

Portland, Maine



Yes. Life's good here.

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

Demolition of a Structure Submission Checklist

A permit is required for the demolition of any structure. Permit for interior demolition should be combined with the permit for proposed interior construction (see Submission Requirements for One- and Two-Family Additions and Alterations or Commercial Interior Alterations, as appropriate).

All applications for demolition of a structure shall include the following:

- Demolition of a Structure Submission Checklist** (this form)
- General Building Permit Application**
- Completion of the Demolition Call List** (see attached)
- Copies of written notices to property owners of all abutting lots** (see Tax Assessor's office for name and address of owner of record)
- A photo of the structure to be demolished**
- A plot plan or site plan of the property showing the shape and dimension of the lot, footprint of all existing structures and structure(s) to be demolished including distance from property lines and the location and dimension of all parking areas and driveways**
- Certification from an asbestos abatement company, if required** (See attached information regarding asbestos demolition.)

Work may not commence until the permit is issued.



General Building 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.

Address/Location of Construction: 25 Monument Street		
Total Square Footage of Proposed Structure:		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Applicant Name: Craig Cooper Address 150 Ocean House Road City, State & Zip Cape Elizabeth ME 04107	Telephone: cell 831-3004 Email: c.rainbow@maine.vr.com
Lessee/Owner Name: Jeffrey Kane, Mgr (if different than applicant) Monument Partners LLC Address: 380 6th St, South City, State & Zip: Naples, FL 34102 Telephone E-mail:	Contractor Name: Rainbow Construction, Inc, Craig Cooper (if different from Applicant) Address: P.O. Box 894 City, State & Zip: Portland, ME 04104 Telephone 207-799-3051 E-mail: c.rainbow@maine.vr.com	Cost of Work: \$ _____ C of O Fee: \$ _____ Historic Rev: \$ _____ Total Fees: \$ _____
Current Use (i.e. single family) _____		
If vacant, what was the previous use? 3 FAMILY		
Proposed Specific use: _____		
Is property part of a subdivision? If yes, please Name _____		
Project description: _____		
Who should we contact when the permit is ready:		
Address: _____		
City, State & Zip: _____		
E-mail Address: _____		
Telephone: _____		

Please submit all of the information outlined on the applicable checklist. Failure to do so causes an automatic permit denial.

In order to be sure the City fully understands the full scope of the project, the 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 Department of Permitting and Inspections on-line at www.portlandmaine.gov, or stop by the 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:  **Date:** 5/10/17

This is not a permit; you may not commence ANY work until the permit is issued.



Permitting and Inspections Department
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Demolition Call List & Requirements

Site Address: 25 Monument Street Owner: Monument Partners, LLC

Structure Type: Wood Building Contractor: Rainbow Construction, Inc.

Utility Approvals	Phone #	Contact Name	Date
Central Maine Power	1-800-750-4000 #4	<u>Erin</u>	<u>5/8/17</u>
Unitil	866-933-3821	<u>Mark Allen</u>	<u>4/13/17</u>
Portland Water District	761-8310	<u>Donna Barnes</u>	<u>4/13/17</u>
Dig Safe	1-888-344-7233	<u>Debbie</u> <small>confirmation# 20171511934</small>	<u>4/13/17</u>

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

DEP – Environmental (Augusta) ⁷⁶⁸⁸ ~~287-2651~~ Sandy Moody 4/13/17

City of Portland:

DPW - Traffic Division	874-8891	<u>Jeremiah Bartlett</u>	<u>4/13/17</u>
DPW - Sealed Drain Permit	874-8822	<u>Carol Merritt</u>	<u>4/13/17</u>
Historic Preservation	874-8726	<u>Deb Andrews</u>	<u>5/8/17</u>

U.S. EPA Region 1 – No Phone call required. Just mail copy of State Asbestos Building Demolition Notification to:

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

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

Signed:  Date: 5/10/17

This is a legal document and your electronic signature is considered a legal signature per Maine state law.

For more information or to download this form and other permit applications visit the Permitting and Inspections Department on our website at www.portlandmaine.gov/1728/Permitting-Inspections.

