

**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM**
Planning Copy

2002-0122
Application I. D. Number
05/14/2002
Application Date
Blow Bottle Project
Project Name/Description

Scott Sawyer
Applicant
349 Park Avenue, Portland, ME 04102
Applicant's Mailing Address
Consultant/Agent
Agent Ph: _____
Agent Fax: _____
Applicant or Agent Daytime Telephone, Fax

349 - 349 Park Ave, Portland, Maine
Address of Proposed Site
066 D001001
Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply): New Building Building Addition Change Of Use Residential Office Retail
 Manufacturing Warehouse/Distribution Parking Lot Other (specify) **Production of Plastic Bottles**
500 sq. Ft. IM
Proposed Building square Feet or # of Units _____ Acreage of Site _____ Zoning _____

Check Review Required:

Site Plan (major/minor) PAD Review 14-403 Streets Review
 Flood Hazard Shoreland Historic Preservation DEP Local Certification
 Zoning Conditional Use (ZBA/PB) Zoning Variance Other _____
Fees Paid: Site Plan \$400.00 Subdivision \$300.00 Engineer Review \$300.00 Date 05/23/2002
Reviewer Sarah Hopkins

Planning Approval Status:

Approved Approved w/Conditions See Attached Denied
Approval Date 05/21/2002 Approval Expiration 05/21/2003 Extension to _____ Additional Sheets Attached
 OK to Issue Building Permit Sarah Hopkins 05/23/2002 date signature _____

Performance Guarantee

Required* Not Required
No building permit may be issued until a performance guarantee has been submitted as indicated below
 Performance Guarantee Accepted
 Inspection Fee Paid _____ amount _____ expiration date
 Building Permit Issue _____ amount _____ expiration date
 Performance Guarantee Reduced
 Temporary Certificate of Occupancy _____ remaining balance _____ signature _____
 Final Inspection _____ Conditions (See Attached) _____ expiration date
 Certificate Of Occupancy _____ signature _____ expiration date
 Performance Guarantee Released
 Defect Guarantee Submitted _____ signature _____
 Defect Guarantee Released _____ amount _____ expiration date
_____ submitted date _____ signature _____
_____ date _____ signature _____

**CITY OF PORTLAND, MAINE
DEVELOPMENT REVIEW APPLICATION
PLANNING DEPARTMENT PROCESSING FORM
DRC Copy**

2002-0122
Application I. D. Number
05/14/2002
Application Date

Scott Sawyer
Applicant
349 Park Avenue, Portland, ME 04102
Applicant's Mailing Address

Blow Bottle Project
Project Name/Description
349 - 349 Park Ave, Portland, Maine
Address of Proposed Site

066 D001001
Assessor's Reference: Chart-Block-Lot
Assessor's Reference: Chart-Block-Lot
066 D001001
Assessor's Reference: Chart-Block-Lot

Proposed Development (check all that apply):
 New Building
 Building Addition
 Change Of Use
 Residential
 Office
 Retail
 Manufacturing
 Warehouse/Distribution
 Parking Lot
 Other (specify) **Production of Plastic Bottles**

500 sq. Ft.
Proposed Building square Feet or # of Units
IM
Zoning

Check Review Required:
 Site Plan (major/minor)
 Subdivision # of lots
 Flood Hazard
 Shoreland
 Zoning Conditional Use (ZBA/PB)
 Zoning Variance
 PAD Review
 Historic Preservation
 DEP Local Certification
 14-403 Streets Review
 Other

Fees Paid: Site Plan \$400.00 Subdivision \$300.00
 Engineer Review \$300.00 Date 05/23/2002

DRC Approval Status:
 Reviewer Sarah Hopkins

Approved
 Approved w/Conditions See Attached
 Denied
 Approval Date 05/22/2002 Approval Expiration 05/22/2003 Extension to
 Additional Sheets Attached
 Condition Compliance Sarah Hopkins 05/23/2002 signature date

Performance Guarantee	Required*	Not Required	signature	date	amount	expiration date
No building permit may be issued until a performance guarantee has been submitted as indicated below	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
<input type="checkbox"/> Performance Guarantee Accepted	<input type="checkbox"/>	<input type="checkbox"/>		date	amount	expiration date
<input type="checkbox"/> Inspection Fee Paid	<input type="checkbox"/>	<input type="checkbox"/>		date	amount	expiration date
<input type="checkbox"/> Building Permit Issue	<input type="checkbox"/>	<input type="checkbox"/>		date		signature
<input type="checkbox"/> Performance Guarantee Reduced	<input type="checkbox"/>	<input type="checkbox"/>		date	remaining balance	signature
<input type="checkbox"/> Temporary Certificate of Occupancy	<input type="checkbox"/>	<input type="checkbox"/>		date	Conditions (See Attached)	expiration date
<input type="checkbox"/> Final Inspection	<input type="checkbox"/>	<input type="checkbox"/>		date		signature
<input type="checkbox"/> Certificate Of Occupancy	<input type="checkbox"/>	<input type="checkbox"/>		date		signature
<input type="checkbox"/> Performance Guarantee Released	<input type="checkbox"/>	<input type="checkbox"/>		date		signature
<input type="checkbox"/> Defect Guarantee Submitted	<input type="checkbox"/>	<input type="checkbox"/>		submitted date	amount	expiration date
<input type="checkbox"/> Defect Guarantee Released	<input type="checkbox"/>	<input type="checkbox"/>		date	signature	signature

Special Inspections Report

H.P. Hood, Inc.
Fall Protection

349 Park Avenue
Portland, ME

March 12, 2003

Prepared for:

H.P. Hood, Inc.
349 Park Avenue
Portland, ME 04102

In conjunction with:

The City of Portland
389 Congress Street
City Hall Room 315
Portland, ME 04101

H.P. Hood, Inc.
Fall Protection
349 Park Avenue
Portland, ME

March 12, 2003

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1000 Statement of Special Inspections

Becker Structural Engineers, Inc.

