

085-T-001

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: PORTLAND PEAKS ISLAND
 Street: 3RD ST @ 5TH STREET
 Subdivision Lot #: TAX MAP 85 BLOCK T LOTS 12, 13, 14

PROPERTY OWNERS NAME

ASHMORE RALPH
 Last: First:

Applicant Name: RALPH ASHMORE

Mailing Address of Owner/Applicant (If Different): 200 SEASHORE AVE PEAKS ISLAND MAINE 04105

Winding Way

FORTLAND 6505 TOWN COPY

Date Permit Issued: 6/11/98 \$ 100 FEE If Double Fee Charged

L.R.I. # 0129

PERMIT ISSUED
 WITH REQUIREMENTS

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] 6/11/98
 Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

[Signature] 5-14-99
 Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
- Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: _____

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

SIZE OF PROPERTY: 38,864 SF

ZONING: IR 1

TYPE OF WATER SUPPLY

Private - well to be driven point

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

3 BEDROOM

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: 4

CONDITION: AIII

DEPTH TO LIMITING FACTOR: 18

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRA LARGE

DISPOSAL AREA TYPE SIZE

- BED _____ Sq. Ft.
- CHAMBER 704* Sq. Ft.
 REGULAR H-20
- TRENCH _____ Linear Ft.
- OTHER: _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT * USED 16 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION SITE EVALUATION WAIVED BY LOCAL OPTION

On JUNE 23, 1989 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin 0003/4814 4/24/98
 Site Evaluator or Professional Engineer's Signature SE# / PE# Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option OF THE ORIGINAL DESIGN PREPARED BY PEY AND OTHER PROFESSIONAL ENGINEERS BY RICHARD T. HARRIS, PE, MAINE REGISTERED PROFESSIONAL ENGINEER 4/22/98

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

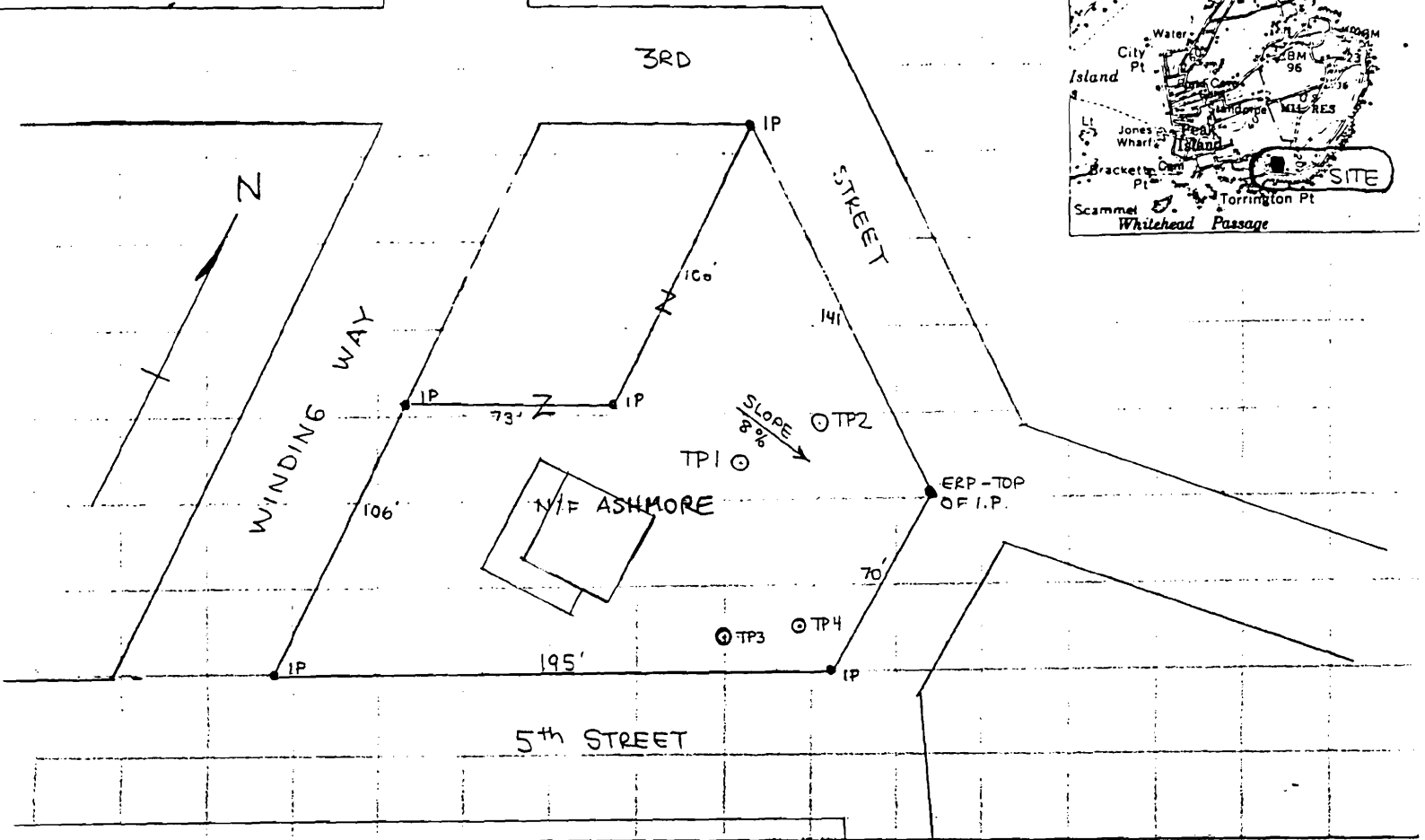
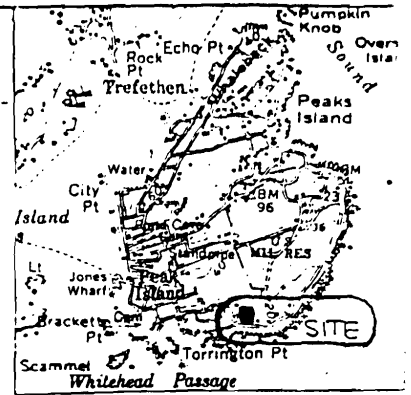
Owners Name

PORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T-1,2,3&4

RALPH ASHMORE

SITE PLAN

Scale 1" = 50' FL



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole _____ Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10	GRAVELLY LOAM		RED BROWN	
15				
20		LOOSE		NONE
25				
30	GRAVEL		LIGHT BROWN	
35				
40				FEW
45	BEDROCK			
50				

Soil 4
Profile

Classification AIII
Condition

Slope 8 %

Limiting Factor 30

Ground Water
 Restrictive Layer
 Bedrock

Observation Hole 2 _____ Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10				
15		SLIGHTLY FRIABLE	RED BROWN	NONE
20				
25	SILTY SAND		BEIGE	
30				
35		FRIABLE	LIGHT RED BROWN	FEW
40	BEDROCK			
45				
50				

Soil 4
Profile

Classification AIII
Condition

Slope 8 %

Limiting Factor 30

Ground Water
 Restrictive Layer
 Bedrock

William B. Gookin
Site Evaluator or Professional Engineer's Signature

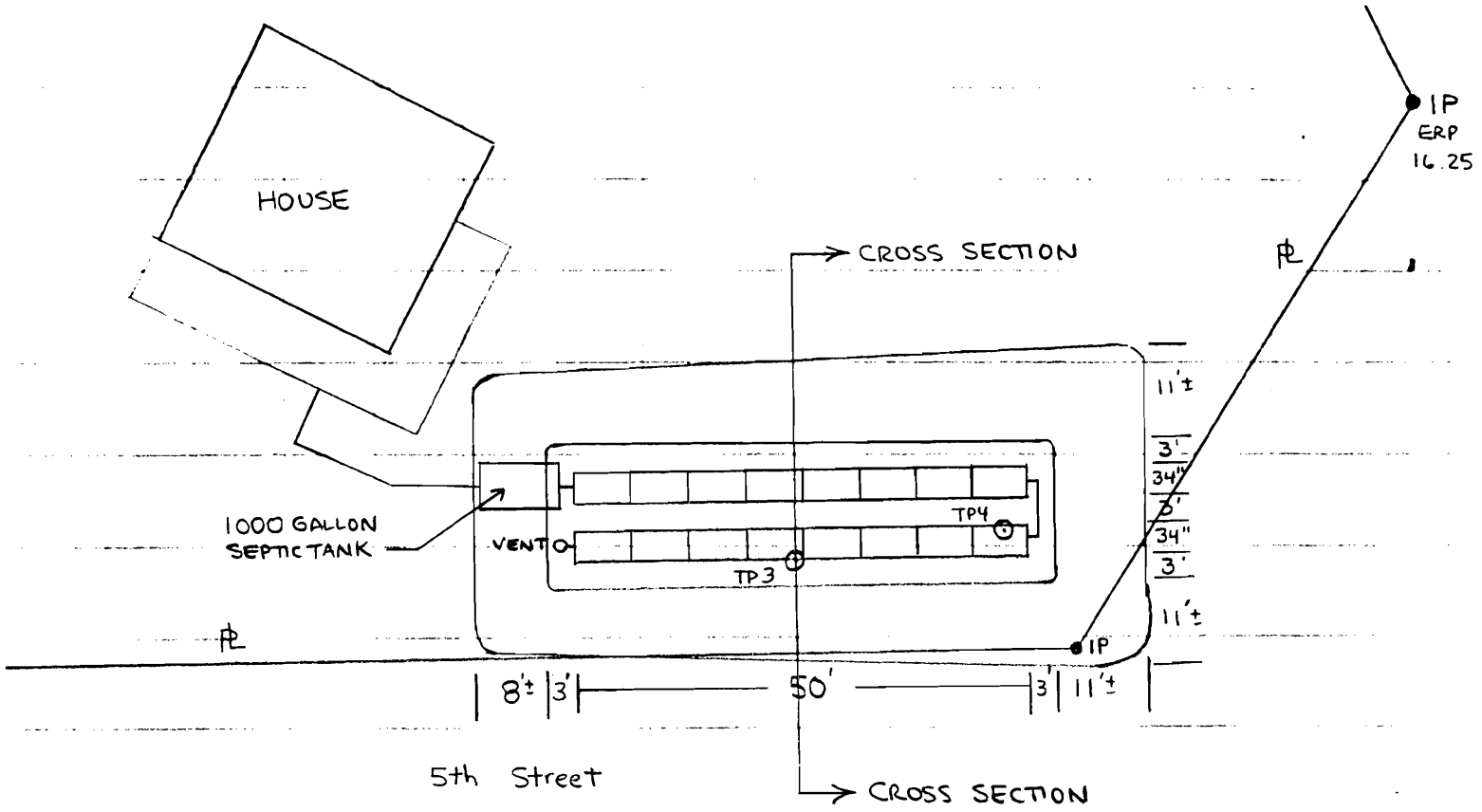
0003/4814
SE # / PE #

4/24/98
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

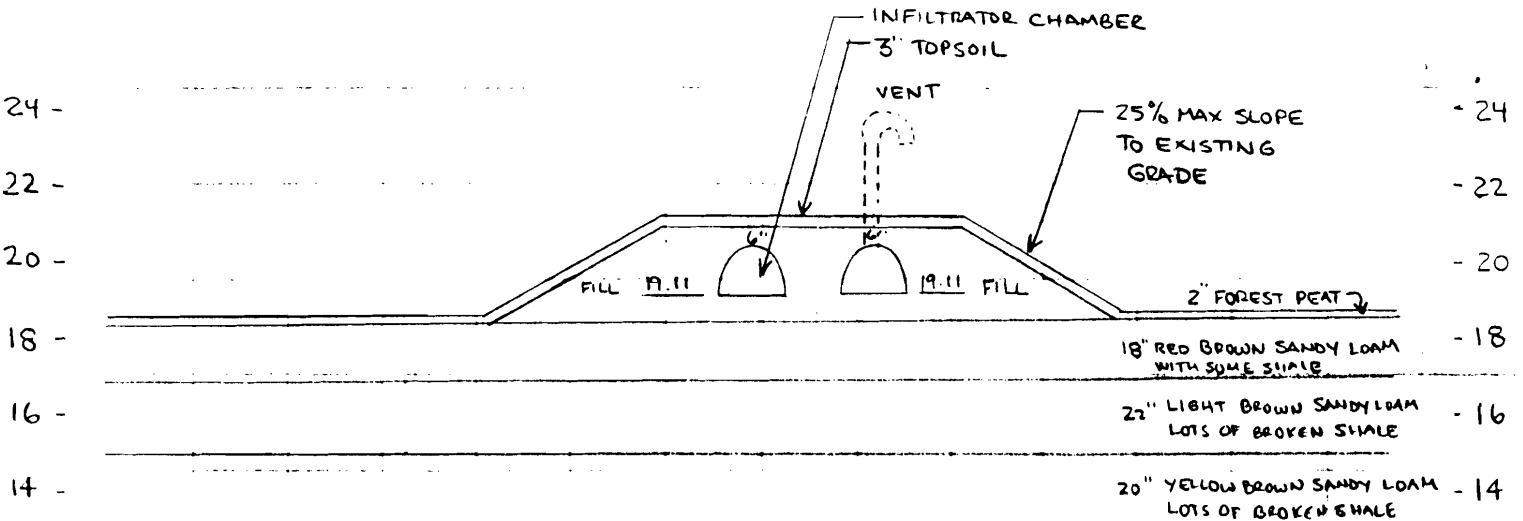
Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST	Street, Road, Subdivision 85-T-1,2,3,4	Owners Name RALPH ASHMORE
SUBSURFACE WASTEWATER DISPOSAL PLAN		Scale 1" = <u>20</u> FL.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>23"</u>	Reference Elevation is <u>16.25</u>	TOP OF IRON PIPE AT MOST EASTERLY CORNER OF LOT
Depth of Fill (Downslope) <u>34"</u>	Bottom of Disposal Area <u>SEE CROSS SECTION</u>	
	Top of Distribution Lines or Chambers " " "	

DISPOSAL AREA CROSS SECTION	Scale:
	Vertical: 1 inch = 10 Ft.
	Horizontal: 1 inch = 5 Ft.



William B. Zoch...
Site Evaluator or Professional Engineer's Signature

0003/4814
SF # / PF #

4/24/98
Date

85 T 1

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: **PORTLAND - PEAKS ISLAND**

Street: **3RD ST @ 5TH STREET**

Subdivision Lot #: **TAX MAP 85 BLOCK T LOTS 1,2,3,4**

PROPERTY OWNERS NAME

Last: **ASHMORE** First: **RALPH**

Applicant Name: **RALPH ASHMORE**

Mailing Address of Owner/Applicant (if Different): **200 SEASHORE AVE
PEAKS ISLAND, ME 04108**

6-11-98 LPI # 124

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Portland sticker # 6505

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] 1/18/99
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

[Signature] 5-3-99
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requiring Local Plumbing Inspector Approval
- Requires State and Local Plumbing Inspector Approval

INSTALLATION IS:

COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED: _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

SIZE OF PROPERTY: **38,864 SF**

ZONING: **IR 1**

TYPE OF WATER SUPPLY

DRILLED WELL SEALED TO 80' DEPTH

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: **1000** GALS

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

3 BEDROOM

DESIGN FLOW: **270** (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: **4** CONDITION: **C**

DEPTH TO LIMITING FACTOR: **19"**

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq. Ft.
- CHAMBER **704*** Sq. Ft.
 REGULAR H-20
- TRENCH _____ Linear Ft.
- OTHER: _____

SITE EVALUATOR STATEMENT * USED 16 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION () SITE EVALUATION WAIVED BY LOCAL OPTION

On **JUNE 23, 1989** (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

[Signature] **0003/4814** **1/16/99**
Site Evaluator Signature SE# Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option. **NOTE: THESE NEW HHE-200 FORMS ARE A MODIFICATION OF THE ORIGINAL DESIGN IN 1989 AND WERE PREPARED AND DESIGNED BY NORMAN TWADDEL. Norman V. Twaddel 1/14/99**

Page 1 of 3
HHE-200 Rev.1/84

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

PORTLAND PEAKS ISLAND

3RD ST @ 5TH ST 85-T-1,2,3,4

RALPH ASHMORE

SITE PLAN

Scale 1" = _____ Ft.

