

# City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 35 Diamond St		Owner: Al Glickman		Phone:		Permit No: <b>940880</b>	
Owner Address:		Leasee/Buyer's Name: Packaging Products Corp		Phone:		Business Name: Mary Gresik	
Contractor Name: Rockwell Burr		Address: 184 Read St Portland, ME 04103		Phone: 761-3939		Permit Issued:  AUG 23	
Past Use: Wholesale Packaging		Proposed Use: Same w/sign		COST OF WORK: \$		PERMIT FEE: \$ 49.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denial		INSPECTION: Use Group: Type:	
				Signature:		Signature: <i>[Signature]</i>	
Proposed Project Description: Erect Sign as per plans				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denial			
				Signature:		Date:	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

## 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 his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

*[Signature]* 184 Read St. 17 Aug 94 701-3939  
SIGNATURE OF APPLICANT Craig Currier ADDRESS DATE PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

## Zoning Appeal

- ☐ Variance
- ☐ Miscellaneous
- ☐ Conditional Use
- ☐ Interpretation
- ☐ Approved
- ☐ Denied

## Historic Preservation

- ☐ Not in District or Landmark
- ☐ Does Not Require Review
- ☐ Requires Review

## Action:

- ☐ Approved
- ☐ Approved with Conditions
- ☐ Denied

CEO DISTRICT

1

*[Signature]*

# City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>39 Diamond St</b>		Owner: <b>Al Glickson</b>		Phone:		Permit No: <b>40880</b>	
Owner Address: <b>184 East St</b>		Leasee/Buyer's Name: <b>Packaging Products Corp</b>		Phone:		Business Name: <b>Mury Grobik</b>	
Contractor Name: <b>Rockwell Burr</b>		Address: <b>Portland, ME 04103 761-3939</b>		Phone:		Permit Issued: <b>PERMIT ISSUED</b>	
Past Use: <b>Wholesale Packaging</b>		Proposed Use: <b>Same w/sign</b>		COST OF WORK: <b>\$</b>		PERMIT FEE: <b>\$ 49.00</b>	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: <b>Erect Sign as per plans</b>		Signature:		Signature:		Zoning Approval: <b>CB1: PORTLAND</b>	
		Action: Approved Approved with Conditions Denied		Signature:		Special Zone or Reviews: <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
		Signature:		Date:		Zoning Appeal: <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	

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SIGNATURE OF APPLICANT	DATE:	PHONE:
<b>Craig Currier</b>	<b>17 Aug 94</b>	
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE:	PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

GEO DISTRICT

**1**



WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN OR AVING PROPOSED  
TO BE ERECTED ON A BUILDING AT 35 Diamond St.  
IN PORTLAND, MAINE AL GLICKMAN  
at 35 Diamond St. in Portland, Maine hereby gives consent to the  
erection of a certain sign owned by Packaging Habit's Corp. over the  
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 the erection of said sign:

In Witness whereof, the owner of said premises has signed this consent and  
agreement this 28th day of July 1994.

Al Glickman  
Owner's signature

[Signature]  
Lessee's signature

Inspections Services



William D. Giroux  
Zoning Administrator

CITY OF PORTLAND

August 19, 1994

Mr. Al Glickman  
35 Diamond St.  
Portland, ME 04101

Dear Mr. Glickman,

This letter is in reference to an application for a sign permit on your property at 35 Diamond Street in Portland. This permit is not issuable at this time. It is necessary that you first secure a change of use permit to authorize the conversion of this warehouse to a wholesale fish packaging use.

I must advise you that this use is prohibited in the "2" Zone where the property is located and therefore would require a variance, zone change, or amendment to the Land Use Code prior to approval of a permit.

