

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-6672 FAX (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation: **PORTLAND, PEAKS ISLAND**

Street or Road: **109 SARGENT ROAD**

Subdivision, Lot #:

>>CAUTION: LPI APPROVAL REQUIRED<<

Town/City: _____ Permit #: _____

Date Permit Issued: **9/24/15** Fee \$ _____ Double Fee Charged []

Local Plumbing Inspector Signature: _____ LPI # **1081**

OWNER/APPLICANT INFORMATION

Name (last, first, MI): **FOSTER III LAWRENCE C.** Owner Applicant

Mailing Address of Owner/Applicant: **Danielle MulKern LPA Inc 98 Island Ave Peaks Isl. ME**

Daytime Tel. #: **231-3445 04108**

The Subsurface Wastewater Disposal System *shall not* 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.

Municipal Tax Map # **09** Lot # **6042**

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 the Local Plumbing Inspector to deny a permit.

Signature of Owner/Applicant: **Danielle M. MulKern** Date: **8/11/15**

CAUTION: INSPECTION REQUIRED

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

(1st) Date Approved: _____
Local Plumbing Inspector Signature: _____
(2nd) Date Approved: _____

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
 2. Replacement System
Type Replaced: **UNKNOWN**
Year Installed: **UNKNOWN**

3. Expanded System
 a. <25% Expansion
 b. >25% Expansion
 4. Experimental System
 5. Seasonal Conversion

THIS APPLICATION REQUIRES

1. No Rule Variance
 2. First Time System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 3. Replacement System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 4. Minimum Lot Size Variance
 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

1. Complete Non-Engineered System
 2. Primitive System (graywater & airt toilet)
 3. Alternative Toilet, specify: _____
 4. Non-Engineered Treatment Tank (only)
 5. Holding Tank, _____ gallons
 6. Non-Engineered Disposal Field (only)
 7. Separated Laundry System
 8. Complete Engineered System (2000gpd+)
 9. Engineered Treatment Tank (only)
 10. Engineered Disposal Field (only)
 11. Pre-treatment, specify: _____
 12. Miscellaneous components

SIZE OF PROPERTY

22,752 +/- SQ. FT. ACRES

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: **4**
 2. Multiple Family Dwelling, No of Units: _____
 3. Other: _____ (specify)

TYPE OF WATER SUPPLY

1. Drilled Well 2. Dug Well 3. Private
 4. Public 5. Other: _____

SHORELAND ZONING

Yes No

Current Use Seasonal Year Round Undeveloped

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. Concrete
 a. Regular
 b. Low Profile
 2. Plastic
 3. Other: _____

CAPACITY: **1000** GAL

DISPOSAL FIELD TYPE & SIZE

1. Stone Bed 2. Stone Trench
 3. Proprietary Device
 a. Cluster array c. Linear
 b. Regular d. H-20 loaded
 4. Other: _____

SIZE: **1009** sq. ft. lin. ft.
21 ELJEN 6SF UNITS

GARBAGE DISPOSAL UNIT

1. No 2. Yes 3. Maybe

If Yes or Maybe, specify one below:
 a. Multi-compartment tank
 b. _____ tanks in series
 c. Increase in tank capacity
 d. Filter on tank outlet

DESIGN FLOW

360 gallons per day
BASED ON:
 1. Table 4A (dwelling unit(s))
 2. Table 4C (other facilities)

SHOW CALCULATIONS for other facilities

SOIL DATA & DESIGN CLASS

PROFILE CONDITION: **S / B**

at Observation Hole # **TP 1**
Depth: _____
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Medium - 2.6 sq.ft./gpd
 2. Medium-Large - 3.3 sq.ft./gpd
 3. Large - 4.1 sq.ft./gpd
 4. Extra-Large - 5.0 sq.ft./gpd

RAISE PLUMBING AS NEEDED EFFLUENT/EJECTOR PUMP TO PROVIDE GRAVITY FLOW

1. Not required
 2. May be required
 3. Required

Specify only for engineered systems:
DOSE: _____ gallons

4 BEDROOMS AT 90 GALLONS PER DAY EACH

3. Section 4B (meter readings) ATTACH WATER-METER DATA

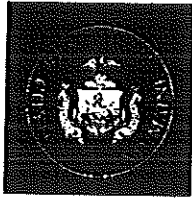
LATITUDE AND LONGITUDE
at center of disposal area
Lat. **43** d **40** m **00** s
Lon. **70** d **11** m **20** s
If g.p.s., state margin of error

SITE EVALUATOR STATEMENT

I certify that on **7/30/15** (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).

