

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that ANDREW DOUKAS

Located At 133 PLEASANT AVE PI

Job ID: 2012-06-4147-SUBSRF

CBL: 090- S-003-001

has permission to subsurface replacement (complete non-engineered system).

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

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

07/25/2012

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**

 - **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**
1. Septic field and extension inspection for bottom preparation/ scarification to verify removal of vegetation, established transitional horizon and erosion and sedimentation control measures.
 2. Backfill inspection of septic field for approved materials, stabilization, slopes and extensions.
 3. Exposed septic field installation and tank location inspection to check elevations, dimensions, piping, plumbing station and system design prior to covering.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Receipts Details:

Tender Information: Check , BusinessName: Andrew J Doukas, Check Number: 1426
Tender Amount: 260.00

Receipt Header:

Cashier Id: gguertin
Receipt Date: 6/4/2012
Receipt Number: 44583

Receipt Details:

Referance ID:	6751	Fee Type:	PL-NonEng
Receipt Number:	0	Payment Date:	
Transaction Amount:	250.00	Charge Amount:	250.00
Job ID: Job ID: 2012-06-4147-SUBSRF - complete non-engineered system			
Additional Comments: Andrew Doukas			

Referance ID:	6752	Fee Type:	BPPLAD
Receipt Number:	0	Payment Date:	
Transaction Amount:	10.00	Charge Amount:	10.00
Job ID: Job ID: 2012-06-4147-SUBSRF - complete non-engineered system			



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SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5872 FAX (207) 287-3185

PROPERTY LOCATION		>>CAUTION: LPI APPROVAL REQUIRED<<	
City, Town, or Plantation	PORTLAND (PEAKS ISLAND)	Town/City	<u>Portland</u> Permit # <u>2012 06 4149</u>
Street or Road	133 PLEASANT AVENUE	Date Permit Issued	<u>4/12</u> Fee \$ <u>250.00</u> Double Fee Charged []
Subdivision, Lot #		Local Plumbing Inspector Signature	<u>[Signature]</u> LPI # <u>360</u>
OWNER/APPLICANT INFORMATION		The Subsurface Wastewater Disposal System <i>shall not</i> be installed until a Permit is issued 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.	
Name (last, first, MI)	<u>DOUKAS ANDREW</u>	Municipal Tax Map #	<u>90</u> Lot # <u>5-3</u>
Mailing Address of Owner/Applicant	<u>673 CONGRESS STREET PORTLAND, MAINE 04101</u>		
Daytime Tel. #	<u>871-7232</u>		

OWNER OR APPLICANT STATEMENT

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.

