

Form # P 04

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

Please Read  
Application And  
Notes, If Any,  
Attached

**PERMIT ISSUED**  
Permit Number: 041841  
**DEC 20 2004**  
**CITY OF PORTLAND**

This is to certify that City Of Portland/Cianbro Co  
has permission to Partial Demolition of the International Marine Terminal  
AT 454 Commercial St 043 D005001

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 work on permit in progress before this building or part thereof is closed or closed-in.  
**48 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. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_

[Signature] 12/21/2004  
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: 04-841	Issue Date: <b>PERMIT ISSUED</b> DEC 21 2004	CBL: 043 D005001
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<b>Location of Construction:</b> 454 Commercial St	<b>Owner Name:</b> City Of Portland	<b>Owner Address:</b> 389 Congress St	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Cianbro Corp.	<b>Contractor Address:</b> 328 W. Commercial Street Portland	<b>Phone:</b> 2077733852
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Demolitions	<b>Zone:</b> WPDZ

<b>Past Use:</b> Commercial Office warehouse Scotia Prince	<b>Proposed Use:</b> Partial Demolition of the International Marine Terminal	<b>Permit Fee:</b> \$2,046.00	<b>Cost of Work:</b> \$225,000.00	<b>CEO District:</b> 2
<b>Proposed Project Description:</b> Partial Demolition of the International Marine Terminal		<b>FIRE DEPT:</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	<b>INSPECTION:</b> Use Group: <i>Demo</i> Type: <i>12/21/04</i> Signature: <i>[Signature]</i>	
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
		Signature:	Date:	

<b>Permit Taken By:</b> Idobson	<b>Date Applied For:</b> 12/16/2004	<b>Zoning Approval</b>		
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<b>Special Zone or Reviews</b> <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"/> <i>all with conditions</i> Date: <i>12/16/04</i>	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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:
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**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

# All Purpose Building Permit Application for Demolition of A Structure

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.

Total Square Footage of Proposed Structure	Square Footage of Lot
<b>CITY OF</b>	
Lessee/Buyer's Name (If Applicable) <b>43 D 005</b>	Applicant name, address & telephone: <b>ATTN: PAUL BRADBURY 1001 WESTBROOK ST PORTLAND ME 04102</b>
cost Of Work: \$ <b>225,000</b> Fee: \$ _____	
Current use: <b>WAREHOUSE &amp; OFFICE SPACE FOR SCOTIA PRINCE</b>	
If the location is currently vacant, what was prior use: _____	
Approximately how long has it been vacant: _____	
Project description: <div style="border: 1px solid black; padding: 5px; display: inline-block; transform: rotate(-15deg);">                 OFFICE OF BUILDING INSPECTION                  CITY OF PORTLAND, ME                  DEC 16 2004  <b>RECEIVED</b> </div>	
<b>DEMOLITION CALL LIST MUST BE SUBMITTED WITH THIS APPLICATION</b>	
Contractor's name, address & telephone: <b>CIARRO CORPORATION</b>	
<b>ATTN: TROY G. MARTIN P.O. BOX 1000 ONE HUNNEWELL SQUARE</b>	
<b>PITTSFIELD, MAINE 04967 207-487-3311</b>	
Whom should we contact when the permit is ready: <b>PAUL BRADBURY</b>	
Mailing address: <b>1001 WESTBROOK ST</b>	
<b>PORTLAND, ME 04102</b>	
Phone: <b>207-756-8000</b>	

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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>12.15.04</b>
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**This is not a permit, you may not commence ANY work until the permit is issued. This is for residential demolition. Commercial demolition will require other types of permitting along with this permit, please inquire with support staff**

**City of Portland  
Inspection Services Division  
Demolition Call List and Requirements**

*INTERNATIONAL MARINE TERM*

Site Address: COMMERCIAL STREET Owner: CITY OF PORTLAND

Structure Type: STEEL FRAME / CORRUGATED STEEL SIDING Contractor: CIANBRO CORP

<u>UTILITY APPROVALS</u>	<u>NUMBER</u>	<u>CONTACT NAME/DATE CONTACTED</u>
Central Maine Power	1-800-750-4000	<u>SERVICE NOT CHANGED N/A</u>
Verizon	1-800-941-9900	<u>SERVICE NOT CHANGED N/A</u>
Northern Utilities	797-8002 ext 6241	<u>RICK BELLEMBRE 11-16-04</u>
Portland Water District	761-8310	<u>JAY HEWITT 11-23-04</u>
Time Warner Cable Co.	253-2222	<u>N/A No CHANGE TO SERVICE</u>
Dig Safe ***	1-888-344-7233	<u>12-14-04 BY SHAW BROS Const.</u>

\*\*\*(After Call, There is a wait of 72 Business Hours before digging can begin)

<u>CITY APPROVALS</u>	<u>NUMBER</u>	<u>CONTACT NAME/DATE CONTACTED</u>
DPW/ Traffic Division	874-8891	<u>(L. Cote) 12-15-2004 (VIA EMAIL)</u>
DPW/ Forestry Division	874-8389	<u>(J. Tarling) 12-15-2004</u>
DPW/ Sealed Drain Permit	874-8822	<u>(C. Merritt) 12-15-2004</u>
Building Inspections ( Insp. Req'd.)	874-8703	<u>M'KE NUGENT 11-18-2004</u>
Historic Preservation	874-8726	<u>DEB ANDREWS 12-15-2004</u>
Fire Dispatcher	874-8576	<u>LT McDougall 11-18-2004</u>
DEP - Environmental (Augusta)	287-2651	<u>(BLANET) SANDRA MOODY 12-15-2004</u>

U.S. EPA Region 1 - No Phone call required. Just mail copy of State notification to:

Demo / Reno Clerk  
US EPA Region I (SEA)  
JFK Federal Building  
Boston, MA 02203

**ADDITIONAL REQUIREMENTS:**

- 1) Written Notice to Adjoining Owners: Only when written notice has been given by the Applicant to the owners of adjoining lots will a demolition permit be issued. Provide a list of those notified and a copy of the notification sent with your completed application.**
- 2) A Photo of the Structure(s) to be demolished must be submitted with your application.**
- 3) Certification From an Asbestos Abatement Company that the building is asbestos-free may be required as per state law notification form attached.**

I have contacted all of the necessary companies / departments as indicated above and attached all required documentation.

