

SCANNED

Form # P.04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BU **PERMIT** ION

Permit Number: 090185

This is to certify that BAYSIDE MAINE LLC /Bio-s Environ services

has permission to Asbestos removal of pipe wrap textured ings

AT 645 CONGRESS ST

CB 046 D022001

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 finished-in. 24 HOURS 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. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-0185	Date Applied For: 03/10/2009	CBL: 046 D022001
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Location of Construction: 645 CONGRESS ST	Owner Name: BAYSIDE MAINE LLC	Owner Address: 477 CONGRESS ST STE 1012	Phone:
Business Name:	Contractor Name: Bio-safe Enviromental Services	Contractor Address: 5 Delta Drive Westbrook	Phone: (207) 632-6165
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Interior	

Proposed Use: USM Dormitory - Asbestos removal of pipe wrap & textured ceilings	Proposed Project Description: Asbestos removal of pipe wrap & textured ceilings
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 03/11/2009

Note:**Ok to Issue:**

- 1) This permit does not give permission to demolish any of the buildings. It only allows internal removal of asbestos and ceiling tiles. NO EXTERIOR WORK is permitted. The building shells shall remain intact and structurally sound.
- 2) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 03/16/2009

Note:**Ok to Issue:**

- 1) Please provide the information of the facility where the material will be transported and disposed of prior to final inspection.
- 2) A final statement from your licensed abatement professional must be submitted to this office stated the removal is in compliance with the submitted report prior to your final inspection.
- 3) This permit authorizes the work stated in the letter dated March 16, 2009 from enny Littell

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Keith Gautreau **Approval Date:** 03/12/2009

Note:**Ok to Issue:**

- 1) Fire Alarm system shall be maintained.
If system is to be off line over 4 hours a fire watch shall be in place.
Dispatch notification required 874-8576.
- 2) No means of egress shall be affected by this renovation
- 3) Any cutting or welding operations require a seperate permit from the Fire dept.

Comments:

3/11/2009-Ldobson: Owes 100 dollars for stop work order. Greg S has been notified. Permit came in at 4 p.m. Tuesday

3/11/2009-mes: I wrote an e-mail asking planning as to whether this permit could be issued in advance of planning board approvals.
DO NOT ISSUE PERMIT UNTIL GIVEN THE PLANNING APPROVALS.



Strengthening a Remarkable City. Building a Community for Life www.portlandmaine.gov

Planning & Urban Development Department
Penny St. Louis Littell, Director

March 16, 2009

Bayside Maine LLC
477 Congress Street, Suite 1012
Portland, Maine 04101

Re: 645 Congress Street

Dear Mr. Shinberg:

I have reviewed your request, submitted on behalf of Bayside Maine LLC to initiate the removal of asbestos from portions of the structure located at 645 Congress Street (sometimes referred to as Portland Hall). I have reviewed the scope of work outlined in the report by Northeast Test Consultants dated January 30, 2009.

Pursuant to section 14-528 (b) (2), at this time the City grants your request as follows:

- remove asbestos from the A, B, and C wings of the building
- remove pipe wrap and boiler wrap at the boiler room in the main building
- remove pipe wrap in the main building cellar

I am notifying the Building Inspections Department of this approval so that your stop work order may be lifted.

Sincerely,

Penny St. Louis Littell
Director of Planning and Urban Development

cc. Tammy Munson, Inspections Division Director
Barbara Barhydt, Development Review Services Manager

City of Portland, Maine - Building or Use Permit Application

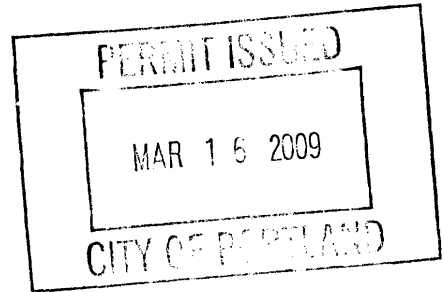
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0185	Issue Date:	CBL: 046 D022001
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Location of Construction: 645 CONGRESS ST	Owner Name: BAYSIDE MAINE LLC	Owner Address: 477 CONGRESS ST STE 1012	Phone:
Business Name:	Contractor Name: Bio-safe Environmental Services	Contractor Address: 5 Delta Drive Westbrook	Phone: 2076326165
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Interior	Zone: B-3 Prime K-6
Past Use: USM Dormitory	Proposed Use: USM Dormitory - Asbestos removal of pipe wrap & textured ceilings	Permit Fee: \$470.00	Cost of Work: \$44,800.00
Proposed Project Description: Asbestos removal of pipe wrap & textured ceilings		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>NA</i>	INSPECTION: Use Group: Type: Asbestos Removal only
		Signature:	Signature:
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input checked="" type="checkbox"/> Denied	
		Signature: Date:	

Permit Taken By: Ldobson	Date Applied For: 03/10/2009	Zoning Approval
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..



Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landmark
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>3/14/09</i>	Date:	Date:

Any exterior work requires a separate review approval.

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



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>645 CONGRESS ST.</u>		
Total Square Footage of Proposed Structure <u>N/A</u>	Square Footage of Lot <u>72,569 S.F.</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>46</u> Block# <u>D</u> Lot# <u>22</u>	Owner: <u>BAYSIDE MAINE LLC</u> <u>477 CONGRESS ST. SUITE</u> <u>PORTLAND ME 04101 7012</u>	Telephone: <u>207 772</u> <u>7070</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>BAYSIDE MAINE</u> <u>207 772 7070</u>	Cost Of Work: \$ <u>44,800</u> Fee: \$ <u>470.00</u> C of O Fee: \$ _____
Current legal use (i.e. single family) <u>DORMITORY</u>	If vacant, what was the previous use? <u>DORMITORY</u>	
Proposed Specific use: <u>DEMOLISH BUILDING ASBESTOS</u>	Is property part of a subdivision? <u>NO</u> If yes, please name _____	
Project description: <u>ASBESTOS REMOVAL OF PIPE WRAP & TEXTURED CEILING - SEE SURVEY BY NE TESTING DATED JAN 30, 2009</u>		
Contractor's name, address & telephone: <u>BIOSAFE ENVIRONMENTAL 5 DELTA DRIVE WESTBROOK, ME 04092</u>		
Who should we contact when the permit is ready: <u>GREG SHINBERG</u>		
Mailing address: _____	Phone: <u>653 7510</u>	

Please submit all of the information outlined in the Commercial Application 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 of applicant: _____ Date: 3/10/09

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

3/16/09

From: Marge Schmuckal
To: ALEX JAEGERMAN; Barbara Barhydt ; PENNY LITTELL; Shukria Wiar
Date: 3/11/2009 12:08:33 PM
Subject: Greg Shinberg

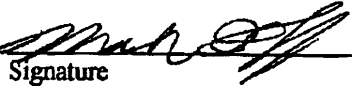
Greg Shinberg has applied for a permit to start asbestos removal and removal of ceilings from the buildings he wants to demolish in the rear.

He has not finished the planning approval process yet. Can this permit be issued before the planning process has been completed? Could he write a letter to planning to allow the approval to begin this work?

Please advise.