[Signature] Signature of Owner/Applicant RECEIVED 6-4-2012 Date

11944

t to be in compliance

(1st) Date Approved _____

(2nd) Date Approved _____

PERMIT INFORMATION

<p>TYPE OF APPLICATION</p> <p><input type="checkbox"/> 1. First Time System</p> <p><input checked="" type="checkbox"/> 2. Replacement System</p> <p>Type Replaced: <u>CESSPOOL</u></p> <p>Year Installed: <u>UNKNOWN</u></p> <p><input type="checkbox"/> 3. Expanded System</p> <p><input type="checkbox"/> a. <25% Expansion</p> <p><input type="checkbox"/> b. >25% Expansion</p> <p><input type="checkbox"/> 4. Experimental System</p> <p><input type="checkbox"/> 5. Seasonal Conversion</p>	<p>THIS APPLICATION REQUIRES</p> <p>* SEE ATTACHED LEGAL DEED EASEMENT *</p> <p><input type="checkbox"/> 1. First Time System Variance</p> <p><input type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State & Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 3. Replacement System Variance</p> <p><input type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State & Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 4. Minimum Lot Size Variance</p> <p><input type="checkbox"/> 5. Seasonal Conversion Permit</p>	<p>DISPOSAL SYSTEM COMPONENTS</p> <p><input checked="" type="checkbox"/> 1. Complete Non-Engineered System</p> <p><input type="checkbox"/> 2. Primitive System (graywater & alt toilet)</p> <p><input type="checkbox"/> 3. Alternative Toilet, specify: _____</p> <p><input type="checkbox"/> 4. Non-Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 5. Holding Tank, _____ gallons</p> <p><input type="checkbox"/> 6. Non-Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 7. Separated Laundry System</p> <p><input type="checkbox"/> 8. Complete Engineered System (2000gpd+)</p> <p><input type="checkbox"/> 9. Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 10. Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 11. Pre-treatment, specify: _____</p> <p><input type="checkbox"/> 12. Miscellaneous components</p>
<p>SIZE OF PROPERTY</p> <p><u>2,500+/-</u> <input checked="" type="checkbox"/> SQ. FT.</p> <p><input type="checkbox"/> ACRES</p>	<p>DISPOSAL SYSTEM TO SERVE</p> <p><input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>1 - 2</u></p> <p><input type="checkbox"/> 2. Multiple Family Dwelling, No of Units: _____</p> <p><input type="checkbox"/> 3. Other: _____</p> <p>(specify)</p> <p>Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	<p>TYPE OF WATER SUPPLY</p> <p><input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private</p> <p><input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____</p>
<p>SHORELAND ZONING</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p><input checked="" type="checkbox"/> 1. Concrete</p> <p><input checked="" type="checkbox"/> a. Regular</p> <p><input type="checkbox"/> b. Low Profile</p> <p><input type="checkbox"/> 2. Plastic</p> <p><input type="checkbox"/> 3. Other: _____</p> <p>CAPACITY: <u>1000</u> GAL.</p>	<p>DISPOSAL FIELD TYPE & SIZE</p> <p><input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench</p> <p><input checked="" type="checkbox"/> 3. Proprietary Device</p> <p><input type="checkbox"/> a. Cluster array <input checked="" type="checkbox"/> c. Linear</p> <p><input checked="" type="checkbox"/> b. Regular <input type="checkbox"/> d. H-20 loaded</p> <p><input type="checkbox"/> 4. Other: _____</p> <p>SIZE: <u>660</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.</p> <p><u>IS LOW PROFILE PLASTIC CHAMBERS</u></p>	<p>GARBAGE DISPOSAL UNIT</p> <p><input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe</p> <p>If Yes or Maybe, specify one below:</p> <p><input type="checkbox"/> a. Multi-compartment tank</p> <p><input type="checkbox"/> b. _____ tanks in series</p> <p><input type="checkbox"/> c. Increase in tank capacity</p> <p><input type="checkbox"/> d. Filter on tank outlet</p>	<p>DESIGN FLOW</p> <p><u>180</u> gallons per day</p> <p>BASED ON:</p> <p><input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s))</p> <p><input type="checkbox"/> 2. Table 4C (other facilities)</p> <p>SHOW CALCULATIONS for other facilities</p> <p>SINGLE FAMILY DWELLING</p> <p>1 OR 2 BEDROOMS AT</p> <p>90 GALLONS PER DAY EACH</p>
<p>SOIL DATA & DESIGN CLASS</p> <p>PROFILE <u>3</u> / CONDITION <u>AIII/C</u></p> <p>at Observation Hole # <u>TP 1</u></p> <p>Depth <u>40</u> "</p> <p>of Most Limiting Soil Factor</p>	<p>DISPOSAL FIELD SIZING</p> <p><input type="checkbox"/> 1. Medium - 2.6 sq.ft./gpd</p> <p><input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq.ft./gpd</p> <p><input type="checkbox"/> 3. Large - 4.1 sq.ft./gpd</p> <p><input type="checkbox"/> 4. Extra-Large - 5.0 sq.ft./gpd</p>	<p>EFFLUENT/EJECTOR PUMP</p> <p><input type="checkbox"/> 1. Not required SEE NOTE ON</p> <p><input checked="" type="checkbox"/> 2. May be required PAGE 3</p> <p><input type="checkbox"/> 3. Required</p> <p>Specify only for engineered systems:</p> <p>DOSE: _____ gallons</p>	<p>LATITUDE AND LONGITUDE</p> <p>at center of disposal area</p> <p>Lat. <u>N 43</u> d <u>39</u> m <u>51</u> s</p> <p>Lon. <u>W 70</u> d <u>11</u> m <u>32</u> s</p> <p>If g.p.s., state margin of error</p>

