Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMI

Permit REBUMITS ISSUED

This is to certify that ____410 RIVERSIDE ST LLC // ne Bio F

has permission to _____Pour a 8'x8' concrete pad, pl 2000 ga and doub walled to

OCT 1 5 2008

AT 410 RIVERSIDE ST

provided that the person or persons arm or provided this permit shall comply with all of the provisions of the Statutes of laine and of the fraction are entire the construction, maintenance and use of buildings and so octures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

fication finspe in musing hand with an permit on procult re this liding or at there is a dor at the second of the

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____

Appeal Board_

Other ____

Department Name

Director - Building & Inspection Services 14/5/00

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permi	t Application	n Peri	mit No:	Issue Date	•	CBT:		
389 Congress Street, 04101	Tel: (207) 874-8703	3, Fax:	(207) 874-871	6	08-1137	<u> </u>		320 A00	02001	
Location of Construction:	ion of Construction: Owner Name:			Owner Address:			Phone:			
410 RIVERSIDE ST (SI In	IVERSIDE ST (SI Ingersal) 410 RIVERS			70 INGERSOLL DR			207-975-3113			
Business Name: Owner Name: 410 RIVERSIDE ST (\$1 Jugger 1911) Contractor Name: October 1911				Contra	ctor Address:			Phone		
Maine Bio-F					gersoll Drive	Portland		20797531	13	
Lessee/Buyer's Name	Phone:			Permit					Zone:	
					itions - Comr	nercial			IM	
Past Use: Proposed Use:				Permit	Permit Fee: Cost of Work:		k:	CEO District:	7	
Commercial - Bio - disch d	Commercial -				\$40.00 \$2,000.		00.00	0 5		
recycling-facility	pad, place 200	00 gallo	n doubled	FIRE	DEPT:	Approved	INSPEC	SPECTION:		
"Positive Env	walled tank.					Denied	Use Gro	oup: 5	Type: 100	
) · · ·	′			See						
				C	See Conditions		1	ISPECTION: See Group: B Type: Park TBC 2003 Ignature Pm 10/15/08		
Proposed Project Description:			_		ure: (see			2 . /	_/ ว	
Pour a 8'x8' concrete pad, plac	e 2000 gallon doubled	walled	tank.				Signatu	re:) M /0//	<u>5/08</u>	
				PEDES	STRIAN ACTI	VITIES DIST	FRICT (P	P.A.D.)		
				Action	: Approv	ed 🗌 App	proved w/0	Conditions	Denied	
				Signature:				Date:		
Permit Taken By:	Date Applied For:	T		J Signate		A =======				
lmd	09/09/2008				Zoning	Approva	l I			
1 This permit application de	as not proclude the	Spe	cial Zone or Revie	ws	zs Zoning Appeal			Historic Preservation		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.		☐ Sh	Shoreland Variance					Not in District or Landmark		
2. Building permits do not in	clude plumbing,	Wetland Miscellane Flood Zone Conditiona			neous		☐ Does Not Require Review ☐ Requires Review			
septic or electrical work. 3. Building permits are void					Conditional Use					
within six (6) months of the False information may inverse permit and stop all work		☐ Su	bdivision		Interpretation			Approved		
		Sin	te Plan		Approved	i		Approved w/C	Conditions	
		Maj [☐ Minor ☐ MM	_	Denied			Denied		
PERMIT	ICCLIED		w card how		Demed			Jen		
PERIVIT	ISSULU	1	140 08 18	Date:		D _o	Date:			
CITY OF P		C	ERTIFICATION	ON		outh ouige d	. <u> </u>		d and that	
I hereby certify that I am the ow I have been authorized by the or jurisdiction. In addition, if a pe shall have the authority to enter such permit.	wner to make this applermit for work describe	ication a	as his authorized application is is	l agent sued, I	and I agree to	o conform he code off	to all ap icial's a	plicable laws outhorized repre	of this esentative	
SIGNATURE OF APPLICANT			ADDRESS	3		DATE		PHON	NE	

PHONE

DATE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

X	Footing/Build	ing Loca	ttlon Inspection:	Prior to p	pouring c	oncrete or	setting
	precast piers	· ·	-		•		