Signed: Paul Brack

Date: 12-15-04



CITY OF PORTLAND  
BUILDING CODE CERTIFICATE  
389 Congress St., Room 315  
Portland, Maine 04101

TO: Inspector of Buildings City of Portland, Maine  
Department of Planning & Urban Development  
Division of Housing & Community Service

FROM: Portland International Jetuort

RE: Certificate of Design

DATE: 12-6-34

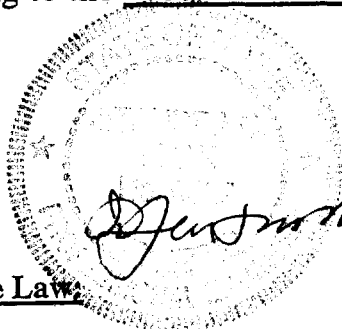
These plans and / or specifications covering construction work on:

Partial demolition of Marine Terminal Structural, Commercial Street, Portland.

Maine.

Have been designed and drawn up by the undersigned, a Maine registered Architect / Engineer according to the 2003 International Building Code and local amendments.

(SEAL)



Signature: *Justin Conn*

Title: Structural Department Manager

Firm: Maquire Group Inc.

As per Maine State Law:

\$50,000.00 or more in new construction, repair expansion, addition, or modification for Building or Structures, shall be prepared by a registered design Professional.

Address: 400 Commercial Street  
Portland, ME 04101

Note: This is mostly a demolition project and items described below are not applicable to the project. Except demolition, the work is of a minor nature and special inspections are not warranted for this project.

FROM DESIGNER: Maguire Group Inc.

DATE: 12-6-04

Job Name: Partial Demolition of Marine Terminal Structure

Address of Construction: Commercial Street, Portland, Maine

**2003 International Building Code**

Construction project was designed according to the building code criteria listed below:

Building Code and Year \_\_\_\_\_ Use Group Classification(s) \_\_\_\_\_

Type of Construction \_\_\_\_\_

Will the Structure have a Fire suppression system in Accordance with Section 903.3.1 of the 2003 IRC \_\_\_\_\_

Is the Structure mixed use? \_\_\_\_\_ if yes, **separated** or non separated (see Section 302.3) \_\_\_\_\_

Supervisory alarm system? \_\_\_\_\_ Geotechnical/Soils report required? (See Section 1802.2) \_\_\_\_\_

STRUCTURAL DESIGN CALCULATIONS

\_\_\_\_\_ Submitted for all structural members  
(108.1, 106.1.1)

DESIGN LOADS ON CONSTRUCTION DOCUMENTS (1603)

Uniformly distributed floor live loads (1603.1.1, 1607)

Floor Area Use	Loads Shown
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Wind loads (1603.1.4, 1609)

\_\_\_\_\_ Design option utilized (1609.1.1, 1609.6)

\_\_\_\_\_ Basic wind speed (1609.3)

\_\_\_\_\_ Building category and wind importance factor,  $I_w$  (Table 1604.5, 1609.5)

\_\_\_\_\_ Wind exposure category (1609.4)

\_\_\_\_\_ Internal pressure coefficient (ASCE 7)

\_\_\_\_\_ Component and cladding pressures (1609.7.1, 1609.6.2.2)

\_\_\_\_\_ Main force wind pressures (1609.7.1, 1609.6.2.1)

Earthquake design data (1603.1.5, 1614 - 1623)

\_\_\_\_\_ Design option utilized (1614.7)

\_\_\_\_\_ Seismic use group ("Category") (Table 1604.6, 1616.2)

\_\_\_\_\_ Spectral response coefficients,  $S_{DS}$  &  $S_{D1}$  (1615.1)

\_\_\_\_\_ Live load reduction (1603.1.7, 1607.9, 1607.10)

\_\_\_\_\_ Roof live loads (1603.1.2, 1607.11)

\_\_\_\_\_ Roof snow loads (1603.1.3, 1608)

\_\_\_\_\_ Ground snow load,  $P_g$  (1608.2)

\_\_\_\_\_ If  $P_g > 10$  psf, flat-roof snow load,  $P_f$  (1608.3)

\_\_\_\_\_ If  $P_g > 10$  psf, snow exposure factor,  $C_e$  (Table 1608.3.1)

\_\_\_\_\_ If  $P_g > 10$  psf, snow load importance factor,  $I_s$  (Table 1604.5)

\_\_\_\_\_ Roof thermal factor,  $C_t$  (Table 1608.3.2)

\_\_\_\_\_ Sloped roof snowload,  $P_s$  (1608.4)

\_\_\_\_\_ Seismic design category (1616.3)

\_\_\_\_\_ Basic seismic-force-resisting system (Table 1617.6.2)

\_\_\_\_\_ Response modification coefficient,  $R$ , and deflection amplification factor,  $C_d$  (Table 1617.6.2)

\_\_\_\_\_ Analysis procedure (1616.6, 1617.5)

\_\_\_\_\_ Design base shear (1817.4, 1617.5.1)

Flood loads (1603.7.6, 1612)

\_\_\_\_\_ Floodhazard area (1612.3)

\_\_\_\_\_ Elevation of structure

Other loads

\_\_\_\_\_ Concentrated loads (1607.4)

\_\_\_\_\_ Partition loads (1607.5)

\_\_\_\_\_ Impact loads (1607.6)

\_\_\_\_\_ Misc. loads (Table 1607.6, 1607.6.1, 1607.7, 1607.12, 1607.13, 1610, 1611, 2404)



# Maine Department of Environmental Protection

Asbestos/Lead Unit

17 State House Station

Augusta, Me 04333-0017

Tel (307) 287-2651 FAX (207) 287-7826



## Building Demolition Notification Form (BDNF)

### A) Pre-Demolition Building Inspection and Abatement Information

**Important Notice: This Notification is Required by Law**  
**prior to demolition of any building except residential buildings with less than 5 units**

**Federal Law** requires that prior to demolition "regulated facilities" be inspected for asbestos, that certain work practices be followed for larger projects (>160 square/260 linear feet), and that notification be provided to DEP. "Regulated facilities" include institutional, commercial, public, or industrial buildings, and residential buildings with 5 or more units.

