

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING DEPARTMENT

## PERMIT

Permit Number: 091201  
**PERMIT ISSUED**

Please Read  
Application And  
Notes, If Any,  
Attached

This is to certify that OLD PORT RETAIL HOLDINGS LLC /  
has permission to Phase 1 Interior demolition for structure tenement fit-up DEC - 2 2009

AT 52 WHARF ST City of Portland 032 V014001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lathed or otherwise dressed-in. 24 HOUR NOTICE IS REQUIRED.

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

**OTHER REQUIRED APPROVALS**

Fire Dept. [Signature]  
Health Dept. [Signature]  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

[Signature] 12/1/09  
Director - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 09-1291	Issue Date:	CBL: 032 V014001
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Location of Construction: 52 WHARF ST	Owner Name: OLD PORT RETAIL HOLDINGS	Owner Address: 101 RICHARDSON ST	Phone:
Business Name:	Contractor Name: Scott Davis	Contractor Address:	Phone
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Interior	Zone: B-3

Past Use: Commercial	Proposed Use: Commercial - Vacant Space - Phase 1 Interior demolition for future tenant fit-up	Permit Fee: \$240.00	Cost of Work: \$2,000.00	CEO District: 1
		FIRE DEPT: w/ conditions 11/18/2009 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: A-2 Type: 3B IBC 2003	

Proposed Project Description: Phase 1 Interior demolition for future tenant fit-up	Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
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: Ldobson	Date Applied For: 11/13/2009	<b>Zoning Approval</b>
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- 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	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>11/17/09</i>	Date:	Date: <i>Requires A</i>

**PERMIT ISSUED**

DEC - 2 2009

City of Portland

*Any other work requires A Separate Review Approval*

**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

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 09-1291	<b>Date Applied For:</b> 11/13/2009	<b>CBL:</b> 032 V014001
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<b>Location of Construction:</b> 52 WHARF ST	<b>Owner Name:</b> OLD PORT RETAIL HOLDINGS	<b>Owner Address:</b> 101 RICHARDSON ST	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Scott Davis	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Demolitions - Interior	

<b>Proposed Use:</b> Commercial - Vacant Space - Phase 1 Interior demolition for future tenant fit-up	<b>Proposed Project Description:</b> Phase 1 Interior demolition for future tenant fit-up
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 11/17/2009

**Note:** **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 2) This property shall remain a restaurant/drinking establishment. Any change of use shall require a separate permit application for review and approval.
- 3) Separate permits shall be required for any new signage.
- 4) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work. It is understood that all work is interior.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Tammy Munson      **Approval Date:** 12/01/2009

**Note:** **Ok to Issue:**

- 1) Separate permits are required for any electrical, plumbing, sprinkler, fire alarm or HVAC or exhaust systems. Separate plans may need to be submitted for approval as a part of this process.

**Dept:** Fire      **Status:** Approved with Conditions      **Reviewer:** Ben Wallace Jr.      **Approval Date:** 11/18/2009

**Note:** **Ok to Issue:**

- 1) Sprinkler protection shall be maintained.  
Where the system is to be shut down for maintenance or repair, the system shall be checked at the end of each day to insure the system has been placed back in service.
- 2) All construction shall comply with NFPA 101

**Comments:**

11/17/2009-mes: Gave back to Lannie for correcting - she returned - new permit created - had two permits under one



# 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: <b>52 WHARF ST.</b>		
Total Square Footage of Proposed Structure <b>8600'</b>	Square Footage of Lot: <b>8600'</b>	
Tax Assessor's Chart, Block & Lot: Chart#      Block#      Lot# <b>TM 32-V14      25121-30</b>	Owner: <b>OLD POST RETAIL HOLDINGS LLC</b>	Telephone: <b>(718) 388-7700</b>
Lessee/Buyer's Name (If Applicable) <b>SAME</b> →	Applicant name, address & telephone: <b>MCDC LLC CASSADY PAPPAS / MICHAEL PO BOX 10      ISLAND BARHARBOR ME (207) 664-8839</b>	Cost Of Work: \$ <b>2000.00</b> Fee: \$ <b>40</b>
Current legal use: (i.e. garage, warehouse) <u><b>RESTAURANT</b></u> If vacant, what was the previous use? <u><b>NIGHTCLUB / RESTAURANT</b></u> How long has it been vacant? <u><b>2 1/2 years</b></u> Project description: <b>SEE ATTACHED Phase I Interior Demo</b>		
Contractor's name, address & telephone: <u><b>SCOTT DAVIS</b></u>		
Who should we contact when the permit is ready: <u><b>CASSADY PAPPAS</b></u>		
Mailing address: <u><b>PO BOX 10 BARHARBOR ME 04009</b></u> Telephone: <u><b>(207) 664-8839</b></u>		

RECEIVED

Please submit all of the information outlined in the Demolition call NOV 13 2009 do so will result in the automatic denial of your permit.