X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

 \mathcal{A}

Signature of Inspections Official

Date

10/15/08

Date



Application for Exemption from Site Plan Review Portland, Maine

2008 OB &

Department of Planning and Urban Development, Planning Division and Planning Board

Applicant Information	2. Project Information	
James Kaltsus	9/10/08	
Applicant/Owner	Application Date	
SI Ingres II Dr., Portland ME 04107 Mailing Address	Project Name/Description	
Consultant/Agent Or 975-3113 S18-321 Phone Fax Cell	51 Ingersal Drive (Address of Proposed Site	410 Riveride
878-3201//	320-4-602	
Phone Fax Cell	Assessor's Reference (Chart-B	lock-Lot)
Please Attach Sketch/Plan of Proposal/Development)		
	of this application)	
Please Attach Sketch/Plan of Proposal/Development) riteria for Exemptions: (See Section 14-523 (4) on page 2 of	of this application) Applicant's Assessment (Yes, No, N/A)	Planning Divi Use Only
	Applicant's Assessment	_
riteria for Exemptions: (See Section 14-523 (4) on page 2 of Within Existing Structures: No New Buildings, Demolitions	Applicant's Assessment	_
within Existing Structures: No New Buildings, Demolitions or Additions	Applicant's Assessment	_
Within Existing Structures: No New Buildings, Demolitions or Additions Footprint Increase Less Than 500 sq. ft.	Applicant's Assessment	_
Within Existing Structures: No New Buildings, Demolitions or Additions Footprint Increase Less Than 500 sq. ft. No New Curb Cuts, Driveways, Parking Areas SEP	Applicant's Assessment	_
Within Existing Structures: No New Buildings, Demolitions or Additions Footprint Increase Less Than 500 sq. ft. No New Curb Cuts, Driveways, Parking Areas SEP Curbs and Sidewalks in Sound Condition/Comply with ADA	Applicant's Assessment	_
Within Existing Structures: No New Buildings, Demolitions or Additions Footprint Increase Less Than 500 sq. ft. No New Curb Cuts, Driveways, Parking Areas Curbs and Sidewalks in Sound Condition/Comply with ADA No Additional Parking/No Traffic Increase	Applicant's Assessment	_
Within Existing Structures: No New Buildings, Demolitions or Additions Footprint Increase Less Than 500 sq. ft. No New Curb Cuts, Driveways, Parking Areas Curbs and Sidewalks in Sound Condition/Comply with ADA No Additional Parking/No Traffic Increase No Known Storm water Problems	Applicant's Assessment	_

Planner's Signature

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:	soll Drive	
Total Square Footage of Proposed Structure/Area	Square Footage of Lot	
	olicant *must be owner, Lessee or Buyer	* Telephone:
320 A DET LOFT TOP Add	me James Kaltsos dress 51 Inger8011 Dr v, State & Zip Portland; ME 04/03	878-3001 975-3113
Lessee/DBA (If Applicable)	mer (if different from Applicant)	Cost Of
SEP 9 On Nan	ng/	Work: \$
/ / ⁹ 2008 / Add	lress	C of O Fee: \$
City	, State & Zip	Total Fee: \$
Current legal use (i.e. single family)		
If vacant, what was the previous use?		
Proposed Specific use: Is property part of a subdivision? No	If we please name	 _
Project description: Pour an 3 by 8 concrete walked funk,	pad to place an	2000 gal. double
Contractor's name: Maine Bie - Fuel, Inc		
Address: 51 Ingersall Dr		
City, State & Zip Portland, ME 0410	75 Tel	ephone: 975-3113
Who should we contact when the permit is ready: <u>Jo</u>	mes Kaltsas Tele	ephone: <u>975-3113</u>
Mailing address: 51 Ingorsoll Dr. Bet	and, ME 04103	
Please submit all of the information outlin	ned on the applicable Checklist	t. Failure to

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

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, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

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: Date: 8-14-08	//			 			
	Signature.	hi	X	 	Date:	8-14-08	

