

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION
PERMIT

Permit Number: 080167

This is to certify that SAVASTANO ANTHONY JUDY-MARIE ITS/D&H General LLC

has permission to Addition of Master Bedroom and Sitting Room

AT 0 NANCY LN

083C C00100

CITY

provided that the person or persons who accept this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Classification of inspection must be given and when permission is procured before this building or part thereof is opened or service is closed-in. 4 HOUR NOTIFICATION REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

Director: Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0267	Issue Date:	CBL: 083C C001001
-----------------------	-------------	----------------------

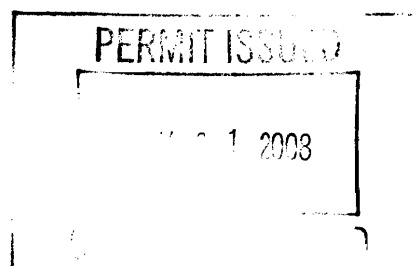
Location of Construction: 0 NANCY LN , G.D.I.	Owner Name: SAVASTANO ANTHONY & JUD	Owner Address: 2983 HOLIDAY COURT	Phone: 207-766-1248
Business Name:	Contractor Name: D&H General Contracting	Contractor Address: 72 Thyngs Mill Road Shapleigh	Phone: 2075760467
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	Zone: I-B; IR-1

Past Use: Single Family Home	Proposed Use: Single Family Home- addition of Master Bedroom and Sitting Room <i>21' x 26' addition w/ wrap around deck.</i>	Permit Fee: \$1,870.00	Cost of Work: \$185,000.00	CEO District: 1
Proposed Project Description: Addition of Master Bedroom and Sitting Room		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>R3</i> Type: <i>SB</i> <i>IRC-2003</i>	
		Signature:		Signature: <i>[Signature]</i>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
		Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
		Signature: _____ Date: _____		

Permit Taken By: lmd	Date Applied For: 03/25/2008	Zoning Approval	
-------------------------	---------------------------------	------------------------	--

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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..

Special Zone or Reviews <input checked="" type="checkbox"/> Shoreland located in <i>I-B-no setback required</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>around 9-20-08 C</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> <i>OK w/cond. hrs</i> Date: <i>4/11/08 ABM</i>	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 Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>ABM</i> Date: _____
--	---	--



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 is 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



General Building Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: <u>9 Nancy Lane, Great Diamond Island</u>		
Total Square Footage of Proposed Structure/Area <u>900 sq feet</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>0832 0001</u>	Applicant * must be owner, Lessee or Buyer * Name <u>Toni + Judy Sawatano</u> Address <u>9 Nancy Lane</u> City, State & Zip <u>Great Diamond Island Portland ME 04019</u>	Telephone: <u>766-1248</u>
Lessee/DBA (If Applicable)	Owner (if different from Applicant) Name Address City, State & Zip <u>MAR 25 2008</u>	Cost Of Work: \$ <u>185,000</u> C of O Fee: \$ _____ Total Fee: \$ _____
Current legal use (i.e. single family) <u>Single Family</u> If vacant, what was the previous use? Proposed Specific Use: <u>Single Family Addition</u> Is property part of a subdivision? <u>No</u> If yes, please name _____ Project description: <u>Addition - MASTER BEDROOM, & HIR ROOM</u>		
Contractor's name: <u>Deane MacBeth ID&H General Contractors, Inc.</u> Address: <u>72 Thynge Mill Rd</u> City, State & Zip <u>Shapleigh Maine 04076</u> Telephone: <u>576-0467</u> Who should we contact when the permit is ready: <u>Deane MacBeth</u> Telephone: <u>576-0467</u> Mailing address: <u>72 Thynge Mill Rd Shapleigh ME 04076</u>		

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

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at www.portlandmaine.gov, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature: Deane MacBeth

Date: 3-25-08

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



This page contains a detailed description of the Parcel ID you selected. Press the **New Search** button at the bottom of the screen to submit a new query.

Current Owner Information

Card Number 1 of 1
Parcel ID 083C C001001
Location NANCY LN
Land Use SINGLE FAMILY

Owner Address SAVASTANO ANTHONY & JUDY-MARIE JTS
 2983 HOLIDAY COURT
 MORGAN HILL CA 95037

Book/Page
Legal 83C-C-1
 NANCY LANE
 GREAT DIAMOND ISLAND
 255200 SF

Current Assessed Valuation

Land	Building	Total
\$409,600	\$216,200	\$625,800

Property Information

Year Built	Style	Story Height	Sq. Ft.	Total Acres	Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
1900	Old Style	1.5	2024	5.859	3	2		6	None	Crawl

Outbuildings

Type	Quantity	Year Built	Size	Grade	Condition
------	----------	------------	------	-------	-----------

Sales Information

Date	Type	Price	Book/Page
04/16/1985	LAND + BLDING	\$115,000	06733-020

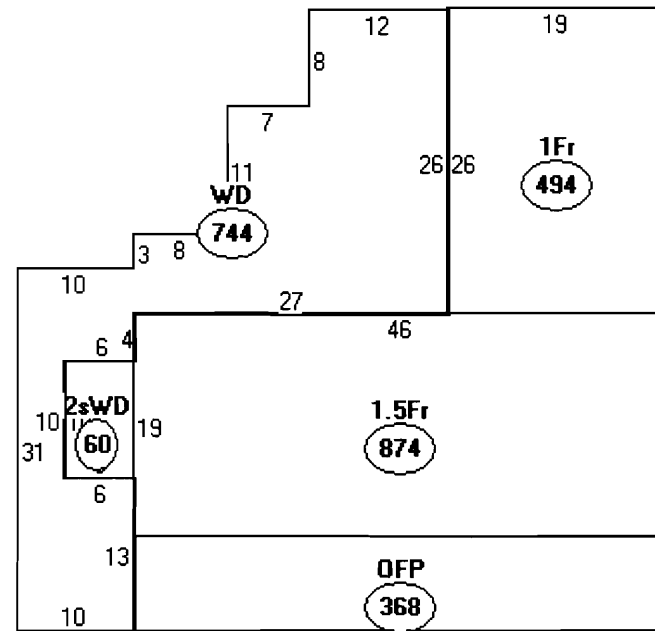
Picture and Sketch

[Picture](#) [Sketch](#) [Tax Map](#)

[Click here to view Tax Roll Information.](#)

Any information concerning tax payments should be directed to the Treasury office at 874-8490 or [e-mailed](#).

New Search!



Descriptor/Area

A: 1.5Fr
874 sqft
B: 2sWD
60 sqft
C: 1Fr
494 sqft
D: OFP
368 sqft
E: WD
744 sqft

BUILDING PERMIT INSPECTION PROCEDURES

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

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

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

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

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

 X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers

 X Foundation Inspection: Prior to placing ANY backfill for below grade occupiable space

 X Framing/Rough Plumbing/Electrical: Prior to Any Insulating or drywalling

 X Final inspection required at completion of work.

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

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

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



Signature of Applicant/Designee

5-21-08

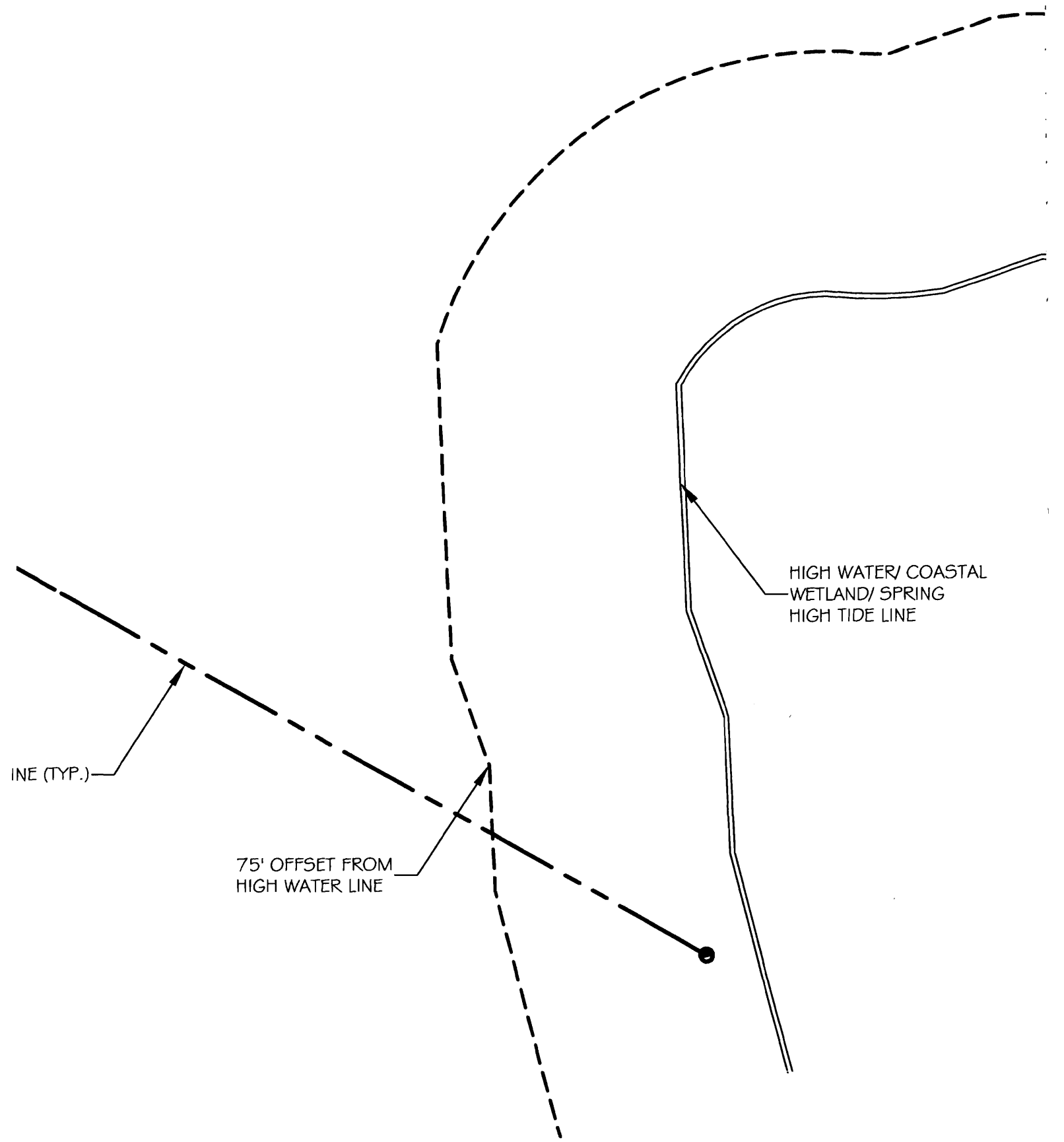
Date



Signature of Inspections Official

5/21/08

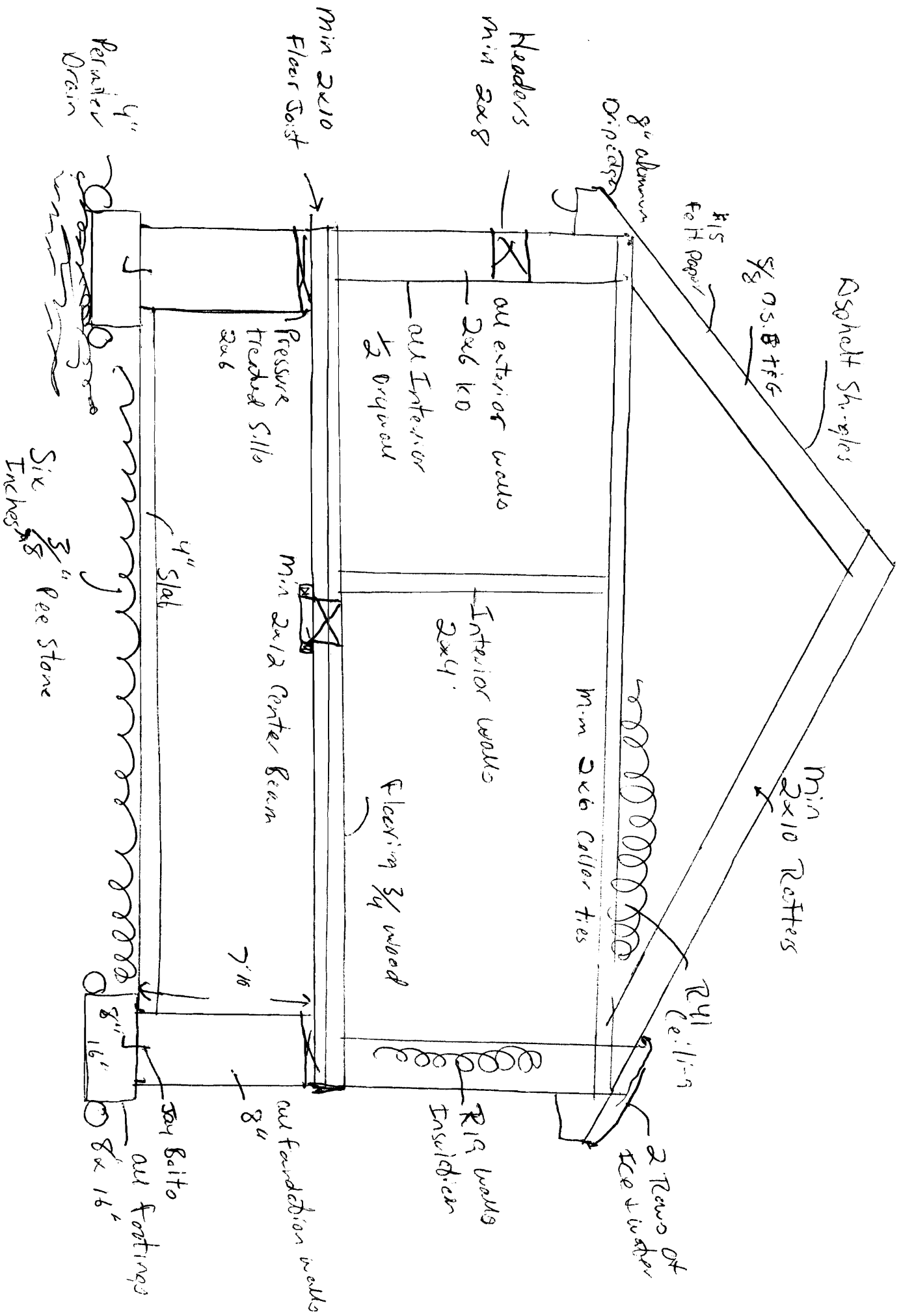
Date



INE (TYP.)

