

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

BUILDING INSPECTION

## PERMIT

Permit Number: 091333

# RECEIVED

Please Read Application And Notes, If Any, Attached

This is to certify that 1085 Brighton Ave Llc/Risbaras Const  
has permission to Demolition of building and remove parking  
AT 1077 Brighton Ave CB# 274 A006001

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.

Dept. of Building Inspections  
City of Portland, Maine

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 enclosed-in. 24 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*[Signature]* 12/7/09  
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: 09-1333	Issue Date:	CBL: 274 A006001
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Location of Construction: 1077 Brighton Ave (1081)	Owner Name: 1085 Brighton Ave Llc	Owner Address: Po Box 10610	Phone:
Business Name:	Contractor Name: Risbara Bros Construction	Contractor Address: 197 US Route 1 Scarborough	Phone 2078835528
Lessee/Buyer's Name	Phone:	Permit Type: Demolitions - Building	Zone: B-2

Past Use: Commercial / <del>Multi Use</del> restaurant	Proposed Use: Commercial / Demolition of building and remove parking.	Permit Fee: \$100.00	Cost of Work: \$8,000.00	CEO District: 3
Proposed Project Description: Demolition of building and remove parking.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: N/A Type: SB Demolition only	
		Signature:	Signature: JMB 12/7/09	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: gg	Date Applied For: 11/19/2009	<b>Zoning Approval</b>		
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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..

**RECEIVED**

NOV - 7 - 09

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input checked="" 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: _____	Date: _____	Date: _____

ABM

Dept. of Building Inspections  
City of Portland Maine

**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

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 09-1333	<b>Date Applied For:</b> 11/19/2009	<b>CBL:</b> 274 A006001
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<b>Location of Construction:</b> 1077 Brighton Ave	<b>Owner Name:</b> 1085 Brighton Ave Llc	<b>Owner Address:</b> Po Box 10610	<b>Phone:</b>
<b>Business Name:</b>	<b>Contractor Name:</b> Risbara Bros Construction	<b>Contractor Address:</b> 197 US Route 1 Scarborough	<b>Phone</b> (207) 883-5528
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Demolitions - Building	

<b>Proposed Use:</b> Commercial / Demolition of building and remove parking.	<b>Proposed Project Description:</b> Demolition of building and remove parking.
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Ann Machado      **Approval Date:** 12/01/2009  
**Note:** **Ok to Issue:**

- 1) Your property is legally nonconforming as to minimum lot size. If the lot is vacant for more than a year, you will lose the commercial use and the property will be non conforming for any current use in the B-2 zone.

**Dept:** Building      **Status:** Approved with Conditions      **Reviewer:** Jeanine Bourke      **Approval Date:** 12/07/2009  
**Note:** 12/03 Routed for Fire review **Ok to Issue:**

- 1) Demolition permits are valid for a period of 30 days from the date of issuance. A written request must be submitted and granted for an extension to this time period. Dust prevention shall be controlled per Chapter 6 of the Municipal Ordinance and demolition per Section 3303 of the IBC 2003.
- 2) Demolition permit only. No other construction activities allowed until a separate approved building permit is issued

**Comments:**

- 12/1/2009-amachado: Gave permit to front staff to schedule pre-demolition inspection.  
12/4/2009-jmb: Emailed Unitil contact for gas discontinuance confirmation  
12/7/2009-jmb: Received confirmation from Unitil

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DEC 17 2009

Dept. of Building Inspections  
City of Portland Maine

**Jeanie Bourke - RE: 1077/1081 Brighton Ave**

**From:** "Bellemare, Richard" <bellemare@unitil.com>  
**To:** "Jeanie Bourke" <JMB@portlandmaine.gov>  
**Date:** 12/7/2009 12:11:49 PM  
**Subject:** RE: 1077/1081 Brighton Ave

Hi Jeanie

This is service has been retired on the property line. Ok to demo

Rick Bellemare  
Distribution Supervisor  
Unitil/Northern Utilities  
207-541-2504  
Cell # 207-252-0488  
bellemare@unitil.com

**From:** Jeanie Bourke [mailto:JMB@portlandmaine.gov]  
**Sent:** Friday, December 04, 2009 2:51 PM  
**To:** Bellemare, Richard  
**Subject:** RE: 1077/1081 Brighton Ave

Thanks Rick, can you shoot me an email to confirm the retire?

>>> "Bellemare, Richard" <bellemare@unitil.com> 12/04 1:59 PM >>>  
Hi Jeanie

This will be retired this Monday morning 12/7. I plan on digging in the grass area not in the road due to the winter moratorium

Rick Bellemare  
Distribution Supervisor  
Unitil/Northern Utilities  
207-541-2504  
Cell # 207-252-0488  
bellemare@unitil.com

**From:** Jeanie Bourke [mailto:[JMB@portlandmaine.gov](mailto:JMB@portlandmaine.gov)]  
**Sent:** Friday, December 04, 2009 10:41 AM  
**To:** Bellemare, Richard  
**Subject:** 1077/1081 Brighton Ave

Hi Rick,

Can you confirm that Unitil service has been discontinued at the above property for proposed demolition?