STATEMENT OF SPECIAL INSPECTIONS

PROJECT: HP Hood Fall Protection

LOCATION: 349 Park Ave, Portland, Maine 04102

PERMIT APPLICANT: Centerline Construction

APPLICANT'S ADDRESS: P O BOX 1264, Portland, ME 04104

STRUCTURAL ENGINEER OF RECORD: Becker Structural Engineers, Inc.

ARCHITECT OF RECORD: N/A

This Statement of Special Inspections is submitted in accordance with Section 1705.0 of the 1999 BOCA National Building Code. It includes a listing of special inspections applicable to this project as well as the name of the Special Inspector, and the names of other agencies intended to be retained for conducting these inspections.

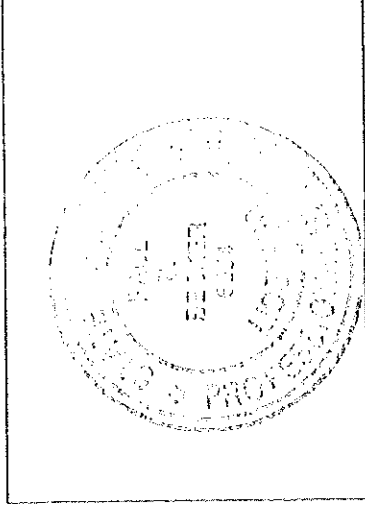
The Special Inspector shall keep records of all inspections listed herein, and shall furnish inspection reports to the Code Official and to the Registered Design Professional of Record. All discrepancies shall be brought to the immediate attention of the Contractor for correction. If the discrepancies are not corrected the discrepancies shall be brought to the attention of the Code Official and the Registered Design Professional of Record. Interim reports shall be submitted to the Code Official and to the Registered Design Professional of Record monthly, unless more frequent submissions are requested by the Code Official.

Job site safety is solely the responsibility of the Contractor. Materials and activities to be inspected are not to include the Contractor's equipment and methods used to erect or install the materials listed.

Prepared By:

Paul B. Becker, P.E.

Paul B. Becker
NAME
10/29/02
DATE
SIGNATURE



Preparer's P.E. Seal
Building Code Official:

Paul B. Becker
Applicant's Authorization
DATE 10/29/02
SIGNATURE

SIGNATURE DATE

Becker Structural Engineers, Inc.

LIST OF AGENTS

PROJECT: HP Hood Fall Protection

STRUCTURAL ENGINEER OF RECORD:

Becker Structural Engineers, Inc.

Firm

19 Commercial Street, Portland, ME 04101

Address

N/A

Firm

N/A

Address

ARCHITECT OF RECORD:

Following is the List of Agents selected for performance of Special Inspections for this project:

	Name	Firm	Abbreviation
1. Special Inspector	Paul B. Becker, P.E.	Becker Structural Engineers, Inc.	BSE
2. Special Inspector	Dan S. Burne, E.I.	Becker Structural Engineers, Inc.	BSE
3. Testing Laboratory	N/A		
4. Geotechnical Engineer	N/A		

Becker Structural Engineers, Inc.

FINAL REPORT OF SPECIAL INSPECTIONS

PROJECT: HP Hood Fall Protection

LOCATION: 349 Park Ave., Portland, ME 04104

PERMIT APPLICANT: Centerline Construction

APPLICANT'S ADDRESS: PO Box 1264, Portland, ME 04104

STRUCTURAL ENGINEER OF RECORD: Paul B. Becker, P.E. Becker Structural Engineers, Inc.

Name Firm

ARCHITECT OF RECORD: N/A

Name Firm

GENERAL CONTRACTOR: Richard Miller Centerline Construction

To the best of my information, knowledge, and belief, the Special Inspections required for this project, and described in the Statement of Special Inspections submitted for the project, have been completed.

The following discrepancies that were outstanding since the last interim report, No. dated have been corrected:

N/A

(Use additional sheets, if necessary)

Interim reports submitted to this final report and numbered to , form a basis for, and are to be considered an integral part of this final report.

Submitted By:
SPECIAL INSPECTOR

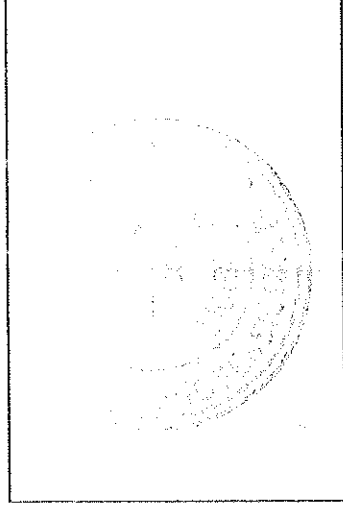
Paul B. Becker, P.E.