75' OFFSET FROM
HIGH WATER LINE

HIGH WATER/ COASTAL
WETLAND/ SPRING
HIGH TIDE LINE



Sauastano Residence
 #9 Nancy Lane Great Diamond Island
 Deane MacBeth
 #576-0467

1/24/11 2003



FOR REVIEW ONLY- NOT FOR CONSTRUCTION- 04/08/08

DRAWING
1

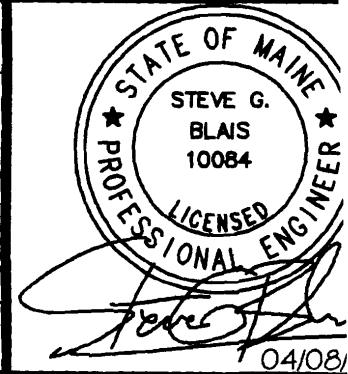
PROPERTY PLAN

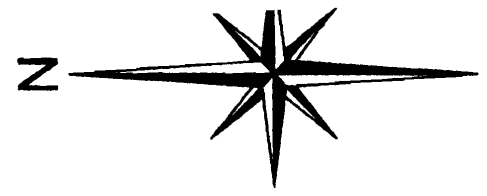
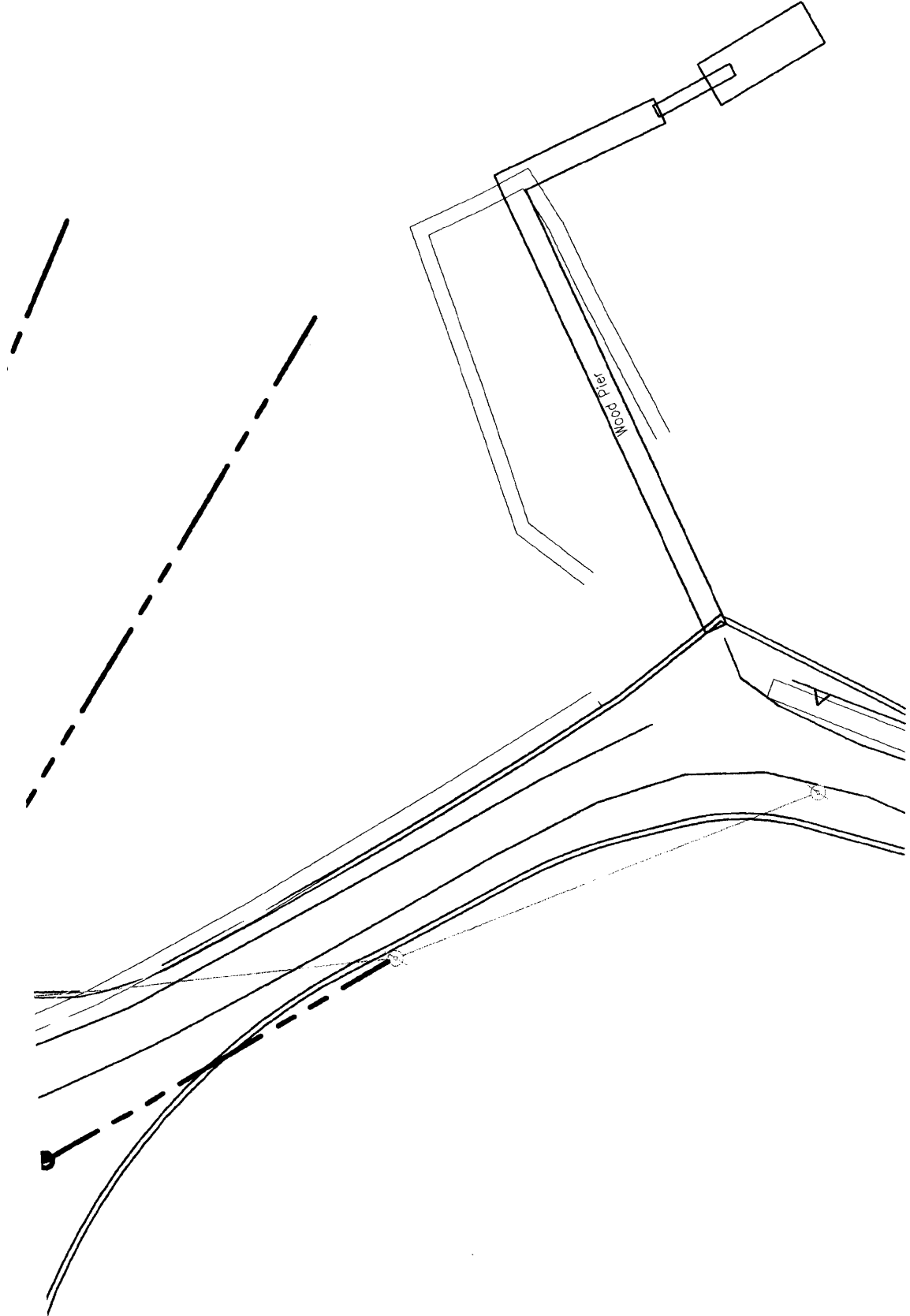
SAVASTANO PROPERTY
ANTHONY AND JUDY SAVASTANO
GREAT DIAMOND ISLAND
MAINE

SCALE: 1"=40'

C.I.: N/A

DATE: 02/19/08





DEPT. OF BUILDINGS INSPECTION
PORTLAND, ME

LAND CONSULTING ENGINEERS, PA

967 BROADWAY
SOUTH PORTLAND, MAINE 04106
(207) 767-7300

APR - 9 2008

RECORDED

No.	DATE	DESCRIPTION

REVISIONS



City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0267	Date Applied For: 03/25/2008	CBL: 083C C001001
------------------------------	--	-----------------------------

Location of Construction: 0 NANCY LN (#9), G.D.I.	Owner Name: SAVASTANO ANTHONY & JUD	Owner Address: 2983 HOLIDAY COURT	Phone: 207-766-1248
Business Name:	Contractor Name: D&H General Contracting	Contractor Address: 72 Thyngs Mill Road Shapliegh	Phone: (207) 576-0467
Lessee/Buyer's Name	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family Home- addition of Master Bedroom and Sitting Room	Proposed Project Description: 21' x 28' Addition of Master Bedroom and Sitting Room w/wrap around deck
---	--

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 04/11/2008
Note: **Ok to Issue:**

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.
- 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 05/08/2008
Note: **Ok to Issue:**

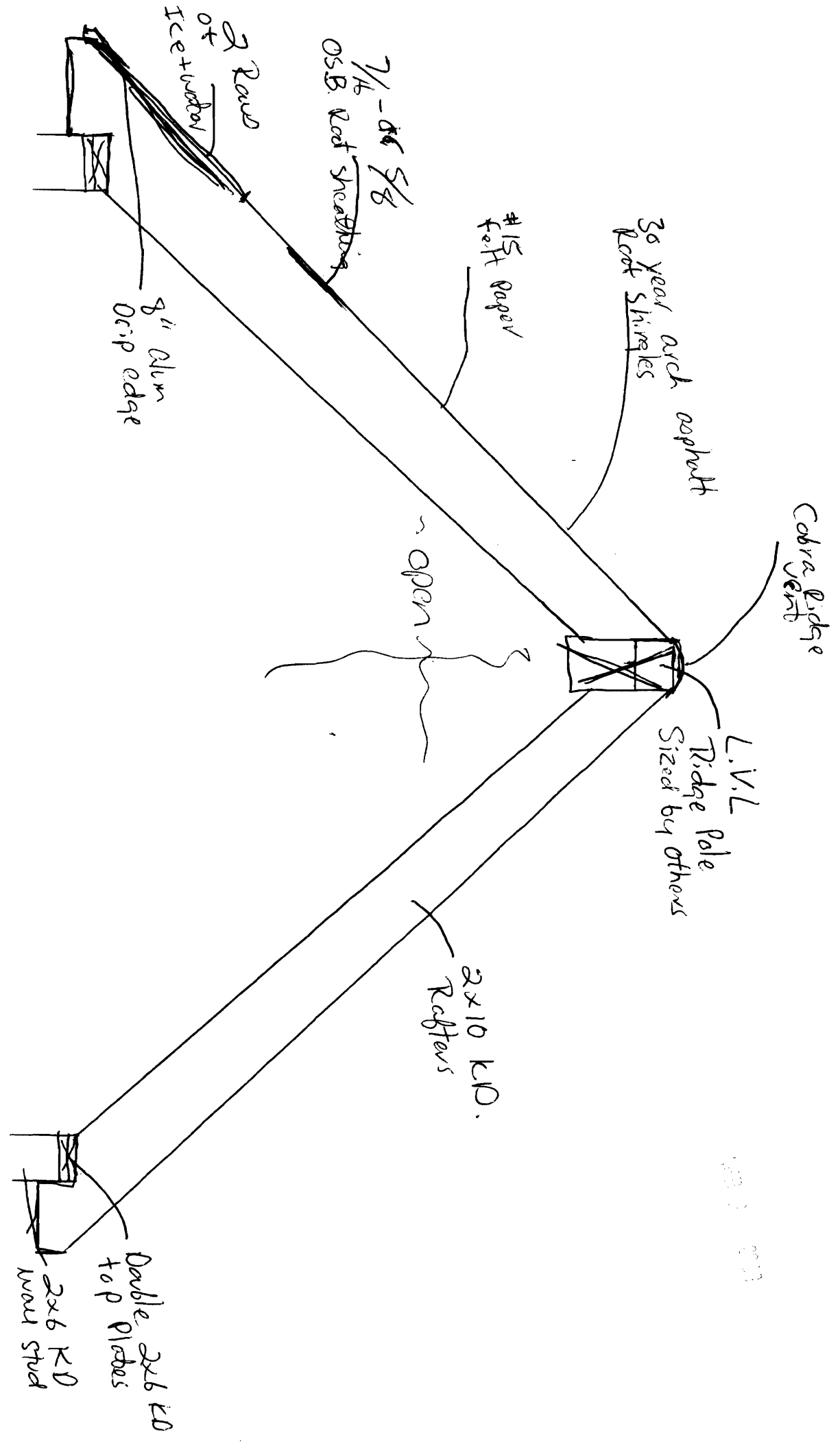
- 1) Fastener schedule per the IRC 2003
- 2) The existing deck shall be inspected for adequate fasteners and bearing for spans, and modifications may be required
- 3) Hardwired interconnected battery backup smoke detectors shall be installed in all bedrooms, protecting the bedrooms, and on every level.
- 4) The design load spec sheets for any engineered beam(s) / Trusses must be submitted to this office.
- 5) Separate permits are required for any electrical, plumbing, or HVAC systems. Separate plans may need to be submitted for approval as a part of this process.
- 6) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.

Comments:

- 4/1/2008-amachado: Left message for Deane MacBeth, contractor. Need full size, scalable siteplan that has been stamped. Need the I-B zone line labeled & delineated. Need exact dimensions and construction detail for the deck that will go around the addition.
- 4/4/2008-amachado: Spoke to Deane. He will get the scaled siteplan that is stamped and submit the details for the deck addition.
- 4/25/2008-tmm: did foundation only permit - still need roof framing details, deck framing, and lally column spacing
- 4/9/2008-amachado: Received stamped, scalable site plan.
- 4/23/2008-jmb: Left voicemail with Dean M. For details on the placement of the bearing columns for the support beam to verify loads. Also there are no construction details for the wrap around deck, sone placement, rails, steps, etc.
- 4/23/2008-jmb: Routed to Tammy as I will be out of the office

