

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING DIVISION

PERMIT

Permit Number: 081200

This is to certify that TC 110 FREE STREET LLC Portland, OR
has permission to Replace existing above ground storage tank w/ new 500 Gallon diesel tank for emergency generator
AT 110 FREE ST 039 C001001

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 enclosed-in. 2 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 [Signature]
Other [Signature]

OCT 16 2008

Department Name

CITY OF PORTLAND

PENALTY FOR REMOVING THIS CARD

[Signature] 10/16/08
Director - Building & Inspection Services

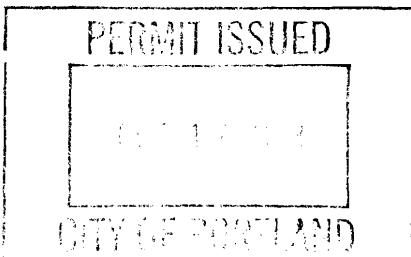
City of Portland, Maine - Building or Use Permit Application

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

Permit No: 08-1200		Issue Date:		CBL: 039 C001001	
Location of Construction: 110 FREE ST		Owner Name: TC 110 FREE STREET LLC		Owner Address: 2001 ROSS AVE STE 3400	
Business Name:		Contractor Name: Portland Pump Co.		Contractor Address: P.O. Box 1180 Mussey Rd. Ext. Scarb	
Lessee/Buyer's Name		Phone:		Phone: 2078834317	
		Permit Type: Tanks - Commercial			
		Zone: B-3			

Past Use: Commercial		Proposed Use: Commercial - Replace existing above ground storage tank w/ new 280 Gallon diesel tank for emergency generator		Permit Fee: \$30.00	
				Cost of Work: \$30.00	
				CEO District: 1	
Proposed Project Description: Replace existing above ground storage tank w/ new 280 Gallon diesel tank for emergency generator		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>With conditions</i>		INSPECTION: Use Group: B Type: Tank JMC 2003 ST ME Solid Fuel Bd / oil	
		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: Idobson	Date Applied For: 09/24/2008	Zoning Approval		
<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: <i>9/24/08</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 Date: <i>[Signature]</i>

**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

Permit No: 08-1200	Date Applied For: 09/24/2008	CBL: 039 C001001
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Location of Construction: 110 FREE ST	Owner Name: TC 110 FREE STREET LLC	Owner Address: 2001 ROSS AVE STE 3400	Phone:
Business Name:	Contractor Name: Portland Pump Co.	Contractor Address: P.O. Box 1180 Mussey Rd. Ext. Scarb	Phone (207) 883-4317
Lessee/Buyer's Name	Phone:	Permit Type: Tanks - Commercial	

Proposed Use: Commercial - Replace existing above ground storage tank w/ new 280 Gallon diesel tank for emergency generator	Proposed Project Description: Replace existing above ground storage tank w/ new 280 Gallon diesel tank for emergency generator
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 09/24/2008
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
Dept: Building	Status: Approved with Conditions	Reviewer: Tom Markley	Approval Date: 10/16/2008
Note: gave to fire for review /trmm	Ok to Issue: <input checked="" type="checkbox"/>		
1) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.			
2) Installation shall comply with 2003 International Mechanical Code and State of Maine Oil and Solid Fuel Board Laws and Rules			
Dept: Fire	Status: Approved with Conditions	Reviewer: Ben Wallace Jr.	Approval Date: 08/09/2008
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) Must comply with NFPA 30.			
2) Application requires State Fire Marshal approval.			

Comments:

9/24/2008-Idobson: David Croxford - Portland Pump - said that Captain Cass made a visit to site.



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.