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

•		nilding or Use Permit : (207) 874-8703, Fax: (8716	Permit No: 08-1137	Date Applied For: 09/09/2008	CBL 32	.: 20 A002001
Location of Construction:	<u> </u>	Owner Name:	(207) 874-6		Dwner Address:		Phon	=
410 RIVERSIDE ST		410 RIVERSIDE ST I	LLC		70 INGERSOLL I	OR		-975-3113
Business Name:		Contractor Name:			Contractor Address:		Phon	e
		Maine Bio-Fuel, Inc.			51 Ingersoll Drive	Portland	(20'	7) 975-3113
Lessee/Buyer's Name		Phone:		F	Permit Type: Additions - Comn	nercial	•	
Dept: Zoning Note:	Status:	Approved with Condition	ns Revie	wer:	Ann Machado	Approval D		09/10/2008 o Issue: ✓
 This permit is bein work. 	g approved o	on the basis of plans submi	itted. Any c	leviat	ions shall require a	separate approval t	pefore :	starting that
Dept: Building Note:	Status:	Approved with Condition	ns Revie	wer:	Tom Markley	Approval D		10/15/2008 o Issue: ✓
Application appro- and approrval prio		on information provided by	y applicant.	Any o	deviation from app	roved plans requires	s separ	ate review
Dept: Fire	Status:	Approved with Condition	ns Revie	wer:	Capt Greg Cass	Approval D	ate:	10/14/2008

Ok to Issue:

- 1) A supply of the proper amount and type of firefighting foam shall be readily available and maintained on site.
- 2) Application requires State Fire Marshal approval.
- 3) Install shall comply with NFPA 30

Comments:

Note:

9/10/2008-amachado: Gave site plan exemption to planning.

9/22/2008-gg: received granted site plan exemption on 9/19/08. Filed with permit (Greg Cass)

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon
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A Pre-construction Meeting will take place upon receipt of your building permit.

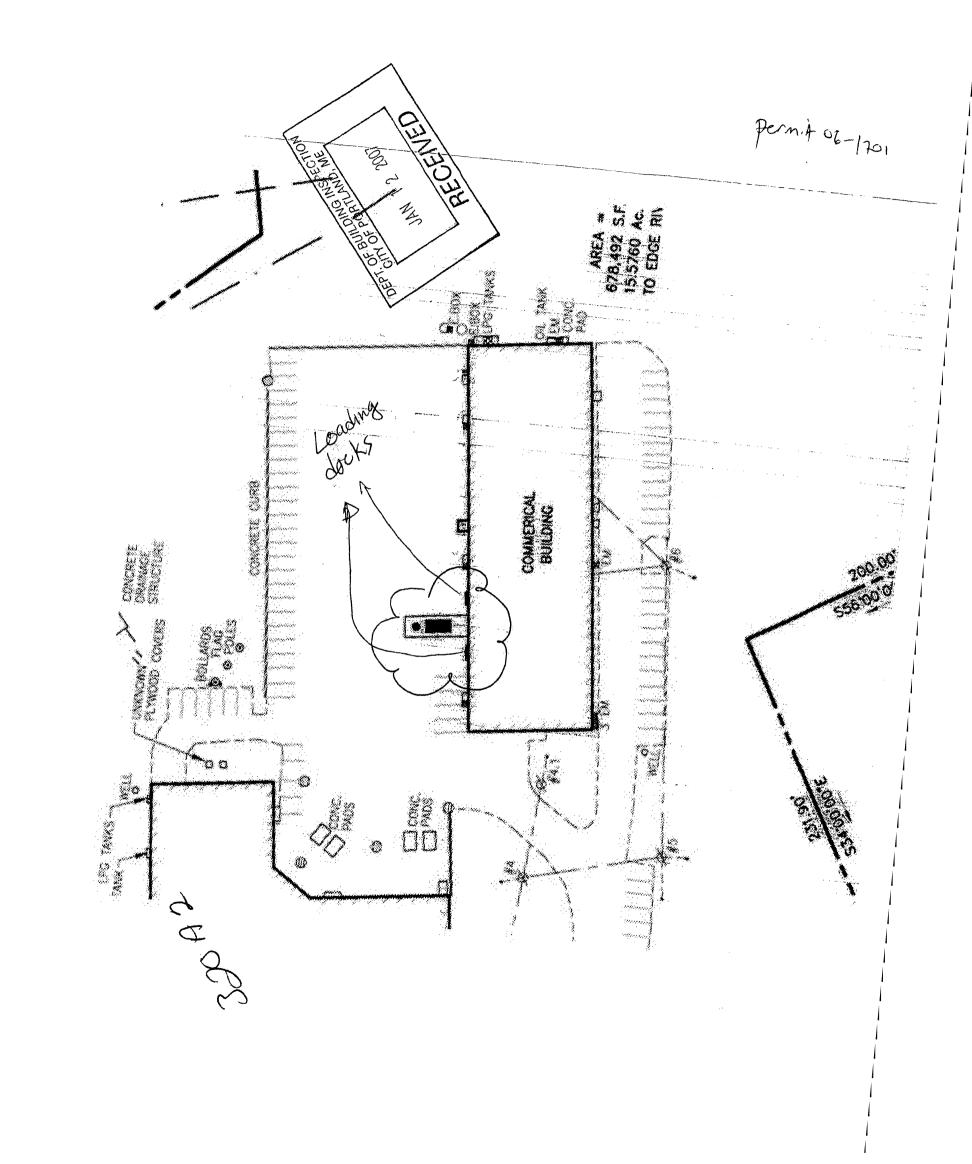
X	Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers
X	Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects <u>DO</u> require a final inspection.

