

**City of Portland, Maine - Building or Use Permit Application**

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

CONTRACTS BOARD

Permit No: 04-0475	Issue Date: 2004 APR 26	CEL: 087 T009001
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Location of Construction: 292 Island Ave	Owner Name: Berndt Arnold Blind	Owner Address: 292 Island Ave	Phone: 603-875-1111
Business Name:	Contractor Name: Thompson & Johnson Woodworkers	Contractor Address: 115 Island Ave Peaks Island	Phone: 2077665219
Lessee/Buyer's Name:	Phone:	Permit Type: Additions - Dwellings	Zone: IR-2

Past Use: Single Family w/rental cottage	Proposed Use: Single Family w/rental cottage w/addition to primary residence	Permit Fee: \$291.00	Cost of Work: \$30,000.00	CEO District: 1	45,180.00
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Proposed Project Description: Build a 16' x 24' addition to the primary residence	FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: R3 Type: SB BOA 1999 Signature: JMB 4/26/04
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Permit Taken By: jmb	Date Applied For: 04/26/2004	<b>Zoning Approval</b>
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- 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.

<b>Special Zone or Reviews</b> <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: JMB 4/26/04	<b>Zoning Appeal</b> <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:	<b>Historic Preservation</b> <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: JMB
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Permit Issued  
APR 26 2004  
CITY OF PORTLAND

**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			

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Permit No: 04-0475	Date Applied For: 04/26/2004	CBL: 087 T009001
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Location of Construction: 292 Island Ave	Owner Name: Berndt Arnold Blind	Owner Address: 292 Island Ave	Phone:
Business Name:	Contractor Name: Thompson & Johnson Woodworkers	Contractor Address: 115 Island Ave Peaks Island	Phone: (207) 766-5219
Lessee/Buyer's Name:	Phone:	Permit Type: Additions - Dwellings	

Proposed Use: Single Family w/rental cottage w/addition to primary residence	Proposed Project Description: Build a 16' x 24' addition to the primary residence
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Dept: Zoning	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 04/26/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
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	Reviewer: Jeanine Bourke	Approval Date: 04/26/2004
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
<ol style="list-style-type: none"> <li>1) Design load spec for the engineered beam to be submitted to this office</li> <li>2) Separate permits are required for any electrical or plumbing work.</li> <li>3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.</li> </ol>			

# All Purpose 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>292 ISLAND AVE</u>			
Total Square Footage of Proposed Structure <u>1,715 SF / 385 New</u>		Square Footage of Lot <u>45,180 SF</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>87</u>	Block# <u>T</u>	Lot# <u>9</u>	Owner: <u>ARNOLD BERNDT</u> Telephone: <u>766-2030</u>
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone: <u>ARNOLD BERNDT</u> <u>BLIND LIFE INTEREST</u> <u>292 ISLAND AVE</u> <u>PEAKS ISLAND, ME 04108</u>	Cost Of Work: \$ <u>30,000</u> Fee: \$ <u>291.00</u>
Current use: <u>SFR</u>			
If the location is currently vacant, what was prior use: _____			
Approximately how long has it been vacant: _____			
Proposed use: <u>SFR</u>			
Project description: <u>385 SF ADDITION</u>			
Contractor's name, address & telephone: <u>THOMPSON JOHNSON WOODWORKS</u>			
Who should we contact when the permit is ready: <u>RACHEL CONLY</u>			
Mailing address: <u>115 ISLAND AVE</u> <u>PEAKS ISLAND, ME 04108</u>			
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work with a Plan Reviewer. A stop work order will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>766-5919</u>			

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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 of applicant: Paulee Delaney Date: April 26, 2004

This is NOT a permit, you may not commence ANY work until the permit is issued.  
If you are in a Historic District you may be subject to additional permitting and fees with the Planning Department on the 4<sup>th</sup> floor of City Hall

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 2  
 Parcel ID 087 T009001  
 Location 292 ISLAND AVE  
 Land Use SEASONAL

Owner Address BERNDT ARNOLD BLIND LIFE INTEREST  
 292 ISLAND AVE  
 PEAKS ISLAND ME 04108

Book/Page 14684/162  
 Legal 87-T-9  
 ISLAND AVE  
 PEAKS ISLAND  
 45180 SF

*Year Round  
Primary SF  
residence  
IR-2*

**Valuation Information**

Land	Building	Total
\$70,560	\$38,220	\$108,780

**Property Information**

Year Built	Style	Story Height	Sq. Ft.	Total Acres	Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement
1973	Cottage	1	576	1.037	2	1		4	None	Plat/slab

**Outbuildings**

Type	Quantity	Year Built	Size	Grade	Condition
SHED-FRAME	1	1979	12X12	1	4

**Sales Information**

Date	Type	Price	Book/Page
04/01/1999	LAND + BLDING		14684-162

**Picture and Sketch**

Picture                      Sketch

[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.



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	2 of 2
Parcel ID	087 T009001
Location	292 ISLAND AVE
Land Use	SEASONAL
Owner Address	BENNETT ARNOLD BLIND LIFE INTEREST 292 ISLAND AVE PEAKS ISLAND NE 04108
Book/Page	24624/162
Legal	87-T-9 ISLAND AVE PEAKS ISLAND 45180 SF

*Year round  
Rental  
Unit*

**Valuation Information**

Land	Building	Total
\$70-560	\$36-220	\$106-780

**Property Information**

Year Built	Style	Story Height	Sq. Ft.	Total Acres		
1985	Cottage	1	396	1.037		
Bedrooms	Full Baths	Half Baths	Total Rooms	Attic	Basement	
	1		1	None	Pier/slab	

**Outbuildings**

Type	Quantity	Year Built	Size	Grade	Condition
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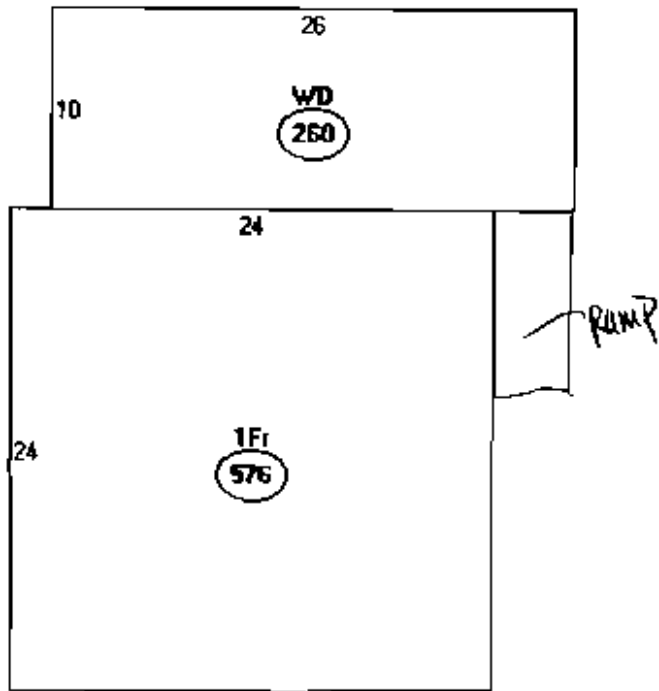
**Sales Information**

Date

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error  
'80Qa0bod'

Either BOF  
or EOF is  
True, or the  
current  
record has  
been  
deleted.  
Requested  
operation  
requires a  
current  
record.

/searchdetail.asp,



Quantities/Area

A: 1Fl  
576 sqft  
B: WD  
260 sqft

836 SF Primary  
396 - cottage

1232

144 shed

1,376

385 New on Primary

1,761 SF

OK

Lot  
45,180  
x 20%

9,036 SF



# CITY OF PORTLAND, MAINE

## Department of Building Inspections

April 26

20 04

Received from 292 Island Ave

Location of Work Thompson & Johnson woodworks

Cost of Construction \$ 30,000.

Permit Fee \$ 291.00

Building (II)  Plumbing (I5)  Electrical (I2)  Site Plan (U2)

Other

CBL: 87-T-9

Check #: 1898

Total Collected \$ 291.00

## THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy





# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Public Services  
Division of Health Engineering  
(207) 289-3626

<b>PROPERTY ADDRESS</b>		<div style="border: 1px solid black; padding: 10px;"> <p>PORTLAND PERMIT # 738 TOWN COPY</p> <p>ISLAND AVE TAX MAP 87 BLOCK T LOT 9</p> <p>BERNDT ARNOLD</p> <p>ISLAND AVE PEAKS ISLAND, MAINE 04108</p> <p>NOV 5 1984</p> </div>
Town Or Plantation	PORTLAND PEAKS ISLAND	
Street	ISLAND AVE	
Subdivision Lot #	TAX MAP 87 BLOCK T LOT 9	
<b>PROPERTY OWNERS NAME</b>		
Last	BERNDT	<p>Local Plumbing Inspector Signature</p> <p>Date Approved</p>
First	ARNOLD	
Applicant Name: ARNOLD BERNDT		
Mailing Address of Owner/Applicant (if Different): ISLAND AVE PEAKS ISLAND, MAINE 04108		
<b>Owner/Applicant Statement</b>		
<p>I certify that the information submitted is correct to the best of my knowledge and belief and that any falsification is reason for the Local Plumbing Inspector to deny a Permit.</p> <p><i>Arnold Berndt</i> 11/5/84 Signature of Owner/Applicant Date</p>		<p><b>Caution: Inspection Required</b></p> <p>I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.</p> <p><i>Donald J. Goodwin</i> Local Plumbing Inspector Signature</p>

PERMIT INFORMATION		
<p><b>THIS APPLICATION IS FOR:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NEW SYSTEM</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM</li> <li><input type="checkbox"/> EXPANDED SYSTEM</li> <li><input type="checkbox"/> SEASONAL CONVERSION</li> <li><input type="checkbox"/> EXPERIMENTAL SYSTEM</li> </ol>	<p><b>THIS APPLICATION REQUIRES:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</li> <li><input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form             <ol style="list-style-type: none"> <li><input type="checkbox"/> Requires only Local Plumbing Inspector Approval</li> <li><input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval</li> </ol> </li> </ol>	<p><b>INSTALLATION IS COMPLETE SYSTEM</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</li> <li><input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</li> <li><input type="checkbox"/> ENGINEERED (+ 2000 gpd)</li> </ol> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> TREATMENT TANK (ONLY)</li> <li><input type="checkbox"/> HOLDING TANK</li> <li><input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</li> <li><input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> </ol>
<p><b>IF REPLACEMENT SYSTEM:</b> YEAR FAILING SYSTEM INSTALLED _____ THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> <li><input type="checkbox"/> BED</li> <li><input type="checkbox"/> CHAMBER</li> <li><input type="checkbox"/> TRENCH</li> <li><input type="checkbox"/> OTHER _____</li> </ol>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</li> <li><input type="checkbox"/> MODULAR OR MOBILE HOME</li> <li><input type="checkbox"/> MULTIPLE FAMILY DWELLING</li> <li><input type="checkbox"/> OTHER _____ SPECIFY _____</li> </ol>	<p><b>TYPE OF WATER SUPPLY</b></p>
<p>SIZE OF PROPERTY: 22,000 SF</p>	<p>ZONING: R-3</p>	