Site Evaluator Signature: **Albert Frick** SE # **K5** Date: **8/3/2015**

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



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Jeff Levine, AICP, Director
Director of Planning and Urban Development

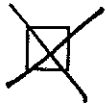
Tammy Munson
Director, Inspections Division

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are **paid in full** to the Inspections Office, City of Portland Maine by method noted below:



Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.



Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.



I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature:

Manuel M. Mulken
LPA/Inc.

Date:

8/11/15

I have provided digital copies and sent them on:

Date:

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.

Room 315 - 389 Congress Street- Portland, Maine 04101 (207) 874-8703 - Fax: 874-8716 - TTY: 874-8936

Acknowledgment of Code Compliance Responsibility- Fast Track Project



I, Danielle Mulhern/LPA Inc. am the owner or duly authorized owner's agent of the property listed below
Print Legal Name

109 Sargent Road, Peaks Island, ME 04108
Physical Address

I am seeking a permit for the construction or installation of:
Subsurface wastewater disposal system (no rule variance)

Proposed Project Description

I understand that the permits obtained pursuant to this acknowledgement of code compliance responsibility will be in my name and that I am acting as the **general contractor** for this project. I accept full responsibility for the work performed.

I am submitting for a permit authorized by the State of Maine Uniform Building and Energy Code (MUBEC), Fuel Board Laws and Rules and all locally adopted codes and standards applying to Plumbing, Electrical, Fire Prevention and Protection in anticipation of having it approved or approved with conditions. I have read the following statement and understand that failure to comply with all conditions once construction is begun may necessitate an immediate work stoppage until such time as compliance with the stipulated conditions is attained. I certify that I have made a diligent inquiry regarding the need for concurrent state or federal permits to engage in the work requested under this building permit, and no such permits are required or I will have obtained the required permits prior to issuance of this permit. I understand that the granting of this permit shall not be construed as satisfying the requirements of other applicable Federal, State or Local laws or regulations, including City of Portland historic preservation requirements, if applicable. I understand and agree that this permit does not authorize the violation of regulations.

In addition, I understand and agree that this building permit does not authorize the violation of the 12 M.R.S. § 12801 et seq. - Endangered Species.

I certify under penalty of perjury and under the laws of the State of Maine the foregoing is true and correct. I further certify that all easements, deed restrictions, or other encumbrances restricting the use of the property are shown on the site plans submitted with this application.

I hereby apply for a permit as a Owner's Agent of the below listed property and by so doing will assume responsibility for compliance with all applicable codes, bylaws, rules and regulations.
Owner or Owner's Agent

I further understand that it is my responsibility to schedule inspections of the work as required and that the City's inspections will, at that time, check the work for code compliance. The City's inspectors may require modifications to the work completed if it does not meet applicable codes. DMM INITIAL HERE

Sign Here: Danielle Mulhern
Owner or Owner's Authorized Agent
LPA Inc.

Date: 8/11/15

PLEASE ALSO FILL OUT AND SIGN SECOND PAGE

Acknowledgment of Code Compliance Responsibility- Fast Track Project



THIS PROJECT IS ELIGIBLE FOR FAST TRACK PERMITTING BECAUSE IT IS IN THE FOLLOWING CATEGORY / CATEGORIES (CHECK ALL THAT APPLY):

