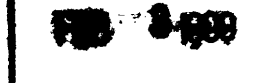


City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 45-55 Forest Ave		Owner: Ne Tel & Tel Co		Phone:		Permit No: 990083 80066			
Owner Address:		Lessee/Buyer's Name:		Phone:		BusinessName:			
Contractor Name: CYW Environmental Services		Address: 100 Tosca Dr Stoughton MA		Phone: 1-800-622-6365		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED  CITY OF PORTLAND </div>			
Past Use: Vacant		Proposed Use: Same		COST OF WORK: \$ 50,000 FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>H.M.M.</i>				PERMIT FEE: \$ 25.00 (pre-cut) INSPECTION: Tank Use Group: <i>BoCA 96</i> Signature: <i>Hoffner</i>	
Proposed Project Description: Remove 1 10,000 gal tank in basement				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____				Zone: <i>B-3</i> CBL: 037-A-001 Zoning Approval: <i>OK 2/2/99</i> 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"/>	
Permit Taken By: SP		Date Applied For: December 3, 1998							

1. This permit application does not 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..

PERMIT ISSUED WITH REQUIREMENTS

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 provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: February 2, 1999 PHONE: _____

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

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

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: _____

CEO DISTRICT 2
KC/TM

THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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 (include Portion of Building): <i>45-55 Bell Atlantic Forest Ave. Portland, ME.</i>		
Total Square Footage of Proposed Structure: <i>44 000 sqft.</i>	Square Footage of Lot: <i>N/A</i>	
Tax Assessor's Chart, Block & Lot Number Chart# <i>0.37</i> Block# <i>A</i> Lot# <i>001</i>	Owner: <i>Bell Atlantic NetTel & Relco</i>	Telephone#:
Owner's Address:	Lessee/Buyer's Name (If Applicable):	Cost Of Work: <i>Net-Cont</i> \$ <i>50,000</i> Fee \$ <i>25.00</i>
Proposed Project Description: (Please be as specific as possible) <i>removal of (1) 10,000 gallon tank in basement</i>		
Contractor's Name, Address & Telephone: <i>CYW ENVIRONMENTAL SERVICES 100 TOSCA DRIVE SToughton, MA.</i>		Rec'd By:
Current Use: <i>Venue</i>	Proposed Use: <i>1-800-622-6365</i>	

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must include the following with your application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

4) Building Plans

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

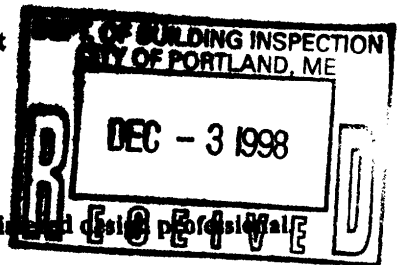
- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.

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/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: <i>[Signature]</i>	Date: <i>12-2-98</i>
--	----------------------

Building Permit Fee: \$25.00 for the 1st \$1000 cost plus \$5.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum



BUILDING PERMIT REPORT

DATE: 3 February 1999 ADDRESS: 45 Forest Ave. CBL 037-A-001
REASON FOR PERMIT: To remove 10,000 gal Tank in basement
BUILDING OWNER: Ne Telec Tel Co
CONTRACTOR: CYW Environmental Services
PERMIT APPLICANT: ↑
USE GROUP B BOCA 1996 CONSTRUCTION TYPE 1 B

CONDITION(S) OF APPROVAL

This Permit is being issued with the understanding that the following conditions are met:

Approved with the following conditions: *1, *31

- X 1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. 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)
- 2.5 Foundation drain shall be placed around the perimeter of a foundation that consists of gravel or crushed stone containing not more than 10 percent material that passes through a No. 4 sieve. The drain shall extend a minimum of 12 inches beyond the outside edge of the footing. The thickness shall be such that the bottom of the drain is not higher than the bottom of the base under the floor, and that the top of the drain is not less than 6 inches above the top of the footing. The top of the drain shall be covered with an approved filter membrane material. Where a drain tile or perforated pipe is used, the invert of the pipe or tile shall not be higher than the floor elevation. The top of joints or top of perforations shall be protected with an approved filter membrane material. The pipe or tile shall be placed on not less than 2" of gravel or crushed stone, and shall be covered with not less than 6" of the same material. Section 1813.5.2
- 2.6 Foundations anchors shall be a minimum of 1/2" in diameter, 7" into the foundation wall, minimum of 12" from corners of foundation and a maximum 6' o.c. between bolts. (Section 2305.17)
3. Precaution must be taken to protect concrete from freezing. Section 1908.0
4. 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.
5. 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 means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 Section 407.0 of the BOCA/1996)
6. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code. (The BOCA National Mechanical Code/1993). Chapter 12 & NFPA 211
7. Sound transmission control in residential building shall be done in accordance with Chapter 12 section 1214.0 of the city's building code.
8. Guardrails & 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, H-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. (Handrails shall be a minimum of 34" but not more than 38". Use Group R-3 shall not be less than 30", but not more than 38".) Handrail grip size shall have a circular cross section with an outside diameter of at least 1 1/4" and not greater than 2". (Sections 1021 & 1022.0) - Handrails shall be on both sides of stairway. (Section 1014.7)
9. Headroom in habitable space is a minimum of 7'6". (Section 1204.0)
10. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 3/4" maximum rise. All other Use group minimum 11" tread. 7" maximum rise.(Section 1014.0)
11. The minimum headroom in all parts of a stairway shall not be less than 80 inches. (6' 8") 1014.4
12. 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 (508mm), and a minimum net clear opening of 5.7 sq. ft. (Section 1018.6)

13. 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. Section 1010.1
14. All vertical openings shall be enclosed with construction having a fire rating of at least one (1)hour, including fire doors with self closer's. (Over 3 stories in height requirements for fire rating is two (2) hours.) Section 710.0
15. The boiler shall be protected by enclosing with (1) hour fire-rated construction including fire doors and ceiling, or by providing automatic extinguishment. Table 302.1.1
16. 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 920.3.2 (BOCA National Building Code/1996), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):
 - In the immediate vicinity of bedrooms
 - In all bedrooms
 - In each story within a dwelling unit, including basementsIn 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. (Interconnection is required) Section 920.3.2
17. 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. Section 921.0
18. The Fire Alarm System shall be maintained to NFPA #72 Standard.
19. The Sprinkler System shall maintained to NFPA #13 Standard.
20. 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/1996)
21. 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".
22. 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 commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.
23. Ventilation shall meet the requirements of Chapter 12 Sections 1210. Of the City's Building Code. (crawl spaces & attics)
24. All electrical, plumbing and HVAC permits must be obtained by a Master Licensed holders of their trade. No closing in of walls until all electrical (min. 72 hours notice) and plumbing inspections have been done.
25. All requirements must be met before a final Certificate of Occupancy is issued.
26. All building elements shall meet the fastening schedule as per Table 2305.2 of the City's Building Code. (The BOCA National Building Code/1996).
27. Ventilation of spaces within a building shall be done in accordance with the City's Mechanical Code (The BOCA National Mechanical Code/1993). (Chapter M-16)
28. Please read and implement the attached Land Use-Zoning report requirements.
29. Boring, cutting and notching shall be done in accordance with Sections 2305.4.4, 2305.5.1 and 2305.3. of the City's building code.
30. Glass and glazing shall meet the requirements of Chapter 24 of the building code.