Send Result Report



MFP

TASKalfa 3050ci

Firmware Version 2LC_2F00.009.201 2015.11.05

03/02/2017 10:02
[2LC_1000.010.001] [2K9_1100.002.001] [2LC_7000.009.012]

Job No.: 049553

Total Time: 0°02'31"

Page: 005

Complete

Document: doc04955320170302095949

Asbestos Project Notification	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) 287-6220	FORM N Page 1 of 5 Revised 2011
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Important Notice: The notification submitter must send a complete notification including all applicable fees, 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. See definition of project at Asbestos Management Regulations, 06-096 CMR 425(1)(DDDD)(last amended April 3, 2011). The notification submitter is responsible for ensuring that the complete notification including any applicable fee is received by the Department.

1. Project Code APC Project # 16-347 (Assigned by notification submitter)	2. Original Notification <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Facility O&M (Approved Annual) <input type="checkbox"/> Courtesy (Not Subject to the Rule)	3. Type of Activity <input checked="" type="checkbox"/> Demolition <input type="checkbox"/> Renovation	4. Waiver <input type="checkbox"/> Non Standard Work Practices <input type="checkbox"/> Emergency <input type="checkbox"/> Notification Timeframe Waiver <input type="checkbox"/> Approved Annual Non Standard
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5. Facility Owner Name Jeffrey D. and Judith A. Kane Address 380 6th Street South City Naples State FL Zip 34102 Contact Jeffery Kane	6. Asbestos Contractor Name Abatement Professionals Corp Address 590 County Rd Suite #2 City Westbrook State ME Zip 04092 Contact Robert Rickett Jr.
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No.	Date and Time	Destination	Times	Type	Result	Resolution/ECH
001	03/02/17 10:00	Maine DEP	0°02'31"	FAX	OK	200x100 Normal/On

Asbestos Project Notification

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) 287-6220

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5. Facility Owner Name Jeffrey D. and Judith A. Kane Address 380 6th Street South City Naples State FL Zip 34102 Contact Jeffery Kane TEL 207-210-1246 FAX	6. Asbestos Contractor Name Abatement Professionals Corp Address 590 County Rd Suite #2 City Westbrook State ME Zip 04092 Contact Robert Rickett Jr. TEL 207-773-1276 FAX 207-772-1203
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7. Facility Location (Where removal is to take place) BLDG Name None Floor and/or Rm.# Basement and exterior Physical Address City State Zip	8. Facility Description Present Use Prior Use BLDG Size No. Floors BLDG Age
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9. Asbestos (ACM) Removal

ACM Type	Amount	Measurement	Project Totals
Pipe or Pipe Covering	275	Linear Feet	Total Square Feet = <u>3644</u> Total Linear Feet = <u>275</u> Total Project = <u>3919</u>
Boiler Covering		Square Feet	
Mudded Fittings		Linear Feet	
Duct Covering		Square Feet	
Gasket Material		Square Feet	
Floor Tile		Square Feet	
Linoleum	144	Square Feet	
Mastic		Square Feet	
Ceiling Tiles		Square Feet	
Spray-on		Square Feet	
Siding	3500	Square Feet	
Transite Paneling		Square Feet	Note: Visual evaluations and air clearances for asbestos abatement projects involving more than 100 square/linear feet, or any combination thereof of must be performed by an independent Asbestos Consultant unless otherwise specified in Asbestos Management Regulations, 06-096 CMR 425) (effective April 3, 2011).
Roofing/Flashing		Square Feet	
Glues		Square Feet	
Plaster		Square Feet	
Floor Tile by heat		Square Feet	

Asbestos Project Notification

APC Project # 16-347
Project Code

State of Maine
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17 State House Station, Augusta, ME 04333
TEL (207) 287-2651 FAX (207) 287-6220

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10. Notification Fees (Required fees must accompany notification)

- \$100.00 = ACM amounts 100 Sq Ft or 100 Ln Ft or any combination but less than 500 Sq Ft or 2500 Ln Ft.
- \$150.00 = ACM amounts more than 500 Sq Ft or 2500 Ln Ft but less than 1000 Sq Ft or 5000 Ln Ft.
- \$300.00 = ACM amounts more than 1000 Sq Ft or 5000 Ln Ft or any combination

11. Notification Fee Not Included

- Single family home exemption
- ACM amount less than 100 Sq Ft or 100 Ln Ft or any combination
- Fees paid quarterly (Non-Scheduled O&M only)
- BGS exemption
- Fee to follow within 3 days (Emergency/Notification Waiver only)

12. Demolition (complete as applicable)

- Ordered demolition (structurally unsound) by State or local government
- All other demolitions

Demolition Dates:

Start

End

Note on Required Notification Fees

If there are not sufficient funds to cover the check or credit card transaction an insufficient funds fee will be assessed by the Department in accordance with State of Maine laws and policies. Until that insufficiency is resolved (by money order or bank check), the Department will not accept any additional checks or credit card transactions from the party including additional checks for other project notifications.