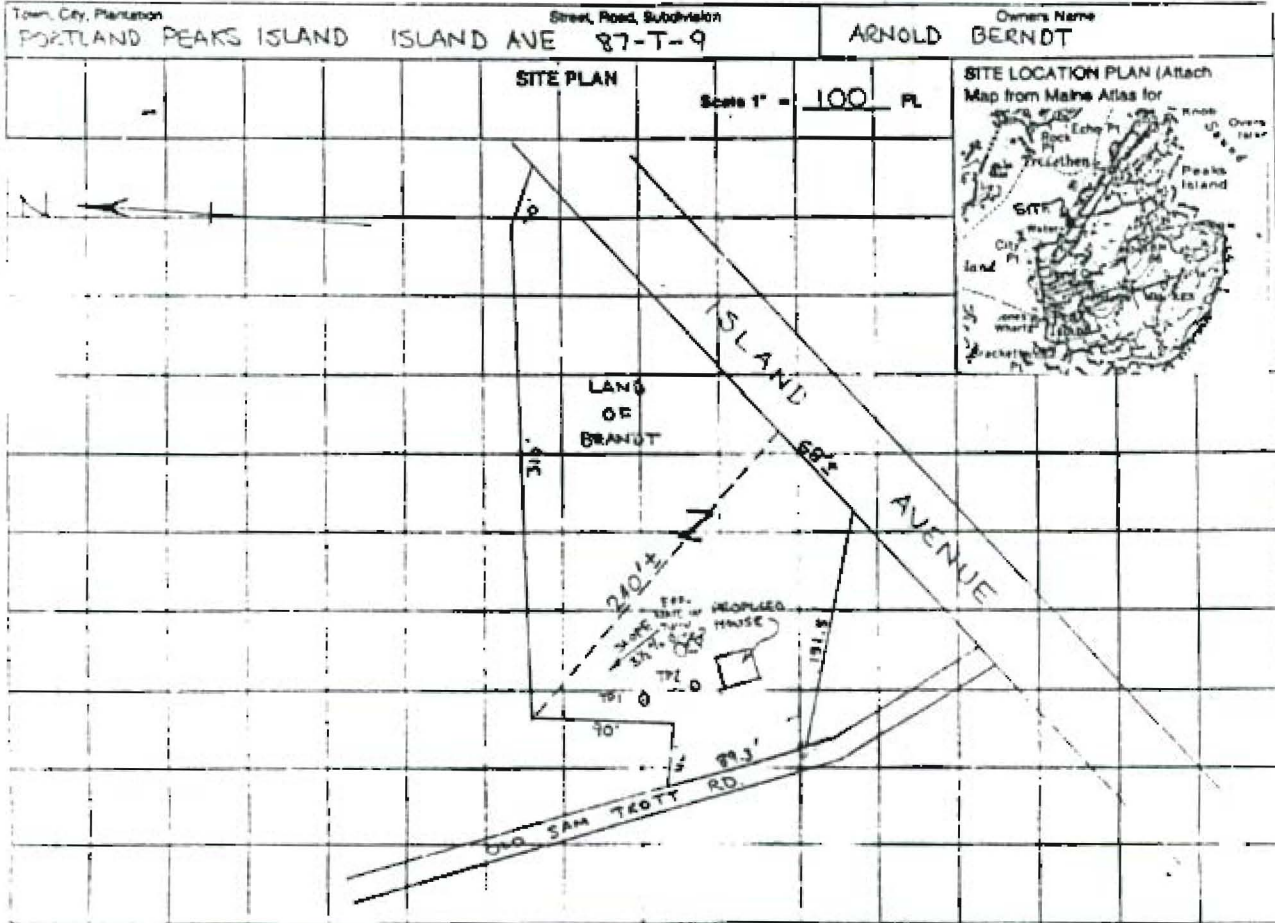
DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)							
<p><b>TREATMENT TANK</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</li> <li><input type="checkbox"/> AEROBIC</li> </ol> <p>1000 gallon installed SIZE _____ GALS</p>	<p><b>WATER CONSERVATION</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NONE</li> <li><input type="checkbox"/> LOW VOLUME TOILET</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> <li><input type="checkbox"/> ALTERNATIVE TOILET</li> </ol> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NOT REQUIRED</li> <li><input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)</li> <li><input type="checkbox"/> REQUIRED</li> </ol> <p>DOSE: _____ GALS</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p>2 BEDROOM CONSERVATIVE</p>				
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PROFILE: 4</td> <td>CONDITION: C</td> </tr> <tr> <td>DEPTH TO LIMITING FACTOR: 28</td> <td></td> </tr> </table>	PROFILE: 4	CONDITION: C	DEPTH TO LIMITING FACTOR: 28		<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> SMALL</li> <li><input checked="" type="checkbox"/> MEDIUM</li> <li><input type="checkbox"/> MEDIUM-LARGE</li> <li><input type="checkbox"/> LARGE</li> <li><input type="checkbox"/> EXTRA LARGE</li> </ol>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> BED 300 Sq. Ft.</li> <li><input type="checkbox"/> CHAMBER _____ Sq. Ft.</li> <li><input type="checkbox"/> TRENCH _____ Linear Ft.</li> <li><input type="checkbox"/> OTHER: _____</li> </ol>	<p><b>DESIGN FLOW: 300 (GALLONS/DAY)</b></p>
PROFILE: 4	CONDITION: C						
DEPTH TO LIMITING FACTOR: 28							

**SITE EVALUATOR STATEMENT**

On SEPTEMBER 1, 1984 (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 9/5/84  
Site Evaluator or Professional Engineer's Signature SE # / PE # Date

\* Local Plumbing Inspector Signature & Local Site Evaluator Waiver under a Local Order



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)																																																																																																															
<p>Observation Hole <u>3</u>      <input checked="" type="checkbox"/> Test Pit   <input type="checkbox"/> Boring</p> <p>Depth of Organic Horizon Above Mineral Soil</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DEPTH-BELOW MINERAL SOIL SURFACE (Inches)</th> <th>Texture</th> <th>Consistency</th> <th>Color</th> <th>Mottling</th> </tr> </thead> <tbody> <tr> <td>0-15</td> <td>STONY SAND</td> <td>LOOSE</td> <td>LIGHT BROWN</td> <td>NONE</td> </tr> <tr> <td>15-30</td> <td>STONY SILTY SAND</td> <td>MODERATELY FRAGILE</td> <td>GRAY BROWN</td> <td>FEW</td> </tr> <tr> <td>30-40</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>40-50</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>50-60</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>60-70</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>70-80</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>80-90</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>90-100</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td>Soil <u>4</u></td> <td>Classification <u>C</u></td> <td>Slope <u>3 1/2</u></td> <td>Limiting Factor <u>30</u></td> <td><input checked="" type="checkbox"/> Shallow water <input type="checkbox"/> Intermediate water <input type="checkbox"/> Ocean</td> </tr> </table>	DEPTH-BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling	0-15	STONY SAND	LOOSE	LIGHT BROWN	NONE	15-30	STONY SILTY SAND	MODERATELY FRAGILE	GRAY BROWN	FEW	30-40					40-50					50-60					60-70					70-80					80-90					90-100					Soil <u>4</u>	Classification <u>C</u>	Slope <u>3 1/2</u>	Limiting Factor <u>30</u>	<input checked="" type="checkbox"/> Shallow water <input type="checkbox"/> Intermediate water <input type="checkbox"/> Ocean	<p>Observation Hole <u>2</u>      <input checked="" type="checkbox"/> Test Pit   <input type="checkbox"/> Boring</p> <p>Depth of Organic Horizon Above Mineral Soil</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DEPTH-BELOW MINERAL SOIL SURFACE (Inches)</th> <th>Texture</th> <th>Consistency</th> <th>Color</th> <th>Mottling</th> </tr> </thead> <tbody> <tr> <td>0-15</td> <td>STONY SAND</td> <td>LOOSE</td> <td>RED BROWN</td> <td>NONE</td> </tr> <tr> <td>15-30</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>30-40</td> <td>STONY SILTY SAND</td> <td>MODERATELY FRAGILE</td> <td>GRAY BROWN</td> <td>FEW</td> </tr> <tr> <td>40-50</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>50-60</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>60-70</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>70-80</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>80-90</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>90-100</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td>Soil <u>4</u></td> <td>Classification <u>C</u></td> <td>Slope <u>3 1/2</u></td> <td>Limiting Factor <u>28</u></td> <td><input checked="" type="checkbox"/> Shallow water <input type="checkbox"/> Intermediate water <input type="checkbox"/> Ocean</td> </tr> </table>	DEPTH-BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling	0-15	STONY SAND	LOOSE	RED BROWN	NONE	15-30					30-40	STONY SILTY SAND	MODERATELY FRAGILE	GRAY BROWN	FEW	40-50					50-60					60-70					70-80					80-90					90-100					Soil <u>4</u>	Classification <u>C</u>	Slope <u>3 1/2</u>	Limiting Factor <u>28</u>	<input checked="" type="checkbox"/> Shallow water <input type="checkbox"/> Intermediate water <input type="checkbox"/> Ocean
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*William B. Jordan*      0003/4814      9/5/84

Soil Evaluator or Professional Engineer's Signature      SE & PE      Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation  
PORTLAND

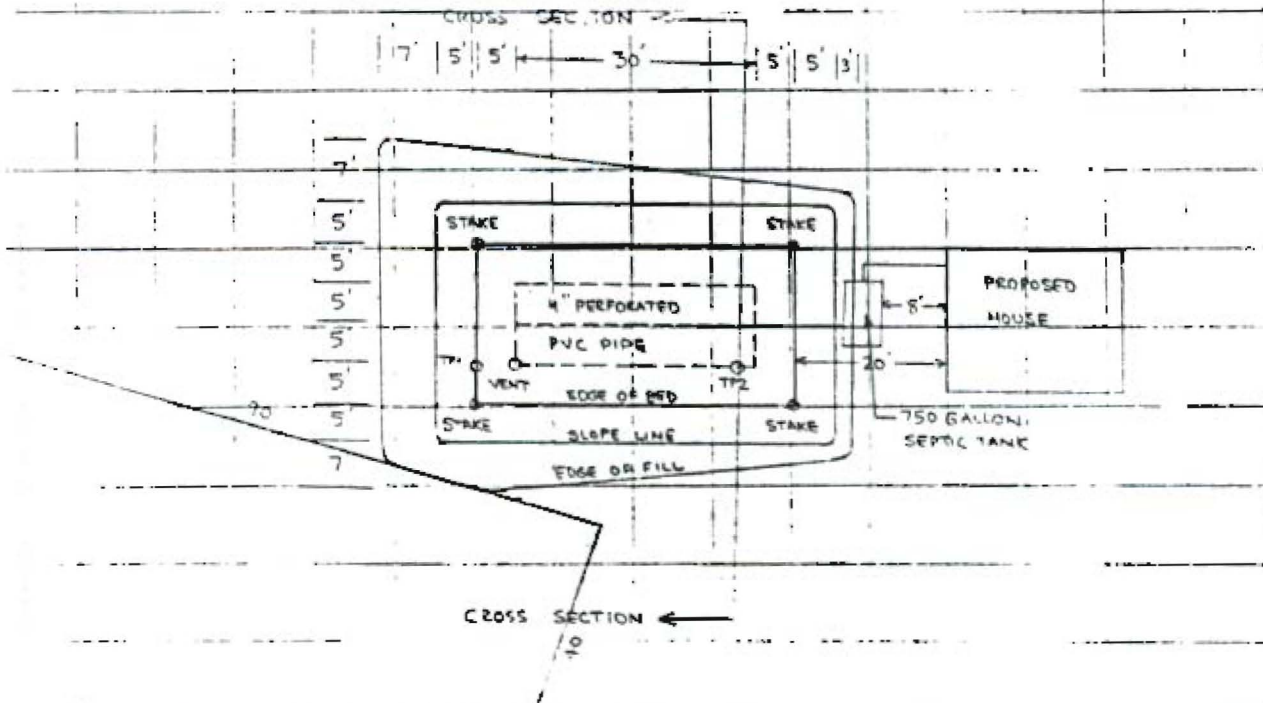
Street, Road, Subdivision  
PEAKE ISLAND

ISLAND AVE 87-T-9

Owners Name  
ARNOLD BERNDT

## SUBSURFACE WASTEWATER DISPOSAL PLAN

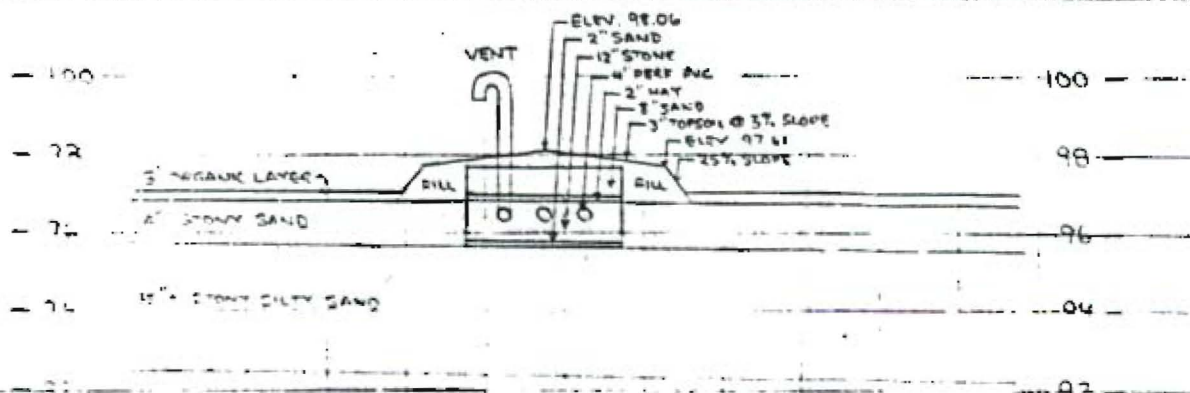
Scale 1" = 20' PL.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) 5'	Reference Elevation is 100.00	NAIL IN TWIN 8" BIRCH
Depth of Fill (Downslope) 23'	Bottom of Disposal Area 95.61	16' NORTHERLY OF HOUSE
	Top of Distribution Lines or Chambers 96.69	

### DISPOSAL AREA CROSS SECTION

Scale:  
Vertical: 1 inch = 4' PL.  
Horizontal: 1 inch = 20' PL.