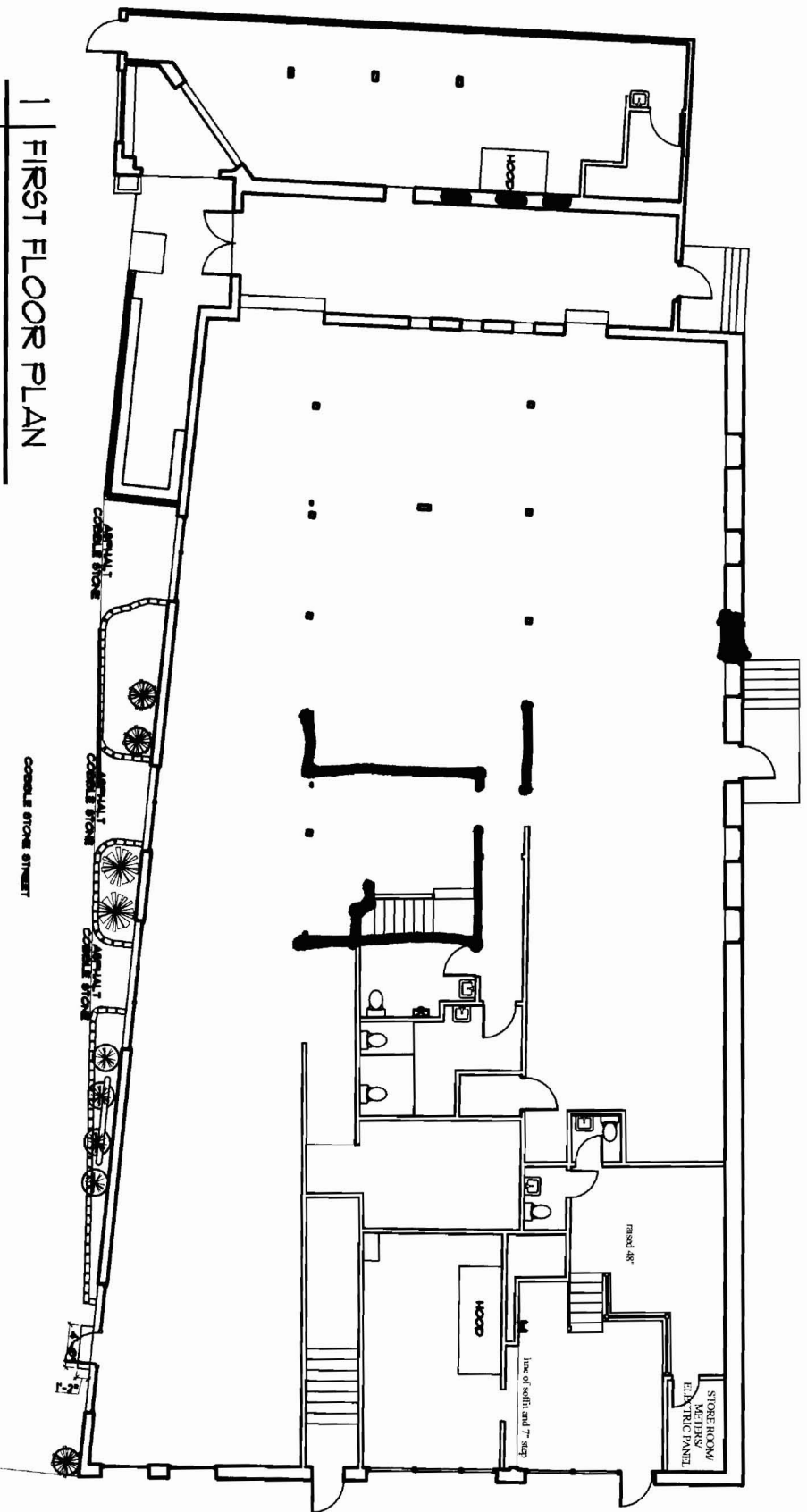
Dept. of Building Inspections  
City of Portland, Me

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](http://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:	Date: <b>11.13.09</b>
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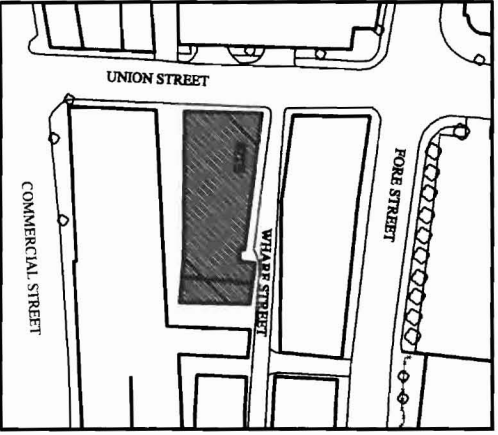
This is not a permit; you may not commence ANY work until the permit is issued.