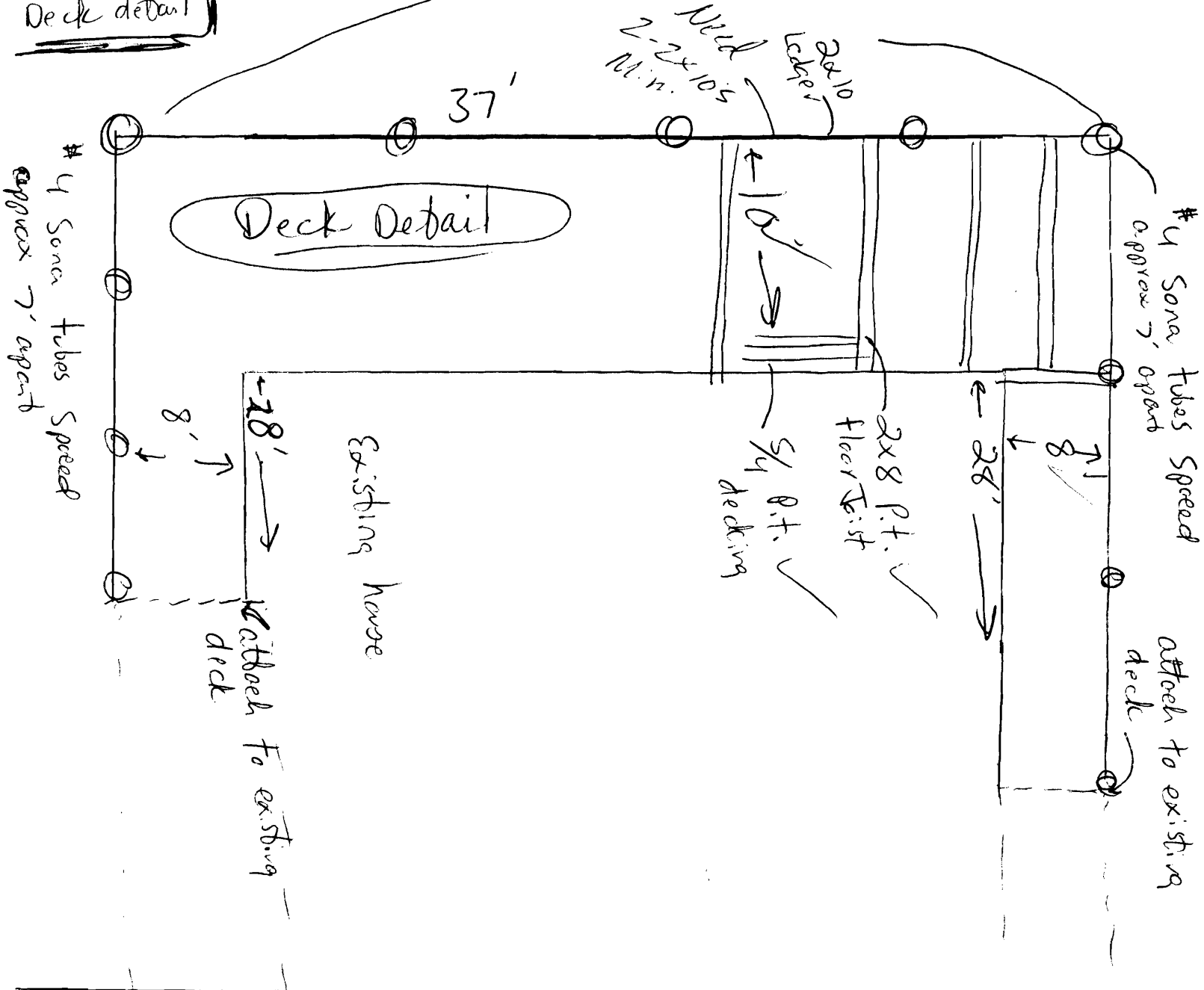
Savastano
Roof Framing

Deane Wilber
#5776-0467

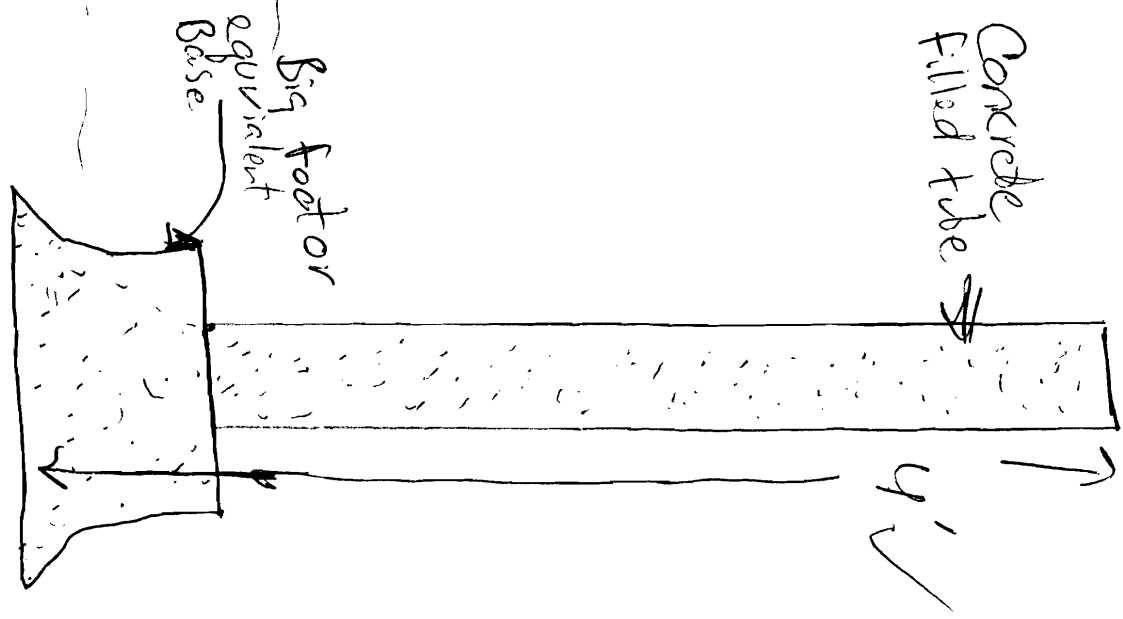


Sawastano Deck detail

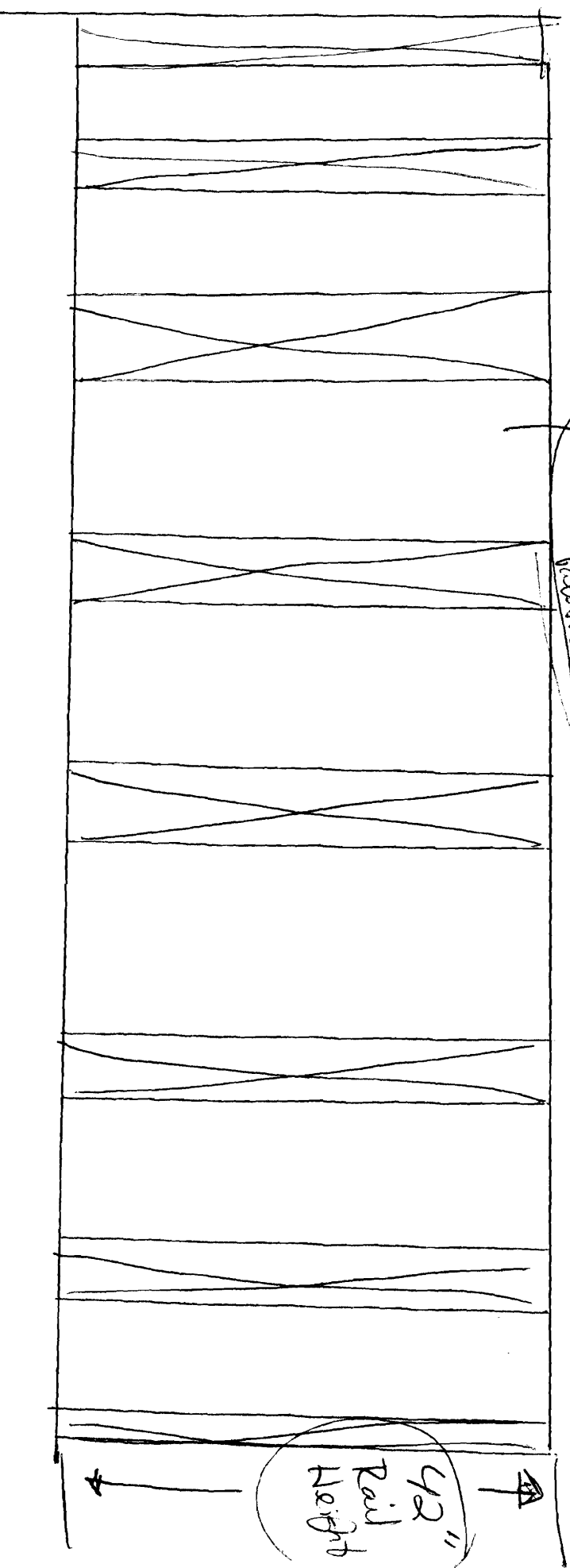
#5 Sona tubes Spaced approx 7'4" apart



Sona tubes

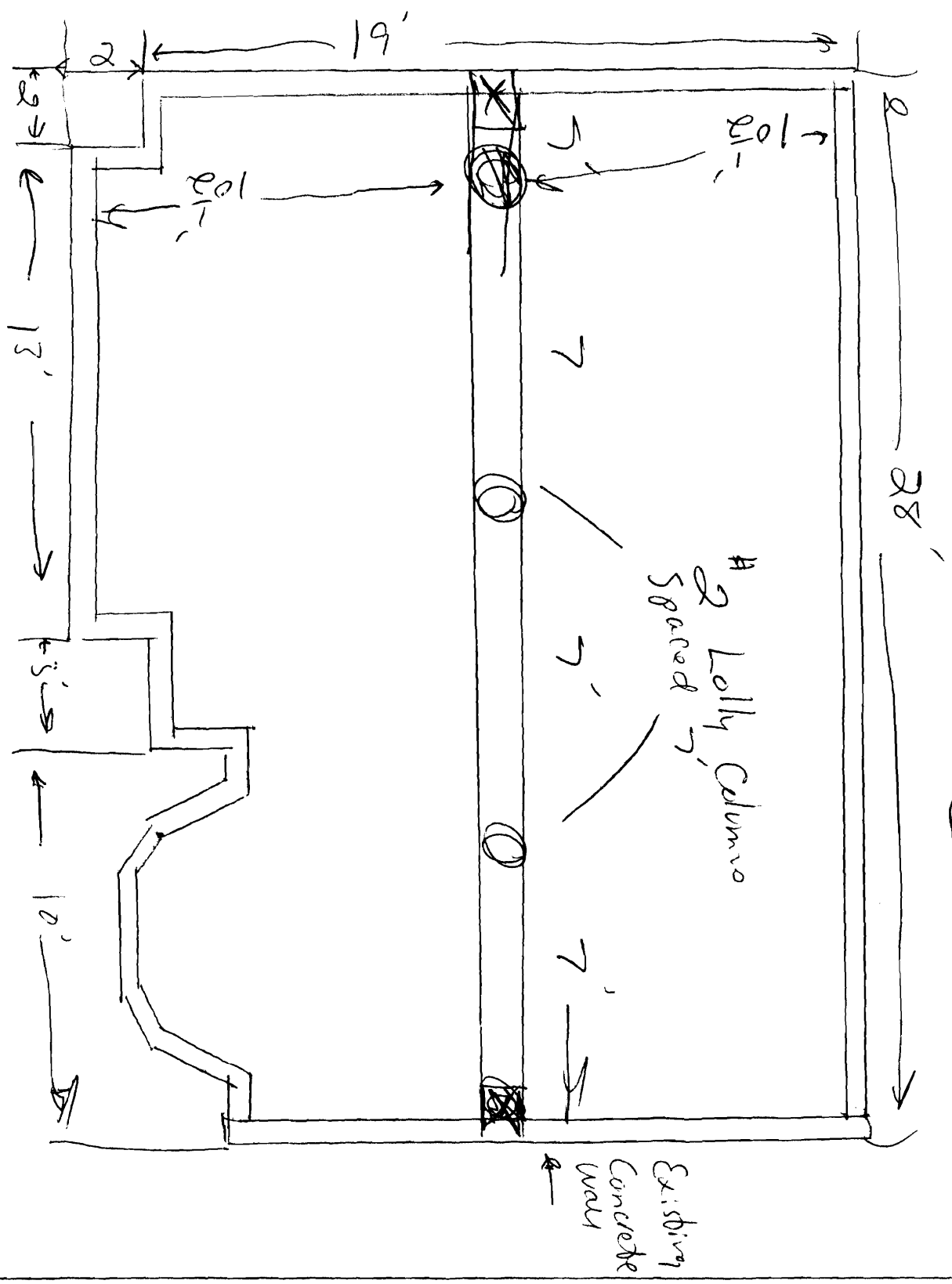


Sawtooth
Railing detail

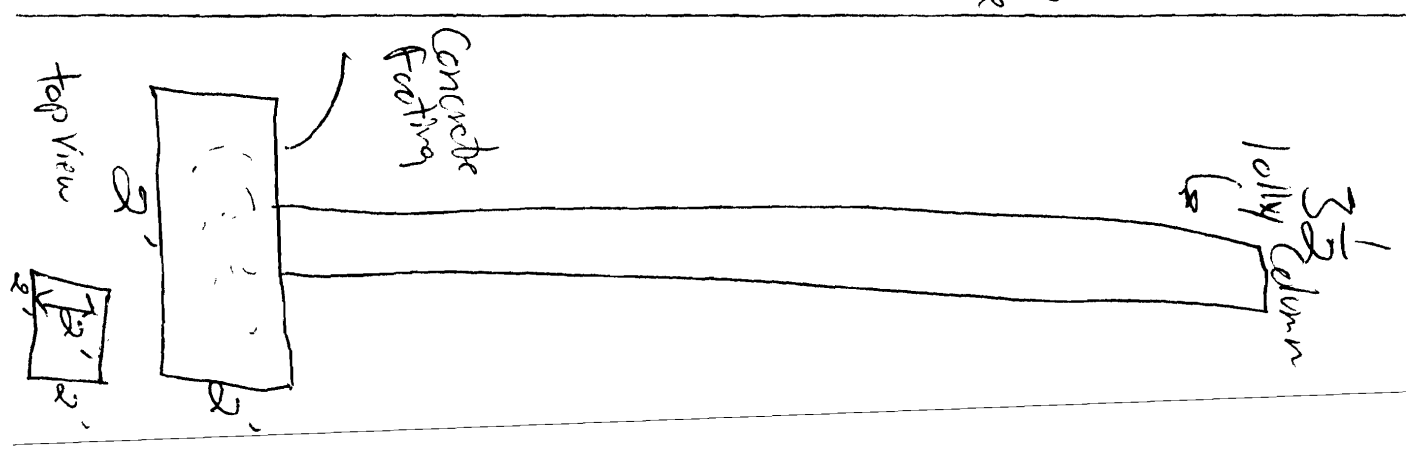


Lolly Column Spacing

Sawtooth Lolly Column Spacing



Lolly Column



SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10 SHS
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> Caution: Permit Required - Attach In Space Below <<	
City, Town, or Plantation	GREAT DIAMOND ISLAND, PORTLAND	<p style="font-size: 1.2em; margin: 0;">2007 0817</p> <p style="margin: 0;">PORTLAND PERMIT # 10620 TOWN COPY</p> <p style="margin: 0;">Date Permit Issued: <u>1516108</u> \$ <u>11100</u> <input type="checkbox"/> If Double Fee Charged</p> <p style="margin: 0;">Name (last, first, MI) <u>SAVASTANO ANTHONY & JUDY-MARIE</u> Applicant</p> <p style="margin: 0;">Mailing Address of <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant <u>C/O DEANE MACBETH</u> <u>72 THINGS MILL ROAD</u> <u>SHAPLEIGH, ME 04076</u></p> <p style="margin: 0;">Daytime Tel. * <u>408-766-2839</u></p> <p style="margin: 0;">Municipal Tax Map * <u>83C Lot - 2B</u> Lat. N <u>43 40' 23"</u> Lon. W <u>70 12' . 5"</u></p>	
Street or Road	NANCY LANE		
Subdivision, Lot *	LOT 2B (OLD LOT D)		
OWNER/APPLICANT INFORMATION		<p style="margin: 0;">Local Plumbing Inspector Signature <u>Jeanne Bunke</u> L.P.I. # <u>0132</u></p> <p style="margin: 0; font-size: 1.5em;">008001</p>	
<p style="margin: 0;">Owner or Applicant Statement</p> <p style="margin: 0; font-size: 0.8em;">I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.</p>		<p style="margin: 0;">Caution: Inspections Required</p> <p style="margin: 0; font-size: 0.8em;">I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.</p>	
<p style="margin: 0;">Signature of Owner/Applicant <u>Deane MacBeth</u> Date <u>4-27-08</u></p>		<p style="margin: 0;">Local Plumbing Inspector Signature _____ (1st) Date Approved _____</p> <p style="margin: 0;">Local Plumbing Inspector Signature _____ (2nd) Date Approved _____</p>	