**Maine Law** requires, prior to demolition, the removal of more than 3 square feet or 3 linear feet of friable asbestos by an asbestos firm licensed by the DEP. Notification of removal activities and removal standards are also required.

**Demolition** means the tearing down or intentional burning of a building or part of a building.

Municipalities are requested to have applicants for demolition permits complete this form prior to the issuance of a demolition permit. A municipality may wish to consider whether it should issue a demolition permit to an applicant for a "no" answer to any of the questions below. Please call (207) 287-2651 with any questions.

*Please answer all questions:*

- yes  no Is this a residential building with less than 5 units?
- yes  no Has the building been inspected by a DEP licensed asbestos consultant?"
- yes  no If asbestos was found, has a 10day notification of abatement activities sent to the DEP?\*
- yes  no  n/a Has the asbestos (if any) been removed by a DEP licensed asbestos contractor?

**Notes:** \*Residential dwellings with less than five units are exempt from notification and inspection requirements

\*\*This form constitutes notification when asbestos is not present in the building being demolished.

property address:	asbestos survey performed by: (name & address) MARK P. COLEMAN ESH ASSOCIATES 5 DELTA DRIVE WESTBROOK, ME 04092 telephone: 207 654-2711
telephone:	
property owner: (name & address) CITY OF PORTLAND	asbestos abatement contractor: (name & address) BIOSAFE ENVIRONMENTAL 5 DELTA DRIVE WESTBROOK, ME 04092 telephone: 207 654-5262
telephone:	
demolition contractor: (name & address)	demolition start date:
	demolition end date:
telephone:	building type: (commercial, residential, etc.) COMMERCIAL

Once filled out, please fax or mail immediately to DEP

Original to DEP

Copy to Municipality

Copy to Owner or Operator

REVISED JANUARY 2002



*State of Maine*  
*Department of Environmental Protection*



# LICENSE

This Certifies That

**BIOSAFE ENVIRONMENTAL SERVICES, INC.**

Has Been Licensed As

**AN ASBESTOS ABATEMENT CONTRACTOR (FULL)**

**CF-0100**

License Number

**08/31/2005**

Expiration Date





*State of Maine*  
*Department of Environmental Protection*



# LICENSE

This Certifies That

**ENVIRONMENTAL SAFETY & HYGIENE ASSOCIATES, INC.**

Has Been Licensed As

**AN ASBESTOS CONSULTANT (FULL)**

**SF-0005**

License Number

**01/31/2005**

Expiration Date



*State of Maine*  
*Department of Environmental Protection*



# LICENSE

This Certifies That

**ENVIRONMENTAL SAFETY & HYGIENE ASSOCIATES, INC.**

Has Been Licensed As

**AN ASBESTOS ANALYTICAL LABORATORY(AIR ANALYSIS)**

**LA-0052**

License Number

**11/30/2004**

Expiration Date



DEPARTMENT OF ENVIRONMENTAL PROTECTION

JOHN ELIAS BALDACCI  
GOVERNOR

April 5, 2004

**BioSafe Environmental Services**  
5 Delta Drive  
Westbrook, ME 04092

State of Maine

Mark D. Coleman



Cert No AA-0042  
Expiration Date  
Trn Exp Date 04/02/2005



Dear Licensee:

Asbestos application(s) for individual certification of the **one** employee(s) listed below have been received and **approved**. Individual certification numbers are listed below and wallet card(s) are enclosed. Card(s) are property of the individual to whom each is issued. Your responsibility as a licensee is to ensure delivery of the cards to persons in your employment. This letter should be retained for your company files as record of certification.

**Remember**, in Maine all **certified employees** working on an asbestos abatement project, whether conducting removal/repair, air monitoring, design, inspection, or analysis functions, **must work for a State of Maine licensed asbestos firm** and carry his/her wallet card(s) on the job site.

As a reminder, prior to renewing your asbestos certification, the State of Maine **requires** an annual refresher course to be taken before submitting a renewal application. A certificate shall expire one year From the last day of the month from the date of issuance, **or on the last day of the month that the training certificate expires**, whichever is sooner. A listing of training providers is attached and it is your responsibility to ensure you have completed a renewal training course prior to your training expiration date.

Thank you for your cooperation and your completed application(s).

<u>Name</u>	<u>Category</u>	<u>Certification #</u>	<u>Exp. Date</u>
Mark D. Coleman	Air Analyst	<b>AA-0042</b>	04/30/2005

Sincerely,

Sandra J. Moody, Environmental Technician  
Division of Solid Waste Management  
Bureau of Remediation and Waste Management

AUGUSTA  
17 STATE HOUSE STATION  
AUGUSTA, MAINE 04333-0017  
(207) 287-7658  
RAY BLDG., HOSPITAL ST.

BANGOR  
106 HOGAN ROAD  
BANGOR, MAINE 04401  
(207) 941-4570 FAX: (207) 941-4584

PORTLAND  
312 CANCO ROAD  
PORTLAND, MAINE 04103  
(207) 822-6300 FAX: (207) 822-6300

FRESQUE ISLE  
1235 CENTRAL DRIVE, SKYWAY PARK  
FRESQUE ISLE, MAINE 04769-2094  
(207) 764-0477 FAX: (207) 764-1507



JOHN ELIAS BALDACCI  
GOVERNOR  
June 7, 2004

DAWN R. GALLAGHER  
COMMISSIONER

**Environmental Safety & Hygiene**

5 Delta Drive  
Westbrook, ME 04092

Dear Licensee;

Asbestos application(s) for individual certification of the **two** employee(s) listed below have been received and **approved**. Individual certification numbers are listed below and wallet card(s) **are** enclosed. Card(s) are property of the individual to whom each is issued. Your responsibility as a licensee is to ensure delivery of the cards to persons in your employment. This letter should be retained for your company files as record **of** certification.