SITE LOCATION PLAN (Attach
Map from Maine Atlas for
New System Variance)

21 January 1999

Talked with Mr. Goodwin about

concern about possible ledge where his new proposed first and second line of infiltrator will be located, also about pond - He stated that there was no ledge there what would be of concern and the pond has increased in size due to neighbor damming to out let -

[Signature] 4/1/24

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 3 Test Pit Boring
 2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM	LOOSE	RED BROWN	NONE
(SOME BROKEN SHALE)			
SANDY LOAM WITH BROKEN SHALE		LIGHT BROWN	COMMON
	SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile <u>4</u>	Classification Condition <u>C</u>	Slope <u>2</u> %	Limiting Factor <u>19</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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Observation Hole 4 Test Pit Boring
 1 1/2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM SOME BROKEN SHALE	LOOSE	RED BROWN	NONE
		LIGHT BROWN	COMMON
	SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile <u>4</u>	Classification Condition <u>AIII</u>	Slope <u>2</u> %	Limiting Factor <u>18</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

11/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

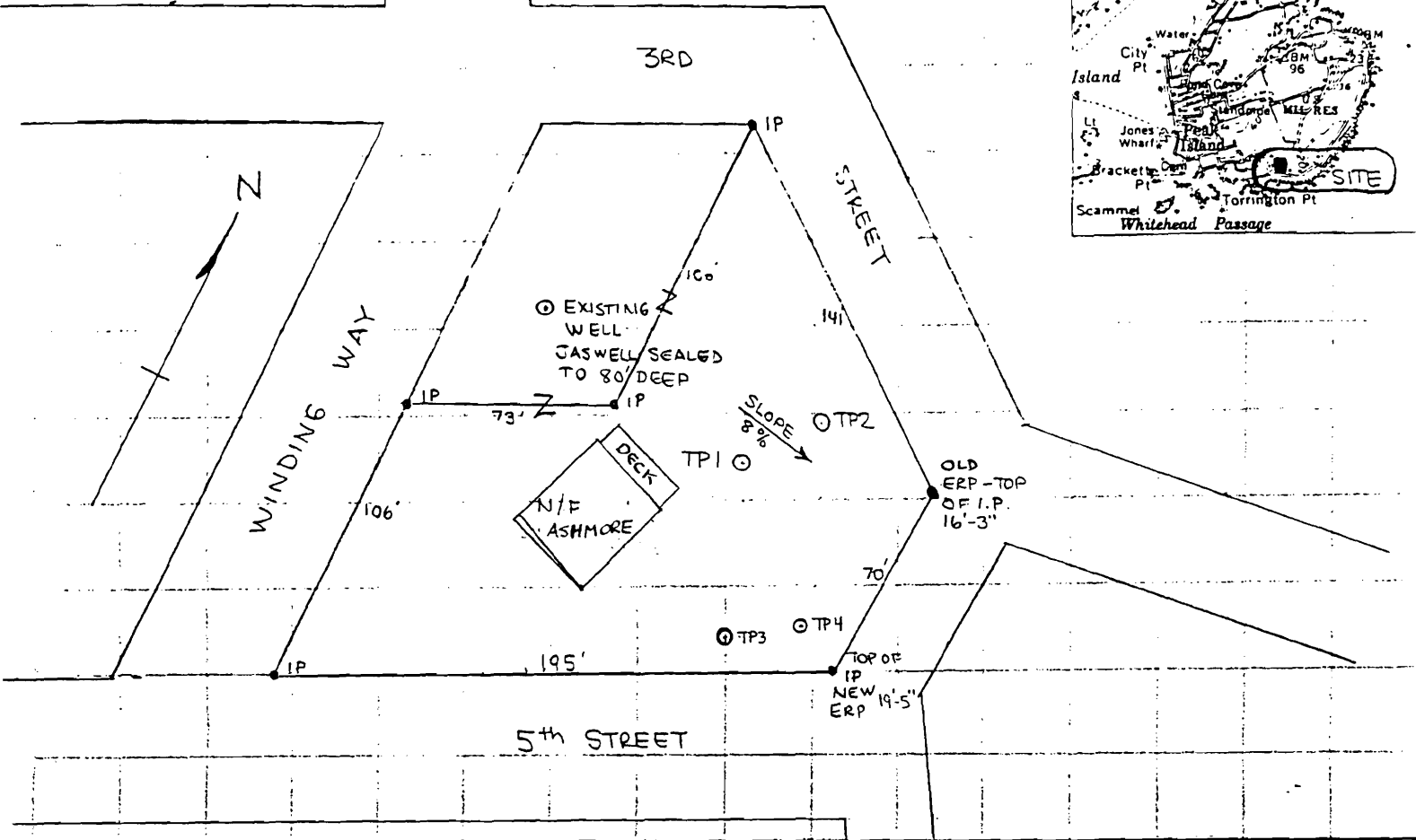
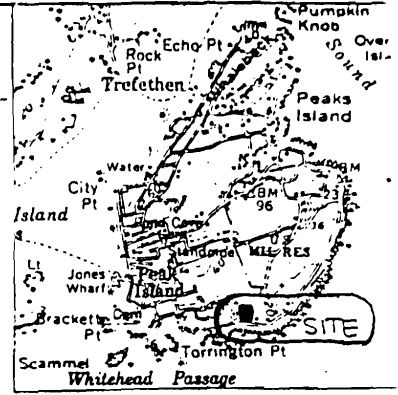
Owners Name

PORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T,2,3&4

RALPH ASHMORE

SITE PLAN

Scale 1" = 50 FL



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole _____ Test Pit Boring

_____ * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10	GRAVELLY LOAM		RED BROWN	
15				
20		LOOSE		NONE
25				
30	GRAVEL		LIGHT BROWN	
35				
40				FEW
45				
50	BEDROCK			

Soil Profile: 4	Classification: AIII Condition	Slope: 8%	Limiting Factor: 30	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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Observation Hole 2 Test Pit Boring

_____ * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10				
15		SLIGHTLY FRIABLE	RED BROWN	NONE
20				
25	SILTY SAND		BEIGE	
30				
35		FRIABLE	LIGHT RED BROWN	FEW
40				
45	BEDROCK			

Soil Profile: 4	Classification: AIII Condition	Slope: 8%	Limiting Factor: 30	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

City or Municipality: **PORTLAND - PEAKS ISLAND**

Street: **3ND ST @ 5TH STREET**

Subdivision/Lot #: **TAXMAP 95 BLOCK T LOTS 1,2,3,4**

PROPERTY OWNERS NAME

Last: **ASHMORE** First: **RALPH**

Applicant Name: **RALPH ASHMORE**

Mailing Address of Owner/Applicant (if different): **200 SEASHORE AVE
PEAKS ISLAND, ME 04109**

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

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 be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature: *Don Reinhardt* Date Approv.: **5-3-99**

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <p>1. <input checked="" type="checkbox"/> NEW SYSTEM</p> <p>2. <input type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> SEASONAL CONVERSION</p> <p>5. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p>THIS APPLICATION REQUIRES:</p> <p>1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p> <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>3. <input type="checkbox"/> Requiring Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval</p>	<p>INSTALLATION IS:</p> <p>COMPLETE SYSTEM</p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+2000 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <p>1. <input type="checkbox"/> BED 2. <input type="checkbox"/> TRENCH</p> <p>3. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____</p>	<p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER _____ SPECIFY _____</p>	<p>TYPE OF WATER SUPPLY</p> <p>DRILLED WELL SEALED TO 80' DEEP</p>
<p>SIZE OF PROPERTY 38,864 SF</p> <p>ZONING IR 1</p>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input checked="" type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <u>1000</u> GALS</p>	<p>WATER CONSERVATION</p> <p>1. <input type="checkbox"/> NONE</p> <p>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY: _____</p>	<p>PUMPING</p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED</p> <p>DOSE: _____ GALS</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p>3 BEDROOM</p>
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <p>PROFILE: <u>4</u> CONDITION: <u>C</u></p> <p>DEPTH TO LIMITING FACTOR: <u>19"</u></p>	<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input checked="" type="checkbox"/> MEDIUM</p> <p>3. <input type="checkbox"/> MEDIUM-LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRALARGE</p>	<p>DISPOSAL AREA TYPE/SIZE</p> <p>1. <input type="checkbox"/> BED _____ Sq. Ft.</p> <p>2. <input checked="" type="checkbox"/> CHAMBER <u>704</u> Sq. Ft. <input type="checkbox"/> REGULAR L: H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	

DESIGN FLOW: **270** (GALLONS/DAY)

SITE EVALUATOR STATEMENT + USED 16 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On JUNE 23, 1999 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

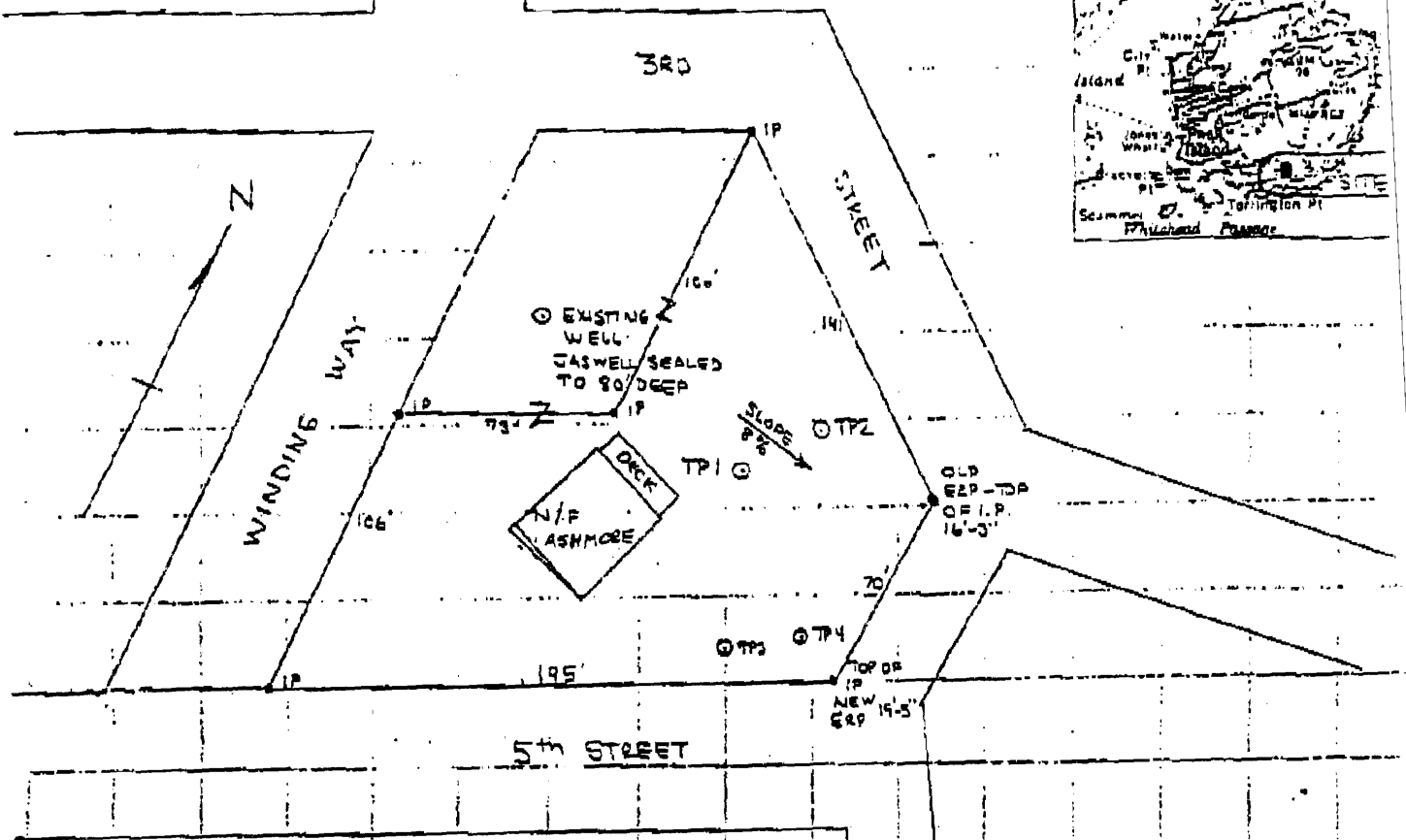
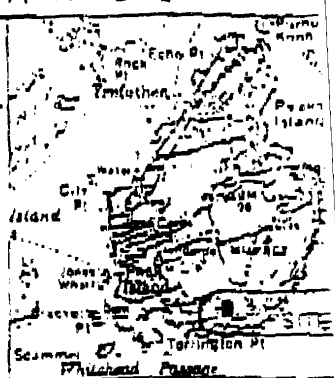
Site Evaluator Signature: William B. Goodwin 0003/4814 4/28/99 "As Built"

NOTE: THESE NEW 1100-200 PUMPS ARE A MODIFICATION OF THE ORIGINAL DESIGN IN 1999 AND WERE PREPARED AND DESIGNED BY [Name]

as Built Plan

Client, Road, Subdivision
 From, City, Platation
 HORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 25-T-2, 3 & 4 RALPH ASHMORE
 Owners Name

SITE PLAN
 Scale 1" = 50' FL



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

Observation Hole 1 Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
8	GRAVELLY LOAM		RED BROWN	
16				NONE
24	LOOSE			
32	GRAVEL		LIGHT BROWN	
40				FEW
48	BEDROCK			

Soil Classification: AIII
 Slope: 8
 Limiting Factor: 30

Observation Hole 2 Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
8				
16		SLIGHTLY FRIABLE	RED BROWN	NONE
24	SILTY SAND		BEIGE	
32		FRIABLE	LIGHT RED BROWN	FEW
40	BEDROCK			

Soil Classification: AIII
 Slope: 8
 Limiting Factor: 30

William B. Goodwin 003/4214

4/20/99 "As Built"

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation PORTLAND PEAK ISLAND	Street, Road, Subdivision 3RD ST @ 5TH ST 85-T-1,2,3,4	Owner Name R. ALPH ASHMORE
SITE PLAN		SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)
Scale 1" = _____ Ft.		

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

Observation Hole 3 Test Pit Boring
 2" FOREST PEAT - Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
2				
4	SANDY LOAM	LOOSE	RED BROWN	NONE
6				
8				
10	(SOME BROKEN SHALE)			
12				
14				
16				
18	SANDY LOAM WITH BROKEN SHALE		LIGHT BROWN	COMMON
20				
22				
24				
26				
28				
30				
32				
34				
36				
38				
40				
42				
44				
46				
48				
50				
52				
54				
56				
58				
60				

Soil <u>4</u>	Classification <u>C</u>	Slope <u>2</u>	Limiting Factor <u>19</u>	<input checked="" type="checkbox"/> Organic Matter <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Surface
---------------	-------------------------	----------------	---------------------------	--

Observation Hole 4 Test Pit Boring
 1/2" FOREST PEAT - Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
2				
4				
6	SANDY LOAM	LOOSE	RED BROWN	NONE
8				
10	SOME BROKEN SHALE			
12				
14				
16				
18				
20				
22				
24				
26				
28				
30				
32				
34				
36				
38				
40				
42				
44				
46				
48				
50				
52				
54				
56				
58				
60				