- * 31. See attached requirements From Fire Dept.
32. No cutting tanks on site
33. Fire Dispatcher must be notified 24 hrs in advance of removal (874-8576

P. Samuel Hoffses, Building Inspector

cc: Lt. McDougall, PFD

Marge Schmuckal, Zoning Administrator



PENNONI ASSOCIATES INC.
Consulting Engineers

The Concord Center, Suite 311
10 Ferry Street, Unit 6
Concord, NH 03301
(603) 226-1950
FAX (603) 226-3235

Date: 12/2/98
 Job Number: NYNX0152
 To: Inspection Services
 RE: Bell Atlantic Central Office
Attn: Sherry Pinard
45-55 Forest Avenue
389 Congress Street
Portland, Maine
Portland, Maine 04101

We are forwarding to you:

- Attached
- Shop Drawings
- Plans
- Specifications
- Prints
- Under separate cover via _____
- Samples
- Copy of Letter
- Other

Copies	Date or No.	Description
1	11/23/98	Notice of Intent to Abandon an Underground Oil Storage Facility
1	11/23/98	DEP Registration Form for UST
1	11/23/98	DEP Waiver for Removal of UST

These are transmitted as checked below:

- For approval
- As requested
- Material returned after loan to us
- For your use
- For review and comment
- Other

Remarks: Sherry, Here is the DEP information to accompany the building permit to be filed by Cyn Environmental Services for the Bell Atlantic facility located at 45-55 Forest Avenue. Please contact me if you require any additional information.

cc: File Signed: Russell Barton

WAIVER FROM THE REQUIREMENT THAT A NOTICE OF ABANDONMENT BY REMOVAL OF AN UNDERGROUND OIL TANK BE FILED THIRTY DAYS PRIOR TO REMOVAL

Due to Exceptional circumstances the Department of Environmental Protection grants a waiver to the thirty day filing period for abandonment by removal of the listed underground tanks, provided that the owner or operator meets the following conditions:

- 1. A written notice of removal is filed with the Department and the local fire department within one day of receiving this waiver.
- 2. The Department is kept advised of removal plans and schedule so that a department representative can observe the removal of the tank(s) and the excavation from which the tank(s) was/were removed.

Tank(s) owned by:

Name BELL ATLANTIC Phone # 978 461 2800

Mailing Address 125 High St Town Boston

Located at:

Name Bell Atlantic Central Office Phone # _____

Address 45-55 Forest Ave Town Portland

Reason for Waiver: Removal of newly discov. UST.
PS89-98

List tank(s) below:

Registration #	Size	Location on Site (Describe or Diagram)
To be reg.	19,000	

Planned Date of Removal: 11/30/98

This waiver is granted on (date) 11/23/98 by

S G Brezinski, a copy of which is presented to
Peter Lazorchak, Pennoni Assoc.
(Name of individual receiving the copy)

cc: Peter Burrell

White - Enforcement Copy Canary - Investigator's Copy Pink - Tank Owner's Copy

Maine Department of Environmental Protection
Bureau of Remediation and Waste Management
17 State House Station
Augusta, Maine 04333-0017
Attention: Tank Removal Notice
Telephone: (207) 287-2651

Expires after 6 (six) months if the
Department does not receive notice that
removal was completed.

NOTICE OF INTENT TO ABANDON (REMOVE)
AN UNDERGROUND OIL STORAGE FACILITY

**THIS FORM MUST BE FILED WITH THE D.E.P. AND YOUR LOCAL FIRE DEPARTMENT AT
LEAST 30 DAYS PRIOR TO THE SCHEDULED REMOVAL**

PLEASE TYPE OR PRINT IN INK:

Name of Facility Owner: Bell Atlantic
Mailing Address: 125 High Street Telephone #: (978) 461-2400
City: Boston State: MA Zip Code: 02110
Contact Person (name, address & telephone #): Peter Curran

Name of Facility: Bell Atlantic Central Office Registration #: _____
Facility Location (town & street): 45-55 Forest Avenue, Portland, Maine

1. Identify the tanks at this location which are going to be removed:

Tank #	Tank Age	Tank Size (gallons)	Type of Product Stored
1	Unknown	1,100	Heating Oil
2			
3			

2. Directions to this facility (be specific):

295 to Exit 6, Forest Ave. going east to corner of Forest Ave. and Cumberland Ave.

