

Appeal 21-31 Washington Ave.

13
2/14/63

Streets Involved
✓ Washington Ave.
✓ Cumberland Ave.
✓ Ingraham & Court
✓ Cleaves
✓ Montgomery St.
✓ South Anderson St.
✓ East Oxford St.
✓ Oxford St Extension
✓ Greenleaf St.
✓ Monroe St.
✓ Trench St.
✓ Sheridan St.
✓ Congress St.
✓ Mountford St.
✓ Ponce St.
✓ Monument St.
✓ Dresden Court

Assessors Maps
13-17-20

Allen
188

South Anderson St. { 1-37 ✓
 { 2-28 ✓

13-M-30 near
159 Congress St.

Ingraham & Court { 1-13 ✓
 { 2-14 ✓

13-I-40 near
93 Cumberland Ave.

East Oxford St. { 25-35 ✓
 { 24-34 ✓

Oxford St Extension { 1-15 ✓
 { 2-14 ✓

Monroe St. - 2-34 ✓

Greenleaf St { 1-13 ✓
 { 2-16 ✓

Washington Ave { 3-75 ✓ Trench { 1-39 ✓
 { 2-74 ✓ { 2-42 ✓

Cumberland Ave { 59-139 ✓ Sheridan St { 61-109 ✓
 { 60-140 ✓ { 50-116 ✓

17-C-20, 9, 19 near 180 Congress St.

Montgomery St { 1-17 ✓ Ponce St { 5-19 ✓
 { 2-20 ✓ { 2-20 ✓

Cleaves St { 1-31 ✓ Monument St - (105-109) & (117-127) ✓
 { 2-34 ✓

Congress St { 163-237 ✓ Mountford St - 59-77 ✓
 { 166-240 ✓

Dresden Court - 17-D-16, 17, 18, 19, 22, 23 ✓

Washington Ave

188

- 1-9 ~~Parsons Realty Co, Inc~~
 11-13 ~~Shapiro & Co~~ 96 Alfred St. Bedford
 15-19 ~~Shapiro & Co~~ 96 Alfred St. Bedford
 21-23 David Garson & Mary Garson Wash Ave
 25-27 Leap
 * 29-31 Daniel Garson 1112 Broadway, 1st Flr
 33-35 Thomas Garson 1112 Broadway, 1st Flr
 37-39 Rue & Garson 39 Wash Ave
 41-43 Veto Garson 191 Washington Ave
 R. " Lyman St. Garson 1112 Washington Ave
 R. 45-47
 49-51 John Garson 59 Wash Ave
 2-4 Maurice & Lydia Weinman 221 Cong.
 6-8 Edw. Weinman 6 Wash Ave.
 10 Laura Weinman
 12-14 S. Weinman & Co. 1200 Utah - Perth Amboy, N.J.
 16-18 Edwin E. Weinman 489 Cumb Ave
 20-22 Charles A. & Antonio J. Weinman 205 Sherman St.
 24-26 Philomena & Emily Weinman 102 Wash Ave.
 28-30 Garson Co 31 Wash Ave.
 32-34 Peter Weinman 34 Wash Ave
 36-38 Margaret Weinman 38 Wash Ave.
 40 Richard & Margie Weinman 42 "
 42 Wm. Weinman 44 Wash Ave
 44-46 Geo. K. Weinman 46 "
 48 Abram S. & Anselma Weinman 1/2 Alfred St.
 50 Wm. & Anselma Weinman 568 Wash Ave.
 52-54 Leap
 * 62 Amos & Antonia Weinman 170 1st St.
 64 Samuel & Jennie Weinman 89 Vesper St.
 66-68 Garson & Co. 57 Franklin St.
 70 Cecelia & Lucy Weinman 70 Wash Ave.
 72
 74-76 Annie Weinman 76 "

110-112 Ship
 112-116 " "
 118-120 Edw. J. ... 37 Montreal
 122 " "
 124-127 " "
 130-132 John P. ... 96 India St.
 134 " "
 136-142 " " 122 December Ave.
 140-142 " " 122 December Ave.

163 Anne ... 13 E ... Rd ...
 165 ... 165 Cong. St.
 171 ... 171 Cong. St.
 173-175 ... 29 St. Lawrence St.
 177 ... 177 Cong. St.
 179-183 ... 187 Cong. St.
 185-187 ... 189 "
 189 ...
 R. 189 ...
 193 ...
 197 ... 199 + Cong. St.
 199 ...
 201-203 ... 201 Cong. St.
 205 ... 435 Turing St.
 207 ...
 209-211 ...
 213-215 ... 176 Dartmouth St.
 221 ...
 223 ... 223 + Cong. St.
 225-227 ... 227 "
 229-231 ...
 233-237 ... 235 "

Congress St. Cont.

4.

164 Chas. E. McBrady 164 Cong St.
 172-174 Charles L. Bonds 472 Adams St.
 176 William L. Bond 176 Cong.
 178-180 John A. Bond 31 Warwick St.
 182 Wm. Bond 182 Cong. St.
 184-186 Margaret M. Bond 184 " "
 188 Lord A. W. Bond 188 Cong. St.
 190 Bond A. W. Bond 190 " "
 194-196 Henry L. Bond 194 Cong. St.
 198-200 Bond A. W. Bond 198 Cong. St.
 202-204 Bond A. W. Bond 202 Cong. St.
 206-208 Bond A. W. Bond 206 Cong. St.
 210 Bond A. W. Bond 210 Cong. St.
 212-214 Bond A. W. Bond 212 Cong. St.
 216-220 Bond A. W. Bond 220 Cong. St.

Montgomery St.

1-5 Sleep
 7-9 Sleep
 11-13 Jacob L. Bond 11-13 Montgomery St.
 15-17 Sleep
 19-21 Sleep
 23-25 Sleep
 27-29 Sleep
 31-33 Sleep
 35-37 Sleep
 39-41 Sleep
 43-45 Sleep
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 175-177 Sleep
 179-181 Sleep
 183-185 Sleep
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 679-681 Sleep
 683-685 Sleep
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 691-693 Sleep
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 699-701 Sleep
 703-705 Sleep
 707-709 Sleep
 711-713 Sleep
 715-717 Sleep
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 723-725 Sleep
 727-729 Sleep
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 883-885 Sleep
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 999-1001 Sleep

Monroe St.

1-4 Sleep
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 9-12 Sleep
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 705-708 Sleep
 709-712 Sleep
 713-716 Sleep
 717-720 Sleep
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 737-740 Sleep
 741-744 Sleep
 745-748 Sleep
 749-752 Sleep
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 761-764 Sleep
 765-768 Sleep
 769-772 Sleep
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 841-844 Sleep
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 853-856 Sleep
 857-860 Sleep
 861-864 Sleep
 865-868 Sleep
 869-872 Sleep
 873-876 Sleep
 877-880 Sleep
 881-884 Sleep
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 893-896 Sleep
 897-900 Sleep
 901-904 Sleep
 905-908 Sleep
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 977-980 Sleep
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 989-992 Sleep
 993-996 Sleep
 997-1000 Sleep

Clearance St.

1-5 Sleep
 7-9 John J. & Mary A. Henry 56 Hendrick St.
 11-13 Sleep
 15 Marion A. Henry 19 Clearance St.
 17-19 Marion A. & Mary M. Henry 21 Clearance St.
 21 Corinne D. & Joseph M. Henry 23 Clearance St.
 22-25 Martin Henry 25 Clearance St.
 27 Sleep
 29-31 Charles & Mary A. Henry 22 Afford St.
 2-6 Sleep
 7-10 John D. & Joseph M. Henry 10 Clearance St.
 12-14 Paul & Edith Henry 14 "
 17-20 John D. & Mary A. Henry 11 Anderson St.
 22-24 Walter F. Henry 22 Clearance St.
 26-28 Michael W. Henry 28 "
 30-34 Michael Henry 26 "

Anderson St.

1-3 Sleep
 5 Martha & Ruth Storsky 114 Hayes St.
 7-9 Margaret D. & Mary A. Henry 9 Anderson St.
 11 Sleep
 12-15 Joseph & Mary Henry 15 Anderson St.
 17-19 Patrick Henry 19 "
 21 Camille & Antoinette Henry 40 Greenhof St.
 23-25 Charles J. Henry 25 Anderson
 27 William D. & Mary H. Henry 27 "
 29-31 Arthur H. & Charles F. Henry 32 Afford St.
 33-35 Sleep
 37-39 Sleep
 41-43 Sleep
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 49-51 Sleep
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 613-615 Sleep
 617-619 Sleep
 621-623 Sleep
 625-627 Sleep
 629-631 Sleep
 633-635 Sleep
 637-639 Sleep
 641-643 Sleep
 645-647 Sleep
 649-651 Sleep
 653-655 Sleep
 657-659 Sleep
 661-663 Sleep
 665-667 Sleep
 669-671 Sleep
 673-675 Sleep
 677-679 Sleep
 681-683 Sleep
 685-687 Sleep
 689-691 Sleep
 693-695 Sleep
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 769-771 Sleep
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 781-783 Sleep
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 805-807 Sleep
 809-811 Sleep
 813-815 Sleep
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 841-843 Sleep
 845-847 Sleep
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 993-995 Sleep
 997-999 Sleep

Anderson St. East

24-26 Roy J. & Jeanette L. Laid (R) 34 Stevens Ave
 115 Westbrook
 28 Louis H. McDaniel 115 West St.
 30-32 Emma L. & Emma O. Parsons, Mrs 32 Anderson
 & married W.

Ingleside St.

5 Peter Ferrante 34 Clark Ave
 7-9 Peter Ferrante, Mrs 100 Clark St.
 11-13 Martin B. Quinn

2-5 Sleep
 15 "

Offord St.

1-3 Sleep 7 Offord St.
 5-7 Sleep, Frederick 9 Offord St.
 9-11 Stanley Quisenberry 27 "
 13-15 Sleep 31 Offord St.
 29 Katherine J. McMillan 47 Charlbury St.
 31 Peter Carpenter
 35 Amaco, Mrs. Iron Duf

2-4 Sleep 10 Offord St.
 6-7 " 18 Offord St.
 10-12 Antonio Ferrante 22 "
 14 Sleep

16-18 Mrs. A. & Margaret Langer 32 Offord St.
 20-22 Chas. & Mary A. Kacci
 24-27 Sleep
 32-34 Arthur H. & Elsie M. L. Langer

Greenleaf St

- 1-7 Deep
- 9-11 "
- 13 "
- 2 "
- 4-8 "
- 10 Henry E. Wetland 163 Maple Ave.
- 12-14 Constance C. 1100 S. 1st St. 6 Allen Jones 133 Lexington
- 16 Deep

Larch St

- 1-3 Deep
- 5-7 1100 1st St 175 Grandview St.
- 9 Charles Salatiello 57 Franklin St.
- 11 Jacob & Helen Wallis 11 Larch St
- 12 Mrs. F. Conley, Jr 1- Larch St.
- 14-17 Deep
- 18 "
- 21 " 19 Larch St
- 23-25 Alice K. Jordan 25 "
- 27-47 Deep

- 2 Deep
- 4 Vesna B. J. L.
- 6 Americo B. 1 Marcello Ferrante 6 Larch St.
- 8-10 Marietta M. Pechantova 654 Bush Ave
- 12 Peter C. Credeau 12 Larch St
- 14 Lucy Hughes 11 Monument St.
- 16-18 John J. Barrett 20 Larch St.
- 20 "
- 22 Catherine H. Myatt 22 Larch St.
- 24 54 Deep

Sheldon St

- 57-63 Deep
- 69-71 "
- 73-77 Mattie & Melina Collo 75 Sheldon
- 79-83 Deep
- 84-91 Lorne S. Ellis, Mrs 89 Sheldon

Sheldon St. Cont

93	Henry E. K. K. K.	95	Sheldon
95	Walter E. J. & Eliza K. K.	99	"
99	Bradenman O. J. & Eliza K. K.	103	Sheldon St
103	Felix P. & Anna O. K. K.	105	"
105-107	Ralph E. & Emma K. K.	142	Sheldon
109	Anna K. K.	54	"
50	Linda M. K. K.		
52-54	Eliza		
56	"		
66-70	"		
72	Monett K. K.	72	Sheldon St.
74-80	Eliza		
77-93	Mary B. K. K.	22	Bradford St.
92-94	Catharine K. K.	92	Sheldon St
96-98	Eliza & Mary K. K.	100	Sheldon St
100-102	"		
104-106	Michael J. & Anna K. K.	106	Sheldon
108-110	Mary A. K. K.	110	"
112	Bartley J. J. & Eliza K. K.	112	Sheldon St
114-116	Frank A. & Catherine K. K.	116	"

Ponce St

1-5	James A. C. & Mary K. K.	115	Monument
7-9	Pietro & Anna K. K.	9	Ponce St.
11	Arturo & Maria K. K.	11	Ponce St.
13-19	Eliza		
2-6	Katherine K. K.		
8-10	Mary K. K.		
10-16	Mary K. K.		
18-24	Eliza		

Dresden Court

6-8 Eugenia & Richard, Mrs
12 Albert & Helene, Adelman, Jr.
14 Thomas & Elsie
6 Dresden Court
12 Dresden Ct.
14 " "

Monument St.

