City of Portland, Maine	- Building or Use	Permit Ap	plication	Permit No:	Issue Date:	CBL:		
389 Congress Street, 04101	Tel: (207) 874-8703	Fax: (207)	874-8716	07-1075		317 B	3005001	
Location of Construction:	Owner Name:	-	Ov	vner Address:		Phone:		
375 RIVERSIDE ST	REYNOLDS	MARIANNE	M Po	PO BOX 99				
Business Name:	Contractor Name	::	Со	Contractor Address: Phone				
	Portland Pump	Co.	Р.	O. Box 1180 M	ussey Rd. E	xt. Scarb   2078834	4317	
1.essee/Buyer's Name Phone:				Permit Type: Zo				
			Т	anks - Commer	cial		15-4	
Past Use:	Proposed Use:	<del></del>	Pe	ermit Fee:	Cost of Worl	c: CEO District:		
Commercial - Handyman Ren	tal Commercial -	Handyman R	tental -	\$35.00 \$35.		5.00 5	00 5	
	Install a above	_	0	FIRE DEPT: Approved IN		INSPECTION:		
	un-leaded gase	oline storage	tank		Denied	Use Group: 🖊	Type: 4	
				I	Demed	-000	~1·2	
			<	see Conc	أبلينيع	7136 2	207	
Proposed Project Description:					_			
Install a above ground 1000 ga	allon un-leaded gasolin	e storage tank		gnature: (New		Signature:	10/9/07	
			PE	DESTRIAN ACTI	VITIES DIST	RICT (P.A.D.)	•	
			Ac	ction:   Approx	ved [ App	roved w/Conditions	Denied	
			Si	gnature:		Date:		
Permit Taken By:	Date Applied For:			Zoning	Approva	1		
ldobson	09/04/2007			Zoning	Approva	1		
1. This permit application de	nes not preclude the	Special Zo	one or Reviews	Zonii	ng Appeal	Historic Pr	eservation	
Applicant(s) from meeting		Shorelan	d	Variance	e	Not in Dist	trict or Landmar	
Federal Rules.								
2. Building permits do not in septic or electrical work.	nclude plumbing,	Wetland		Miscella	ineous	Does Not F	Require Review	
3. Building permits are void within six (6) months of the		Flood Zone Conditi		onal Use	Requires Review			
False information may investigate permit and stop all work	•	Subdivis	ion	Interpret	ation	Approved		
		Site Plan		Approve	ed	i Approved v	w/Conditions	
Pittine.		Maj Mi	nor; MMT;	Denied		Denied	Q	
		Date:	14/07	Date:		Date:		
<u>.</u>	i	•	' ' '					
		CERT	TIFICATION					
I hereby certify that I am the ov	wner of record of the na	med property	v, or that the p	roposed work is	authorized	by the owner of rec	ord and that	
I have been authorized by the c	owner to make this appl	ication as his	authorized ag	ent and I agree	to conform t	o all applicable law	s of this	
jurisdiction. In addition, if a po								
shall have the authority to enter such permit.	r all areas covered by su	ich permit at	any reasonabl	e hour to enforc	e the provis	sion of the code(s) a	ipplicable to	
such permit.								
SIGNATURE OF APPLICANT			ADDRESS		DATE	PH	IONE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



## **APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT**

	PERMIT ISSUE	)
*	*** *** ****	-
	No. No. of	
CI	TY OF PORTLA	ND
	17/17	

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

0 1/0 13 The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in

accordance with the Laws of Maine, the Building Code of	the City of Portland, and the following specifications:
Location / CBL HANDY MON RENTO 375 RIVERSIDE  Name and address of owner of appliance 3/785	SI. Use of Building Com MENCIAL Date 9.4.67
Installer's name and address Poetlows Pump 6.  9 Boener no- Sovebonoigh, M.E. 0907	Telephone 883-4317 U
Location of appliance:  Basement Floor Roof  Type of Fuel:	Type of Chimney:  Masonry Lined Factory built
Gas 🗆 Oil 🗅 Solid	Factory Built U.L. Listing #
Appliance Name:  U.L. Approved	Direct Vent  Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions?   Yes   No  IF NO Explain:	Type of Fuel Tank Oil Gas Size of Tank Oil Cyssoline
The Type of License of Installer:  Master Plumber #  Solid Fuel #  Oil #  Gas #  Other CEATIFIED TOWN INSTALLER	Number of Tanks feet.  Distance from Tank to Center of Flame feet.  Cost of Work: \$  Permit Fee: \$ \$
Approved  Fire: Massysl  Ele.:  Bldg.:	Approved with Conditions  See attached letter or requirement  Inspector's Signature Date Approved