NAME

SIGNATURE

DATE

3-12-03



Special Inspector's P.E. Seal

Summary of Services (Exhibit A)

SCHEDULE OF SPECIAL INSPECTION SERVICES

MATERIAL/ACTIVITY	ITEM	SERVICE	Y/N	EXTENT (All, Sample, Other, None)	COMMENTS	AGENT	DATE	REV.
Steel Fabrication	In-plant review	Part A - Fabrication procedures/OA						
		1. AISC Category 1	Y	Provide AISC Certification		BSE	5/5/03	
	2. AWS Quality Assurance	Y	Provide Welder Certification		BSE	5/5/03		
		Part B - Procedures Implementation						
	Review conformance to Part A							
	Review material certificates							
	1. Bolts, Nuts, Washers	Y	Sample	AISC ASD A3.4		BSE	3/3/03	
	2. Structural Steel	Y	Sample	AISC A6 or A568		BSE	3/3/03	
	3. Weld Filler Material	Y	Sample	AISC ASD A3.6		BSE	3/3/03	
	Review connections							
Steel Erection	1. Shop Bolted	N						
		3. Shop Welder Certs	Y	ALL		BSE	3/3/03	
	Review materials certs of compliance							
	1. Bolts, Nuts, Washers	Y	ALL			BSE	5/5/03	
	2. Structural Steel	Y	ALL			BSE	5/3/03	
	3. Weld Filler Material	Y	ALL			BSE	5/5/03	
	Review primary steel connections							
	Shear connections							
	1. Field Bolted	Y	ALL				2/2/03	
	2. Field Welded	Y	ALL				2/2/03	

All Steel Construction Special Inspections have been completed in accordance with BOCA Section 1705.3
 Special Inspector *J.M. J.R.* Date *5/12/03*

1001 Disclaimers and Qualifications

The program of Structural/Special Tests and Inspections does not relieve the Contractor or its subcontractors of their responsibilities and obligations for quality control of the work, for any design work which is included in the scope of services, and for full compliance with the requirements of the Construction Documents. Furthermore, the detection of, or the failure to detect, deficiencies or defects in work during testing and inspection conducted pursuant to the Program does not relieve the Contractor or its subcontractors of their responsibility to correct all deficiencies or defects, whether detected or undetected, in all parts of work, and to otherwise comply with all requirements of the Construction Documents. Additional disclaimers and/or qualifications may be included in the Owner-Special Inspection agreement.

05120 Structural Steel
5120.1 Inspection Reports

Elite Inspection Services Inc.

228 Industrial Way, Unit #1
Portland, Me 04103

Telephone: (207) 797-2496
Fax: (207) 797-2284

February 21, 2003

S. W. Cole Engineering, Inc.
286 Portland Rd.
Gray, Maine 04039

Re: Inspection of Structural Steel & A-325 Bolts.
Cust. # 00-00220.1 EISI #054-03-VT

Att: Roger Domingo

Dear Sir:

This letter shall serve as the report for the Visual Inspection that was performed at the H. P. Hood Dairy in Portland, Maine on January 30, February 6 & 17, 2003. Below is a listing of the areas inspected, their location and the results.

A-325 BOLTS

- 1) Examination of Bolted Connections for Overhead Fall Protection Beams in the Milk Delivery Area has found the following:
 - a) All Bolts Located in the Horizontal Position (Shear Load) are acceptable.
 - b) At several locations, on both Center Beams, in the Vertical Position (Downward Load); the Bolts were tight but of Insufficient Length, as according to A.I.S.C. on February 6, 2003. These are unacceptable.
 - c) On February 17, 2003 these Bolts were reinspected and found acceptable.
 - d) All welded Anchored Bolts are acceptable.

-2-

Entry Stairway

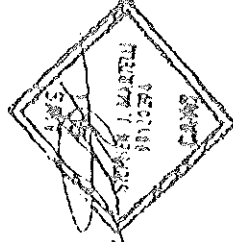
- 1) All Welded Connections for the Entry Stairway leading to Truss T2A are acceptable.

All acceptable welds were found to be IAW AWS D1.1 and all applicable drawings. Please feel free to call if you have further questions concerning these findings.

Respectfully yours,



Stephen J. Marrelli
E.I.S.I.



05120 Structural Steel

05120.2 Certifications



STRUCTURAL STEEL FABRICATORS OF NEW ENGLAND

BY AUTHORITY OF THE BOARD OF DIRECTORS

James A. McBrady, Inc.

having been duly elected to membership
is hereby certified as

Member

and entitled to all privileges thereof

Elected prior to 1987

Emilio W. [unclear], P.E.
Consultant

[Signature]
President

THIS IS TO CERTIFY THAT

James A. McBrady, Inc.