- One/Two Family Swimming Pools, Spas or Hot Tubs
- One/Two Family Decks, Stairs and Porches (attached or detached) First Floor Only
- One/Two Family Detached One Story Accessory Structures (garages, sheds, etc.) not to exceed 600sq ft with no habitable space
- Home Occupations (excluding day cares)
- One/Two Family Renovation/Rehabilitation (within the existing shell)
- Attached One /Two Family Garages /Additions/Dormers bearing the seal of a licensed design professional
- New *Sprinklered* One and Two Family Homes (bearing the seal of a licensed design professional stating code compliance) – **MUST STILL RECEIVE LEVEL 1 SITE PLAN APPROVAL FROM PLANNING**
- One/Two Family HVAC (including boilers, furnaces, heating appliances, pellet and wood stoves)
- Interior office renovations with no change of use (no expansions; no site work; no load bearing structural changes are eligible) bearing the seal of a licensed design professional stating code compliance
- Interior Demolition with no load bearing demolition
- Amendments to existing permits
- Commercial HVAC systems (with structural and mechanical plans bearing the seal of a licensed design professional stating code compliance)
- Commercial HVAC for Boilers/Furnaces/Heating Appliances
- Commercial Signs or Awnings
- Exterior Propane Tanks
- Residential or Commercial Subsurface Waste Water Systems (No Rule Variance Only)
- Renewal of Outdoor Dining Areas
- Temporary Outdoor Tents and stages under 750 sq ft per tent or stage
- Fire Suppression Systems (Both non-water and water based installations)
- Fences over 6'-0" in height
- Site work only
- Retaining walls over 4ft in height with stamped plans (or approval from inspection staff)

I understand that if the property is located in a historic district this application will also be reviewed by Historic Preservation. I further understand that the Building Inspections Division reserves the right to deny a fast track eligible project.

Sign Here: *Danuta Mulken*
Owner or Owner's Authorized Agent

Date: 8/11/15

LPA Inc

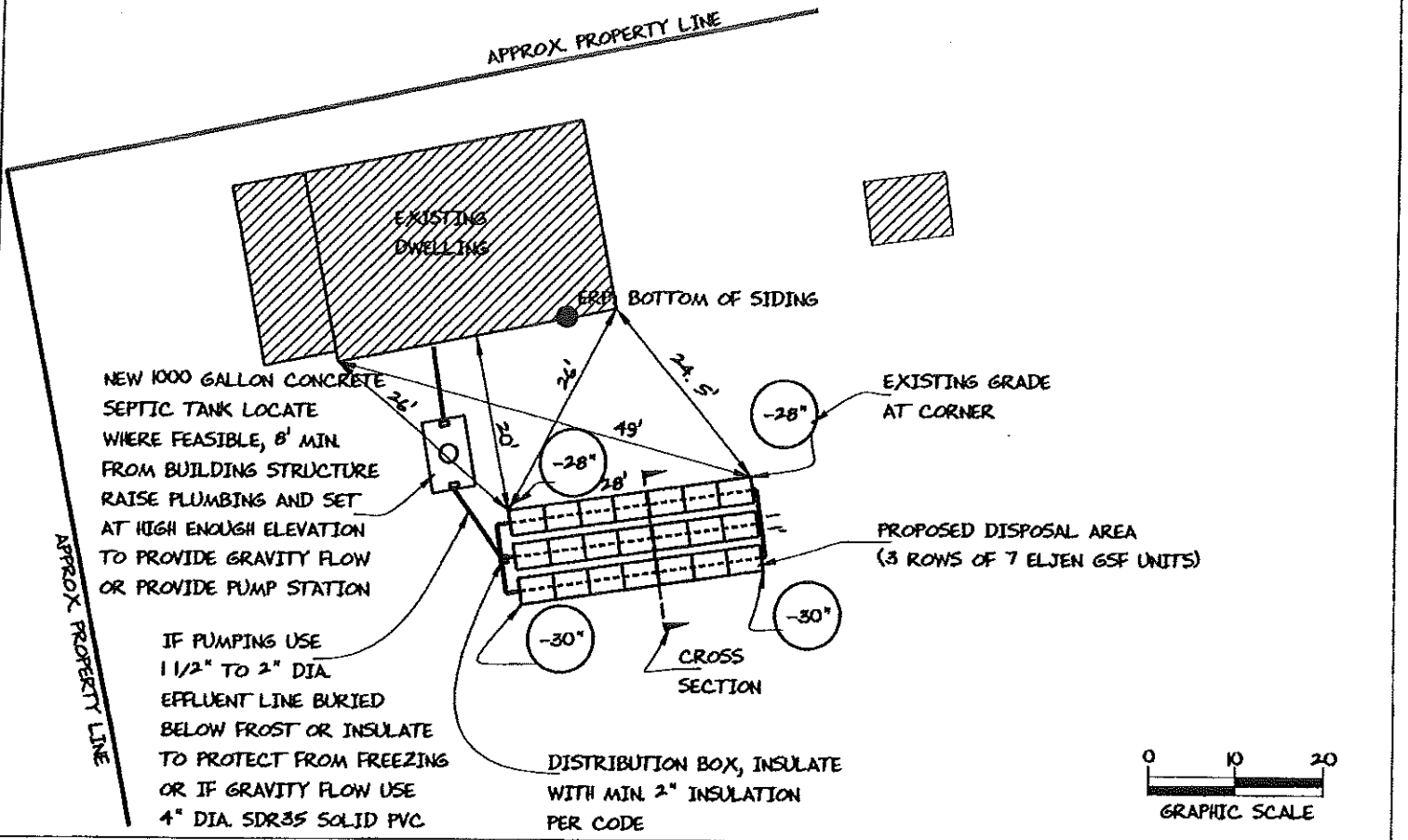
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation PORTLAND, PEAKS ISLAND	Street, Road, Subdivision 109 SARGENT ROAD	Owner's Name LAWRENCE C. FOSTER III
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SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