**Remember**, in Maine all **certified employees** working on an asbestos abatement project, whether conducting removal/repair, air monitoring, design, inspection, or analysis functions, **must work for a State of Maine licensed asbestos firm** and carry his/her wallet card(s) on the job site.

**As** a reminder, prior to renewing your asbestos certification, the State of Maine **requires** an annual refresher course to be taken before submitting a renewal application. **A** certificate shall expire one year from the last day of the month from the date of issuance, **or on the last day of the month that the training certificate expires**, whichever **is** sooner. **A** listing of training providers is attached and it is your responsibility to ensure you have completed a renewal training course prior to your training expiration date.

Thank you for your cooperation and your completed application(s).

<u>Name</u>	<u>Category</u>	<u>Certification #</u>	<u>Exp. Date</u>
Mark P. Coleman	Inspector	AI-0038	05/31/2005
Mark P. Coleman	Management Planner	MP-0074	05/31/2005

Sincerely,

Sandra J. Moody, Environmental Technician  
Division of Solid Waste Management  
Bureau of Remediation and Waste Management  
Enclosure

AUGUSTA  
17 STATE HOUSE STATION  
AUGUSTA, MAINE 04333-0017  
(207) 287-7688  
RAY BLDG., HOSPITAL ST.

BANGOR  
106 HOGAN ROAD  
BANGOR, MAINE 04401  
(207) 941-4570 FAX: (207) 941-4564

PORTLAND  
312 CANCO ROAD  
PORTLAND, MAINE 04103  
(207) 822-6300 FAX: (207) 822-6303

PRESQUE ISLE  
1235 CENTRAL DRIVE, SKYWAY PARK  
PRESQUE ISLE, MAINE 04769-2094  
(207) 764-0477 FAX: (207) 764-1507

**Asbestos  
Project  
Notification**

2004 Revision

State of Maine  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-7826

**FORM  
N**  
Page 1 of 3

BIO 04-04-216	<input type="checkbox"/> Standard (O)	<input checked="" type="checkbox"/> Demolition (D)	(Check all that apply)
	<input type="checkbox"/> Facility O&M (Annual)	<input type="checkbox"/> Renovation (R)	
	<input checked="" type="checkbox"/> Emergency (E)	<input type="checkbox"/> Repair	<input checked="" type="checkbox"/> Standard (S)
	<input type="checkbox"/> Courtesy (Not Regulated)		<input checked="" type="checkbox"/> Notification Waiver (10 day)

**5. Asbestos Contractor**  
 Name . BIOSAFE ENVIRONMENTAL SERVICES  
 Address 5 DELTA DRIVE  
 City WESTBROOK State MAINE Zip 04092  
 Contact MARK P. COLEMAN  
 Tel 207.854.5262 Fax 207.854.2609

**6. Facility Owner**  
 Name CITY OF PORTLAND  
 Mailing Address 389 CONGRESS ST  
 City PORTLAND State MAINE Zip 04103  
 Contact LARRY MEAD  
 Tel 474-4688 Fax

**7. Facility Location (Where removal is to take place)**  
 BLDG Name INTERNATIONAL AIR MARRIAGE TERMINAL  
 Floor and/or Rm.# 2ND FLOOR OFFICE  
 Physical Address COMMERCIAL ST  
 City PORTLAND State MAINE Zip 04103

**8. Facility Description**  
 Present Use VACANT  
 Prior Use OFFICE  
 BLDG Size 50,000 Sq Ft No. Floors 2  
 BLDG Age 60 Y

**9. Notification Fees (Required fees must accompany notification)**  
 \$100.00 = ACM amounts 100 Sq Ft/100 LnFt to 1000 Sq Ft/5000 LnFt.  
 \$200.00 = ACM mounts greater than 1000 Sq Ft/5000 LnFt.  
 Not Required or Not Included (Complete Block #9A)

**9A. Notification Fee Not Included**  
 Single family home exemption  
 ACM amount less than 100 Sq Ft/100 LnFt  
 Fees paid quarterly (Non-Scheduled O&M only)  
 BGS exemption

**10. Project Work Hours**  
 AM to PM (Show actual hours)  
 Weekdays (Check all that apply)  
 M  T  W  T  F  
 Weekend (Check all that apply)  
 Sat Sun

Project Start Date 12/7/04 Project Completion Date 12/9/04  
 ACM Removal Dates (from) SAME (to) SAME

ACM Type	Amount	Measurement
VAT 12" x 12"	240	SqFt 4 LnFt
TERMINAL	120	SqFt 4 LnFt
		SqFt LnFt
		SqFt LnFt
		SqFt LnFt
		SqFt LnFt

**ME DEP USE ONLY**  
 Postmark/ FAX/ hand delivered  
 Date Received  
 Check #  
 NESHAP  
 State  
 Variance

**Asbestos  
Project  
Notification**

**State of Maine**  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (107) 287-2651 FAX (207) 287-7826

**FORM  
N**  
Page 2 of 3

2004 Revision

Project Code

BIO 04 - 216

13. Demolition (complete as applicable)

Ordered demolition (structurally unsound) by State or local government (attach copy of order and name of professional engineer who determined building structurally unsound)

All other demolitions

Demolition Dates: \_\_\_\_\_ to \_\_\_\_\_

**14. Procedure Used to Detect Presence of Asbestos**

Testing  Assumed Positive  Tested Positive

Method  PLM  TEM

Sampled By ESHA - M. COLEMAN  
(Print Name)

Company \_\_\_\_\_

**15. Project Clearance**

Visual evaluation by: (Air Monitor (if known) and Company)

EMI

Air Clearance by: (Air Monitor (if known) and Company)

EMI

Note: Whenever building materials are assumed to contain asbestos, signed bulk sampling disclosure forms must be at the asbestos abatement project site and available for review by the Department.