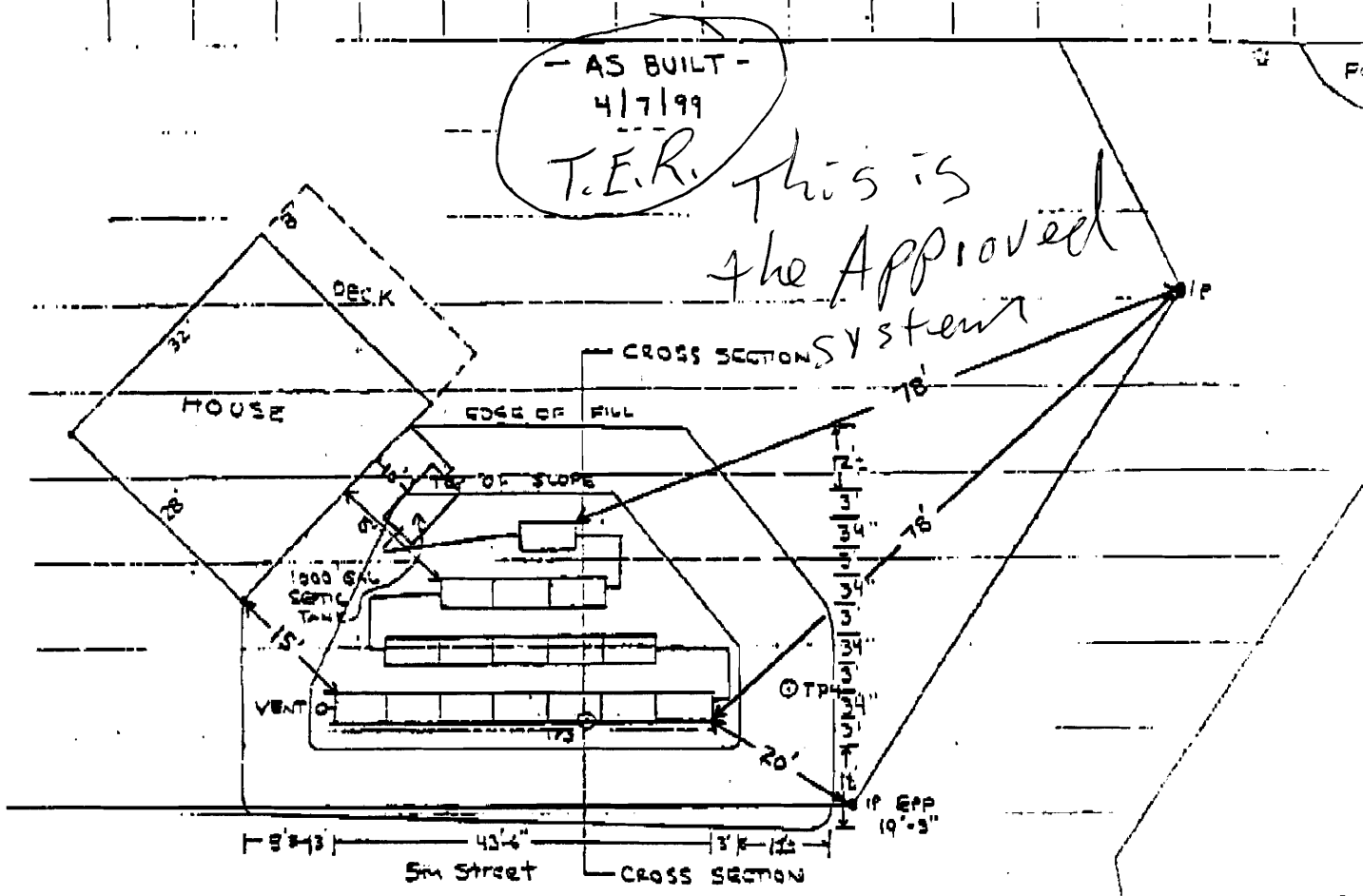
Soil <u>4</u>	Classification <u>AIII</u>	Slope <u>2</u>	Limiting Factor <u>16</u>	<input checked="" type="checkbox"/> Organic Matter <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Surface
---------------	----------------------------	----------------	---------------------------	--

William B. Jordan

4/28/99 'As Built'

Town/City/Platation: PORTLAND - PEAKS ISLAND 3RD ST @ 3TH ST
 Street, Route, Subdivision: 85-T-1,2,3,4
 Owner's Name: RALPH ASHMORE

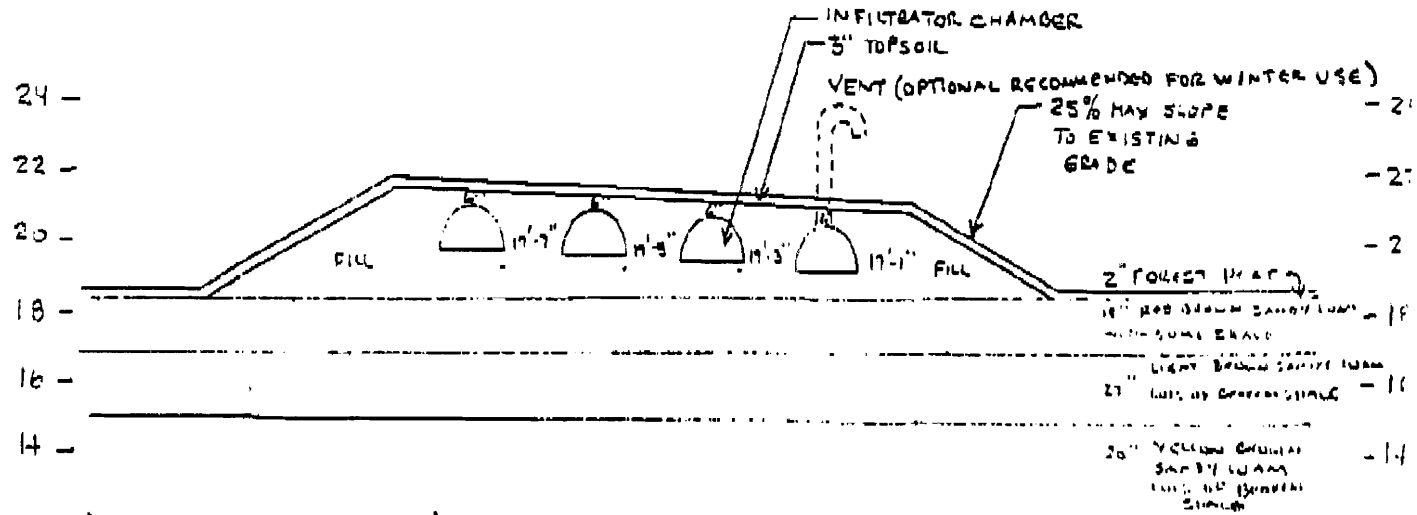
SUBSURFACE WASTEWATER DISPOSAL PLAN Scale 1" = 20' F.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT
Depth of Fill (Upslope)	23'	Reference Elevation is	19'-5"	
Depth of Fill (Downslope)	24'	Bottom of Disposal Area	SEE CROSS SECTION	
		Top of Distribution Lines or Chambers	" " " "	

DISPOSAL AREA CROSS SECTION

Scale:
 Vertical: 1 inch = 10' F.
 Horizontal: 1 inch = 5' F.



William B. Goodwin

0007/4511

4/20/99 "As Built"

ASHMORE REALTY
• ISLAND SPECIALISTS •



Fax Transmission

TO: Tom Reinsborough

FAX: 874 8716

DATE: 4-30-99

RE: Ashmore

ENCLOSURES; NO. PAGES (incl. this cover sheet):

COMMENTS:

ASHMORE REALTY, SERVING THE ISLANDS OF CASCO BAY

65 COMMERCIAL ST., PORTLAND, ME 04101 WELCH ST., PEAKS ISLAND, ME 04108

PHONE: 207-772-6992 FAX: 207-775-0636

PLEASE CALL IMMEDIATELY IF YOU DO NOT RECEIVE ALL PAGES OR IF DOCUMENTS ARE NOT LEGIBLE

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS	
Town Or Plantation	
Street	
Subdivision Lot #	
PROPERTY OWNERS NAME	
Last:	First:
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

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.

Rush 1/18/99
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Tom Reimberg 5-3-99
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> NEW SYSTEM 2. <input type="checkbox"/> REPLACEMENT SYSTEM 3. <input type="checkbox"/> EXPANDED SYSTEM 4. <input type="checkbox"/> SEASONAL CONVERSION 5. <input type="checkbox"/> EXPERIMENTAL SYSTEM 	<p>THIS APPLICATION REQUIRES:</p> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED 2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form 3. <input type="checkbox"/> Requiring Local Plumbing Inspector Approval 4. <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval 	<p>INSTALLATION IS:</p> <p>COMPLETE SYSTEM</p> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM 2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet) 3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd) <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <ol style="list-style-type: none"> 4. <input type="checkbox"/> TREATMENT TANK (ONLY) 5. <input type="checkbox"/> HOLDING TANK 6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY) 7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY) 8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY) 9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM
<p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> BED 3. <input type="checkbox"/> TRENCH 2. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____ 	<p>DISPOSAL SYSTEM TO SERVE:</p> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER _____ SPECIFY _____ 	<p>TYPE OF WATER SUPPLY</p> <p><u>SEALED TO 30' DEEP</u></p>
<p>SIZE OF PROPERTY</p> <p>_____</p>	<p>ZONING</p> <p>_____</p>	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input checked="" type="checkbox"/> Low Profile 2. <input type="checkbox"/> AEROBIC <p>SIZE: _____ GALS.</p>	<p>WATER CONSERVATION</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> NONE 2. <input type="checkbox"/> LOW VOLUME TOILET 3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM 4. <input type="checkbox"/> ALTERNATIVE TOILET <p>SPECIFY: _____</p>	<p>PUMPING</p> <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> NOT REQUIRED 2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION) 3. <input type="checkbox"/> REQUIRED <p>DOSE: _____ GALS.</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p>_____</p> <p>DESIGN FLOW: _____ (GALLONS/DAY)</p>				
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">PROFILE</td> <td style="width: 50%;">CONDITION</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table> <p>DEPTH TO LIMITING FACTOR: _____</p>	PROFILE	CONDITION		_____	_____	<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> SMALL 2. <input checked="" type="checkbox"/> MEDIUM 3. <input type="checkbox"/> MEDIUM-LARGE 4. <input type="checkbox"/> LARGE 5. <input type="checkbox"/> EXTRA LARGE 	<p>DISPOSAL AREA TYPE/SIZE</p> <ol style="list-style-type: none"> 1. <input type="checkbox"/> BED _____ Sq. Ft. 2. <input checked="" type="checkbox"/> CHAMBER _____ Sq. Ft. <input type="checkbox"/> REGULAR <input type="checkbox"/> H-20 3. <input type="checkbox"/> TRENCH _____ Linear Ft. 4. <input type="checkbox"/> OTHER: _____
PROFILE	CONDITION						
_____	_____						

SITE EVALUATOR STATEMENT

(SITE EVALUATION WAIVED BY LOCAL OPTION)

On _____ (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin 1/16/99
Site Evaluator Signature SE# Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

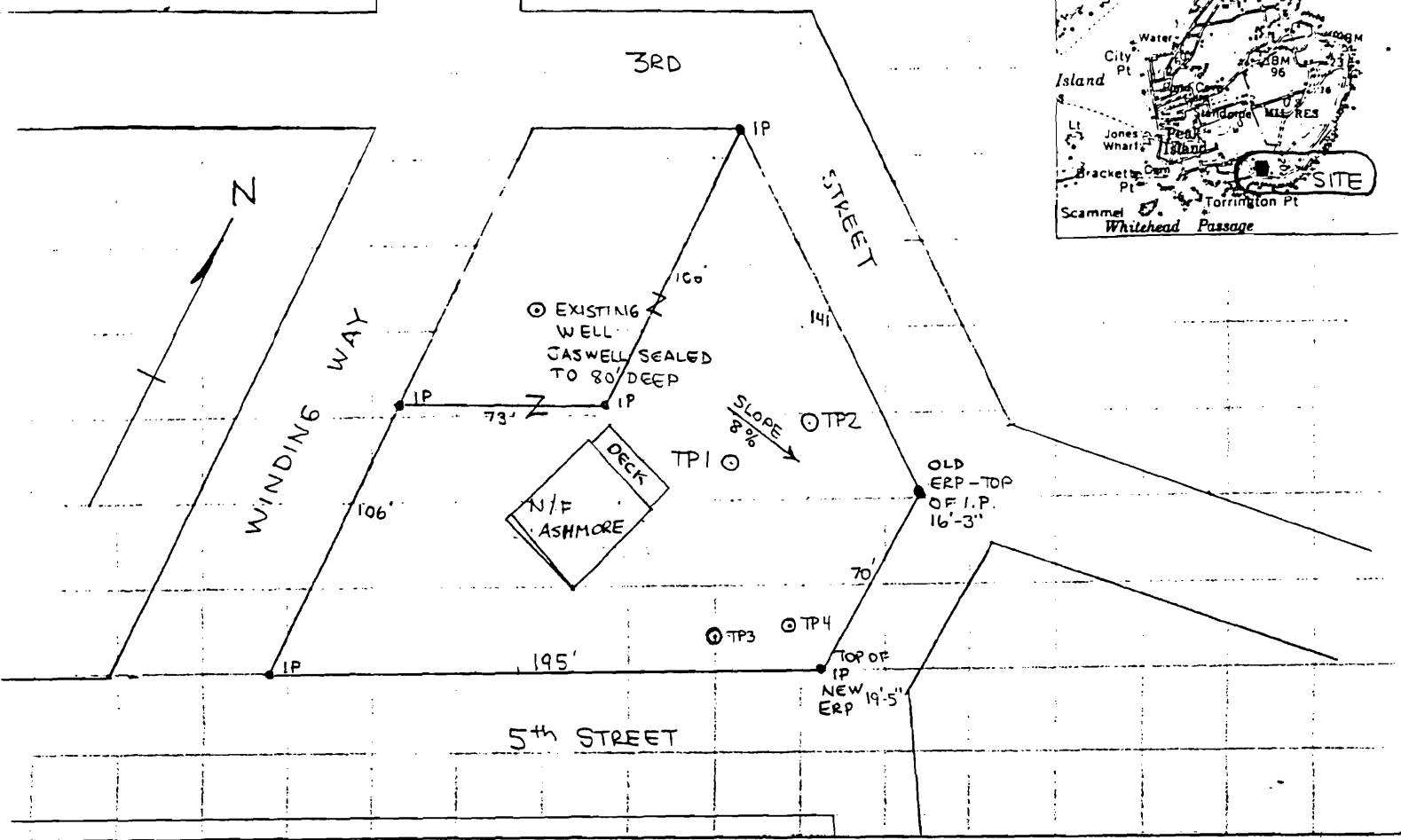
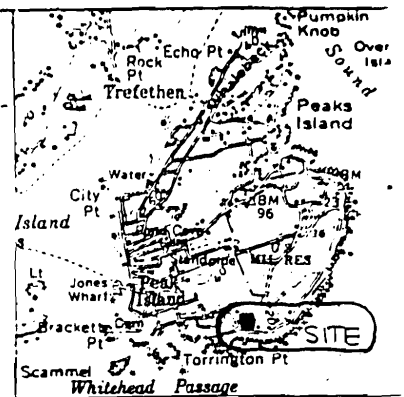
Department of Human Services
Division of Health Engineering

Town, City, Plantation
PORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T-1,2,3&4

Owners Name
RALPH ASHMORE

SITE PLAN

Scale 1" = 50 Ft



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

Observation Hole _____ Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10	GRAVELLY LOAM		RED BROWN	
15				
20		LOOSE		NONE
25	GRAVEL		LIGHT BROWN	
30				
35				FEW
40	BEDROCK			
45				
50				

Soil 4 Classification AIII Slope 8% Limiting Factor 30 Ground Water Restrictive Layer Bedrock

Observation Hole 2 Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10				
15		SLIGHTLY FRIABLE	RED BROWN	NONE
20	SILTY SAND		BEIGE	
25				
30		FRIABLE	LIGHT RED BROWN	FEW
35				
40	BEDROCK			
45				
50				

Soil 4 Classification AIII Slope 8% Limiting Factor 30 Ground Water Restrictive Layer Bedrock

William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: **PORTLAND PEAKS ISLAND** Street, Road, Subdivision: **3RD ST @ 5TH ST 85-T-1,2,3,4** Owners Name: **RALPH ASHMORE**

SITE PLAN

Scale 1" = _____ Ft.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

21 January 1999 @ 3^{PM}
 Talked with Mr. Goodwin about possible our concern on ledge at the location of the septic tank and his first fixer for also the location of the pond.
 He stated that the ledge must make of fast in that area because that there is no ledge there - Also the size of the pond has increase in size since the original equal. because somebody has dam the pond outlet.
 [Signature] *LPI 124

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 3 Test Pit Boring
 2" FOREST PEAT " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0-6	SANDY LOAM	LOOSE	RED BROWN	NONE
6-15	(SOME BROKEN SHALE)			
15-20				
20-30	SANDY LOAM WITH BROKEN SHALE		LIGHT BROWN	COMMON
30-40				
40-50		SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile: 4 Classification: C Slope: 2 % Limiting Factor: 19
 Ground Water Restrictive Layer Bedrock

Observation Hole 4 Test Pit Boring
 1 1/2" FOREST PEAT " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0-6	SANDY LOAM	LOOSE	RED BROWN	NONE
6-15	SOME BROKEN SHALE			
15-20				
20-30			LIGHT BROWN	COMMON
30-40				
40-50		SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile: 4 Classification: AIII Slope: 2 % Limiting Factor: 18
 Ground Water Restrictive Layer Bedrock