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

0003/4814  
SE #1/PE #

9/5/84  
Date

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

**THOMPSON JOHNSON WOODWORKS**  
 115 ISLAND AVE  
 PEAKS ISLAND, ME 04108  
 TEL 207-766-5919 FAX 207-766-5297  
 E-MAIL:

874-8714

CITY OF PORTLAND

TO: ATTN: JEANNIE BURKE

FM: FACTEL ONLY

DT: 4-27-04

RE: BERNDT PERMIT

4 PAGES INCLUDING COVER

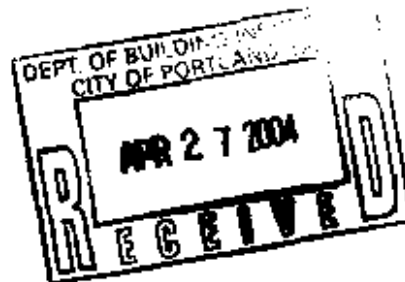
NOTES:

Hi JEANNIE - S

PLEASE LET ME KNOW IF YOU NEED ANY MORE INFORMATION FROM ME.

THANK YOU, ENJOY YOUR WEEK - S

FACTEL ONLY



⑤

4-27-04



BC CALC® 2003 DESIGN REPORT - US

Tuesday, April 27, 2004 10:22

Single 3 1/2" x 14" VERSA-LAM® 3080 DF

Job Name: BERNDY  
Address: 282 ISLAND AVENUE  
City, State, Zip: PEASE ISLAND, ME  
Customer: THOMPSON-JOHNSON WOODWORKS  
Code reports: CBO 5003, NER 442

File Name: BC CALC Project: RBO7  
Description:  
Specifier: RACHEL  
Designer: DON BELMONT  
Company: WOOD STRUCTURES INC  
Misc:



B0, 3 1/2"  
4788 lbs LL  
2011 lbs DL

B1, 3 1/2"  
4788 lbs LL  
2011 lbs DL

Total Horizontal Length - 16-07-00

General Data

Version: US Reports  
Member Type: Roof Beam  
Number of Spans: 1  
Left Cantilever: No  
Right Cantilever: No  
Slope: 0H2  
Tributary: 11-08-00  
Live Load: 50 psf  
Dead Load: 20 psf  
Partition Load: 0 psf  
Duration: 115  
Discipline: The completeness and accuracy of the input must be verified by anyone who would rely on the output as evidence of suitability for a particular application. The output shown is based upon building code-specified design properties and analysis methods. Installation of BOISE engineered wood products must be in accordance with the current Installation Guide and the applicable building codes. To obtain an Installation Guide or if you have any questions, please call (800)232-0788 before beginning product installation.

Load Summary

ID	Description	Load Type	Seg	Start	End	Type	Value	Yr.	Chr.
5	Standard Load	Upl. Area	Left	00-00-00	16-07-00	Line Dead	20 psf	11-08-00	115%
							20 psf	11-08-00	92%

Controls Summary

Control Type	Value	% Allowable	Design	Load Case	Span Location
Moment	28105 ft-lb	84.7%	119%	2	1 - Internal
Max. Moment	0 ft-lb	n/a	100%		
End Shear	5825 lb	54.4%	115%	2	1 - Left
Total Load Def.	L/229 (0.889")	78.6%		2	1
Live Load Def.	L/326 (0.611")	73.7%		2	1
Max. Def.	0.889"	85.9%		2	1

Bearing Supports

Notes	Type	Dim. (L x W)	Value	% Allow Support	% Allow Height	Material
B0	Post	3-1/2" x 3-1/2"	5778 lbs	78.3%	81.6%	Grade-Pine-Fr
B1	Post	3-1/2" x 3-1/2"	5778 lbs	78.3%	81.5%	Grade-Pine-Fr

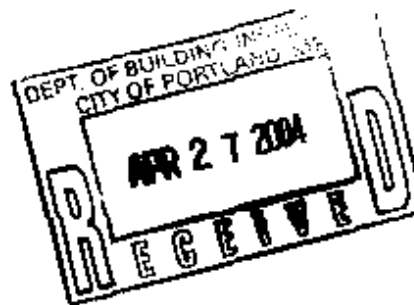
Warnings

Post at Bearing B0 analyzed for bearing only, column analysis has not been performed.  
Post at Bearing B1 analyzed for bearing only, column analysis has not been performed.

Notes

Design meets Code minimum (L/160) Total load deflection criteria.  
Design meets Code minimum (L/240) Live load deflection criteria.  
Design meets arbitrary (1") maximum load deflection criteria.  
Member Slope = 0, consider overage.  
Entered/Displayed Horizontal Span Length (x) = Clear Span + 1/2 min, end bearing + 1/2 intermediate bearing

BC CALC®, BC FRAMER®, BC®, BC RIM BOARD™, BC OSB RIM BOARD™, BOISE GLULAM™, VERSA-LAM®, VERSA-RIM®, VERSA-RIM PLUS®, VERSA-STRAND™, VERSA-STUD®, ALLJOIST® and AJS™ are trademarks of Boise Cascade Corporation.



Thompson Johnson Woodworks  
115 Island Avenue  
Pease Island, ME 04108

2

9-27-04

Thompson Johnson Woodworks  
115 Island Avenue  
Peaks Island, Maine 04108

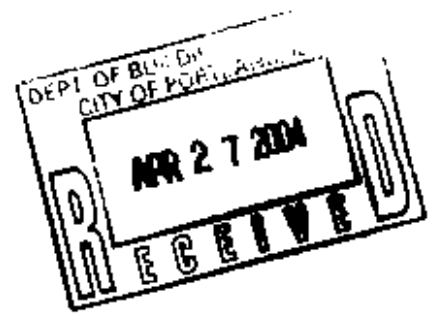
### Window Schedule

QTY	WIN.	MANUFACTURER	MATERIAL	GLASS	OPER	UNIT WIDTH	UNIT HEIGHT	GLAZING WIDTH	GLAZING HEIGHT	JAMB
1	1	bonneville 4317	wood int/alum clad out	NA	awning	47 5/8"	22 5/8"			
2	2	bonneville 1712	wood int/alum clad out	NA	awning	21 5/8"	17 3/4"			
2	3	bonneville 4130 DH1 *	wood int/alum clad out	NA	double hung	45 5/8"	69 7/8"	40 3/4"	30 1/2"	
1	4	bonneville 4130 DH2	wood int/alum clad out	NA	double hung	64 1/4"	69 7/8"			

### Door Schedule

QTY	DOOR	MANUFACTURER	MATERIAL	GLASS	OPER	UNIT WIDTH	UNIT HEIGHT	GLAZING WIDTH	GLAZING HEIGHT	JAMB
1	A	bonneville	hollow core	NA	pocket	30"	80"			
1	B	bonneville	hollow core	NA	LH	24"	80"			
1	C	bonneville	hollow core	NA	RH	36"	80"			
1	D	bonneville	hollow core	NA	pair	24"	80"			
1	E	bonneville	wood int/alum clad out	tempered	slider	66"	80"			

\* represents egress specification



3

APR 27 '04 (WED) 12:26

COMMUNICATION No. 13

PAGE 9

Apr 27 04 12:26P

Thompson Johnson

207-766-5287

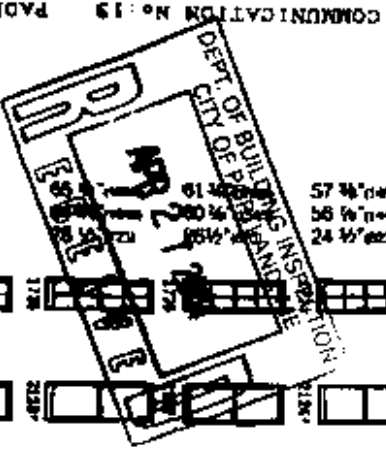
P.3

**SERIES DM1 (DMB11)**

NO	FRAME	GLASS	22 1/2" x 24"	25 1/4" x 24"	28 1/4" x 24"	30 1/4" x 24"	34 1/4" x 24"	38 1/4" x 24"	42 1/4" x 24"	45 1/4" x 24"	48 1/4" x 24"
1	1 1/8" x 1 1/8"	1 1/2" x 1 1/2"	2170	2175	2180	2185	2190	2195	2200	2205	2210
2	1 1/4" x 1 1/4"	1 3/4" x 1 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
3	1 3/8" x 1 3/8"	1 7/8" x 1 7/8"	2170	2175	2180	2185	2190	2195	2200	2205	2210
4	1 1/2" x 1 1/2"	2" x 2"	2170	2175	2180	2185	2190	2195	2200	2205	2210
5	1 3/4" x 1 3/4"	2 1/4" x 2 1/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
6	1 7/8" x 1 7/8"	2 3/4" x 2 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
7	2" x 2"	3" x 3"	2170	2175	2180	2185	2190	2195	2200	2205	2210
8	2 1/4" x 2 1/4"	3 1/4" x 3 1/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
9	2 3/4" x 2 3/4"	3 3/4" x 3 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
10	3" x 3"	4" x 4"	2170	2175	2180	2185	2190	2195	2200	2205	2210

**SERIES DM2 (DMB23)**

NO	FRAME	GLASS	24" x 24"	26 1/4" x 24"	28 1/4" x 24"	30 1/4" x 24"	34 1/4" x 24"	38 1/4" x 24"	42 1/4" x 24"	45 1/4" x 24"	48 1/4" x 24"
1	1 1/8" x 1 1/8"	1 1/2" x 1 1/2"	2170	2175	2180	2185	2190	2195	2200	2205	2210
2	1 1/4" x 1 1/4"	1 3/4" x 1 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
3	1 3/8" x 1 3/8"	1 7/8" x 1 7/8"	2170	2175	2180	2185	2190	2195	2200	2205	2210
4	1 1/2" x 1 1/2"	2" x 2"	2170	2175	2180	2185	2190	2195	2200	2205	2210
5	1 3/4" x 1 3/4"	2 1/4" x 2 1/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
6	1 7/8" x 1 7/8"	2 3/4" x 2 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
7	2" x 2"	3" x 3"	2170	2175	2180	2185	2190	2195	2200	2205	2210
8	2 1/4" x 2 1/4"	3 1/4" x 3 1/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
9	2 3/4" x 2 3/4"	3 3/4" x 3 3/4"	2170	2175	2180	2185	2190	2195	2200	2205	2210
10	3" x 3"	4" x 4"	2170	2175	2180	2185	2190	2195	2200	2205	2210



Thompson Johnson Woodworks

118 Island Avenue  
Peaks Island, ME 04108

**GLAZING** 40 1/4" x 30 1/2"

8 1/2" SP < 9 5/8"

\* This window has a standard 1 1/8" frame, 1 1/2" sash and 1/4" glass. \*\* Other window sizes are available. Please call for details.

**Double Hung Bronze Series**

42704

# BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 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.

JB ~~Pre-construction Meeting:~~ Must be scheduled with your inspection team upon receipt of this permit. ~~by Reynolds, Development Review Coordinator at 874-8632 must~~ also be contacted at this time, before any site work begins on any project other than single family additions or alterations.

Footing/Building Location Inspection: Prior to pouring concrete

NA Re-Bar Schedule Inspection: Prior to pouring concrete

Foundation Inspection: Prior to placing ANY backfill

Framing/Rough Plumbing/Electrical: Prior to any insulating or drywalling

Final/Certificate of Occupancy: Prior to any occupancy of the structure or use. ~~NOTE: There is a \$75.00 fee per inspection at this point.~~

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.