13. Scheduled Dates for Asbestos Project

Project Start Date 04/17/17
Project Completion Date 04/21/17
ACM Removal Dates (from) 04/17/17
ACM Removal Dates (to) 04/21/17

14. Project Work Hours

7 AM to 330 PM (Show actual hours)
Weekdays (Check all that apply)
 M T W T F
Weekend (Check all that apply)
 Sat Sun

15. Procedure Used to Detect Presence of Asbestos

Testing Assumed Positive Tested Positive
Method PLM TEM
Sampled By RWRJR
(Print Name)
Company APC

16. Project Clearance

Visual evaluation by: (Air Monitor (if known) and Company)
TBD
Air Clearance by: (Air Monitor (if known) and Company)
TBD

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.

17. Asbestos Abatement Design Consultant of Record

Name Robert Rickett Me Certification Number DC- 0027
Company Abatement Professionals Corp DC Certification Expiration Date 11/2017

Asbestos Project Notification

APC Project #16-347
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) 287-6220

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18. Asbestos Abatement Methods and Alternative Work Practices (check all that apply)

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| <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"/> Wetting ACM during removal not required |
| <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 type="checkbox"/> Exhausting to Ambient Air not feasible |
| <input checked="" type="checkbox"/> Regulated area with Exclusion zone | <input type="checkbox"/> Aggressive Air Clearance not required |
| <input type="checkbox"/> Glovebags (unlimited non-contiguous, contiguous limited to 30 in ft) | <input type="checkbox"/> Visual Clearance only |
| <input type="checkbox"/> Adhesive by grinding or bead blasting | <input checked="" type="checkbox"/> Remote Decontamination Unit |
| <input type="checkbox"/> Wrap & cut- TSI in good condition (no containment) | <input checked="" type="checkbox"/> Smaller than standard Decontamination Unit |
| <input type="checkbox"/> Intact flooring demo by heavy equipment | <input type="checkbox"/> Shutting down NAM at night |
| <input type="checkbox"/> Roofing removal by mechanical saws/cutters | <input type="checkbox"/> Encapsulation |
| <input type="checkbox"/> Flooring by mechanical equipment/ice scrapers/pry bars | |
| <input type="checkbox"/> Enclosure | |

Note on AHERA School Projects

The Federal Asbestos – Containing Materials in Schools regulation (40 CFR Part 763) commonly referred to as "AHERA" contains specific requirements for asbestos abatement activities that may not be waived by the Department. Among these are air clearance and sample analysis protocols.

19. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter)

Name Waste Management
Address Forest Ave
City Portland State Maine Zip 04103
Contact Brian Gordon
TEL FAX

20. Disposal Site

Name Norridgewock
Address 357 Mercer Rd
City Norridgewock State ME Zip
Contact Bryan Gordon
TEL 1-800-244-8290 FAX

21. 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 06-096 CMR 425 effective April 3, 2011.

Signature 

Robert Rickett Jr.
Print Name

Date 3/2/17

Mailing Address 590 County Rd

City Westbrook State ME Zip 04092

TEL 207-773-1276 FAX 207-772-1203

Remember

Submit completed pages 1 thru 3 of Form N for each original notification.

Submit pages 4 or 5 only as needed.

ME DEP USE ONLY

Postmark/ FAX/ hand-delivered _____

Date Received _____ Check # _____

NESHAP _____ State _____

Waiver _____

**Asbestos Building
Demolition
Notification**

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) 287-6220

**FORM
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*DEP Code
APC PROJECT 16-347* Notice

Prior to demolition, building owners must determine if there is any asbestos-containing material(s) (ACM) in the building. An "asbestos inspection" by a MDEP-licensed Asbestos Consultant is required for all buildings regardless of construction date, except single-family homes and residential buildings with 2-4 units built after 1980. In lieu of an asbestos inspection, pre-1981 residential buildings with 2-4 units can be surveyed to identify possible ACM by someone knowledgeable about ACM, such as a code enforcement officer or building inspector.