105-107 Dresden St. Leonard & Elsie
R " " 100 Irving St.
109 Mary & Constance, Mrs
111 Othello & Elsie
112-116 Joseph & Elsie
117-119 ~~Joseph & Elsie~~
121 Carl & Elsie
123 Robert & Elsie
125 Marie & Elsie
127 Joseph & Elsie
109 Monument St.
111 " "
121 Monument St.
124 Monument
284 St
187 ~~Monument St.~~
204 Veranda

Montford St.

59-61 Lena C. Perkins, Mrs
63-73 ~~Catherine & Elsie~~
77 Elsie
236 State apt 5

CITY OF PORTLAND, MAINE
IN THE BOARD OF APPEALS

February 18, 1963

TO WHOM IT MAY CONCERN:

The Board of Appeals will hold a public hearing in the Council Chamber at City Hall, Portland, Maine, on Thursday, February 23, 1963, at 4:00 p.m. to hear the appeal of Shell Oil Company, option owner of property at 21-35 Washington Avenue, requesting an exception to the Zoning Ordinance to permit construction of a one story masonry service station building 30 feet by 58 feet at this location.

This permit is presently not issuable because: 1) the rear wall is to be a minimum of 10 feet and the overhang of roof a minimum of 7-1/2 feet from the rear lot line instead of the 20 feet and 18 feet respectively required by Section 9-C-b-1 of the Ordinance because the rear line of this property, located in a B-2 Business Zone, abuts an R-6 Residence Zone; 2) a revolving pole sign to be located near the street corner is to be about 27 feet high, thus exceeding the maximum height of 20 feet set by Section 16-A-5a and will also during its revolution face the adjoining residential zone at the rear contrary to the provisions of the same section; 3) the revolving pole sign is to encroach unlawfully upon the 25 foot corner clearance area required by Section 19-M; 4) the entrance doors to the two toilet rooms are to face Cumberland Avenue, the side street, contrary to the provisions of Section 18-D of the Ordinance.

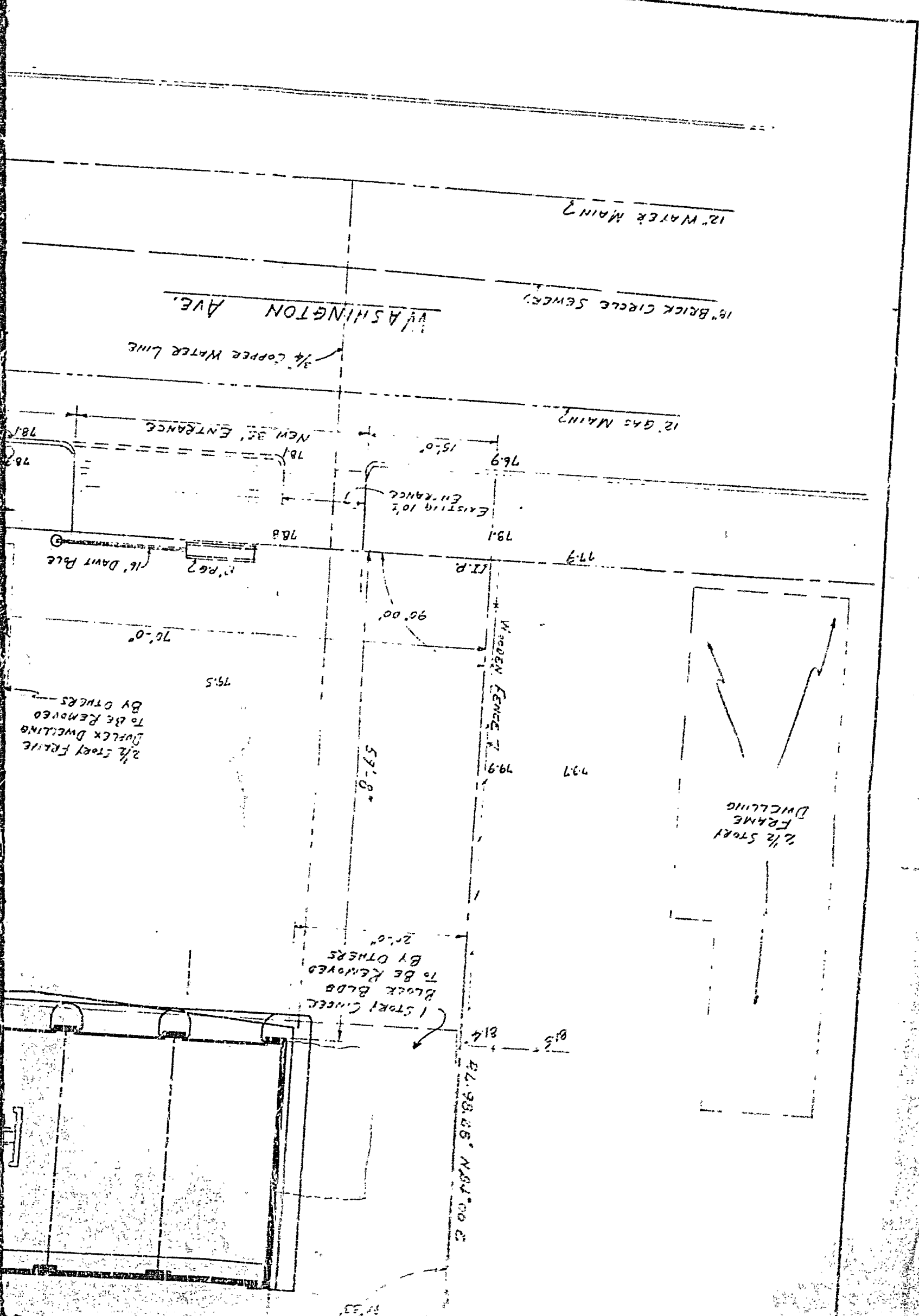
This appeal is taken under Section 24 of the Zoning Ordinance which provides such variance may be granted only if the Board of Appeals finds that the strict application of the provisions of the Ordinance would result in undue hardship in the development of property which is inconsistent with the intent and purpose of the Ordinance; that there are exceptional or unique circumstances relating to the property that do not generally apply to other property in the same zone or neighborhood, which have not arisen as a result of action of the applicant subsequent to the adoption of this Ordinance whether in violation of the provisions of the Ordinance or not; that property in the same zone or neighborhood will not be adversely affected by the granting of the variance; and that the granting of the variance will not be contrary to the intent and purpose of the Ordinance.

All persons interested either for or against this appeal will be heard at the above time and place, this notice of required public hearing having been sent to the owners of property within 500 feet of the property in question as required by Ordinance.

BOARD OF APPEALS

Franklin G. Hinckley

Chairman



WASHINGTON AVE.

16" BRICK CIRCLE SEWER

12" WATER MAIN

3/4" COPPER WATER LINE

12" GAS MAIN

NEW 35' ENTRANCE

EXISTING 10' ENTRANCE

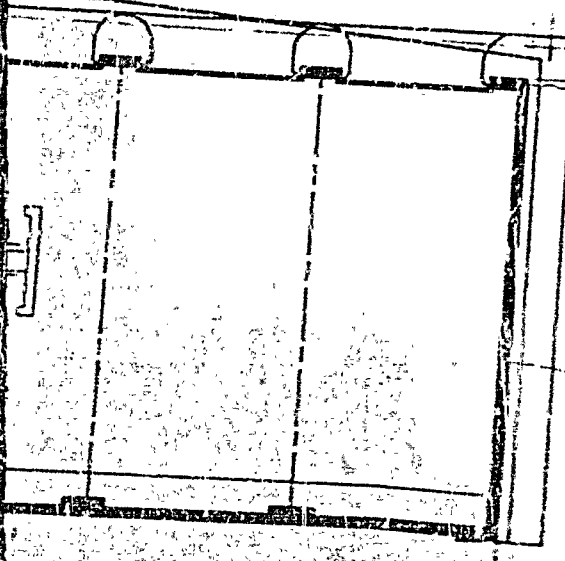
16' DIRT POLE

WOODEN FENCE

2 1/2 STORY FRAME DWELLING

1 STORY CONCRETE BLOCK BLDG TO BE REMOVED BY OTHERS

2 1/2 STORY FRAME DUPLEX DWELLING TO BE REMOVED BY OTHERS



MAY 1963

N

88.2

86.9

REMAINS STONE
WALL
83.6

84.7

20'-0"

91'-33"

81.4

P.L. 98.28' N 84° 00' E

1 STORY CINDER
BLOCK BLDG.
TO BE REMOVED
BY OTHERS

20'-0"

59'-8"

79.9

79.7

2 1/2 STORY
FRAME
DWELLING

WOODEN FENCE

90° 00'

IT.P.

78.1

EXISTING 10' 1/2
ENTRANCE

15'-0"

76.9

NEW 35' ENTRANCE

78.8

8' PG 2

70'-0"