Location/Address of Construction: <u>110 FREE STREET</u>				
Total Square Footage of Proposed Structure/Area		Square Footage of Lot	Number of Stories	
Tax Assessor's Chart, Block & Lot Chart# <u>39</u> Block# <u>C</u> Lot# <u>1</u>		Applicant * <u>must be owner, Lessee or Buyer</u> * Name <u>Trammell Crow Company</u> Address <u>4 PARK PLAZA, Suite 700</u> City, State & Zip <u>Irvine CA 92614</u>		Telephone: <u>214-863-3307</u>
Lessee/DBA (If Applicable)		Owner (if different from Applicant) Name Address City, State & Zip	Cost Of Work: \$ <u>49800</u> C of O Fee: \$ Total Fee: \$ <u>30 Tank</u>	
Current legal use (i.e. single family) <u>Office Building</u> Number of Residential Units _____ If vacant, what was the previous use? _____ Proposed Specific use: <u>Tank for Generator</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>Replace 280 Gallon D. Tank.</u> <u>Portland Pump Co.</u>				
Contractor's name: _____ Address: <u>9 Border Rd.</u> City, State & Zip <u>Scarborough, ME</u> Telephone: <u>883-4317</u> Who should we contact when the permit is ready: <u>DAVE Croxford</u> Telephone: <u>883-4317</u> Mailing address: <u>SAME</u>				

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

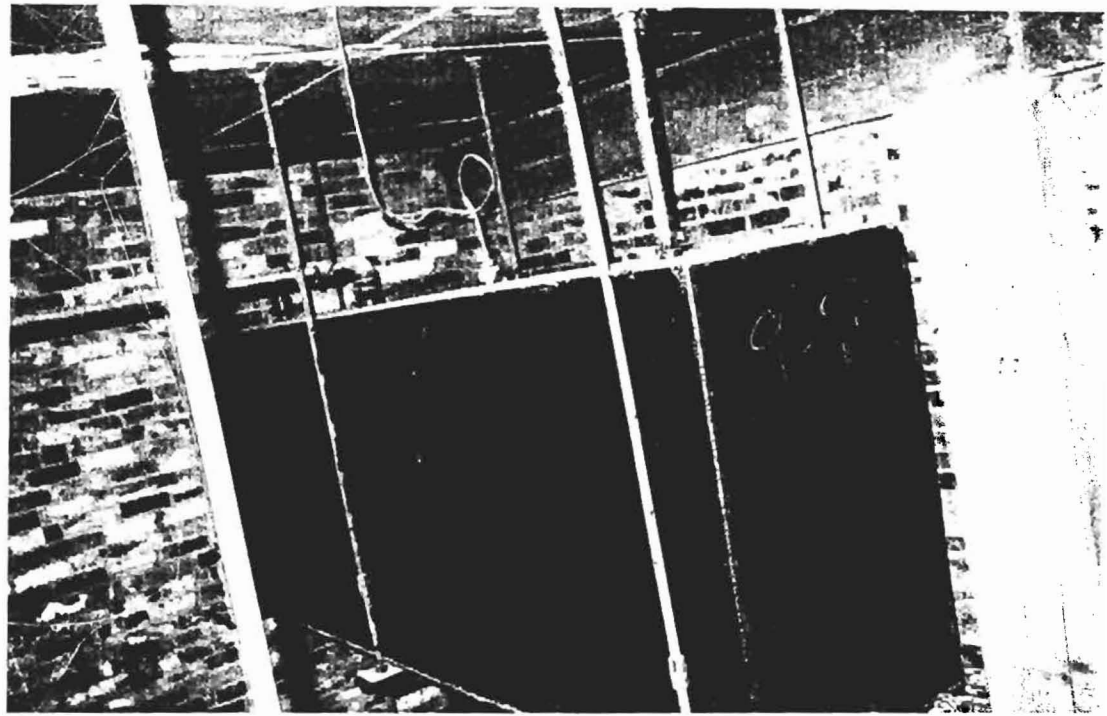
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division 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: Olew Gao