FILL REQUIREMENTS

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

CONSTRUCTION ELEVATIONS

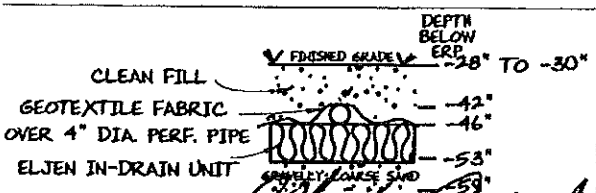
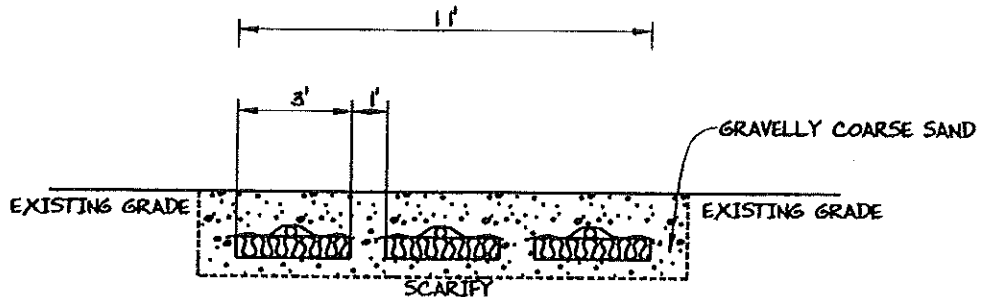
Finished Grade Elevation
 Top of Distribution Pipe or Proprietary Device
 Bottom of Disposal Area

ELEVATION REFERENCE POINT

SEE DETAIL BELOW
 Location & Description: **BOTTOM OF WHITE SIDING, 25" ABOVE EXISTING GRADE**
 Reference Elevation is 0.0' or GRADE

DISPOSAL AREA CROSS SECTION

SCALE:
 VERTICAL: 1" = 5 FT
 HORIZONTAL: 1" = 5 FT



Site Evaluator Signature

Albert Frick

SE • 163

Date

8/3/2015

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Town, City, Plantation
PORTLAND, PEAKS ISLAND