William B. Goodwin
 Site Evaluator or Professional Engineer's Signature

0003/4814
 SE# / PE#

1/16/99
 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

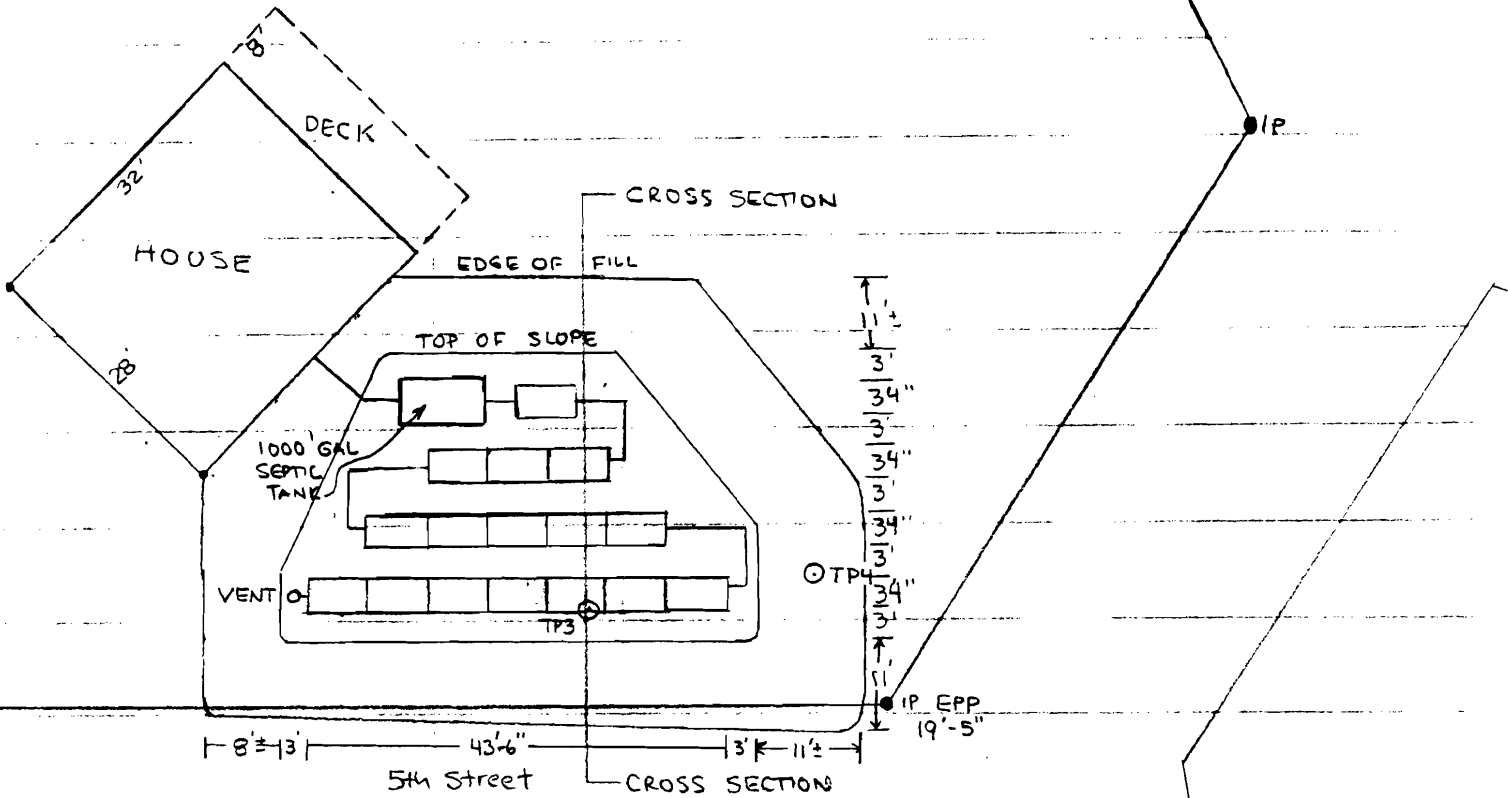
PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST

85-T-1,2,3,4

RALPH ASHMORE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL.

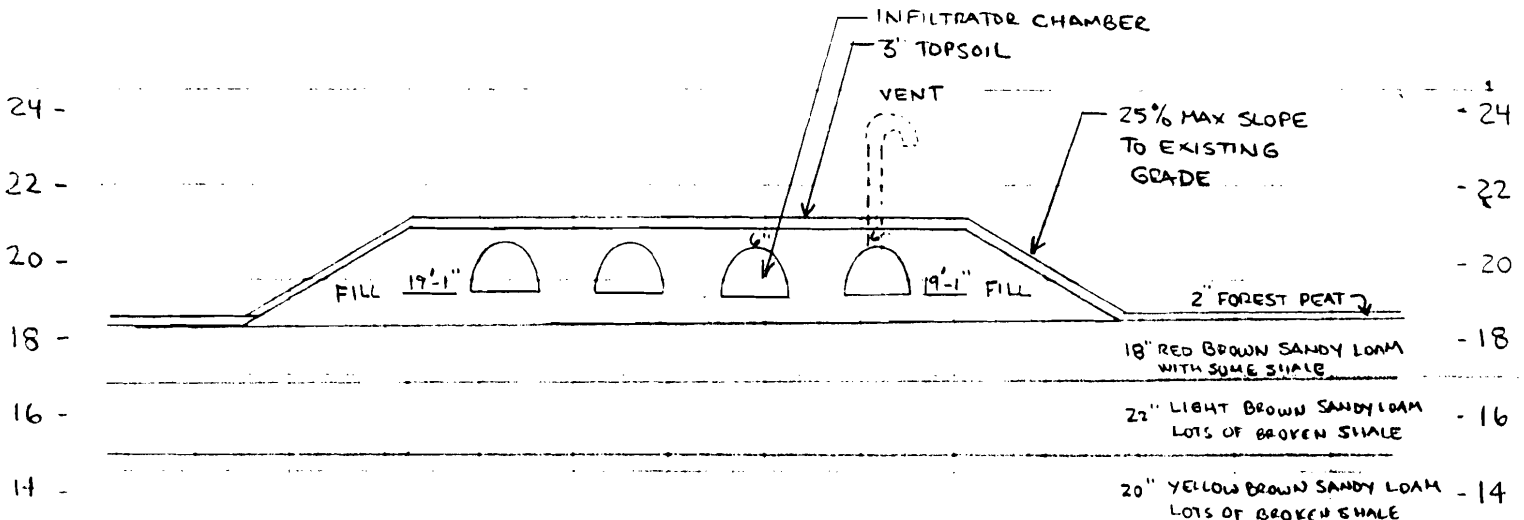


FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>23"</u>	Reference Elevation is <u>19'-5"</u>	TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT
Depth of Fill (Downslope) <u>34"</u>	Bottom of Disposal Area <u>SEE CROSS SECTION</u>	
	Top of Distribution Lines or Chambers " " "	

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 10 FL.
Horizontal: 1 inch = 5 FL.



William B Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # / PE #

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation _____
 Street _____
 Subdivision Lot # _____

PROPERTY OWNERS NAME

Last: _____ First: _____

Applicant Name: _____

Mailing Address of Owner/Applicant (If Different) _____

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

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] 1/18/99
 Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

[Signature] 5-3-99
 Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requiring Local Plumbing Inspector Approval
- Requires State and Local Plumbing Inspector Approval

INSTALLATION IS:

COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY

SCALED TO 80' DEEP

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER _____

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

SIZE OF PROPERTY _____

ZONING _____

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: _____ GALS.

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

DESIGN FLOW: _____ (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE _____ CONDITION _____

DEPTH TO LIMITING FACTOR: _____

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq. Ft.
- CHAMBER _____ Sq. Ft.
 REGULAR H-20
- TRENCH _____ Linear Ft.
- OTHER: _____

SITE EVALUATOR STATEMENT

On _____ (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin _____ 1/16/99
 Site Evaluator Signature SE# Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

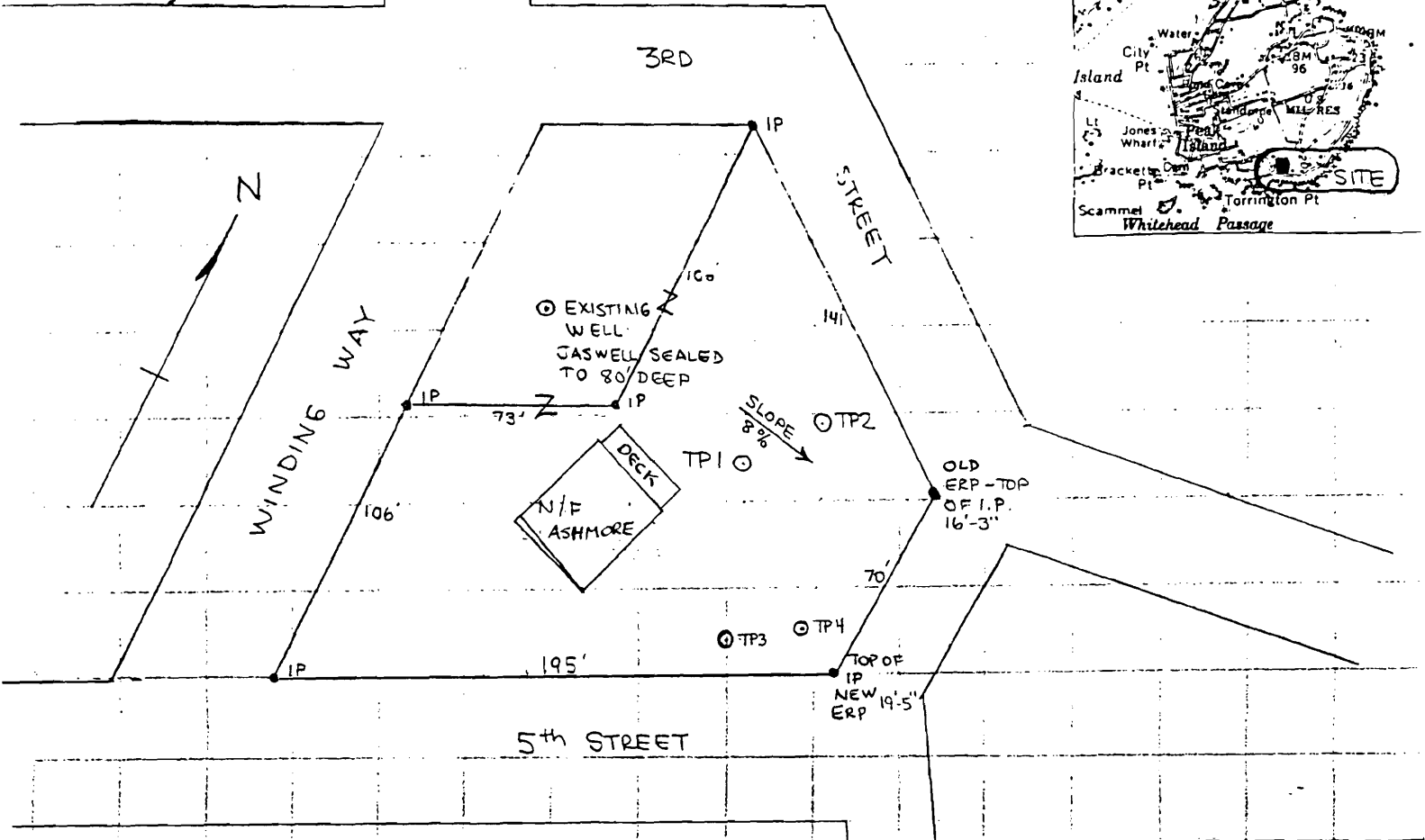
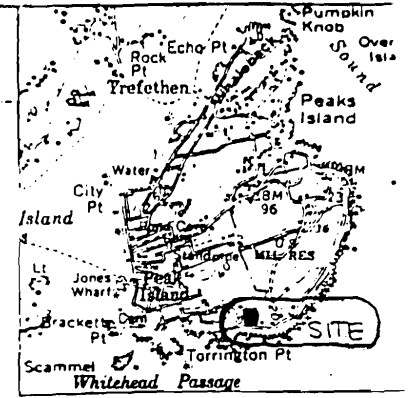
Department of Human Services
Division of Health Engineering

Town, City, Plantation
PORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T-12,3&4

Owners Name
RALPH ASHMORE

SITE PLAN

Scale 1" = 50 FL



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

Observation Hole _____ Test Pit Boring

_____ * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0 - 6	LOAM		DARK BROWN	
6 - 10	GRAVELLY LOAM		RED BROWN	
10 - 15				
15 - 20		LOOSE		NONE
20 - 30	GRAVEL		LIGHT BROWN	
30 - 40				FEW
40 - 50	BEDROCK			

Soil Profile: 4 Classification: AIII Slope: 8 % Limiting Factor: 30

Ground Water
 Restrictive Layer
 Bedrock

Observation Hole 2 Test Pit Boring

_____ * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0 - 6	LOAM		DARK BROWN	
6 - 10				
10 - 15		SLIGHTLY FRIABLE	RED BROWN	NONE
15 - 20				
20 - 30	SILTY SAND		BEIGE	
30 - 40				
40 - 50		FRIABLE	LIGHT RED BROWN	FEW
40 - 50	BEDROCK			

Soil Profile: 4 Classification: AIII Slope: 8 % Limiting Factor: 30

Ground Water
 Restrictive Layer
 Bedrock

William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND PEAKS ISLAND	Street, Road, Subdivision 3RD ST @ 5TH ST 85-T-1,2,3,4	Owners Name RALPH ASHMORE
SITE PLAN Scale 1" = _____ Ft.		SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 3 Test Pit Boring
2" FOREST PEAT " Depth of Organic Horizon Above Mineral Soil

Observation Hole 4 Test Pit Boring
1/2" FOREST PEAT " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6	SANDY LOAM	LOOSE	RED BROWN	NONE
10	(SOME BROKEN SHALE)			
20	SANDY LOAM WITH BROKEN SHALE		LIGHT BROWN	COMMON
30				
40		SLIGHTLY FRIABLE	YELLOW BROWN	
50				

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6	SANDY LOAM	LOOSE	RED BROWN	NONE
10	SOME BROKEN SHALE			
20			LIGHT BROWN	COMMON
30				
40		SLIGHTLY FRIABLE	YELLOW BROWN	
50				

Soil Profile <u>4</u>	Classification Condition <u>C</u>	Slope <u>2</u> %	Limiting Factor <u>19</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
--------------------------	--------------------------------------	---------------------	------------------------------	--

Soil Profile <u>4</u>	Classification Condition <u>AIII</u>	Slope <u>2</u> %	Limiting Factor <u>18</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
--------------------------	---	---------------------	------------------------------	--

William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

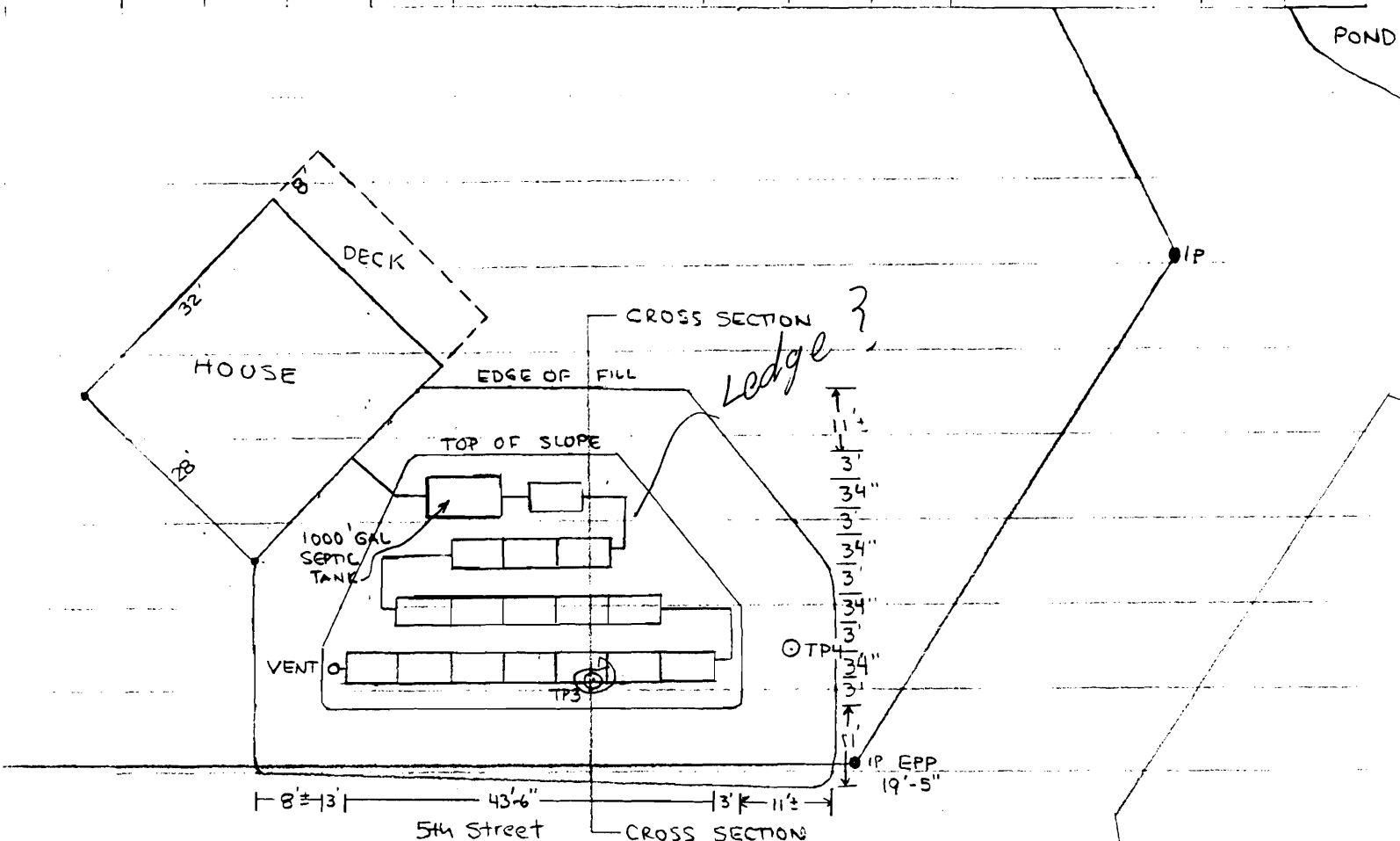
PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST

85-T-1,2,3,4

RALPH ASHMORE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL.