Date: 9/24/08

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



Replace - 280 Gallon D Tank
for Back-up Generator -



State of Maine
Department of Public Safety

Date: 8/12/2008

STATE FIRE MARSHAL'S OFFICE
Above Ground Storage

Site Permit

No. 3749

In accordance with the provisions of R.S., Title 25 Sec. 2441 as amended, permit is hereby granted for the installation of flammable liquid storage at:

Location

Owner

110 FREE STREET

TRAMMEL CROW

110 FREE STREET

2001 ROSS AVENUE

PORTLAND, ME 04101

DALLAS, TX 75201

Tank Number	1	Chamber:	Liquid Description:	Chamber Capacity:
		1	DIESEL	200
Tank Total				200
Site Total:				200

FILE COPY



Maine Department of Public Safety
Office of the State Fire Marshal
52 State House Station
Augusta, Maine 04333-0052

(207) 626-3880 Telephone
(207) 287-6251 Fax
mainefiremarshal.com

Application for a Permit for
Aboveground Storage of
Flammable and Combustible
Liquids

Permit #
Date Issued:
Action: <input type="checkbox"/> Approved per Plan <input type="checkbox"/> Approved per Plan & Inspection <input type="checkbox"/> Denied
By: _____
Date: _____
Fee: Amount: \$ _____ Date Rcd: _____ Check #: _____

Requirements for Aboveground Storage of Flammable and Combustible Liquids are in Title 25 MRSA §2481, et seq., 16-219 CMR Chapter 34 Rules and Regulations for Flammable and Combustible Liquids, NFPA 30 Flammable and Combustible Liquids Code, NFPA 30-A Code for Motor Fuel Dispensing Facilities and Repair Garages, and NFPA 385 Standard for Tank Vehicles for Flammable and Combustible Liquids.

The facility must be built according to the plans and specifications submitted with this application and approved by the Office of the State Fire Marshal. Changes to the plans and specifications must be approved by the Office of the State Fire Marshal before they are implemented.

Plans and Specifications for a facility with an aggregate capacity greater than 1320 gallons must be certified by professional engineer.

Application Fee: \$15. per site, not per tank.

Facility:

Facility Name:	110 FREE STREET	DEP Registration #:
Physical Address:	110 FREE STREET	DEP Registration date:
City:	PORTLAND	County: CUMBERLAND
Facility Telephone #:	772-1333	Contact Person: DWAYNE 756-9828 →
		Contact Telephone #:

Issue Permit To:

Name:	DAVID CROFFORD, PORTLAND PUMP CO.		
Mailing Address:	PO BOX 1180		
City:	SCARBOROUGH	State:	ME
		Zip/Postal Code:	04070

Owner of Tank:

Contact:	MATTHEW HILL, VP	Mailing Address:	2001 ROSS AVE
Name:	TRAMMEL CROW	City:	DALLAS
Physical Address:	SAME	State:	TX
		Zip/Postal Code:	75201
Telephone:	214-863-3304	Country:	<input checked="" type="checkbox"/> USA <input type="checkbox"/> Other (Specify):

Operator of Tank: ☒ Same as Owner of Tank

Contact:		Mailing Address:	
Name:		City:	
Physical Address:	State:	Zip/Postal Code:	
Telephone:		Country:	<input type="checkbox"/> USA <input type="checkbox"/> Other (Specify):

Total Capacity of Facility: _____ US Gallons

Type of Application:

<input checked="" type="checkbox"/> New Aboveground Storage Facility (No existing permit)
<input type="checkbox"/> Change of facility (Attach copy of existing permit)
<input type="checkbox"/> Add tank(s)
<input checked="" type="checkbox"/> Replace tank(s)
<input type="checkbox"/> Remove tank(s)
<input type="checkbox"/> Change Product(s)
<input type="checkbox"/> Change of Ownership
<input type="checkbox"/> If there is no existing permit for the facility, complete the rest of this application.
<input type="checkbox"/> Note changes and corrections to a copy of the existing permit, and submit the changes, corrections, and copy of the existing permit and stop here.
<input type="checkbox"/> Attach a copy of the existing permit to this application and stop here if there are no changes or corrections required other than the owner information.