3. Is or was the tank(s) used to store Class I liquids (e.g., gasoline, jet fuel)? Yes _____ No X
**IF YES, REMOVAL OF THE TANK(S) MUST BE DONE UNDER THE DIRECTION OF A
CERTIFIED TANK INSTALLER.**

Tank Installer's Name: _____ Certification Number: _____ Signature _____

4. Environmental site assessments are required for all tanks except those used for storing heating oil, not for resale, or for farm or residential motor fuel tanks under 1,100 gallons where the product is used on site. Site Assessor's Name and Address (if applicable):

Verdant Associates Inc. The Concord Center, Suite 311, 10 Concord St., Concord, MA 03301

5. Name and telephone number of contractor who will do the tank removal:

Environmental Services (800) 622-6765

6. Expected date of removal (month/day/year): 11/30/96 (within 30 days upon receipt of notice)

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

Date: 11/19/96 Signature of owner or operator: [Signature]

Printed Name and Title: Arnold Burton, Project Manager

**Mail original and yellow copy to DEP; pink copy to fire department; retain gold copy.
RETURN POSTCARD AFTER TANK(S) HAS BEEN REMOVED**



DEPARTMENT OF ENVIRONMENTAL PROTECTION
REGISTRATION FORM FOR UNDERGROUND OIL
AND PETROLEUM PRODUCTS STORAGE TANKS
(Pursuant to 38 M.R.S.A. Section 563, 40 CFR Part 280)

1. REGISTRATION NUMBER: _____
(Complete only if a registration has been
previously assigned by the Department
of Environmental Protection.)

STATE USE ONLY DATE OF REGISTRATION ____/____/____
--

2. FACILITY INFORMATION:

- A. Name of Facility: Bell Atlantic Central Office
- B. Street Address of Facility: 45-55 Forest Avenue
- C. Town/City where facility is located: Portland
- D. Mailing address: Bell Atlantic, 125 High Street, Boston, MA 02110
Maine
- E. F. Telephone: (978) 461-2800
- G. Directions to Facility: 295 to Exit 6, Forest Avenue going East to corner
of Cumberland Avenue to Forest Avenue
- H. Are any planned or existing tank(s) (including piping and pumps) within 1000 feet of a public water supply source? Yes ___ No x
- I. Are any planned or existing tank(s) (including piping and pumps) within 300 feet of a private water supply source? Yes ___ No x
- J. (Complete if the answer to (I) above is YES.) Is the water supply which is located within 300 feet of the tank(s) owned by someone other than the facility owner or operator? Yes ___ No ___
- K. Is the facility located on a sand and gravel aquifer or recharge area as mapped by the Maine Geological Survey? Yes ___ No x
- L. Is the facility located within 250 feet of a fresh or salt water body or wetland? Yes ___ No x
- M. Is the facility located within a 100 year flood plain? Maps are available at most municipal offices. Yes ___ No x

Note: If you wish assistance in answering items (K) or (L), please call the Department at (207) 289-2651. Sand and gravel aquifer maps can be reviewed at any of the Department's offices or purchased for a nominal fee from the Maine Geological Survey, State House Station #22, Augusta, Maine 04333, (207) 289-2801.

If the answer to item (H), (I) or (K) above is yes, the facility is in a sensitive geologic area.

STATE USE ONLY

Reviewer: _____ Date: ___/___/___ Map Number: _____
Comment: _____

N. Facility is now or will be used for (check one):

- | | |
|---|---|
| <input type="checkbox"/> Wholesale Distribution of Oil | <input type="checkbox"/> Oil storage at a single family residence |
| <input type="checkbox"/> Retail Distribution of Oil | <input type="checkbox"/> Oil storage at a multi-family residence |
| <input checked="" type="checkbox"/> Oil storage at a Commercial Establishment for on-site consumption | <input type="checkbox"/> Oil storage/farm |
| <input type="checkbox"/> Oil storage at an Industrial Establishment for on-site consumption | <input type="checkbox"/> Oil storage/Public Facility (state or local) |
| | <input type="checkbox"/> Oil Storage/Federal Facility |