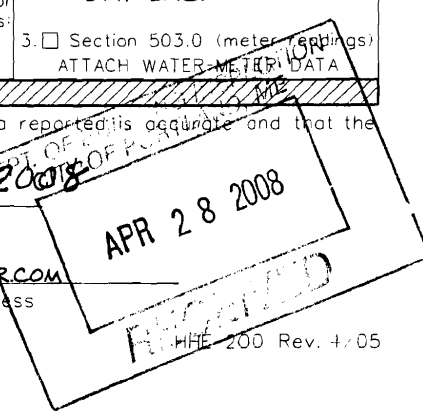
PERMIT INFORMATION		
<p style="text-align: center;">TYPE OF APPLICATION</p> <p>1. <input type="checkbox"/> First Time System</p> <p>2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>STONEBED</u> Year Installed: <u>UNKNOWN</u></p> <p>3. <input checked="" type="checkbox"/> Expanded System a. <input checked="" type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion</p> <p>4. <input type="checkbox"/> Experimental System</p> <p>5. <input type="checkbox"/> Seasonal Conversion</p>	<p style="text-align: center;">THIS APPLICATION REQUIRES</p> <p>1. <input checked="" type="checkbox"/> No Rule Variance</p> <p>2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval</p> <p>3. Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> Minimum Lot Size Variance</p> <p>5. <input type="checkbox"/> Seasonal Conversion Approval</p>	<p style="text-align: center;">DISPOSAL SYSTEM COMPONENTS</p> <p>1. <input checked="" type="checkbox"/> Complete Non-Engineered System</p> <p>2. <input type="checkbox"/> Primitive System (graywater & alt toilet)</p> <p>3. <input type="checkbox"/> Alternative Toilet, specify: _____</p> <p>4. <input type="checkbox"/> Non-Engineered Treatment Tank (only)</p> <p>5. <input type="checkbox"/> Holding Tank, _____ Gallons</p> <p>6. <input type="checkbox"/> Non-Engineered Disposal Field (only)</p> <p>7. <input type="checkbox"/> Separated Laundry System</p> <p>8. <input type="checkbox"/> Complete Engineered System (2000 gpd+)</p> <p>9. <input type="checkbox"/> Engineered Treatment Tank (only)</p> <p>10. <input type="checkbox"/> Engineered Disposal Field (only)</p> <p>11. <input type="checkbox"/> Pre-treatment, specify: _____</p> <p>12. <input type="checkbox"/> Miscellaneous components</p>
<p style="text-align: center;">SIZE OF PROPERTY</p> <p><u>1.5 ACRES</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres</p>	<p style="text-align: center;">DISPOSAL SYSTEM TO SERVE</p> <p>1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>4</u></p> <p>2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____</p> <p>3. <input type="checkbox"/> Other: _____</p> <p style="text-align: center;">SPECIFY _____</p> <p style="font-size: 0.8em;">Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	
<p style="text-align: center;">SHORELAND ZONING</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p style="text-align: center;">TYPE OF WATER SUPPLY</p> <p>1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private</p> <p>4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____</p>	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
<p style="text-align: center;">TREATMENT TANK</p> <p>1. <input type="checkbox"/> Concrete a. <input type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile</p> <p>2. <input checked="" type="checkbox"/> Plastic</p> <p>3. <input type="checkbox"/> Other: _____</p> <p style="font-size: 0.8em;">CAPACITY <u>1000</u> gallons</p>	<p style="text-align: center;">DISPOSAL FIELD TYPE & SIZE</p> <p>1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench</p> <p>3. <input checked="" type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input checked="" type="checkbox"/> Linear b. <input checked="" type="checkbox"/> Regular d. <input type="checkbox"/> H-20 loaded</p> <p>4. <input type="checkbox"/> Other: _____</p> <p style="font-size: 0.8em;">SIZE <u>1344</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft. <u>28 ELJEN IN DRAIN UNITS</u></p>	<p style="text-align: center;">GARBAGE DISPOSAL UNIT</p> <p>1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe</p> <p>2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment tank b. <input type="checkbox"/> _____ tanks in series c. <input type="checkbox"/> Increase in tank capacity d. <input type="checkbox"/> Filter on tank outlet</p>	<p style="text-align: center;">DESIGN FLOW</p> <p style="text-align: center; font-weight: bold;">360 gallons per day</p> <p style="text-align: center; font-size: 0.8em;">BASED ON:</p> <p>1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s))</p> <p>2. <input type="checkbox"/> Table 501.2 (other facilities)</p> <p style="text-align: center; font-size: 0.8em;">SHOW CALCULATIONS - for other facilities -</p> <p style="text-align: center; font-weight: bold;">EXISTING 3 BEDROOM EXPANDING TO 4 BEDROOMS AT 90 GALLONS PER DAY EACH</p> <p style="font-size: 0.8em;">3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER METER DATA</p>
<p style="text-align: center;">SOIL DATA & DESIGN CLASS</p> <p style="font-size: 0.8em;">PROFILE <u>3</u> CONDITION <u>C</u> DESIGN <u>I</u></p> <p style="font-size: 0.8em;">AT Observation Hole • <u>TP B</u> Depth <u>15</u> "</p> <p style="font-size: 0.8em;">OF MOST LIMITING SOIL FACTOR</p>	<p style="text-align: center;">DISPOSAL FIELD SIZING</p> <p>1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd</p> <p>2. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd</p> <p>3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd</p> <p>4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd</p> <p>5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd</p>		<p style="text-align: center;">EFFLUENT/EJECTOR PUMP</p> <p>1. <input type="checkbox"/> Not required</p> <p>2. <input checked="" type="checkbox"/> May be required</p> <p>3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems: _____</p> <p style="font-size: 0.8em;">DOSE: _____ Gallons</p>

SITE EVALUATOR STATEMENT		
<p>I certify that on <u>4/23/08</u> (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).</p>		
<p style="font-size: 1.5em; font-family: cursive;">Albert Frick</p> <p style="font-size: 0.8em;">Site Evaluator Signature</p>	<p style="font-size: 0.8em;">163 SE</p>	<p style="font-size: 1.5em; font-family: cursive;">4/25/2008</p> <p style="font-size: 0.8em;">Date</p>
<p style="font-weight: bold;">ALBERT FRICK</p> <p style="font-size: 0.8em;">Site Evaluator Name Printed</p>	<p style="font-weight: bold;">(207) 839-5563</p> <p style="font-size: 0.8em;">Telephone Number</p>	<p style="font-weight: bold;">AFA@MAINEERR.COM</p> <p style="font-size: 0.8em;">E-mail Address</p>

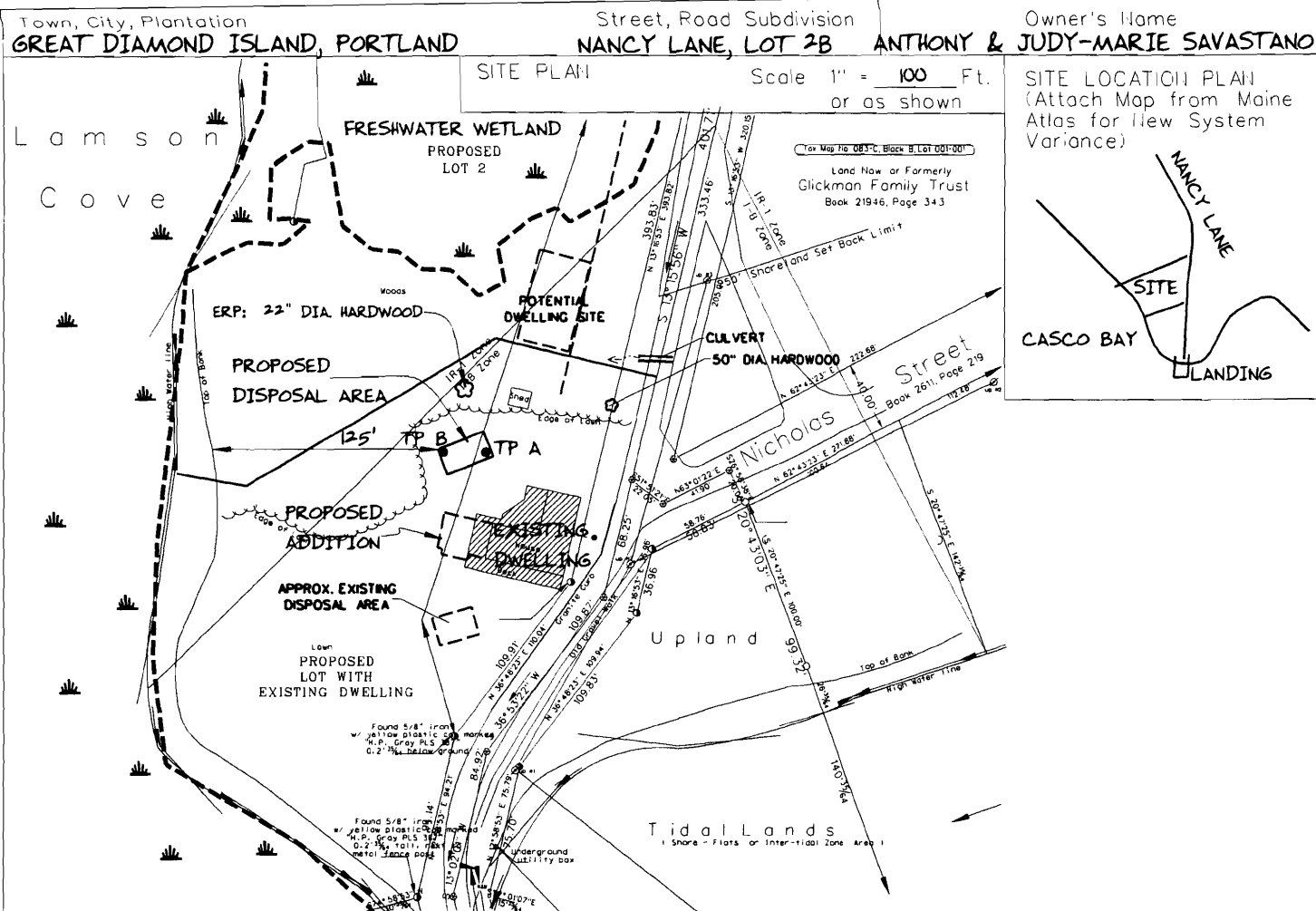
ALBERT FRICK ASSOCIATES - 95A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator



SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10-SHS
(207) 287-5672 FAX (207) 287-4172



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole <u>TP A</u> ■ Test Pit □ Boring					Observation Hole <u>TP B</u> ■ Test Pit □ Boring				
" Depth of Organic Horizon Above Mineral Soil					" Depth of Organic Horizon Above Mineral Soil				
	Texture	Consistency	Color	Mottling		Texture	Consistency	Color	Mottling
0			BROWN		0				
10	SANDY LOAM	FRIABLE	YELLOW BROWN		10	STONY SANDY LOAM	FRIABLE	BROWN	
20				FEW, FAINT	20	STONY FINE SANDY LOAM	FIRM	OLIVE BROWN	FEW, FAINT
30	LOAMY SAND	FIRM			30			GRAY	COMMON, DISTINCT
40					40				
50					50				

Soil Classification 3 Profile	Slope C Condition	Limiting Factor 24"	Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
Soil Classification 3 Profile	Slope C Condition	Limiting Factor 15"	Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth

Albert Frick
Site Evaluator Signature

163
SE

4/25/2008
Date

Page 2 of 3
HHE-200 Rev. 10/02

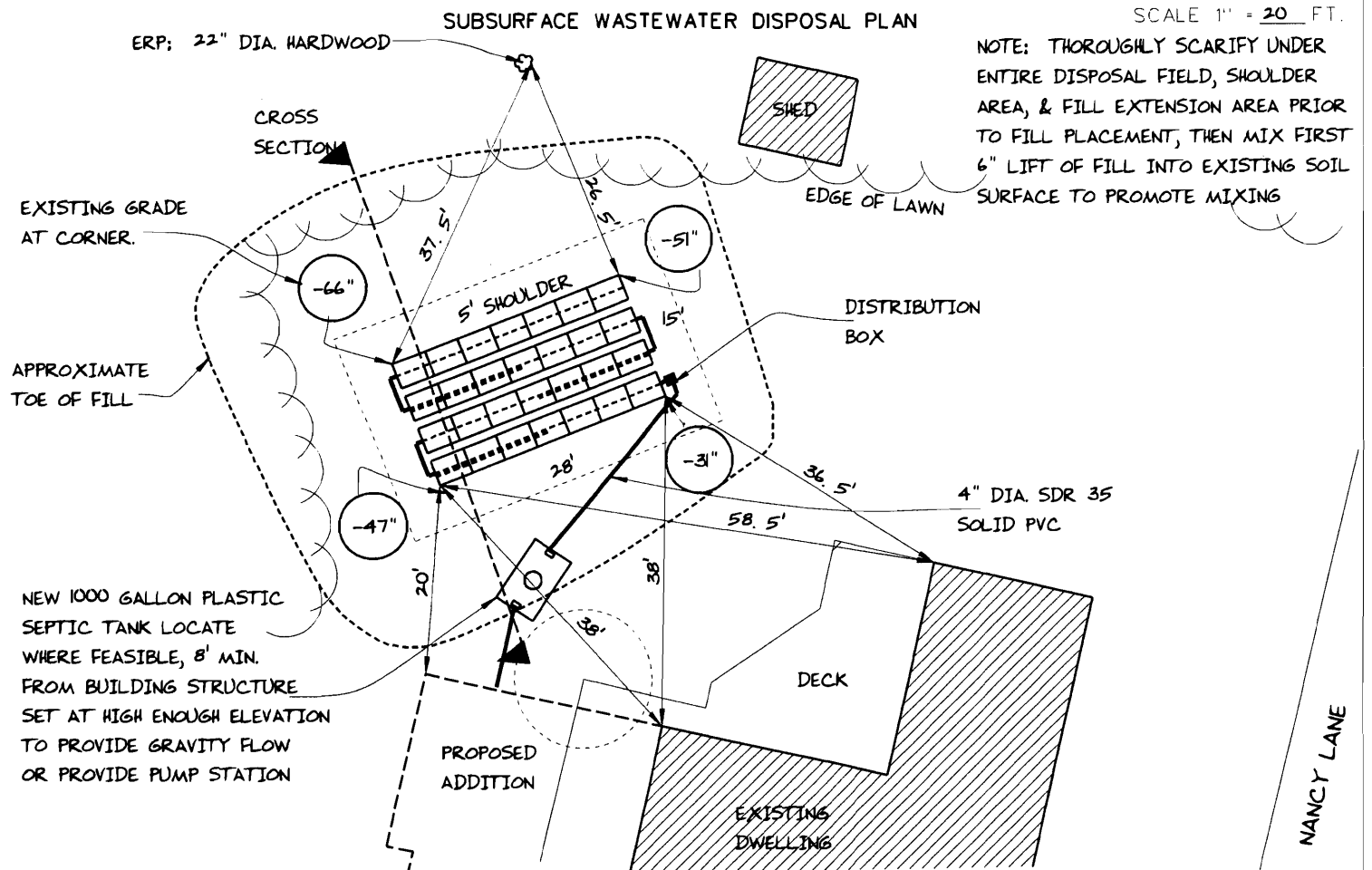
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10 SHS
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation
GREAT DIAMOND ISLAND, PORTLAND

Street, Road, Subdivision
NANCY LANE, LOT 2B

Owner's Name
ANTHONY & JUDY-MARIE SAVASTANO



FILL REQUIREMENTS

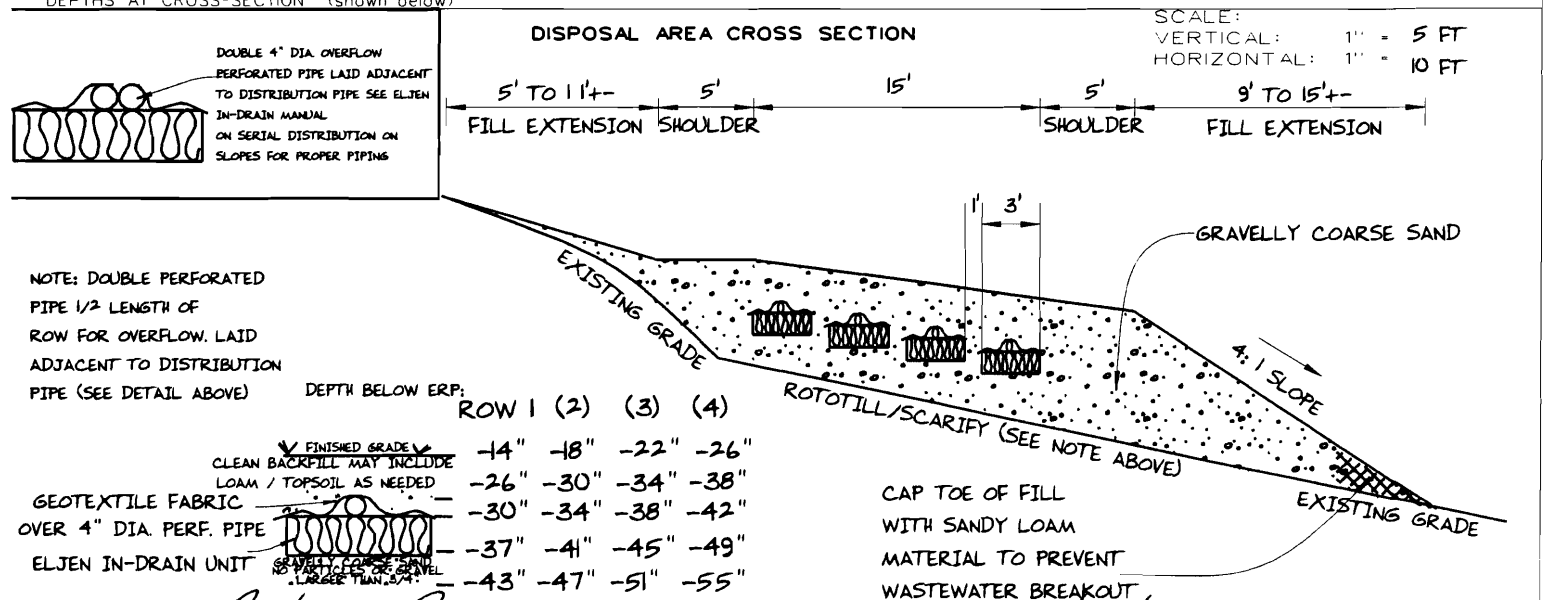
Depth of Fill (Upslope) : 17" - 33"
Depth of Fill (Downslope) : 25" - 40"
DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

: 17" - 33" Finished Grade Elevation
: 25" - 40" Top of Distribution Pipe or Proprietary Device
Bottom of Disposal Area

SEE
DETAIL
BELOW

ELEVATION REFERENCE POINT
NATL. IN. 22" DIA. HARDWOOD
Location & Description
59' ABOVE BASE OF TREE
Reference Elevation is: 0.0" or -----



Albert Frick
Site Evaluator Signature

163
SE *

4/25/2008
Date

Page 3 of 3
HHE-200 Rev. 10/02



Albert Frick Associates, Inc.

Soil Scientists & Site Evaluators

95A County Road Gorham, Maine 04038

(207) 839-5563

GREAT DIAMOND ISLAND, PORTLAND NANCY LANE, LOT 2B ANTHONY & JUDY-MARIE SAVASTANO

TOWN

LOCATION

APPLICANT'S NAME

1) The Plumbing and Subsurface Wastewater Disposal Rules adopted by the State of Maine, Department of Human Services pursuant to 22 M.R.S.A. § 42 (the "Rules") are incorporated herein by reference and made a part of this application and shall be consulted by the owner/applicant, the system installer and/or building contractor for further construction details and material specifications. The system Installer should contact Albert Frick Associates, Inc. 839-5563, if there are any questions concerning materials, procedures or designs.

The system installer and/or building contractor installing the system shall be solely responsible for compliance with the Rules and with all state and municipal laws and ordinances pertaining to the permitting, inspection and construction of subsurface wastewater disposal systems.

2) This application is intended to represent facts pertinent to the Rules only. It shall be the responsibility of the owner/applicant, system Installer and/or building contractor to determine compliance with and to obtain permits under all applicable local, state and/or federal laws and regulations (including, without limitation, Natural Resources Protection Act, wetland regulations, zoning or ordinances, subdivision regulations, Site Location of Development Act and minimum lot size laws) before installing this system or considering the property on which the system is to be installed a "buildable" lot. It is recommended that a wetland scientist be consulted regarding wetland regulations. Prior to the commencement of construction/installation, the local plumbing inspector or Code Enforcement Officer shall inform the owner/applicant and Albert Frick Associates, Inc of any local ordinances which are more restrictive than the Rules in order that the design may be amended. All designs are subject to review by local, state and/or federal authorities. Albert Frick Associates, Inc.'s liability shall be limited to revisions required by regulatory agencies pursuant to laws or regulations in effect at the time of preparation of this application.

3) All information shown on this application relating to property lines, well locations, subsurface structures and underground facilities (such as utility lines, drains, septic systems, water lines, etc.) are based solely upon information provided by the owner/applicant and has been relied upon by Albert Frick Associates, Inc. in preparing this application. The owner/applicant shall review this application prior to the start of construction and confirm this information. Well locations on abutting properties but not readily visible above grade should be confirmed by the owner/applicant prior to system installation to assure minimum setbacks.

4) Installation of a garbage (grinder) disposal is not recommended. If one is installed, an additional 1000 gallon septic tank or a septic tank filter shall be connected in series to the proposed septic tank. Risers and covers should be installed over the septic tank outlet to allow for easy maintenance.

5) The system user shall avoid introducing kitchen grease or fats into this system. Chemicals such as septic tank cleaners and/or chlorine (such as from water treatment units) and controlled or hazardous substances shall not be disposed of in this system. Additives such as yeast or enzymes are discouraged, since they have not been proven to extend system life.

6) The septic tank should be pumped within two years of installation and subsequently as recommended by the pump service, but in no event should the septic tank be pumped less often than every three years. All septic tanks, pump stations and additional treatment tanks shall be installed to prevent ground water and surface water infiltration. Risers and covers should be properly installed to provide access while preventing surface water intrusion.

GREAT DIAMOND ISLAND, PORTLAND

NANCY LANE, LOT 2B

ANTHONY & JUDY-MARIE SAVASTANO

TOWN

LOCATION

APPLICANT'S NAME

- 7) The actual water flow or number of bedrooms shall not exceed the design criteria indicated on this application without a re-evaluation of the system as proposed. If the system is supplied by public water or a private service with a water meter, the water consumption per period should be divided by the number of days to calculate the average daily water consumption [water usage (cu. ft.) x 7.48 cu. ft. (gallons per cu. ft.) ÷ (# of days in period) = gals per day].
- 8) The general minimum setbacks between a well and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.
- 9) When a gravity system is proposed: BEFORE CONSTRUCTION/INSTALLATION BEGINS, the system installer or building contractor shall review the elevations of all points given in this application and the elevation of the existing and/or proposed building drain and septic tank inverts for compatibility to minimum slope requirement. In gravity systems, the invert of the septic tank(s) outlet(s) shall be at least 4 inches above the invert of the distribution box outlet at the disposal area.
- 10) When an effluent pump is required: Provisions shall be made to make certain that surface and ground water does not enter the septic tank or pump station, by sealing/grouting all seams and connections, and by placement of a riser and lid at or above grade. An alarm device warning of a pump failure shall be installed. Also, when pumping is required of a chamber system, install a "T" connection in the distribution box and place 3 inches of stone or a splash plate in the first chamber. Insulate gravity pipes, pump lines and the distribution box as necessary to prevent freezing.
- 11) On all systems, remove the vegetation, organic duff and old fill material from under the disposal area and any fill extension. On sites where the proposed system is to be installed in natural soil, scarify the bottom and sides of the excavated disposal area with a rake. Do not use wheeled equipment on the scarified soil surface. For systems installed in fill, scarify the native soil by roto-tilling or scarifying with teeth of backhoe to a depth of at least 8 inches over the entire disposal and fill extension area to prevent glazing and to promote fill bonding. Place fill in loose layers no deeper than 8 inches and compact before placing more fill (this ensures that voids and loose pockets are eliminated to minimize the chance of leakage or differential setting). Do not use wheeled equipment on the scarified soil area until after 12 inches of fill is in place. Keep equipment off proprietary devices. Divert the surface water away from the disposal area by ditching or shallow landscape swales.
- 12) Unless noted otherwise, fill shall be gravelly coarse sand which contains no more than 5% fines (silt and clay). Crushed stone shall be clean and free of any rock dust from the crushing process.
- 13) Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 14) Seed all filled and disturbed surfaces with perennial grass seed, then mulch with hay or equivalent material to prevent erosion. Alternatively, bark or permanent landscape mulch may be used to cover system. Woody trees or shrubs are not permitted on the disposal area or fill extensions.
- 15) If an advanced wastewater treatment unit is part of the design, the system shall be operated and maintained per manufacturer's specifications.