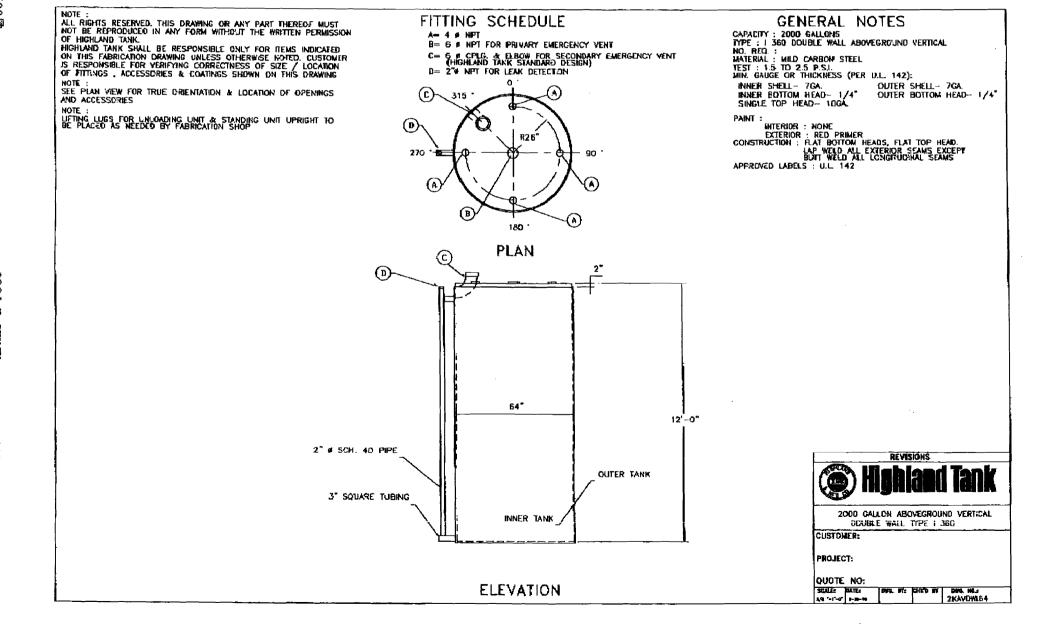
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CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee	Date
Though May Ely	10/15/02
Signature of Inspections Official	Date