Thanks

Jeanie Bourke  
Code Enforcement Officer/Plan Reviewer

City of Portland  
Planning & Urban Development Dept./ Inspections Division  
389 Congress St. Rm 315  
Portland, ME 04101  
[jmb@portlandmaine.gov](mailto:jmb@portlandmaine.gov)  
(207)874-8715

#09-1333



# Demolition of a Structure Permit Application

Mail  
Permit

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>1081 BRIGHTON AVENUE</u>		
Total Square Footage of Proposed Structure <u>N/A</u>	Square Footage of Lot <u>6,347</u>	
Tax Assessor's Chart, Block & Lot: Chart# <u>274</u> Block# <u>A</u> Lot# <u>6 &amp; 7</u>	Owner: <u>1085 BRIGHTON AVE, LLC</u> <u>P.O. BOX 10610</u> <u>PORTLAND, ME 04104</u>	Telephone: <u>207-749-5157</u> <u>BEN</u>
Lesse/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>RISBARA BROS. CONST CO INC</u> <u>P.O. BOX 485</u> <u>SCARBOROUGH, ME 04070</u>	Cost Of Work: \$ <u>8,000</u> Fee: \$ <u>100.00</u>
Current legal use: (i.e. garage, warehouse) <u>CAFE, VACANT BUILDING</u> / <u>Commercial</u> If vacant, what was the previous use? <u>mult-use</u> How long has it been vacant? _____ Project description: <u>REMOVE EXISTING BUILDING AND PARKING. REGRADE SITE WITH LOAM &amp; SEED FOR FUTURE USE</u>		
Contractor's name, address & telephone: <u>RISBARA BROS CONST. CO. INC</u> <u>XX mail</u> <u>P.O. BOX 485 SCARBOROUGH, ME 04070</u>		
Who should we contact when the permit is ready: <u>RON HASKELL</u>		
Mailing address: <u>P.O. BOX 485 SCARBOROUGH ME 04070</u> Telephone: <u>883-5528</u>		

Please submit all of the information outlined in the Demolition call list. Failure to do so will result in the automatic denial of your permit.

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NOV 19 2009

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](http://www.portlandmaine.gov), or stop by the Inspections Division, Dept. of Building Inspection, room 315 City Hall or call 874-8703.

Dept. of Building Inspection  
City of Portland Maine

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: [Signature] Date: 11-02-09

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



# Demolition Call List & Requirements

Site Address: 1081 BRIGHTON AVE

Owner: 1085 BRIGHTON AVE, LLC

Structure Type: TIMBER FRAME CAFE

Contractor: RISBARA BROS.

Utility Approvals	Number	Contact Name/Date
Central Maine Power	1-800-750-4000	<u>OWNER CONTACTED</u>
Northern Utilities	797-8002 ext 6241	<u>BARBARA MONTY 10-2-09 541-2533</u>
Portland Water District	761-8310	<u>SONYA 10-30-09</u>
Dig Safe	1-888-344-7233	<u>11-16-09</u>

After calling Dig Safe, you must wait 72 business hours before digging can begin.

DPW/ Traffic Division (L. Cote)	874-8891	<u>OK 11-11-09</u>
DPW/ Sealed Drain Permit (C. Merritt)	874-8822	<u>OK 10-30-09</u>
Historic Preservation	874-8726	<u>DEB ANDREWS 10-30-09</u>
Fire Dispatcher	874-8576	<u>DISPATCHER RICHARDS 11-16-09</u>
DEP - Environmental (Augusta)	287-2651	<u>SANDY 11-16-09</u>

## Additional Requirements

- 1) Written notice to adjoining owners
- 2) A photo of the structure(s) to be demolished
- 3) A plot plan or site plan of the property
- 4) Certification from an asbestos abatement company

All construction and demolition debris generated in Portland must be delivered to Riverside Recycling Facility at 910 Riverside Street. Source separated salvage materials placed in specifically designated containers are exempt from this provision. For more information contact Troy Moon @ 874-8467.