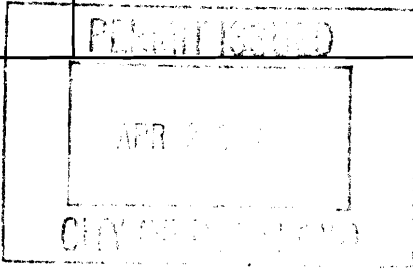
Albert Frick Associates, Inc.
Soil Scientists & Site Evaluators

95A County Road Gorham, Maine 04038
(207) 839-5563

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

Permit No: 08-0409	Issue Date: 04/25/2008	CBL: 083C C001001
-----------------------	---------------------------	----------------------

Location of Construction: 0 Nancy Ln	Owner Name: Savastano Anthony &	Owner Address: 2983 Holiday Court	Phone: 207-776-2839
Business Name:	Contractor Name: D & H General Contractors / Dean	Contractor Address: 72 Thyngs Mill Road Shapliegh	Phone: 2075760467
Lessee/Buyer's Name	Phone:	Permit Type: Foundation Only/Residential	Zone: I-B-I-R-1

Past Use: single family	Proposed Use: single family - add 28' x 21' foundation only <i>for permit # 08-0409</i>	Permit Fee:	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: add 28' x 21' foundation only		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>R-3</i> Type: <i>SB</i> <i>IRC 2003</i>	
		Signature: <i>[Signature]</i>		Signature: <i>[Signature]</i>
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____		

Permit Taken By: tmm	Date Applied For: 04/25/2008	Zoning Approval		
1. This permit application does not 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..		Special Zone or Reviews <input checked="" type="checkbox"/> Shoreland <i>located in I.B. no setbacks req.</i> <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <i>panel 9 zone C</i> <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>4/25/08</i>	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 Date: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>4/25/08</i>

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 is 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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

**DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND**

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION

PERMIT

Permit Number: 080409

This is to certify that Savastano Anthony &/D & P General Contractors / Dean M. Smith
has permission to add 28' x 21' foundation only

AT 0 Nancy Ln 083C-C001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

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

Notification of inspection must be given and when permission is procured before this building or part thereof is started or closed-in. 24 HOUR NOTICE IS REQUIRED.

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

PERMIT ISSUED

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

Appeal Board _____

Other _____

APR 25 2008

CITY OF PORTLAND

Department Name

[Signature] 4/25/08
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

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

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

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

Footings/Building Location Inspection: Prior to pouring concrete or setting precast piers

Foundation Inspection: Prior to placing ANY backfill for below grade occupiable space

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

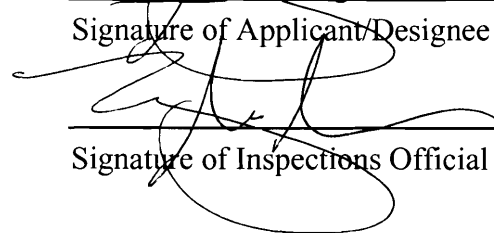
If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.



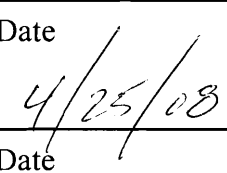
Signature of Applicant/Designee

Date



Signature of Inspections Official

Date



City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 08-0409	Date Applied For: 04/25/2008	CBL: 083C C001001
------------------------------	--	-----------------------------

Location of Construction: 0 Nancy Ln	Owner Name: Savastano Anthony &	Owner Address: 2983 Holiday Court	Phone: 207-776-2839
Business Name:	Contractor Name: D & H General Contractors / Dean	Contractor Address: 72 Thyngs Mill Road Shapliegh	Phone: (207) 576-0467
Lessee/Buyer's Name	Phone:	Permit Type: Foundation Only/Residential	

Proposed Use: single family - add 28' x 21' foundation only	Proposed Project Description: add 28' x 21' foundation only
---	---

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/25/2008

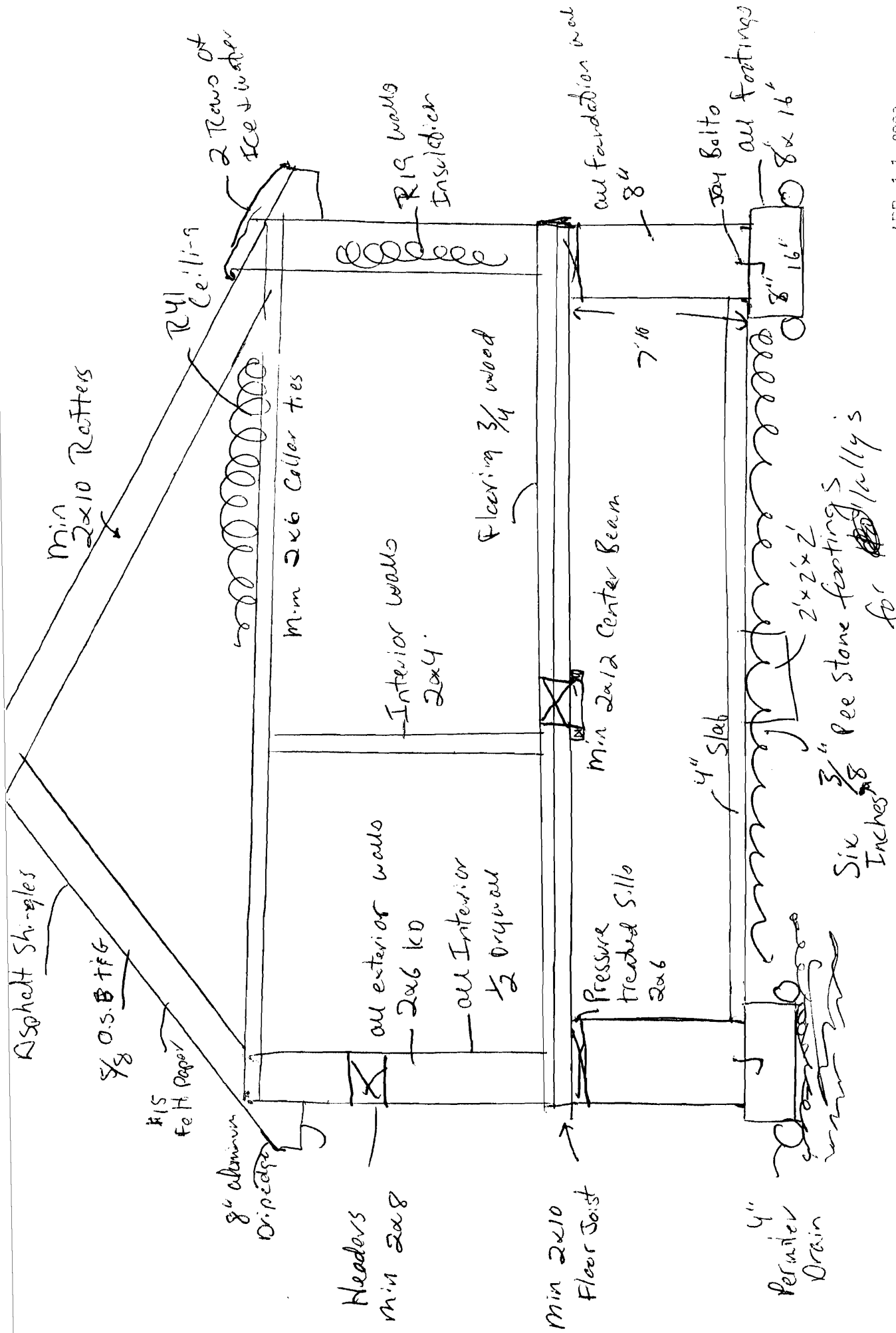
Note: **Ok to Issue:**

- 1) This property shall remain a single family dwelling. Any change of use shall require a separate permit application for review and approval.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 04/25/2008

Note: **Ok to Issue:**

- 1) As discussed, all required information regarding the roof framing details, deck construction details, and lally column spacing must be submitted to this office prior to the issuance of permit # 08-0267.
- 2) This is a foundation only permit. No other construction activity is authorized.



APR 11 2008

Saustano Residence
 #9 Nancy Lane Great Diamond Island

Deane MacBeth
 #576-0467

Applicant: Tom & Judy Savastano

Date: 4/11/08

C-B-L: 0830-2001

perm. # 08-0267

CHECK-LIST AGAINST ZONING ORDINANCE

Date - addition to existing home (built around 1900)

Zone Location - IR1/IRB - both have located in IB zone

Interior or corner lot -

Proposed Use/Work - addition 28x34 (part two sby/part one sby) w/ wrap around deck

Sewage Disposal -

Lot Street Frontage -

Front Yard - 30' or more - 180'

Rear Yard - 10' min. - 800'

Side Yard - 10' min. - 45' left 140'

Projections -

Width of Lot -

Height - 35' max. - 18.75 ≈

Lot Area - 40,000 sq min. - 255,200

Lot Coverage Impermeous Surface - 50% ok

Avea per Family -

Off-street Parking -

Loading Bays -

Site Plan -

Shoreland Zoning/Stream Protection - w/ in 350' - located in I-B no setback required

Flood Plains - panel 9-2 zone C

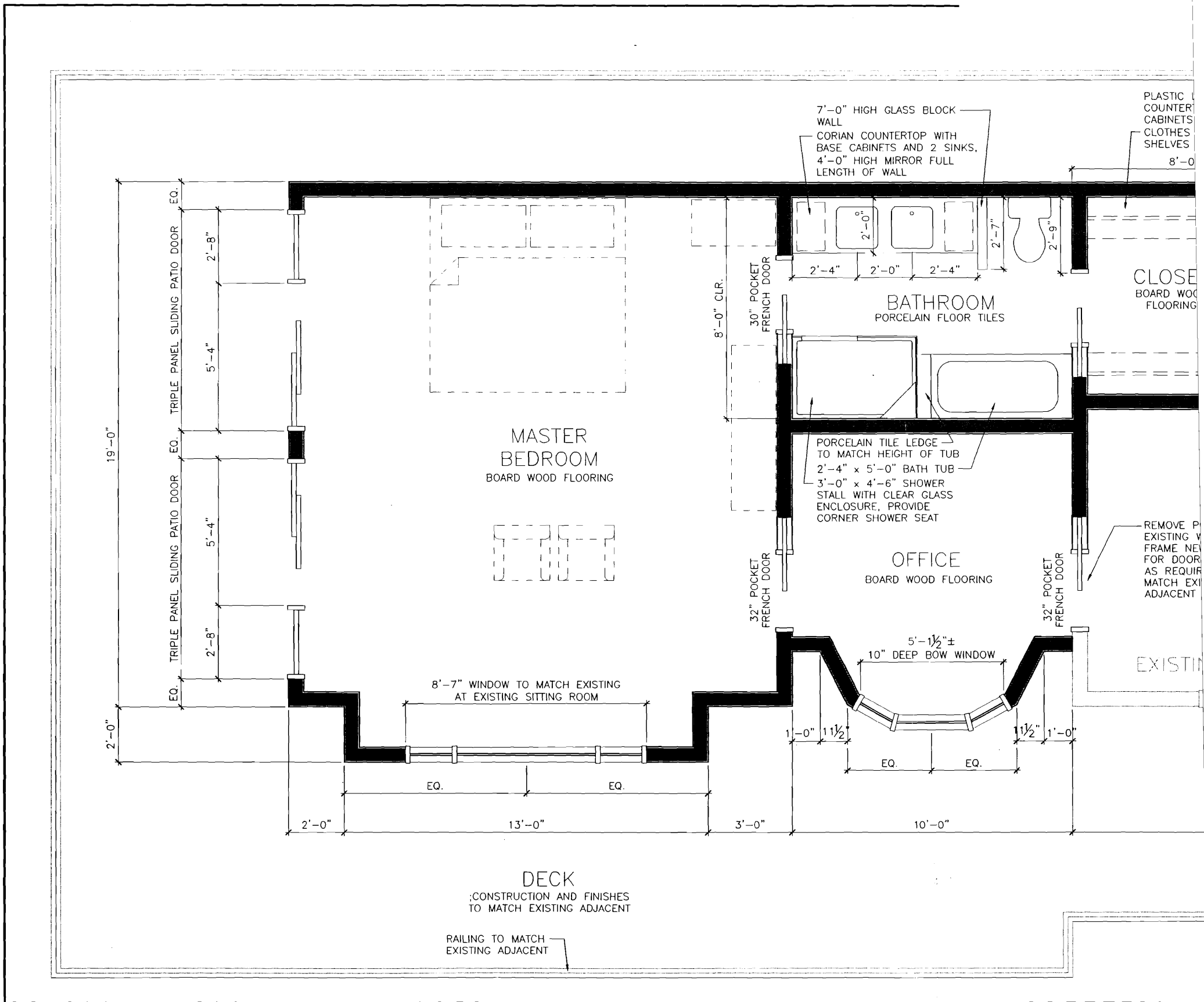


PROJECT DESCRIPTION -
ADDITION OF A MASTER BEDROOM, BATHROOM, AND OFFICE SPACE
TO THE EXISTING ONE-STORY WOOD FRAMED HOUSE.
CONVERSION OF PART OF THE EXISTING SITTING ROOM TO A
CLOSET, LAUNDRY AND HALLWAY AREA.

