

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

Location of Construction: 315-407 Commercial St		Owner: Union Oil	Phone:	Permit No: 970635
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: JUN 20 1997 CITY OF PORTLAND </div>
Contractor Name: Portland Pump	Address: P.O. Box 1180, Scarborough, ME 04074	Phone: 883-4317		
Past Use: Gas Station	Proposed Use: Same	COST OF WORK: \$	PERMIT FEE: \$ 65.00	Zone: CBL: 042-C-001
		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type:	Zoning Approval: 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"/>
Proposed Project Description: Remove 3 underground tanks Install 2 underground tanks/2-11,000 gallon		Signature:	Signature:	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		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
		Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>	Date:	
Permit Taken By: Mary Greshk	Date Applied For: 19 June 1997			Historic Preservation <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review

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 David Croxford	ADDRESS:	DATE: 19 June 1997	PHONE:
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE			PHONE:

CEO DISTRICT



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JUN 20 1997
CITY OF PORTLAND

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WITH REQUIRED FEES

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- 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: 6/19/97
D.A.

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SIGNATURE OF APPLICANT *[Signature]* David Croxford ADDRESS: _____ DATE: 19 June 1997 PHONE: _____

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

CEO DISTRICT 2
A. Bone

FIRE CODE PERMIT REPORT

DATE: 6/20/97 ADDRESS: 315-407 Commercial StPERMIT TO: Portland Pump

OWNER/CONTRACTOR: _____

APPROVED ✓ ~~DENIED~~ _____CONDITIONS OF APPROVAL/DENIAL

1. The boiler or furnace shall be protected by enclosing with one hour fire rated construction including fire doors and ceiling or by providing automatic extinguishment and smoke protected enclosure. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide a 0.15 gpm, per square foot of floor throughout the entire area. An indicating shut-off valve shall be installed in an accessible location between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
2. All required Fire Alarm Systems shall have the capability of "Zone Disconnect" via switches or key pad program provided the method is approved by the Fire Prevention Bureau.
3. All remote annunciators shall have a visible "trouble" indicator along with the Fire Alarm "Zone" indicators.
4. Any Master Box connected to the Municipal Fire Alarm System shall have a supervised Municipal Disconnect Switch.
5. All Master Box locations shall be approved by the Fire Department Director of Communications. A Master Box shall be located so that the center of the box is five feet above finished floor.
6. All Master Box locations are required to have a locked box (knoxbox).
7. A fire alarm acceptance report shall be submitted to the Portland Fire Department.
8. All underground tank removal(s) and/or installation(s) shall be done in accordance with the Department of Environmental Regulations (Chapter 691).
9. No cutting of tanks on site. Cutting of tanks is to be done at an approved tank disposal site.
10. Fire Dispatcher must be at least 48 hours in advance of removal and/or transportation of tanks.
11. All above ground L.P storage tanks shall be located in accordance with NFPA 58 Standards.
12. Any tank located near the path of vehicle movement shall be protected with appropriate permanent barricades.

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: UNION OIL CO.
Mailing Address: PO BOX 2523 Telephone #: 799-1521
City: SO BRUNSWICK State: ME Zip Code: 04116
Contact Person (name, address & telephone #): GREG SHAPIRO
SAME AS ABOVE
Name of Facility: UNION OIL COMPANY Registration #: 5320
Facility Location (town & street): 315 COMMERCIAL ST. BRUNSWICK, ME

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

Tank #	Tank Age	Tank Size (gallons)	Type of Product Stored
1	?	10,000	MOTOR FUEL GAS
2	?	10,000	" " GAS
3	?	10,000	" " DIESEL

2. Directions to this facility (be specific):

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

Tank Installer's Name: FRANK CORTELLI Certification Number: 106 Signature: [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):

ACAOA ENVIRONMENTAL

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

DETLAND PUMP CO. 1-800-642-7867

6. Expected date of removal (month/day/year): 6/6/97

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

Date: 5/23/97 Signature: [Signature]

Printed Name and Title: DAVID W. CROFT, S.M.

**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)

STATE USE ONLY
DATE OF REGISTRATION ____/____/____

1. **REGISTRATION NUMBER:** _____
 (Complete Only If A Registration Has Been Previously Assigned By
 The Department Of Environmental Protection.)