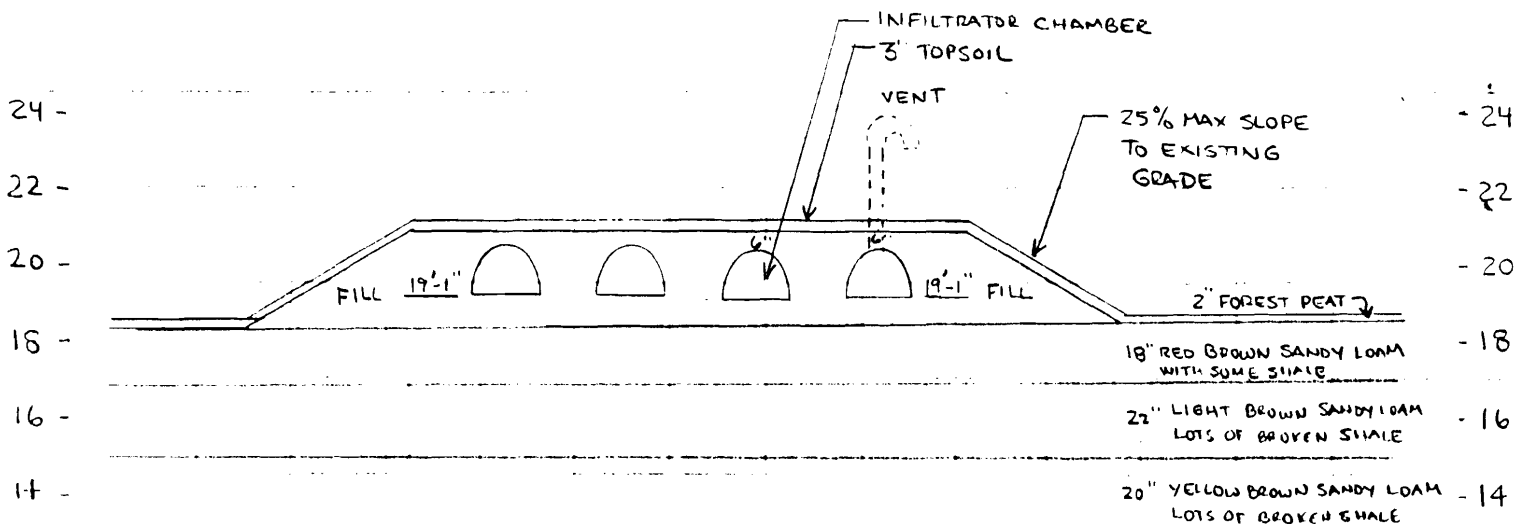


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	23"	Reference Elevation is	19'-5"	TOP OF IRON PIPE AT MOST	
Depth of Fill (Downslope)	34"	Bottom of Disposal Area	SEE CROSS SECTION	SOUTHEAST CORNER OF LOT	
		Top of Distribution Lines or Chambers	" " "		

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 10 FT.
Horizontal: 1 inch = 5 FT.



William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # / PE #

1/16/99
Date

Page 3 of 3
HHE-200 Rev. 4/83

085-T-001

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: PORTLAND PEAKS ISLAND

Street: 3RD ST @ 5TH STREET
Subdivision Lot #: TAX MAP 85 BLOCK T LOTS 1,2,3,4

PROPERTY OWNERS NAME

ASHMORE RALPH

Last: First:

Applicant Name: RALPH ASHMORE

Mailing Address of Owner/Applicant (if Different): 200 SEASHORE AVE
PEAKS ISLAND MAINE 04105

PORTLAND 6505 TOWN COPY

Date Permit Issued: 6/11/98 \$ 100 FEE Double Fee Charged

L.R.I. # 0129

PERMIT ISSUED

Signature

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 6/11/98
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Signature
Local Plumbing Inspector Signature Date Approved 22/Jan/99

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
- Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: _____

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

TYPE OF WATER SUPPLY

Private - well to be driven point

SIZE OF PROPERTY

38,864 SF

ZONING

IR1

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

3 BEDROOM

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE 4 | CONDITION AIII

DEPTH TO LIMITING FACTOR 18

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRALARGE

DISPOSAL AREA TYPE SIZE

- BED _____ Sq. Ft.
- CHAMBER 704* Sq. Ft. REGULAR H-20
- TRENCH _____ Linear Ft.
- OTHER: _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT * USED 16 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION SITE EVALUATION WAIVED BY LOCAL OPTION

On JUNE 23, 1989 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin 0003/4814 4/24/98
Site Evaluator or Professional Engineer's Signature SE#/PE# Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option. NOTE: THESE NEW HHE-200 FORMS ARE A MODIFICATION OF THE ORIGINAL DESIGN PERMITS BY THE STATE AND UNDER PROGRAM ADMINISTRATION BY NORMAN THOMAS, William N. Goodwin 4/22/98 HHE-200 Rev. 4/83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

PORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T-1,2,3 & 4

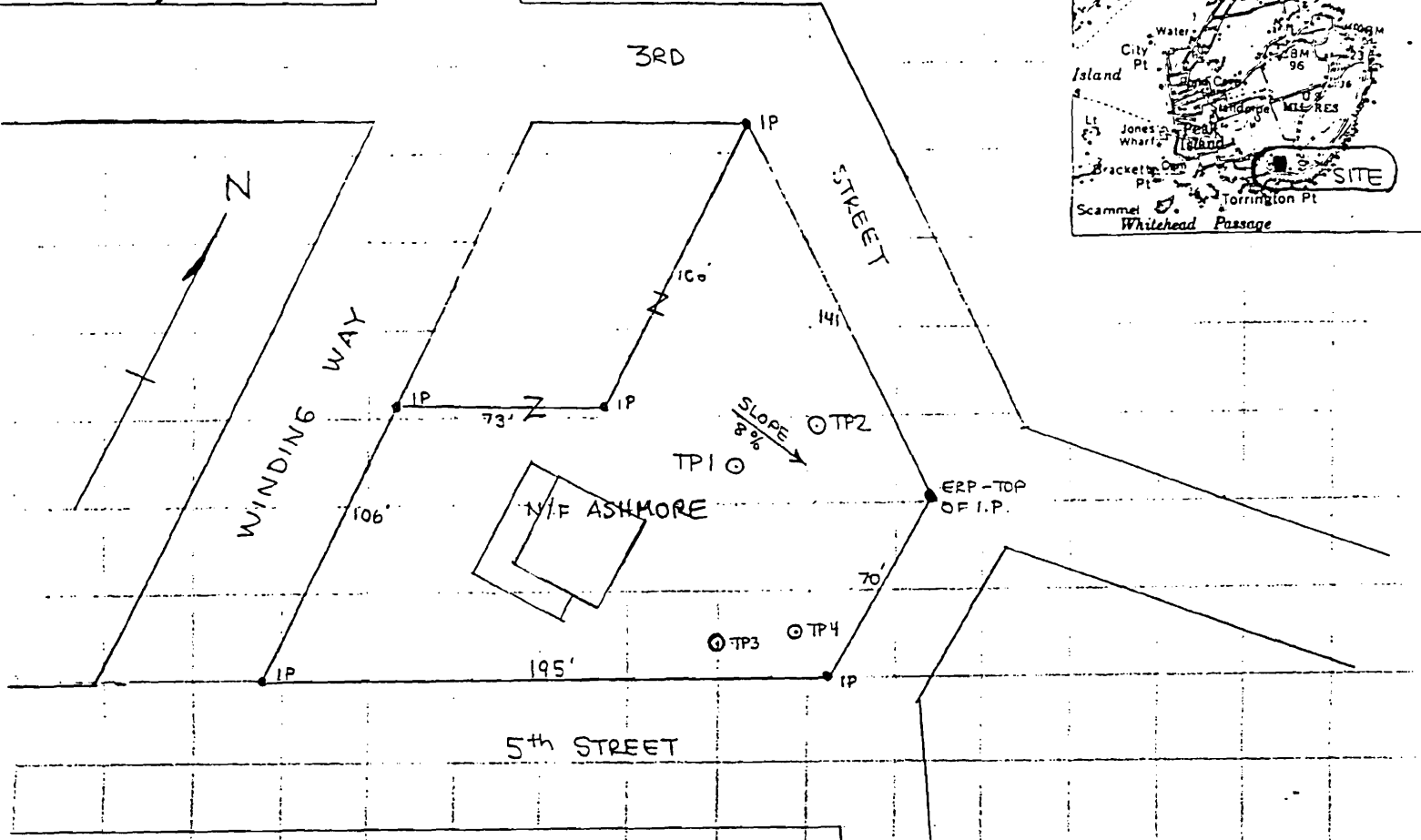
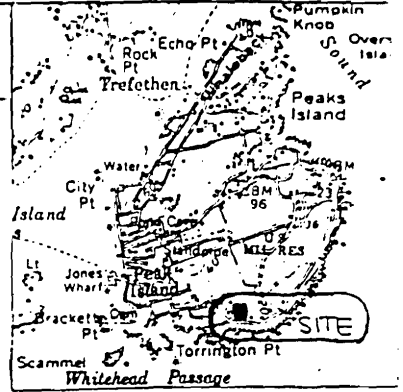
Street, Road, Subdivision

Owners Name

RALPH ASHMORE

SITE PLAN

Scale 1" = 50 FL



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

Observation Hole 1 Test Pit Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10	GRAVELLY LOAM		RED BROWN	
15				NONE
20		LOOSE		
25	GRAVEL		LIGHT BROWN	
30				FEW
40	REDROCK			
50				

Soil Profile	Classification Condition	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Reseptive Layer <input type="checkbox"/> Bedrock
4	AIII	8 %	30	

Observation Hole 2 Test Pit Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAM		DARK BROWN	
6				
10		SLIGHTLY FRIABLE	RED BROWN	NONE
15				
20	SILTY SAND		BEIGE	
25				
30		FRIABLE	LIGHT RED BROWN	FEW
40	BEDROCK			
50				

Soil Profile	Classification Condition	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Reseptive Layer <input type="checkbox"/> Bedrock
4	AIII	8 %	30	

William B. Goodwin 0003/4814
Site Evaluator or Representative of

4/24/98

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: **PORTLAND PEAKS ISLAND** Street, Road, Subdivision: **3RD ST @ 5TH ST 85-T-1,2,3,4** Owners Name: **RALPH ASHMORE**

SITE PLAN

Scale 1" = _____ Ft.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

see revised HAE 200

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

Observation Hole 3 Test Pit Boring

2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0-6	SANDY LOAM	LOOSE	RED BROWN	NONE
6-15	(SOME BROKEN SHALE)			
15-20				
20-30	SANDY LOAM WITH BROKEN SHALE		LIGHT BROWN	COMMON
30-40				
40-50		SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile: <u>4</u>	Classification Condition: <u>C</u>	Slope: <u>2</u> %	Limiting Factor: <u>19</u>	<input checked="" type="checkbox"/> Ground Water
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole 4 Test Pit Boring

1/2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0-6	SANDY LOAM	LOOSE	RED BROWN	NONE
6-15	SOME BROKEN SHALE			
15-20				
20-30			LIGHT BROWN	COMMON
30-40				
40-50		SLIGHTLY FRIABLE	YELLOW BROWN	

Soil Profile: <u>4</u>	Classification Condition: <u>AIII</u>	Slope: <u>2</u> %	Limiting Factor: <u>18</u>	<input checked="" type="checkbox"/> Ground Water
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