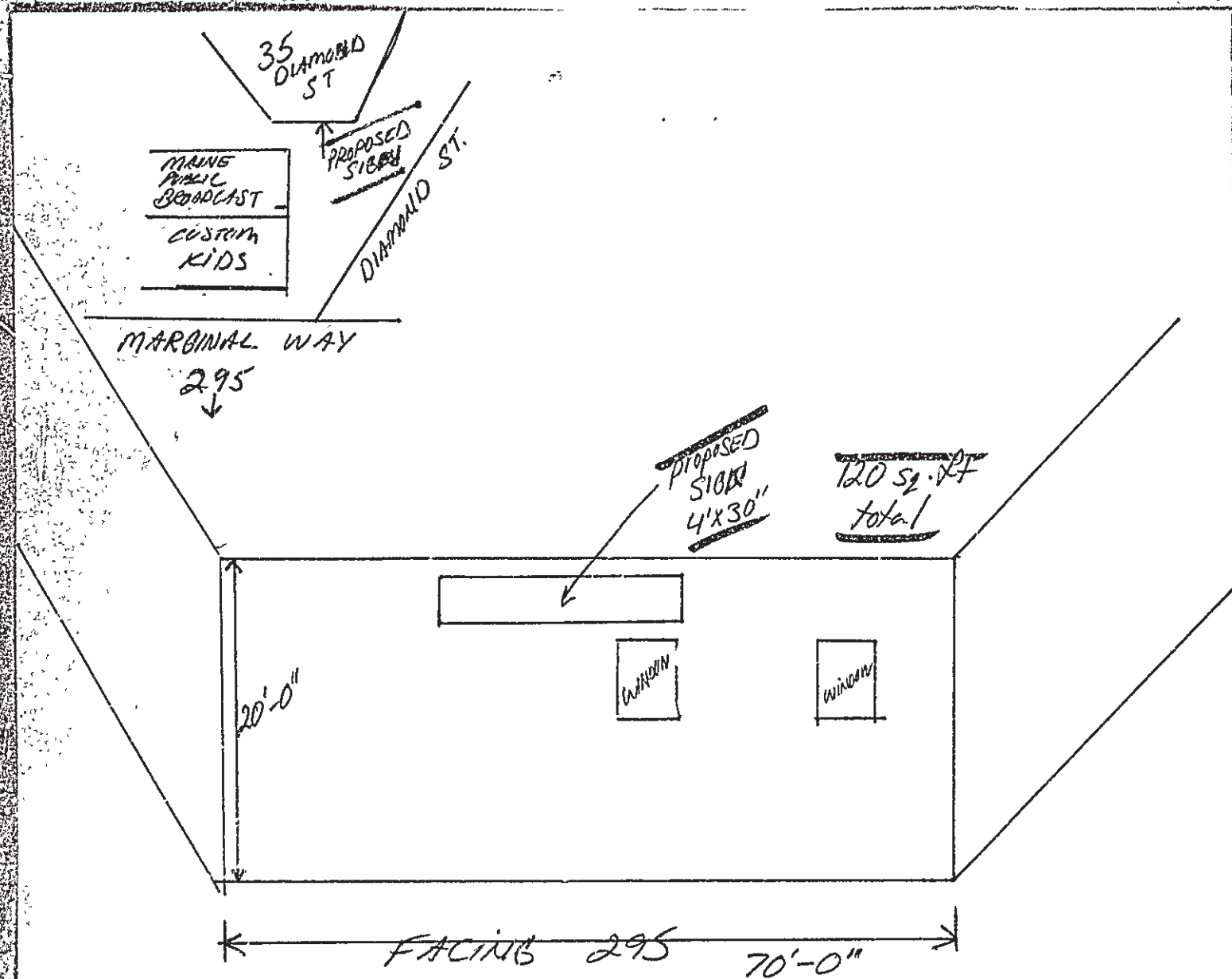
Sincerely,

*WDH*  
William D. Giroux  
Zoning Administrator

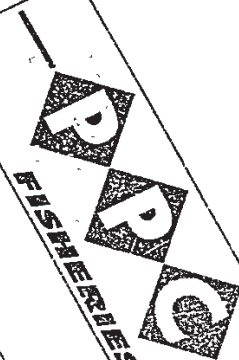
/el

cc: Joseph E. Gray, Jr., Director of Planning and Urban Development  
P. Samuel Hoffman, Chief of Inspection Services  
Alexander Jaegerman, Chief Planner  
Karge Schmuckel, Asst. Chief of Inspection Services  
Merle Reary, Code Enforcement Officer  
Craig Currier - Rockwell Burr, 184 Read Street, Portland 04103