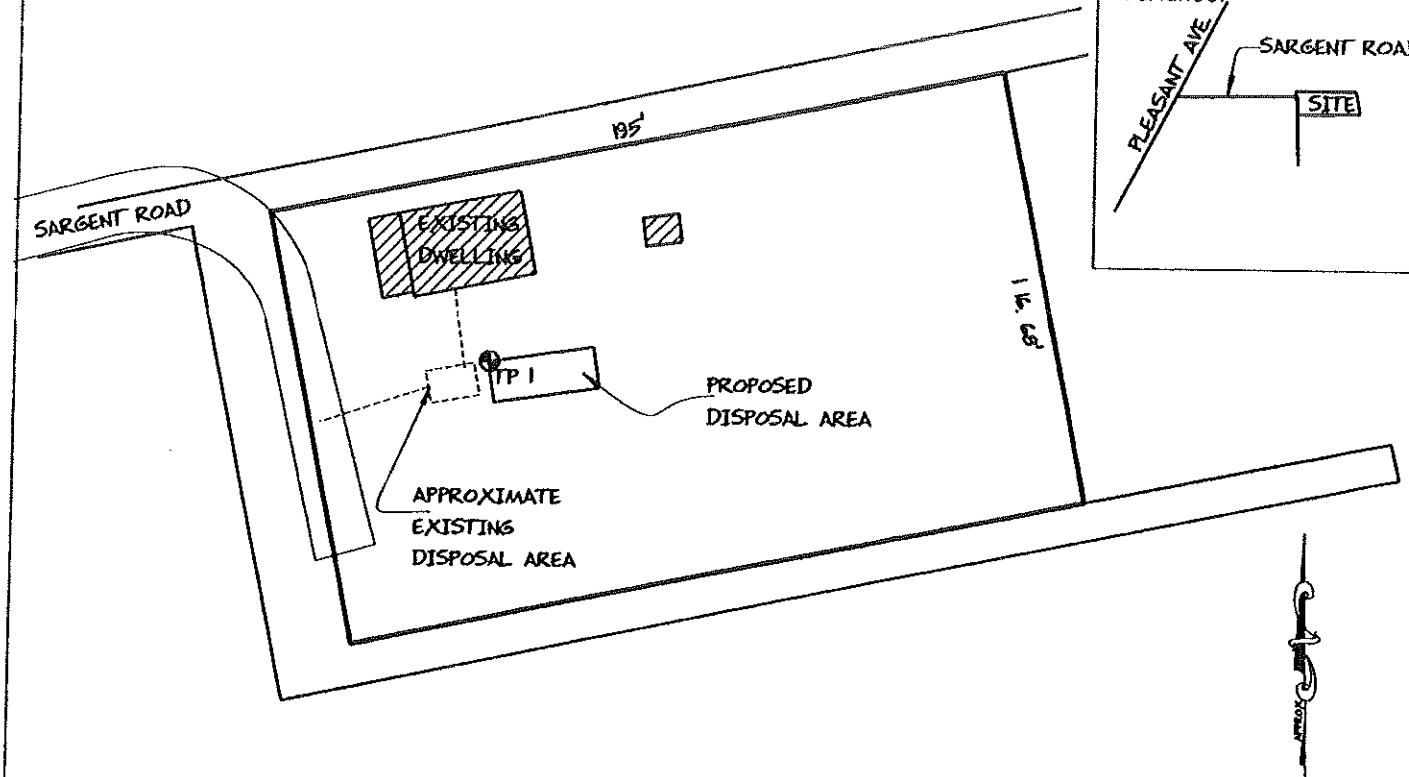
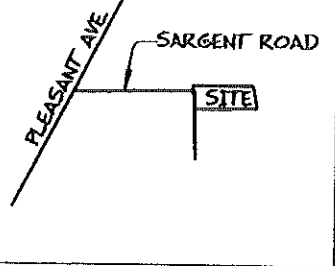
Street, Road Subdivision
109 SARGENT ROAD

Owner's Name
LAWRENCE C. FOSTER III

SITE PLAN

Scale 1" = 50 Ft.
 or as shown

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



NOTE: VERIFY WATER LINE LOCATION PRIOR TO INSTALLATION

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				
5	GRAVELLY		DARK	
10	SANDY		BROWN	
15	LOAM			
20	GRAVELLY	FRTABLE	YELLOWISH	
25	SAND		BROWN	NONE
30				EVIDENT
40				
50				
	LIMIT OF EXCAVATION			

Soil Classification: Profile S Condition B Slope 0-3 %
 Limiting Factor: 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

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 SE

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 Date

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