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

Paul D. Kelly  
Signature of Applicant/Designee

4.26.04  
Date

Janice Bonke  
Signature of Inspections Official

4/26/04  
Date

CBL: 87-T-9

Building Permit #: 04-0475



DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

PERMIT ISSUED

Please Read  
Application And  
Notes, If Any,  
Attached

# CITY OF PORTLAND

CONSTRUCTION

## PERMIT

APR 26 2004

Permit Number: 040473  
CITY OF PORTLAND

This is to certify that Berndt Arnold Blind/Thompson & Johnson workers

has permission to Build a 16' x 24' addition to a primary residence

AT 292 Island Ave

087 TD09001

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  
give and when permission procured  
before this building or part thereof  
leased or otherwise closed-in.  
HEAR NOTICE IS REQUIRED.

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

### OTHER REQUIRED APPROVALS

Fire Dept.

Health Dept.

Appeal Board

Other

Department Name

*Deanne Bonke* 4/26/04  
Licensor - Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

THOMPSON JOHNSON WOODWORKERS

115 ISLAND AVENUE  
 PEARL ISLAND ME 04108  
 207.766.5919

**A1**

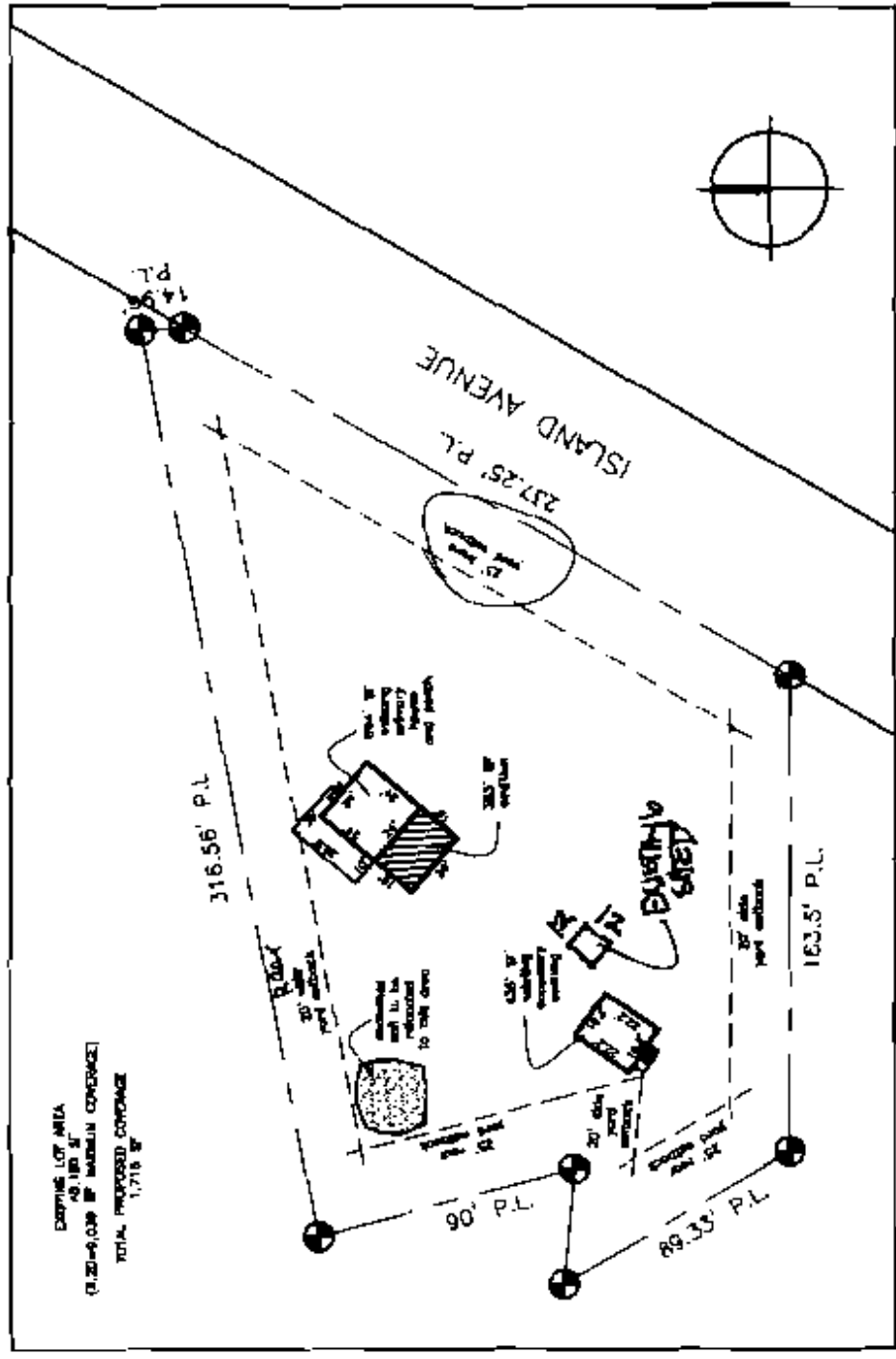
plot plan

Notes

PROJECT: Berndt Residence

DATE: 4.28.04  
 REVISIONS:

SCALE: 1/8" = 1'-0"  
 DRAWN BY:



*IR-2 Zone  
 Front 25' Req 100' shown  
 Rear 25' Req 35' shown  
 Sides 20' Req 100' shown*

THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
P.O. BOX 108  
207.766.6919

**A2**

Notes

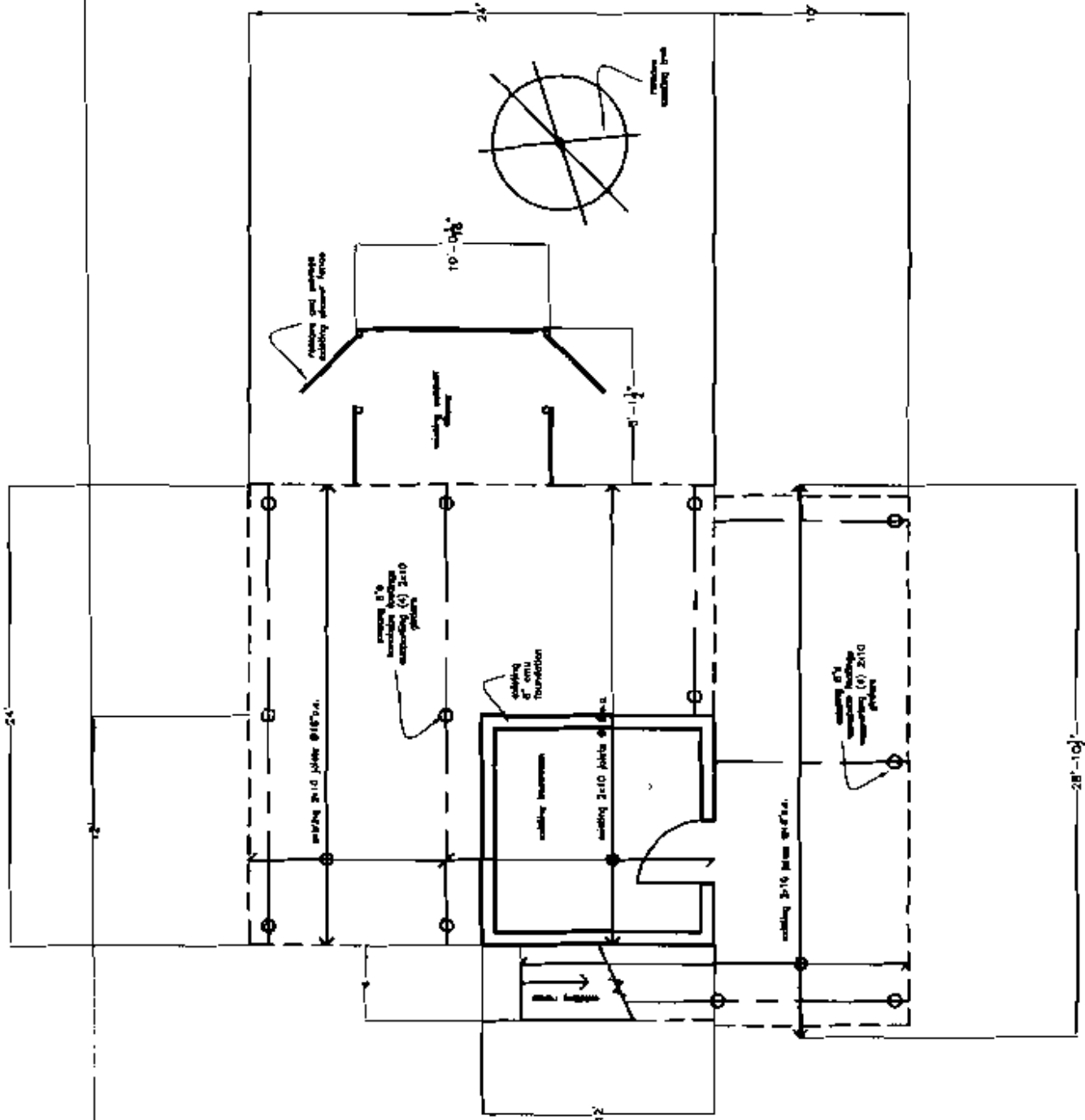
existing foundation/  
first floor framing plan

PROJECT Berndt Residence

DATE 4.26.04 REVISION

SCALE 1/8"=1'-0" DRAWN BY

TEAM



THOMPSON JOHNSON WOODWARD

115 ISLAND AVENUE  
PEARS ISLAND ME 04108  
207.766.5919

**A3**

Notes

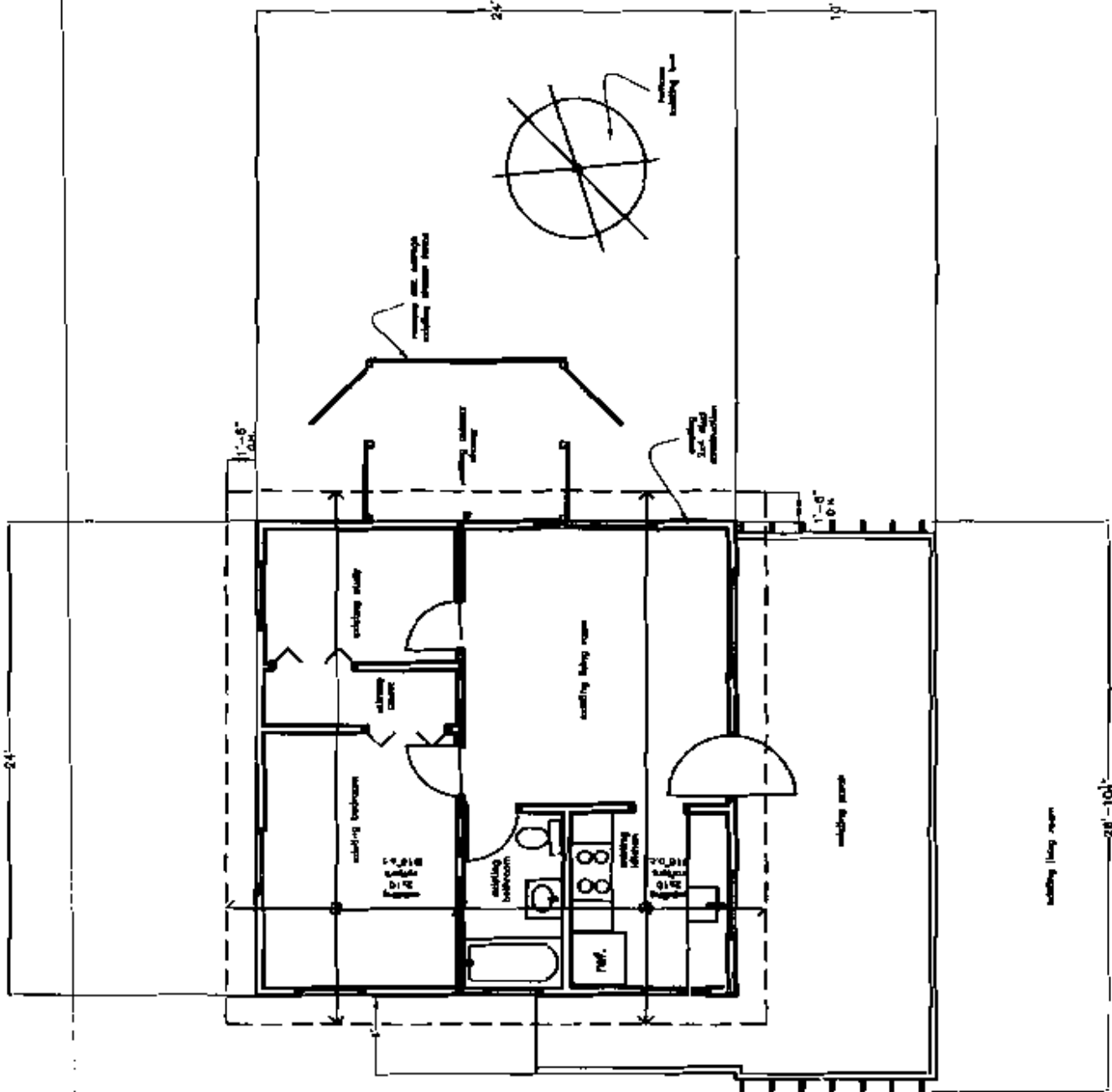
existing first  
floor and roof  
framing plan

