

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

Local of Construction: 10 Congress St		Owner: UNUM		Phone:		Permit No: 950319	
Owner Address:		Lease-/Buyer's Name:		Phone:		Business Name:	
Contractor Name: Portland P&P		Address: P.O. Box 1180 Scarborough, ME 04074		Phone: 883-4317		<div style="border: 1px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED APR 11 1995 CITY OF PORTLAND </div>	
Past Use:		Proposed Use:		COST OF WORK: \$		PERMIT FEE: \$ 10.00	
				FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
Proposed Project Description: Remove 1-1,500 gallon underground tank				Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>	
				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)			
				Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied			
Permit Taken By: Mary Grenik		Date Applied For: 05 April 1995					

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.

**PERMIT ISSUED
WITH REQUIREMENTS**

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 *[Signature]* **05 April 1995** ADDRESS: DATE: 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

Zone: 01 CBL:	
Zoning Approval: <i>[Signature]</i>	
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 maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
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	
Historic Preservation	
<input type="checkbox"/> Not in District or Landmark <input checked="" type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review	
Action:	
<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
Date: <i>[Signature]</i>	
CEO DISTRICT 4	

COMMENTS

Done w/out Insp.

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

BUILDING PERMIT REPORT

Date: 4/10/95
Address: 2105 Congress St.
Type of Permit: Remove tank
Owner: UNUM
Contractor: Portland Pump
Applicant: Brent Cyr
Approved: ✓ Denied:

Conditions:

1. All underground tank removal(s) and/or installation(s) 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.

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: Unum
Mailing Address: 2105 CONGRESS ST Telephone #: 770-1840
City: PORTLAND State: ME Zip Code: 04102
Contact Person (name, address & telephone #): RAY KELLER 770-1840

Name of Facility: _____ Registration #: 7046
Facility Location (town & street): _____

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

Tank #	Tank Age	Tank Size (gallons)	Type of Product Stored
1	?	1500	#2
2			

2. Directors to this facility (be specific):

3. Is or was the tank(s) used to store Class I liquids (e.g. gasoline, jet fuel)? Yes ___ No ___
**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:
PORTLAND PUMP CO 883-4317

6. Expected date of removal (month/day/year): 4/6/95

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

Date: 4/3/95 Signature: [Signature]

Printed Name and Title: JEFFREY S WILSON AGENT FOR OWNERS

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