Use of Facility:

<input type="checkbox"/> Wholesale Oil (Bulk Plant)	<input type="checkbox"/> Chemical Storage
<input type="checkbox"/> Retail Oil (Service Station, Convenience Store, Marina, Airport, et c.)	<input type="checkbox"/> Industrial
<input checked="" type="checkbox"/> Private Fueling	<input type="checkbox"/> Farm
<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> Federal Facility
<input type="checkbox"/> Multiple Family Dwelling (including nursing home)	<input type="checkbox"/> State Facility
<input type="checkbox"/> Public Facilities (including Place of Assembly)	<input type="checkbox"/> Town or School Facility

Facility Siting: *(INSIDE BUILDING)*

Is the facility:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Within 1000 feet of a public water supply?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Within 300 feet of a private water supply?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Within 300 feet of the owner's water supply?
<input type="checkbox"/> Yes <input type="checkbox"/> No	On or above a significant sand or gravel aquifer mapped by the Maine Geological survey?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Near water or a wetland?
<input type="checkbox"/> Yes <input type="checkbox"/> No	In the 100 year flood plain?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Approved under a siting law?

Tank # 1 Page 1 of 2, Set of (Use separate sets for each tank)

Owner of Tank: <u>TRAMMEL CROW</u>		Owner Start Date: <u> </u>
Operator of Tank: <u>"</u>		Operator Start Date: <u> </u>
Nominal Capacity: (US Gallons) <u>200</u>		
Use of Tank: <input type="checkbox"/> Public Fueling <input type="checkbox"/> Automotive <input type="checkbox"/> Aviation <input type="checkbox"/> Marina <input type="checkbox"/> Equipment <input type="checkbox"/> Other: <u> </u> <input type="checkbox"/> Private Fueling <input type="checkbox"/> Automotive <input type="checkbox"/> Aviation <input type="checkbox"/> Marina <input type="checkbox"/> Equipment <input type="checkbox"/> Other: <u> </u> <input type="checkbox"/> Bulk Storage <input checked="" type="checkbox"/> Equipment Supply (Specify): <u>GENERATOR</u> <input type="checkbox"/> Container Storage <input type="checkbox"/> Fuel Production Facility <input type="checkbox"/> Other (Specify): <u> </u>		
Manufacturer of Tank: <u>HIGHLAND</u>		
Tank Material: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Other (Specify): <u> </u>		
Tank Listing: <input type="checkbox"/> UL 80 <input type="checkbox"/> UL 2080 Protected Tank <input type="checkbox"/> Other (Specify): <u> </u> <input type="checkbox"/> UL 142 <input type="checkbox"/> UL 2085 Fire Resistant Tank <input checked="" type="checkbox"/> UL 142 with Secondary Containment <input type="checkbox"/> UL 2085 Tank in Vault		
Orientation of Tank: <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Vertical		
Weather Protection: <input checked="" type="checkbox"/> Inside a building (More than 50% of wall space is enclosed. Building must comply with NFPA 30 4.3.4 and referenced publications) <u>Submit plans and specifications for building with this application.</u> <input type="checkbox"/> Roof with walls (Less than 50% of wall space is enclosed.) <input type="checkbox"/> Roof Only <input type="checkbox"/> None		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the tank in a vault? (A concrete dike is NOT a vault.) <input type="checkbox"/> Yes <input type="checkbox"/> No If the tank is in a vault, is the vault listed? If the vault is listed, specify the listing: <u> </u>		
Type of Secondary Containment: <input checked="" type="checkbox"/> Double Wall Tank <input type="checkbox"/> Dike, Metal <input type="checkbox"/> Dike, Concrete <input type="checkbox"/> Remote Impoundment <input type="checkbox"/> Dike, Earth with Impervious Lining <input type="checkbox"/> None		
Capacity of Dike or Remote Impoundment: <u> </u>		US Gallons
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the tank in a flood zone?		
Security: <input type="checkbox"/> Chain Link Fence Enclosure, no less than 6 feet high, 10 feet from tank. <input type="checkbox"/> Entire property is fenced. <input checked="" type="checkbox"/> Other (Specify): <u>INSIDE BUILDING</u>		Collision Protection: <input type="checkbox"/> Barricades <input type="checkbox"/> Bollards <input checked="" type="checkbox"/> Other (Specify): <u>INSIDE BUILDING</u>
Distance from tank to: Nearest Important Building: <u> </u> Other Tanks (No Less than 3 feet): <u> </u> Property Lines: <u> </u> Dispensers: <u> </u> Nearest Side of a Public Way: <u> </u> <input type="checkbox"/> Tank Mounted Dispenser Opposite Side of a Public Way: <u> </u> Propane Storage (No Less than 20 ft): <u> </u>		

