City of Portland, Maine - Bui Location of Construction: 81 Riverside St.	Owner: Harper Hotel,		Phone:		Permit No: 971085
Owner Address:	Lessee/Buyer's Name:	Phone:	Busines	ssName:	PERMIT ISSUED
Contractor Name:	Address:	Pho	ne:	esk Burach bestehnisteren bereiten er et et en	Permit Issued:
Les Wilson & Sons	POBox 1028, Westbrook		354-4583		-9 1997
Past Use:	Proposed Use:	COST OF WOL	RK:	PERMIT FEE:	
		\$		\$ 1,000.00	CITY OF DODT! AN
		FIRE DEPT.		INSPECTION:	CITT OF PURILAN
			Denied	Use Group: Type:	
		G:	447		Zone: CBL: 2/0/2-4-002
Proposed Project Description:				Signature: CS DISTRICT (P.A.D.)	Zoning/Approval:
		Action:	Approved		- 10/7/gg
		retion,			Special Zone or Reviews:
remove underground 1,000 ga	l fuel tank		Denied	□ Shoreland / □ Wetland	
*					□ Flood Zone
Permit Taken By:		Signature:		Date:	□Subdivision
Vicki Dover	Date Applied For:	10/1/05			☐ Site Plan maj ☐minor ☐mm ☐
		10/1/97			Zoning Appeal
1. This permit application does not preclude	e the Applicant(s) from meeting applicable	le State and Federal rules.			□ Variance
Building permits do not include plumbir					□ Miscellaneous
3. Building permits are void if work is not s tion may invalidate a building permit an	started within six (6) months of the date of d stop all work	f issuance. False informa-			☐ Conditional Use ☐ Interpretation ☐ Approved
					□ Denied
Mail to contractor				TISSUED VIREMENTS	Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review
					Action:
	CEDTIEVOATVON				
I hereby certify that I am the owner of record of authorized by the owner to make this application.	CERTIFICATION of the named property, or that the propose	d work is such as ! 11			□Appoved
authorized by the owner to make this applicat	IION as Ms authorized agent and I agree to	conform to all applicable	a laxua of thi	a immiadiation. I 11'.'	Denied //
in a permit for work described in the application	on is issued, I certify that the code official	I's authorized representat	ive shall hav	s juristiction. In addition e the authority to enter al	1/3/9/91
areas covered by such permit at any reasonab	le hour to enforce the provisions of the c	ode(s) applicable to such	permit	- and administry to clitch at	Date:
1/2 /1/			-		
III Nula					
GNATURE OF APPLICANT Ron Wilso	ADDRESS: n/Contractor	DATE:		PHONE:	- ////
Kon Wilso	m, courtageof				
RESPONSIBLE PERSON IN CHARGE OF W	ORK, TITLE			DUONE	
				PHONE:	CEO DISTRICT
White	-Permit Desk Green-Assessor's C	anary-D.P.W. Pink-Pu	blic File Iv	ory Card-Inspector	
					A. Powers

Location of Construction:	Owner:		Phone:	Permit No:
Owner Address:	Lessee/Buyer's Name:	Phone:	BusinessName:	PERMIT ISSUED
Contractor Name:				Permit Issued:
Past Use:	Proposed Use:	COST OF WOR	\$ 1,000.00	OCT - 9 1997
			Approved INSPECTION: Use Group: Type	Zone: CBL:
Proposed Project Description:	75	Signature:	Signature:	Zoning Approval:
Froposed Froject Description.			ACTIVITIES DISTRICT (P.A.D. Approved	" 06 50///9
remove underground 1,000 gal fuel tank			Approved with Conditions: Denied	☐ ☐ Shoreland ☐ ☐ Wetland
		Signature:	Date:	☐ Flood Zone ☐ Subdivision
Permit Taken By:	Date Applied For:			☐ Site Plan maj ☐minor ☐mm [
Vicki Dover	10	/1/97		Zoning Appeal
2. Building permits do not include plum	ot started within six (6) months of the date of is			☐ Variance ☐ Miscellaneous ☐ Conditional Use ☐ Interpretation ☐ Approved ☐ Denied
Mail to contractor			WITH REQUIREMENTS	Historic Preservation ☐ Not in District or Landmark ☐ Does Not Require Review ☐ Requires Review Action:
	CERTIFICATION			□Appoved
authorized by the owner to make this applif a permit for work described in the applicareas covered by such permit at any reaso	ord of the named property, or that the proposed lication as his authorized agent and I agree to cation is issued, I certify that the code official's mable hour to enforce the provisions of the code.	conform to all applicables authorized representated (s) applicable to such	e laws of this jurisdiction. In additive shall have the authority to entopermit	been
SIGNATURE OF APPLICANT ROD WIL	laon/ContractorDRESS:	DATE:	PHONE:	
RESPONSIBLE PERSON IN CHARGE O	F WORK, TITLE		PHONE:	CEO DISTRICT