PROJECT Berndt Residence

DATE 4.28.04 REVISED

SCALE 1/8"=1'-0" DRAWN BY

ITEM



THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
PEAKS ISLAND MI 48108  
207.766.5919

A4

Notes

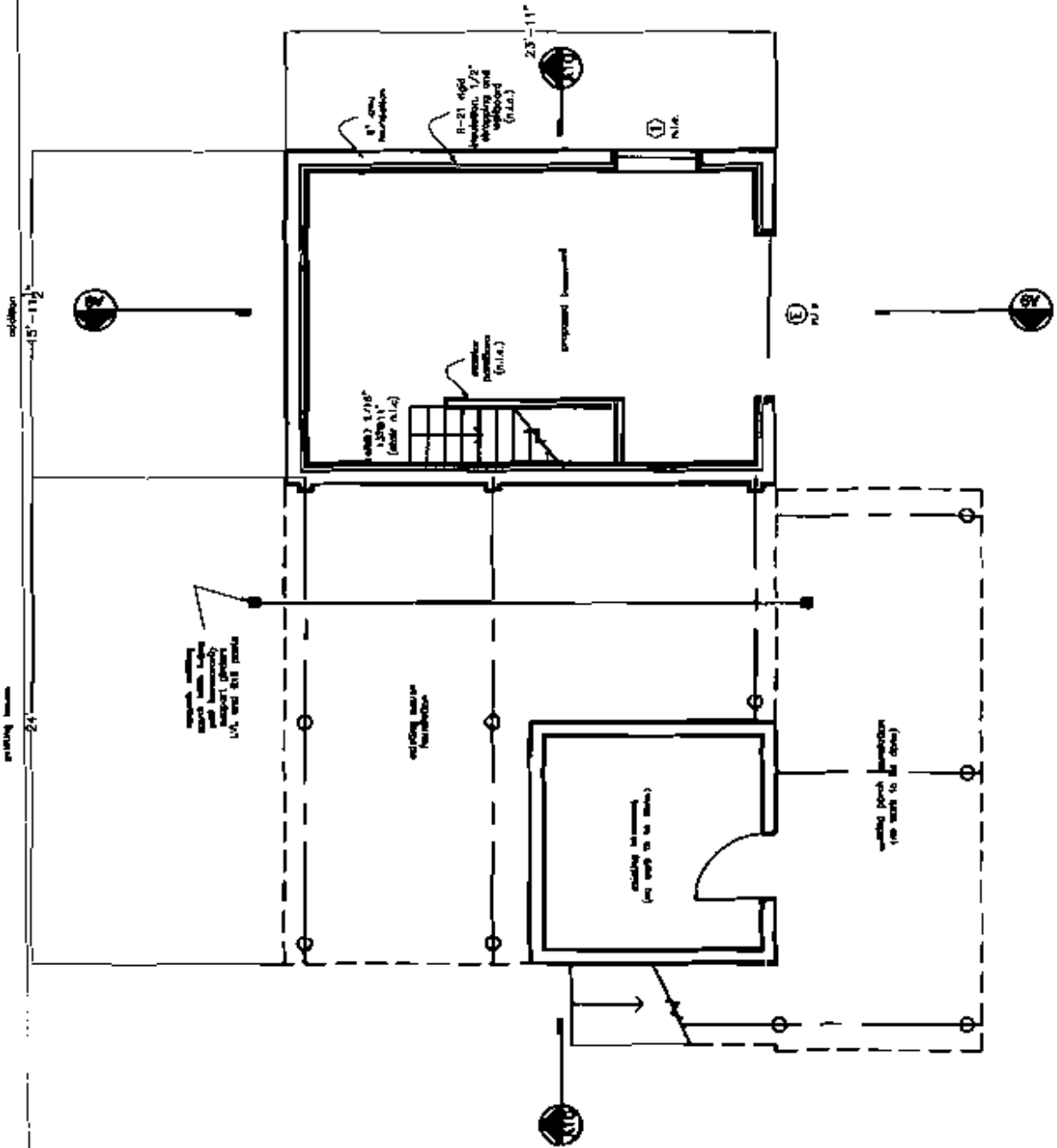
proposed basement

PROJECT Berndl Residence

DATE 4.28.04  
REVISED

SCALE 1/8"=1'-0"  
DRAWN BY

TEAM



THOMPSON JOHNSON WOODWORKS  
 115 ISLAND AVENUE  
 PEASE-RE-AND-WE 04468  
 207.766.5919

**A5**

proposed first floor plan

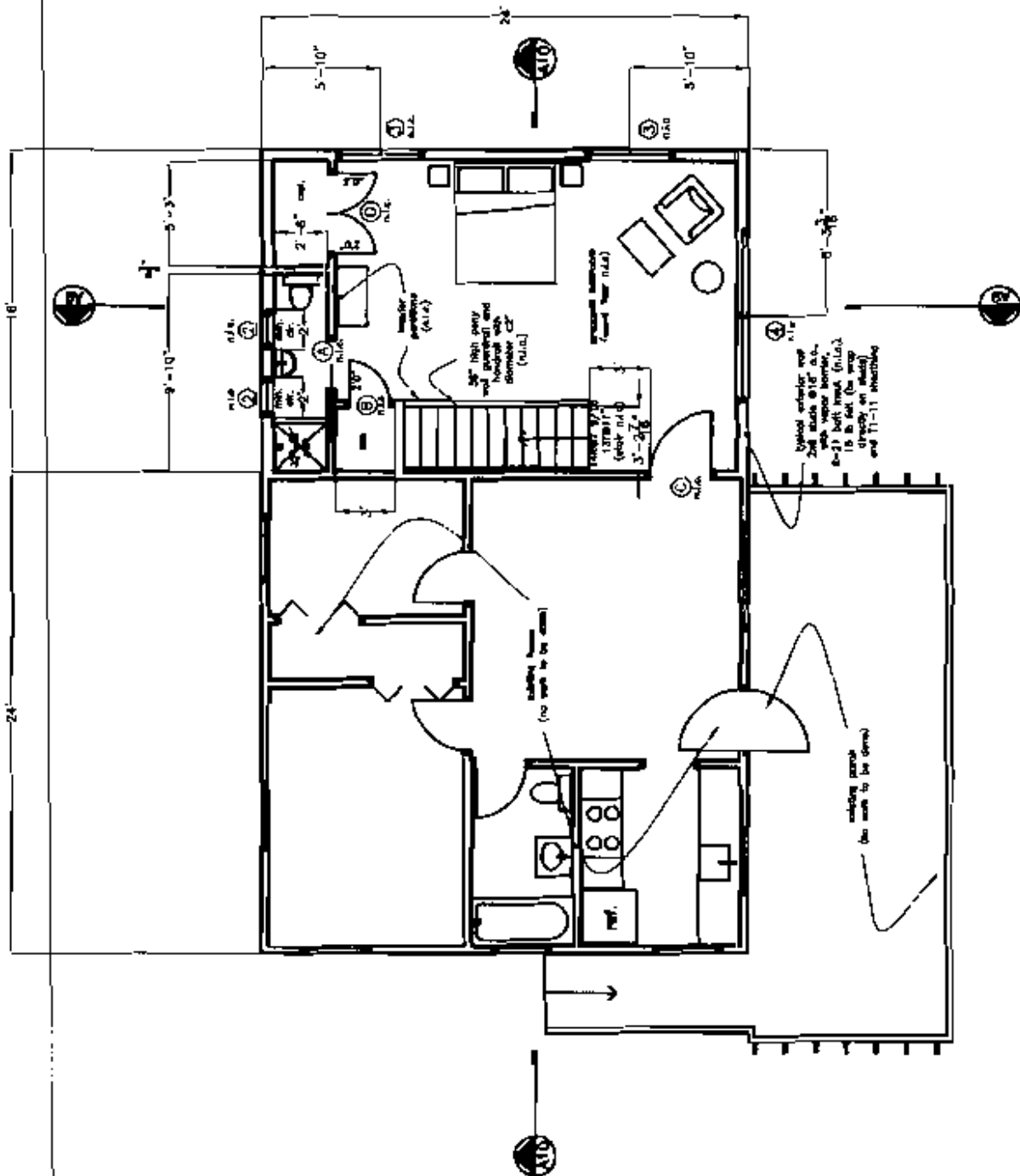
Notes

PROJECT Berndt Residence

DATE 4.26.04 REVISED

SCALE 1/8" = 1'-0" DRAWN BY

ITB



THOMPSON JOHNSON ARCHITECTS

115 ISLAND AVENUE  
PEARL BEACH, NE 04108  
207.766.5919

A6

Notes

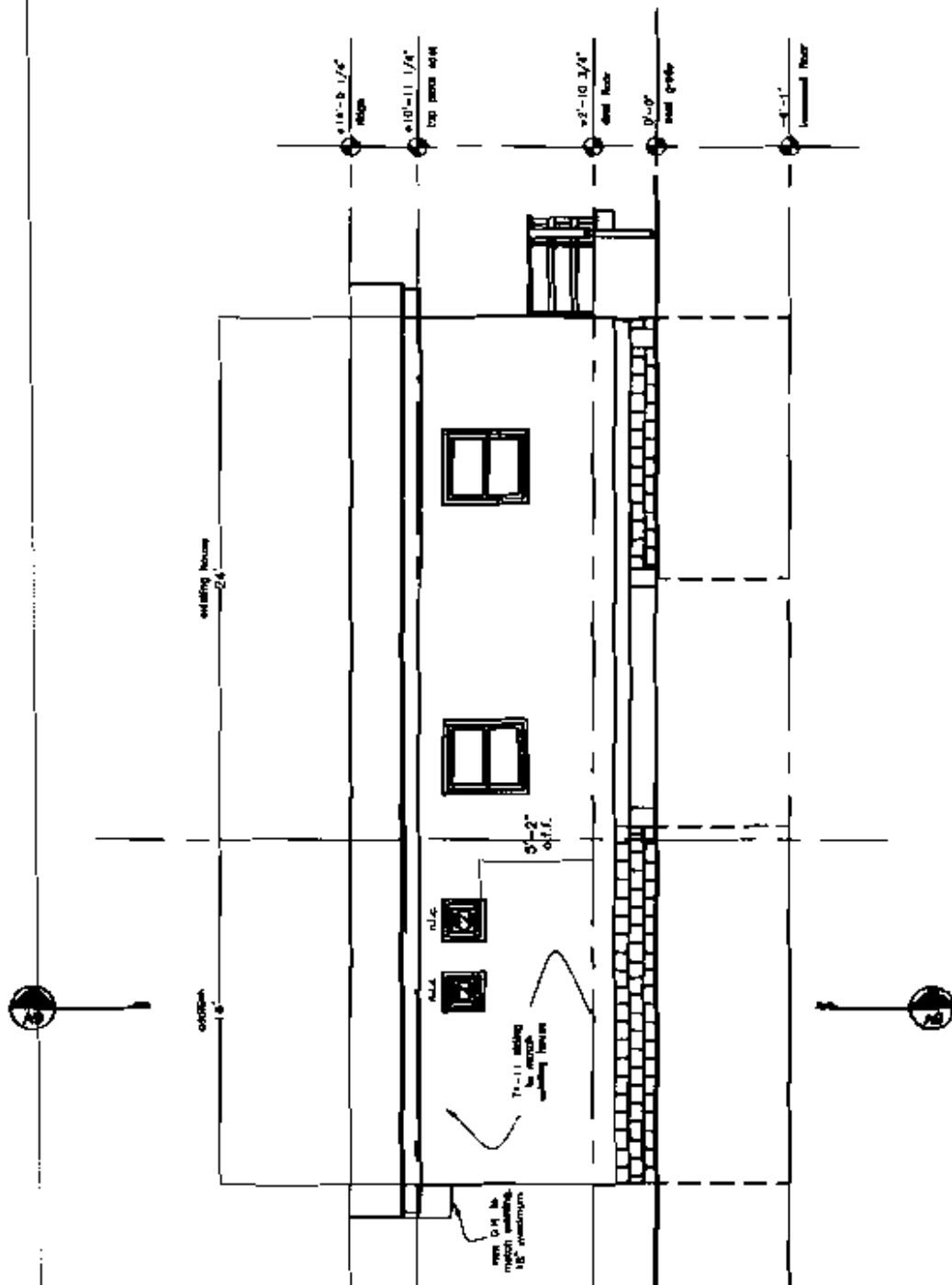
proposed east  
elevation

PROJECT Berndt Residence

DATE 4.26.04 REVISED