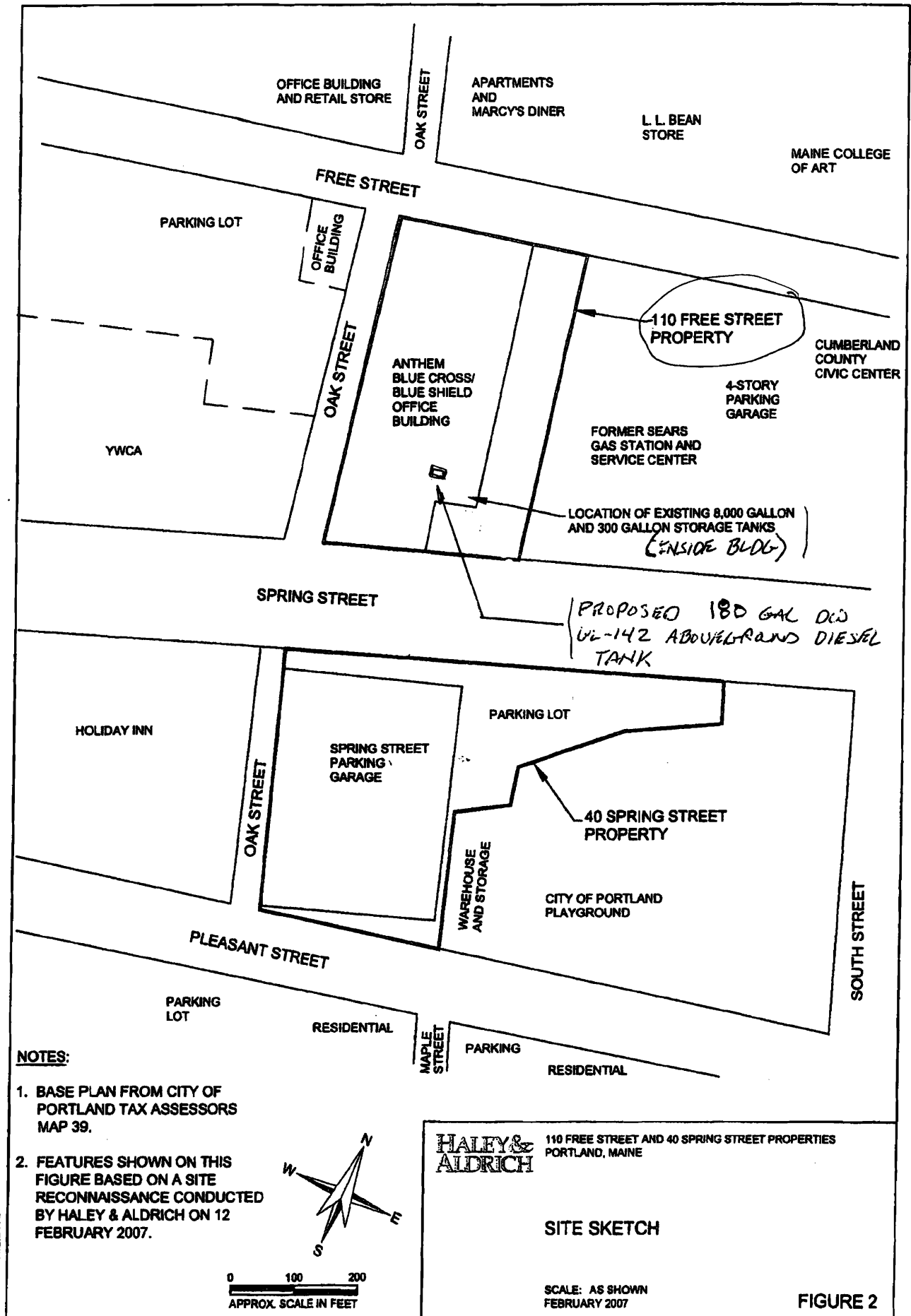
Chamber Information:			
	Chamber 1	Chamber 2	Chamber 3
Capacity	<u>200</u> US Gallons	US Gallons	US Gallons
Is Product Under Pressure?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Normal Vent (size & Type)	<u>2"</u>		
Normal Vent, Height above ground	<u>14'</u>		
Emergency Vent (size & type)	<u>4" OPN</u>		
Is Electrical Wiring Approved for Use in Specified Hazard Area?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Tank # 1 Page 2
Chamber Information, Continued