Signature of Installer

SCOT LETELLIER

City of Portland, Maine - I	Permit No:	Date Applied For:	CBL:			
389 Congress Street, 04101 T	607-1075	09/04/2007	317 B005001			
Location of Construction:	Owner Name:		Owner Address:	Owner Address:		
375 RIVERSIDE ST	75 RIVERSIDE ST REYNOLDS MARIANNE M PO		PO BOX 99	PO BOX 99		
Business Name:	Contractor Name:		Contractor Address:	Contractor Address:		
	Portland Pump Co.		P.O. Box 1180 Mt	issey Rd. Ext. Scarb	(207) 883-4317	
Lessee/Buyer's Name	Phone:		Permit Type:		<del>-</del>	
			Tanks - Commerc	ial		
Proposed Use:		Propo	sed Project Description:		<del></del>	
Commercial - Handyman Rental	- Install a above ground 1000	Insta	ll a above ground 10	00 gallon un-leaded	gasoline storage tank	
gallon un-leaded gasoline storage	tank					
Dept: Zoning Status	s: Approved	Reviewe	r: Marge Schmucka	al Approval Da	ate: 09/04/2007	
Note:					Ok to Issue:	
	s: Approved with Conditions	Reviewe	r: Tom Markley	Approval Da		
Note:					Ok to Issue:	
1) Application approval based u	pon information provided by	applicant. An	y deviation from app	roved plans requires	separate review	
and approrval prior to work.						
Dept: Fire Status	s: Approved with Conditions	Reviewe	r: Capt Greg Cass	Approval Da	ate: 09/04/2007	
Note:	••			••	Ok to Issue:	
1) A NFPA 30 installation comp	diance letter is required					
All required signage shall be	•					
2) A means to disconnect power	to pump control shall be loca	ated remotely.	This shall be listed a	and labeled for the us	e.	
3) Provide details as to, Is the di	ke listed for barrier protection	n or containm	ent only. " UL listing	g # "		
4) If dispensening takes place at	night lighting shall be provid	led.				



# Application for Permit for Aboveground Storage Tank

Permit # or Registration #:
Date Issued:
Site Permanent ID#;
ACTION:
Approved per plan
Approved per plan & inspection
Denied
By:
Date:
FEE:
Amount:
Date Received:
Check Number.

Maine Department of Pub  State Fire Marshal's  52 State House State  Augusta, Maine 04333  (207) 624-8744 (pl  (207) 624-8767 (fe  Copy this form as needed. Use additions  See Instructions & Information  FACILITY:  Name: Handy Man Equipme	Office ion 3-0052 in) ix) al sheets as needed. ion page 6.	ACTION:  Approved per plan Approved per plan & inspection Denied By: Date:  FEE: Amount: Date Received: Check Number:  DEP Permit # (if any)
Physical Location: 357 Riversion	County: Cumberlan;	
City/Town: PORTCOND Facility Telephone: (207) 775-3441	Contact Person: BRAD WA	
	JAN CIRAL IVA	1350 (201) 113-3111
Name: SAME AS ABOV	É	
Mailing Address:		
City/Town:	State:	Zip Code:
Telephone:	Fax:	E-mail:
APPLICANT:		
Name: PURTLAND Pump Co	>.	
Mailing Address: a Boilder Ro	o A O	
City/Town: Scarberough	State: ME	Zip Code: 04070
Telephone: (207) 883 4317	Fax: (207) 883-1418	E-Mail: DCRoxfiel @ Brigas Pung Low
Applicant's signature:	<del></del>	Date: 7/11/07
Original Permit to Owner/Permit Holder.		
Duplicate Permit to Owner/Permit Holde	r for facility. (Copy of permit r	nust be available at the facility.)
Send copy of permit to applicant.		
APPLICATION FOR:		
PERMIT for Aboveground Storage Tank	Fee: \$15.00	
REGISTRATION of an Aboveground Sto One tank only; Capacity 660 gallons o Gasoline Tanks must be PERMITTED	r less: Combustible (Class II or	Class III) liquid
PPLICATION TYPE:	······	
New Facility	Change of Faci	lity* (Indicate Change Below)
D Existing Facility*	A	placement of Tank Installing AG TANK
Change of Ownership*		
"Submit a copy of each ex	isting permit and/or registration v	ange of Product  with this application.