William B. Goodwin

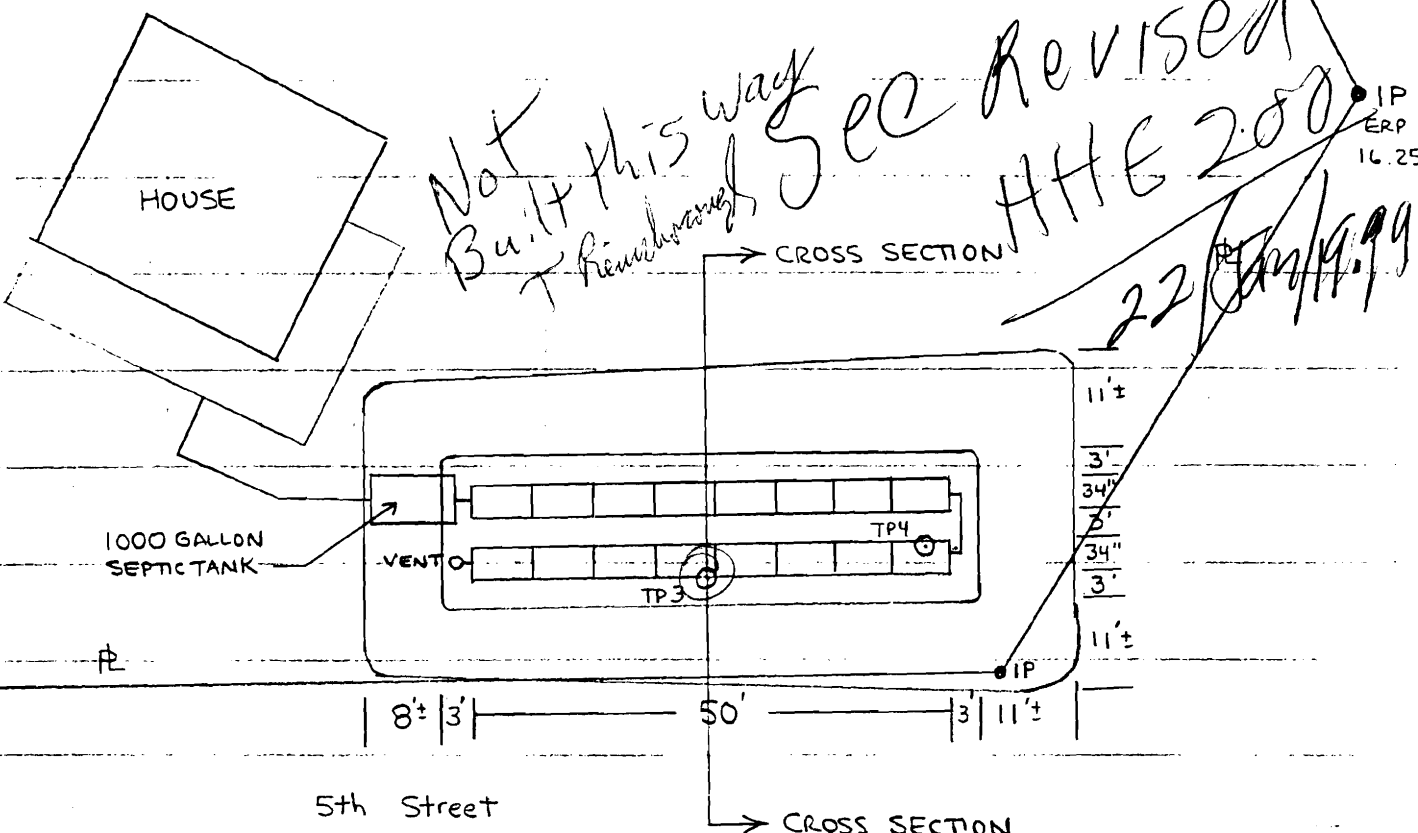
0003/4814

4/24/98

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

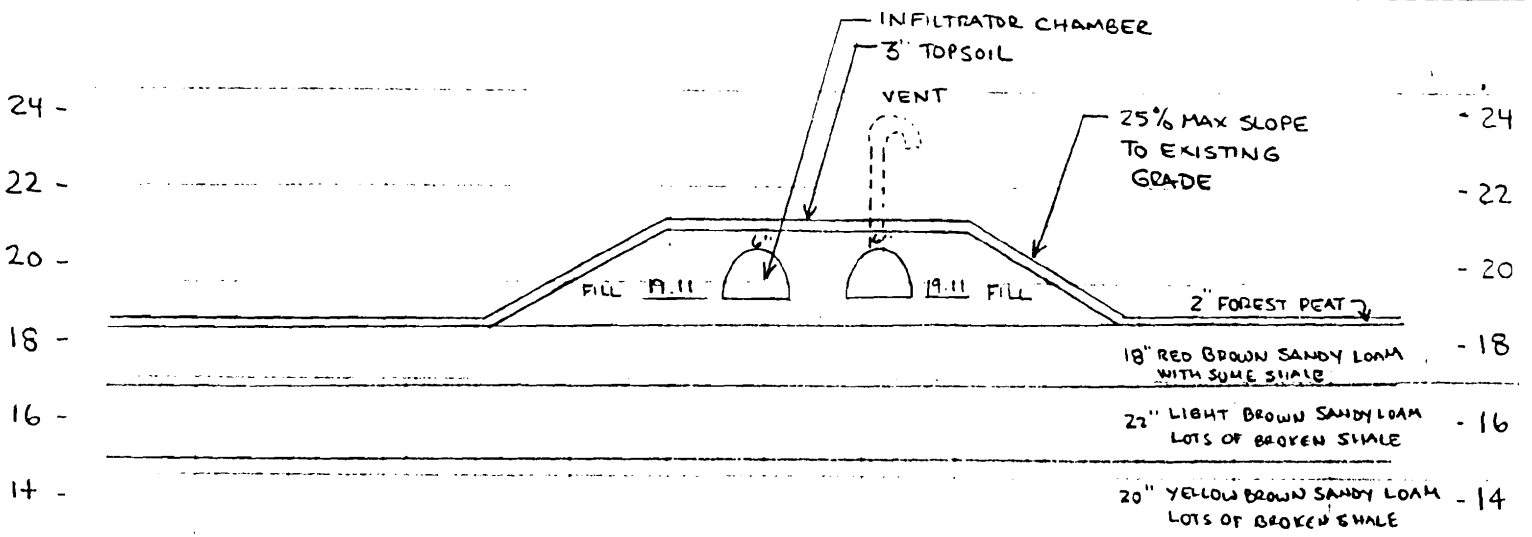
Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST	Street, Road, Subdivision 85-T-1,2,3,4	Owners Name RALPH ASHMORE
SUBSURFACE WASTEWATER DISPOSAL PLAN		Scale 1" = 20' FL.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>23"</u>	Reference Elevation is <u>16.25</u>	TOP OF IRON PIPE AT MOST EASTERLY CORNER OF LOT
Depth of Fill (Downslope) <u>34"</u>	Bottom of Disposal Area SEE CROSS SECTION	
	Top of Distribution Lines or Chambers " " "	

DISPOSAL AREA CROSS SECTION		Scale:
		Vertical: 1 inch = 10' FL.
		Horizontal: 1 inch = 5' FL.



9.5:00

Ralph Ashmore
65 Commercial St., Portland, Maine 04101
voice 207-772-6992; fax 207-775-0636
email: ashmore@nlis.net

Sam Hoffsis
City of Portland
Building Inspections
Congress St.
Portland, ME

85-T-1

Dear Sam;

Enclosed please find a revised HHE 200 application for my building project at 68 Winding Way, Peaks Island. Now that we have the benefit of the house being up, placement of the system is now more readily done. The excavator is ready to go as soon as we have your go ahead. Please contact me with approval at your earliest convenience. Call with any questions. Thank you.

Sincerely,

Ralph Ashmore

22 Jan. 1999

See my notes.

S. Hoff LPI #124

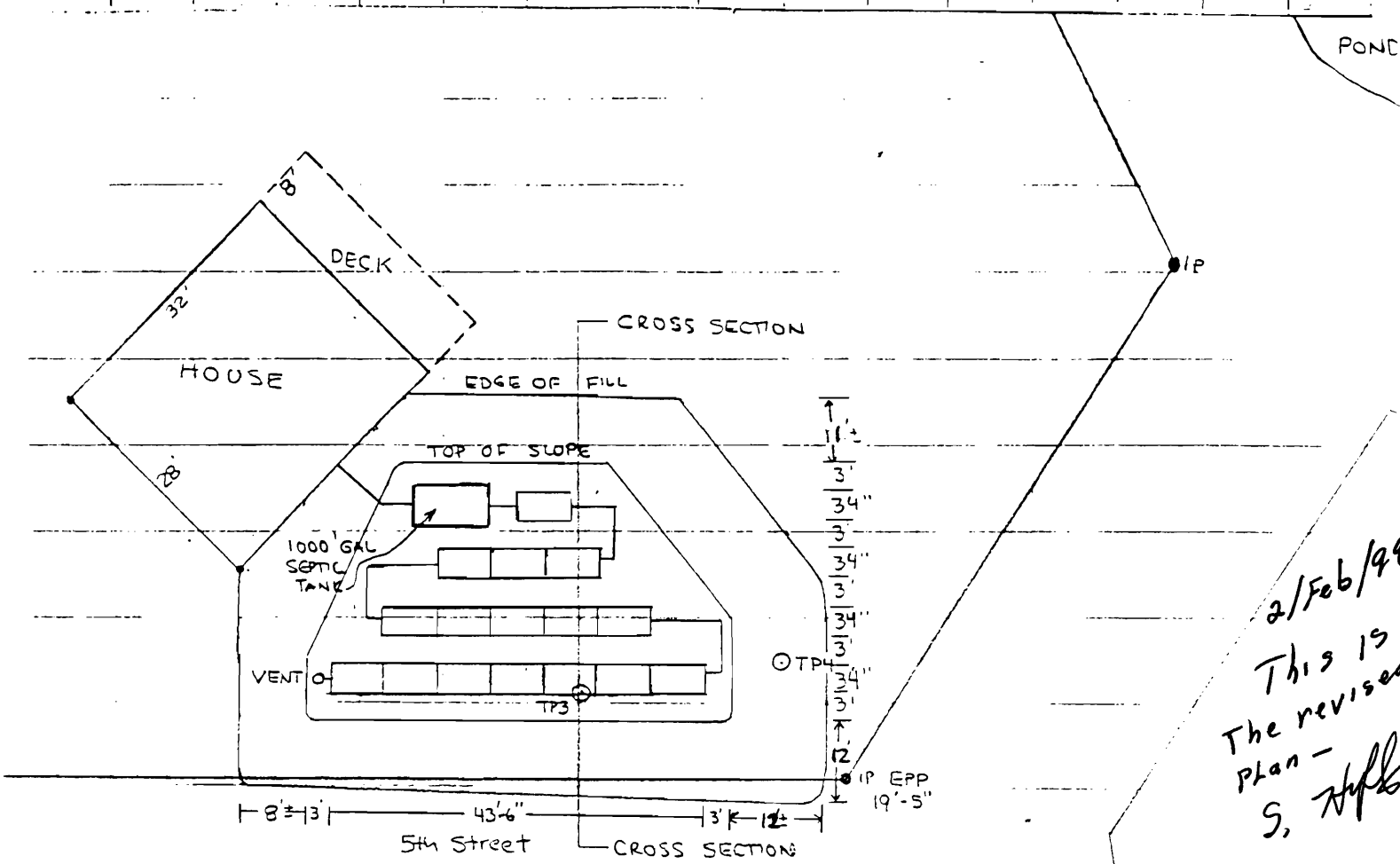
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: **PORTLAND - PEAKS ISLAND** Street, Road, Subdivision: **3RD ST @ 5TH ST 85-T-1,2,3,4** Owners Name: **RALPH ASHMORE**

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL.

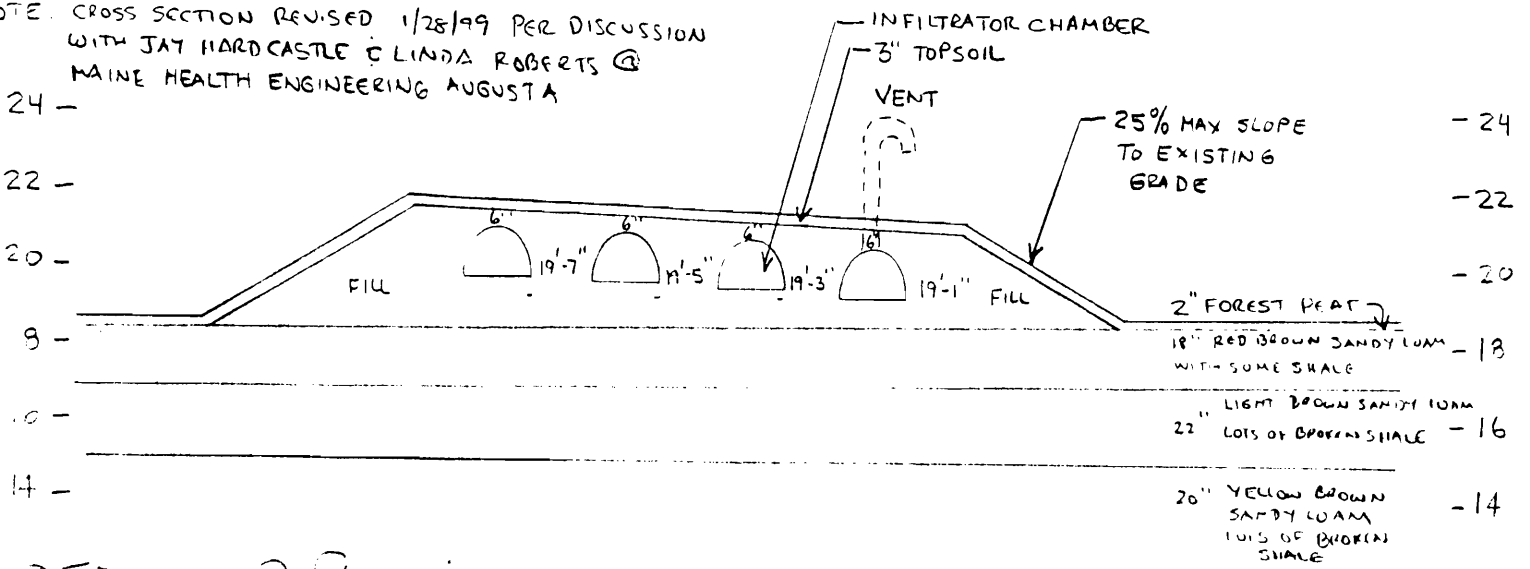


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT
Depth of Fill (Upslope)	23"	Reference Elevation is	19'-5"	
Depth of Fill (Downslope)	40"	Bottom of Disposal Area	SEE CROSS SECTION	
		Top of Distribution Lines or Chambers	" " "	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 10 FL.
Horizontal: 1 inch = 5 FL.

NOTE: CROSS SECTION REVISED 1/28/99 PER DISCUSSION WITH JAY HARDCASTLE & LINDA ROBERTS @ MAINE HEALTH ENGINEERING AUGUSTA



William B. Johnson

2003/4814

1/28/99

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS	
Town Or Plantation	PORTLAND - PEAKS ISLAND
Street	3RD ST @ 5TH STREET
Division Lot #	TAX MAP 85 BLOCK T LOTS 1,2,3,4
PROPERTY OWNERS NAME	
ASHMORE	RALPH
Last:	First:
Applicant Name:	RALPH ASHMORE
Mailing Address of Owner/Applicant (If Different)	200 SEASHORE AVE PEAKS ISLAND, ME 04108

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

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] 1/18/99
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NEW SYSTEM <input type="checkbox"/> REPLACEMENT SYSTEM <input type="checkbox"/> EXPANDED SYSTEM <input type="checkbox"/> SEASONAL CONVERSION <input type="checkbox"/> EXPERIMENTAL SYSTEM 	<p>THIS APPLICATION REQUIRES:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form <input type="checkbox"/> Requiring Local Plumbing Inspector Approval <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval 	<p>INSTALLATION IS:</p> <p>COMPLETE SYSTEM</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet) <input type="checkbox"/> ENGINEERED (+ 2000 gpd) <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <ol style="list-style-type: none"> <input type="checkbox"/> TREATMENT TANK (ONLY) <input type="checkbox"/> HOLDING TANK <input type="checkbox"/> ALTERNATIVE TOILET (ONLY) <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY) <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY) <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM
<p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> <input type="checkbox"/> BED <input type="checkbox"/> CHAMBER <input type="checkbox"/> TRENCH <input type="checkbox"/> OTHER _____ 	<p>DISPOSAL SYSTEM TO SERVE:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING <input type="checkbox"/> MODULAR OR MOBILE HOME <input type="checkbox"/> MULTIPLE FAMILY DWELLING <input type="checkbox"/> OTHER _____ SPECIFY _____ 	<p>TYPE OF WATER SUPPLY</p> <p>DRILLED WELL SEALED TO 80' DEPTH</p>
<p>SIZE OF PROPERTY 38,864 SF</p>	<p>ZONING IR1</p>	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input checked="" type="checkbox"/> Low Profile <input type="checkbox"/> AEROBIC <p>SIZE: 1000 GALS</p>	<p>WATER CONSERVATION</p> <ol style="list-style-type: none"> <input type="checkbox"/> NONE <input checked="" type="checkbox"/> LOW VOLUME TOILET <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM <input type="checkbox"/> ALTERNATIVE TOILET <p>SPECIFY: _____</p>	<p>PUMPING</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NOT REQUIRED <input type="checkbox"/> MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION) <input type="checkbox"/> REQUIRED <p>DOSE: _____ GALS</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p>3 BEDROOM</p>	
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <table style="width: 100%;"> <tr> <td>PROFILE 4</td> <td>CONDITION C</td> </tr> </table> <p>DEPTH TO LIMITING FACTOR: 19"</p>	PROFILE 4	CONDITION C		<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <ol style="list-style-type: none"> <input type="checkbox"/> SMALL <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> MEDIUM-LARGE <input type="checkbox"/> LARGE <input type="checkbox"/> EXTRALARGE
PROFILE 4	CONDITION C			

SITE EVALUATOR STATEMENT * USED 16 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION (SITE EVALUATION WAIVED BY LOCAL OPTION)

On JUNE 23, 1989 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin 0003/4814 1/16/99
Site Evaluator Signature SE# Date

Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option: Norman V. Fawcett 11/1/99
NOTE: THESE NEW HHE-200 FORMS ARE A MODIFICATION OF THE ORIGINAL DESIGN IN 1989 AND WERE PREPARED AND DESIGNED BY NORMAN T WANDEL

