Form # P 04

Appeal Board ____
Other ____

Department Name

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And	ITY OF PORTLA	
Notes, if Any, Attached	PERMIT	Permit Number: 071394
This is to certify thatWATSON REALTY	LLC A land Pu	PERMIT ISSUED
has permission toRemove 1,000 gallon	underg und Gas rage ta	DEC 1 8 2177
provided that the person or person the provisions of the Statutes the construction, maintenance at this department.	s of Name and of the and	oting this permit shall comply with ces of the City of Portland regulation tures, and of the application on file
Apply to Public Works for street line and grade if nature of work requires such information.	No lication inspect in must git and wrong permission procul be eithis building or a thereof laid or of the RINOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept.		2/3/07

PENALTY FOR REMOVING THIS CARD

Director Building & Inspection Services

Cit	ty of Portland, Maine	- Buil	ding or Use	Permi	t Application	n [Permit No:	Issue Date	:	CBL:		
	Congress Street, 04101		0				07-1394			317 B	004001	
Loc	ation of Construction:		Owner Name:			Ow	ner Address:			Phone:		
357 RIVERSIDE ST WATSON RI			WATSON RE	EALTY	ALTY LLC 357 RIVERSIDE ST							
Busi	iness Name:		Contractor Name	:		Cor	ntractor Address:			Phone		
Portland Pur		Portland Pump	Co.		P.O. Box 1180 Mussey Rd. Ext. Scarb				rb 2078834	317		
Lessee/Buyer's Name Phone:		Phone:	<u> </u>		Permit Type:					Zone: N		
						Т	anks - Remova	1			18-4	
Past			Proposed Use:	_		Per	rmit Fee:	Cost of Wor	k:	CEO District:		
Co	mmercial - Handyman Equ	ipment	Commercial -	Handyman		\$35.00			\$35.00			
			Remove 1,000 gallon				Approved	<u> </u>				
				Gas Storage tank		Approved Denied		Use Group: () Type:				
								Denied	Denied		30	
							SCOR	37	N	FIFT	<i>[50]</i>	
Pro	posed Project Description:		1			'`			<u> </u>	-11		
"	move 1,000 gallon undergr	ound G	as Storage tank			Signature: Crea Case Signature:						
	, ,		S			PEDESTRIAN ACTIVITIES DISTRIC			TRICT (P			
							tion: Appro	' und □ Am	around will	Conditions)	
						Ac	tion. Applo	veu App	noveu w	Conditions	Denied	
						Sig	gnature:			Date:		
Perr	mit Taken By:	Date Ap	pplied For:				Zoning	Approva	 1			
ld	obson	11/08	3/2007									
1.	This permit application d	oes not	preclude the	Spe	cial Zone or Revie	ws	Zoni	ng Appeal		Historic Pre	eservation	
	Applicant(s) from meetin		•		oreland		☐ Variance			Not in District or Landma		
	Federal Rules.											
2.	01 1 0			☐ Wetland ☐ Miscellaneous				Does Not Require Review				
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			☐ Flood Zone ☐ 0			Condition	ional Use		Requires Re	eview		
						Total months of the			□ .			
			a building	Subdivision			Interpretation			Approved		
				 	te Plan		Approve	.d		Approved w	/Conditions	
	-	1		_ 31	te rian		Арріоче	zu .		Apploved w	//Conditions	
			Maj Minor MM			Denied			Denied			
			\$ \$ \$	0	Livida	Ш						
	LEC .	١,		Doto: /	The state of the s	2	Date:		D.	ite:		
				Date: (nava a		Date.		Da			
	L. Commercial Commerci				J 11/5/	0	1					
			ar a marin lating at the parameters and in construction and installed an analysis of the second second second		·		1					
				C	ERTIFICATION	ON						
I he	reby certify that I am the or	wner of	record of the na				ronosed work is	authorized	hy the a	owner of reco	ord and that	
	ve been authorized by the o											
	sdiction. In addition, if a p											
	I have the authority to ente	r all are	as covered by su	ich pern	nit at any reasor	able	e hour to enforc	e the provi	sion of	the code(s) ap	pplicable to	
such	n permit.											
SIG	NATURE OF APPLICANT				ADDRESS	3		DATE		PHO	ONE	
RES	SPONSIBLE PERSON IN CHAR	GE OF W	ORK, TITLE					DATE		PHO	ONE	

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 07-1394 11/08/2007 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 317 B004001 Location of Construction: Owner Name: Owner Address: Phone: 357 RIVERSIDE ST WATSON REALTY LLC 357 RIVERSIDE ST **Business Name:** Contractor Name: Contractor Address: Phone Portland Pump Co. P.O. Box 1180 Mussey Rd. Ext. Scarb (207) 883-4317 Lessee/Buyer's Name Phone: Permit Type: Tanks - Removal Proposed Project Description: Proposed Use: Commercial - Handyman Equipment - Remove 1,000 gallon Remove 1,000 gallon underground Gas Storage tank underground Gas Storage tank **Dept:** Zoning **Status:** Approved with Conditions Reviewer: Marge Schmuckal **Approval Date:** 11/13/2007 Ok to Issue: Note: 1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that 2) Any legal nonconformity will be lost with the removal of this tank and all nonconforming rights will be extinguished. Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 12/04/2007 Ok to Issue: Note: 1) All debris and material must be removed form the site prior to completion. Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Greg Cass **Approval Date:** Ok to Issue: Note: 1) Tank removal shall comply with NFPA # 1 chapter 66.2.5.5 and NFPA 30.