Facility Name:

Facility Location:

Application Date:

TANK INFORMATION:			
Tank or Chaml (Assigned by P		Capacity of Tank or Chamber (U.S. Gallons)	Product
TANK (A) NE	e Aletanic	1,000	GASOLINE
Total Number of Tank	rs: 1	Total Capacity of Facility: 1,000	
Total Number of Char	nbers: 1		•
USE OF FACILITY:		·	
Public*    Private   Private   Sclf Service (As   Fueling Facility   Public*   Private   Private   Bulk Storage (Pro   Equipment Supply   Other (Specify): (PLANS:   For facilities with must be submitted   For facilities with   Private   Private	(Serves general public (Serves only vehicle eparate permit is required from the conference of the conf	than 10.000 gallons, plans and specification.	Desiler, Tail car, marine vessel, etc.)  L( Rental Equipment  ons certified by a professional engineer  ons must be submitted with this
application. Plans	do not need to be o	cerified by a professional engineer. (See pag	ges 4, 5, & 6 of this application)
DDITIONAL REQUIREMEN		· · · · · · · · · · · · · · · · · · ·	
Yes No	(A permit iss from the per If "Yes", h	m another agency or jurisdiction required for such by the State fire Marshal's Office does not exer mit requirements of any other agency or jurisdiction ave those other permits been obtained? we applications been submitted for those of	mpt a facility a.) Yes No
Yes No		k Plant with capacity greater than 20,000 ga	llons?
Yes YNc	(A SPCC is re (See 40 CFR If "Yes", is	tion Control & Countermeasures (SPCC) P quired for any facility with an aggregate capacity g 112 (Code of Federal Regulations)) there a certified SPCC for this facility? a certified SPCC being prepared for this faci	reater than 1520 gallons.)  Yes No
Yes No	Is this facility in	a recognized flood area?	
□ Yes ☑No Beng Riplace	Oinderground	erground piping at the facility? piping must comply with Maine Department of Env 191, Title 38 M.R.S.A. Section 470-K.)	rironmental Protection (MDEP) rules )
NALO System	If "Yes", do	es the underground piping comply with MD lat is the MDEP Permit Number?	DEP rules? Yes No

Facility Name:

Facility Location:

Application Date:

#### TANK SPECIFICATIONS:

TANK SPECIFICATIONS:						<del></del>
Tank Identifier (assigned by Permit Holder)	<u> </u>				<u> </u>	
Chamber Identifier (if any) (assigned by Permit Holder)					!	
Capacity (U.S. Gallons)	1,000				_	
Product	GA501.1	<u></u>		!		<u>i</u>
Is the product under pressure?	NÔ			{		i .
Is the tank approved/listed for use with the product?	YES	-		}		1
Is the tank approved/listed for use	1 = 1				i	1
as an Aboveground Storage Tank?	YES				1	<u> </u>
Is the tank (Horizontal) or Vertical? (Circle Answer)	Horiza Vest	Horiza Ven	Horizt Ven	Horizi Ven	Harizt Vert	Horiza Ven
Are support structures 12" or less at the lowest point?	YES	<u> </u>		-		
If "No", then do support structures have a minimum 2 hour fire resistance rating?					!	!
Is the tank inside a building? (See Note 4)	NO					
Is the tank in a vault? (See Note 6)	NO		i			
If "Yes", is the vault listed by a nationally- -recognized independent testing laboratory?						
Is there weather protection for the tank?	NO	1			ļ	
Type of secondary containment:			1	}	:	
Double Wall Tank (12,000 gallons or less)						
Dike, Concrete	X					
Dike, Earth with impervious liner						
Remote Impounding with liner						
Capacity of Dike or Remote Impounding				!		
Normal Vent, (Type and Size)	2"	1				
Emergency Vent, (Type and Size)	4"		;		į	
Type of Overfill Protection	VENT WHI	stle				
Leak Detection Continued in Dille			}	1	:	
Does Fill Pipe terminate within 6" of the bottom of the unk?	NO	:		1 1 1	i	
Is Electrical Wiring approved for use in the specified hazard area?	YES	1		:		
Type of Protection from vehicle collision damage.		1				
Type of Security	1			{		
(Fence around property tanks, (locks on dispensers,) etc.)	j	1	<u>.</u>		!	
Marking of Tanks:		;		:	i	
Product Name Gasoline						1
Hazard Classification 1			1			
Color Code (if any)				:		
Distance from tank to important building	106 8 FT			:		
Distance from tank to property line	5c					
Distance from tank to nearest side of public way						
Distance from tank to other tanks (3 foot minimum)	NA					
Distance from tank to dispensers Pany Mountain on T	9.114					
Distance from tank to propane storage*						
(Propane may not be stored within a dike for flammable/combustible liquids.)	NIA .					
Is tank located within 300 feet of a private water supply?	NC ·					
Is any tank or piping located within 1000 feet of a public water supply?	K C					