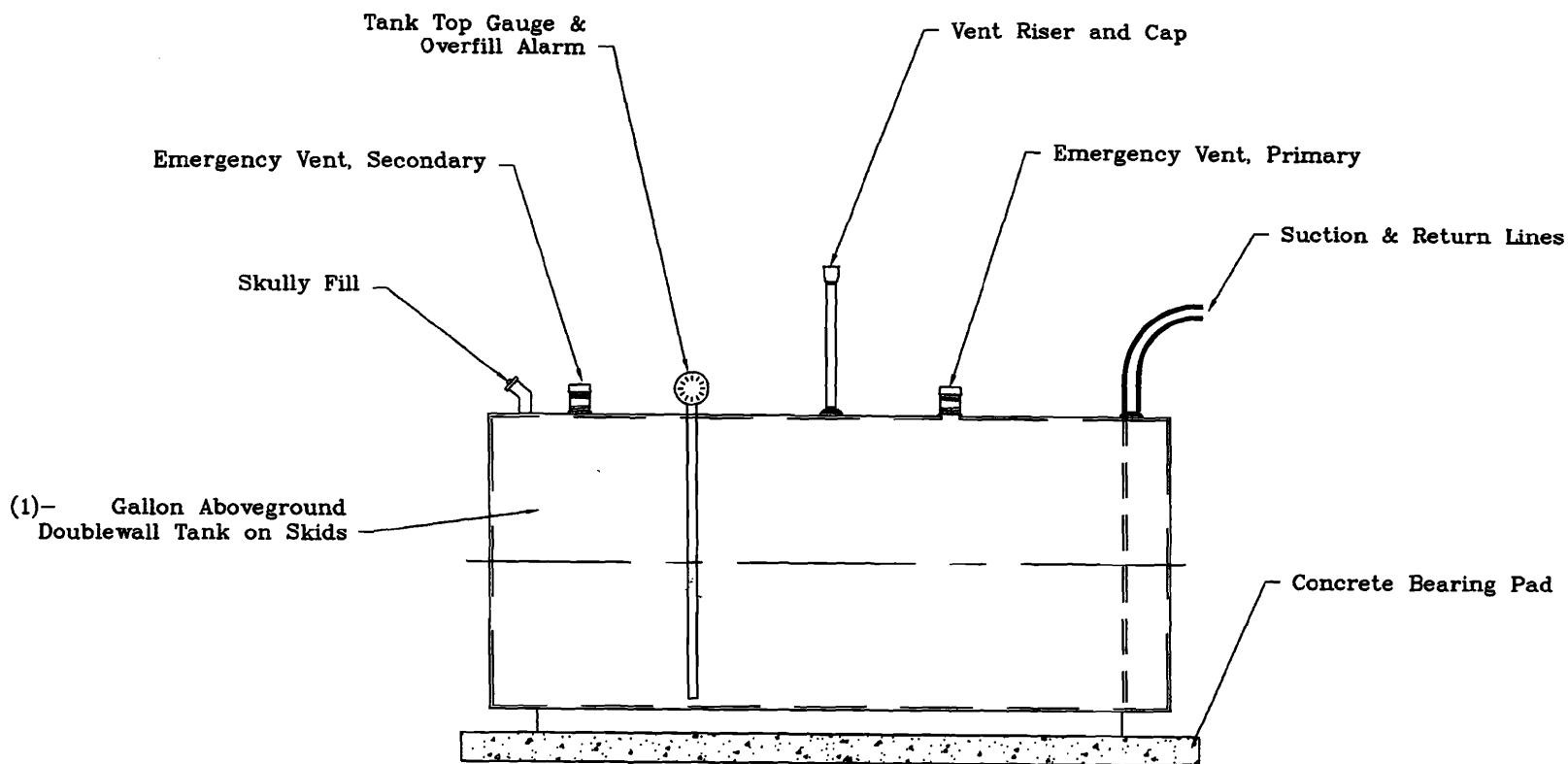
Does Fill Pipe terminate within 6" of the bottom of the tank?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Marking: Product Name (specify): Hazard Classification: NO SMOKING	<u>DIESEL</u> <input type="checkbox"/> Flammable <input checked="" type="checkbox"/> Combustible x Yes	<input type="checkbox"/> Flammable <input type="checkbox"/> Combustible x Yes	<input type="checkbox"/> Flammable <input type="checkbox"/> Combustible x Yes
Product	<input type="checkbox"/> Alcohol <input type="checkbox"/> Antifreeze <input type="checkbox"/> Asphalt <input type="checkbox"/> Biodiesel B-1 B-74 <input type="checkbox"/> Biodiesel B-75 B-99 <input type="checkbox"/> Biodiesel B-100 <input type="checkbox"/> Crude Oil <input checked="" type="checkbox"/> Diesel Fuel <input type="checkbox"/> #2 Fuel <input type="checkbox"/> Gasoline, Aviation <input type="checkbox"/> Gasoline, Leaded <input type="checkbox"/> Gasoline, Plus <input type="checkbox"/> Gasoline, Premium <input type="checkbox"/> Gasoline, Regular <input type="checkbox"/> Jet Fuel <input type="checkbox"/> Kerosene <input type="checkbox"/> Motor Oil <input type="checkbox"/> Vegetable Oil <input type="checkbox"/> Waste Oil <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Alcohol <input type="checkbox"/> Antifreeze <input type="checkbox"/> Asphalt <input type="checkbox"/> Biodiesel B-1 B-74 <input type="checkbox"/> Biodiesel B-75 B-99 <input type="checkbox"/> Biodiesel B-100 <input type="checkbox"/> Crude Oil <input type="checkbox"/> Diesel Fuel <input type="checkbox"/> #2 Fuel <input type="checkbox"/> Gasoline, Aviation <input type="checkbox"/> Gasoline, Leaded <input type="checkbox"/> Gasoline, Plus <input type="checkbox"/> Gasoline, Premium <input