



STATE OF MAINE
Department of Environmental Protection



Notice of Intent to Remove an Underground Oil Storage Tank Facility and/or Underground Product Piping

Notifications: Maine DEP Local Fire Department
(Sent a copy of this notice) Certified Tank Installer (as required) Site Assessor (as required)

Facility Information

Facility Name: Portland Xtra Mart Registration #: 4177
865 Brighton Ave. Portland,
 Facility Address Town
Drake Petroleum Co Inc. 21 Quinebaug Rd North Grosvenordale, CT 06255 860-935-5200
 Owner Name Owner Address Owner Phone

Identification of Tank / Piping to be removed

<input checked="" type="checkbox"/> Tank #	6-1	Tank Size:	6,000	Tank Age:	30
<input checked="" type="checkbox"/> Piping	6-1	Product:	Unleaded	Piping Age:	15
<input checked="" type="checkbox"/> Tank #	7-1	Tank Size:	6,000	Tank Age:	30
<input checked="" type="checkbox"/> Piping	7-1	Product:	Diesel	Piping Age:	15
<input checked="" type="checkbox"/> Tank #	8-1	Tank Size:	8,000	Tank Age:	30
<input checked="" type="checkbox"/> Piping	8-1	Product:	Kerosene	Piping Age:	6

Additional Removal Information

YES Did any tank or piping above store Class I liquids (e.g., gasoline, aviation fuel) within the last 12 months?
 NO

IF YES, REMOVAL OF THE TANK(S) OR PRODUCT PIPING MUST BE DONE UNDER THE DIRECTION OF A MAINE CERTIFIED TANK INSTALLER AND THE INERTING METHOD AND CLEANING LOCATION MUST BE IDENTIFIED.

Inerting Method: Dry Ice Cleaning Location: Off Site

Todd Adjutant # 274

Maine Certified Tank Installer Name and ID Number Todd Adjutant # 274 Installer Signature Todd Adjutant Date

Note: Site assessments must be conducted in accordance with Chapter 691(11)(A)(1)(d) and Appendix P.

Site Assessor (if applicable):	<u>St Germain Collins</u> Site Assessor	<u>207-591-7000</u> Phone Number
Contractor who will remove the tank:	<u>Portland Pump Co.</u> Contractor	<u>207-883-4317</u> Phone Number
Expected Date of Removal:	<u>10/24/2016</u> Month/Date/Year	

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

Owner or Authorized Employee Name and Title Signature Date

NOTE: WHEN TANK AND/OR PIPING HAS BEEN REMOVED, PLEASE FILL OUT AND SEND IN THE REMOVAL CONFIRMATION. EXPIRES AFTER SIX (6) MONTHS IF DEPARTMENT DOES NOT RECEIVE REMOVAL CONFIRMATION



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 Owner Name Owner Address Owner Phone

Identification of Tank / Piping to be removed

<input checked="" type="checkbox"/>	Tank #	9-1	Tank Size:	8,000	Tank Age:	30
<input checked="" type="checkbox"/>	Piping	9-1	Product:	unleaded	Piping Age:	6
<input checked="" type="checkbox"/>	Tank #	10-1	Tank Size:	8,000	Tank Age:	30
<input checked="" type="checkbox"/>	Piping	10-1	Product:	premium unleaded	Piping Age:	6
<input type="checkbox"/>	Tank #		Tank Size:		Tank Age:	
<input type="checkbox"/>	Piping		Product:		Piping Age:	

Additional Removal Information

YES Did any tank or piping above store Class I liquids (e.g., gasoline, aviation fuel) within the last 12 months?
 NO
IF YES, REMOVAL OF THE TANK(S) OR PRODUCT PIPING MUST BE DONE UNDER THE DIRECTION OF A MAINE CERTIFIED TANK INSTALLER AND THE INERTING METHOD AND CLEANING LOCATION MUST BE IDENTIFIED.
 Inerting Method: Dry Ice Cleaning Location: Off Site
 Todd Adjutant # 476
 Maine Certified Tank Installer Name and ID Number Installer Signature Date

Note: Site assessments must be conducted in accordance with Chapter 691(11)(A)(1)(d) and Appendix P.

Site Assessor (if applicable):	<u>St Germain Collins</u> Site Assessor	<u>207-591-7000</u> Phone Number
Contractor who will remove the tank:	<u>Portland Pump Co.</u> Contractor	<u>207-883-4317</u> Phone Number
Expected Date of Removal:	<u>10/24/2016</u> Month/Date/Year	

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

Owner or Authorized Employee Name and Title Signature Date

NOTE: WHEN TANK AND/OR PIPING HAS BEEN REMOVED, PLEASE FILL OUT AND SEND IN THE REMOVAL CONFIRMATION. EXPIRES AFTER SIX (6) MONTHS IF DEPARTMENT DOES NOT RECEIVE REMOVAL CONFIRMATION