Standard Variance(s)

Signature



Mark P. Coleman
Print Name

Date 10/25/07

Company **BIOSAFE Environmental Services, Inc.**

ME Certification Number **DC-0069**

Address **5 Delta Drive**

Certification Expiration Date **02/28/2008**

City **Westbrook** State **Maine** Zip **04092**

TEL **207-854-5262** FAX **207-854-2609**

Asbestos 2004 Notification Form V.1.0

SAMPLING & TESTING CONDUCTED BY
MORRISSEY ENVIRONMENTAL

**TABLE #1 - ASBESTOS CONTAINING BUILDING MATERIALS SUMMARY
39 LAFAYETTE STREET, PORTLAND, MAINE**

<u>Building Location</u>	<u>Building Material</u>	<u>% & Type Asbestos</u>
Kitchen	Floor Tile Under Linoleum	10% Chrysotile
First Floor Hall by Stairs	Floor Tile	10% Chrysotile
Bathroom	Floor Linoleum	10% Chrysotile
Second Floor	Window Caulking	3% Chrysotile
Basement	Heat Duct Joint Tape	60% Chrysotile



MORRISSEY ENVIRONMENTAL

Serving New England Since 1985

PROPOSAL

P.O. Box 1568, Lewiston, Maine 04241-1568
Tel: 207-783-4260 Fax: 207-786-5575

Date: 10-0-07

Submitted to: Chris Gormley
77 Webster Road
Freeport, ME 04032

Tel.: 207-846-7979
Cell: 207-650-6462

Project: Asbestos Demolition Impact Survey
Location: 39 Lafayette Street, Portland, Maine

C.C.:

We hereby submit specifications and estimates for supplying labor, material and equipment required to perform an asbestos demolition impact survey at 39 Lafayette Street, Portland, Maine.

Work performed to include the following:

1. Sampling and analysis of suspect asbestos containing building materials (ACBM) in support of demolition and disposal activities.
2. Quantification and abatement cost estimates for identified ACBM.
3. Asbestos Demolition Impact Report.

Cost for the project will be as follows:

\$1,000.00

Sampling \$2500
Lab Analysis - 750.00

Total \$1,000.00

All work shall be performed in accordance with applicable ME DEP, EPA and OSHA regulations.

Charles W. Leavitt,
President

Acceptance*

for sampling only

Signature

10/4/07
Date

* Proposal subject to revocation if not accepted within 30 days.
White - Customer Copy Yellow - Acceptance Copy

Terms Net (10) Days
Pink - File Copy