16. Asbestos Abatement Methods (check all that apply & submit variance request (Form V) if required)

Regulated area with containment consisting of 2-layers 4 mil poly on walls & ceiling & 2 layers 6 mil poly on floors

Regulated area with containment consisting of 1-layer 6 mil poly on walls & ceiling & 2 layers 6 mil poly on floors

Regulated area with Exclusion zone

Intact flooring demo by heavy equipment

Multiple non-contiguous glovebags (variance required)

Adhesive by grinding or bead blasting

17. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter)

Name **WASTE MANAGEMENT OF MAINE**

Address 2000 FOREST AVENUE

City **PORTLAND** State **MAINE** Zip 04013

Contact **BRIAN GORDON**

Tel 207.797.2406 Fax N/A

18. Disposal Site

Name **WASTE OF MAINE**

Address 357 MERCER ROAD

City **NORRIDGEWOCK** State **MAINE** Zip 04957

Contact **SAME**

Tel **SAME** Fax **N/A**



ASBESTOS

**Project Notification**

BIO 04-216

Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2631 FAX (207) 287-7826

**N**

Page 3 of 3

2004 Revision

**20. Emergency Notification (oral notification must be made within 1 working day of the emergency)**

Complete when a waiver to the standard notification period is requested for an emergency asbestos removal project which is necessitated by a sudden, unexpected event such as non-routine failures of equipment or by actions of fire and emergency medical personnel pursuant to duties within their official capacities. Written emergency notification must be received by the Department as soon as possible, but no later than 72 hours after the emergency.

Detailed Explanation (Include the date and hour on which the emergency occurred) BUILDING VACANT  
DUE TO MOLD ISSUE - VAC FOUND IN 2ND FLOOR OFFICE -  
REMOVAL OF WEST WALL TO COMMENCE ASAP PER CM ORDER

Signature (Emergency Notification requested by)

MARK P. GOLEMAN  
Print Name

Date 12/7/04

MEDEP Action on Emergency Notification

APPROVED  DISAPPROVED (by) Steph B... (date) 12/8/04



**21. Notification Waiver Request (must be received by MEDEP at least 24 hours prior to the start of the project)**

Complete when a waiver to the standard notification period is requested when reasonable planning & foresight could not have predicted the event & other notification procedures would not suffice to protect public health & the environment. Examples include discovering additional asbestos-containing material during a renovation or demolition for which an asbestos inspection was conducted (e.g., within a wall cavity or plumbing chase), a public health threat exists or will develop (e.g., clean up following a fiber release episode), or unforeseeable circumstance (e.g., boiler & associated piping/valves failure).

Signature (Notification Waiver requested by)

MARK P. COLEMAN  
Print Name

Date \_\_\_\_\_

MEDEP Action on Notification Waiver Request

APPROVED  DISAPPROVED (by) \_\_\_\_\_ (date) \_\_\_\_\_

**Asbestos Project  
Variance Request**

BIO 04- 216  
Project Code

State of Maine  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-7826

FORM

V

Page 1 of 2

2004 Revision

Check **all** that apply. Written Department approval is not required prior to implementation. Standard variances submitted during or before the **project** due to unforeseeable conditions shall not be implemented until **5** days after the variance is received by the Department unless otherwise approved by the Department.

**1. Wetting ACM (during removal phase only) is not required when:**

- Temperature inside regulated area below 32% & heating not feasible nor practical
- Electrical conditions exist that would create shock/electrocution hazard
- Operational high-pressure steam lines are being abated/repaired

**2. Exhausting to Ambient Air is not feasible when:**

- Distance too great
- Health & Safety concerns (limited egress)

**3. Aggressive Air Clearances in dirt crawl spaces only are not required when:**

Dirty or dusty conditions exist not related to asbestos activities exist inside or outside the regulated area and will likely result in count overloads (Static Air Samples are required)

**4. Containment and air clearances not necessary when:**

- Enclosure activities do not impact ACM
- Removal of TSI components that utilize "wrap & cut" methods, provided that an Asbestos Inspector has determined the components to be in good condition & not likely to release fibers during removal, & has recorded this determination in the project design. By signing below, the Design Consultant attests that the TSI is in good condition.
- Removal or repair of ACM using multiple noncontiguous glovebags that are no larger than 60 inches by 60 inches
- Removal or repair, Using contiguous glovebags, that involve a total of no more than 30 l/ft of ACM on a single pipeline, or any amount of ACM that can be removed within 10 glovebags for pipelines running parallel to each other

**5. Remote decontamination unit is needed:**

Explain: REMOTE DECON FOR TRANSITE - WILL USE UAT UNIT

**6. Smaller than standard decontamination Unit needed in residential structure:**

A variance to the requirements for minimum decontamination unit size is allowed in residential structures where construction of a decontamination unit meeting minimum size requirements is not possible due to room size and configuration, HVAC system component locations, or restriction of safe egress for residents.

**Note:** A detailed floor plan showing the work area, decontamination unit n and room dimensions must be submitted with the requested Variance.

**Design Consultant Sign-off for Standard Variance(s)**

Signature 

MARK P. COLEMAN  
Print Name

Date 12/7/09

Company BIOSAFE ENVIRONMENTAL SERVICES

ME Certification Number DC - 0069

Address 5 DELTA DRIVE

Certification Expiration Date 01.31.2005

City WESTBROOK State MAINE Zip 04092

Tel 207.854.5262 Fax 207.854.2609





ENVIRONMENTAL SAFETY & HYGIENE ASSOCIATES, INC.