IS AN ACTIVE MEMBER OF

American Institute of Steel Construction
INCORPORATED

ELECTED TO MEMBERSHIP

April 27, 1958





AWS Certified Welder
in accordance with AWS QC-3-89

Qualifications

D1-SW-F4-P-F-D

ID #

007-52-1307

Issued

9/6/96

JAMES OLIVER

Valid Only If Accompanied By Photo ID



AWS Certified Welder
in accordance with AWS QC-3-89

Qualifications

D1-SW-F4-P-A-L

ID #

007-52-1307

Issued

1/22/98

JAMES OLIVER

Valid Only If Accompanied By Photo ID

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No

Type of Eye Correction: Eye glasses
Contact lenses
Magnifiers

Name: JAMES OLIVER Social Security # 007-52-1307

Welder Operator

Qualified with AWS WPS No. _____ Supplement No. _____ Test No. _____

Process(es) GMAW Manual Semi-Automatic Automatic Machine
Test base metal specification A36 1" To A36 1"

Material number (M or P Number) J.O. To _____
Shielding Gas R2 80 CO2 80 Flow Rate 90 CFA

AWS filler metal classification _____ F no _____ Size _____

Backing Yes No Consumable Insert Yes No
Double Welded or Single Welded Short circuiting arc (GMAW) Yes No
Current AC DC Back Purging Yes No

Visual test results Pass Fail
Saw test results NA Pass Fail
Radiographic test results NA Pass Fail
QFL 96-599 Day E Pullman

PROCESS(es) QUALIFIED FOR _____

POSITION(S) QUALIFIED FOR:

Groove:

Ripe 1G 2G 5G 6G 6GR
Plate 1G 2G 3G 4G

Consumable Insert Backing type

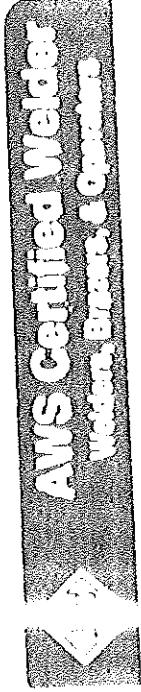
1F 2F 4F 5F
1F 2F 3F 4F

Vertical Up Down Weld Deposit Min _____ Max _____
Single side Double side

The above named person is qualified for the welding process(es) used in this test without the limits of essential variables shown above, including materials and filler metal variables of the AWS Standard, when certification and Code or Standard. I hereby certify that I was not involved in the training of the

above named individual as a welder.
Date Tested 8/15/96 Signed by Richard M. [Signature] Test Supervisor

AWS CWI No. _____
Signed by [Signature] Corporate Representative Title _____



Qualifications I-D1.1-SM-F4-P1-A-U

ID# 004-60-6312

Issued 5/23/97

Mark W. Yaltony

Valid Only If Accompanied By Photo ID

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No Type of Eye Correction: Eye glasses Contact lenses Magnifiers

Name: MARK YATTAW Social Security # 009-60-6312

Weider Operator

Qualified with AWS WPS No. _____ Supplement No. _____ Test No. _____

Process(es) GMAW Manual Semi-Automatic Automatic Machine

Test base metal specification A36 1" To A36 1"

Material number (M or P Number) _____ To _____

Shielding Gas 90% CO2 80% Argon Flow Rate 40 CFH

AWS filler metal classification E70T-1 F no _____ Size _____

Sacking Yes No Consumable insert Yes No
Double Welded or Single Welded Short circuiting arc (GMAW) Yes No
Current AC DC Back Purging Yes No

Test results Visual test results Pass Fail Radiographic test results NA Pass Fail

Send test results NA Pass Fail QAL 96-589 Ray F. Prazuchinski

PROCESS (es) QUALIFIED FOR _____

POSITION (s) QUALIFIED FOR:

Groove: 1G 2G 5G 6G 6GR (T) Min _____ Max _____ Diameter _____ Range _____
Pipe 1G 2G 3G 4G (T) Min _____ Max _____
Plate 1G 2G 3G 4G (T) Min _____ Max _____
Consumable Insert Backing type

Filler: Pipe 1F 2F 4F 5F (T) Min _____ Max _____
Plate 1F 2F 3F 4F (T) Min _____ Max _____

Vertical Up Down Weld Deposit Min _____ Max _____
Single side Double side

The above named person is qualified for the welding processes used in this test within the limits of essential variables shown above, including materials and filler metal variables of the AWS Standard. Welder certification and Code or Standard I hereby certify that I was not involved in the training of the

above named individual as a welder.

Date Tested 8/9/96 Signed by Richard McKeen Test Supervisor

AWS CWI No. _____

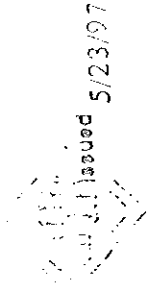
Signed by: James O. Brady Corporate Representative Title _____



AWS Certified Welder
Welders, Erectors, & Constructors

Qualifications J-D1.1-SM-F4-P1-A-U

ID# 263-85-3467



Wayne A. Wilson

Valid Only If Accompanied By Photo ID

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No Type of Eye Correction Eye Glasses Contact lenses Magnifiers

Name Wayne Wilson Social Security # 263-8534-67

Welder Operator

Qualified with AWS WPS No. _____ Supplement No. _____ Test No. _____

Process(es) GMAW Manual Semi-Automatic Automatic Machine

Test base metal specification A36 1" To A36 1"

Material number (M or P Number) WAXXC To _____

Shielding Gas 75% Argon 25% C₂F₆ Flow Rate 40 CFA

AWS filler metal classification _____ F No. _____ Size _____

Backing Yes No Consumable Insert Yes No
Double Welded or Single Welded Short circuiting and GMAW Yes No
Current AC DC Back Purging Yes No

Test results

Visual test results Pass Fail Radiographic test results NA Pass Fail
Bend test results NA Pass Fail