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

Demo / Reno Clerk  
 US EPA Region 1 (SEA)  
 JFK Federal Building  
 Boston, MA 02203

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

Signed: Dan RA/LL

Date: 11-16-09

For more information or to download this form and other permit applications visit the Inspections Division on our website at [www.portlandmaine.gov](http://www.portlandmaine.gov)







# Abatement Professionals

590 County Road  
Westbrook, Maine 04092

**Project Information**  
**Contact** Robert Rickett

Date: 10/29/2009

Start Time: 7-7:30

Project Name: 1081 Brighton Ave, Portland, Maine

Client: Tom Holden from the Holden Agency

Contact: Ben his son

Phone: 207-749-5157

Industrial Hygiene Firm: none

Contact: Phone:

Time & Date:

General Contractor: none

Directions: see attached map

On Site Phone: **none**

Start & End Date:

Special Equipment needed: floor tile clean up in kitchen and bathroom, will need generator

MISC. Information: visual inspection only

**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.

<b>1. Project* Code</b>  APC-09-459 (Assigned by notification submitter) *See definition of project at Chapter 425.1.CCC	<b>2. Type of Notification</b> <input type="checkbox"/> Standard (O) <input type="checkbox"/> Facility O&M (Annual) <input checked="" type="checkbox"/> Emergency (E) <input type="checkbox"/> Courtesy (Not Regulated)	<b>3. Type of Activity</b> <input checked="" type="checkbox"/> Demolition (D) <input type="checkbox"/> Renovation (R) <input type="checkbox"/> Repair	<b>4. Variances</b> (Check all that apply) <input checked="" type="checkbox"/> Non-Standard (NS) <input type="checkbox"/> Standard (S) <input checked="" type="checkbox"/> Notification Waiver (10 day)
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<b>5. Asbestos Contractor</b>  Name Abatement Professionals Corp Address 590 County Road, Suite 2 City Westbrook State Maine Zip 04092 Contact Robert Rickett Jr TEL 207-773-1276 FAX 207-772-1203	<b>6. Facility Owner</b>  Name 1085 Brighton Ave, LLC Mailing Address P.O. Box 10610 City Portland State maine Zip 04103 Contact Thomas Holden TEL 7753793 FAX
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<b>7. Facility Location (Where removal is to take place)</b>  BLDG Name None Floor and/or Rm.# First Floor Physical Address 1081 Brighton Ave City Portland State Maine Zip 04103	<b>8. Facility Description</b>  Present Use Vacant Prior Use BLDG Size No. Floors BLDG Age
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<b>9. Notification Fees (Required fees must accompany notification)</b> <input type="checkbox"/> \$100.00 = ACM amounts 100 SqFt/100 LnFt to less than 500 SqFt/2,500 LnFt. <input type="checkbox"/> \$150.00 = ACM amounts 500 SqFt/2,500 LnFt or greater and less than 1,000 SqFt/5,000 LnFt <input type="checkbox"/> \$300.00 = ACM amounts 1,000 SqFt/5,000 LnFt or greater <input type="checkbox"/> Not Required or Not Included (Complete Block #9A)	<b>9A. Notification Fee Not Included</b> <input type="checkbox"/> Single family home exemption <input checked="" 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	<b>10. Project Work Hours</b> 7 AM to 2 PM (Show actual hours)  <b>Weekdays</b> (Check all that apply) <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input checked="" type="checkbox"/> T <input type="checkbox"/> F  <b>Weekend</b> (Check all that apply) <input type="checkbox"/> Sat <input type="checkbox"/> Sun
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<b>11. Scheduled Dates for Asbestos Project</b> Project Start Date (mm/dd/yy) 10/29/2009 Project Completion Date 10/29/2009 ACM Removal Dates (from) 10/29/2009 (to) 10/29/209	
--	--

Reviewed  
 10/29-5/15/09

**Asbestos Project Notification**  
 Proj. Code APC-09-459  
 2009 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) 287-6220

**FORM N**  
 Page 2 of 3

12. Asbestos (ACM) Removal			ME DEP USE ONLY	
ACM Type	Amount	Measurement	Postmark/ FAX/ hand delivered _____	
floor tile pieces	10	SqFt x LnFt	Date Received _____	
		SqFt LnFt	Check # _____	
		SqFt LnFt	NESHAP _____	
		SqFt LnFt	State _____	
		SqFt LnFt	Variance _____	

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: 11/02/2009 to 11/02/2009

14. Procedure Used to Detect Presence of Asbestos  
 Testing  Assumed Positive  Tested Positive  
 Method  PLM  TEM  
 Sampled By RWRJR  
 (Print Name)  
 Company APC

15. Project Clearance  
 Visual evaluation by: (Air Monitor (if known) and Company) Staff  
 Air Clearance by: (Air Monitor (if known) and Company) Staff

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)

<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 type="checkbox"/> Intact flooring demo by heavy equipment
<input type="checkbox"/> Regulated area with containment consisting of 1-layer 6 mil poly on walls & ceiling & 2 layers 6 mil poly on floors	<input type="checkbox"/> Adhesive by grinding or bead blasting
<input checked="" type="checkbox"/> Regulated area with Exclusion zone	<input type="checkbox"/> Enclosure
<input type="checkbox"/> Multiple non-contiguous glovebags (variance required)	<input type="checkbox"/> Encapsulation
<input type="checkbox"/> Contiguous glovebags less than 30 Ln/ft (variance required)	<input type="checkbox"/> Roofing removal by mechanical saws/cutters
<input type="checkbox"/> Wrap & cut- TSI in good condition (no containment)(variance required)	<input type="checkbox"/> Other (specify)
<input type="checkbox"/> Wrap & cut- TSI not in good condition (containment required)	
<input type="checkbox"/> Flooring by mechanical equipment/ice scrapers/pry bars	