- Indoor Air Quality
- OSHA Compliance
- Asbestos Consulting
- Training
- Lead Consulting
- Industrial Hygiene

**FINAL VISUAL EVALUATION / AIR CLEARANCE RELEASE FORM**

TESTING DATE: DECEMBER 7, 2004

PROJECT CLIENT: CITY OF PORTLAND

PROJECT ADDRESS: INTERNATIONAL MARINE TERMINAL

PROJECT DESCRIPTION: 200 SQ. FT. 12" x 12" FT

After completing a thorough evaluation of the asbestos abatement area as described in the MEDEP Notification, ESH has confirmed the asbestos containment area was free of accessible and visible asbestos debris and was ready for final air clearance sampling. ESH collected \_\_\_\_\_ air clearance samples inside the regulated area. The abatement comprised of the removal and disposal of approximately \_\_\_\_\_ linear feet and/or \_\_\_\_\_ square feet of asbestos-containing material. The visual evaluation and air sampling/analysis was conducted in accordance with State of Maine Asbestos Management Regulations, Chapter 425, sections 425.10 C, D, E.

Visual Evaluation:      Passed       Failed

Sample #	Pump #	Start	Stop	Total Time	PreCal	Post Cal	Volume	Fib/Fld	F/mm2	F/cc
C-1	10	1200	1500	180	16.0	16.0	2400	10/100		20.0/0
C-2	11	1200	1500	180	16.0	16.0	2400	12/100		20.0/1
Air Analysis Form and Chain of Custody are kept on file at Corporate Office										


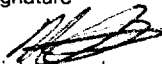
Special Notes: 120 SQ FT. WALLS / INTERIORS 80 SQ. FT. BIRCH

ESH authorizes the clearance and reoccupancy of the work area based on the above analytical results which meet the criteria for clearance in accordance with Chapter 425, section 10 (D) 2 of the State of Maine DEP Regulations.

Air Monitor/ Analyst: ALAN FARLEY / BRUCE HACKETT

Maine DEP AM#: \_\_\_\_\_

Maine DEP AA#: \_\_\_\_\_

WASTE SHIPMENT RECORD		DOCUMENT NUMBER: <b>A146506</b>	TICKET NUMBER
1. Facility name and mailing address <b>INTERNATIONAL MARINE TERMINAL COMMERCIAL STREET PORTLAND, MAINE 04103</b>		Owner's name <b>CITY OF PORTLAND 1001 WESTBROOK AT PORTLAND, ME 04102</b>	Owner's telephone no. <b>207-756-8029</b> Owner's fax no. <b>207-774-7740</b>
2. Operator's name and address <b>BIOSAFE Environmental Services, Inc. 5 Delta Drive, Westbrook, ME 04092</b>			Operator's telephone no. <b>207-859-5222</b> Operator's fax no. <b>207-859-2609</b>
3. Waste disposal site (WDS) name, mailing address, and physical site location <b>Minerva Enterprises, Inc. P.O. Box 709 9000 Minerva Road Waynesburg, OH 44688</b>			WDS telephone no. 330-866-3435 WDS fax no. 330-866-3488
5. Description of materials <b>RQ, Asbestos: 9 NA2212,111</b>		6. Containers No. <b>12</b> Type <b>WRAPPED TRANSITE</b>	7. Total quantity cubic yd <b>2.04</b>
		<b>FRAGILE FLOOR TILE</b>	<b>24 BAGS FT / MISC.</b> <b>4.04</b>
8. Special handling instructions and additional information <b>Double Wrapped 6 Mil Poly - Wetted</b>			
9. OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.			
Printed/typed name & title <b>MARK P. COLEMITAL</b>		Signature 	Month Day Year <b>12 8 2004</b>
10. Name of Transporter 1 (Acknowledgement of receipt of materials)			
Address, telephone no. and fax no. <b>BIOSAFE ENVIRONMENTAL 5 DELTA DRIVE WESTBROOK, ME 04092</b>		Signature  Printed/typed name & title <b>MARK COLEMITAL</b>	Month Day Year <b>12 8 2004</b>
11. Name of Transporter 2 (Acknowledgement of receipt of materials)			
Address, telephone no. and fax no.		Signature	Month Day Year
		Printed/typed name & title	
12. Discrepancy indication space			
Printed/typed name & title		Signature	Month Day Year