1 | FIRST FLOOR PLAN  
 SCALE: 1/16" = 1'-0"

 = walls to be removed

LOCATION PLAN - N.T.S



<b>A-1</b>	FLOORPLAN OF EXISTING CONDITIONS	Date 05 November, 2009	Scale 1/16" = 1'-0"	Project: <b>HAVANASOUTH</b>
		<b>ARCHETYPE ARCHITECTS, P.A.</b> 48 Union Wharf Portland, Maine 04101 (207) 772-6022 Fax (207) 772-4056		52 WHARF ST PORTLAND, ME

# DEMO PLAN FOR 52 WHARF ST INTERIOR ONLY

- REMOVE EXISTING NON STRUCTURAL COSMETIC WALLS
- REMOVE EXISTING BAL STRUCTURES (X2)
- REMOVE LIGHTING FROM PREVIOUS TENANT
- REMOVE DEBRIS
- REMOVAL OF STAIRS AND SMALL MEZZANINE OFFICE
- SHEETROCK REMOVAL FROM CEILING UNDER OASIS



# ASBESTOS BUILDING DEMOLITION NOTIFICATION

MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, Maine 04333



**Maine law requires the filing of the ASBESTOS BUILDING DEMOLITION NOTIFICATION with the Department prior to demolition of any building except a single-family home.**

Building owners are required to provide this notification of the demolition of a building to the DEP at least 5 working days prior to the demolition. This notification is **not** required before the demolition of a single-family residence or related structure (e.g., garage, shed, barn). It is also **not** required if previous notification of the demolition has been provided to the DEP as part of an asbestos abatement project notification. **Demolition** means the tearing down or intentional burning of a building or part of a building.

Prior to demolition, building owners must determine if there is any asbestos-containing material(s) (ACM) in the building. An "asbestos inspection" by a DEP-licensed Asbestos Consultant is required for all buildings 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 materials that may contain asbestos are found, then you can either assume they are ACM or hire a DEP-licensed Asbestos Consultant to test the materials.

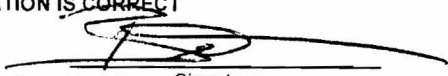
Whenever more than 3 square feet or 3 linear feet of ACM is identified, the ACM must be abated in accordance with the *Maine Asbestos Management Regulations* by a DEP-licensed Asbestos Abatement Contractor. This includes materials presumed to be ACM. Check [www.maine.gov](http://www.maine.gov) for a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

Prior to issuing a local demolition permit, the DEP requests that **municipalities** have applicants for municipal demolition permits complete this form and fax it to the DEP 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.

**Were regulated asbestos-containing building materials found?**  yes  no

property address: 52 Wharf Street portland, MAine	building description: <input type="checkbox"/> pre-1981 residential with 2-4 units <input type="checkbox"/> post-1980 residential with 2-4 units <input checked="" type="checkbox"/> other: Pre 1981 Commerical space
asbestos survey/inspection performed by: (name & address)  Bruce M. Hackett, Sr AS-0325 Abatement Professionals Corp. 590 County Road Westbrook 773-1276	asbestos abatement contractor
telephone:	telephone:
property owner: (name & address)	demolition contractor: (name & address)
telephone:	telephone:
demolition start date: (mm/dd/yy)	demolition end date: (mm/dd/yy)

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

<b>I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT</b>		
Print Name: Owner/Agent Bruce M. Hackett, Sr:	 Title Asbestos Insp. AI-0325      Signature	
Telephone # 2077731276	FAX # 2077721203	Date 11/13/09

November 13, 2009

Mr. Cassady Pappas  
MCDC LLC  
[cpappas@rupununi.com](mailto:cpappas@rupununi.com)

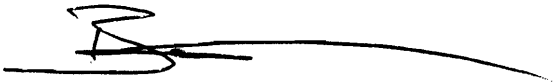
Dear Mr. Pappas;

Abatement Professionals submitted eight (8) individual bulk material samples. Sampling included two (2) separate suspect materials from the 52 Wharf Street Portland Demo job. We sampled the wall system and ceiling system and suspect vinyl tiles beneath the entry way black marble tile, during the demo should additional hidden materials be found work should stop until a determination of the material can be made. Samples were submitted to EMSL Analytical located in Westmont, N.J.