17. Waste Transporter (Must be ME DEP licensed Non-Hazardous Waste Transporter)  
 Name Minerva Enterprises, LLC  
 Address 9000 Minerva Road  
 City \_Waynesburg State Ohio Zip 44688  
 Contact Frank Stuffano  
 TEL 330-866-3435 FAX 330-866-3488

18. Disposal Site  
 Name Minerva Enterprises, LLC  
 Address 9000 Minerva Road  
 City \_waynesburg State Ohio Zip 44688  
 Contact Frank Stuffano  
 TEL 330-866-3435 FAX 330-866-3488

**Asbestos  
Project  
Notification**

Proj. Code: APC-09-459  
**2009 Revision**

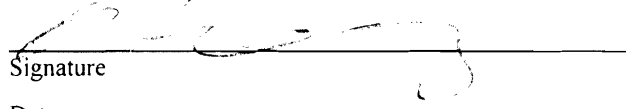
State of Maine  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-6220

**FORM  
N**

**Page 3 of 3**

**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.

  
Signature

**Robert Rickett Jr**  
Print Name

Date

Mailing Address 590 County Road

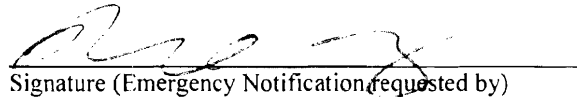
City Westbrook State Maine Zip 04092

TEL 207-773-1276 FAX 207-772-1203

**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)** owner was trying to get a demo permit to take down the building, tested needed to be done on the materials, some floor tile material was uncovered and needs to be removed and disposed of in order for client to get the permits to take down the building

  
Signature (Emergency Notification requested by)

**Robert Rickett**  
Print Name

Date **10/28/2009**

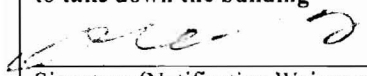
**MEDEP Action on Emergency Notification**

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

**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).

Detailed Explanation **owner was trying to get a demo permit to take down the building, tested needed to be done on the materials, some floor tile material was uncovered and needs to be removed and disposed of in order for client to get the permits to take down the building**

  
\_\_\_\_\_  
Signature (Notification Waiver requested by)

**Robert Rickett**  
Print Name

Date **10/28/2009**

**MEDEP Action on Notification Waiver Request**

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

\* \* \* Communication Result Report ( Oct. 28. 2009 1:02PM ) \* \* \*

1) ABATEMENT PROFESSIONALS  
2)

Date/Time: Oct. 28. 2009 1:00PM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
7109 Memory TX	DEP	P. 4	OK	

Reason for error  
 1) Hang up or line fail  
 2) No answer  
 3) Exceeded max. E-mail size  
 E. 2) Busy  
 E. 4) No facsimile connection

<b>Asbestos Project Notification</b>		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)287-6220		<b>FORM N</b> Page 1 of 3
<b>2009 Revision</b> <b>Important Notice:</b> 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 APC-09-459 (Assigned by notification submitter) *See definition of project at Chapter 425.1.CCC	2. Type of Notification <input type="checkbox"/> Standard (O) <input type="checkbox"/> Facility O&M (Annual) <input checked="" type="checkbox"/> Emergency (E) <input type="checkbox"/> Courtesy (Not Regulated)	3. Type of Activity <input checked="" type="checkbox"/> Demolition (D) <input type="checkbox"/> Removal (R) <input type="checkbox"/> Repair	4. Variance (Check all that apply) <input checked="" type="checkbox"/> Non-Standard (NS) <input type="checkbox"/> Standard (S) <input checked="" type="checkbox"/> Notification Waiver (10 day)	
5. Asbestos Contractor Name Abatement Professionals Corp Address 590 County Road, Suite 2 City Westbrook State Maine Zip 04092 Contact Robert Rickett Jr TEL 207-773-1276 FAX 207-772-3203		6. Facility Owner Name 1085 Brighton Ave, LLC Mailing Address P.O. Box 10610 City Portland State Maine Zip 04103 Contact Thomas Holden TEL 7753793 FAX		
7. Facility Location (Where removal is to take place) BLDG Name None Floor and/or Rm.# First Floor Physical Address 1081 Brighton Ave City Portland State Maine Zip 04103		8. Facility Description Present Use Vacant Prior Use BLDG Size No. Floors BLDG Age		
9. Notification Fees (Required fees must accompany notification) <input type="checkbox"/> \$100.00 - ACM amounts 100 SqFt/100 LnPt or less than 500 SqFt/2,500 LnPt. <input type="checkbox"/> \$150.00 - ACM amounts 500 SqFt/2,500 LnPt or greater and less than 1,000 SqFt/5,000 LnPt. <input type="checkbox"/> \$300.00 - ACM amounts 1,000 SqFt/5,000 LnPt or greater <input type="checkbox"/> Not Required or Not Included (Complete Block #9A)		9A. Notification Fee Not Included <input type="checkbox"/> Single family home exemption <input checked="" type="checkbox"/> ACM amount less than 100 SqFt/100 LnPt. <input type="checkbox"/> Fees paid quarterly (Non-Scheduled O&M only) <input type="checkbox"/> BGS exemption		10. Project Work Hours 7 AM to 2 PM (Show actual hours) Weekdays (Check all that apply) <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input checked="" type="checkbox"/> T <input 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 (mm/dd/yy) 10/29/2009 Project Completion Date 10/29/2009 ACM Removal Dates (from) 10/29/2009 (to) 10/29/2009				



