

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

Location of Construction: 21 W. Commercial St		Owner: JB Brown	Phone:	Permit No: 950796
Owner Address:	Lease/Buyer's Name: Portland Rubber Co. P.O. Box 227 Portland, ME 04112	Phone:	Business Name: ME 04112	PERMIT ISSUED AUG - 3 1995 CITY OF PORTLAND
Contractor Name:	Address:	Phone: 774-3993 - James Malia		
Proposed Use: Wholesale Dist.	Proposed Use: Same	COST OF WORK: \$	PERMIT FEE: 29.09 \$	Zoning: CSB: Zoning Approval: 8/21/95 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 (major) <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>
Proposed Project Description: Erect additional signage (3 x 6)	FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Type: 0006 93 Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>	
	Signature:	Signature:	Date:	
Permit Taken By: Mary Gresik	Date Applied For: 19 July 1995	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zoning Appeals: <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
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.				Historic Preservation: <input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review
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 OF APPLICANT <i>[Signature]</i>		James Malia	19 July 1995	DATE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		Permit Desk - Owner-Assessor's		PHONE
		Canary-D.P.W.		
		Pink-Public File		
		Ivory Card-Inspector		
				CEO DISTRICT: 3 A. SIMPSON

Permit **930441** of Portland BUILDING PERMIT APPLICATION Fee \$10 Zone _____ Map # _____ Lot# _____
 Please fill out any part which applies to job. Proper plans must accompany form.

Owner: J B Brown Co Phone # 774-5908
 Address: Box 207- DTS PTld, ME 04112
 LOCATION OF CONSTRUCTION 21 West Commercial St. (Ptld
 Contractor: Kles Wilson & Sns Sub: 854-4e583 Rubber
 Address: Bx 1028-Westbrook, ME Phone # 040-3
 Est. Construction Cost: _____ Proposed Use: commercial w/o tank Zoning:
 Fast Use: commercial w tank \$
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L _____ W _____ Total Sq. Ft. _____
 # Stories: _____ # Bedroom: _____ Lot Size: _____
 Is Proposed Use: Serial Condominium _____ Conversion _____
 Explain Conversion: remove one u/g oil tank

For Official Use Only **PERMIT ISSUED**
 Date: 5/27/93 Subdivision: _____
 Inside Fire Limits: _____
 Bldg Code: _____ Ownership: _____
 Time Limit: _____
 Estimated Cost: _____
 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) _____

Foundations:

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

Floors:

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 Wall-

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 _____

Ceilings:

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

Roof:

1. Truss or Rafters 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 Date 5/27/93

Signature of [Signature] Date _____

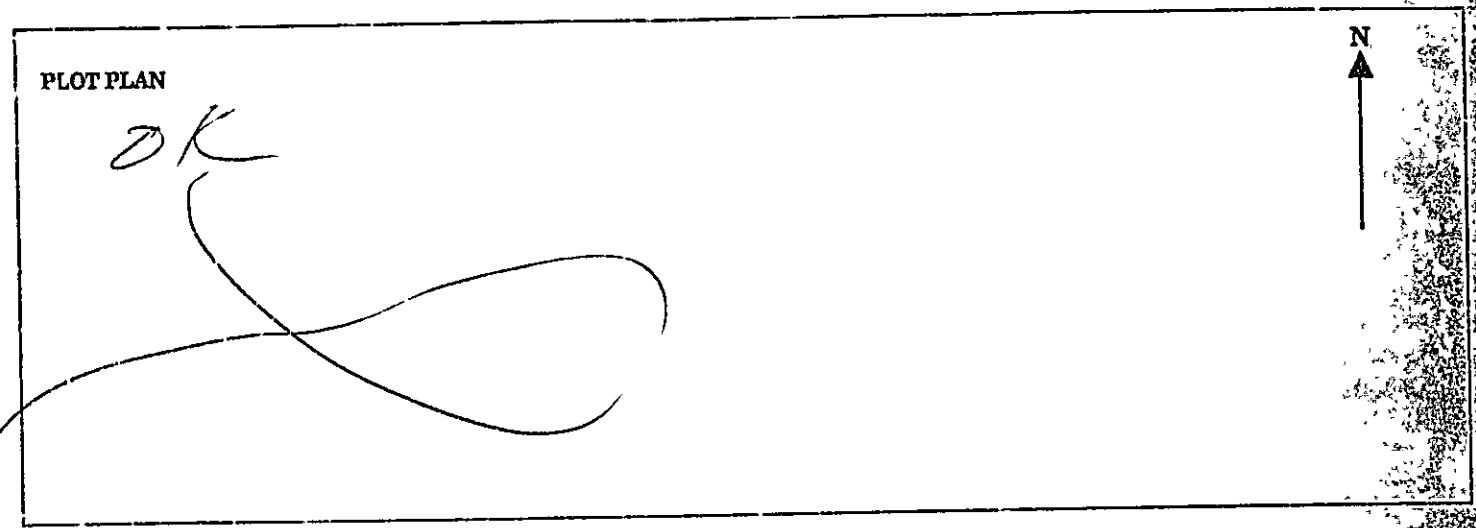
Signature of CEO [Signature] Date _____

Inspection Dates _____

PLOT PLAN

OK

N



FEES (Breakdown From Front)	Type	Inspection Record	Date
Base Fee \$ _____	_____	_____	____/____/____
Subdivision Fee \$ _____	_____	_____	____/____/____
Site Plan Review Fee \$ _____	_____	_____	____/____/____
Other Fees \$ _____	_____	_____	____/____/____
(Explain) _____	_____	_____	____/____/____
Late Fee \$ _____	_____	_____	____/____/____

COMMENTS

Signature of Applicant Ronald Wilson Date 5/27/93

Maine Departmental of Environmental Protection
Bureau of Oil & Hazardous Materials Control
State House Station #17, Augusta, Maine 04333
Telephone: .07-289-2651
Attn: Tank Removal Notice

Copy

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

Name of Facility Owner: J.B. BROWN
Mailing Address: P.O. Box 207 N.T.S. Telephone No: 77-5908
City: PORTLAND State: ME Zip Code: 04112
Contact Person (name, address & telephone no.): DAVE KAS
Name of Facility: Portland Rubber Co Registration No.: 8303
Facility Location: 21 W. Commercial St Portland

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
A. 1	20	1000	#2 F.O.
B.			
C.			
D.			

2. Directions to Facility (be specific):

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

4. Name and telephone number of contractor who will do the tank removal: L.P.S. WILSON SONS 8514583

Certified Tank Installer Certification Number & Name (if applicable):
N/A

Professional Firefighter Yes ___ No (Affiliation: _____)

5. Expected date of removal: 6/26/93

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

Date: 5/26/93

Ronald Wilson Rep.
Signature of Tank Owner or Operator

Ronald Wilson Rep.
Printed Name and Title

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

Mail original and yellow copy to DEP; pink copy to fire dept.; retain gold copy

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Signature:		Signature:		Signature:		Zoning Approval: 8/2/95 <input type="checkbox"/> 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 major/minor <input type="checkbox"/> none	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied		Signature:		Date:			
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James E. Malia
SIGNATURE OF APPLICANT James Malia ADDRESS: DATE: 19 July 1995 PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:
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

Date: 8/2/95
[Signature]

CEO DISTRICT

3

A. Simpson