Town, City, Plantation

FORTLAND PEAKS ISLAND 3RD ST @ 5TH ST 85-T1,2,3&4

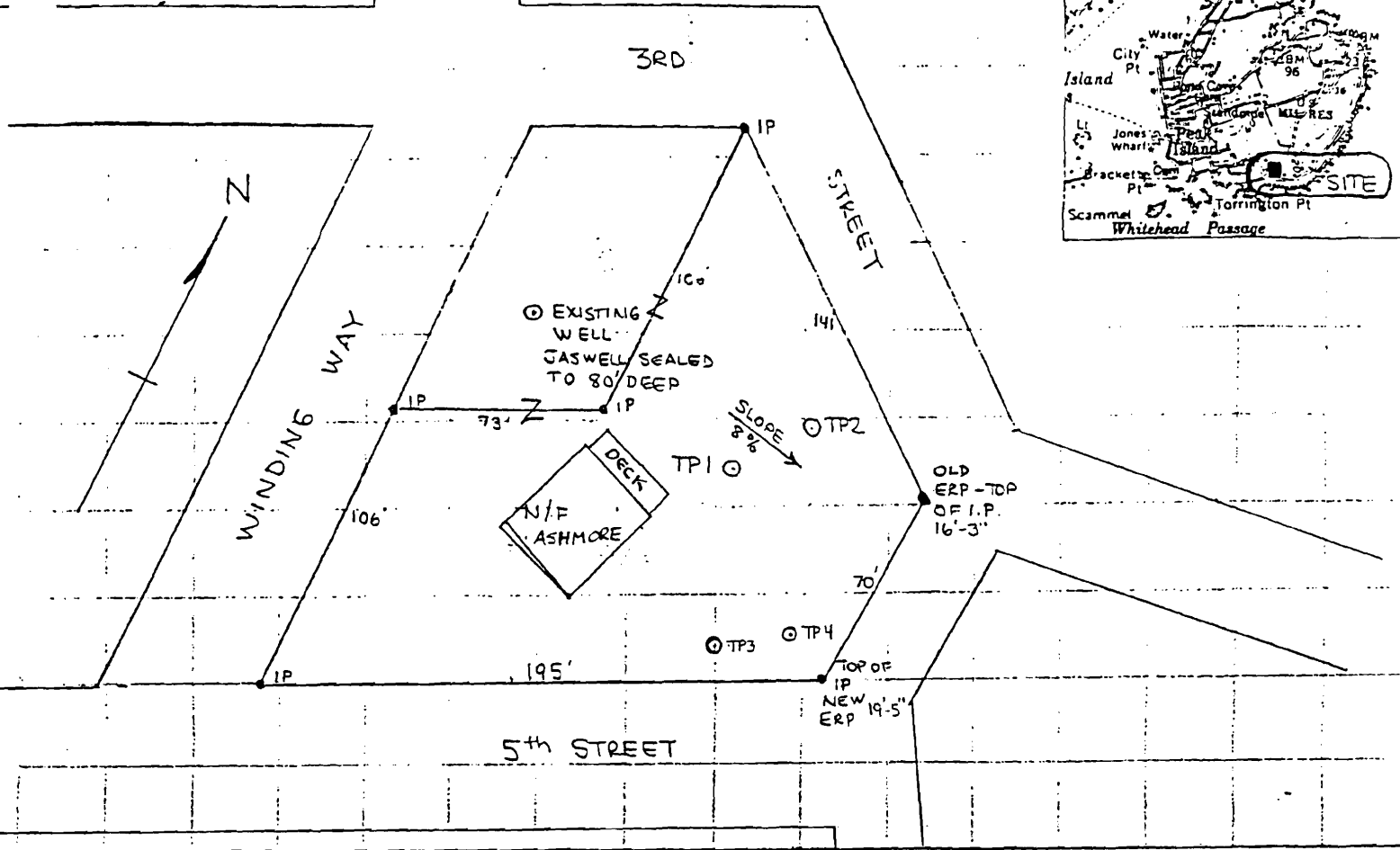
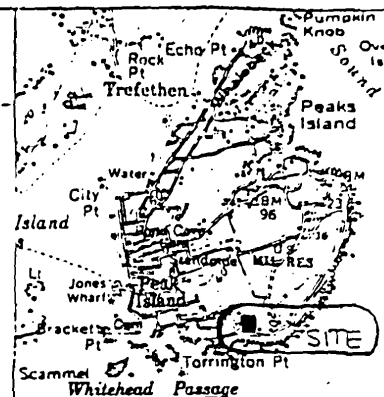
Street, Road, Subdivision

Owners Name

RALPH ASHMORE

SITE PLAN

Scale 1" = 50' FL



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

Observation Hole _____ Test Pit Boring

_____ Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM		DARK BROWN	
GRAVELLY LOAM		RED BROWN	
	LOOSE		NONE
GRAVEL		LIGHT BROWN	
			FEW
REDROCK			

Soil Profile 4	Classification AIII Cation	Slope 8 %	Limiting Factor 30	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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Observation Hole 2 _____ Test Pit Boring

_____ Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM		DARK BROWN	
	SLIGHTLY FRIABLE	RED BROWN	NONE
SILTY SAND		BEIGE	
	FRIABLE	LIGHT RED BROWN	FEW
BEDROCK			

Soil Profile 4	Classification AIII Cation	Slope 8 %	Limiting Factor 30	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # / PE #

1/16/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

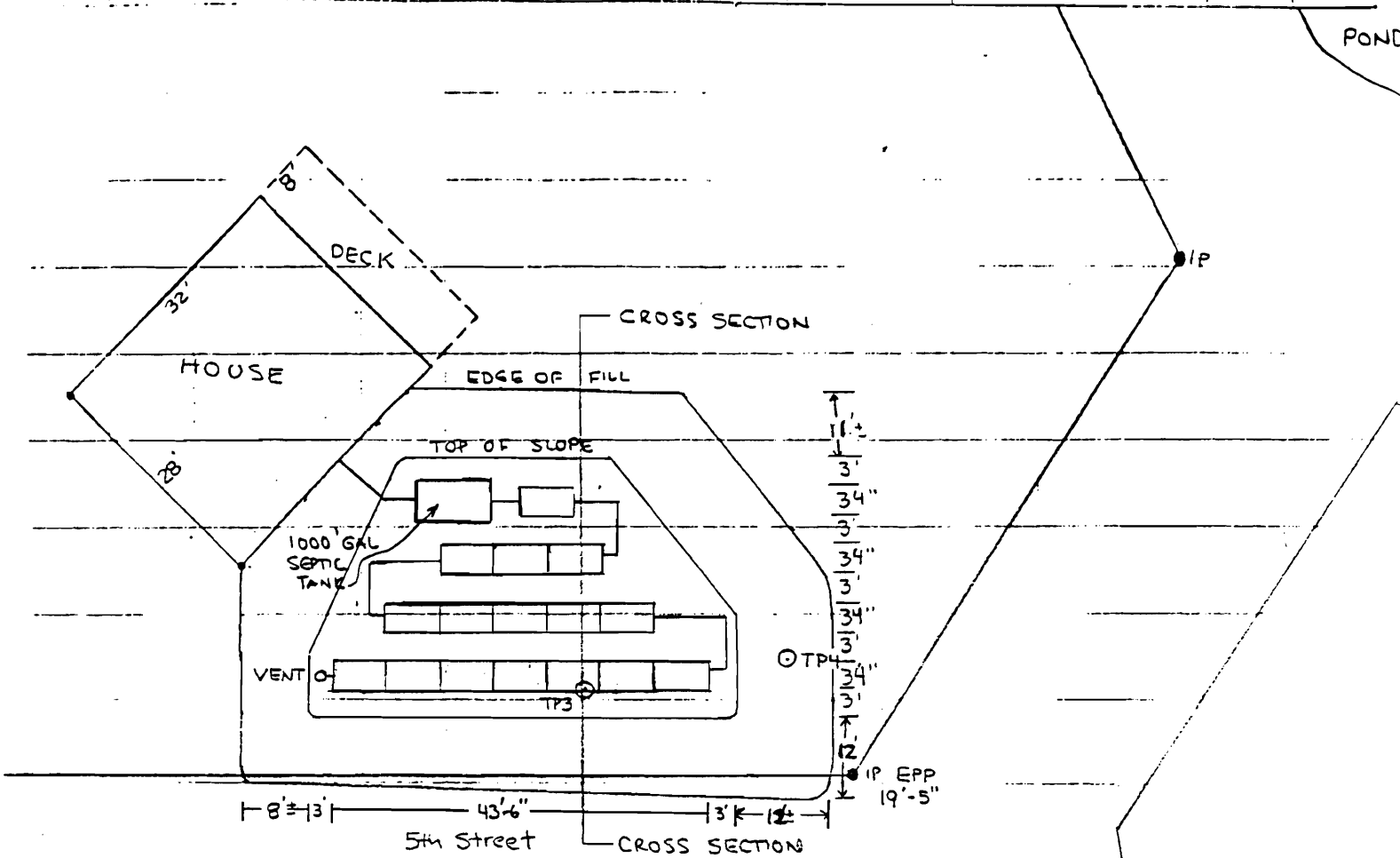
PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST

85-T-1,2,3,4

RALPH ASHMORE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL.



FILL REQUIREMENTS

Depth of Fill (Upslope)	23'
Depth of Fill (Downslope)	40'

CONSTRUCTION ELEVATIONS

Reference Elevation is	19'-5"
Bottom of Disposal Area	SEE CROSS SECTION
Top of Distribution Lines or Chambers	" " "

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

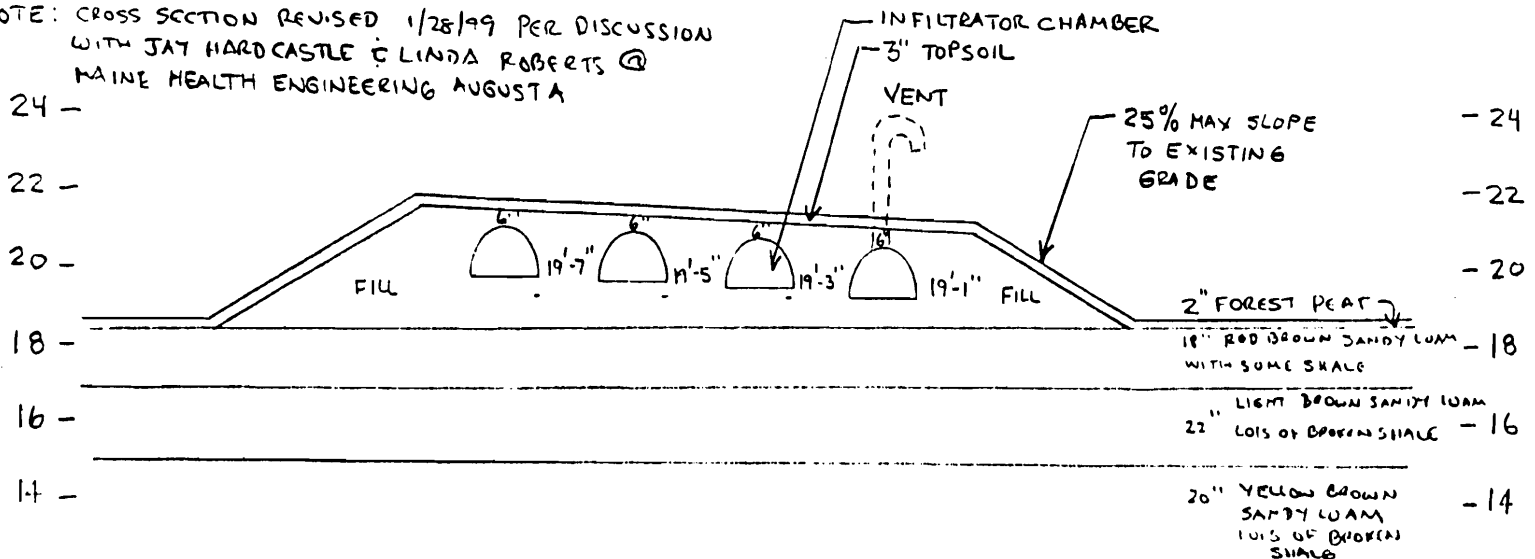
TOP OF IRON PIPE AT MOST SOUTHWEST CORNER OF LOT

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = 10 FL.
Horizontal: 1 Inch = 5 FL.

NOTE: CROSS SECTION REVISED 1/28/99 PER DISCUSSION WITH JAY HARDCASTLE & LINDA ROBERTS @ MAINE HEALTH ENGINEERING AUGUSTA



William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SF # / PE #

1/28/99
Date

Ralph Ashmore
65 Commercial St., Portland, Maine 04101
voice 207-772-6992; fax 207-775-0636
email: ashmore@nlis.net

Tom Reinsborough
Building Inspector
City of Portland
389 Congress St.
Portland, ME 04101

Jan. 28, 1999

Dear Tom;

Enclosed please find a revised plan for my septic system dated 1/28/99. My understanding is that this has been discussed between the site evaluator William Goodwin, Mike Newgent & Jay Hardcastle and has been approved. Please forward to me the necessary paperwork that reflects this approval as soon as possible.

Sincerely,

Ralph


SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST

Street, Road, Subdivision

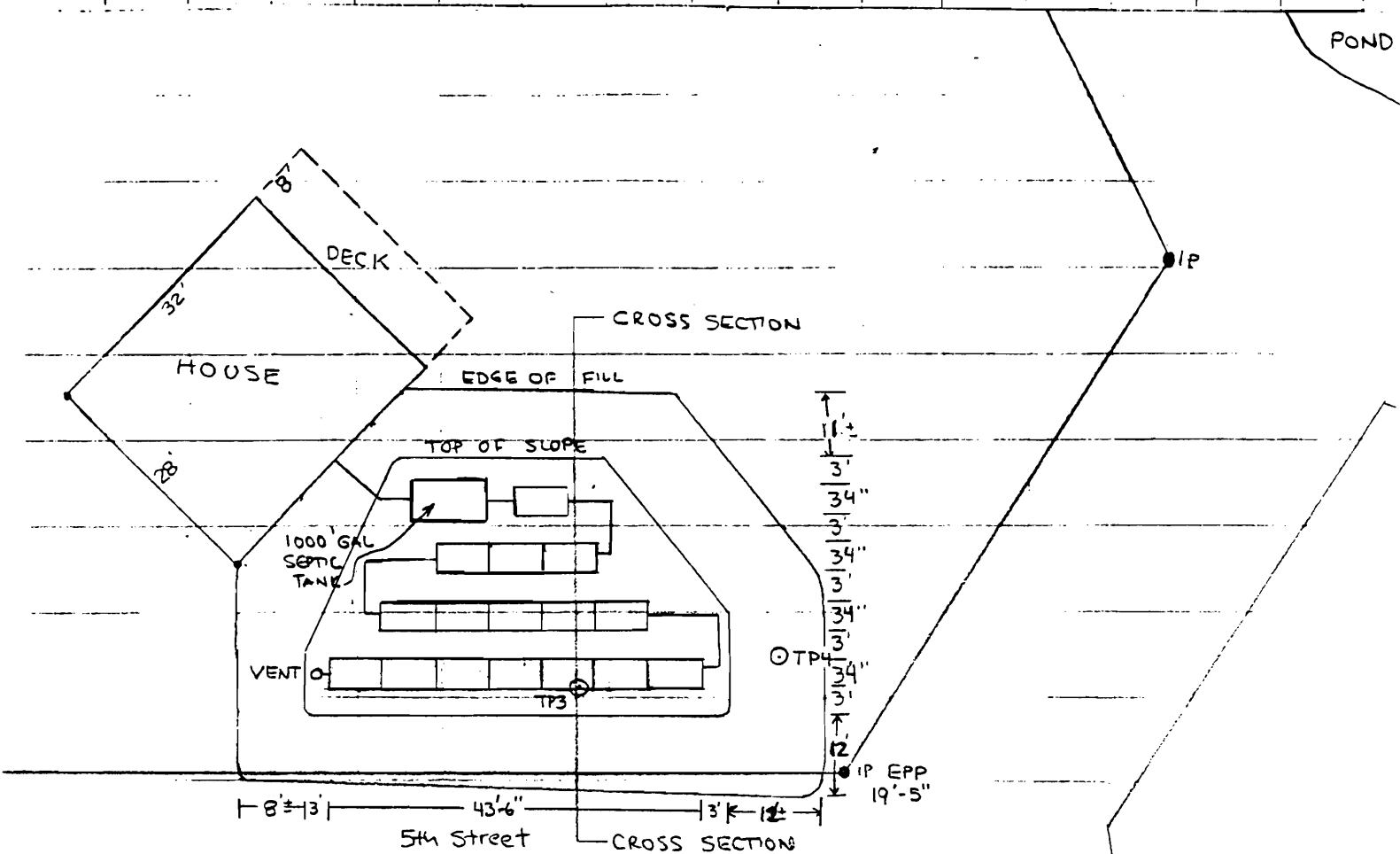
85-T-1,2,3,4

Owners Name

RALPH ASHMORE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL.