# ASBESTOS BUILDING DEMOLITION NOTIFICATION

MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, Maine 04333



**Maine law requires the filing of the ASBESTOS BUILDING DEMOLITION NOTIFICATION with the Department prior to demolition of any building except a single-family home.**

Building owners are required to provide this notification of the demolition of a building to the DEP at least 5 working days prior to the demolition. This notification is **not** required before the demolition of a single-family residence or related structure (e.g., garage, shed, barn). It is also **not** required if previous notification of the demolition has been provided to the DEP as part of an asbestos abatement project notification. **Demolition** means the tearing down or intentional burning of a building or part of a building.

Prior to demolition, building owners must determine if there is any asbestos-containing material(s) (ACM) in the building. An "asbestos inspection" by a DEP-licensed Asbestos Consultant is required for all buildings except single-family homes and residential buildings with 2-4 units built after 1980. In lieu of an asbestos inspection, pre-1981 residential buildings with 2-4 units can be surveyed to identify possible ACM by someone knowledgeable about ACM, such as a code enforcement officer or building inspector. If materials that may contain asbestos are found, then you can either assume they are ACM or hire a DEP-licensed Asbestos Consultant to test the materials.

Whenever more than 3 square feet or 3 linear feet of ACM is identified, the ACM must be abated in accordance with the *Maine Asbestos Management Regulations* by a DEP-licensed Asbestos Abatement Contractor. This includes materials presumed to be ACM. Check [www.maine.gov](http://www.maine.gov) for a listing of asbestos contractors.

Prior to issuing a local demolition permit, the DEP requests that **municipalities** have applicants for municipal demolition permits complete this form and fax it to the DEP at 207-287-6220. Municipalities should not issue local demolition permits if the required asbestos inspection or survey has not been performed and identified ACM removed.

**Were regulated asbestos-containing building materials found?**  **yes**  **no**

property address: 1081 Brighton Ave Portland, Maine 04103	building description: <input type="checkbox"/> pre-1981 residential with 2-4 units <input type="checkbox"/> post-1980 residential with 2-4 units <input checked="" type="checkbox"/> other: commercial
asbestos survey/inspection performed by: (name & address) Robert Rickett Abatement Professionals Corp 590 County Road, Westbrook, Maine 04092 telephone:	asbestos abatement contractor Abatement Professionals Corp 590 County Road Westbrook, Maine 04092 telephone:
property owner: (name & address) 1081 Brighton Ave LLC P.O. Box 10610 Portland, Maine telephone: 7753793	demolition contractor: (name & address) Risbara Bros Scarborough, Maine  telephone: 883-5528
demolition start date: 11/2/2009 (mm/dd/yy)	demolition end date: 11/06/2009 (mm/dd/yy)

*This demolition notification does not take the place of the Asbestos Project Notification if applicable*

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT		
Robert Rickett Print Name: Owner/Agent	President Title	 Signature
773-1276 Telephone #	772-1203 FAX #	10/28/2009 Date



<b>Asbestos Project Variance Request</b>  APC-09-459 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) 287-6220	<b>FORM V</b>  <b>Page 1 of 2</b>  2009
<p align="center"><b>Standard Variance(s) Requested by Maine Certified Asbestos Design Consultant</b></p> <p>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.</p>		
<p><b>1. Wetting ACM (during removal phase only) is not required when:</b></p> <p><input type="checkbox"/> Temperature inside regulated area below 32°F &amp; heating not feasible nor practical</p> <p><input type="checkbox"/> Electrical conditions exist that would create shock/electrocution hazard</p> <p><input type="checkbox"/> Operational high-pressure steam lines are being abated/repaired</p>		
<p><b>2. Exhausting to Ambient Air is not feasible when:</b></p> <p><input type="checkbox"/> Distance too great      <input type="checkbox"/> Health &amp; Safety concerns (limited egress)</p>		
<p><b>3. Aggressive Air Clearances <u>in dirt crawl spaces only</u> are not required when:</b></p> <p><input checked="" type="checkbox"/> 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)</p>		