79.5

2 1/2 STORY FRAME
DUPLEX DWELLING
TO BE REMOVED
BY OTHERS

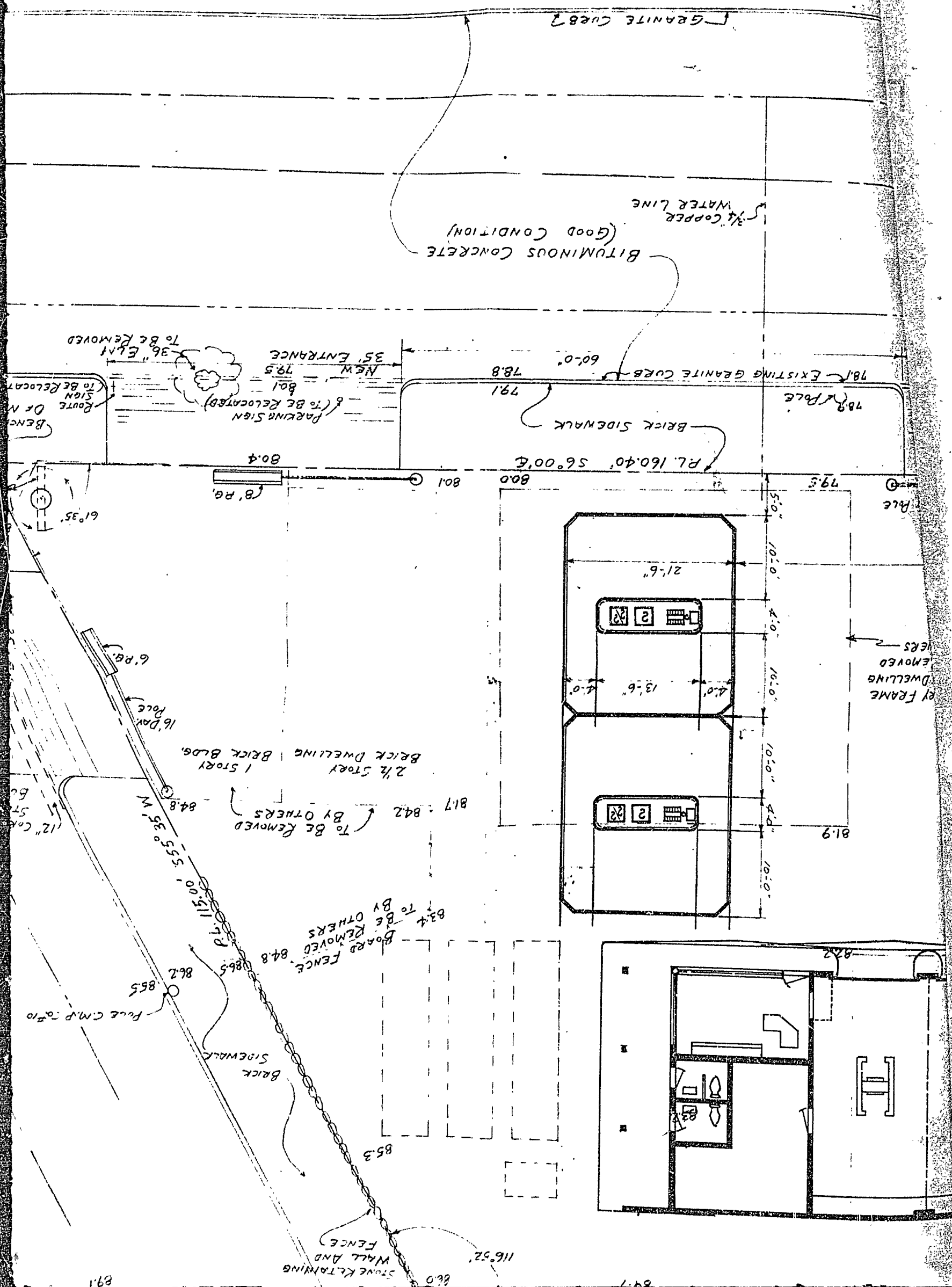
15' DAWIT POLE

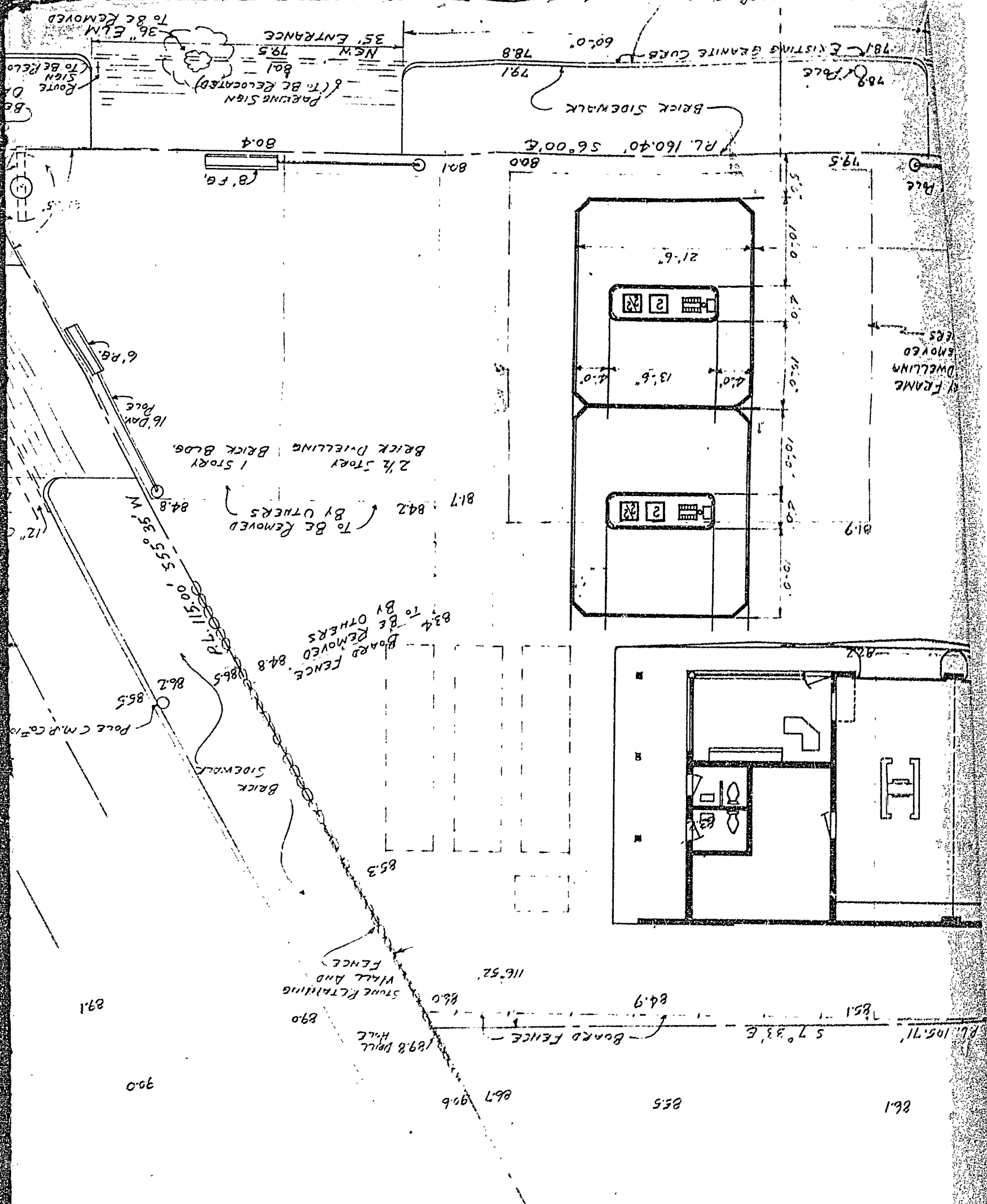
81.2

Pole 86.5

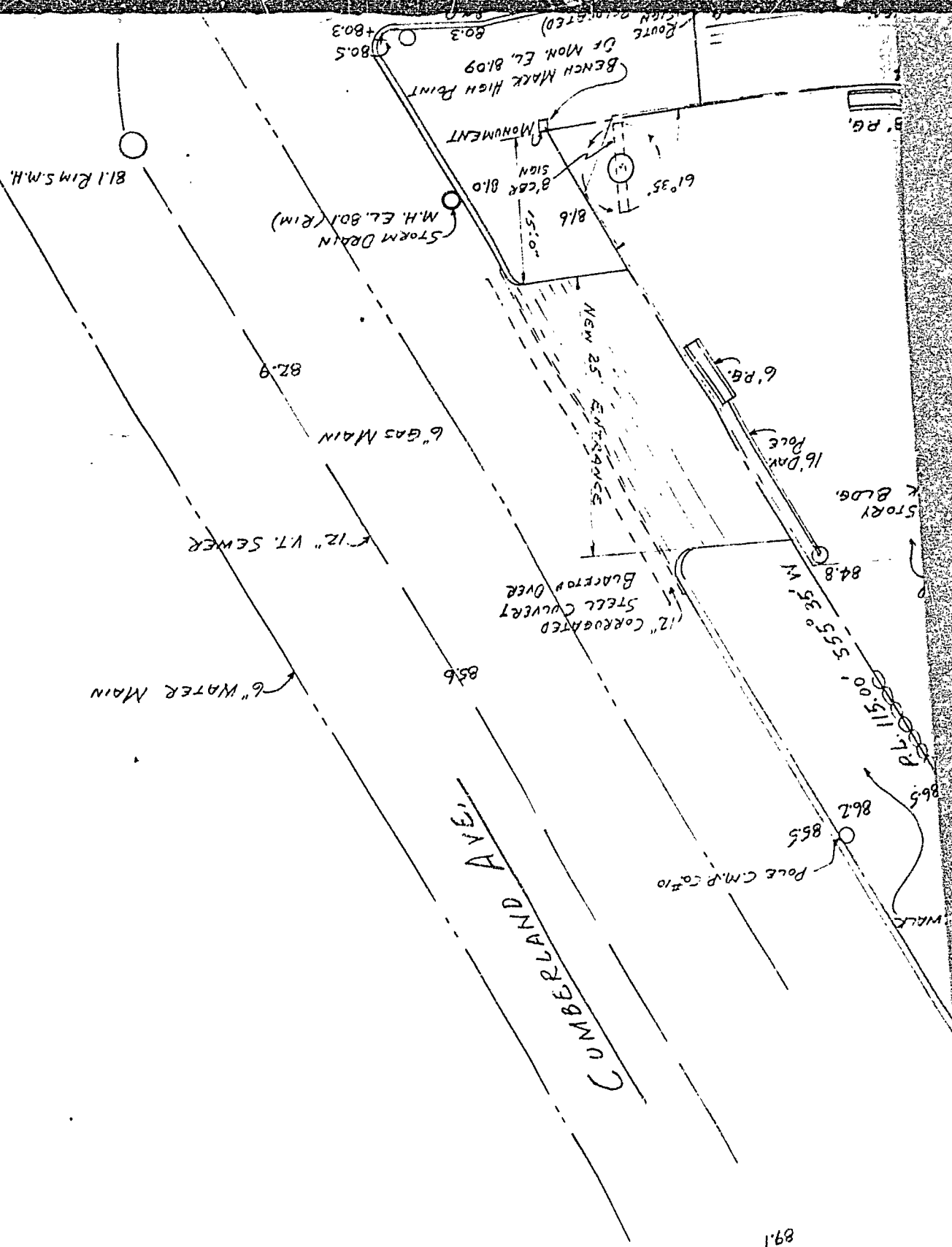
P.L. 105.71'

86.1





PLAN



90.0

ID-		CHECKED	
DRAWN: H. H. KODDEN		SCALE: 1" = 10' 0" DATE: 2-15-53	
PROPOSED LOT PLAN OF SERVICE STATION TO BE CONSTRUCTED AT WASHINGTON & CONGRESS AVES. PORTLAND, MAINE			
SHELL OIL COMPANY			
BOSTON, MASS.			
REVISIONS			
MARK	DATE	MADE	DESCRIPTION

APPROVALS

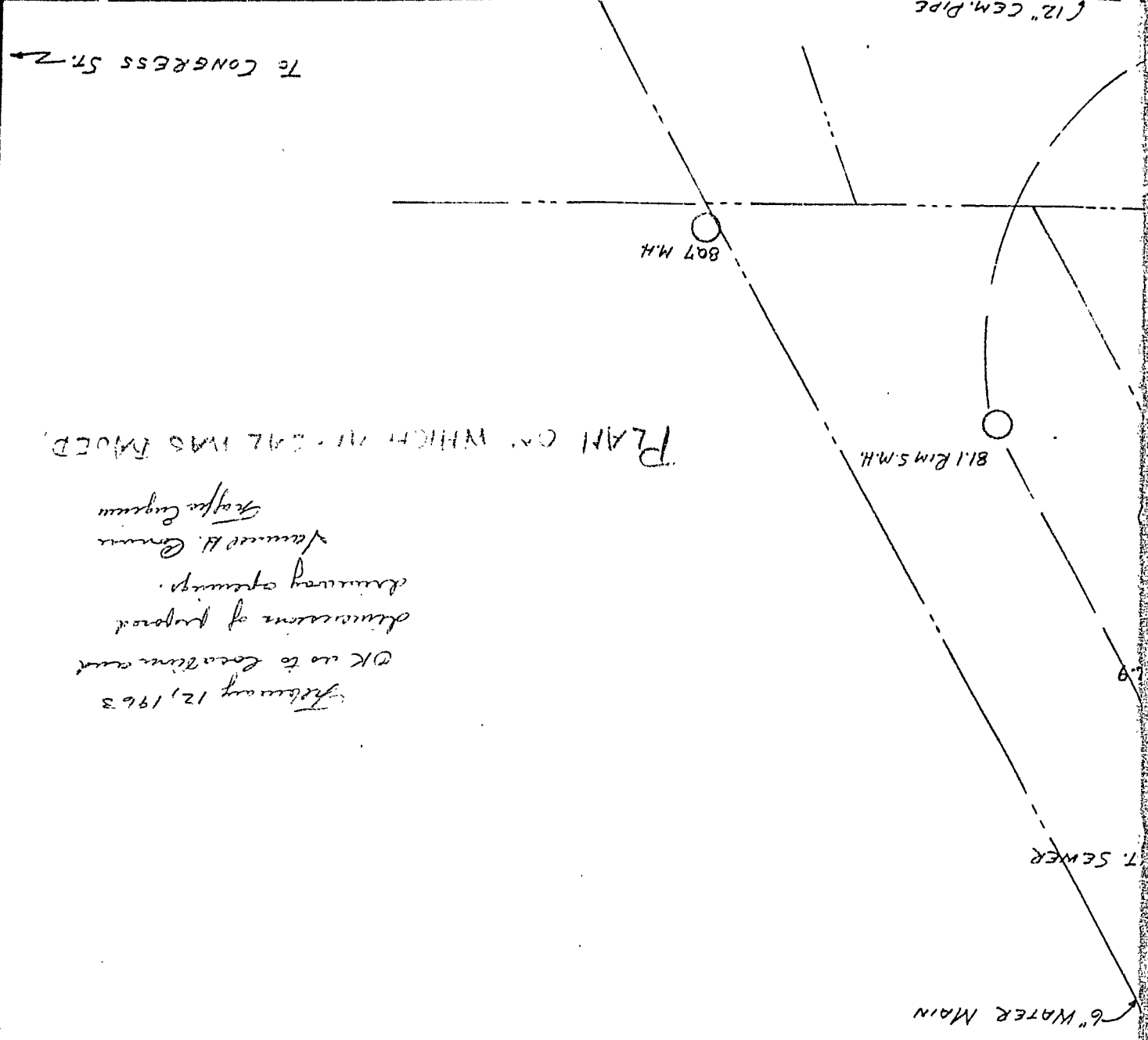
SALES MGR.