GENERATOR

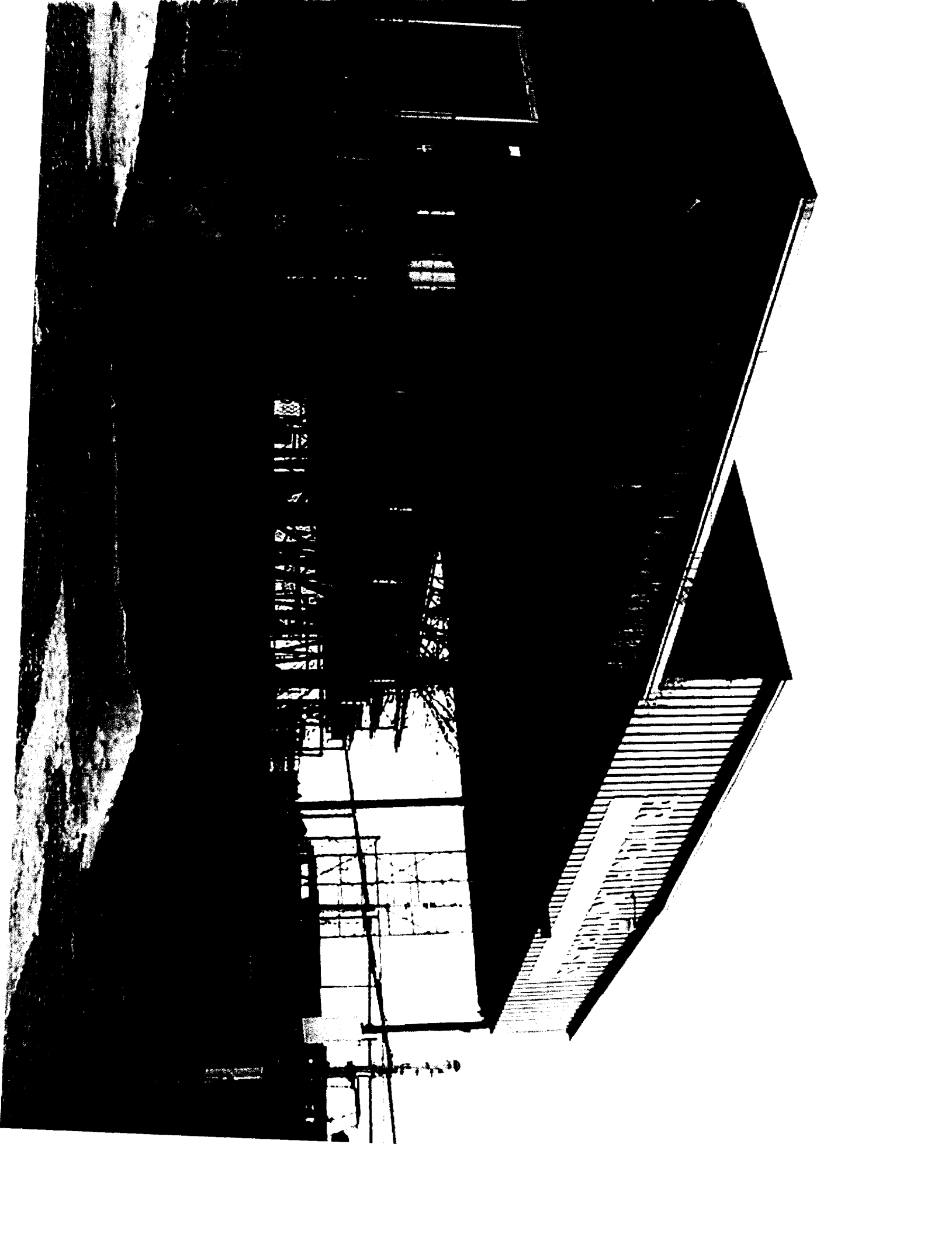
TRANSPORTER

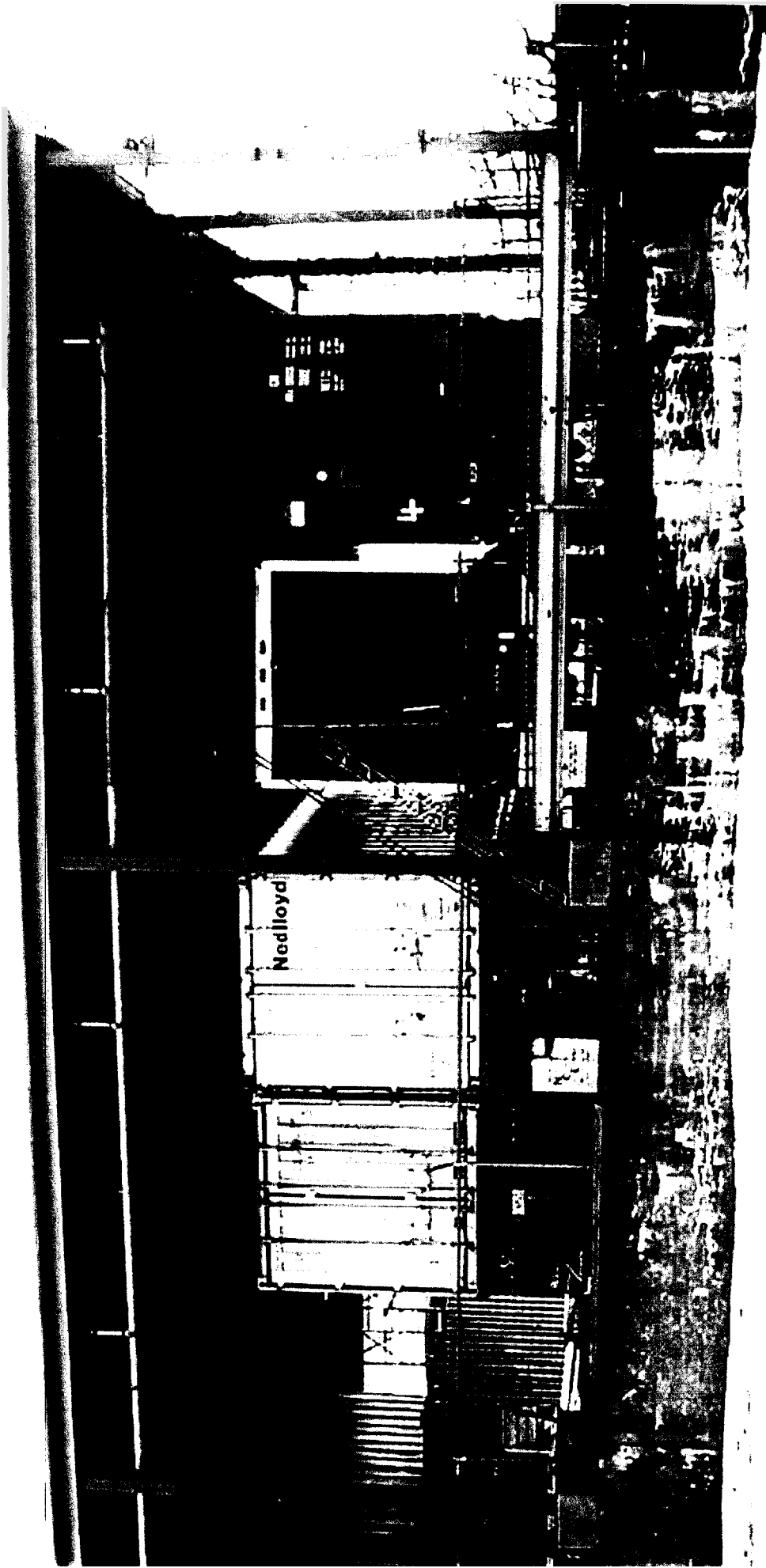
VENDOR

White: Generator • Yellow: Transporter 1 • Pink: Transporter 2 • Gold: WDS • Blue: Contractor • Green: Generator Copy  
(White, Yellow, Pink & Gold copies **must remain attached** until received by Facility!)