3. TANK OWNER:

- A. Name: Bell Atlantic
(last) (first) (middle initial)
- B. Mail Address: 125 High Street
- C. Town/City: Boston D. State: MA
- E. Zip Code: 02110 F Phone: (978) 461-2800

4. TANK OPERATOR: (if different from owner.)

- A. Name: Bell Atlantic
(last) (first) (middle initial)
- B. Mail Address: 45-55 Forest Avenue
- C. Town/City: Portland D. State: ME
- E. Zip Code: 04103 F Phone: (978) 461-2800

5. CONTACT PERSON:

- A. Name: Peter Burnell B. Phone: (978) 461-2800



6. INDIVIDUAL TANK DATA: Complete for each tank.

A. TANK TYPE:

- C = Cathodically Protected Steel - Single Wall with Excavation Liner.
W = Cathodically Protected Steel - Double Walled
E = Fiberglass - Single wall with Liner.
G = Fiberglass - Double Walled
N = Other - Please specify. s/w steel.

B. Piping Type:

- E = Single Walled Fiberglass with liner
G = Double Walled Fiberglass
M = Single Walled Steel with Liner.
O = Copper with Secondary Containment
W = Cathodically Protected Steel
Copper

C. Tank Size:

Fill in with the Size of the Tank in gallons.

10,000

D. Form of Leak Detection/Retrofitted Tank:

- 1 = Continuous Electronic Monitoring of Ground-water
2 = Continuous Electronic Monitoring of Vapors
3 = Secondary Containment with Interstitial space monitoring
4 = Manual Groundwater Sampling
5 = Continuous In-Tank Gauging
6 = In-Line Leak Detector

E. Product Stored:

- 1 = Kerosene 2 = #2 Fuel Oil 4 = #4 Fuel Oil
5 = #5 Fuel Oil 6 = #6 Fuel Oil 20 = Unleaded-Plus
22 = Premium 23 = Unleaded 28 = Premium unlead
29 = Diesel 81 = Waste Oil 99 = Other-Please Specify

F. Date Installed:

Fill in Month and Year of Installation.

Unknown

G. Tank Status:

- B = Active
C = Out of Service
D = Abandoned in Place-Filled
E = Planned for Removal

H. System Type:

- 1 = Suction 2 = Pressurized

I. Form of Interstitial Tank Leak Detection/ New and Replacement Tanks

- 1 = Continuous Groundwater in Liner
2 = Manual Groundwater in Liner
3 = Continuous Vapor Monitoring
4 = Continuous Hydrostatic
5 = Continuous Free Product
6 = Continuous Vacuum or Pressure
7 = Other-Please Specify

J. Overfill Spill/Leak Detection:

- 1 = Automatic Shutoff (95% Tank Capacity)
2 = Automatic Alarm (95% Tank Capacity)
3 = Overfill Spill Container (3-gallon minimum)

TANK 1: USE THIS FORM FOR NEW UST'S BEING INSTALLED

A. B. C. D. E. F. / G. H. I. J.

TANK 2:

A. B. C. D. E. F. / G. H. I. J.

TANK 3:

A. B. C. D. E. F. / G. H. I. J.

TANK 4:

A. B. C. D. E. F. / G. H. I. J.

(3)

10. IF NEW OR REPLACEMENT TANKS ARE INCLUDED WITH THIS REGISTRATION, PROVIDE:

A. Name of Installer: _____

B. Installer ID Number: _____

11. INDIVIDUAL TANK DATA (Complete one [L] line for each tank at the facility, including tanks planned for installation or replacement).

