

Location of Construction: 1001 Westabrook St		Owner: City of Portland		Phone:		Permit No: 961153	
Owner Address: 339 Congress St- Ptd NE 04101		Leasee/Buyer's Name:		Phone:		BusinessName:	
Contractor Name: Portland Pump Co		Address: Box 1190 - Mussey Rd Sct Scarborough NE 04074		Phone: 883-4317		Permit Issued: NOV 20 1996	
Past Use: airport w tank		Proposed Use: airport w/o tank		COST OF WORK: \$		PERMIT FEE: \$ 10	
				FIRE DEPT. <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: remove u/g fuel oil tank				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.) Action: Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied: <input type="checkbox"/>		Zone: CBL: 199-A-001	
Permit Taken By: L Chase		Date Applied For: 11/18/96				Zoning Approval: 19/Nov/96	
						Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work..

**PERMIT ISSUED
WITH REQUIREMENTS**

CERTIFICATION

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

SIGNATURE OF APPLICANT

ADDRESS:

DATE: 11/18/96

PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

Zoning Appeal

- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

Historic Preservation

- ☒ Not in District or Landmark
- ☒ Does Not Require Review
- ☐ Requires Review

Action:

- ☐ Approved
- ☐ Approved with Conditions
- ☐ Denied

Date: 11/18/96

CEO DISTRICT

4

[Signature]

2/4/98

COMMENTS

Remove Summer 1997

24 MC. O₂

Inspection Record

Type

Date

Foundation: _____

Framing: _____

Plumbing: _____

Final: _____

Other: _____

FIRE CODE PERMIT REPORT

DATE: 11/19/96

ADDRESS: 1001 Westbrook St

PERMIT TO: Partial Rwp

OWNER/CONTRACTOR: _____

APPROVED ✓

DENIED _____

CONDITIONS OF APPROVAL/DENIAL

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

13. All piping shall be protected from possible mechanical damage and vandalism.
14. A 4" storz fire department connection is required.
15. Any new sprinkler construction over six sprinkler heads needs to have State Fire Marshal approval.
16. Any renovations of sprinkler systems over 20 sprinkler heads needs to have State Fire Marshal approval.
17. A sprinkler performance test shall be submitted to the Portland Fire Department after completion of sprinkler work.
18. State Fire Marshal approval is required for this project.



Lt. G. McDougall
Fire Prevention Officer
City of Portland

Maine Department of Environmental Protection
Bureau of Hazardous Materials & Solid Waste Control
State House Station #17
Augusta, Maine 04333-0017
Attention: Tank Removal Notice
Telephone: (207) 287-2651

7/93

Dig Safe

964501012

Time: 11:30 AM

DATE: 11/7/96

**NOTICE OF INTENT
TO ABANDON (REMOVE) AN
UNDERGROUND OIL STORAGE FACILITY**

**THIS FORM MUST BE FILED WITH THE D.E.P. AND YOUR LOCAL FIRE
DEPARTMENT AT LEAST 30 DAYS PRIOR TO THE SCHEDULED REMOVAL**

PLEASE TYPE OR PRINT IN INK:

Name of Facility Owner: CITY OF PORTLAND 3546
Mailing Address: 389 CONGRESS ST. Telephone #: 772-0690 870-3261
City: PORTLAND State: _____ Zip Code: 04111
Contact Person (name, address & telephone #): ARTHUR SEWELL

Name of Facility: PORTLAND International Airport Registration #: 6743
Facility Location (town & street): 1001 WESTBROOK ST. PORTLAND 04102
Yellow Bldg Rd.

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

<u>Tank #</u>	<u>Tank Age</u>	<u>Tank Size (gallons)</u>	<u>Type of Product Stored</u>
1	18	2,000	#2 FUEL
2			
3			
4			

2. Directions to this facility (be specific):

LOCATED AT AIRPORT MAINTENANCE BUILDING
LEFT REAR

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

Tank Installer's Name: _____ Certification Number: _____ Signature: _____

N/A

4. Environmental site assessments are required for all tanks except those used for storing heating oil, not for resale, or for farm or residential motor fuel tanks under 1,100 gallons where the product is used on site. **Site Assessor's Name and Address (if applicable):**

N/A

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

PORTLAND RAMP CO 1-800-640-7867

6. Expected date of removal (month/day/year): 10/17/96

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

Date: 9/17/96

Signature: David W. Croxford (AGENT)

Printed Name and Title: David W. Croxford G.M.

Mail original and yellow copy to DEP; pink copy to fire department; retain gold copy.

RETURN POSTCARD AFTER TANK(S) HAS BEEN REMOVED