SCALE 1/8" = 1'-0" DRAWN BY

TTDA



THOMPSON JOHNSON ARCHITECTS

115 ISLAND AVENUE  
PEASE-IBLAND-NE-04108  
207.766.5919

A7

Notes

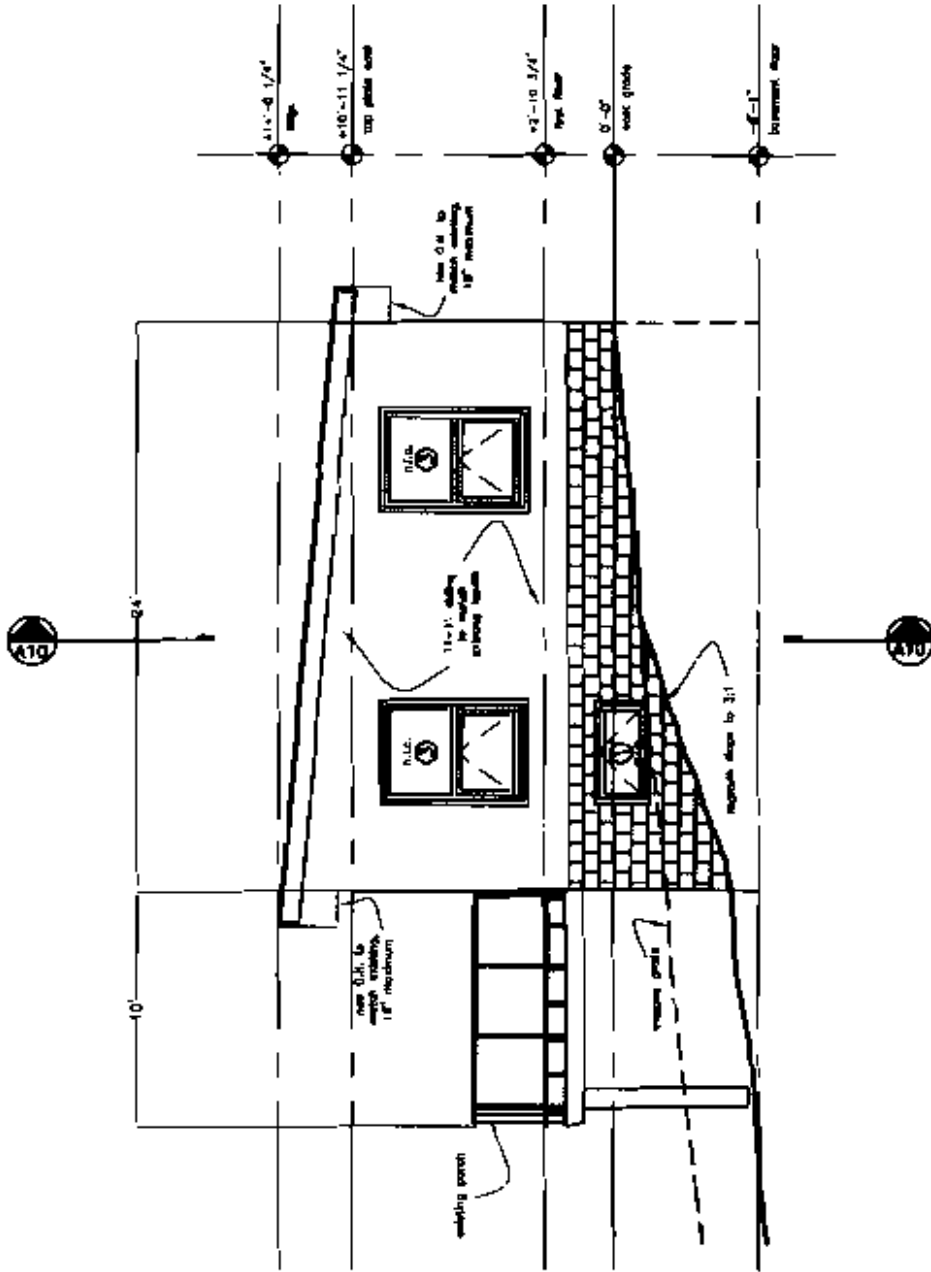
proposed south  
elevation

PROJECT Berndt Residence

DATE 4.26.04  
REVISED

SCALE 1/8"=1'-0"  
DRAWN BY

ITEM











THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
PEARS ISLAND RE 04108  
207.766.5919

**S1**

Notes

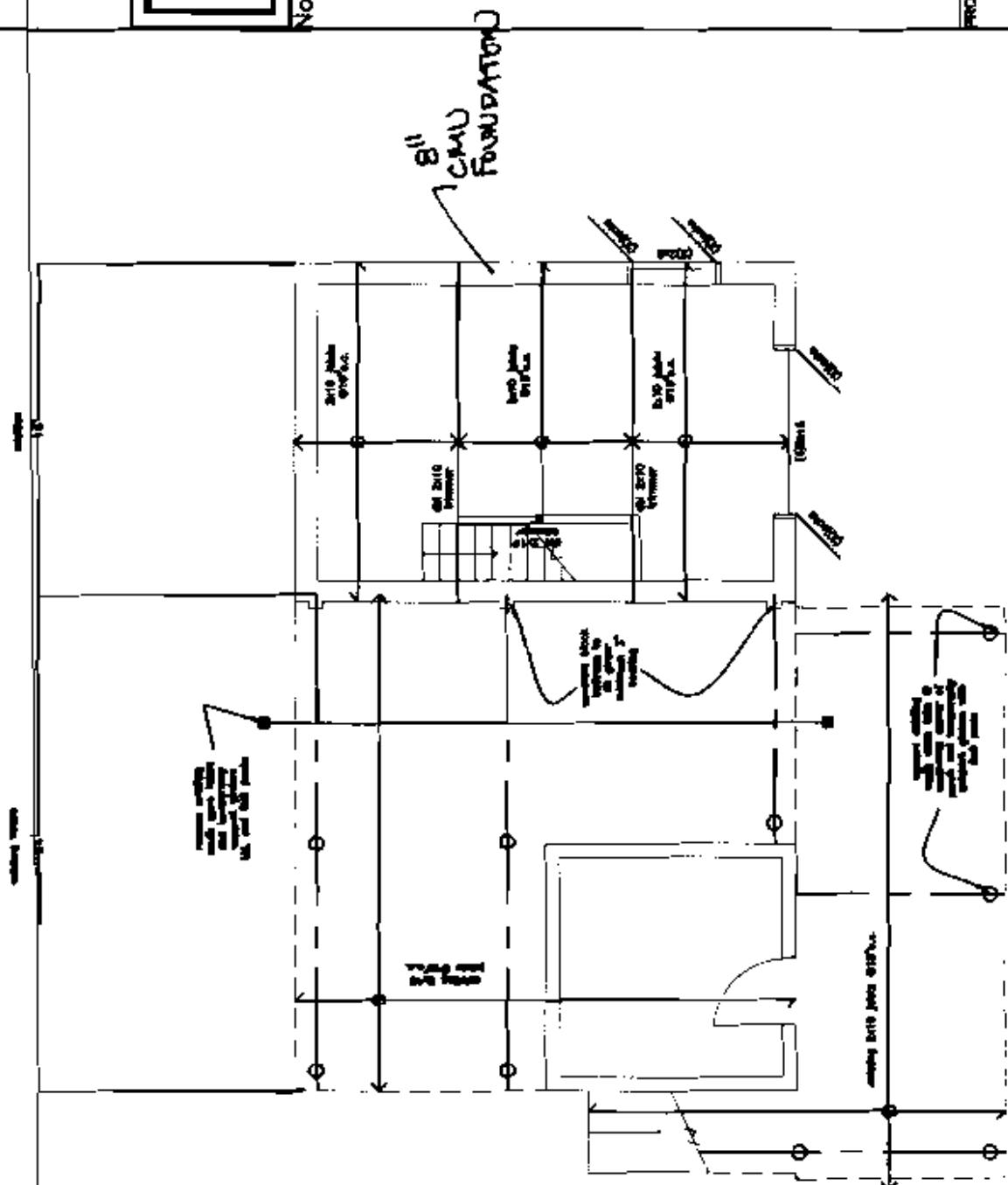
foundation plan/  
first floor framing

PROJECT  
Berndt Residence

DATE 4.26.04  
REVISED

SCALE  
1/8"=1'-0"

DRAWN BY  
ITEM



THOMPSON JOHNSON WOODWORKERS

115 ISLAND AVENUE  
PEAKS ISLAND ME 04106  
207.766.5910

S2

Notes

ceiling joist/roof  
framing

PROJECT

Berndt Residence

DATE

4.26.04

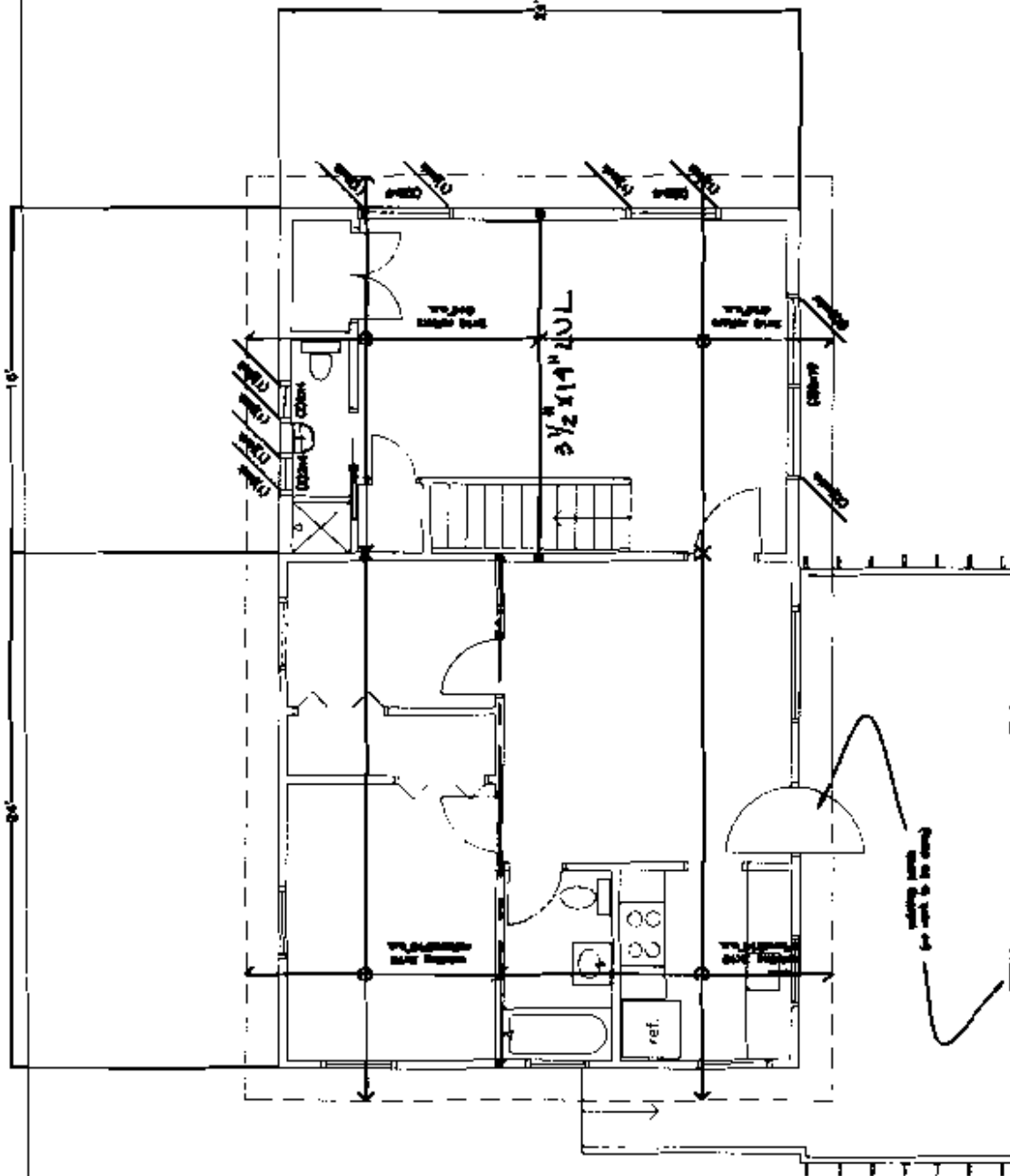
REVISED

SCALE

1/8" = 1'-0"