OPER. MGR.

R. E. MGR.

RET. MGR.

DIST. MGR.



PLAN ON WHICH 11-242 WAS MOVED.

February 12, 1963

OK as to location and

dimensions of proposed

driveway openings.

James H. Connor

Project Engineer

PERMIT #	PORTLAND BUILDING PERMIT APPLICATION DATE 6/23/87	PERMIT ISSUED JUN 30 1987 City Of Portland
I. GENERAL INFORMATION		
Location/address of construction 27 Washington Avenue		
1. Owner's name RMR, Inc.	Tel. 883-5191	
Address P.O. Box 778, Scarboro 04074		
2. Lessee's name	Tel.	
Address		
3. Contractor's name same	Tel. 769	
Address		
4. Is this a legally recorded lot? yes <input checked="" type="checkbox"/> no <input type="checkbox"/>		

II. DESCRIPTION OF WORK:

to remove existing island and install new islands, pads, canopy as per plans

III. BUILDING DIMENSIONS: length width square footage height #stories	
IV. ZONE B-2 Street frontage Zoning board approval: no <input type="checkbox"/> yes <input type="checkbox"/> date	
Setbacks: front back side side Planning board approval: no <input type="checkbox"/> yes <input type="checkbox"/> date	
V. REVIEW REQUIRED: variance other	
site plan subdivision shore floodplain mgmt	
Number of off-street parking spaces: enclosed outdoors	
VI. FEES:	
base fee	other fees
subdivision fee	late fee
site plan review fee	TOTAL \$120.00

PERMIT ISSUED
WITH LETTER

VII. DETAILS OF WORK		
1. WATER SUPPLY: <input type="checkbox"/> public <input type="checkbox"/> private	7. ELECTRICAL: service entrance size # smoke detectors	8. CHIMNEY: # flues material # fireplaces
2. SEWER: <input type="checkbox"/> public <input type="checkbox"/> private, type	9. FRAMING: floor joists size max. on center ceiling joists rafters studs wall studs	
3. HEAT: type fuel	10. If 1-story building w/masonry walls: wall thickness height	11. BEDROOM WINDOWS height width sill height egress window? yes <input type="checkbox"/> no <input type="checkbox"/>
4. FOUNDATION: type thickness footing		
5. ROOF: type pitch covering load		
6. PLUMBING: SPRINKLER SYSTEM? yes <input type="checkbox"/> no <input type="checkbox"/>		
VIII. OFFICE USE: TAX MAP # LOT # VALUE/STRUCTURE PERMIT EXPIRATION		IX. NEW OR PHASED SUBDIVISION REFERENCE Name Lot Block
CODE If other, explain Seasonal Condominium Apartment		
X. PROPOSED USE: 327 - store		
XI. PAST USE:		
XII. OWNERSHIP: PUBLIC PRIVATE		
XIII. EST. CONSTRUCTION COST: 20,000		XIV. GR. SQ. FT. OF LOT BUILDING

COMPLETE XV AND XVI ONLY IF THE NUMBER OF UNITS WILL CHANGE

XV. RESIDENTIAL BUILDINGS ONLY:		XVI. # RESIDENTIAL UNITS:
BEDROOMS		# NEW DWELLINGS
# NEW DWELLING UNITS WITH:	1 BDRM 2 BDRMS 3 BDRMS	# EXISTING DWELLINGS
# EXISTING DWELLING UNITS WITH:		TOTAL RESIDENTIAL UNITS

APPROVALS BY: DATE	MISCELLANEOUS
BUILDING INSPECTION PLAN EXAMINER	Will work require disturbing of any tree on a public street?
ZONING: <i>OK</i>	Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?
C.E.O.	
FIRE DEPT	

PERMIT ISSUED
WITH LETTERNOTE TO APPLICANT: *See permit letter required by the installers and subcontractors of heating, plumbing, electrical, and mechanical.*

District No. 7	XVII. SIGNATURE OF APPLICANT: <i>Nancy Gailin</i> PHONE # 883-5191
	TYPE NAME OF ABOVE: Nancy Gailin for RMR, Inc. 1 2 3 4

White - GPCOG Green - Applicant Yellow - Assessor Pink - Office File Gold - Field Inspector

MR. Addato

BUILDING PERMIT REPORT

DATE: 6-29-87
ADDRESS: 27 Washington Ave.
REASON FOR PERMIT: Renovating
BUILDING OWNER: RMR Inc.
CONTRACTOR: Same
PERMIT APPLICANT: Nancy Paulin
APPROVED: XX DENIED

CONDITION OF APPROVAL OR DENIAL:

- 1.) Observation of the clapping shall be accomplished with a closed circuit video system

2



RMR, INC. • 191 U.S. ROUTE 1 • P.O. BOX 778 • SCARBOROUGH, MAINE 04074 • PHONE (207) 883-5191

RMR, INC.
dba 7-Eleven Food Stores
Washington & Cumberland Avenue

Gas Remodel
June 1987

1. Remove existing above ground dispensing equipment
2. Remove existing concrete island and bumper bars
3. Remove existing concrete pad 24'x20'
4. Install new 34'x24' concrete pad
5. Install two new concrete islands 4'x8' each
6. Install new bumper bars
7. Install two new three product dispensers (Gilbarco)
8. Install new intercom units
9. Install new fire extinguishers (per state code)
10. Install new canopy 34'x24' with lighting/signage
11. Install new underground conduit and wiring as needed
12. Install cathodic protection on existing underground tanks
13. Repave/blacktop lot
14. Replace pole sign per B-2 zone code

*Alex has advised
no sight plan review
required. H.J. Turner
June 29, 1987*

RECEIVED

JUN 19 1987

DEPT. OF BUILDINGS INSPECTIONS
CITY OF PORTLAND



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

June 30, 1987

R.M.R., Inc.
P.O. Box 778
Scarboro, Maine 04074

Re: 27 Washington Avenue, Portland, Maine

Dear Sir:

Your application to remove existing gas pump island and install new island, pads, and canopy has been reviewed and a permit is herewith issued subject to the following requirements.

1. Observation of the dispensing shall be accomplished with a closed circuit video system.
2. The proposed canopy shall be designed and erected to meet a 50 PSF live load and wind load in accordance with article 9, section 912.0 of the 1984 BOCA Building Code.

If you have any questions in these requirements please call this office.

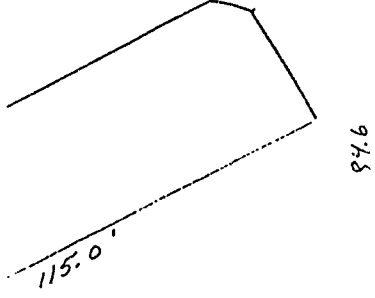
Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/lmc

cc: Lt. Collins, Fire Prevention Bureau

RMR, INC.
 WASHINGTON AVE
 AND
 CUMBERLAND AVE
 PORTLAND, MAINE
 GAS ISLAND CHANGE
 JUNE, 1987
 SCALE: 1"=10'



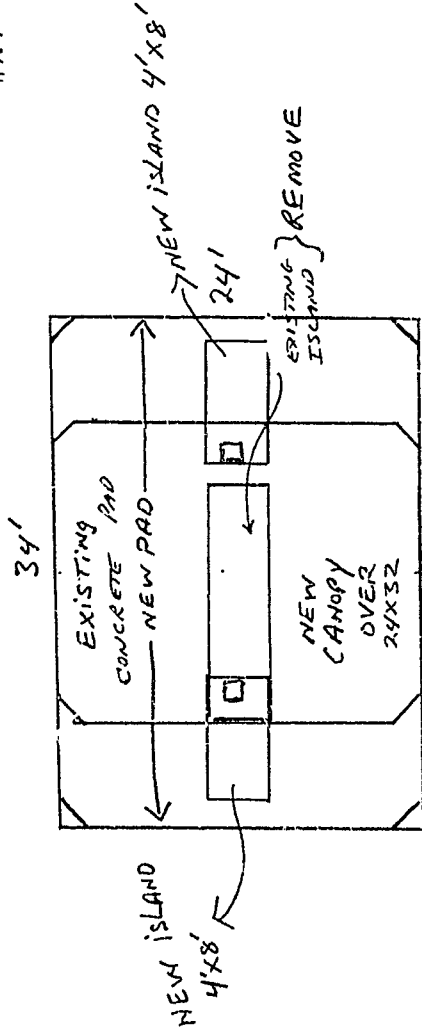
RECEIVED

JUN 19 1987

DEPT. OF BUILDING INSPECTIONS
 CITY OF PORTLAND



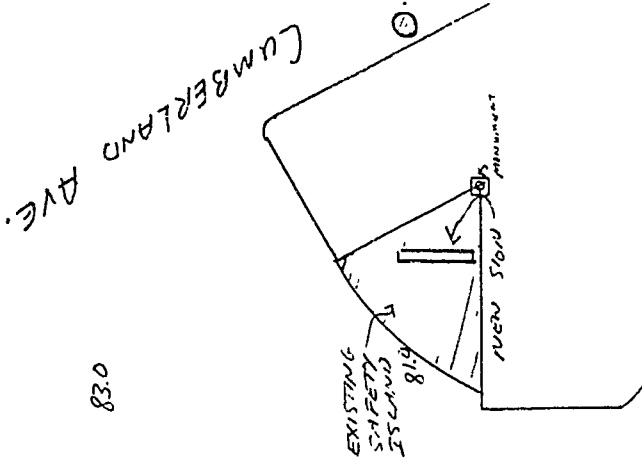
81.7



P.L. 160.40'

80.1

27 WASHINGTON AVE.



830

80.3

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

Applicant <u>R.R., Inc.</u> P.O. Box 778 Scarborough, 04074 Mailing Address <u>minor development - gas na</u> Proposed Use of Site _____ Acreage of Site / Ground Floor Coverage _____ Site Location Review (DEP) Required: () Yes () No Board of Appeals Action Required: () Yes () No Planning Board Action Required: () Yes () No Other Comments: _____ Date Dept. Review Due: _____	Date <u>June 19, 1987</u> <u>27 Washington Avenue</u> Address of Proposed Site <u>13--f-30</u> Site Identifier(s) from Assessors Maps Zoning of Proposed Site _____ Proposed Number of Floors <u>1</u> Total Floor Area _____
--	--

FIRE DEPARTMENT REVIEW

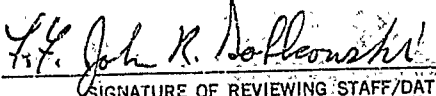
6-23-87
 (Date Received)

	ACCESS TO SITE	ACCESS TO STRUCTURES	SUFFICIENT VEHICLE TURNING ROOM	SAFETY HAZARDS	HYDRANTS	SIAMASE CONNECTIONS	SUFFICIENCY OF WATER SUPPLY	OTHER
APPROVED								
APPROVED CONDITIONALLY								
DISAPPROVED								

CONDITIONS SPECIFIED BELOW
 REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)


 SIGNATURE OF REVIEWING STAFF/DATE
 FIRE DEPARTMENT COPY

PERMIT # 00100 CITY OF PORTLAND BUILDING PERMIT APPLICATION

MAP # LOT#

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: RMR Inc.

Address: P.O. BOX 772 SEASIDE, ORE., 97138

LOCATION OF CONSTRUCTION 27 Marine Ave. N. 100m

CONTRACTOR: OWREY SUBCONTRACTORS: BOB J. H.