type="checkbox"/> Gasoline, Regular <input type="checkbox"/> Jet Fuel <input type="checkbox"/> Kerosene <input type="checkbox"/> Motor Oil <input type="checkbox"/> Vegetable Oil <input type="checkbox"/> Waste Oil <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Alcohol <input type="checkbox"/> Antifreeze <input type="checkbox"/> Asphalt <input type="checkbox"/> Biodiesel B-1 B-74 <input type="checkbox"/> Biodiesel B-75 B-99 <input type="checkbox"/> Biodiesel B-100 <input type="checkbox"/> Crude Oil <input type="checkbox"/> Diesel Fuel <input type="checkbox"/> #2 Fuel <input type="checkbox"/> Gasoline, Aviation <input type="checkbox"/> Gasoline, Leaded <input type="checkbox"/> Gasoline, Plus <input type="checkbox"/> Gasoline, Premium <input type="checkbox"/> Gasoline, Regular <input type="checkbox"/> Jet Fuel <input type="checkbox"/> Kerosene <input type="checkbox"/> Motor Oil <input type="checkbox"/> Vegetable Oil <input type="checkbox"/> Waste Oil <input type="checkbox"/> Other (Specify):
Type of Leak Detection for Tank:	<input type="checkbox"/> Automatic Tank Gauge <input type="checkbox"/> Electronic, Ground Water <input type="checkbox"/> Electronic, Secondary Containment <input type="checkbox"/> Electronic, Vapor <input type="checkbox"/> Groundwater Sampling <input checked="" type="checkbox"/> Manual Monitoring Secondary Containment <input type="checkbox"/> Statistical Inventory Analysis (SIA) <input type="checkbox"/> Other (Specify): <input type="checkbox"/> None	<input type="checkbox"/> Automatic Tank Gauge <input type="checkbox"/> Electronic, Ground Water <input type="checkbox"/> Electronic, Secondary Containment <input type="checkbox"/> Electronic, Vapor <input type="checkbox"/> Groundwater Sampling <input type="checkbox"/> Manual Monitoring Secondary