Analysis was conducted under Polarized Light Microscopy, under US EPA 600/R-93/116 appropriate for asbestos analysis. Samples identified with 1% or greater must be treated as asbestos containing materials and fall subject to Federal and State asbestos management regulations. **No Asbestos** was identified in the samples collected.

We appreciate your business. Should you have any questions feel free to contact me at 207-773-1276.

Sincerely,



Bruce M. Hackett  
Asbestos Inspector AI-0325



Date Sampled: 11/11/09

Sample Number	Description of Material	Analytical Result (%)
B1A-C	Black Vinyl Tile in entry way	None Detected
B2A-E	Wall and Ceiling Wallboard material	None Detected

**SUPPORT DOCUMENTATION**

(Asbestos Laboratory Results)



EMSL Analytical, Inc.

107 Haddon Ave., Westmont. NJ 08108

Phone: (856) 858-4800 Fax: (856) 858-4960 Email: westmontaslab@EMSL.com

Attn: Bruce M. Hackett, Sr.
Abatement Professionals Corp.
590 County Road
Westbrook, ME 04092

Customer ID: ABAT52
Customer PO: 09-491
Received: 11/12/09 10:30 AM
EMSL Order: 040927648
EMSL Proj:
Analysis Date: 11/13/2009

Fax: (207) 772-1203 Phone: (207) 773-1276
Project: 52 WHARF STREET

Test Report: Asbestos Analysis of Bulk Materials via EPA 600/R-93/116 Method using Polarized Light Microscopy

Table with 6 columns: Sample, Description, Appearance, % Fibrous, % Non-Fibrous, % Type. Rows include samples like 09-491B1A-Floor Tile, 09-491B1A-Glue, 09-491B1B, 09-491B1C-Floor Tile, 09-491B1C-Glue, 09-491B2A, and 09-491B2B.

Analyst(s)
Delores Beard (10)

Signature of Stephen Siegel
Stephen Siegel, CIH, Laboratory Manager
or other approved signatory

Due to magnification limitations inherent in PLM, asbestos fibers in dimensions below the resolution capability of PLM may not be detected. The limit of detection as stated in the method is 1%. The above test report relates only to the items tested and may not be reproduced in any form without the express written approval of EMSL Analytical, Inc. EMSL's liability is limited to the cost of analysis. EMSL bears no responsibility for sample collection activities or analytical method limitations. Interpretation and use of test results are the responsibility of the client. Samples received in good condition unless otherwise noted. This report must not be used to claim product endorsement by NVLAP or any agency of the U.S. Government. The test results meet all NELAC requirements unless otherwise specified.
Samples analyzed by EMSL Analytical, Inc. Westmont 107 Haddon Ave., Westmont NJ AIHA IHLAP 100194, NVLAP Lab Code 101048-0, NYS ELAP 10872, NJ DEP 04006



EMSL Analytical, Inc.

107 Haddon Ave., Westmont. NJ 08108

Phone: (856) 858-4800 Fax: (856) 858-4960 Email: westmontaslab@EMSL.com

Attn: Bruce M. Hackett, Sr.
Abatement Professionals Corp.
590 County Road
Westbrook, ME 04092

Customer ID: ABAT52
Customer PO: 09-491
Received: 11/12/09 10:30 AM
EMSL Order: 040927648
EMSL Proj:
Analysis Date: 11/13/2009

Fax: (207) 772-1203 Phone: (207) 773-1276
Project: 52 WHARF STREET

Test Report: Asbestos Analysis of Bulk Materials via EPA 600/R-93/116 Method using Polarized Light Microscopy

Table with 7 columns: Sample, Description, Appearance, % Fibrous, % Non-Fibrous, Asbestos % Type. Rows include samples 09-491B2C, 09-491B2D, and 09-491B2E.

Cert.# BA-0100

Analyst(s)

Delores Beard (10)

Handwritten signature of Stephen Siegel

Stephen Siegel, CIH, Laboratory Manager or other approved signatory

Due to magnification limitations inherent in PLM, asbestos fibers in dimensions below the resolution capability of PLM may not be detected. The limit of detection as stated in the method is 1%.



# Chain of Custody

## Asbestos Lab Services

EMSL Analytical, Inc.  
107 Haddon Avenue  
Westmont, NJ 08108

Phone: (856) 858-4800  
Fax: (856) 858-4960  
(856) 427-1608  
<http://www.emsl.com>

Please print all information legibly.