DRAWN BY

ITEM



rim joist

existing  
fl. joists

2x10 joists @ 16"o.c.

exist. (4) 2x10 girder

3 min.  
bearing

P.T. sill plate  
bolted to cmu,  
existing girder toe-  
nailed to plate

structural skin  
applied to cmu

sill plate

bond beam  
@ top & mid  
course w/ (2)  
#5 horizontal  
rebar

wire mesh

R-21 rigid  
insulation

1/2" strapping  
@ 16"o.c.

1/2" gypsum

THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
PEAKS ISLAND ME 04108  
207.766.6919

**S3**

Notes

butress/girder seat

PROJECT Berndt Residence

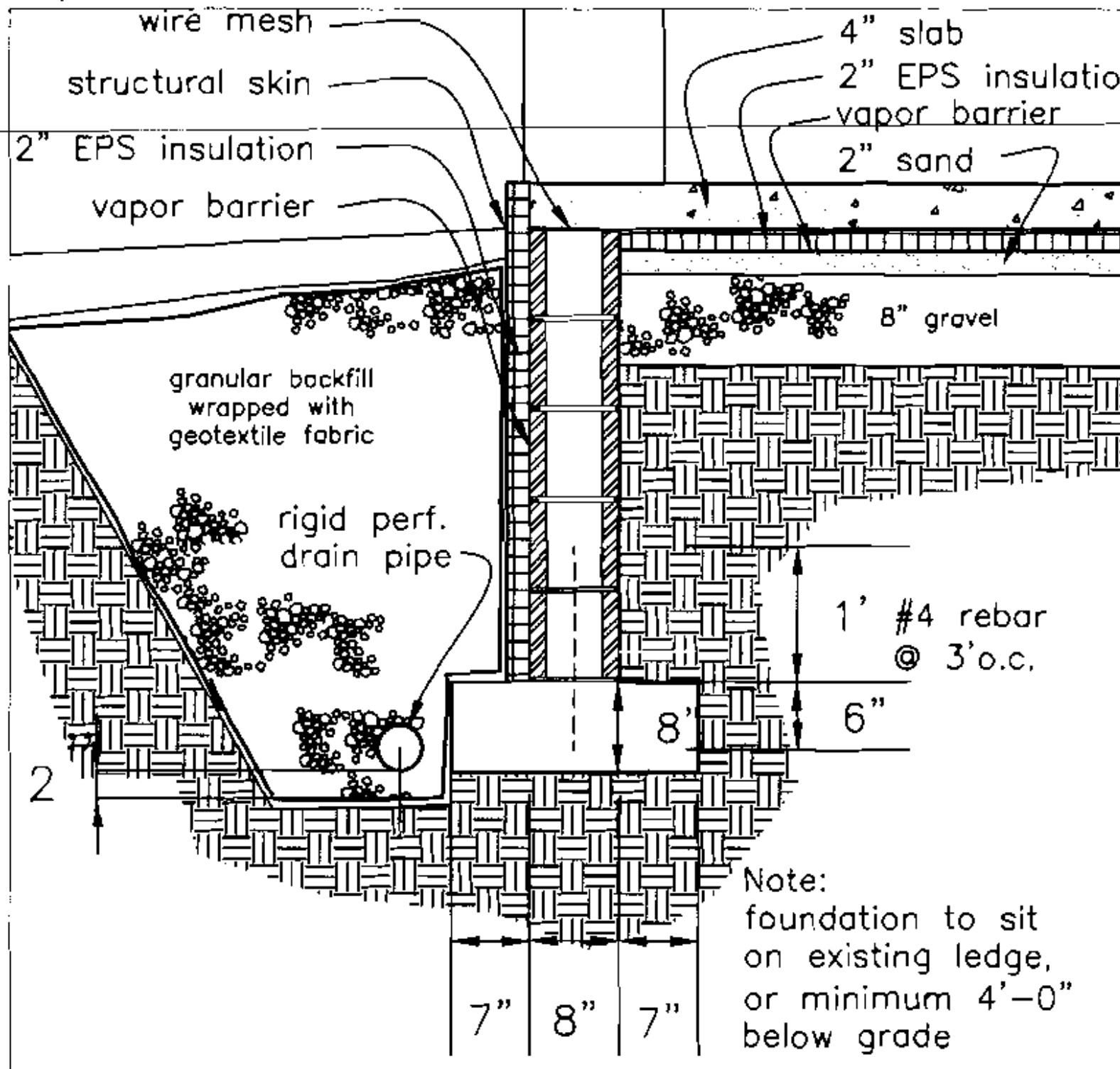
DATE 4.28.04

REVISED

SCALE 1"=1'-0"

DRAWN BY

ITEM



THOMPSON JOHNSON WOODWORKS  
 115 ISLAND AVENUE  
 PEAKS ISLAND ME 04108  
 207.766.5919

S4

Notes

drainage @  
 basement  
 door threshold

Note:  
 foundation to sit  
 on existing ledge,  
 or minimum 4'-0"  
 below grade

PROJECT Berndt Residence	
DATE 4.14.04	REVISED
SCALE 1"=1'-0"	DRAWN BY
ITEM	

THOMPSON JOHNSON WOODWORKS

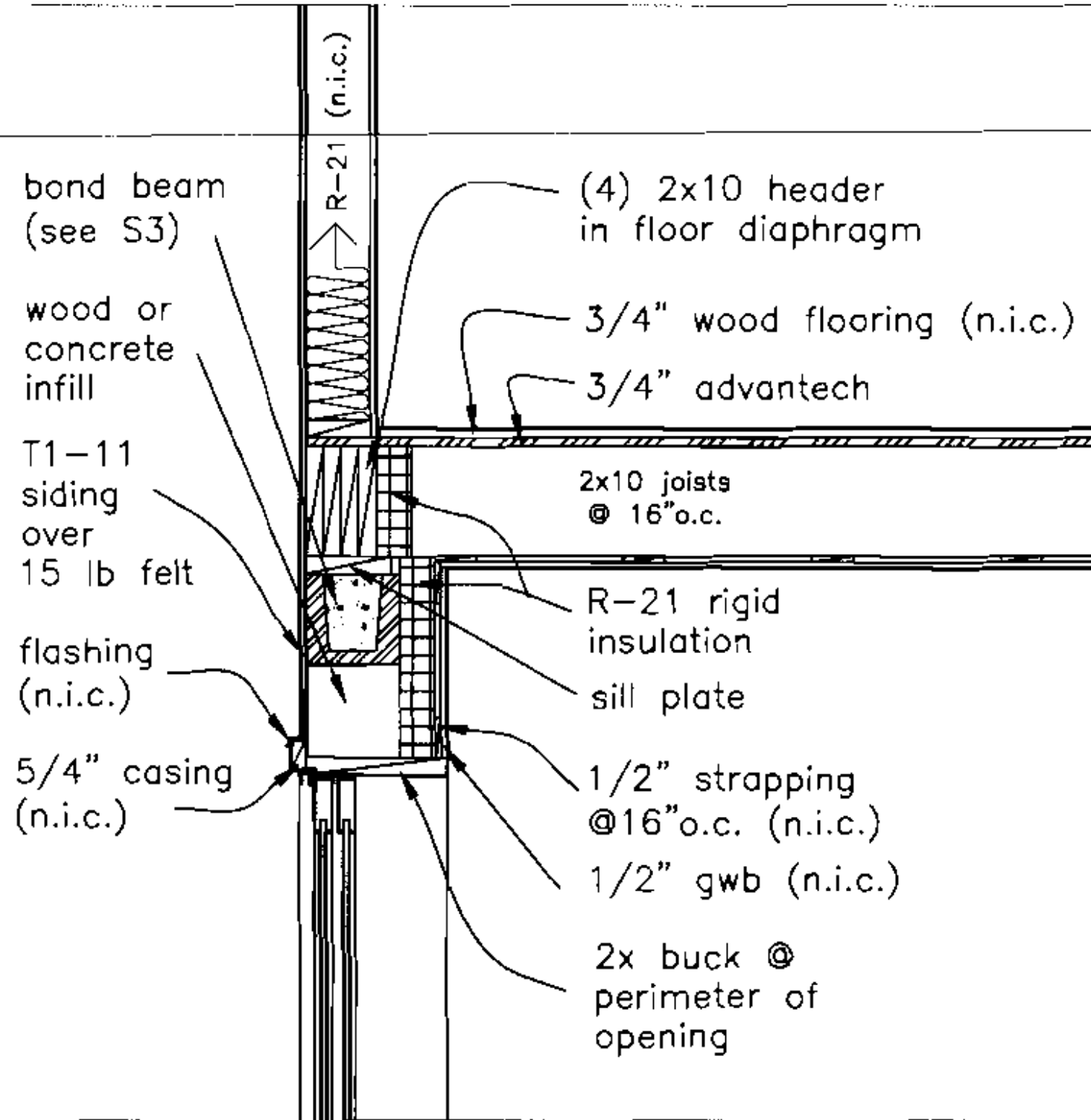
115 ISLAND AVENUE  
PEAKS ISLAND ME 04108  
207.766.5919

# S5

Notes

basement header

PROJECT	
Berndt Residence	
DATE	REVISED
4.14.04	
SCALE	DRAWN BY
1"=1'-0"	
ITEM	



bond beam  
(see S3)

wood or  
concrete  
infill

T1-11  
siding  
over  
15 lb felt

flashing  
(n.i.c.)

5/4" casing  
(n.i.c.)

R-21 (n.i.c.)

(4) 2x10 header  
in floor diaphragm

3/4" wood flooring (n.i.c.)

3/4" advantech

2x10 joists  
@ 16" o.c.