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

COMMENTS

		*		
0.15.97 Returned mes	sage of	on Property	Manager	
12/97 Lo Wilson				
MIT DE WURTE		Musual	IANK	
			Inspection Record	.
		Type Foundation:		Date
		Framing:		<u></u>
		Plumbing:		
		Final:		
		Other:		

FIRE CODE PERMIT REPORT

DATE: 10/2/97	ADDRESS:_	81 Riverside St	
PERMIT TO: Le.	s Wilson + Sons		News Street Programme Co.
OWNER/CONTRACTO	DR:		
APPROVED_ ~	DENED_		

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).
- (1) A fire alarm acceptance report shall be submitted to the Portland Fire Department.
- All underground tank removal(s) and/or installation(s) shall be done in accordance with the Department of Environmental Regulations (Chapter 691).
- 2. 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.

- .3. All piping shall be protected from possible mechanical damage and vandalism.
- 14. A 4" storz dre 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 Marshai approval.
- 17. A sprinkler performance test shall be submitted to the Portland Fire Department after completion of sprinkler work.

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DALLERS OF ROLL SALES TO LOSS CONTROLES DAL LOSS SALES DE LOS CONTROLES DE LA SOSTI PLANDA

n annand leastar Box (october tell be approved by the Pile Disastance). De anathre

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(xocared) you believe as even or required to several action (browned)

A (Greener) processing from the process of

18. State Fire Marshal approval is required for this project.

Lt. 3 \fcDougail

W & MC

Fire Prevention Officer

City of Portland about soil men and the granders yo become as limit starred to railed out? .

Maine Department of Environmental Protection Bureau of Remediation and Waste Management 17 State House Station

Augusta, Maine 04333-0017 Attention: Tank Removal Notice

Telephone: (207) 287-2651

removal was completed.

Expires after 6 (six) months if the Department does not receive notice that removal was completed.

NOTICE OF INTENT TO ABANDON (REMOVE)



AN UNDERGROUND OIL STORAGE FACILITY

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

	SE TYPE OR PRINT IN INK: of Facility Owner: Language Language Track
Mailir	of Facility Owner: HARPER Hotel INC ag Address: 81 Riversion St Telephone #: 774 5601 State: Me Zip Code: 04103
City:	Port Land State: Me Zip Code: 04103
Conta	ct Person (name, address & telephone #): Rich Kelly - same As Above
Name	of Facility: Holiday Fra west Registration #: 1/3/0 y Location (town & street): 8/ Riversion St. Portland, Me
Facilit	y Location (town & street): St Riversion St. Portland, Me
1.	Identify the tanks at this location which are going to be removed:
	Tank # Tank Age Tank Size (gallons) Type of Product Stored 1 // 3000 #2 F.0
	1 // 3000 #2 F.O.
	3
2.	Directions to this facility (be specific):
	next to Exit & turnpike
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
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): **Mathematical Company of the Address o
5.	Name and telephone number of contractor who will do the tank removal: LES WILSON & SONS DNC. 854 4583
6.	Expected date of removal (month/day/year):
I heret above.	by provide Notice that I intend to properly abandon the underground oil storage facility as described
Date: _	9/19/97 Signature: Wmwld Walson
	9/19/97 Signature: Royald Wilson - Agent For Owner
	Mail original and yellow copy to DEP; pink copy to fire department; retain gold copy. RETURN POSTCARD AFTER TANK(S) HAS BEEN REMOVED