SITE EVALUATOR STATEMENT

I Certify that on 12-20-11 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Albert Frick Site Evaluator Signature 63 SE # 12/22/2011 Date

ALBERT FRICK Site Evaluator Name Printed (207) 839-5563 Telephone Number ALBERT@ALBERTFRICK.COM E-mail Address

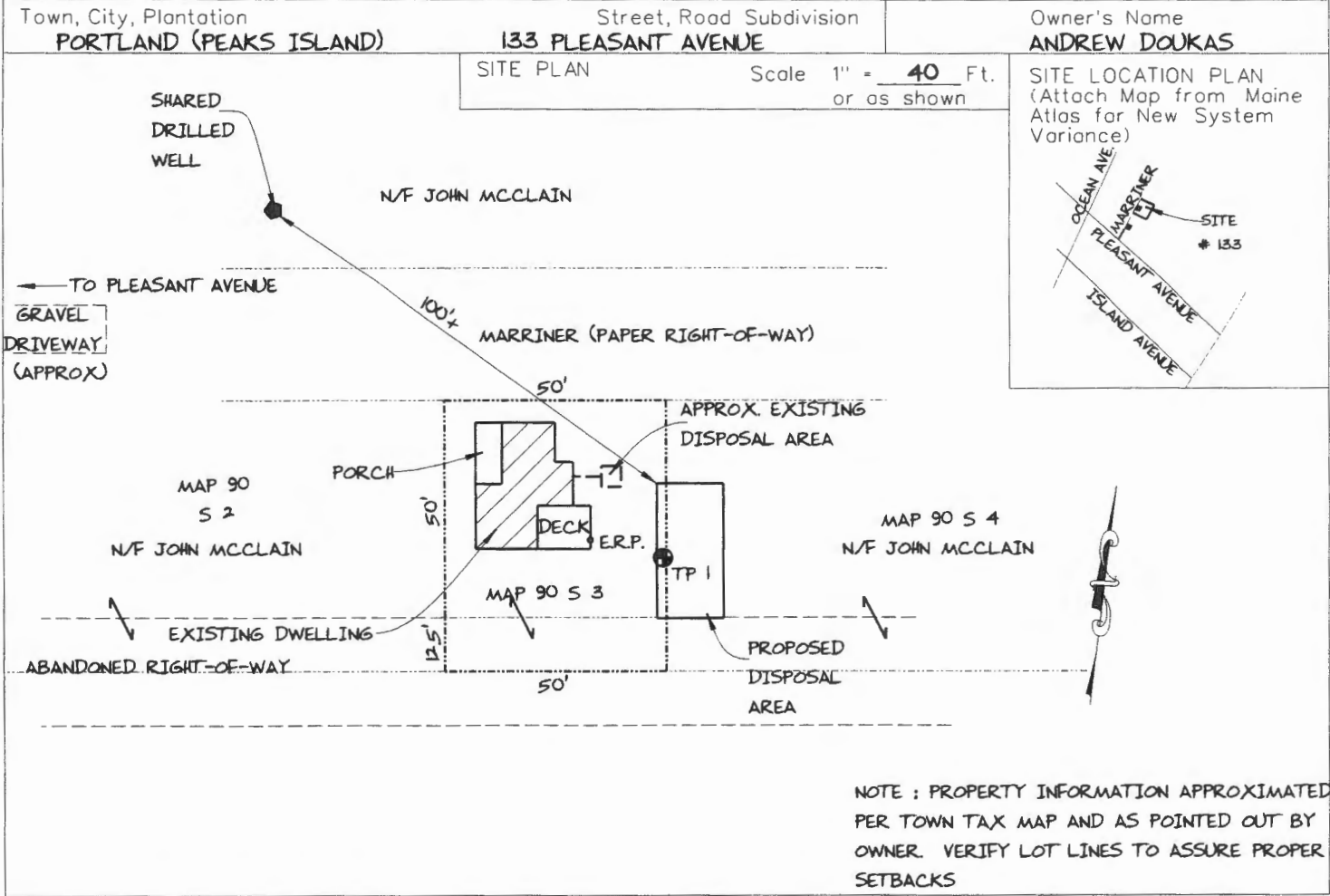
ALBERT FRICK ASSOCIATES - 95A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