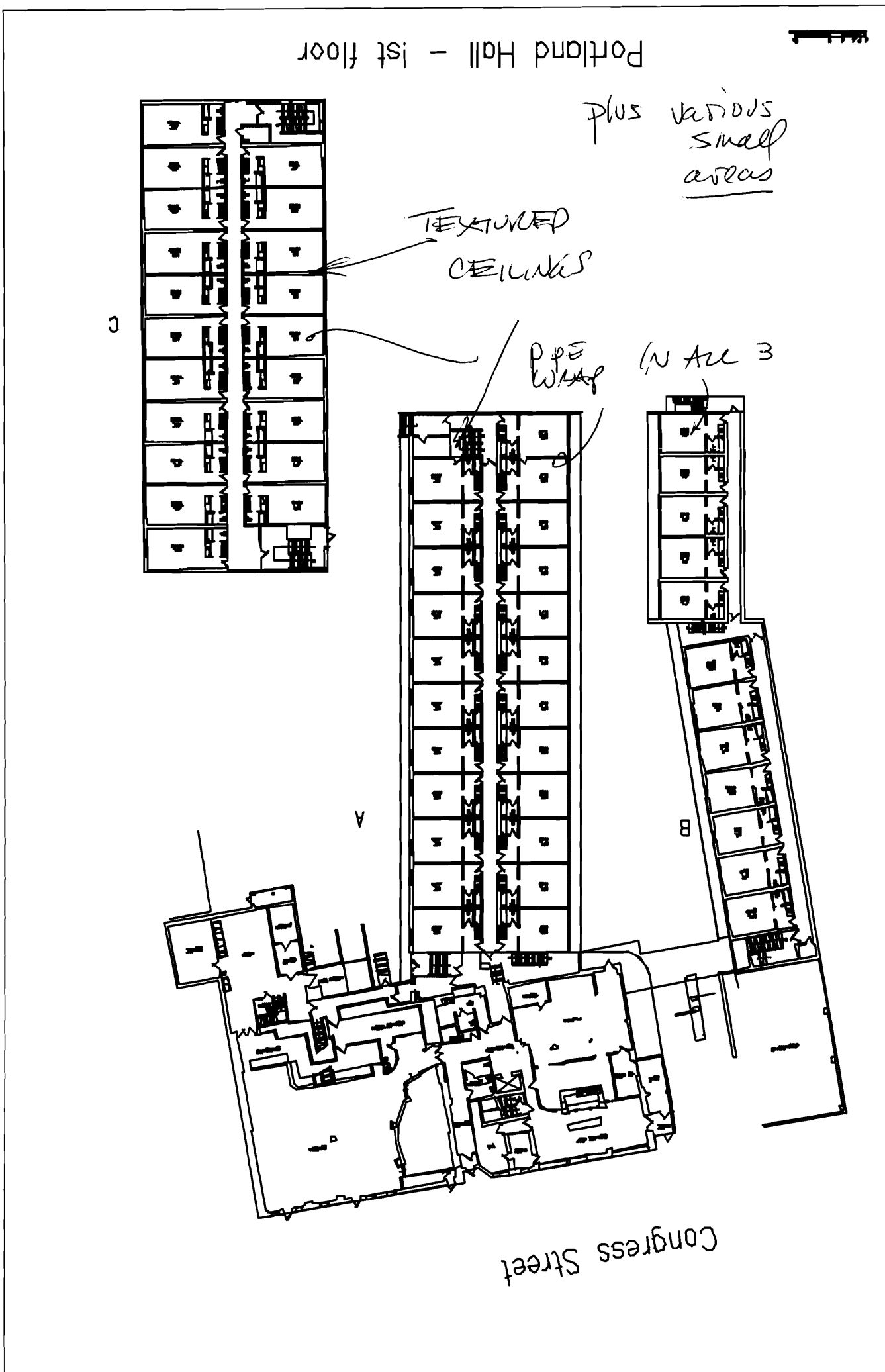
Marge

CC: Tammy Munson

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 2 of 3
Project Code BIO-09-81 (As listed on page 1)	13. Demolition (complete as applicable) <input type="checkbox"/> Ordered demolition (structurally unsound) by State or local government (attach copy of order and name of professional engineer who determined building structurally unsound) <input checked="" type="checkbox"/> All other demolitions Demolition Dates: <u>3/30/2009</u> to <u>TBD</u>		
14. Procedure Used to Detect Presence of Asbestos Testing <input type="checkbox"/> Assumed Positive <input checked="" type="checkbox"/> Tested Positive Method <input checked="" type="checkbox"/> PLM <input type="checkbox"/> TEM Sampled By <u>Northeast Test Consultants</u> (Print Name) Company <u>Northeast Test Consultants</u>	15. Project Clearance Visual evaluation by: (Air Monitor (if known) and Company) <u>MidCoast Environmental</u> Air Clearance by: (Air Monitor (if known) and Company) <u>MidCoast Environmental</u>		
<p align="center">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.</p>			
16. Asbestos Abatement Methods (check all that apply & submit variance request (Form V) if required) <input type="checkbox"/> Regulated area with containment consisting of 2-layers 4 mil poly on walls & ceiling & 2 layers 6 mil poly on floors <input checked="" type="checkbox"/> Regulated area with containment consisting of 1-layer 6 mil poly on walls & ceiling & 2 layers 6 mil poly on floors <u>Main Building</u> <input checked="" type="checkbox"/> Regulated area with Exclusion zone <input type="checkbox"/> Intact flooring demo by heavy equipment <input type="checkbox"/> Multiple non-contiguous glovebags (variance required) <input type="checkbox"/> Adhesive by grinding or bead blasting <input checked="" type="checkbox"/> Contiguous glovebags less than 30 Ln/ft (variance required) <u>Main Building</u> <input type="checkbox"/> Enclosure <input checked="" type="checkbox"/> Wrap & cut- TSI in good condition (no containment)(variance required) <input type="checkbox"/> Encapsulation <input type="checkbox"/> Wrap & cut- TSI not in good condition (containment required) <input type="checkbox"/> Roofing removal by mechanical saws/cutters <input checked="" type="checkbox"/> Flooring by mechanical equipment/ice scrapers/pry bars <input checked="" type="checkbox"/> Other (specify)			
17. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter) Name <u>Service Transport Group, Inc.</u> Address <u>58 Pyles Lane</u> City <u>New Castle</u> State <u>DE</u> Zip <u>19720</u> Contact <u>Thomas Gaudet</u> TEL <u>302-778-5930</u> FAX <u>302-778-0446</u>	18. Disposal Site Name <u>A & L Salvage</u> Address <u>11225 State Route 45</u> City <u>Lisbon</u> State <u>Ohio</u> Zip <u>44432</u> TEL <u>330-424-3739</u> FAX <u>330-424-5318</u>		
19. Certification (Notification Submitted by) I certify that to the best of my knowledge, the information contained in this notification is true and accurate, and that the asbestos abatement contractor will be/has been contracted to implement work practices as required by Maine DEP Chapter 425, the Asbestos Management Regulations. <div style="display: flex; justify-content: space-between;"> <div data-bbox="575 1757 1218 2015">  Signature Date <u>2/25/2009</u> Mailing Address <u>5 Delta Drive</u> City <u>Westbrook</u> State <u>Maine</u> Zip <u>04092</u> TEL <u>207-854-5262</u> </div> <div data-bbox="1344 1778 1533 2015"> <u>Mark Griffith</u> Print Name Zip <u>04092</u> FAX <u>207-854-2609</u> </div> </div>			