PROCESS(es) QUALIFIED FOR _____

POSITION(S) QUALIFIED FOR:

Groove:
Pipe 1G 2G 5G 6G 6GR (T) Min _____ Max _____ Diameter _____ Range _____
Plate 1G 2G 3G 4G (T) Min _____ Max _____

Consumable Insert Backing type

Filllet:
Pipe 1F 2F 4F 5F (T) Min _____ Max _____
Plate 1F 2F 3F 4F (T) Min _____ Max _____

Vertical Up Down Weld Deposit Min _____ Max _____
Single side Double side

The above named person is qualified for the welding processes listed used in this test within the limits of essential variables shown above, including materials and filler metal, variables of the AWS Standard for welder certification and Code or Standard. I hereby certify that I was not involved in the training of the

above named individual as a welder:
Date Tested 11/14/96 Signed by Richard M. Kelly Test Supervisor

AWS CWI No. _____

Signed by _____ Title _____
Corporate Representative



AWS Certified Welder
in accordance with AWS CCA-1

Qualifications: C1 - 81 - P4 - P - 7 - D



ID# 005-42-110
Issued: 9/13/90

ROLAND A. HICKER

Valid Only If Accompanied By Photo ID

WELDER QUALIFICATION TEST REPORT

Operator James A. McBrady, Inc. Location Scarborough, Maine

Welder Applicant Roland McKeen Test Plate No. RM2 Test Date 1/18/82

Weldable Spec.: AWS D1.1-75 + AASHTO Revisions Sec. 5 Part 5 Fig. Fig.

Weld Groove Thickness 3/8" Position Vertical

Weld Metal A36 Yield 36,000 Preheat 70°

Process SMAW Type (Manual, Semi-Auto, Auto) Manual

Joint (Type & Polarity) DCRP Joint Preparation Flt & Ground

Electrode E7018 Flux or Shielding Gas

ASpec. A5.1 - 69 No. Electrodes

Travel Speed Total No. Passes 12

Electrode Dia. 1/8 Current 100±10 Voltage

Electrode Dia. Current Voltage

I certify that the statements in this record are correct and that the test was prepared and welded in accordance with the requirements.

Signature of Welder: Richard McKeen SS No. 005-42-1164

Signature of Test Supervisor: James Valdez

I, above named Test Supervisor James Valdez personally appeared before me and made oath that the statements given above are true to the best of his knowledge and belief.

Notary Public Theresa Adams MY COMMISSION EXPIRES NOVEMBER 17, 1986 State Maine

Method of Testing Reinforcement

Result(s) Passed

Signature of Tester: Richard McKeen Testing Agency McKeen Labs

Passed or Failed Passed

above named (welder) (welding operator) (is) (is not) pre-qualified to do welding for positions of welding in accordance with Table 5.23 when using electrode classification of (Paragraph 5.16.1.3 of Part C of Sect. 5, AWS D1.1-75 + AASHTO.

Signature of Inspector: Inspection Agency

Comments:

Reviewed and Approved: Date
Welding Supervisor Engineer



AWS Certified Welder
Welders, Brazers, & Operators

Qualifications **D1.1-SM-F4-P-A-1**

ID# **004-44-8076**

Issued **01/08**

Alan H. Hoffman

Valid Only If Accompanied By Photo ID



AWS Certified Welder
in accordance with AWS QC3-89

Qualification No. **031531124227-9**

Expiration Date **9/15/90**

THOMAS V LORICELLI

Valid Only When Accompanied By Photo ID

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No Type of Eye Correction Eye glasses Contact lenses Magnifiers Name Thomas Laaricella Social Security # 557-46-9990

Welder Operator Qualified with AWS WPS No. _____ Supplement No. _____ Test No. _____

Process(es) GMAW Manual Semi-Automatic Automatic Machine Test Base metal specification A36 1" To A36 1"

Material number (M or P Number) _____ To _____ Shielding Gas 92% CO2 8% Argon Flow Rate 40 CFD

AWS filler metal classification E70T-1 F no _____ Size _____

Backing Yes No Consumable insert Yes No Double Welded or Single Welded Short circuiting arc (GMAW) Yes No Current AC DC Back Purging Yes No

Visual test results Pass Fail Radiographic test results NA Pass Fail Bend test results NA Pass Fail QAL 96-589 by Ray E. Pouchkaran

PROCESS(es) QUALIFIED FOR _____

POSITION(S) QUALIFIED FOR:

Groups: Pipe 1G 2G 5G 6G 6GR (T) Min _____ Max _____ Diameter _____ Range _____ Plate 1G 2G 3G 4G (T) Min _____ Max _____ Consumable Insert Backing type

Verticals Up Down Weld Deposit Min _____ Max _____ Single side Double side (T) Min _____ Max _____ (T) Min _____ Max _____

The above named person is qualified for the welding process(es) used in this test within the limits of essential variables shown above, including materials and filler metal variables of the AWS Standard for welder certification and Code or Standard. I hereby certify that I was not involved in the training of the

above named individual as a welder. Signed by Richard M. Gledhill Test Supervisor

Date Tested 8/19/96 Signed by James O. Rody Corporate Representative Title _____ AWS CWI No. _____

Form QC-WF1 - Performance Qualification Test Record 5



American Welding Society

Founded in 1919 to Advance the Science, Technology and Application of Welding.