GENERAL BUILDING AREA
EXISTING TOTAL FLOOR
FIRST FLOOR ADDITION
SECOND FLOOR ADDITION
PROPOSED TOTAL FLOOR

SAVASTANO RESIDENCE ADDITION

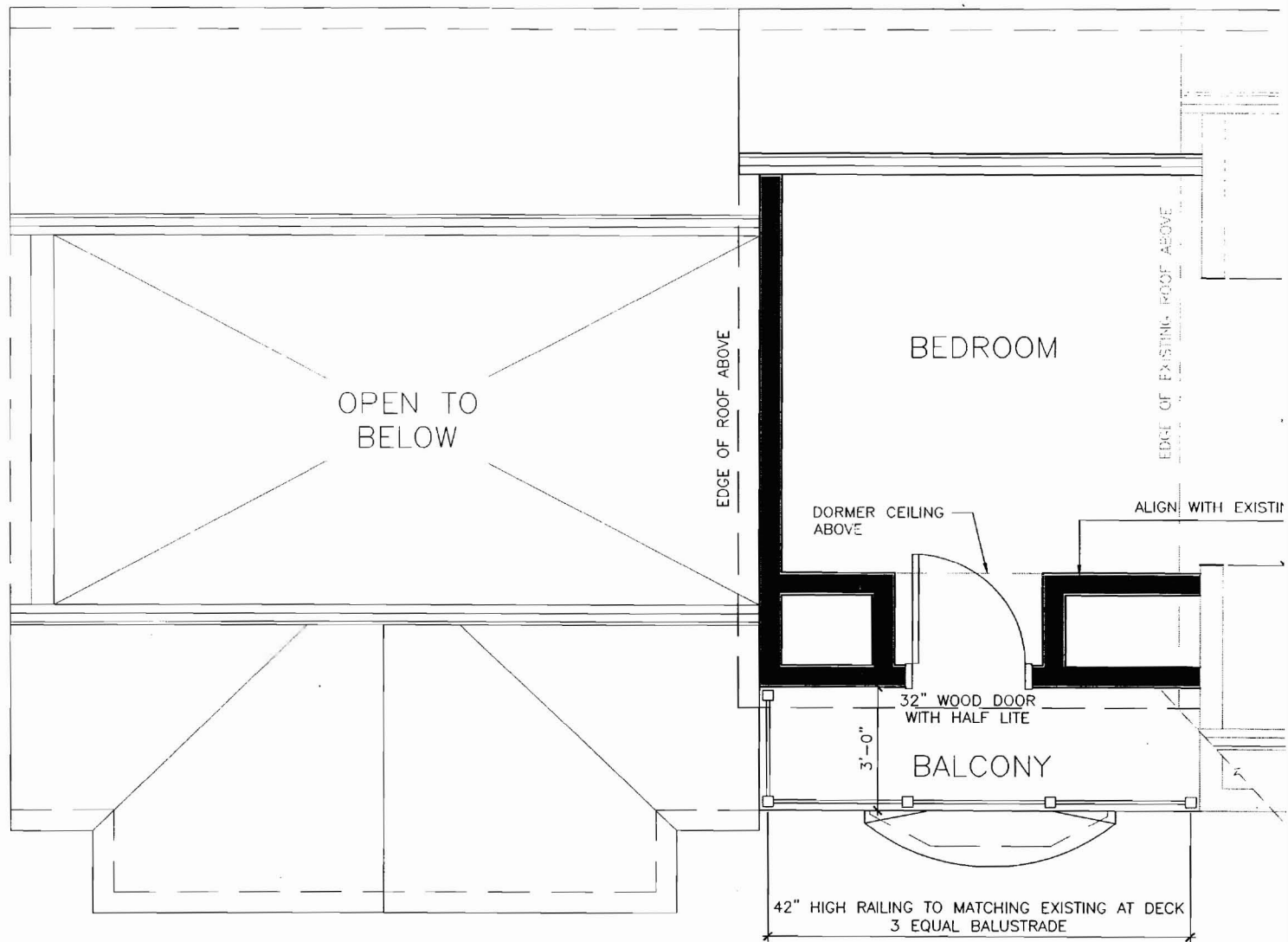
9 Nancy Lane, Great Diamond Island, Maine 04019



SAVASTANO RESIDENCE ADDITION

9 Nancy Lane, Great Diamond Island, Maine 04019

PA

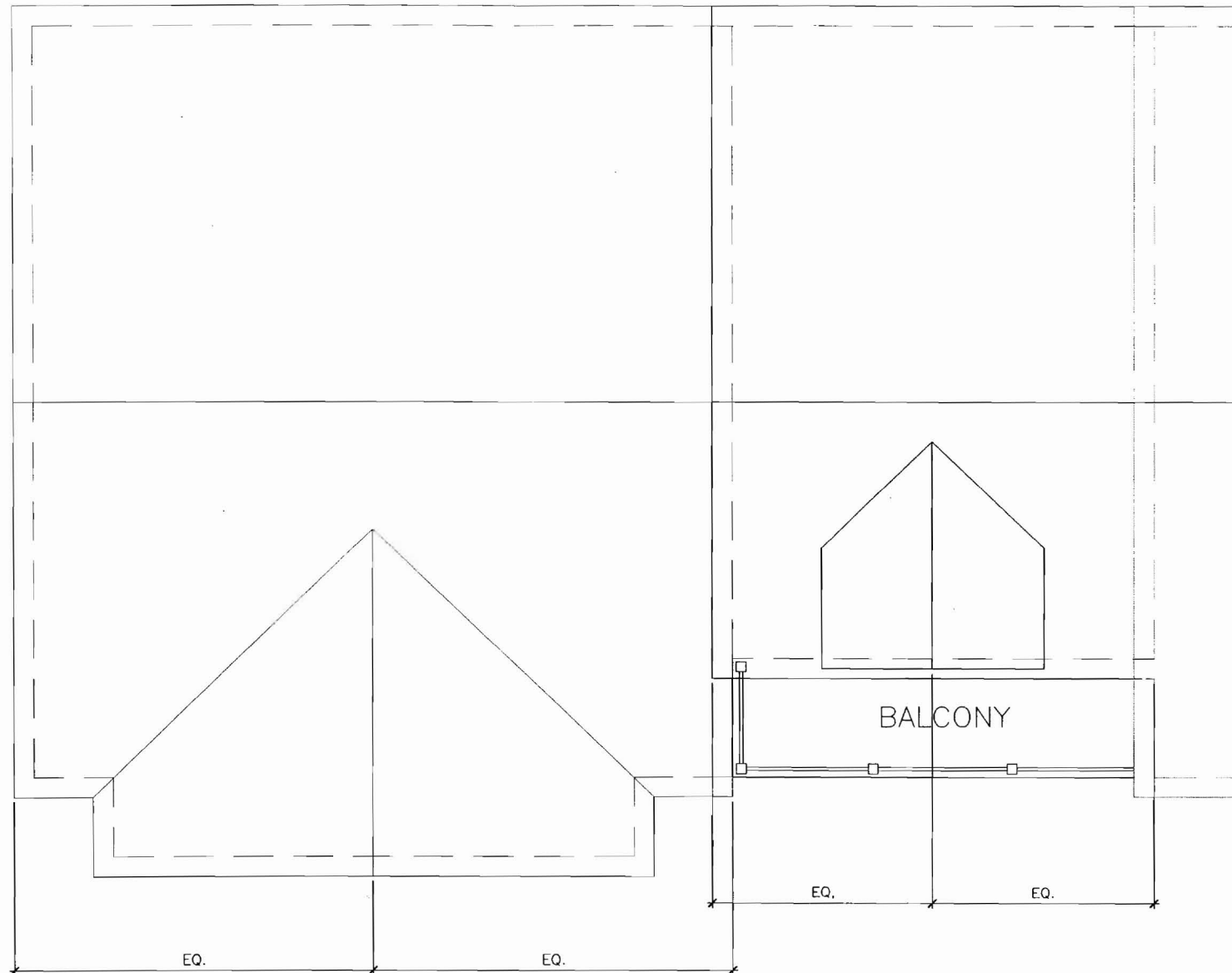


SAVASTANO RESIDENCE ADDITION

9 Nancy Lane, Great Diamond Island, Maine 04019

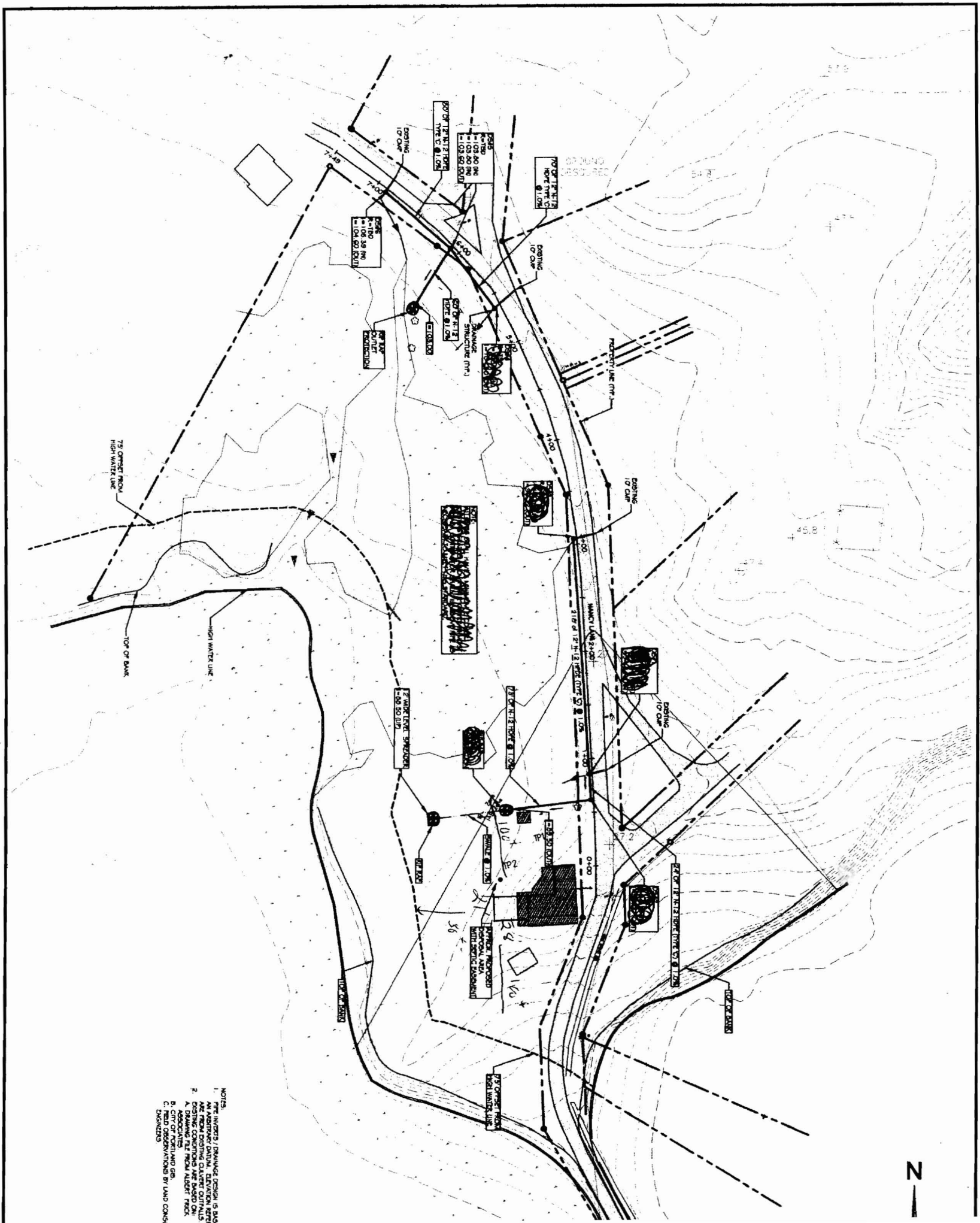
PART

NOTE:
1. ALL ROOF, EAVE, AND DORMER DETAILS
AND FINISHES TO MATCH EXISTING, UNLESS
OTHERWISE NOTED.



SAVASTANO RESIDENCE ADDITION

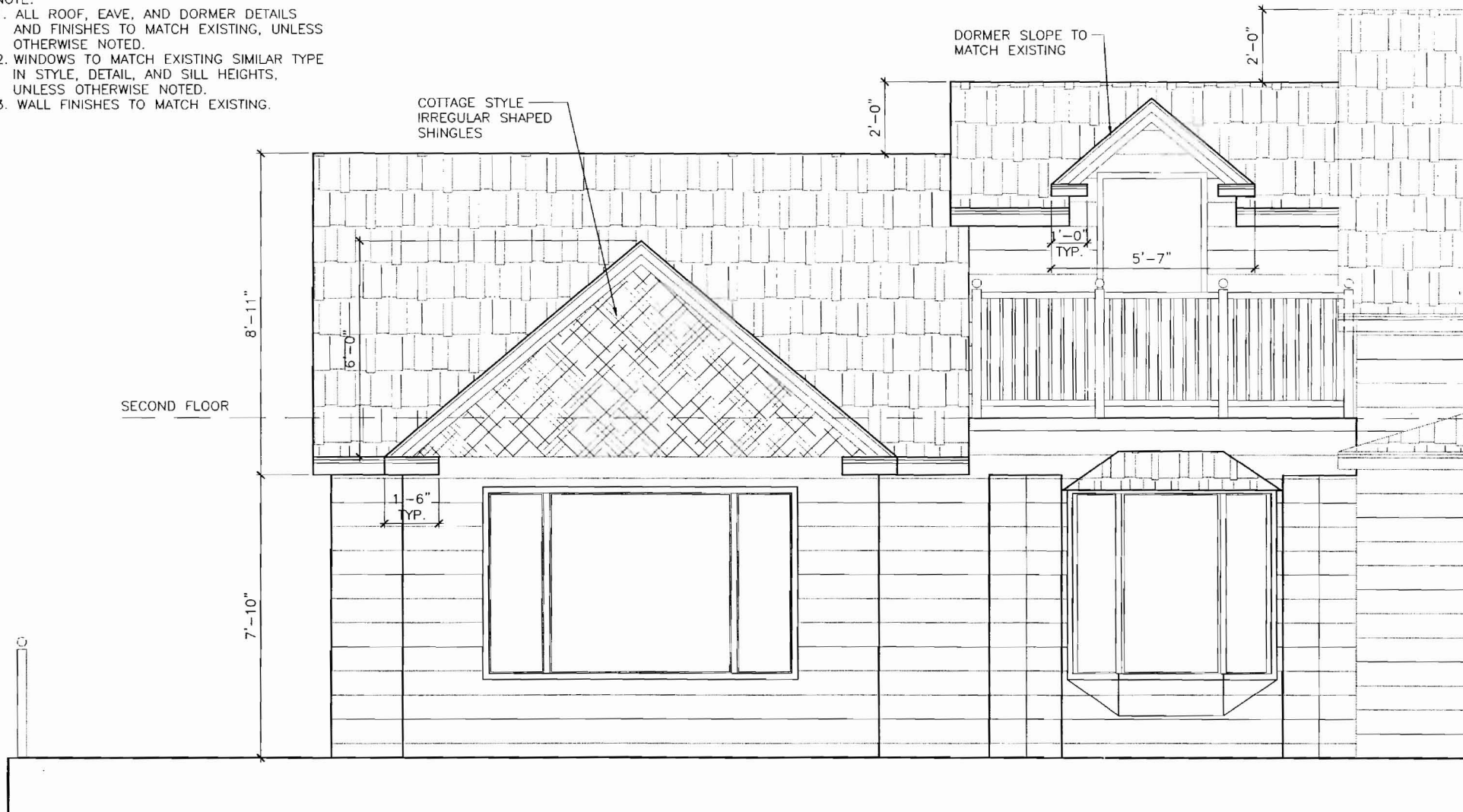
9 Nancy Lane, Great Diamond Island, Maine 04019



- NOTES:
1. TYPE INVERTS / DRAINAGE DESIGN IS BAS ON AVAILABLE DATA, ELEVATION BENTH ARE FROM DRAINING CLAYTON CONTROLS
 2. ALL STRUCTURES AND PIPES ARE TO BE CONSTRUCTED TO THE FOLLOWING STANDARDS:
 - A. DRAINING TILE FROM ALBERT PARK ASSOCIATES
 - B. SPT OF TOWN/STATE OR ASSOCIATES
 - C. ALL CONDUITS TO BE PROVIDED BY LAND OWNER ENGINEERS

NOTE:

1. ALL ROOF, EAVE, AND DORMER DETAILS AND FINISHES TO MATCH EXISTING, UNLESS OTHERWISE NOTED.
2. WINDOWS TO MATCH EXISTING SIMILAR TYPE IN STYLE, DETAIL, AND SILL HEIGHTS, UNLESS OTHERWISE NOTED.
3. WALL FINISHES TO MATCH EXISTING.