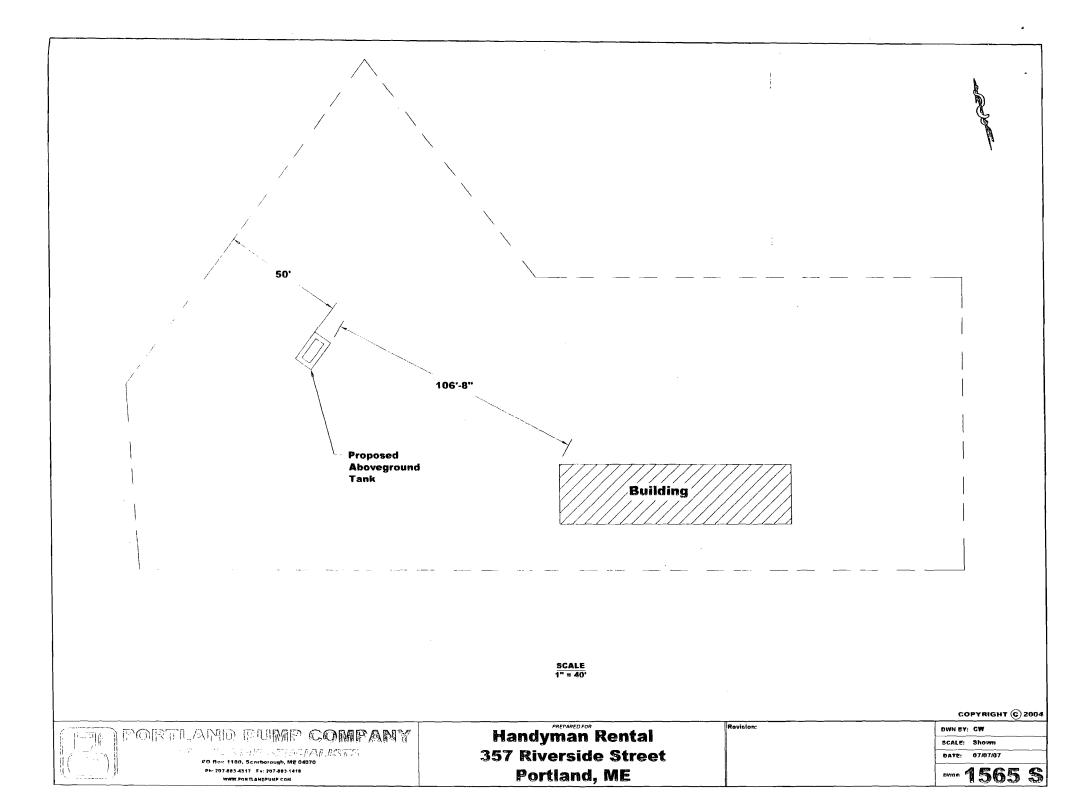
Facility Name:

Facility Location:

Application Date:

Show the following on this Plan:	Site Plan		Indicate NORTH
A. Location of:  1. Tanks & Dikes 2. Loading/Unloading Piping 3. Dispensers 4. Propage Storage 5. Electrical Controls & Equipment 6. Emergency Power Shut Off	B 7. Leak Detection Sump 8. Collision Protection 9. Security Fences 10. Buildings 11. Property Lines 12. Fire Extinguishing Equipment	3. Distance from tanks to:  1. Other Tanks 2. Buildings 3. Dispensers 4. Propane Storage 5. Property Lines 6. Public Ways	With Arrow

ATTACHED



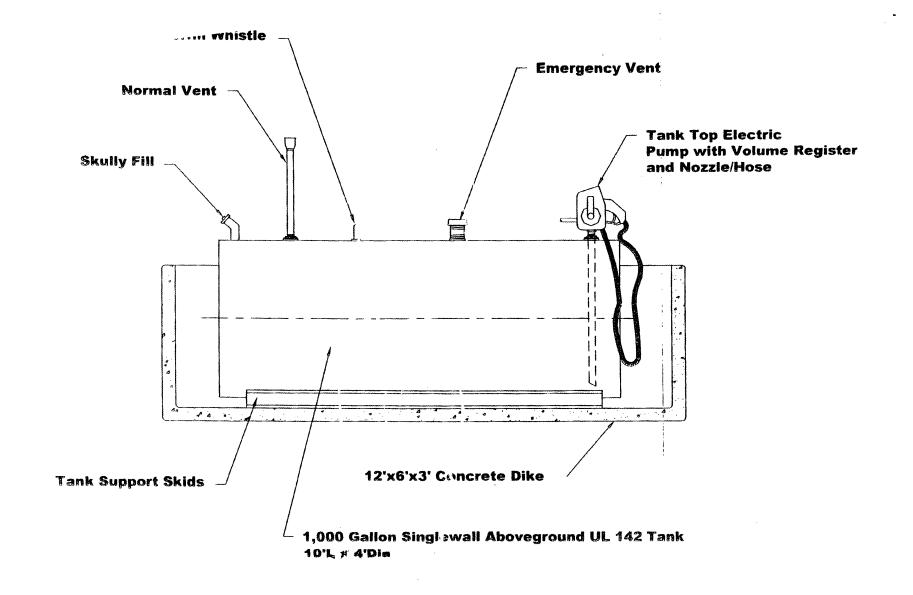
Facility Name:

Facility Location:

Application Date:

Show the following on this plan: CROSS SECTION & ELEVATIONS PLAN						
A. Base Material	C. Tenk	Supports D.	Venting 1. Normal Venus	E.	Piping G.  1. Supports	Labeling/Color Code (on Tanks and on Piping)
B. Dike 1. Construction M 2. Drain 3. Inside Dimens & Capacity	faterial	Protection:  a Fire Extinguishing Equipment b. from Flood c. from Collision d. from Tampering	a. Type & Size b. Height above ground c. Supports 2. Emergency Venus n. Type & Size		2. Brinknway device 3. Pipe Joints 4. Valves 5. Solenoids Londing Dock 1. Vehicle Comminme 2. Bonding Connectio 3. Self-Closing Valve	100000000000000000000000000000000000000

ATTACHED



PORTLAND PUMP COMPANY

PO Box 1180, Scarborough, ME 84070
Ph. 207 883-4317 Fm 207-883-1418
WWW PORTLENBPURP COM

Handyman
PORTLAND, MAINE
Proposed Fuel System

Revision:

COPYRIGHT © 2004 DWN BY: CW

SCALE: Shown
DATE: 08/27/07

1565



# State of Maine Department of Public Safety

STATE FIRE MARSHAL'S OFFICE

**Above Ground Storage** 

Site Permit

In accordance with the provisions of R.S., Title 25 Sec. 2441 as amended, permit is hereby granted for the installation to flammable liquid

Location Owner HANDYMAN EQUIPMENT RENTAL HANDYMAN EQUIPMENT RENTAL 357 RIVERSIDE STREET 357 RIVERSIDE STREET PORTLAND, ME 04104 PORTLAND, ME 04104

Tank Number Chamber: Liguid Description: Chamber Capacity: GASOLINE-UNLEADED 1000 Tank Total 1000 Site Total: 1000