2. **FACILITY INFORMATION:**

A. Name of Facility: UNION OIL COMPANY

B. Street Address of Facility: 315 COMMERCIAL ST

C. Town/City where facility is located: PORTLAND, ME 04101

D. Mailing Address: SAME
 _____ Maine _____

E. Telephone: 799-1521

F. Directions to Facility: 295 TO WATER FRONT exit onto
Commercial ST

G. Are any planned or existing tank(s) (including piping and pumps) within 1000 feet of a public water supply source? Yes _____ No ✓

H. Are any planned or existing tank(s) (including piping and pumps) within 300 feet of a private water supply source? Yes _____ No ✓

I. (Complete if the answer to (H) 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 _____

J. Is the facility located on a sand and gravel aquifer or recharge area as mapped by the Maine Geological Survey? Yes _____ No ✓

K. Is the facility located within 250 feet of a fresh or salt water body or wetland?
 Yes _____ No ✓

L. Is the facility located within a 100 year flood plain? Maps are available at most municipal offices.
 Yes ✓ No _____

6. INDIVIDUAL TANK DATA: Complete for each tank

A. Tank Type A. = Steel bare or Asphalt Coated C. = Cathodic - Single Wall E. = Fiberglass - Single Wall G. = Fiberglass - Double Wall J. = Composite w/Cathodic Double Wall K. = Composite w/Secondary Containment V. = Jacketed Double Wall W. = Cathodic Steel Double Wall N. = Other	D. Form of Leak Detection Tank 0. = Unknown 1. = Continuous Electronic GroundWater 2. = Continuous Electronic Vapors 3. = Secondary Containment 4. = Manual Groundwater Sampling 5. = Automatic Tank Gauge 6. = Inline Leak Detector 7. = Secondary Containment - Continuous Electronic 8. = Secondary Containment - Manual Monitoring 9. = SIA Statistical Inventory Analysis 10. = None	G. Tank Status A. = Planned B. = Active C. = Out of Service D. = Abandon in Place (Filled) E. = Planned for Removal F. = Removed (Date)
B. Piping Type (same code as tank) or D. = Steel w/secondary O. = Copper X. = Flexible Single Wall Y. = Flexible - Double Wall Z. = Copper w/secondary	E. Product Stored 1. = Kerosene 2. = #2 Fuel Oil 5. = #5 Fuel Oil 19. = Unleaded Plus 23. = Unleaded 24. = Aviation 25. = Jet Fuel 28. = Unleaded Premium 29. = Diesel 81. = Waste Oil 99. = Other (Please specify)	H. = System Type: (1) Suction (2) Pressure (3) Suction & Return
C. Tank Size Size of Tank in gallons	F. Date	I. Pipe Leak Detection (Use same Code as Tank except): 9. = Annual Tightness Test
J. Overfill & Spill 1. = Automatic Shutoff (95% capacity) 2. = Automatic Alarm 90% Capacity 3. = Overfill Spill Container (3 gallon)		

TANK 1:

A. V B. Y C. 12,000 D. 3+5+7 E. 23 F. _____ G. A H. 2 I. 3+5+7 J. 1+3

TANK 2:

A. V B. Y C. 8,000 D. 3+5+7 E. 29 F. _____ G. A H. 2 I. 3+5+7 J. 1+3

TANK 3:

A. V B. Y C. 4,000 D. 3+5+7 E. 28 F. _____ G. A H. 2 I. 3+5+7 J. 1+3

} Split Tank

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 Remediation and Waste Management, 17 State House Station, Augusta, Maine 04333-0017).

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

Fee Computation: _____ # tank(s) at \$35.00 per tank = \$ _____

Motor fuel stored in a non-conforming tank is subject to an additional annual fee.

8. MAKE TWO (2) COPIES OF THIS FORM. Submit the original to the Department of Environmental Protection (Bureau of Remediation and Waste Management, 17 State House Station, Augusta, Maine 04333-0017). Send one (1) copy to the local Fire Department having jurisdiction. Retain the third copy for your records. For new and replacement tank(s), registration(s) 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: ARTHUR GRANT

B. Installer ID Number: 021 Date to be Installed: 6/30/97

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 his registration with the Department of Environmental Protection immediately upon any change of information contained in this form.