ADDRESS:

Est. Construction Cost: Type of Use:

Past Use:

Building Dimensions L W Sq. Ft. # Stories: Lot Size:

Is Proposed Use Seasonal Condominium Apartment

Conversion - Explain erect free standing and then attached

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units # Of New Dwelling Units

Foundation:

1. Type of Soil:
2. Set Backs - Front Rear Side(s)
3. Footings Size:
4. Foundation Size:
5. Other

Floor:

1. Sills Size: Sills must be anchored.
2. Girder Size:
3. Lally Column Spacing: Size:
4. Joists Size: Spacing 16" O.C.
5. Bridging Type: Size:
6. Floor Sheathing Type: Size:
7. Other Material:

Exterior Walls:

1. Studding Size Spacing
2. No. windows
3. No. Doors
4. Header Sizes Span(s)
5. Bracing: Yes No
6. Corner Posts Size
7. Insulation Type Size
8. Sheathing Type Size
9. Siding Type Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:

1. Studding Size Spacing
2. Header Sizes Span(s)
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

For Official Use Only	
Date <u>August 25, 1988</u>	Subdivision: Yes / No <u> </u>
Inside Fire Limits <u> </u>	Name <u> </u>
Bldg Code <u> </u>	Lot <u> </u>
Time Limit <u> </u>	Block <u> </u>
Estimated Cost <u> </u>	Permit Expiration: <u> </u>
Value/Structure <u> </u>	Ownership: <u> </u> Public <u> </u> Private <u> </u>
Fee <u>40.00</u>	

PERMIT ISSUED

- Ceiling:
1. Ceiling Joists Size:
 2. Ceiling Strapping Size Spacing AUG 30 1988
 3. Type Ceilings:
 4. Insulation Type City Of Portland
 5. Ceiling Height

- Roof:
1. Truss or Rafter Size Span
 2. Sheathing Type Size
 3. Roof Covering Type
 4. Other

Chimneys:

Type: Number of Fire Places

Heating:

Type of Heat:

Electrical:

Service Entrance Size: Smoke Detector Required Yes No

Plumbing:

1. Approval of soil test if required Yes No
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

Swimming Pools:

1. Type:
2. Pool Size: x Square Footage
3. Must conform to National Electrical Co' State Law.

Zoning:

District B-3 Street Frontage Req: Provided

Required Setbacks: Front Back Side Side

Review Required:

Zoning Board Approval: Yes No Date:

Planning Board Approval: Yes No Date:

Conditional Use: Variance Site Plan Subdivision

Shore and Floodplain Mgmt Special Exception:

Other (Explain)

Date Approved OK. J. Quint Aug 29, 1988

Permit Received By Jeanne Quint

Signature of Applicant J. Quint Date August 25, 1988

Signature of CEO Date

Inspection Dates

White-Tax Assessor

Yellow-GPCOG

White Tag-CEO

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PLOT PLAN



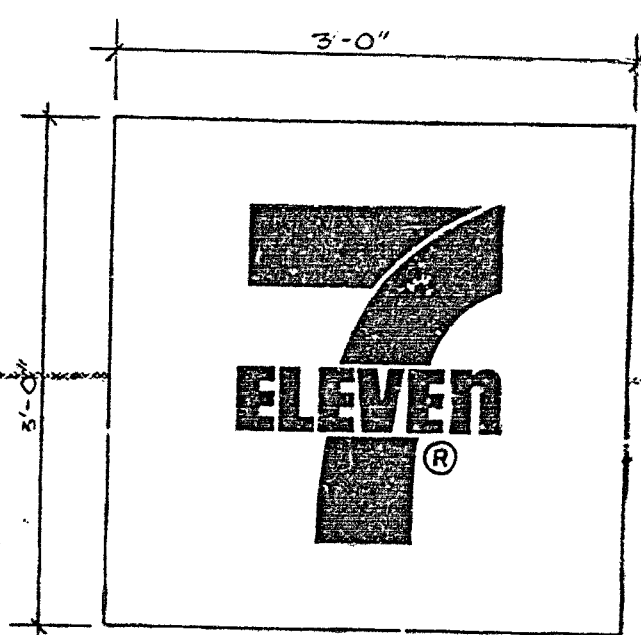
FEES (Breakdown From Front)
Base Fee \$ 46 80
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	
	Date	
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____

COMMENTS 9-1-88 - Site Insp. OK - Qa

Signature of Applicant Michael L. Lufke

Date 8-25-88



PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3825

PROPERTY ADDRESS	
Town Or Plantation	Portland
Street Subdivision Lot #	27
PROPERTY OWNERS NAME	
Last	SENIOR & FOSTER
Applicant Name	JOHN THE PLUMBER
Mailing Address of Owner/Applicant (if Different)	PO Box 1011 SO.

PORTLAND	3663	TOWN COPY
Date	10/17/89	\$119.00 FEE
Local Plumbing Inspector Signature		L.P.L. # 1123

Owner/Applicant Statement	
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.	
Signature of Owner/Applicant	Date

Caution: Inspection Required	
I have inspected the installation authorized above and found it to comply with the Maine Plumbing Rules.	
Local Plumbing Inspector Signature	Date Approved

OCT 18 1989

PERMIT INFORMATION		
This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input type="checkbox"/> NEW PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # 19231

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	2	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet	1	Laundry Tub
Number of Hook-Ups & Relocations		Other: _____		Water Heater
Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
			3	Total Fixtures
			\$ 49.	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$ 49.	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE
FOR CALCULATING FEE

TOWN COPY

PERMIT # **002718**

TOWN OF **Portland**

BUILDING PERMIT APPLICATION

MAP #

LOT#

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: **R MR Inc.**

Address: **197 U S Route 1 / PO Box 778 Scar. Me 04074**

LOCATION OF CONSTRUCTION **27 Washington Ave**

CONTRACTOR: **Owner** SUBCONTRACTORS: **883-5191**

ADDRESS:

Est. Construction Cost: **1,500** Type of Use: **Seven - Eleven Store**

Past Use:

Building Dimensions L **W** Sq. Ft. **#** Stories: **Lot Size:**

Is Proposed Use: **Seasonal** **Condominium** **Apartment**

Conversion - Explain **Interior renovations as per plan**

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units **#** Of New Dwelling Units

Foundation:

1. Type of Soil:
2. Set Backs - Front **Rear** **Side(s)**
3. Footings Size:
4. Foundation Size:
5. Other

Floor:

1. Sills Size: **Sills must be anchored.**
2. Girder Size:
3. Lally Column Spacing: **Size:** **Spacing 16" O.C.**
4. Joists Size: **Size:**
5. Bridging Type: **Size:**
6. Floor Sheathing Type: **Size:**
7. Other Material:

Exterior Walls:

1. Studding Size **Spacing**
2. No. windows
3. No. Doors
4. Header Sizes **Span(s)**
5. Bracing: **Yes** **No**
6. Corner Posts Size
7. Insulation Type **Size**
8. Sheathing Type **Size**
9. Siding Type **Weather Exposure**
10. Masonry Materials
11. Metal Materials

Interior Walls:

1. Studding Size **Spacing**
2. Header Sizes **Span(s)**
3. Wall Covering Type
4. Fire Wall if required
5. Other Materials

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

© Copyright GPCOG 1987

For Official Use Only

Date **Oct 6, 1989** Subdivision: **Yes / No**
 Inside Fire Limits **Name**
 Bldg Code **Lot**
 Time Limit **Block**
 Estimated Cost **1,500** Permit Expiration: **Public**
 Value/Structure **Ownership** **Private**
 Fee **30.00**

Ceiling:

1. Ceiling Joists Size:
2. Ceiling Strapping Size **Spacing**
3. Type Ceilings: **PERMIT ISSUE:**
4. Insulation Type **Size**
5. Ceiling Height: **OCT 16 1989**

Roof:

1. Truss or Rafter Size **Span**
2. Sheathing Type **Size**
3. Roof Covering Type **CITY OF PORTLAND**
4. Other

Chimneys:

Type: **Number of Fire Places**

Heating:

Type of Heat:

Electrical:

Service Entrance Size: **Smoke Detector Required** **Yes** **No**

Plumbing:

1. Approval of soil test if required **Yes** **No**
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures

Swimming Pools:

1. Type:
2. Pool Size: **x** **Square Footage**
3. Must conform to National Electrical Code and State Law.

Zoning:

District: **Street Frontage Req:** **Provided** **Side** **Side**

Review Required:

Zoning Board Approval: **Yes** **No** **Date:**
 Planning Board Approval: **Yes** **No** **Date:**
 Conditional Use: **Variance** **Site Plan** **Subdivision**
 Shore and Floodplain Mgmt. **Special Exception**
 Other: **(Explain)**
 Date Approved

Permit Received By **Deborah Goode**

Signature of Applicant **Theresa White** Date **10-6-89**

Signature of CEO **Daa** Date

Inspection Dates

800497

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$28.60 Zone _____ Map # _____ Lot # _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R M P Inc. Phone # 883-5191
Address: 197 S Rte 1, PoBx 778; Scarborough, ME 04074
LOCATION OF CONSTRUCTION 27 Washington Ave; (Seven-Eleven)
Contractor: owner Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: _____ Proposed Use: commercial-retail
Fast Use: same
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion erect two signs - each one is 3'x3'

For Official Use Only PERMIT ISSUED
Date 6/8/90 Subdivision _____ Name _____ JUN 12 1990
Inside Fire Limits _____ Lot _____
Bldg Code _____ Ownership _____ City Of Portland
Time Limit _____
Estimated Cost _____
Zoning: B-2
Street Frontage Provided: _____ Back _____ Side _____
Provided Setbacks: Front _____ Side _____
Review Required: Signs only
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Site Plan _____ Subdivision _____
Conditional Use: _____ Variance _____ Floodplain Yes _____ No _____
Shoreland Zoning Yes _____ No _____
Special Exception _____
Other (Explain) OK W.D.A. 6-11-90

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____
3. Type Ceiling: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

1. Type: _____ Number of Fire Places _____

Heating:

1. Type of Heat: _____

Electrical:

1. Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Joseph L. Fitzpatrick Date 6/8/90

Signature of CEO Joseph L. Fitzpatrick Date _____

Inspection Dates _____

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

17 Copyright GPCOG 1988
M.A. Add 1/10

900695

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$35. Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R M R Inc. Phone # 883-5191
Address: 197 U.S. Rte 1; Box 778 Scarborough, ME 04074
LOCATION OF CONSTRUCTION: 27 Washington Ave (Seven-Eleven)
Contractor: owner Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: \$3000. Proposed Use: Commercial
Past Use: Commercial
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion RENOVATION - remove wood framed walls

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

PERMIT ISSUED
WITH LETTER

7 Arthur Addato

White-Tax Assessor

Yellow-GPCOG

White Tag-CEO

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For Official Use Only PERMIT ISSUED

Date 6/8/90 Subdivision: _____
Inside Fire Limits: _____ Name: _____
Bldg Code: _____ Lot: 5 190
Time Limit: _____ Ownership: _____
Estimated Cost: \$3,000. City of Portland

Zoning:

Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain): _____

Ceiling:

1. Ceiling Joists Size: _____ Spacing _____
2. Ceiling Strapping Size _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. ChaseSignature of Applicant Joseph Fitzpatrick Date 6/8/90Signature of CEO William J. Fitzpatrick Date 6-26-90

Inspection Dates _____



CITY OF PORTLAND, MAINE

389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

July 2, 1990

R M R, Inc.
197 U.S. Rte. 1
P.O. Box 778
Scarboro, ME 04074

Re: 27 Washington Ave.

Dear Sir:

Your application to remove a section of wood-framed walls and install and install masonry walls at 27 Washington Ave. has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy can be issued until all requirements of this letter are met.

FIRE PREVENTION
Lt. Wallace Garroway

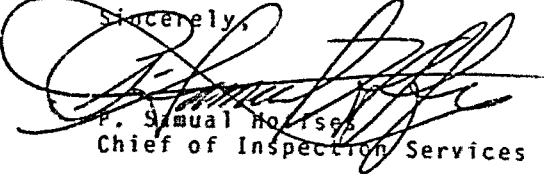
1. Means of egress shall be illuminated in accordance with Section 5-8 of the N.F.P.A. 101 Life Safety Code.
2. Means of egress shall have signs in accordance with Section 5-10.
3. Portable fire extinguishers shall be provided in accordance with N.F.P.A. #10.

BUILDING CODE REVIEW

Since no plans were submitted that outlined temporary roof support during the renovations, please contact your field inspector for inspection prior to removing original supports.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,


P. Samuel Hoffses
Chief of Inspection Services

lec

900695

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$35. Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R Inc. Phone # 333-5101
Address: 197 U.S. Rte 1; Box 773 Scarboro, ME 04074
LOCATION OF CONSTRUCTION 27 Washington Ave (Seven-Eleven)
Contractor: Juner Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: \$3000. Proposed Use: commercial
Past Use: commercial
of Existing Res. Units 5 # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion RENOVATION - remove food framed walls

For Official Use Only PERMIT ISSUED	
Date <u>5/3/90</u>	Subdivision Name _____
Inside Fire Limits _____	Lot <u>JUL 5 1990</u>
Bldg Code _____	Owner's Ship _____
Time Limit _____	Public _____
Estimated Cost <u>\$3,000.</u>	City Of Portland

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____ Side _____
Review Required: Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) Ch 6-27-90

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Sides(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type: _____ Size _____
8. Sheathing Type: 9.5 Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceiling: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

- Type: _____ Number of Fire Places _____

Heating:

- Type of Heat: _____

Electrical:

- Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase,Signature of Applicant [Signature] Date 5-10Signature of Joseph J. Fitzpatrick Date 6-26-90

Inspection Dates _____

177 North - Albino

White-Tax Assesor

Yellow-GPCOG

White Tag - CEO

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PLOT PLAN

N
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FEES (Breakdown From Front)
 Base Fee \$ 35.00
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS 7-24-90 OK RD

Signature of Applicant

[Signature]

Date

6/8/90

WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE
ERECTED ON A lot AT 27 Washington Avenue
IN PORTLAND, MAINE Mark H. Ginn being the owner of the premises
at 27 Washington Avenue in Portland, Maine hereby gives consent to the
erection of a certain sign owned by RMR, Inc. over the
public sidewalk or on the building from said premises as described in
application to the Division of Inspection Services of Portland, Maine for a
permit to cover erection of said sign: Two new 3' x 3' canopy signs

And in consideration of the issuance of said permit RMR, Inc.,
owner of said premises, in event said sign shall cease to serve the purpose
for which it was erected or shall become dangerous and in event the owner of
said sign shall fail to remove said sign or make it permanently safe in case
the sign still serves the purpose for which it was erected, hereby agrees
for himself or itself, for his heirs, its successors, and his or its
assigns, to completely remove said sign within ten days of notice from said
Inspector of Buildings that said sign is in such condition and of order from
him to remove it.