July 22, 1997

Thomas L. Benvic
RR1, Box 280
Alfred, ME 04002

Dear Certified Welder:

Congratulations! You have completed the testing requirements for welder certification in the American Welding Society's Welder Certification Program. Your new wallet card is attached and your name is entered in the National Registry for Welders at the American Welding Society. Prospective employers are encouraged to contact us to verify your certification status. This is a service we provide to you as a welder in our program. The card has an issue date and no expiration date. We do not issue a new wallet card each time you renew.

Also enclosed are maintenance of certification cards which are for renewing your certification. It is very important that you maintain your certification to prevent having to retest. Mail your first card to AWS six months from the date you took your welding test to renew your certification. Each six months thereafter you need to mail another card. The cost for renewing is \$5.00 per certification and a check or money order should be enclosed with each maintenance card. We do not send you a reminder nor do we send any verification that we received your maintenance of certification card. It is up to you to mail your card and we recommend you mail it "Return Receipt Requested" so you will have proof of submitting it. If you run out of maintenance cards you may order as many as you need.

A new guide is included that will help interpret the qualifications on your certification card and a membership brochure is enclosed for you which describes the benefits of membership in the American Welding Society.

Thank you for your interest in the American Welding Society and its certification programs.

Sincerely,

Anita L. Petroski
Director of Certification

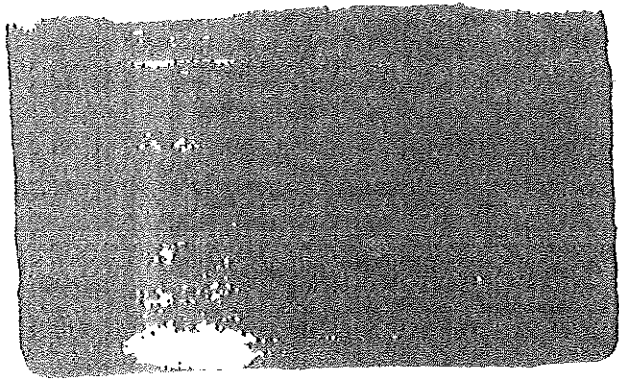
ALP/cb



Qualifications: J-D1-I-SM-F4-P1-A-U

ID# 006-66-6620 Issued 5/23/97

Thomas L. Benvic
Valid Only if Accompanied By Photo ID



AWS QC-3

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No Type of Eye Correction: Eye Glasses Contact lenses Magnifiers Name Thomas Bevie Social Security # 006-66-6620

Welder Operator Test No. _____

Qualified with AWS WPS No. _____ Supplement No. _____ Automatic Machine

Process(es) GMAW Manual Semi-Automatic To A36 Machine

Test base metal specification _____ To _____

Material number (M or P Number) _____ To _____

Shielding Gas 2%CO2 80%Argon Flow Rate 40 CFA

AWS filler metal classification E70T-1 F no _____ Size _____

Backing: Yes No Consumable Insert Yes No

Double Welded or Single Welded Short circuiting arc (GMAW) Yes No

Current AC DC Back Purging Yes No

Visual test results NA Pass Fail Radiographic test results NA Pass Fail

Bond test results NA Pass Fail DTL 96-589 Jay E. Proctorman

PROCESS(es) QUALIFIED FOR _____

POSITION(s) QUALIFIED FOR:

Operator: Pipe 1G 2G 5G 6G 6GR (T) Min _____ Max _____ Diameter _____ Range _____

Plate 1G 2G 3G 4G (T) Min _____ Max _____

Consumable Insert Backing type

Weld Position: 1F 2F 4F 5F (T) Min _____ Max _____

2F 3F 4F (T) Min _____ Max _____

Vertical Up Down Weld Deposit Min _____ Max _____

Single Side Double Side

The above named person is qualified for the welding process(es) used in this test within the limits of essential variables shown above, including materials and filler metal variables of the AWS Standard for welder certification and Code or Standard. I hereby certify that I was not involved in the training of the

above named individual as a welder: Date Tested 8/9/96 Signed by Raymond M. O'Neil Test Supervisor

AWS CWI No. _____

Signed by James O'Neil Corporate Representative Title _____



AWS Certified Welder
in accordance with AWS QCS-30

Qualifications: D1-D1-74-P-7-3



01-508-35-2377-9 / 07/90

ROLAND L. JEN

Valid Only If Accompanied By Photo ID

WELDING REPORT

Fabricator James A. Mott Job Title Welder M I #

Name of Applicant Roll 1 A Test Plate No. KA Test Date 10/9/81

Applicable Spec.: AWS D1.1-75 + AASHTO M 240 Part 13

Type of Weld Groove Position Horizontal

Material A70 Yield 5000 Tensile 700

Process SMAW Type (Flange, Centerline, etc.)

Current (Type & Polarity) PURP Joint Preparation

Electrode E7015 Flux or Shielding Gas

Weld Spec. A5.1 - 80 Direction of Stress

Wire Stickout Travel Speed No. Passes 13

Lead No. 1-13 Electrode Dia. 1/8 Current 110 Voltage

Lead No. Electrode Dia. Voltage

I certify that the statements in this record are correct and that the test weld was prepared and welded in accordance with the requirements.

Signature of Welder: James A. Mott Job No. 503-38-2344

Signature of Test Supervisor:

I, above named Test Supervisor, personally appeared before me and made oath that the statements in this record are true to the best of his knowledge and belief.