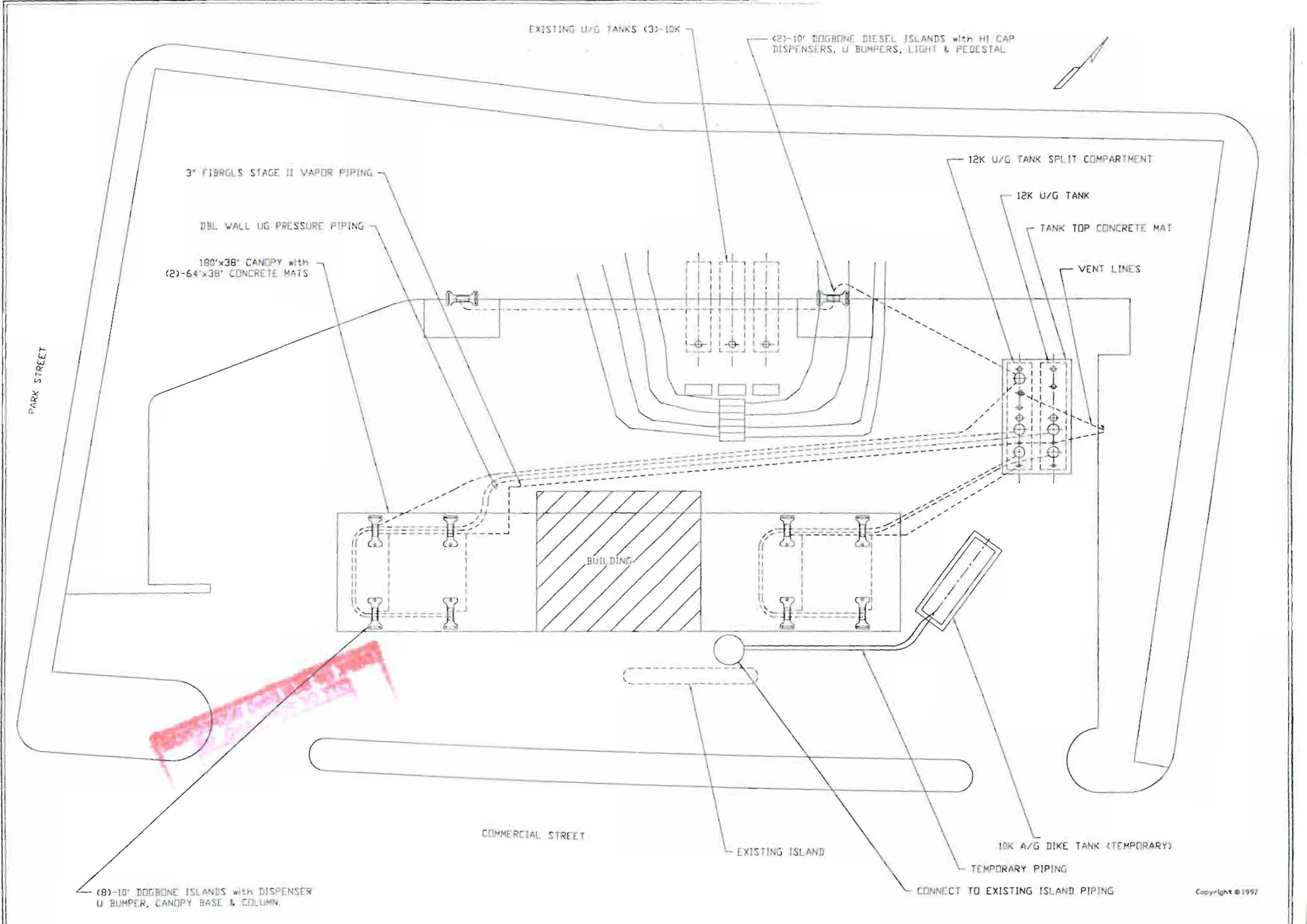
6/11/97
Date

PORTLAND PUMP CO. (AGENT)
Owner or Authorized
Employee of the Owner

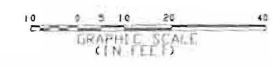
Title (Please print or type)

Del W. Cuff
Signature

G.M
Title



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Commercial Street Proposed Fuel System		PORTLAND PUMP COMPANY PETROLEUM SYSTEMS	JOB NO
DWG NO 97017-P	DRAWN CW	SHEET NO 1 OF 1	DATE 1/21/97
SCALE Shown	DATE 1/21/97		