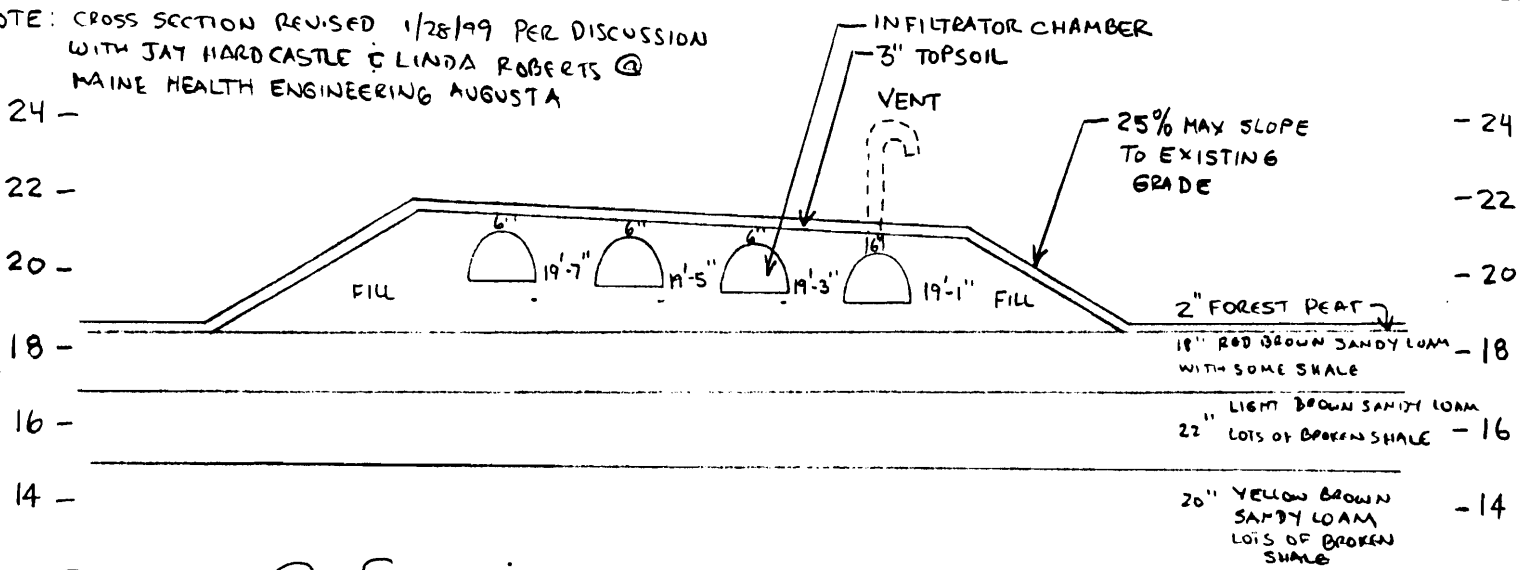


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	23"	Reference Elevation is	19'-5"	TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT	
Depth of Fill (Downslope)	40"	Bottom of Disposal Area	SEE CROSS SECTION		
		Top of Distribution Lines or Chambers	" " "		

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 10 FL.
Horizontal: 1 Inch = 5 FL.

NOTE: CROSS SECTION REVISED 1/28/99 PER DISCUSSION WITH JAY HARCASLE & LINDA ROBERTS @ MAINE HEALTH ENGINEERING AUGUSTA



William B. Goodwin

0003/4814

1/28/99

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

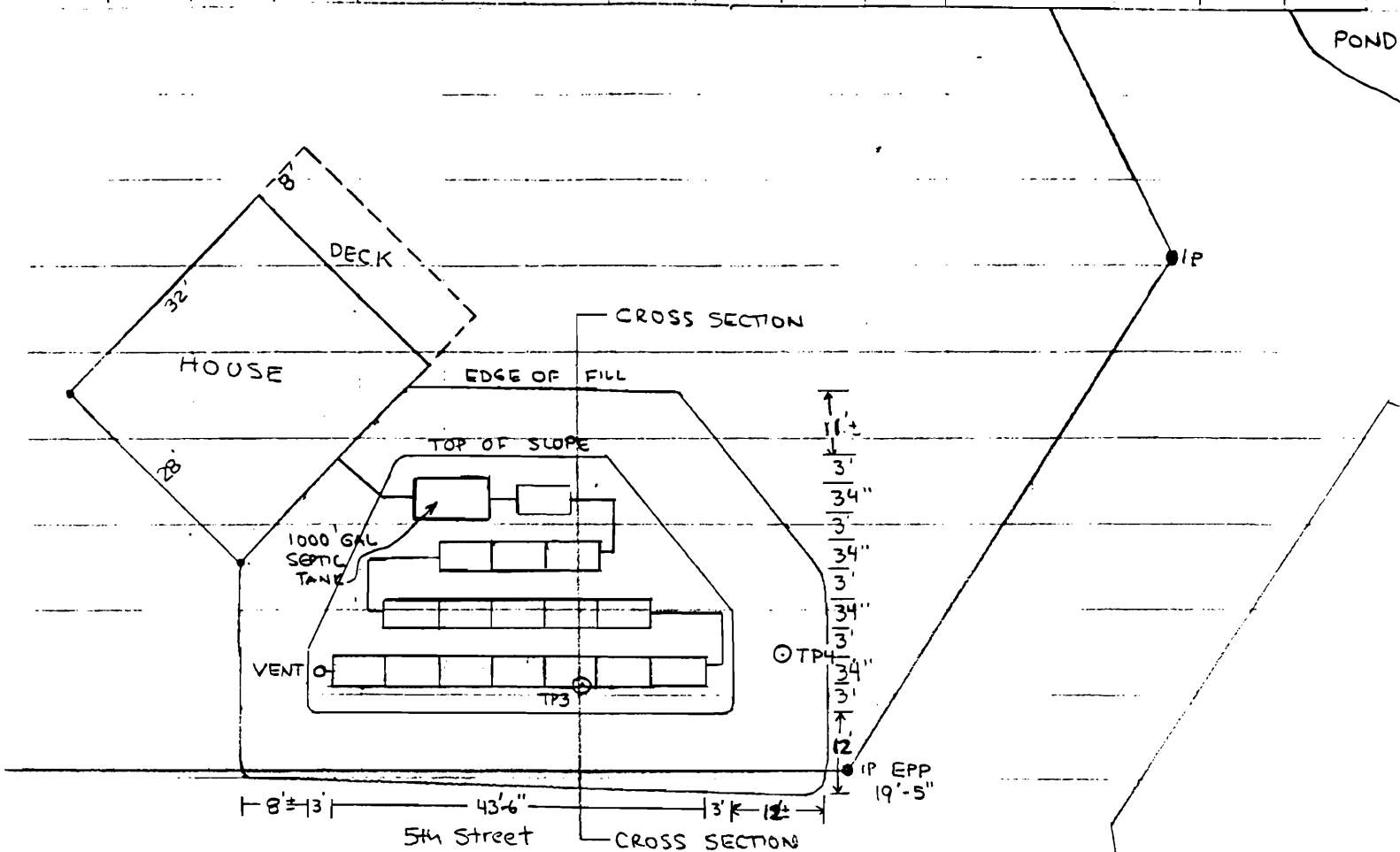
PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST

85-T-1,2,3,4

RALPH ASHMORE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FL



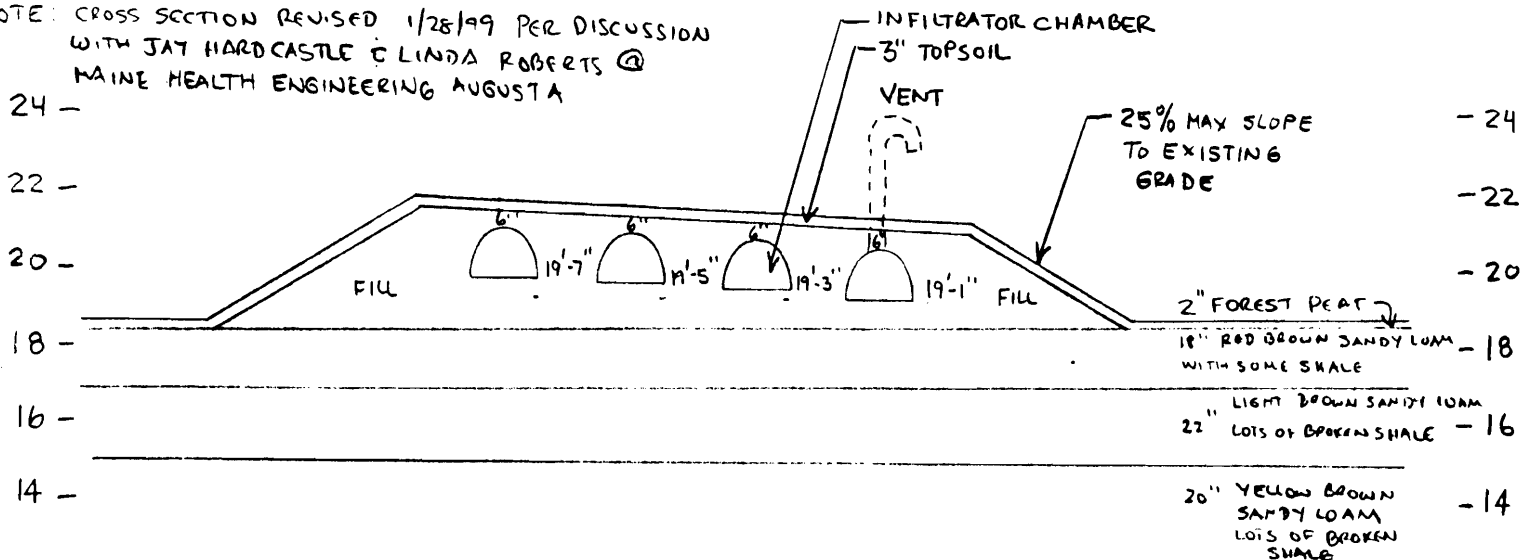
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	23"	Reference Elevation is	19'-5"	TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT	
Depth of Fill (Downslope)	40"	Bottom of Disposal Area	SEE CROSS SECTION		
		Top of Distribution Lines or Chambers	" " "		

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = 10 FL
Horizontal: 1 Inch = 5 FL

NOTE: CROSS SECTION REVISED 1/28/99 PER DISCUSSION WITH JAY HARDCASTLE & LINDA ROBERTS @ MAINE HEALTH ENGINEERING AUGUSTA



William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # / PE #

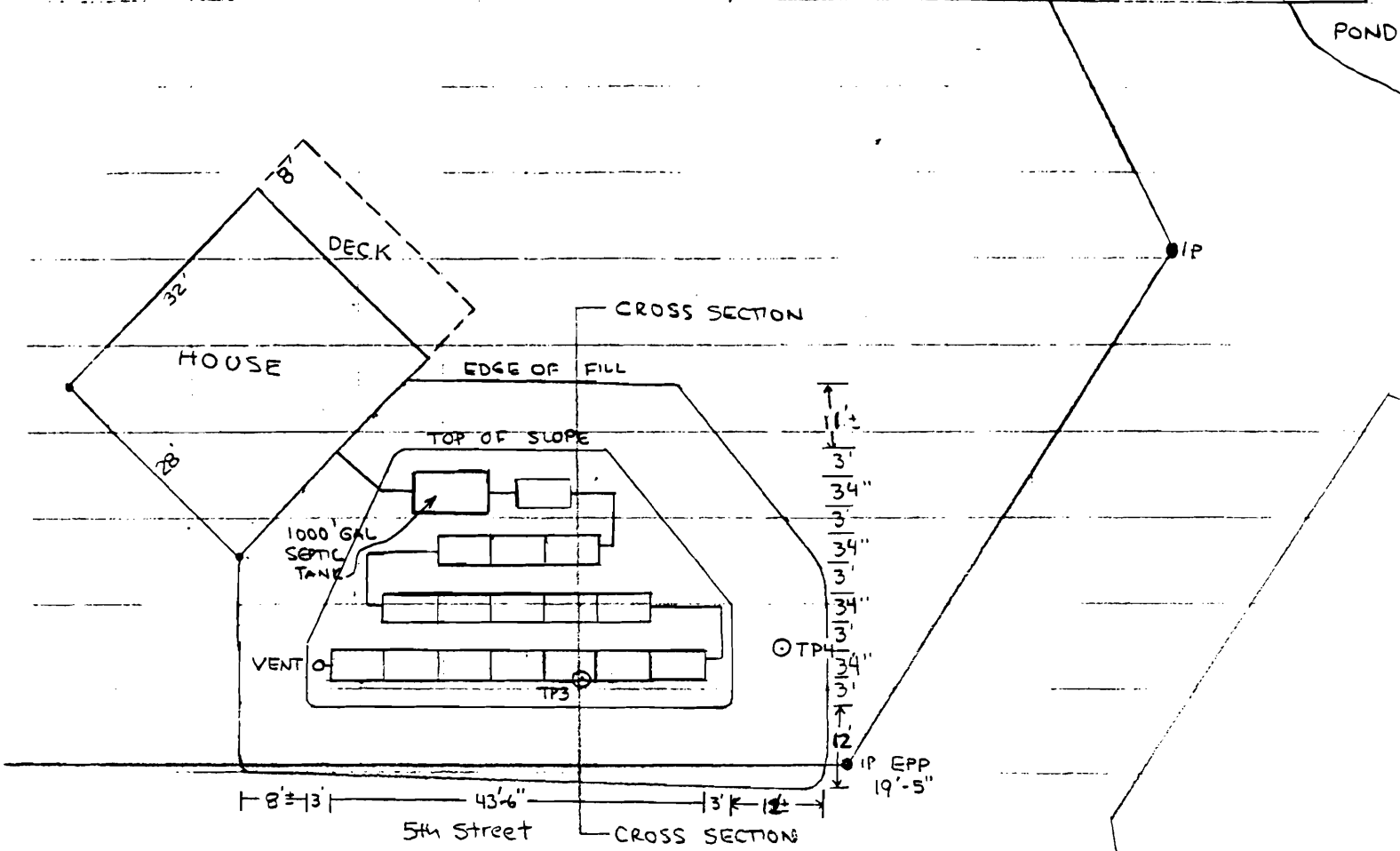
1/28/99
Date

Page 3 of 3
HHE-200 Rev. 4/83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND - PEAKS ISLAND 3RD ST @ 5TH ST	Street, Road, Subdivision 85-T-1,2,3,4	Owners Name RALPH ASHMORE
SUBSURFACE WASTEWATER DISPOSAL PLAN		Scale 1" = <u>20</u> FL.

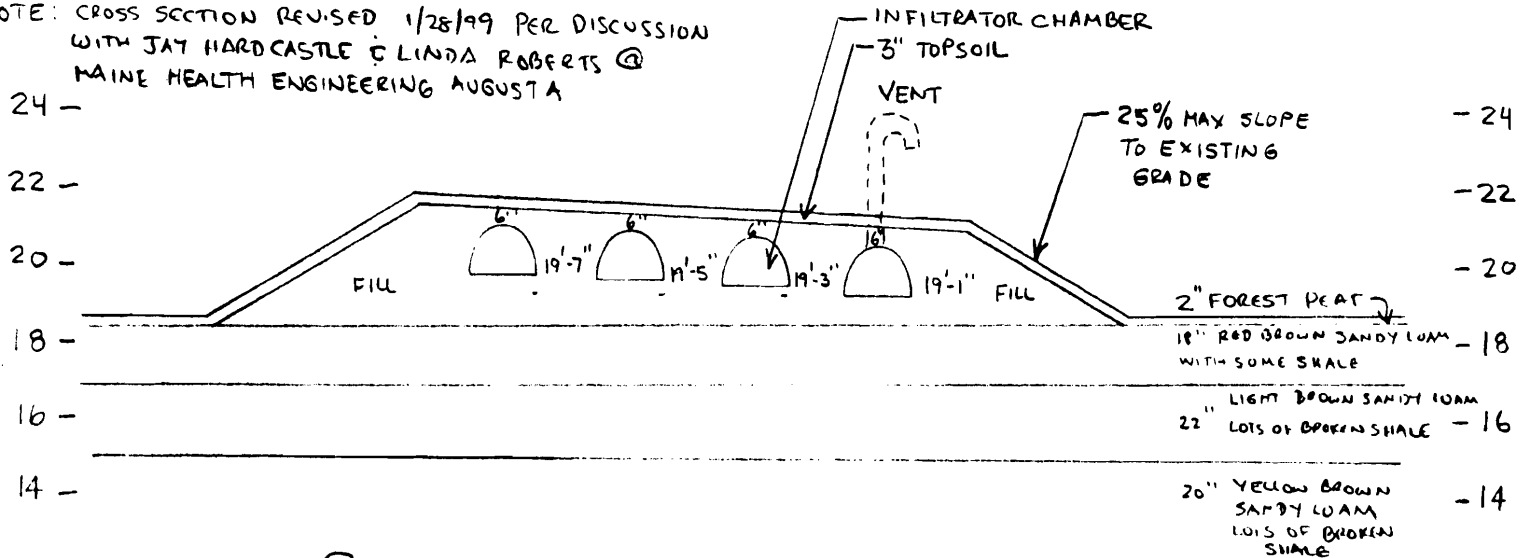


FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>23"</u>	Reference Elevation is <u>19'-5"</u>	TOP OF IRON PIPE AT MOST SOUTHEAST CORNER OF LOT
Depth of Fill (Downslope) <u>40"</u>	Bottom of Disposal Area <u>SEE CROSS SECTION</u>	
	Top of Distribution Lines or Chambers " " "	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 10 FL.
Horizontal: 1 Inch = 5 FL.

NOTE: CROSS SECTION REVISED 1/28/99 PER DISCUSSION WITH JAY HARDCASTLE & LINDA ROBERTS @ MAINE HEALTH ENGINEERING AUGUSTA



William B Goodwin

0003/4814

1/28/99