

931097

032-K-012

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 10.00 Zone _____ Map # _____ Lot# 3

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Pinard, Muray Phone # _____

Address: _____

LOCATION OF CONSTRUCTION 1 Monument SquareContractor: Portland Pump Co. Sub.: _____Address: P.O. Box 1180 Scarborough 04074 Phone # 883-4317Est. Construction Cost: _____ Proposed Use: Office w/o tankPast Use: office

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion Remove 1 underground tank

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other: _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only

Date Nov 17, 1993 Subdivision: _____
 Inside Fire Limits _____ Name NOV 23 1993
 Bldg Code _____ Lot _____
 Time Limit _____ Ownership: _____ Public _____ Private _____
 Estimated Cost _____

Zoning:

Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) WDA 11-18-93

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

HISTORIC PRESERVATION~~Not in District nor Landmark~~~~Does not require review.~~~~Requires Review.~~

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Mary WilsonSignature of Applicant _____ Date Nov 17, 1993Signature of CEO Jeff Wilson Date _____

Inspection Dates _____

**PERMIT ISSUED
WITH REQUIREMENTS****PERMIT ISSUED
WITH REQUIREMENTS**

White-Tax Assessor

Yellow-GPCOG

White Tag -CEO

© Copyright GPCOG 1988

BUILDING PERMIT REPORT

DATE: 11/22/93

ADDRESS: 1 Monument Sq

REASON FOR PERMIT: "Underground Tank Removal Installation"

BUILDING OWNER: Murray Finner

CONTRACTOR: Portland Pump Co

PERMIT APPLICATION: Teff Wilson

APPROVED: ✓ DENIED:

CONDITION OF APPROVAL OR DENIAL:

1. All underground tank removal ~~and/or installation~~ shall be done in accordance with Department of Environmental Protection Regulations Chapter 691.
2. No cutting of tanks on site. Cutting of tanks to be done at an approved tank disposal site.
3. Fire Dispatcher must be notified 48 hours in advance of removal and/or transportation of tanks.

FAXED
12-11-92
DX

12-11-92
DX

Gerry Polt M

- | | <u>Tank Number</u> | <u>Age of Tank (Years)</u> | <u>Tank Size (Gallons)</u> | <u>Type of Product Most Recently Stored</u> |
|----|--------------------|----------------------------|----------------------------|---|
| A. | 1 | 20+ | 12,000 | #4 Fuel |
| B. | | | | |
| C. | | | | |
| D. | | | | |

3. Is tank(s) used for the storage of Class I liquids (e.g. gasoline, jet fuel)? Yes___ No ✓ (IF YES, REMOVAL OF THE TANK MUST BE UNDER THE DIRECTION OF A CERTIFIED TANK INSTALLER OR PROFESSIONAL FIREFIGHTER.)

- Certified Tank Installer Certification Number & Name (if applicable):

Professional Firefighter Yes No (Affiliation:)

- I hereby provide Notice that I intend to properly abandon the underground oil storage facility as described above.

Portland Pump Co (Agent for Owner)
Signature of Tank Owner or Operator

David W Crox-Ford G.M.
Printed Name and Title

Mail original and yellow copy to DEP; pink copy to fire dept.; retain gold copy

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ _____
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type

Inspection Record

Date

_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS

Tank removed per Lt. Mac.



Signature of Applicant

Date