SAVASTANO RESIDENCE ADDITION

9 Nancy Lane, Great Diamond Island, Maine 04019

PA

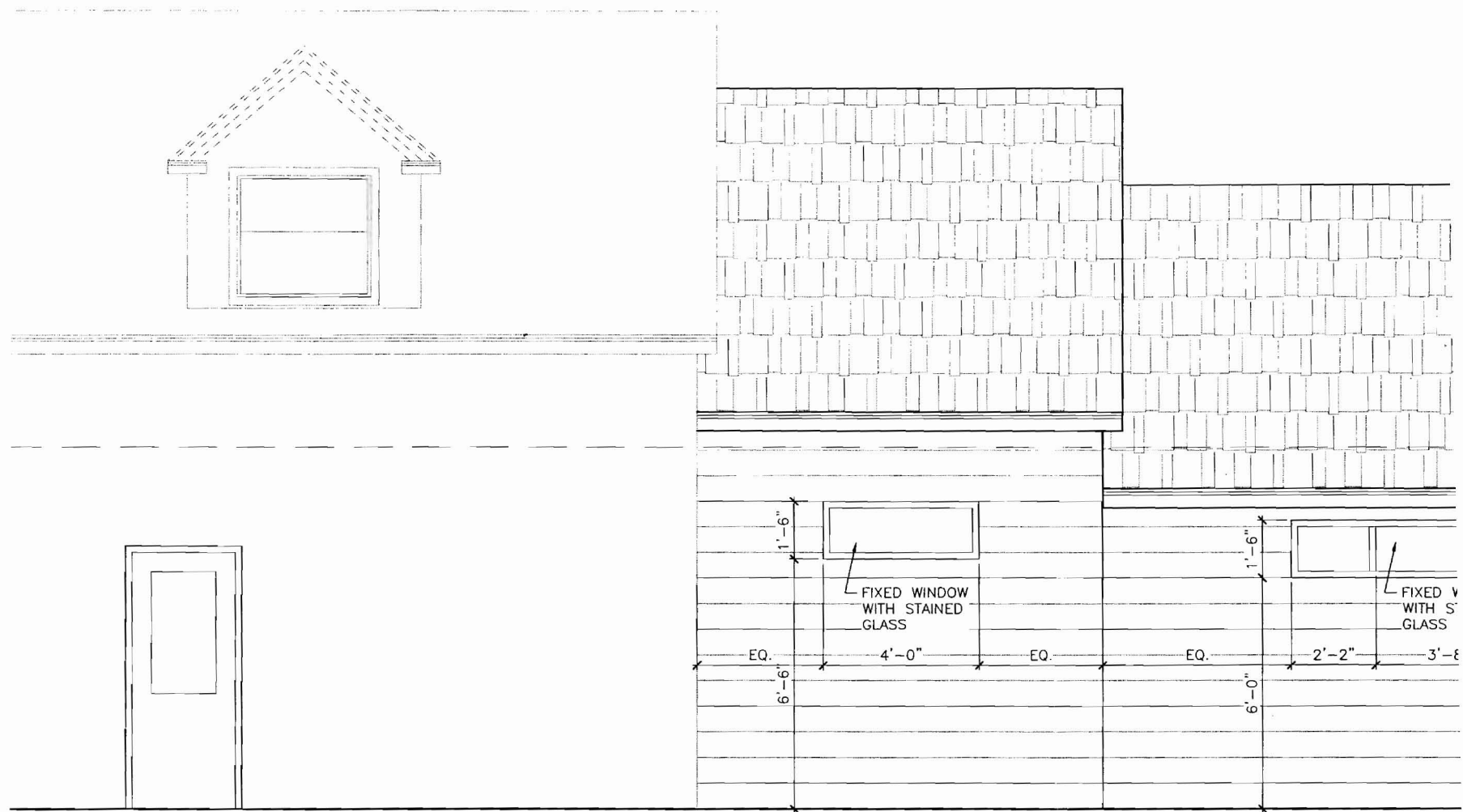
NOTE:

1. ALL ROOF, EAVE, AND DORMER DETAILS AND FINISHES TO MATCH EXISTING, UNLESS OTHERWISE NOTED.
2. WINDOWS TO MATCH EXISTING SIMILAR TYPE IN STYLE, DETAIL, AND SILL HEIGHTS, UNLESS OTHERWISE NOTED.
3. WALL FINISHES TO MATCH EXISTING.



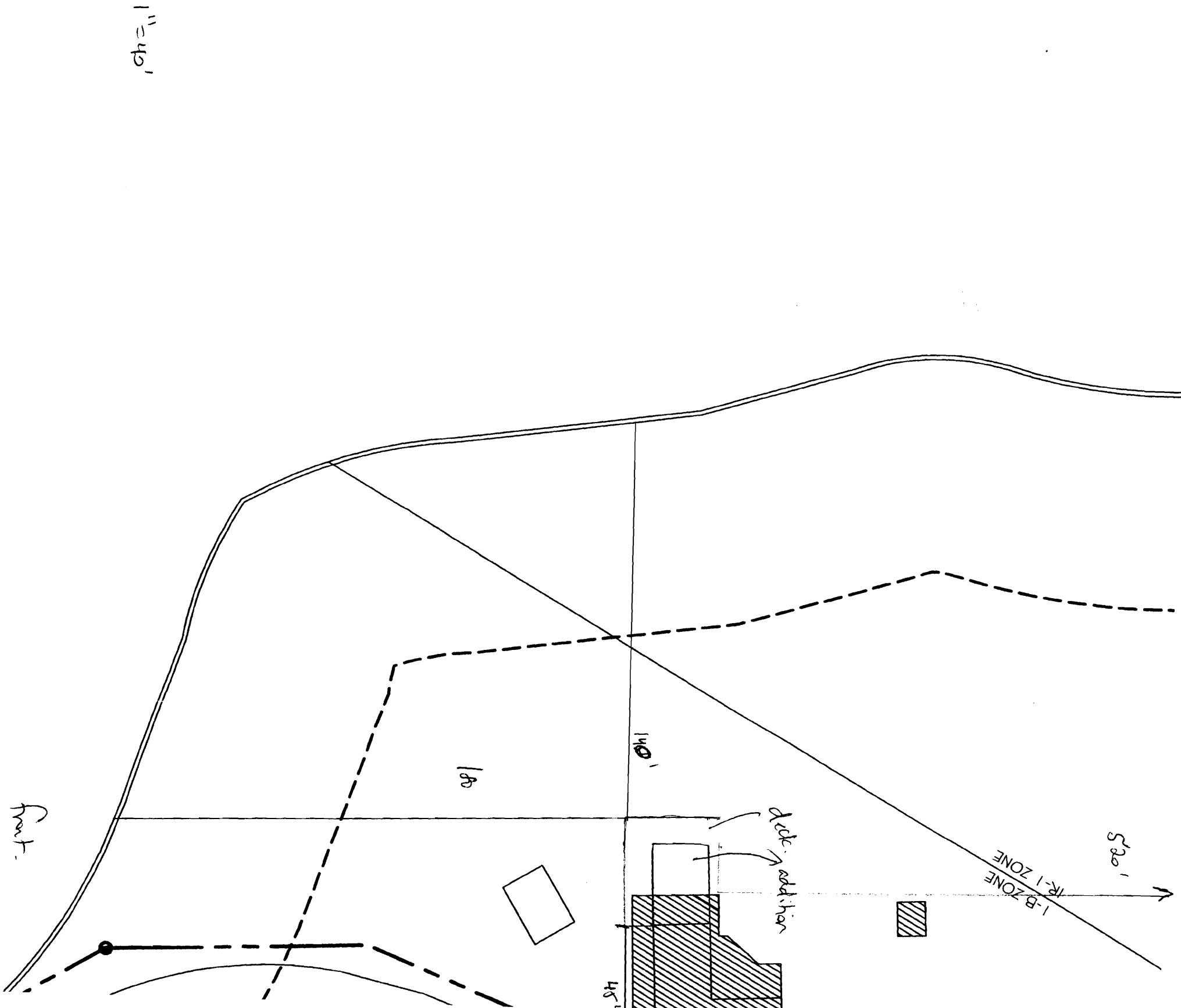
SAVASTANO RESIDENCE ADDITION

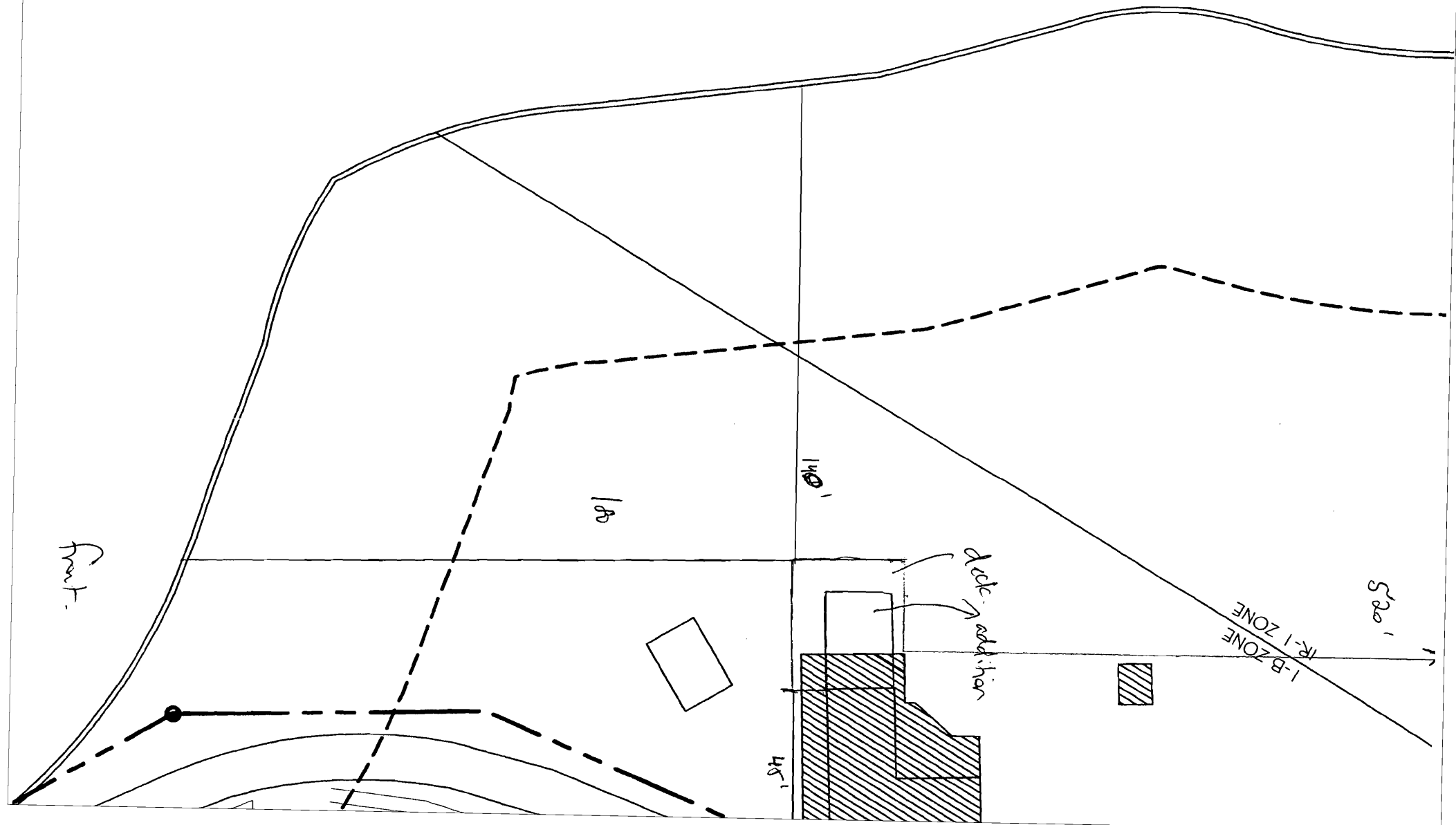
9 Nancy Lane, Great Diamond Island, Maine 04019



SAVASTANO RESIDENCE ADDITION

9 Nancy Lane, Great Diamond Island, Maine 04019





180'

front.

180

140'

145'

deck addition

I-B ZONE
R-1 ZONE

180'