**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 an Inspector has determined the TSI is in good condition.
- Removal or repair of ACM using multiple non-contiguous 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:**

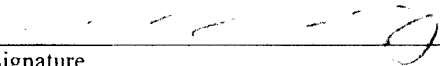
- Explain: demo site

**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

**Robert Rickett Jr**  
Print Name

Date 10/28/2009

Company Abatement Professionals Corp ME Certification Number DC-0027

Address 590 County Road, Suite 2 Certification Expiration Date 10/31/2009

City Westbrook State Maine Zip 04062

TEL 207-773-1276 FAX 207-772-1203

Asbestos 2009 Notification Form V.doc

<b>Asbestos Project Variance Request</b>  APC-09-459 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) 287-6220	<b>FORM V</b>  Page 2 of 2  2009
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**Non-Standard Variance(s) Requested by Maine Certified Asbestos Design Consultant**

Provide written justification that presents clear & convincing evidence that the asbestos project is distinctive in some way & the proposed alternative(s) to required work practices will comply with the intent of State law & rules. Written Department approval is required prior to implementation of non-standard variance(s).

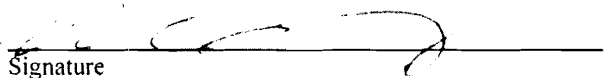
**List proposed work practice alternatives**

regulated area, Decon unit. PPE, clean up pieces of floor tile and dispose of to allow for building demo

**Reasons for Non-Standard Variance(s) (Explain in detail. You may add an attachment when necessary)**

tent removed flooring and left areas of debris, this needs to be cleaned up in order to take down building, see attached pictures