Notary Public My Commission Expires NOVEMBER 17, 1982

Method of Test Method of Repair

Result(s)

Signature of Testor: Used or Failed

above named (welder) (is not) pre-qualified to do welding for positions of welding in accordance with electrode classification of (Paragraph 5.16. of Part 5 of Sect. 5, DL.1-75 + AASHTO.

Signature of Inspector: Inspection Agency

Reviewed and Approved: Date
Welding Supervisor Engineer

AWS Certified Welder
in accordance with AWS QC309

Qualifications: **Shielded Metal Arc Welding**

ID# **996-76** **05/06/99**

BRIAN P JOHNSON

Valid Only If Accompanied By Photo ID

MAINE DRIVERS LICENSE

02/03/94 **BRUCE**

SEX: **M** HT: **5'10"** WT: **150** HAIR: **B** EYES: **B**

Bruce Johnson

JULY 2000 P

175 CLUND ST
BOULDER, ME 04511

PERFORMANCE QUALIFICATION TEST RECORD

Eye correction required Yes No Type of Eye Correction Eyn. glasses Contact lenses Magnifiers

Name GARY YOUNG Social Security # 007-48-3014

Welder Operator Test No. _____

Qualified with AWS WPS No. _____ Supplement No. _____ Automatic Machine

Process(es) GMAW Manual Semi-Automatic To A361"

Test base metal specification _____ To _____

Material number (M or P Number) GY Flow Rate 50 CFH

Shielding Gas 75-25 F no. _____ Size _____

AWS filler metal classification _____ Consumable Insert Yes No

Becking Yes No Short circuiting (w/ GMAW) Yes No

Double Welded or Single Welded Back Purging Yes No

Current AC DC

Test results Visual test results Pass Fail Radiographic test results NA Pass Fail

Bend test results NA Pass Fail Davis Prodn. in. 1 E out of 058

PROCESS(ES) QUALIFIED FOR _____

POSITION(S) QUALIFIED FOR:

Groover: Pipe 1G 2G 5G 6G 6GR (T) Min _____ Max _____ Diameter _____ Range _____

Plate 1G 2G 3G 4G (T) Min _____ Max _____

Consumable Insert Backing type (T) Min _____ Max _____

Filler: Pipe 1F 2F 4F 5F (T) Min _____ Max _____

Plate 1F 2F 3F 4F (T) Min _____ Max _____

Vertical Up Down Weld Deposit Min _____ Max _____

Single side Double side

The above named person is qualified for the welding process(es) used in this test within the limits of essential variables shown above, including materials and filler metal variables of the AWS Standard for welder certification and Code or Standard. I hereby certify that _____ was not included in the training of the

above named individual as a welder: Signed by Richard M. [Signature] Test Supervisor

Date Tested 2/4/98 AWS CWI No. _____

Signed by _____ Corporate Representative

HHN: Patti

883-0216



INDUSTRIAL FASTENERS & SUPPLIES

CERTIFICATE OF COMPLIANCE

MCBRADY, J.A.,
P.O. BOX 8239
PORTLAND, MAINE 04104

3/4-10 X 6 1/2 HEX CAP SCREW A449 ZINC PLATED
3/4-10 X 5 1/2 HEX CAP SCREW A449 ZINC PLATED
3/4-10 FIN HEX NUT A563 GR.A ZINC PLATED
3/4" USS FLAT WASHER F844 ZINC PLATED
1/4-13 X 1 1/4 HEX CAP SCREW A449 ZINC PLATED
1/4-13 FIN HEX NUT A563 GR.A ZINC PLATED
1/2" USS FLAT WASHER F844 ZINC PLATED
3/4-10 X 8 HEX CAP SCREW A307a H.D.G.
3/4-10 FIN HEX NUT A563 GR.A H.D.G.
3/4" FLAT WASHER F844 H.D.G.
3/4-10 X 1 1/2 BOLT A325 TYPE 1 H.D.G.

INVOICE #: 440692-00
DATE OF SHIPMENT: 12-06-02
PURCHASE ORDER: 10375

The parts described in this certificate were produced from material for which we have available chemical and/or physical reports or other evidence of conformance to applicable specifications.

The parts described in this certificate have been inspected and/or tested, such specimens and samples as have been tested were taken from random lot quantities and meet requirements specifically stated on the purchase order.

Ryerson Number: 50 433778 01 01 001
Territory: 50
Load: OT
Item Number: 01

R Y E R S O N T U L L
Material Certification

To: JAMES A McBRADY INC

PO BOX 8239
PORTLAND

ME 04104

Your Order Number 10027
Order Date 09/19/2002

Item Description
STNLS TUBE 304 ORNNTL SQ 6 SQ X 1/4 WALL X 24 FT 0
Single / Multiple Heat Number
CERTS

Slab / Coil Number (if applicable)
STNL T304

Item Instructions
SEND CERTS WITH SHIPMENT
CERTIFIED

Part Number (if applicable) Item Mark Instruction (if applicable)

A survey of our material sources has indicated that neither mercury nor radioactive substances is introduced into their products. It is used in any of their processes. While we make no independent tests for mercury or radiation, there is nothing in Ryerson's system which would be expected to introduce contamination of either type.

This document certifies that the material described above was shipped on your order and that the attached data is a true copy of the test report furnished by the producer with said material.