R-21 rigid  
insulation

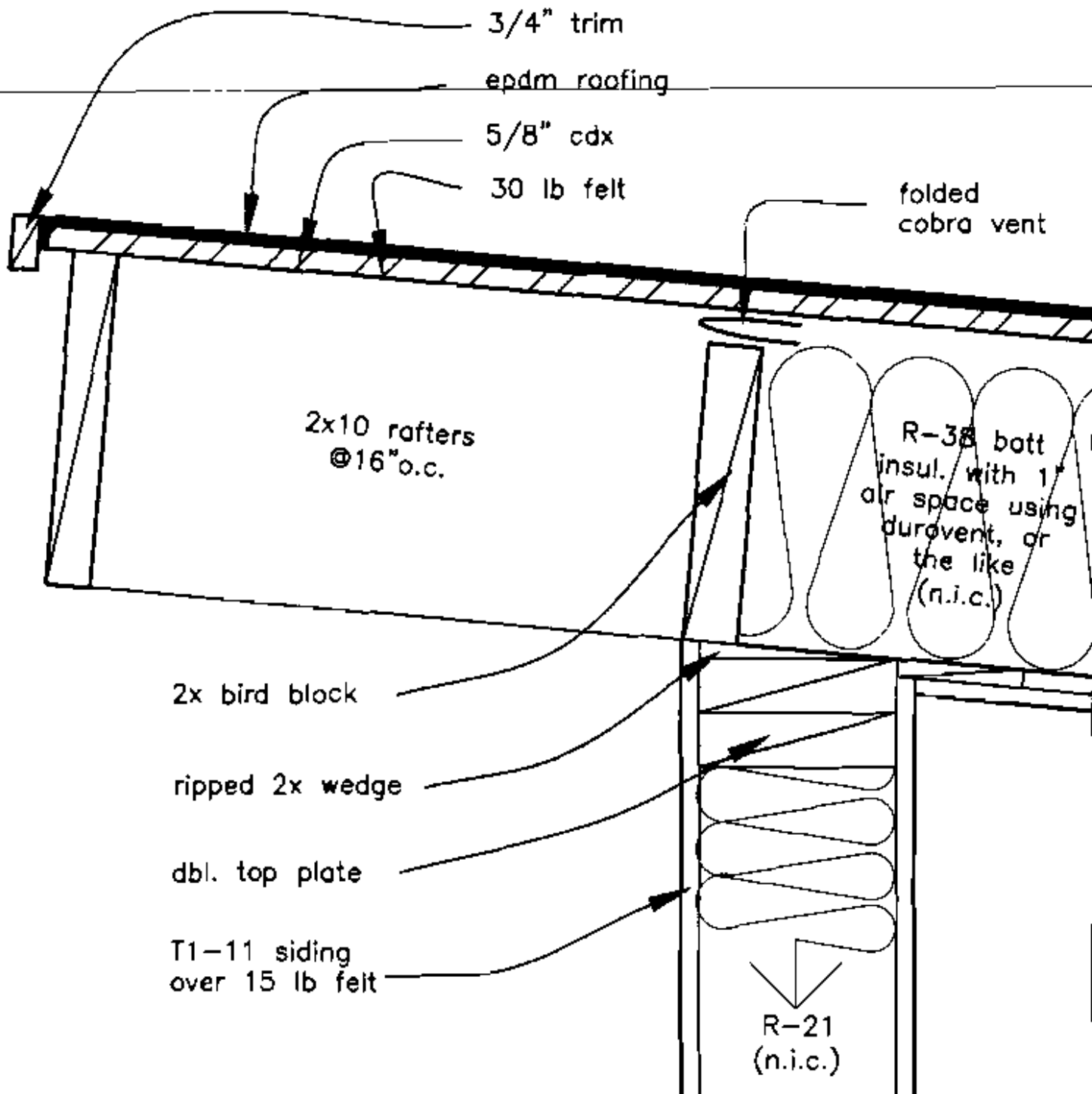
sill plate

1/2" strapping  
@ 16" o.c. (n.i.c.)

1/2" gwb (n.i.c.)

2x buck @  
perimeter of  
opening





○  
THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
PEAKS ISLAND, ME 04208  
207.766.5919

**S6**

Notes

bird blocking (n.i.c.)

PROJECT Berndt Residence

DATE 4.14.04

REVISED

SCALE 3"=1'-0"

DRAWN BY

ITEM

THOMPSON JOHNSON WOODWORKERS














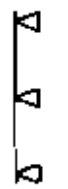

115 ISLAND AVENUE

PEARLS ISLAND WA 98108  
207.766.5919

**E1**

Notes

electrical key

-  duplex
-  ground-fault circuit interrupter
-  220 volt
-  switch
-  3-way switch
-  dimmer switch
-  smoke detector
-  minimum 50 cfm vent fan
-  ceiling mount light fixture
-  pendant light fixture
-  recessed can light fixture
-  wall sconce light fixture
-  wet location wall sconce light fixture
-  trak lighting
-  fluorescent locally switched

MIN.50  
CFM

PROJECT Bemolt Residence

DATE 4.14.04 REVISED

SCALE 1/8"=1'-0" DRAWN BY

ITEMS

THOMPSON JOHNSON WOODWORKS

115 ISLAND AVENUE  
VENUE BUILDING #C-06106  
207.766.5919

**E2**

Notes

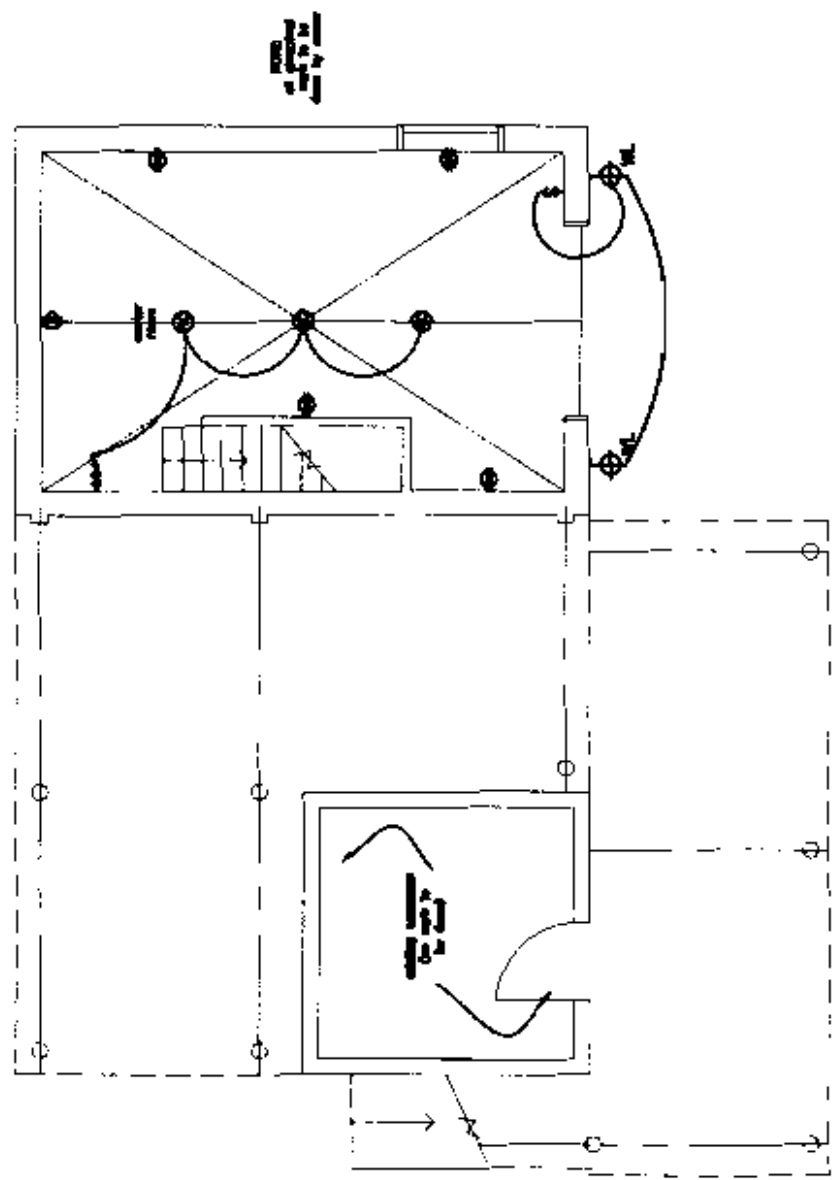
basement power  
and lighting plan

PROJECT  
Berndt Residence

DATE  
4.14.03

SCALE  
1/8" = 1'-0"

ITEM



THOMPSON JOHNSON WOODWORKS

118 ISLAND AVENUE  
PEARL ISLAND, HI 96708  
207.766.5419

E3

Notes

first floor power  
and lighting plan

PROJECT

Berndt Residence

DATE

4.14.04

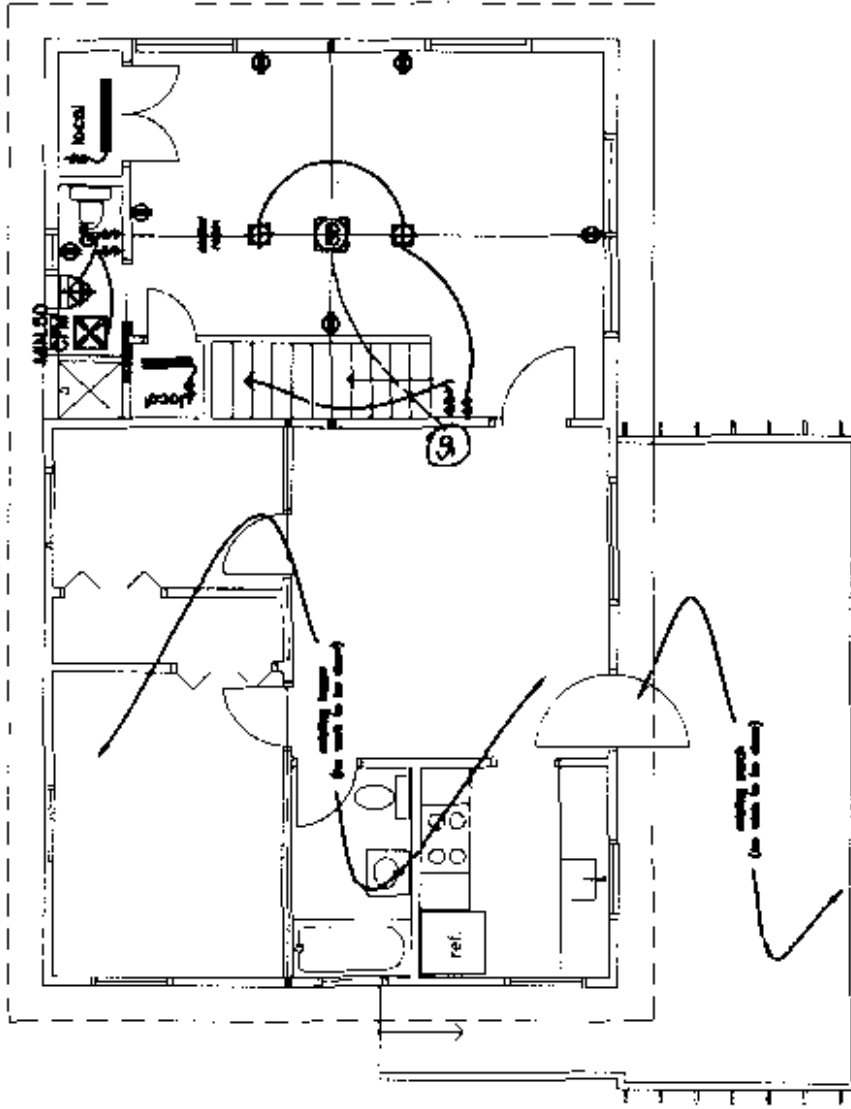
REVISED

SCALE

1/8" = 1'-0"

DRAWN BY

MEM



ARC FAULT PROTECTIVE DEVICE

w/ Arc Fault C-118200000 for Gideon receptacles

Thompeon Johnson Woodworks  
115 Island Avenue  
Peaks Island, Maine 04108

## Window Schedule

QTY	WINDOW	MANUFACTURER	MATERIAL	GLASS	OPER	WIDTH	HEIGHT	JAMB
1	1	bonneville 4317	wood int/alum clad out	NA	awning	47 5/8"	22 5/8"	
2	2	bonneville 1712	wood int/alum clad out	NA	awning	21 5/8"	17 3/4"	
2	3	bonneville 4331	wood int/alum clad out	tempered	awning	47 5/8"	69 7/8"	
1	4	bonneville 4341	wood int/alum clad out	NA	awning	94 1/4"	69 7/8"	

If it meets all the requirements  
of 2406.2 7.1-7.4

## Door Schedule

QTY	DOOR	MANUFACTURER	MATERIAL	GLASS	OPER	WIDTH	HEIGHT	JAMB
1	A	bonneville	hollow core	NA	pocket	30"	80"	
1	B	bonneville	hollow core	NA	LH	24"	80"	
1	C	bonneville	hollow core	NA	RH	36"	80"	
1	D	bonneville	hollow core	NA	pair	24"	80"	
1	E	bonneville	wood int/alum clad out	tempered	slider	66"	80"	