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	
Important Notice: The notification submitter must send a complete notification including any applicable fee which is postmarked at least 10 calendar days or received by the Department at least 5 working days prior to the start of an asbestos abatement project. This notification must be typewritten or easily legible. An incomplete notification is not acceptable & therefore not of record.					
1. Project Code BIO- 09-81		2. Type of Notification <input checked="" type="checkbox"/> Standard (O) <input type="checkbox"/> Facility O&M (Annual) <input type="checkbox"/> Emergency (E) <input type="checkbox"/> Courtesy (Not Regulated)		3. Type of Activity <input checked="" type="checkbox"/> Demolition (D) <input type="checkbox"/> Renovation (R) <input type="checkbox"/> Repair	
				4. Variances (Check all that apply) <input type="checkbox"/> Non-Standard (NS) <input checked="" type="checkbox"/> Standard (S) <input type="checkbox"/> Notification Waiver (10 day)	
5. Asbestos Contractor Name BIOSAFE Environmental Services, Inc. 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 Bayside Maine L.L.C Mailing Address 477 Congress Street City Portland State Maine Zip 04101 Contact Greg Shinberg TEL 772-7070 FAX 772-7080		
7. Facility Location (Where removal is to take place) BLDG Name Mixed Commercial Space Floor and/or Rm.# Wings-A,B&C and Main Building Physical Address 645 Congress Street City Portland State Maine Zip 04101			8. Facility Description Present Use Vacant- wings to be demolished, Main building to remain Prior Use USM Dormitory BLDG Size 10,000 sq/ft No. Floors 6 BLDG Age 1950's		
9. Notification Fees (Required fees must accompany notification) <input type="checkbox"/> \$100.00 = ACM amounts 100 SqFt/100 LnFt to 1000 SqFt/5000 LnFt. <input checked="" type="checkbox"/> \$200.00 = ACM amounts greater than 1000 SqFt/5000 LnFt. <input type="checkbox"/> Not Required or Not Included (Complete Block #9A)		9A. Notification Fee Not Included <input type="checkbox"/> Single family home exemption <input type="checkbox"/> ACM amount less than 100 SqFt/100 LnFt <input type="checkbox"/> Fees paid quarterly (Non-Scheduled O&M only) <input type="checkbox"/> BGS exemption		10. Project Work Hours 7:00 AM to 3:30 PM (Show actual hours) Weekdays (Check all that apply) <input checked="" type="checkbox"/> M <input checked="" type="checkbox"/> T <input checked="" type="checkbox"/> W <input checked="" type="checkbox"/> T <input checked="" type="checkbox"/> F Weekend (Check all that apply) <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
11. Scheduled Dates for Asbestos Project Project Start Date 3/9/2009 Project Completion Date 4/10/09 ACM Removal Dates (from) 3/11/2009 (to) 4/10/2009					
12. Asbestos (ACM) Removal			ME DEP USE ONLY		
ACM Type		Amount		Measurement	
Textured Ceilings		20,046		SqFt XXX LnFt	
Mudded Fittings		1043 Each		SqFt LnFt	
9"x 9"		300		SqFt XXX LnFt	
Transite Panels		144		SqFt XXX LnFt	
9"x 9"		1500 Main Building		SqFt XXX LnFt	
Pipe Covering		163 Main Building		SqFt LnFt XXX	
Beam Paper		8 Main Building		Sq/ft XXX	
			Postmark/ FAX/ hand delivered _____		
			Date Received _____		
			Check # _____		
			NESHAP _____		
			State _____		
			Variance _____		

645 Congress St



645 Congress

Portland Hall - 2nd floor