Date of Planned Installation _____

A. Tank Number	B. Tank Type	C. Piping Type	D. Tank Size	E. Form of Additional Protection for New and Replacement Wholesale or Retail Tanks in Sensitive Geologic Areas (Tanks and Piping)	F. Product Stored	G. Tank Age	H. Status	I. Date removed from active service (if applicable)	J. System Type
<input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled	<input type="checkbox"/> Bare or Asphalt-coated Steel <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Galvanized <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Single Walled <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Single Walled <input type="checkbox"/> Other (Specify) _____	Gallons	<input type="checkbox"/> Continuous Electronic Monitoring of Ground Water <input type="checkbox"/> Continuous Electronic Monitoring of Vapors <input type="checkbox"/> Secondary Containment <input type="checkbox"/> Ground Water Sampling	GASOLINE <input type="checkbox"/> Regular #1 <input type="checkbox"/> Premium #2 <input type="checkbox"/> Unleaded #4 <input type="checkbox"/> Premium #5 <input type="checkbox"/> Unleaded #8 <input type="checkbox"/> Diesel Chemical (Specify _____) Other (Specify _____)	Unknown Mo/Yr	<input type="checkbox"/> Planned <input type="checkbox"/> Active <input type="checkbox"/> Out-of-service <input type="checkbox"/> Abandoned in place (filled not removed) <input type="checkbox"/> Planned for removal	____/____/____ (Mo) (Yr)	<input type="checkbox"/> Suction <input type="checkbox"/> Pressurized
<input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled	<input type="checkbox"/> Bare or Asphalt-coated Steel <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Galvanized <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Single Walled <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Single Walled <input type="checkbox"/> Other (Specify) _____	Gallons	<input type="checkbox"/> Continuous Electronic Monitoring of Ground Water <input type="checkbox"/> Continuous Electronic Monitoring of Vapors <input type="checkbox"/> Secondary Containment <input type="checkbox"/> Ground Water Sampling	GASOLINE <input type="checkbox"/> Regular #1 <input type="checkbox"/> Premium #2 <input type="checkbox"/> Unleaded #4 <input type="checkbox"/> Premium #5 <input type="checkbox"/> Unleaded #8 <input type="checkbox"/> Diesel Chemical (Specify _____) Other (Specify _____)	Mo/Yr	<input type="checkbox"/> Planned <input type="checkbox"/> Active <input type="checkbox"/> Out-of-service <input type="checkbox"/> Abandoned in place (filled not removed) <input type="checkbox"/> Planned for removal	____/____/____ (Mo) (Yr)	<input type="checkbox"/> Suction <input type="checkbox"/> Pressurized
<input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled	<input type="checkbox"/> Bare or Asphalt-coated Steel <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Galvanized <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Single Walled <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Single Walled <input type="checkbox"/> Other (Specify) _____	Gallons	<input type="checkbox"/> Continuous Electronic Monitoring of Ground Water <input type="checkbox"/> Continuous Electronic Monitoring of Vapors <input type="checkbox"/> Secondary Containment <input type="checkbox"/> Ground Water Sampling	GASOLINE <input type="checkbox"/> Regular #1 <input type="checkbox"/> Premium #2 <input type="checkbox"/> Unleaded #4 <input type="checkbox"/> Premium #5 <input type="checkbox"/> Unleaded #8 <input type="checkbox"/> Diesel Chemical (Specify _____) Other (Specify _____)	Mo/Yr	<input type="checkbox"/> Planned <input type="checkbox"/> Active <input type="checkbox"/> Out-of-service <input type="checkbox"/> Abandoned in place (filled not removed) <input type="checkbox"/> Planned for removal	____/____/____ (Mo) (Yr)	<input type="checkbox"/> Suction <input type="checkbox"/> Pressurized
<input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled	<input type="checkbox"/> Bare or Asphalt-coated Steel <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Galvanized <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Single Walled <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Single Walled <input type="checkbox"/> Other (Specify) _____	Gallons	<input type="checkbox"/> Continuous Electronic Monitoring of Ground Water <input type="checkbox"/> Continuous Electronic Monitoring of Vapors <input type="checkbox"/> Secondary Containment <input type="checkbox"/> Ground Water Sampling	GASOLINE <input type="checkbox"/> Regular #1 <input type="checkbox"/> Premium #2 <input type="checkbox"/> Unleaded #4 <input type="checkbox"/> Premium #5 <input type="checkbox"/> Unleaded #8 <input type="checkbox"/> Diesel Chemical (Specify _____) Other (Specify _____)	Mo/Yr	<input type="checkbox"/> Planned <input type="checkbox"/> Active <input type="checkbox"/> Out-of-service <input type="checkbox"/> Abandoned in place (filled not removed) <input type="checkbox"/> Planned for removal	____/____/____ (Mo) (Yr)	<input type="checkbox"/> Suction <input type="checkbox"/> Pressurized
<input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled	<input type="checkbox"/> Bare or Asphalt-coated Steel <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Galvanized <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Single Walled <input type="checkbox"/> Cathodically Protected Steel <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Double Walled <input type="checkbox"/> Fiberglass <input type="checkbox"/> Single Walled <input type="checkbox"/> Other (Specify) _____	Gallons	<input type="checkbox"/> Continuous Electronic Monitoring of Ground Water <input type="checkbox"/> Continuous Electronic Monitoring of Vapors <input type="checkbox"/> Secondary Containment <input type="checkbox"/> Ground Water Sampling	GASOLINE <input type="checkbox"/> Regular #1 <input type="checkbox"/> Premium #2 <input type="checkbox"/> Unleaded #4 <input type="checkbox"/> Premium #5 <input type="checkbox"/> Unleaded #8 <input type="checkbox"/> Diesel Chemical (Specify _____) Other (Specify _____)	Mo/Yr	<input type="checkbox"/> Planned <input type="checkbox"/> Active <input type="checkbox"/> Out-of-service <input type="checkbox"/> Abandoned in place (filled not removed) <input type="checkbox"/> Planned for removal	____/____/____ (Mo) (Yr)	<input type="checkbox"/> Suction <input type="checkbox"/> Pressurized