10/07/2002

Thomas J. ...

Authorized Agent of RYERSON TULL

PO 10027
J 4071

F

CERTIFICATE OF ANALYSIS AND TESTS

FOR:

DATE	OUR ORDER NO. YOUR ORDER NO.
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DESCRIPTION OF MATERIAL AND SPECIFICATIONS

STAINLESS STEEL, WELDED PIPE, T304 (UNS-S30400) ANNEALED AND PICKLED, SCHEDULE AS SPECIFIED ON THE PURCHASE ORDER

ASTM A312-83 ASTM A 376-81

CHEMICAL ANALYSIS

CARBON 0.08 MAX	MANGANESE 2.00 MAX	PHOSPHORUS 0.040 MAX	SULFUR 0.030 MAX	SILICON .075 MAX	NICKEL 8.00-11.00
CHROMIUM #8.000-20.000	MOLYBDENUM	COPPER	LEAD	OTHER	

MECHANICAL PROPERTIES

TENSILE PSI	YIELD PSI	% Elong.	In. Reduction in Area %	BEND
HARDNESS	GRAIN SIZE			

This report indicates the Chemical Analysis and/or Mechanical Properties to which the items listed were manufactured and tested. Based on Test Reports and/or Certifications furnished to us by the producer, we certify them to be within the limits shown.

By *D. E. Eastman*
Authorized Agent—Jensen T. Ryerson & Son, Inc.

Ryerson Number: 50 445519 01 01 001
Territory: 50
Load: OTX
Item Number: 01

R Y E R S O N T U L L
Material Certification

PO 10248
J 4071

To: JAMES A MCERRADY INC

PO BOX 8239
PORTLAND

ME 04104

Your Order Number
10248

Order Date
09/27/2002

Item Description
PLT STNLS 304L A/P 3/4 X 6-1/2 X 1 FT 0

Single / Multiple Heat Number
893174

Slab / Coil Number (if applicable)

Item Instructions
SEND CERTS WITH SHIPMENT
CERTIFIED

part Number (if applicable) Item Mark Instruction (if applicable)

A survey of our material sources has indicated that neither mercury nor radioactive substances is introduced into their products, or is used in any of their processes. While we make no independent tests for mercury or radiation, there is nothing in Ryerson's system, which could be expected to introduce contamination of either type.

This document certifies that the material described above was shipped on your order and that the attached data is a true copy of the test report furnished by the producer with said material.



09/30/2002

Authorized Agent of RYERSON TULL

of shipment and any increase in transportation
of shipping, switching, handling, storage and other
operational charges shall be added to the quoted
price.

CERTIFIED MATERIAL TEST REPORT

Pennsylvania 15301

Shipto:

PLATE PROD DIV / A-L
1201 VALLEY ROAD
COATESVILLE PA

HELEN M. O'CONNOR
Quality Assurance Represent

PLATE PROD DIV / A-L
1201 VALLEY ROAD
COATESVILLE PA

19320

19320

Our Order no: DF05920
Your Order No:0001
Date: 12/15/71
DUAL CERT

Temp No:198535-00

LC 304/304L STAINLESS HRAP
STM A240-00; ASME SA-240-A99

Item	Slip	Lot No	Size	Pcs	Weight
90694	54659 A	90359	96.0000 x 233.0000	1	9835 From slip 37099 8000
90694	C	MN	SI NI CR	MO	CO
	.018	1.76	.54 8.65 18.26	.40	.12 .35 .087
			Yield Strength 84.1 KSI	Rev. of Area 79.0	Hardness Bend Corrosion 5HR143 OK
			Strength 52.4 KSI	Elong 58.0	
			Gauge 1.5000		

MATERIAL WAS NOT WELDED

(EXCEPT AS OTHERWISE NOTED, THIS MATERIAL HAS BEEN MANUFACTURED AND TESTED IN ACCORDANCE WITH THE LISTED SPECIFICATIONS AND RESULTS CONFORM TO THE SPECIFICATION AND ORDER REQUIREMENTS. THE ABOVE INFORMATION HAS BEEN REPRODUCED FROM THE ORIGINAL CERTIFIED MATERIAL TEST REPORT.)

CINCINNATI

System Land
Training
Lead
Item Number

R Y E R S O N T U L L
Material Certification

PO 10248
J 4071

TO: JAMES A MCBRADY INC

PO BOX 8239
PORTLAND ME 04104

Your Order Number 10248
Order Date 09/27/2002

Item Description
PLT STNLS 304L A/P 1/4 x 6 x 0 FT 6

Single / Multiple Heat Number
C960699

slab / Coil Number (if applicable)

Item Instructions
SEND CERTS WITH SHIPMENT
CERTIFIED

Part Number (if applicable) Item Mark Instruction (if applicable)

A survey of our material sources has indicated that neither mercury nor radioactive substances is introduced into their products, or is used in any of their processes. While we make no independent tests for mercury or radiation, there is nothing in Ryerson's systems, which would be expected to introduce contamination of either type.

This document certifies that the material described above was shipped on your order and that the attached data is a true copy of the test report furnished by the producer with said material.



Authorized Agent of RYERSON TULL

10/01/2002

any increase in
handling, storage and
will be added to the quoted
price.
Inventory, storage,
separate

RYERSON
TULL
LABS