If your project involves the demolition of a single family residence or a residential building with less than 5 units, please answer the following questions to determine whether you need to have your inspection performed by a MDEP-licensed Asbestos Consultant:

Does this demolition/renovation project involve more than ONE residential building at the same site with the same owner? Yes No

Is this building currently being used, or has it **EVER** been used, as a commercial, government, daycare, office, church, charitable or other non-profit place of business? Yes No

Is this building to be demolished as part of a highway or road-widening project? Yes No

Is this building part of a building cooperative, apartment or condo building? Yes No

Is this building used for military housing? Yes No

Have other residences or non-residential buildings at this site been scheduled to be demolished now, or in the future, as part of a larger project? Yes No

Is more than ONE building to be lifted from its foundation and relocated? Yes No

Will this building be intentionally burned for the purpose of demolition or fire department training? Yes No

If you answer "no" to all the questions above, your building can be inspected by a knowledgeable non-licensed person as applicable.

Any "yes" answers to the above questions requires an inspection by a MDEP-licensed Asbestos Consultant.

Important Notice

Before you can demolish any building, including single-family residences, all asbestos materials must be removed from the building. The removal of those materials must be done by a MDEP-licensed Asbestos Abatement Contractor, except single-family homeowners may remove some asbestos under certain circumstances (Contact MDEP for more information).

With the exception of a single family home, building owners are required to submit the Asbestos Building Demolition Notification to the MDEP at least five (5) working days prior to the demolition **EVEN IF NO ASBESTOS** is present.

Asbestos Building Demolition Notification	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) 287-6220	FORM D Page 2 of 2 2011
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Inspection/Survey Results:

Were asbestos-containing building materials identified or presumed positive? Yes No

If Yes, is the removal of ACM subject to MDEP asbestos regulations? Yes No

If No, explain WHY NOT: _____


property address: <u>25 Mounment St</u> <u>Portland, Maine 04101</u>	building description: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> pre-1981 residential with 2-4 units <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> post-1980 residential with 2-4 units <input checked="" type="checkbox"/> other:
asbestos survey/inspection performed by: (name & address) <u>Abatement Professionals Corp</u> <u>590 County Road, Westbrook, Maine 04092</u> telephone: <u>773-1276</u>	asbestos abatement contractor <u>Abatement Professionals Corp</u> <u>590 County Road, Westbrook, Maine 04092</u> telephone: <u>773-1276</u>
property owner: (name & address) <u>Jeffrey D. and Judith A. Kane</u> <u>380 6th Street South, Naples Florida 34102</u> telephone: <u>207-210-1245</u>	demolition contractor: (name & address) <u>TBD</u> telephone: _____
demolition start date: <u>TBD after Abatement is completed</u>	demolition end date: _____

Whenever more than 3 square feet or 3 linear feet of ACM is identified, the ACM must be abated in accordance with the Maine Asbestos Management Regulations by a DEP-licensed Asbestos Abatement Contractor. This includes materials presumed to be ACM. Check www.maine.gov/dep/rwm/asbestos/index.htm for a listing of asbestos contractors.

Prior to issuing a local demolition permit, the MDEP requests that municipalities have applicants for municipal demolition permits complete this form and fax it to the MDEP at 207-287-6220. Municipalities should not issue local demolition permits if the required asbestos inspection or survey has not been performed and identified ACM removed.

This demolition notification does not take the place of the Asbestos Project Notification if applicable

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT

<u>Robert W Rickett Jr</u> Print Name: Owner/Agent	Agent Title	 Signature
<u>207-773-1276</u> Telephone #	<u>207-772-1203</u> FAX #	<u>3/02/2017</u> Date



Department of Permitting and Inspections

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding that this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the selections below.

1. Once the complete application package has been received by us, and entered into the system
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment

call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone

hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall

deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland
Department of Permitting and Inspections
389 Congress Street, Room 315
Portland, Maine 04101**

By signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. ***No work shall be started until I have received my permit.***

Applicant Signature: _____

Date: 5/10/17

I have provided digital copies and sent them on: _____

Date: 5/10/17

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.