7. Attach a check for the applicable registration fee made payable to the State of Maine Groundwater Fund and return with this form to the Department of Environmental Protection (Bureau of Oil and Hazardous Materials Control-State House Station #17, Augusta, Maine 04333).

A registration fee of \$35.00 is required for all tanks except for tanks serving single family residences. Registration fees are due upon registration and annually thereafter, prior to the FIRST DAY OF JANUARY.

Fee Computation: 1 # tanks at \$35.00 per tank = \$ 35.00

Motor fuel stored in a non-conforming tank is subject to an additional annual fee payable to the Third Party Commercial Risk Pool.

8. MAKE TWO (2) COPIES OF THIS FORM. Submit the original to the Department of Environmental Protection (Bureau of Oil and Hazardous Materials Control-State House Station #17, Augusta, Maine 04333). SEND ONE (1) COPY TO THE LOCAL FIRE DEPARTMENT having jurisdiction. RETAIN THE THIRD COPY FOR YOUR RECORDS. For new and replacement tanks, registrations are due at least five (5) business days prior to installation.
9. Your registration shall not be considered complete and will be returned to you if all 5 pages are not completed.
10. IF NEW, REPLACEMENT OR RETROFITTING EXISTING TANKS OR PIPING ARE INCLUDED WITH THIS REGISTRATION, PLEASE PROVIDE:

- A. Name of Installer: _____
- B. Installer ID Number: _____ Date to be Installed: _____

11. CERTIFY THIS FORM BY SIGNING. By signing this form, I, the tank registrant, certify that all information is accurate and complete to the best of my knowledge, and that I will comply with all applicable federal, state, and local laws and regulations concerning the underground storage of petroleum products. The owner or operator is required by Maine statutes to file an amendment to this registration with the Department of Environmental Protection immediately upon any change of information contained in this form.

Date: 11/23/98 Russell Barton Project Manager
Owner or Authorized Title (Please print
Employee of the Owner or type)

Agent for BA:

Signature: Russell W. Barton

Title Project Manager