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

  
 \_\_\_\_\_  
 Signature

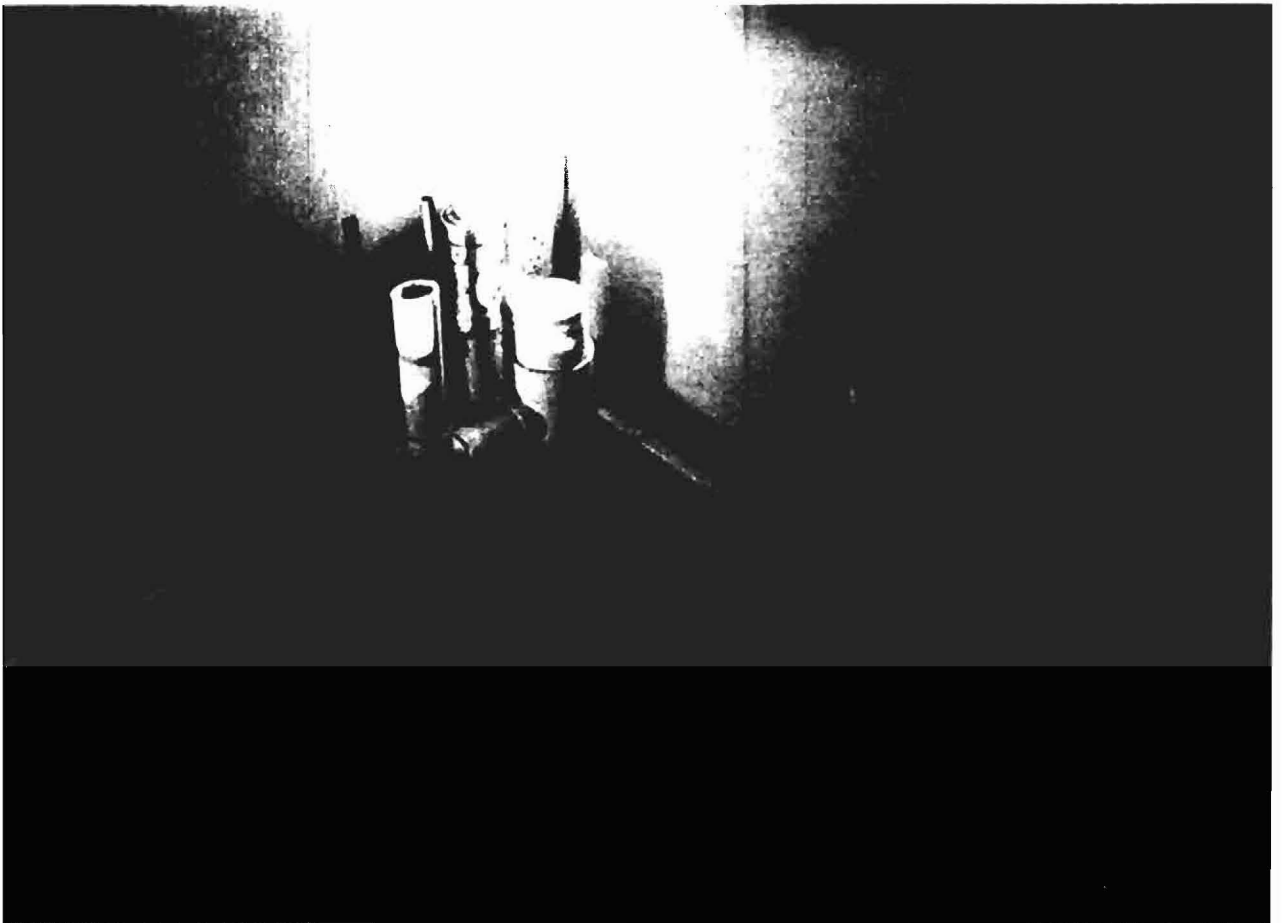
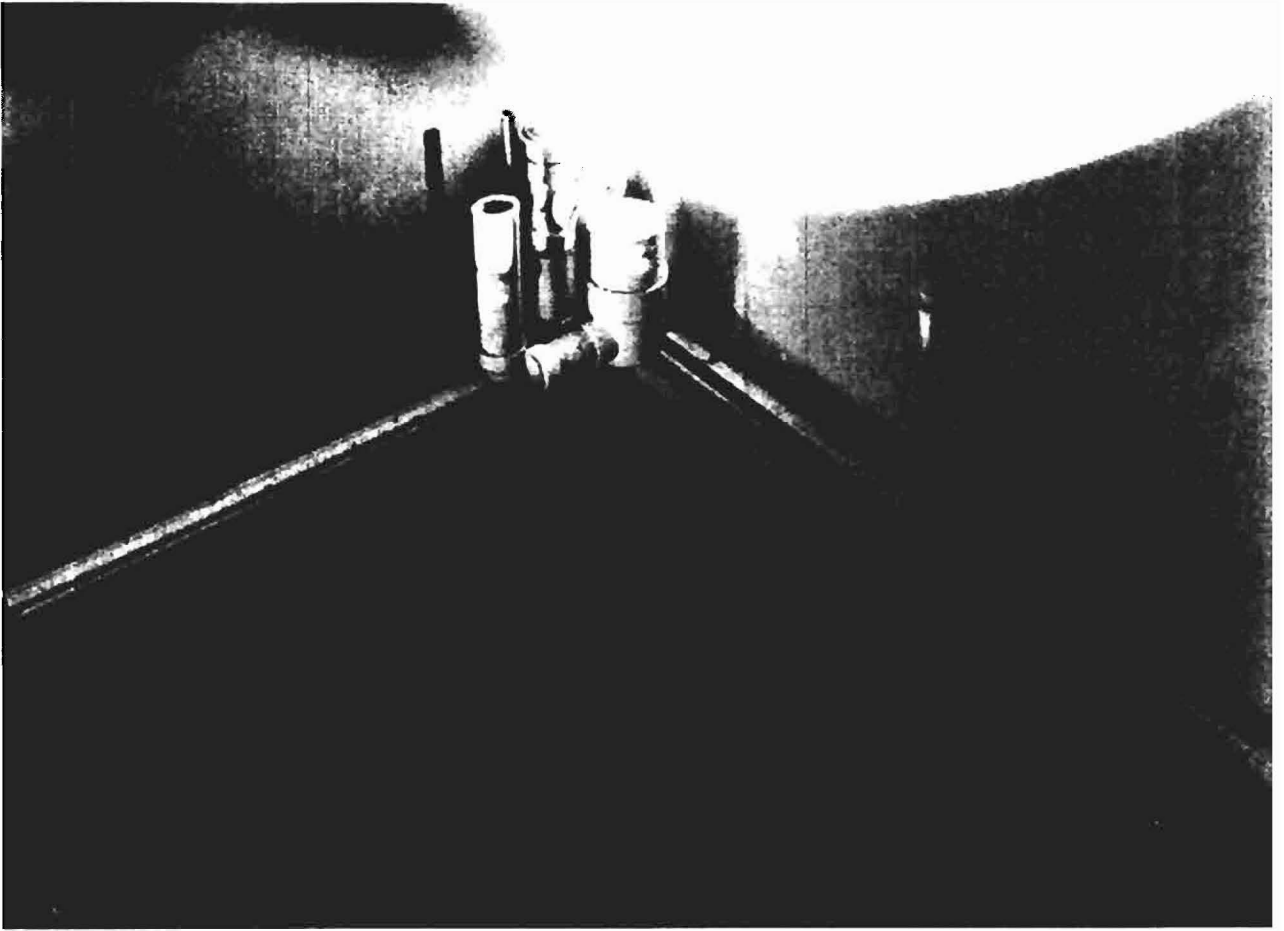
**Robert Rickett Jr**  
 Print Name