In Witness whereof, the owner of said premises has signed this consent and
agreement this 4th day of June 19 90.

Philip Fontaine

Mark H. Ginn

03/25/88

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

3/01/90

PRODUCER

M. DONOUGH CAPERTON INSURANCE GROUP
 115 MARKET ST. PO BOX 958
 PARKERSBURG WV 26101
 (304) 485-4475

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS
 NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND,
 EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

CODE

SUB-CODE

COMPANY LETTER A USF&G

COMPANY LETTER B

COMPANY LETTER C

COMPANY LETTER D

COMPANY LETTER E

INSURED

RMR, INC AND MARK GINN, ATIMA
 PO BOX 1646
 PARKERSBURG, WV 26102

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD
 INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS
 CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS,
 EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
A	GENERAL LIABILITY	1MF1183452500	3/01/90	3/01/91	GENERAL AGGREGATE \$2,000, PRODUCTS-COMPO'S AGGREGATE \$2,000, PERSONAL & ADVERTISING INJURY \$1,000, EACH OCCURRENCE \$1,000, FIRE DAMAGE (Any one fire) \$50, MEDICAL EXPENSE (Any one person) \$5, COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
X	COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR OWNERS & CONTRACTOR'S PROT				EACH OCCURRENCE \$ AGGREGATE \$
	AUTOMOBILE LIABILITY				STATUTORY (EACH ACCIDENT) (DISEASE-POLICY LIMIT) (DISEASE-EACH EMPLOYEE)
	ANY AUTO				
	ALL OWNED AUTOS				
	SCHEDULED AUTOS				
	HIRE AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				
	EXCESS LIABILITY				
	OTHER THAN UMBRELLA FORM				
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				
	OTHER				
A	REAL PROPERTY	1MF1183452500	3/01/90	3/01/91	LIMIT 110,000 ALL RISK ON LOC. BELOW

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

STORE #301 - 704 CONGRESS ST., PORTLAND, ME
 STORE #302 - 27 WASHINGTON AVE., PORTLAND, ME

CERTIFICATE HOLDER

MARK GINN
 P.O. BOX 940

PORTLAND

ME 04104

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE
 EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO
 MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE
 LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR
 LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



ACORD 25-S (3/88)

ACORD CORPORATION 1978

MAR 22 '90 11:37

304 428 8271

PAGE.02



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date Oct 10, 1989, 19

Receipt and Permit number 06774

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 27 Washington Ave 7-11

OWNER'S NAME: RMR Inc. ADDRESS: 197 US Rte 1 Scar

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>1 to 30 m.</u>	3.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>1 to 10</u>	3.00
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____ ..	
METERS: (number of) _____	
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____	
Cook Tops _____	
Wall Ovens _____	
Dryers _____	
Fans _____ <u>1</u>	
Water Heaters _____	
Disposals _____	
Dishwashers _____	
Compactors _____	
Others (denote) _____	
TOTAL _____	1.50
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	2.50
Signs 20 sq. ft. and under <u>1</u>	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE:
FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE:

TOTAL AMOUNT DUE: 10.00

INSPECTION:

Will be ready on _____, 19__; or Will Call XX

CONTRACTOR'S NAME: Royal River

ADDRESS: RR2 1735 Penny Rd. New Gloucester

TEL.: _____

MASTER LICENSE NO.: 3213

LIMITED LICENSE NO.: _____

SIGNATURE OF CONTRACTOR:

James M. Thomas

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

900497

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$23.60 Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R M P Inc. Phone # 333-5191
Address: 197 US Rte 1, POBx 778; Scarborough, ME 04074
LOCATION OF CONSTRUCTION 27 Washington Ave; (Seven-Eleven)
Contractor: owner Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: _____ Proposed Use: commercial-retail
Past Use: same
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size: _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion erect two signs - each one is 3'x3'

For Official Use Only	
Date <u>6/3/90</u>	Subdivision <u>PERMIT ISSUED</u>
Inside Fire Limits _____	Name _____
Bl'g Code _____	Lot _____
Time Limit _____	Ownership: <u>JUN 12 1990</u>
Estimated Cost _____	Private _____
City Of Portland	
Zoning: <u>B-2</u>	Street Frontage Provided: _____
Review Required:	Provided Setbacks: Front _____ Back _____ Side _____
Zoning Board Approval: Yes _____ No _____	Signs only
Planning Board Approval: Yes _____ No _____	Date: _____
Conditional Use: _____ Variance _____	Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____	Floodplain Yes _____ No _____
Special Exception _____	Other (Explain) <u>OK WMAH - 6-11-90</u>

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: 3x7 Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

Chimneys:

1. Type: _____ Number of Fire Places _____

Heating:

1. Type of Heat: _____

Electrical:

1. Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. ChaseSignature of Applicant Joseph L. Fitzpatrick Date 6/10

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor

Yellow-GPCOG

White Tag - CEO

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PLOT PLAN

N
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FEES (Breakdown From Front)
 Base Fee \$ 28.60
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Type	Inspection Record	
	Date	
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____
_____	____/____/____	____/____/____

COMMENTS 6-18-90-NP QQ
7-24-90 OK QQ

Signature of Applicant

Joseph Fitzgerald

Date

6/8/90

002713 **PERMIT #** 002713 **TOWN OF** Portland **-BUILDING PERMIT APPLICATION**

MAP # _____ **LOT#** _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R MR Inc.

Address: 197 U S Route 1 / PO Box 778 Scar. Me 04074

LOCATION OF CONSTRUCTION 27 Washington Ave

CONTRACTOR: Owner **SUBCONTRACTORS:** 883-5191

ADDRESS: _____

Est. Construction Cost: 1,500 **Type of Use:** Seven - Eleven Store

Past Use: _____

Building Dimensions L W Sq. Ft. # Stories: Lot Size:

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Interior renovations as per plan

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units **# Of New Dwelling Units**

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Floor:

1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 16" O.C.
5. Bridging Type: _____ Size: _____
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____
2. No. windows _____
3. No. Doors _____
4. Header Sizes _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____
2. Header Sizes _____ Span(s) _____
3. Wall Covering Type _____
4. Fire Wall if required _____
5. Other Materials _____

For Official Use Only

Date Oct 6, 1989

Subdivision: Yes / No _____

Inside Fire Limits _____

Name _____

Bldg Code _____

Lot _____

Time Limit _____

Block _____

Estimated Cost 1,500

Permit Expiration: _____

Value/Structure _____

Ownership: _____

Fee 30.00

Public _____

Private _____

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
4. Other _____

Chimneys:

Type: _____ **Number of Fire Places** _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ **Smoke Detector Required** Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Zoning:

District B-2 **Street Frontage Req.:** _____ **Provided:** _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required:

Zoning Board Approval: Yes _____ No _____ **Date:** _____

Planning Board Approval: Yes _____ No _____ **Date:** _____

Conditional Use: _____ **Variance:** _____ **Site Plan** _____ **Subdivision** _____

Shore and Floodplain Mgmt. _____ **Special Exception** _____

Other (Explain) _____

Date Approved 10-6-89

Permit Received By Deborah Goode

Signature of Applicant Michael Schuch **Date** 10-6-89

Signature of CEO William J. ... **Date** 10-6-89

Inspection Dates _____

White-Tax Assesor

Yellow GPCOG

White Tag-CEO

Copyright GPCOG 1987

10-6-89

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ _____
 Subdivision Fee \$ _____
 Site Plan Review Fee \$ _____
 Other Fees \$ _____
 (Explain) _____
 Late Fee \$ _____

Inspection Record

Type	Date
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

COMMENTS *Figures re-located OK. W.P./OK RR. 10-19-89*
10-24-89-OK RR

Signature of Applicant *[Signature]* AGENT FOR OWNER Date *10-6-89*



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date August 7, 1987
Receipt and Permit number 22197

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: 27 Washington Avenue

OWNER'S NAME: 7-11 ADDRESS: _____

FEES

OUTLETS:
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____

FIXTURES: (number of)
Incandescent _____ Fluorescent _____ (not strip) TOTAL _____
Strip Fluorescent _____ ft. _____

SERVICES:
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____

METERS: (number of) _____

MOTORS: (number of) _____

Fractional 3 _____ 1.50

1 HP or over _____

RESIDENTIAL HEATING:

Oil or Gas (number of units) _____

Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING:

Oil or Gas (by a main boiler) _____

Oil or Gas (by separate units) _____

Electric Under 20 kws _____ Over 20 kws _____

APPLIANCES: (number of)

Ranges _____ Water Heaters _____

Cook Tops _____ Disposals _____

Wall Ovens _____ Dishwashers _____

Dryers _____ Compactors _____

Fans _____ Others (denote) _____

TOTAL _____

MISCELLANEOUS: (number of)

Branch Panels 1 - 100 amp. _____ 1.00

Transformers _____

Air Conditioners Central Unit _____

Separate Units (windows) _____

Signs 20 sq. ft. and under _____

Over 20 sq. ft. _____

Swimming Pools Above Ground _____

In Ground _____

Fire/Burglar Alarms Residential _____

Commercial _____

Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____

over 30 amps _____

Circus, Fairs, etc. _____

Alterations to wires _____

Repairs after fire _____

Emergency Lights, battery _____

Emergency Generators _____

INSTALLATION FEE DUE: _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____

FOR REMOVAL OF A "STOP ORDER" (304-16.b) TOTAL AMOUNT DUE: 5.00 Min.

INSPECTION:

Will be ready on Aug. 7, 1987 or Will Call _____

CONTRACTOR'S NAME: Dennis Moreau (Don J. Moreau, Inc.)

ADDRESS: 711 Lisbon St., Lewiston, ME

TEL: 782-4800

MASTER LICENSE NO.: 9244 SIGNATURE OF CONTRACTOR: _____

LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE

PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany for

Owner: RHR Inc. (7-Eleven) Dick Schulze - 883-5191

Address: 197 US Rt. 1, Gresham, OR 97030

LOCATION OF CONSTRUCTION: 27 Washington Avenue

CONTRACTOR: _____ SUBCONTRACTORS: _____

ADDRESS: _____

Est. Construct. Cost: _____ Type of Use: Convenience store addition

Past Use: _____

Building Dimensions L W Sq. Ft. 1600 # Stories 1 Lot Size 1/4

Is Proposed Use: Seasonal Condominium Apartment

Conversion - Explain Minor site plan. 6 sets of site plans submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

of Dwelling Units 1 # of New Dwelling Units 1

Foundations:

1. Type of Soil: _____

2. Set Backs - Front 10 Rear 10 Side(s) 10

3. Footings Size: _____

4. Foundation Size: _____

5. Other: _____

Floors:

1. Sills Size: _____

2. Girder Size: _____

3. Lally Column Spacing: _____

4. Joists Size: _____

5. Bridging Type: _____

6. Floor Sheathing Type: _____

7. Other Material: _____

Exterior Walls:

1. Studding Size: _____

2. No. windows _____

3. No. Doors _____

4. Header Sizes _____

5. Bracing: Yes _____ No _____

6. Corner Posts Size _____

7. Insulation Type _____

8. Sheathing Type _____

9. Siding Type _____

10. Masonry Materials _____

11. Metal Materials _____

Interior Walls:

1. Studding Size _____

2. Header Sizes _____

3. Wall Covering Type _____

4. Fire Wall if required _____

5. Other Materials _____

For Official Use Only

Date April 18, 1989 Subdivision: Yes / No _____

Inside Fire Alarm _____

Big Code _____

Fire Limit _____

Estimated Cost _____

Value \$300,000 - Minor Site Plan

Fee _____

1. Ceiling Joists Size: _____

2. Ceiling Strapping Size: _____

3. Type Ceiling: _____

4. Insulation Type: _____

5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size: _____

2. Sheathing Type: _____

3. Roof Covering Type: _____

4. Other: _____

Chimneys:

Type: _____

Number of Fire Places: _____

Heating:

Type of Heat: _____

Electricity: _____

Service Entrance Size: _____

Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____

2. No. of Tubs or Showers _____

3. No. of Flushes _____

4. No. of Lavatories _____

5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____

2. Pool Size: _____

3. Must conform to National Electrical Code and State Law.

Zoning:

District: _____

Street Frontage Req: _____

Required Setbacks: Front _____ Back _____ Side _____

Review Required: _____

Zoning Board Approval: Yes _____ No _____

Planning Board Approval: Yes _____ No _____

Conditional Use: _____

Shore and Floodplain Mgmt. _____

Other: (Explain) _____

Date Approved: _____

Permit Received By Nancy Grossman

Signature of Applicant N. Grossman Date 4-18-89

Signature of CEO N. Grossman Date _____

Inspection Dates _____

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

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White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

23-21-4

White-Tax Assessor T. Jefferson

White-Tax Assessor T. Jefferson

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Base Fee \$ _____

Subdivision Fee \$

Site Plan Review Fee \$ 300.00 - Minor

Other Fees \$ _____

(Explain) _____

COMMENTS

Signature of Applicant:

Pinckney Brooks AS AGENT

Date 4-18-88

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Dick Schulze - 883-5191

RMR Inc. (7 Eleven)

Applicant
197 US Rt. 1, Scarborough, Me 04074Mailing Address
Addition/convenience storeProposed Use of Site
.5 ~~ac~~ / 200 sq ft

Acreage of Site / Ground Floor Coverage

April 18, 1989
Date

27 Washington Avenue

Address of Proposed Site

13-I-24,30

Site Identifier(s) from Assessors Maps

B-2

Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No

Proposed Number of Floors 1

Board of Appeals Action Required: () Yes () No

x Total Floor Area 2,427 sq ft

Planning Board Action Required: () Yes () No

Other Comments:

Date Dept. Review Due:

BUILDING DEPARTMENT SITE PLAN REVIEW

(Does not include review of construction plans)

Permit # 89-2718; 10-18-89 - interior renovations

☐ Use does NOT comply with Zoning Ordinance☐ Requires Board of Appeals Action☐ Requires Planning Board/City Council Action

Permit # 90-0695; 7-5-90 → renovation (remove wood/plane

Explanation

walls + install
masonry walls☐ Use complies with Zoning Ordinance — Staff Review BelowZoning:
SPACE & BULK,
as applicable

COMPLIES

COMPLIES
CONDITIONALLYDOES NOT
COMPLY

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS

CONDITIONS
SPECIFIED
BELOWREASONS
SPECIFIED
BELOW

REASONS: 4-16-92

Site

review process

not pursued —

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

923986 923986

Permit # 923986 City of Portland BUILDING PERMIT APPLICATION Fee \$100 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: R M R Inc Phone # 893-5191
 Address: Box 778; Scarborough, ME 04070
 LOCATION OF CONSTRUCTION 27 Washington Ave. (7-11 store)
 Contractor: Mik McQuinn Sub: _____
 Address: _____ Phone # _____
 Est. Construction Cost: _____ Proposed Use: retail store-tanks Zoning: _____
 Past Use: _____
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedrooms 1-1-11 Lot Size: _____
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion remove 4 tanks & install 2 tanks
 \$300 \$70

For Official Use Only	
Date <u>8/3/92</u>	Subdivision: _____
Inside Fire Limits _____	Name <u>AUG 11 1992</u>
Bldg Code _____	Lo _____
Time Limit _____	City of Portland
Estimated Cost _____	Other _____

Foundation:
 1. Type of Soil: _____
 2. Set Backs - Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Floor:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____ Span(s) _____
 5. D-racing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulation Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

Interior Walls:
 1. Studding Size _____ Spacing _____
 2. Header Sizes _____ Span(s) _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

Ceilings:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____
 Roof:
 1. Truss or Rafter Size _____ Span _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 Chimneys:
 Type: _____ Number of Fire Places _____
 Heating:
 Type of Heat: _____
 Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____
 Plumbing:
 1. Approval of soil test if required Yes _____ No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____
 Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase
 Signature of Applicant Joseph L. Fitzpatrick Date 8/3/92
 CEO's District 11

CONTINUED TO REVERSE SIDE
 Ivory Tag - CEO

White - Tax Assessor

PERMIT ISSUED

AUG 11 1992

CITY OF PORTLAND

HISTORIC PRESERVATION

PERMIT ISSUED
 WITH REQUIREMENTS

11 MA. Leary

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ _____

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Late Fee \$ _____

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS *8-20-97 Plans are being withdrawn. Coding*

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 has authorized agent and 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 or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT _____ ADDRESS _____ PHONE NO. _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE NO. _____

BUILDING PERMIT REPORT

DATE: 8-6-92

ADDRESS: 27 Washington Ave

REASON FOR PERMIT: Underground Tank Removal & Installation

~~Remove~~ 4-5000 gal gasoline tanks Inst'd 1-10000 & 1-8000 gal
gasoline tanks

BUILDING OWNER: R/M R Inc

CONTRACTOR: Mr K McQuinn

PERMIT APPLICANT: Joseph L Fitzpatrick

APPROVED: [Signature] DENIED: _____

CONDITION OF APPROVAL OR DENIAL:

- ✓ (1) All underground tank removal and/or installation shall be done in accordance with Department of Environmental Protection Regulations Chapter 691
- ✓ (2) No cutting of tanks on site. Cutting of tanks to be done at an approved tank disposal site.
- ✓ (3) Fire Dispatcher must be notified 48 hours in advance of removal and/or transportation of tanks.

**REGISTRATION OF UNDERGROUND OIL STORAGE TANKS
GENERAL INFORMATION**

The purpose of this registration program is to locate and evaluate underground tanks that store or have stored petroleum products. Registration is required for all underground tanks that have stored regulated substances and that are in the ground as of April 19, 1990, and for all tanks that are planned to be installed underground after that date. The information you provide may be based on reasonably available records, or, in the absence of such records, to the best of your knowledge or belief.

1. Who must register an underground oil storage tank?

State Law (38 M.R.S.A., Section 563) requires that everyone who owns an existing, new, or replacement underground oil storage facility and tanks must register their tanks with the Department of Environmental Protection. A facility or tank is existing if it is fully installed as of April 19, 1990. Registration of new and replacement underground oil storage facilities and tanks must be completed five (5) business days prior to installation. If the ownership of an existing tank is uncertain or in dispute, the law considers the current owner of the property where the tank(s) are located to be the tank owner. The property owner is therefore required to register the tank.

Federal law (Section 9002 of the Resource Conservation and Recovery Act [RCRA]), as amended, also requires that, unless exempted, owners of underground tanks that store regulated substances must notify the State agency regulating tanks (in Maine the Department of Environmental Protection) of the existence of their tanks. This requirement applies to owners of underground oil storage tanks used for storage on or after November 8, 1984. It also includes owners or former owners who discontinued the service of such tanks after January 1, 1974. If you are in doubt as to whether you are the owner of an underground storage tank, you are encouraged to register the tank using this form. By registering the storage tank, you as the possible owner will have satisfied the federal notice requirements of owners to register their tanks.

2. What tanks must be registered?

All tanks which meet the state or federal definition of underground oil storage tank must be registered.

State law defines a tank as any container, 10% or more of which is beneath the surface of the ground and which is used, or intended to be used, for the storage, use, treatment, collection, capture or supply of oil, but does not include any tanks situated in an underground area if these tanks or containers are situated upon or above the surface of a floor and in such a manner that they may be readily inspected. For the purposes of State law, oil means petroleum products and their by-products of any kind and in any form including, but not limited to, petroleum, fuel oil, motor oil, sludge, oil refuse, oil mixed with other waste, crude oils, and waste oil and all other liquid hydrocarbons regardless of specific gravity.

The following categories of tanks are exempt from state and federal law:

1. Tanks installed in a concrete foundation where the tank is fully inspectable, i.e., 275-gallon tanks found in a homeowner's basement;
2. Septic Tanks;
3. Pipeline facilities (including gathering lines) regulated under the Federal Natural Gas Pipeline Safety Act of 1968, or the Federal Hazardous Liquid Pipeline Safety Act of 1979, or which is an interstate pipeline facility regulated under State laws;
4. Surface impoundments, pits, ponds, or lagoons;
5. Storm water or waste water collection systems;
6. Flow-through process tanks except where used for treatment;
7. Liquid traps or associated gathering lines directly related to oil or gas production and gathering operations; and
8. Storage tanks situated in an underground area (such as a basement, cellar, mineworking, drift, shaft, or tunnel) if the storage tank is situated upon or above the surface of the floor.

3. What substances are covered?

All liquid petroleum and petroleum products except propane are included by state law.

4. Where do you register?

Owners of underground storage tanks must register their underground tanks with the Maine Department of Environmental Protection, Bureau of Oil and Hazardous Materials Control, State House Station #17, Augusta, Maine 04333-ATTN: Tank Registration Section.

Owners must also file a copy of the registration form for petroleum storage tanks with the local fire department having jurisdiction for their area. Owners should also keep a copy at the facility.

5. When must one notify?

Owners of underground oil storage tanks existing as of March 1, 1985 should have registered by February 1, 1986. Facilities installed after March 1, 1985 and prior to April 19, 1990 should have registered 5 days before installation. Planned new or replacement facilities must be registered five (5) business days prior to installation. All other tanks and facilities regulated by the Federal government but not by the State must be registered by May 8, 1986. This includes all tanks and nonoperational oil and petroleum produce tanks.

6. Penalties:

The registration of all underground storage tanks is critical to developing a sound environmental program for managing and locating these tanks. For this reason, the Legislature has required that late fees and penalties be assessed to owners who neglect to properly register their tanks.

In addition, all tank owners subject to the Federal notification requirements who knowingly fail to notify or submit false information shall be subject to a federal civil penalty not to exceed \$10,000 for each tank for which notification is not given or false information is submitted.

7. Questions and Assistance:

For assistance in answering questions regarding these regulations call (207)289-2651 and ask for someone in the Tank Program.

8. Amended Registration:

Registrations must be amended under the following conditions:

- a) sale or transfer of property,
- b) modification to existing facility, i.e., new tanks, piping, change of product storage, retrofitting of leak detection or overfill/spill prevention equipment, etc.

Note: Registrations must be amended within 10 business days of the date of change. A person who has not submitted an amended registration as required shall pay a late fee of \$100.

9. What Registration fees are required?

A Registration fee of \$35.00 is required on all tanks except for those serving a single family residence. The fee must be paid on the initial registration and annually thereafter. All payment should be made to the State of Maine Groundwater Fund; and paid prior to January 1 of each year.

12. If this registration involves the replacing or installing of tanks or piping, the following information must be attached:

- ✓ (a) A map, plotted on the most current 1:24,000 scale (7 1/2 minute) USGS topographical quadrangle, showing the location of the facility. If a 7 1/2 minute map is not available, a 1:62,500 scale (15 minute) map may be used.
- (b) Attach a DETAILED drawing of the facility showing the exact location of TANKS AND PIPING to be installed and any existing tanks. THE FORM OF ADDITIONAL PROTECTION FOR TANKS MUST BE DETAILED ON THE DRAWING! If new tanks are not installed as indicated on this drawing, the registration must be amended within 10 days!
- ✓ (c) Attach a copy of the tank manufacturers warranty showing the expiration date for each tank being installed or replaced.

AND PETROLEUM PRODUCTS STORAGE TANKS
(Pursuant to 38 M.R.S.A. Section 563, 40 CFR Part 280)

1. REGISTRATION NUMBER: 155

REGISTRATION NUMBER: 100
(Complete only if a registration has been previously assigned by the Department of Environmental Protection.)

STATE USE ONLY

DATE OF REGISTRATION

11

2. FACILITY INFORMATION:

- A. Name of Facility: 7-Eleven Store #302
- B. Street Address of Facility: 27 Washington Ave.
- C. Town/City where facility is located: Portland ME 04101-2617
- D. Mailing address: Same
_____ Maine _____
- E. F. Telephone: 775-5260
- G. Directions to Facility: Corner of Cumberland & Washington Ave.