OUTSIDES







International Marine Terminal  
Abutters List

Roger Hale Sr.  
President  
Fore River Dock & Dredge  
**446** Commercial Street  
Portland, ME **04101**

Danny G. Cote, V.P.  
Northern Utilities Natural Gas  
325 West Road  
Portsmouth, NH **03801**

Roland Merriault, V.P. Real Estate  
Guilford Transportation  
Iron Horse Park  
N. Billerica, MA **01862-1692**

Bill Johnson  
Maine Department of Transportation  
P.O. Box 358  
Scarborough, ME **04070**

Angelo Ciccio  
Nova Seafoods  
555 Commercial St  
Portland, ME



**CITY OF PORTLAND MAINE  
DEPARTMENT OF TRANSPORTATION  
PORTLAND INTERNATIONAL JETPORT  
FACILITIES ENGINEERING DEPARTMENT  
1001 WESTBROOK STREET, PORTLAND MAINE 04102**

**14** December 2004

Mr. Roger Hale Sr., President  
Fore River Dock & Dredge  
446 Commercial Street  
Portland, Maine **04101**

Re: Notification of partial building demolition  
International Marine Terminal, Portland

Dear Mr. Hale,

In accordance with requirements of the City of Portland, Inspection Services Division the City of Portland, Department of Transportation, Waterfront Division is hereby providing all abutters notification of its intent to demolish a portion of the International Marine Terminal building located at 468 Commercial Street, Portland Maine.

Demolition operations are scheduled to commence on or about the first week of January 2005. If you have any questions or concerns regarding the proposed demolition, please contact this office in writing prior to start of demolition operations.

Best regards,

  
Carl L. Anderson, P.E.

Assistant Facilities Manager  
City of Portland, Department of Transportation

CC: M. Nugent, P. Bradbury, B. Snow, City of Portland  
D. Cote, Northern Utilities  
R. Merriault, Guilford Transportation  
B. Johnson, M.D.O.T.  
A. Ciccio, Nova Seafoods



**CITY OF PORTLAND MAINE  
DEPARTMENT OF TRANSPORTATION  
PORTLAND INTERNATIONAL JETPORT  
FACILITIES ENGINEERING DEPARTMENT  
1001 WESTBROOK STREET, PORTLAND MAINE 04102**

14 December 2004

Mr. Danny G. Cote, Vice President  
Northern Utilities Natural Gas  
325 West Road  
Portsmouth, New Hampshire 03801

Re: Notification of partial building demolition  
International Marine Terminal, Portland

Dear Mr. Cote

In accordance with requirements of the City of Portland, Inspection Services Division the City of Portland, Department of Transportation, Waterfront Division is hereby providing all abutters notification of its intent to demolish a portion of the International Marine Terminal building located at **468** Commercial Street, Portland Maine.

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Best regards,

  
Carl E. Anderson, P.E.

Assistant Facilities Manager  
City of Portland, Department of Transportation

CC: M. Nugent, P. Bradbury, B. Snow, City of Portland  
R. Hale, Fore River Dock & Dredge  
R. Merriault, Guilford Transportation  
B. Johnson, M.D.O.T.  
A. Ciccio, Nova Seafoods





**CITY OF PORTLAND MAINE  
DEPARTMENT OF TRANSPORTATION  
PORTLAND INTERNATIONAL JETPORT  
FACILITIES ENGINEERING DEPARTMENT  
1001 WESTBROOK STREET, PORTLAND MAINE 04102**

14 December 2004

Mr. Roland Merriault, V.P. Real Estate  
Guilford Transportation  
Iron Horse Park  
N. Billerica, Massachusetts 01862-1692

Re: Notification of partial building demolition  
International Marine Terminal, Portland

Dear Mr. Merriault.

In accordance with requirements of the City of Portland, Inspection Services Division the City of Portland, Department of Transportation, Waterfront Division is hereby providing all abutters notification of its intent to demolish a portion of the International Marine Terminal building located at 468 Commercial Street, Portland Maine.

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Assistant Facilities Manager  
City of Portland, Department of Transportation

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R. Hale, Fore River Dock & Dredge  
D. Cote, Northern Utilities  
B. Johnson, M.D.O.T.  
A. Ciccio, Nova Seafoods



**CITY OF PORTLAND MAINE  
DEPARTMENT OF TRANSPORTATION  
PORTLAND INTERNATIONAL JETPORT  
FACILITIES ENGINEERING DEPARTMENT  
1001 WESTBROOK STREET, PORTLAND MAINE 04102**

14 December 2004

Mr. Bill Johnson  
Maine Department of Transportation  
P.O. Box 358  
Scarborough, Maine 04070

Re: Notification of partial building demolition  
International Marine Terminal, Portland

Dear Mr. Johnson

In accordance with requirements of the City of Portland, Inspection Services Division the City of Portland, Department of Transportation, Waterfront Division is hereby providing all abutters notification of its intent to demolish a portion of the International Marine Terminal building located at 468 Commercial Street, Portland Maine.

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City of Portland, Department of Transportation

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**CITY OF PORTLAND MAINE  
DEPARTMENT OF TRANSPORTATION  
PORTLAND INTERNATIONAL JETPORT  
FACILITIES ENGINEERING DEPARTMENT  
1001 WESTBROOK STREET, PORTLAND MAINE 04102**

14 December **2004**

Mr. Angelo Ciccio  
Nova Seafoods  
555 Commercial Street  
Portland, Maine 04101


Re: Notification of partial building demolition  
International Marine Terminal, Portland

Dear Mr. Ciccio

In accordance with requirements of the City of Portland, Inspection Services Division the City of Portland, Department of Transportation, Waterfront Division is hereby providing all abutters notification of its intent to demolish a portion of the International Marine Terminal building located at **468** Commercial Street, Portland Maine.

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B. Johnson, M.D.O.T.