Containment <input type="checkbox"/> Statistical Inventory Analysis (SIA) <input type="checkbox"/> Other (Specify): <input type="checkbox"/> None	<input type="checkbox"/> Automatic Tank Gauge <input type="checkbox"/> Electronic, Ground Water <input type="checkbox"/> Electronic, Secondary Containment <input type="checkbox"/> Electronic, Vapor <input type="checkbox"/> Groundwater Sampling <input type="checkbox"/> Manual Monitoring Secondary Containment <input type="checkbox"/> Statistical Inventory Analysis (SIA) <input type="checkbox"/> Other (Specify): <input type="checkbox"/> None
Type of Pump:	<input type="checkbox"/> Pressure <input checked="" type="checkbox"/> Suction <input type="checkbox"/>	<input type="checkbox"/> Pressure <input type="checkbox"/> Suction <input type="checkbox"/>	<input type="checkbox"/> Pressure <input type="checkbox"/> Suction <input type="checkbox"/>

Piping Information:


Is any of the piping underground?	<u>NO</u>		
Piping is:	<input checked="" type="checkbox"/> Steel <input type="checkbox"/> Other (Specify):		
Type of Leak Detection for Piping:	<input type="checkbox"/> Automatic Tank Gauge <input type="checkbox"/> Groundwater Sampling Electronic <input type="checkbox"/> Groundwater Sampling, Manual <input type="checkbox"/> Vapor, Electronic <input type="checkbox"/> Other (Specify): <u>ABOVE GROUND</u>	<input type="checkbox"/> Secondary Containment, Electronic <input type="checkbox"/> Secondary Containment, Manual Monitoring, <input type="checkbox"/> Statistical Inventory Analysis SIA <input type="checkbox"/> None	
Date Piping Was Installed	<u>TBD</u>		



S:\34210\FIG2.DWG



Elevation View

 PORTLAND PUMP COMPANY FUEL SYSTEM SPECIALISTS	
DWG NO: 1587	JOB NO:
DWN BY: CW	SHEET NO. 1 OF 1
SCALE: Shown	DATE:
110 Free St, Portland	