040927648

<b>Company:</b>	Abatement Professionals Corp.	<b>Bill To:</b>	Abatement Professionals Corp.
<b>Address 1:</b>	590 County Road Suite 2	<b>Address 1:</b>	590 County Road Suite 2
<b>Address 2:</b>		<b>Address 2:</b>	
<b>City, State:</b>	Westbrook, Maine	<b>City, State:</b>	Westbrook, Maine
<b>Zip/Post Code:</b>	04092	<b>Zip/Post Code:</b>	04092
<b>Country:</b>	USA	<b>Country:</b>	USA
<b>Contact Name:</b>	Bruce M. Hackett, Sr.	<b>Attn:</b>	Bruce M. Hackett, Sr.
<b>Phone:</b>	207-773-1276	<b>Phone:</b>	207-773-1276
<b>Fax:</b>	207-772-1203	<b>Fax:</b>	207-772-1203
<b>Email:</b>	bhackett@abatementpros.com	<b>Email:</b>	bhackett@abatementpros.com
<b>EMSL Rep:</b>	Dan	<b>P.O. Number:</b>	09-491
<b>Project Name/Number:</b> 52 Wharf Street			

MATRIX			TURNAROUND			
<input type="checkbox"/> Air	<input type="checkbox"/> Soil	<input type="checkbox"/> Micro-Vac	<input type="checkbox"/> 3 Hours	<input type="checkbox"/> 6 Hours		<input checked="" type="checkbox"/> 24 Hours (1 day)
<input checked="" type="checkbox"/> Bulk	<input type="checkbox"/> Drinking Water		<input type="checkbox"/> 48 Hours (2 days)	<input type="checkbox"/> 72 Hours (3 days)	<input type="checkbox"/> 96 Hours (4 days)	<input type="checkbox"/> 120 Hours (5 days)
<input type="checkbox"/> Wipe	<input type="checkbox"/> Wastewater		<input type="checkbox"/> 144+ hours (6-10 days)			

**TEM AIR, 3 hours, 6 hours, Please call ahead to schedule. There is a premium charge for 3-hour tat, please call 1-800-220-3675 for price prior to sending samples. You will be asked to sign an authorization form for this service.**

<p><b>PCM - Air</b></p> <input type="checkbox"/> NIOSH 7400(A) Issue 2: August 1994 <input type="checkbox"/> OSHA w/TWA <input type="checkbox"/> Other:	<p><b>TEM Air</b></p> <input type="checkbox"/> AHERA 40 CFR, Part 763 Subpart E <input type="checkbox"/> NIOSH 7402 <input type="checkbox"/> EPA Level II	<p><b>TEM WATER</b></p> <input type="checkbox"/> EPA 100.1 <input type="checkbox"/> EPA 100.2 <input type="checkbox"/> NYS 198.2
<p><b>PLM - Bulk</b></p> <input checked="" type="checkbox"/> EPA 600/R-93/116 <input type="checkbox"/> EPA Point Count <input type="checkbox"/> NY Stratified Point Count <input type="checkbox"/> PLM NOB (Gravimetric) NYS 198.1 <input type="checkbox"/> NIOSH 9002: <input type="checkbox"/> EMSL Standard Addition:	<p><b>TEM BULK</b></p> <input type="checkbox"/> Drop Mount (Qualitative) <input type="checkbox"/> Chatfield SOP - 1988-02 <input type="checkbox"/> TEM NOB (Gravimetric) NYS 198.4 <input type="checkbox"/> EMSL Standard Addition:	<p><b>TEM Microvac/Wipe</b></p> <input type="checkbox"/> ASTM D 5755-95 (quantitative method) <input type="checkbox"/> Wipe Qualitative
<p><b>SEM Air or Bulk</b></p> <input type="checkbox"/> Qualitative <input type="checkbox"/> Quantitative	<p><b>PLM Soil</b></p> <input type="checkbox"/> EPA Protocol Qualitative <input type="checkbox"/> EPA Protocol Quantitative <input type="checkbox"/> EMSL MSD 9000 Method fibers/gram	<p><b>XRD</b></p> <input type="checkbox"/> Asbestos <input type="checkbox"/> Silica NIOSH 7500 <p><b>OTHER</b></p> <input type="checkbox"/>

RECEIVED  
 EMSL  
 WESTMONT, NJ  
 09 MAR 2009 11:16

SAMPLES ACCEPTED  
 FOR ANALYSIS BY  
 EMSL ANALYTICAL INC.