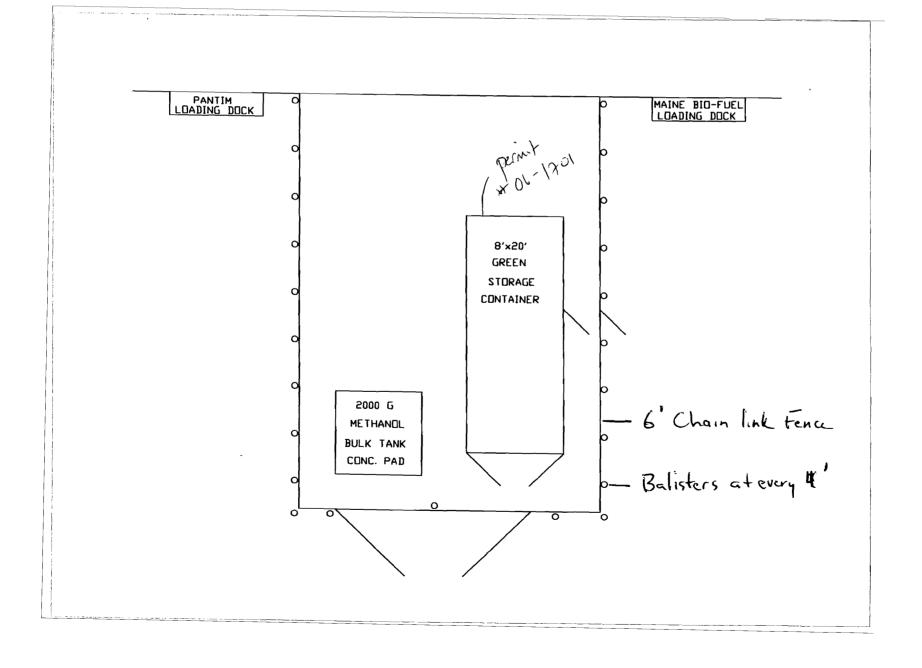


resumpsuf Biver LOUZ CI MAR penit 067701 Side: 25/min welkover25/ Side: 25/min Welkover25/ Side: 25/min Side: 5/08/ 200 doesn't Abut resident pol Eone or use



FITTING SCHEDULE

GENERAL NOTES



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.

<u></u>							
Location/Address of Construction:	gersoll Drive						
Total Square Footage of Proposed Structure/A							
64 sq. Ft							
Tax Assessor's Chart, Block & Lot	Applicant *must be owner, Lessee or Buyer	* Telephone:					
Chart# Block# Lot#	Name James Kaltsas	878-3001					
320 A 002	Address SI Ingersoll Dr	975-3113					
	City, State & Zip Portland; ME 01/03	915-3113					
Lessee/DBA (If Applicable)	Owner (if different from Applicant)	Cost Of					
/ / SEP g	Name	Work: \$					
SEP 9 2008	Address	C of O Fee: \$					
Λ	City, State & Zip	Total Fee: \$					
J	/	ТОГАТТЕС. ф					
Current legal use (i.e. single family)							
If vacant, what was the previous use?	·						
Proposed Specific use:	If yes, please name						
Project description:	17 yee, preuse manie						
Project description: Project description: Language St. by 8 Concr	ete pad to place an	2000 gal. double					
Contractor's name: Maine Bio - Fuel, 1	76						
Address: SI Ingersall Dr							
City, State & Zip Portland, ME C	74 <i>(03</i> Te	lephone: 975-3113					
Who should we contact when the permit is ready: James Kaltsas Telephone: 975-3113							
Mailing address: 51 Ingersoll Dr. P	ortland, ME 04103						
Please submit all of the information of	outlined on the applicable Checklis	t. Failure to					