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

Page 1 of 3
HHE-200 Rev. 02/2011

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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



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

Observation Hole TP 1 Test Pit Boring
 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SANDY		DARK	
	LOAM		BROWN	
10	GRAVELLY LOAMY SAND	FRIABLE	DARK YELLOWISH BROWN	
20	GRAVELLY LOAMY SAND		YELLOWISH BROWN	
30	SAND			
40		SOMEWHAT FIRM	OLIVE BROWN	FEW, DISTINCT
		REFUSAL		
		BEDROCK OR HARDPAN		
50				

Soil Classification: **3** Profile, **AIII/C** Condition
 Slope: **1** %
 Limiting Factor: **40**
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Observation Hole _____ Test Pit Boring
 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification: _____ Profile, _____ Condition
 Slope: _____ %
 Limiting Factor: _____
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Albert Frick
 Site Evaluator Signature

163
 SE

12/22/2011
 Date

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

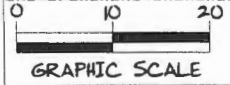
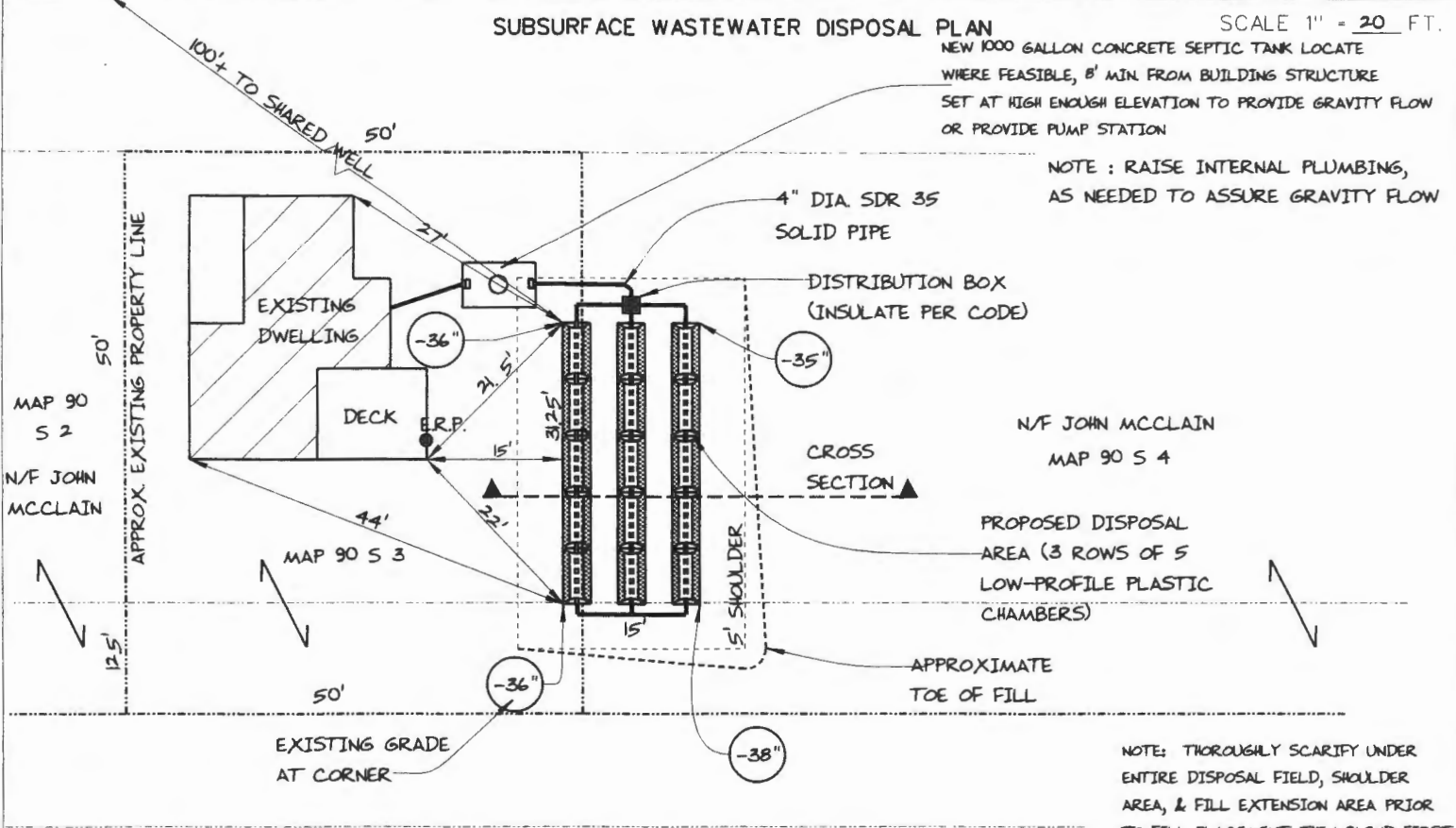
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Division of Health Engineering, Station 10, SHS
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation PORTLAND (PEAKS ISLAND)	Street, Road, Subdivision 133 PLEASANT AVENUE	Owner's Name ANDREW DOUKAS
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SUBSURFACE WASTEWATER DISPOSAL PLAN SCALE 1" = 20' FT.