A copy is available apon request.

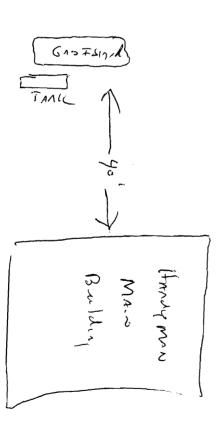
General Building Permit Application

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: 357	Riversi	pe ST			
Total Square Footage of Proposed Structure/A	\rea	Square Footage of Lot			
Tax Assessor's Chart, Block & Lot Applicant *must be owner, Lessee or Buyer* Telephone:					
Chart# Block# Lot#	Name HANDIMON Equipment 1775-30				
317 B 9	Address 357 Rulasiar ST.			7 , 5 - , , (
	City, State & Zip Poztlana ME				
Lessee/DBA (If Applicable)	Owner (if di	fferent from Applicant)	Со	st Of	
	Name		Cost Of Work: \$\frac{2}{500}		
	Address		C of O Fee: \$		
•	City, State &	Zip	Total Fee: \$ 35		
Contractor's name: PORTLAND PUM Address: 9 BORDER ROAD City State & Zin Scale hours 1 44				hone: 843-4317	
City, State & Zip Scar born, W Who should we contact when the permit is read	du Day &	W Con find	Teleph	none:	
Mailing address: Same As AB			Cicpi		
Please submit all of the information do so will result in the more of the sure the City fully understands the may request additional information prior to the ismus form and other applications visit the Inspection Division office, room 315 City Hall or call 874-8703. Thereby certify that I am the Owner of record of the more of the sure of th	full scope of the suance of a per ons Division on named property,	denial of your permit. The project, the Planning and I smit. For further information cline at www.portlandmainc.gov	Develo or to g, or sto	opment Department download copies of op by the Inspections s the proposed work and	
nat I have been authorized by the owner to make this aws of this jurisdiction. In addition, if a permit for wouthorized representative shall have the authority to encrovisions of the codes applicable to this permit.	rk described in t	his application is issued, I certif	y that i	the Code Official's	

Date:

0-trall 3' Brow 6121,



Riversion

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

TANKREMAO/cim

removal was completed.

Expires after 6 (six) months if the Department does not receive notice that

NOTICE OF INTENT TO ABANDON (REMOVE)

AN UNDERGROUND OIL STORAGE FACILITY

1				R LOCAL FIRE DEPARTMENT AT			
LEAST 30 DAYS PRIOR TO THE SCHEDULED REMOVAL							
PLEASE TYPE OR PRINT IN INK: Name of Facility Owner: Haway Man Equipment Rental Mailing Address: 357 Riversine St. Telephone #:							
Maili	ng Address:	357 Rivers	Telepho	one #: 775-344/			
City:	PORTLAN	Φ	State: ME	Zip Code: <u>04104</u>			
Conta	ict Person (nan	ne, address & tele	phone #):				
Nome	OF Facility	14 20 2 MA	775-3441 Security Pagistra	tion #: 13254			
Facili	ty Location (to	wn & street): $\underline{}$	Epupnur Registra PORTUND, ME 357	RIVERSIDE ST.			
1.	Identify the t	anks at this locati	on which are going to be remo	ved:			
	Tank#	Tank Age	Tank Size (gallons)	Type of Product Stored			
	1	Tank Age	1,000	GASOLINE			
	2	v	,				
	3						
2.	Directions to	this facility (be s	necific):				
٠ مک	Sin +	& Maine	pecific): Turnpike To Rivers	isc ST.			
•							
3.			ore Class I liquids (e.g., gasoli f tank(s) miist rf don	ne, jet fuel)? Yes No E UNDER THE DIRECTION OF A			
		TANK INSTAI	* *	E UNDER THE DIRECTION OF A			
	_	er's Name:		Signature			
	ARTHUR	Grant	021	arthur Grant			
4.	Environmenta	al site assessment	s are required for all tanks exce	ept 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):						
	ACAD.A	ENVIRON N	iestal				
5.			f contractor who will do the tar				
		•	npnny 1-800-640-	/00/			
б.	Expected date	of removal (mon	nth/day/year): ///05/07				
I hereb				ound oil storage facility as described			
above.	/						
Date: _	10/05/	07	Signature of owner or op	perator: Drad form Watson			
Date: 10 05 0 7 Signature of owner or operator: Brad form Watson Printed Name and Title: Woody Sawfelle Good May r World Same Same Same Same Same Same Same Same							
	Mail origi	nal and yellow co	opy to DEP; pink copy to fire	e department; retain gold copy.			
	F	LETURN POSTO	CARD AFTER TANK(S) HA	S BEEN REMOVED			