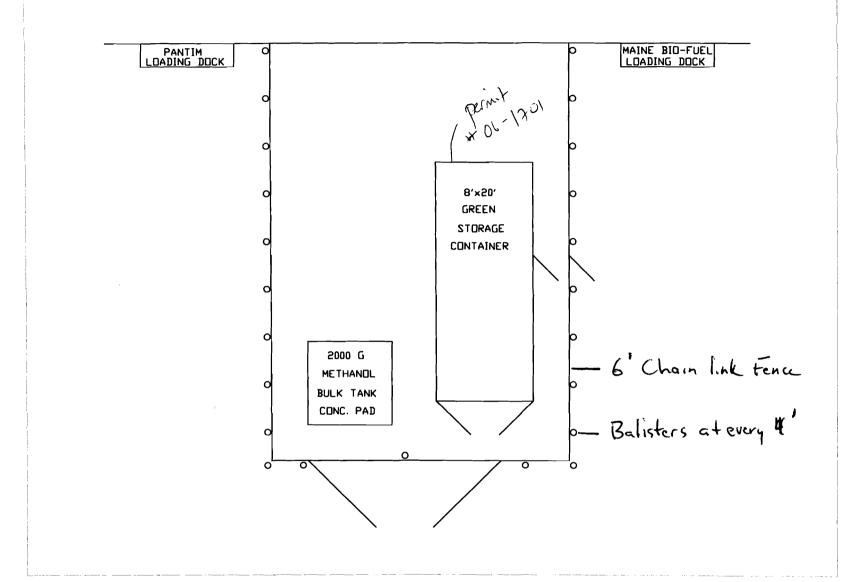
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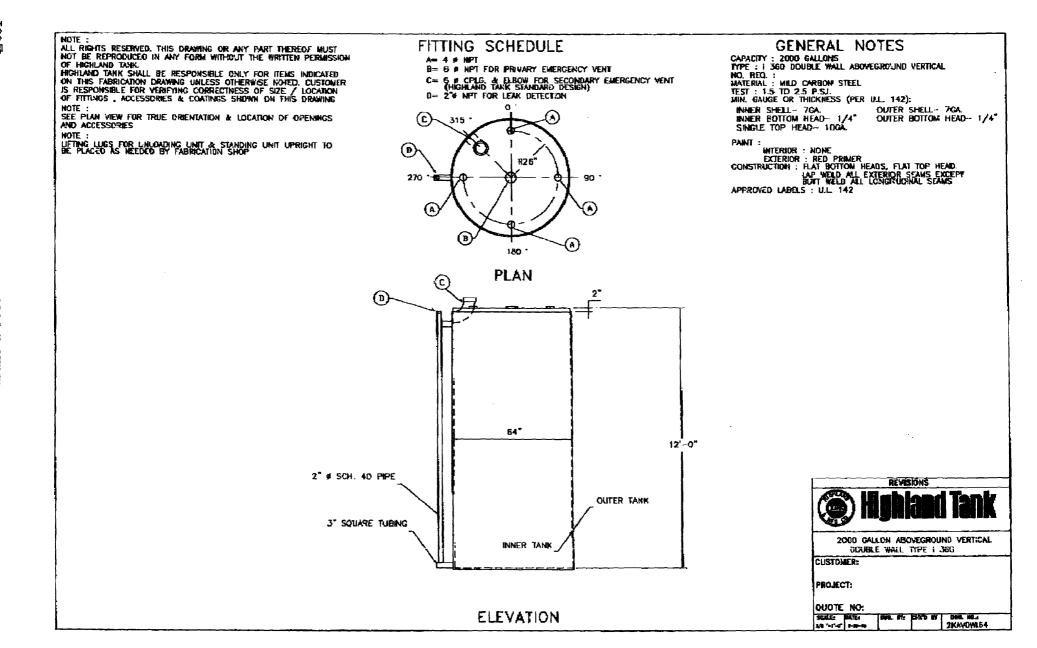
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Signature. Date: 8-14-08

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Prese mpscott DOS ET MAS permit 06-1701 FAT: 25/min

well over 25/

side: 25/min

well over 25/

well over 25/

Gill N. 1 ton doesn't Abut resident pol zone or use

Bio Deesel - F/P 321° CC

Bry Chin, Farm, C/OZ IIIB Combistab

- Glycerin F/P 320° CC

Inhabition, Absorbtion, III B combistable

- Methyl Alebhol F/P 51.80 IPFlammable

Toth, Ing, Abs, + use Alebhol resistant form.

Perchil Vent Rea, Gronding, Bonding

- Schim Hydroxide - pellets. corrosive

Absorbtion that Burns, - Inh, Ing,

+ Vent mixed w/ H2D then the Meth Bleohol

Anned Washed Bio where does the H2D ap?

Steve Dikon 57MO 626-3890 Bob Benndedies NFPA 617-984-7433 Lisa Olda Kowski 773-6422 Bochestar UC 100 Silver sol