Date 10/28/2009

Company Abatement Professionals Corp      ME Certification Number      DC-0027  
 Address 590 County Road, Suite 2      Certification Expiration Date      10/31/2009  
 City Westbrook State Maine Zip 04062  
 TEL 207-773-1276 FAX 207-772-1203

**MEDEP Action on Non-Standard Work Practices Variance(s) Requested**

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



\* \* \* Communication Result Report ( Oct. 28. 2009 1:41PM ) \* \* \*

1) ABATEMENT PROFESSIONALS  
2)

Date/Time: Oct. 28. 2009 1:40PM

File No.	Mode	Destination	Pg (s)	Result	Page Not Sent
7110	Memory TX	DEP	P. 4	OK	

Reason for error  
 mmm. 1) Hang up or line fail  
 . 3) No answer  
 . 5) Exceeded max. E-mail size  
 E. 2) Busy  
 E. 4) No facsimile connection

<b>Asbestos Project Variance Request</b>  APC-09-459 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) 287-6220	<b>FORM V</b>  Page 1 of 2 2009
<b>Standard Variance(s) Requested by Maine Certified Asbestos Design Consultant</b>		
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.		
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<b>2. Exhausting to Ambient Air is not feasible when:</b> <input type="checkbox"/> Distance too great <input type="checkbox"/> Health & Safety concerns (limited egress)		
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Oct. 26. 2009 1:02PM ABATEMENT PROFESSIONALS No: 7109 P. 3

**Asbestos  
Project  
Notification**

Proj. Code: APC-09-459  
2009 Revision

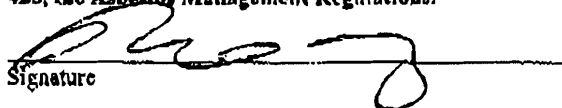
State of Maine  
Department of Environmental Protection  
Lead & Asbestos Hazard Prevention Program  
17 State House Station, Augusta, ME 04333  
TEL (207) 287-2651 FAX (207) 287-6220

**FORM  
N**

Page 3 of 3

**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.

  
Signature

Robert Rickett Jr  
Print Name

Date

Mailing Address 590 County Road

City Westbrook State Maine Zip 04092

TEL 207-773-1276 FAX 207-772-1203

**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) owner was trying to get a demo permit to take down the building, tested needed to be done on the materials, some floor tile material was uncovered and needs to be removed and disposed of in order for client to get the permits to take down the building

  
Signature (Emergency Notification requested by)

Robert Rickett  
Print Name

Date 10/28/2009

MEDEP Action on Emergency Notification

APPROVED  DISAPPROVED  
(date)

(by)  10/28/09



<b>Asbestos Project Variance Request</b>  APC-09-459 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) 287-6220	No. 7110 P. 3 <b>FORM V</b> Page 2 of 2 2009
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**Non-Standard Variance(s) Requested by Maine Certified Asbestos Design Consultant**

Provide written justification that presents clear & convincing evidence that the asbestos project is distinctive in some way & the proposed alternative(s) to required work practices will comply with the intent of State law & rules. Written Department approval is required prior to implementation of non-standard variance(s).

**List proposed work practice alternatives**

regulated area, Decon unit, PPE, clean up pieces of floor tile and dispose of to allow for building demo

**Reasons for Non-Standard Variance(s) (Explain in detail. You may add an attachment when necessary)**

tent removed flooring and left areas of debris, this needs to be cleaned up in order to take down building, see attached pictures

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

*[Handwritten Signature]*  
Signature

**Robert Rickett Jr**  
Print Name

Date 10/28/2009

Company Abatement Professionals Corp ME Certification Number DC-0027

Address 590 County Road, Suite 2 Certification Expiration Date 10/31/2009

City Westbrook State Maine Zip 04062

TEL 207-773-1276 FAX 207-772-1203

**MEDEP Action on Non-Standard Work Practices Variance(s) Requested**

**APPROVED**

**DISAPPROVED** (by)

*[Handwritten Signature]* 10/28/09







N/F  
1085 BRIGHTON AVE LLC  
16475/030

S56°46'00"E  
41.39' IRON PIPE

PAVED PARKING

TOTAL AREA  
OF PARCEL  
6,347 S.F.  
0.15 A.C.

RETAINING WALL

STEPS

PAVED WALK

DECK

WHEELCHAIR RAMP

PAVED WALK

S16°59'51"N  
113.52'

IRON PIPE

N56°19'39"W  
75.46'

OHE

OHE

OHE

OHE

OHE

BRIGHTON AVENUE

6"W

OHE

W

TAFT AVENUE

8"W

N34°27'41"E  
108.44'

E LLC