- H. Are any planned or existing tank(s) (including piping and pumps) within 1000 feet of a public water supply source? Yes _____ No X
- I. Are any planned or existing tank(s) (including piping and pumps) within 300 feet of a private water supply source? Yes _____ No X
- J. (Complete if the answer to (I) above is YES.) Is the water supply which is located within 300 feet of the tank(s) owned by someone other than the facility owner or operator? Yes _____ No _____
- K. Is the facility located on a sand and gravel aquifer or recharge area as mapped by the Maine Geological Survey? Yes _____ No X
- L. Is the facility located within 250 feet of a fresh or salt water body or wetland? Yes _____ No X
- M. Is the facility located within a 100 year flood plain? Maps are available at most municipal offices. Yes _____ No X

Note: If you wish assistance in answering items (K) or (L), please call the Department at (207) 289-2651. Sand and gravel aquifer maps can be reviewed at any of the Department's offices or purchased for a nominal fee from the Maine Geological Survey, State House Station #22, Augusta, Maine 04333, (207) 289-2801.

If the answer to item (H), (I) or (K) above is yes, the facility is in a sensitive geologic area.

STATE USE ONLY

Reviewer: _____ Date: ____/____/____ Map Number: _____
Comment: _____

N. Facility is now or will be used for (check one):

- | | |
|---|---|
| <input type="checkbox"/> Wholesale Distribution of Oil | <input type="checkbox"/> Oil storage at a single family residence |
| <input checked="" type="checkbox"/> Retail Distribution of Oil | <input type="checkbox"/> Oil storage at a multi-family residence. |
| <input type="checkbox"/> Oil storage at a Commercial Establishment for on-site consumption | <input type="checkbox"/> Oil storage/farm |
| <input type="checkbox"/> Oil storage at an Industrial Establishment for on-site consumption | <input type="checkbox"/> Oil storage/Public Facility (state or local) |
| | <input type="checkbox"/> Oil Storage/Federal Facility |

3. TANK OWNER:

A. Name: RMR, Inc. (last) (first) (middle initial)
B. Mail Address: P.O. Box 778
C. Town/City: Scarborough D. State: ME
E. Zip Code: 04070-0778 F Phone: 883-5191

4. TANK OPERATOR: (if different from owner.)

A. Name: _____ (last) (first) (middle initial)
B. Mail Address: _____
C. Town/City: _____ D. State: _____
E. Zip Code: _____ F Phone: _____

5. CONTACT PERSON:

A. Name: Sarah Bourget B. Phone: 883-5191

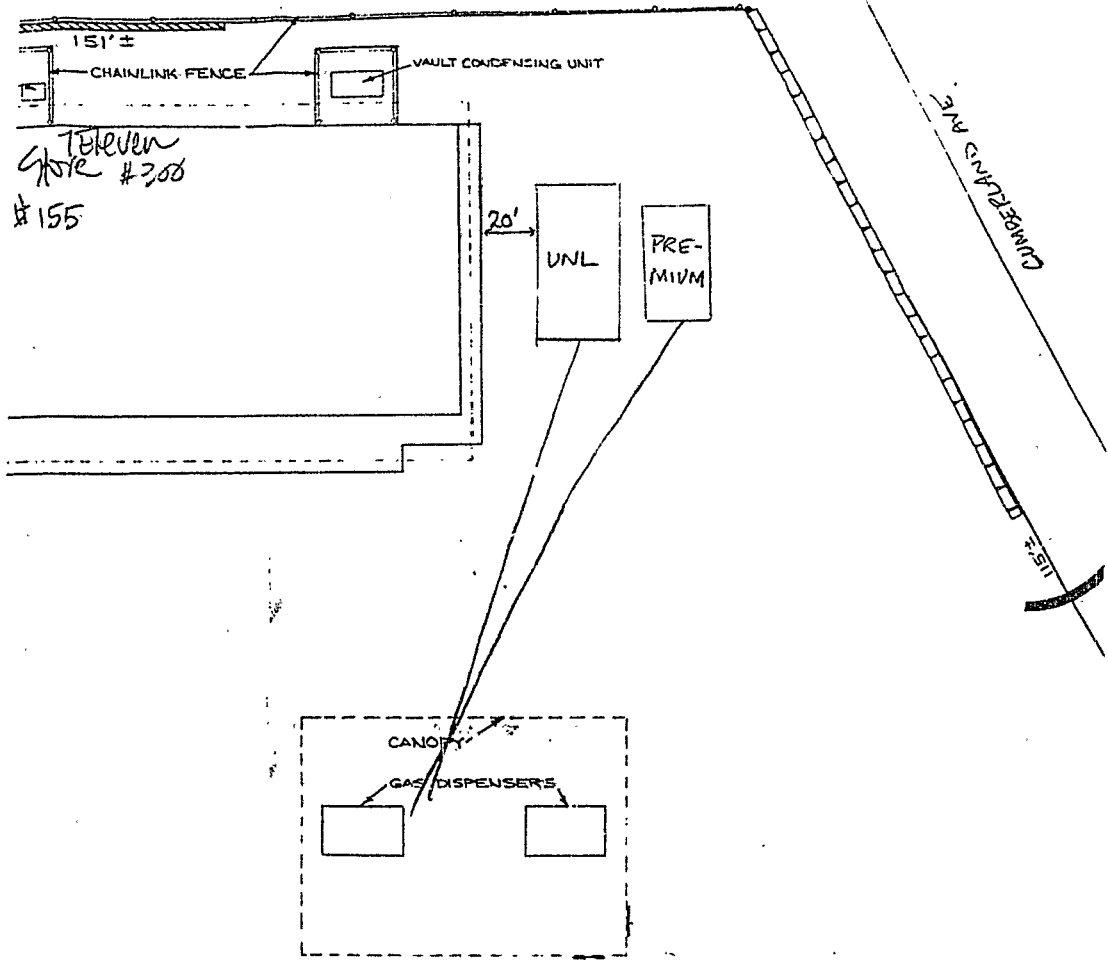
RECEIVED

AUG - 3 1992

DEPT. OF BUILDING
CITY OF PORTLAND

Dep. Reg

TELEVEN
Store #300
#155



WASHINGTON AVE.

Maine Department of Environmental Protection
Bureau of Oil & Hazardous Materials Control
State House Station #17, Augusta, Maine 04333
Telephone: 207-289-2631
Attn: Tank Removal Notice

RECEIVED
AUG - 3 1992

NOTICE OF INTENT
TO ABANDON (REMOVE) AN
UNDERGROUND OIL STORAGE FACILITY

DEPT OF BUILDING INSPECTIONS
CITY OF PORTLAND

Name of Facility Owner: RMR, Inc.
Mailing Address: P.O. Box 778 Telephone No: (207) 883-5191
City: Scarborough State: ME Zip Code: 04070-0778
Contact Person (name, address & telephone no.):
Sarah Bourget P.O. Box 778 Scarborough ME 04070-0778
Name of Facility: 7-Eleven Store #302 Registration No.: 155
Facility Location: 27 Washington Ave Portland ME

1. Identify the tanks at this location which are to be removed:

Tank Number	Age of Tank (Years)	Tank Size (Gallons)	Type of Product Most Recently Stored
1	14	5,000	Premium Unl
2	14	5,000	Unleaded Plus
3	14	5,000	Unleaded
4	14	5,000	Unleaded

Directions to Facility (be specific):
Rte 295 to Washington Ave Exit. Store located at 27 Washington Ave Portland ME

Is tank (or tanks) used for the storage of Class I liquids (e.g., gasoline, jet fuel)? Yes X No (IF YES, REMOVAL OF THE TANK MUST BE UNDER THE DIRECTION OF A CERTIFIED TANK INSTALLER OR PROFESSIONAL FIREFIGHTER.)

Name and telephone number of contractor who will do the tank removal: Mike McQuinn (304) 428-8261

Certified Tank Installer Certification Number & Name (if applicable):
Mike McQuinn #237

Professional Firefighter Yes No X (Affiliation:)

5. Expected date of removal: Week of August 3rd 1992

I hereby provide notice that I intend to properly abandon the underground oil storage facility as described above.

Date: July 13, 1992

Sarah Bourget
Signature of Tank Owner or Operator

Sarah Bourget, Gasoline Manager
Printed Name and Title

THIS FORM MUST BE FILED WITH THE DEPARTMENT AND LOCAL FIRE DEPARTMENT 30 DAYS PRIOR TO REMOVAL - RETURN PCSTCARD WHEN TANK(S) HAS BEEN REMOVED.

Mail original and ye. low copy to DEP; pink copy to fire dept.; retain gol copy

6. INDIVIDUAL TANK DATA: Complete for each tank.

A. TANK TYPE:

- C = Cathodically Protected Steel - Single Wall with Excavation Liner.
 W = Cathodically Protected Steel - Double Walled
 E = Fiberglass - Single wall with Liner.
 G = Fiberglass - Double Walled
 N = Other - Please specify.

B. Piping Type:

- E = Single Walled Fiberglass with liner
 G = Double Walled Fiberglass
 M = Single Walled Steel with Liner.
 O = Copper with Secondary Containment
 W = Cathodically Protected Steel

C. Tank Size:

Fill in with the Size of the Tank in gallons.

D. Form of Leak Detection/Retrofitted Tank:

- 1 = Continuous Electronic Monitoring of Ground-water
 2 = Continuous Electronic Monitoring of Vapors
 3 = Secondary Containment with Interstitial space monitoring
 4 = Manual Groundwater Sampling
 5 = Continuous In-Tank Gauging
 6 = In-Line Leak Detector

E. Product Stored:

- 1 = Kerosene 2 = #2 Fuel Oil 4 = #4 Fuel Oil
 5 = #5 Fuel Oil 6 = #6 Fuel Oil 20 = Unleaded Plus
 22 = Premium 23 = Unleaded 28 = Premium unleaded
 29 = Diesel 81 = Waste Oil 99 = Other-Please Specify

F. Date Installed:

Fill in Month and Year of Installation.

G. Tank Status:

- B = Active
 C = Out of Service
 D = Abandoned in Place-Filled
 E = Planned for Removal

H. System Type:

- 1 = Suction 2 = Pressurized

I. Form of Interstitial Tank Leak Detection/ New and Replacement Tanks

- 1 = Continuous Groundwater in Liner
 2 = Manual Groundwater in Liner
 3 = Continuous Vapor Monitoring
 4 = Continuous Hydrostatic
 5 = Continuous Free Product
 6 = Continuous Vacuum or Pressure
 7 = Other-Please Specify

J. Overfill Spill/Leak Detection:

- 1 = Automatic Shutoff (95% Tank Capacity)
 2 = Automatic Alarm (95% Tank Capacity)
 3 = Overfill Spill Container (3-gallon minimum)

TANK 1:

A. G B. E C. 10,000 D. 3 E. 23 F. 8 / 92 G. B H. 2 I. 4 J. 1&2

TANK 2:

A. G B. E C. 8,000 D. 3 E. 28 F. 8 / 92 G. B H. 2 I. 4 J. 1&2

TANK 3:

A. B. C. D. E. F. / G. H. I. J.

TANK 4:

A. B. C. D. E. F. / G. H. I. J.

7. Attach a check for the applicable registration fee made payable to the State of Maine Groundwater Fund and return with this form to the Department of Environmental Protection (Bureau of Oil and Hazardous Materials Control-State House Station #17, Augusta, Maine 04333).

A registration fee of \$35.00 is required for all tanks except for tanks serving single family residences. Registration fees are due upon registration and annually thereafter, prior to the FIRST DAY OF JANUARY.

Fee Computation: 2 # tanks at \$35.00 per tank = \$ 70.00

Motor fuel stored in a non-conforming tank is subject to an additional annual fee payable to the Third Party Commercial Risk Pool.

8. MAKE TWO (2) COPIES OF THIS FORM. Submit the original to the Department of Environmental Protection (Bureau of Oil and Hazardous Materials Control-State House Station #17, Augusta, Maine 04333). SEND ONE (1) COPY TO THE LOCAL FIRE DEPARTMENT having jurisdiction. RETAIN THE THIRD COPY FOR YOUR RECORDS. For new and replacement tanks, registrations are due at least five (5) business days prior to installation.

9. Your registration shall not be considered complete and will be returned to you if all 5 pages are not completed.

10. IF NEW, REPLACEMENT OR RETROFITTING EXISTING TANKS OR PIPING ARE INCLUDED WITH THIS REGISTRATION, PLEASE PROVIDE:

A. Name of Installer: Mike McQuinn

B. Installer ID Number: 237 Date to be Installed: 8/19/92

11. CERTIFY THIS FORM BY SIGNING. By signing this form, I, the tank registrant, certify that all information is accurate and complete to the best of my knowledge, and that I will comply with all applicable federal, state, and local laws and regulations concerning the underground storage of petroleum products. The owner or operator is required by Maine statutes to file an amendment to this registration with the Department of Environmental Protection immediately upon any change of information contained in this form.

Date: 7/29/92

SARAH BOURGET
Owner or Authorized
Employee of the Owner

Gasoline Manager
Title (Please print
or type)

Signature: Sarah Bourget

Title gasoline mgr