NEW 1000 GALLON CONCRETE SEPTIC TANK LOCATE WHERE FEASIBLE, 8' MIN. FROM BUILDING STRUCTURE SET AT HIGH ENOUGH ELEVATION TO PROVIDE GRAVITY FLOW OR PROVIDE PUMP STATION

NOTE: RAISE INTERNAL PLUMBING, AS NEEDED TO ASSURE GRAVITY FLOW



NOTE: SEE ATTACHED LEGAL DEED EASEMENT

NOTE: THOROUGHLY SCARIFY UNDER ENTIRE DISPOSAL FIELD, SHOULDER AREA, & FILL EXTENSION AREA PRIOR TO FILL PLACEMENT, THEN BLEND FIRST 6" LIFT OF FILL INTO EXISTING SOIL SURFACE TO PROMOTE MIXING

FILL REQUIREMENTS

Depth of Fill (Upslope) = 0"
Depth of Fill (Downslope) = 0" - 2"
DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation
Top of Distribution Pipe or Proprietary Device
Bottom of Disposal Area

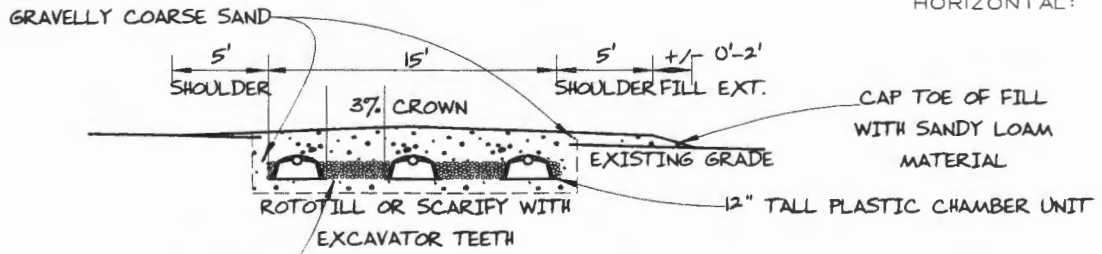
SEE
DETAIL
BELOW

ELEVATION REFERENCE POINT

Location & Description TOP OF PORCH RAILING, 32" ABOVE GRADE
Reference Elevation is: 0.0" or -----

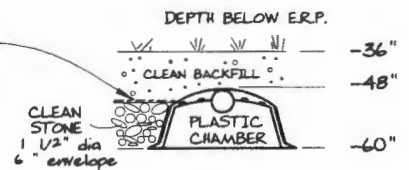
DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 10'
HORIZONTAL: 1" = 10'



1 1/2" DIA. CLEAN CRUSHED STONE
(6" AROUND CHAMBER PERIMETER AND ENTIRE AREA BETWEEN ROWS WITH 2" HAY LAYER OR FILTER FABRIC OVER STONE)

PLACE 2" HAY LAYER OR FILTER FABRIC OVER CRUSHED STONE



Albert Frick
Site Evaluator Signature

163
SE #

12/22/2011
Date

DETAIL (NO SCALE)