SCALE 1"=40'



FISHERIES

PACKAGING

PRODUCTS

SPECIALISTS

CORP.





# PLOT PLAN



## FEES (Breakdown From Front)

Base Fee \$ 10 -  
 Subdivision Fee \$ \_\_\_\_\_  
 Site Plan Review Fee \$ \_\_\_\_\_  
 Other Fees \$ \_\_\_\_\_  
 (Explain) \_\_\_\_\_  
 Late Fee \$ \_\_\_\_\_

## Inspection Record

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

## COMMENTS

## CERTIFICATION

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[Signature]  
 SIGNATURE OF APPLICANT

ADDRESS

PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

PHONE NO.



Maine Department of Environmental Protection  
Bureau of Hazardous Materials & Solid Waste Control  
State House Station #17  
Augusta, Maine 04333-0017  
Attention: Tank Removal/Notice  
Telephone: (207) 287-2651

7/93

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

THIS FORM MUST BE FILED WITH THE D.E.P. AND YOUR LOCAL FIRE  
DEPARTMENT AT LEAST 30 DAYS PRIOR TO THE SCHEDULED REMOVAL.

PLEASE TYPE OR PRINT IN INK:

Name of Facility Owner: Mr. Albert B. Clifton

Mailing Address: 699 Shore Road

City: Cape Elizabeth

Contact Person (name, address & telephone #): Bob Smith / Bob Smalley (207-4135)

State: Maine

Zip Code: 04107

Site Contact: W. Allen King (207-1101)

Name of Facility: Smith's Station

Facility Location (town & street): 155 Shore Street, Cape Elizabeth, Maine 04107

Registration #: 17366

Tank #	Tank Age	Tank Size (gallons)	Type of Product Stored
1	Unknown	Approx. 7,000-8,000	#2 Oil Fuel
2			
3			
4			

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

2. Directions to this facility (be specific):  
295 to Exit 7, Take left on Marginal Way, Take Right on Diamond Street Second Building on the left.

3. Is or was the tank(s) used to store Class I liquids (e.g. gasoline, jet fuel)? Yes No X  
IF YES, REMOVAL OF THE TANK(S) MUST BE DONE UNDER THE  
DIRECTION OF A CERTIFIED TANK INSTALLER.  
Tank Installer's Name: \_\_\_\_\_ Certification Number: \_\_\_\_\_ Signature: \_\_\_\_\_

4. Environmental site assessments are required for all tanks except those used for storing heating oil, not for resale, or for farm or residential motor fuel tanks under 1,100 gallons where the product is used on site. Site Assessor's Name and Address (if applicable):  
\_\_\_\_\_  
\_\_\_\_\_

5. Name and telephone number of contractor who will do the tank removal:  
American Environmental Services (407-824-5135)

6. Expected date of removal (month/day/year): May 23 & 24 1994  
I hereby provide Notice that I intend to properly abandon the underground oil storage facility as described above.

Date: 4-21-94

Signature: \_\_\_\_\_

Printed Name and Title: \_\_\_\_\_

Mail original and yellow copy to DEP; pink copy to fire department; retain gold copy.  
RETURN POSTCARD AFTER TANK(S) HAS BEEN REMOVED

Exhibit A

31900000

Approximate  
location of tank  
in the concrete  
floor

FRONT- DIAMOND STREET

