

92717

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION		>> Caution: Permit Required - Attach in Space Below <<	
City, Town, or Plantation	PEAKS ISLAND	FORTLEAND PERMIT # 9312 TOWN LEFT Date: 11/24/04 Local Plumbing Inspector Signature: <i>[Signature]</i> L.P.L. # 0640 <input type="checkbox"/> Double Fee Charged	
Street or Road	7 EVERGREEN AVE		
Subdivision, Lot #			
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	KENWORTHY ALFRED		
Address of	389 PORTER STREET MELROSE, MA 02176		
Daytime Tel #	781-665-8235		

Owner or Applicant Statement

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

Alfred Kenworthy 11/19/04
Signature of Owner/Applicant Date

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

[Signature]
Local Plumbing Inspector Signature Date

EXPIRED

PERMIT INFORMATION

TYPE OF APPLICATION		DISPOSAL SYSTEM TO SERVE	
1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>STRAIGHT PIPE</u> Year Installed: <u>PRE 1950S</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	1. <input type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input checked="" type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	DISPOSAL SYSTEM COMPONENTS 1. <input checked="" type="checkbox"/> Complete Non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & all toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input checked="" type="checkbox"/> Holding Tank, <u>1500 (OR 5000)</u> Gallons 6. <input type="checkbox"/> Non-Engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System/2000 gpd+ 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components	
SIZE OF PROPERTY		SHORELAND ZONING	
4,500 sq ft		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
DISPOSAL SYSTEM TO SERVE		TYPE OF WATER SUPPLY	
1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY: _____ Current Use: <input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped		1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input checked="" type="checkbox"/> Other: <u>SUMMER WATER</u>	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 9)

TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
1. <input type="checkbox"/> Concrete a. <input type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY: _____ gallons	1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input type="checkbox"/> Linear b. <input type="checkbox"/> Regular d. <input type="checkbox"/> M-20 loaded 4. <input type="checkbox"/> Other: _____ SIZE: <u>N/A</u> <input type="checkbox"/> sq ft <input type="checkbox"/> lin ft	1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below a. <input type="checkbox"/> Multi-compartment tank b. <input type="checkbox"/> _____ tanks in series c. <input type="checkbox"/> Increase in tank capacity d. <input type="checkbox"/> Filter on tank outlet	270 gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	PUMPING	3 BEDROOMS AT 90 GALLONS PER DAY EACH
PROFILE CONDITION DESIGN 1 / A / 2 AT Observation Hole = TP 1 Depth <u>21</u> " OF MOST LIMITING SOIL FACTOR	1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd 3. <input type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd	1. <input type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered or experimental systems: DOSE: _____ Gallons	3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA

SITE EVALUATOR STATEMENT

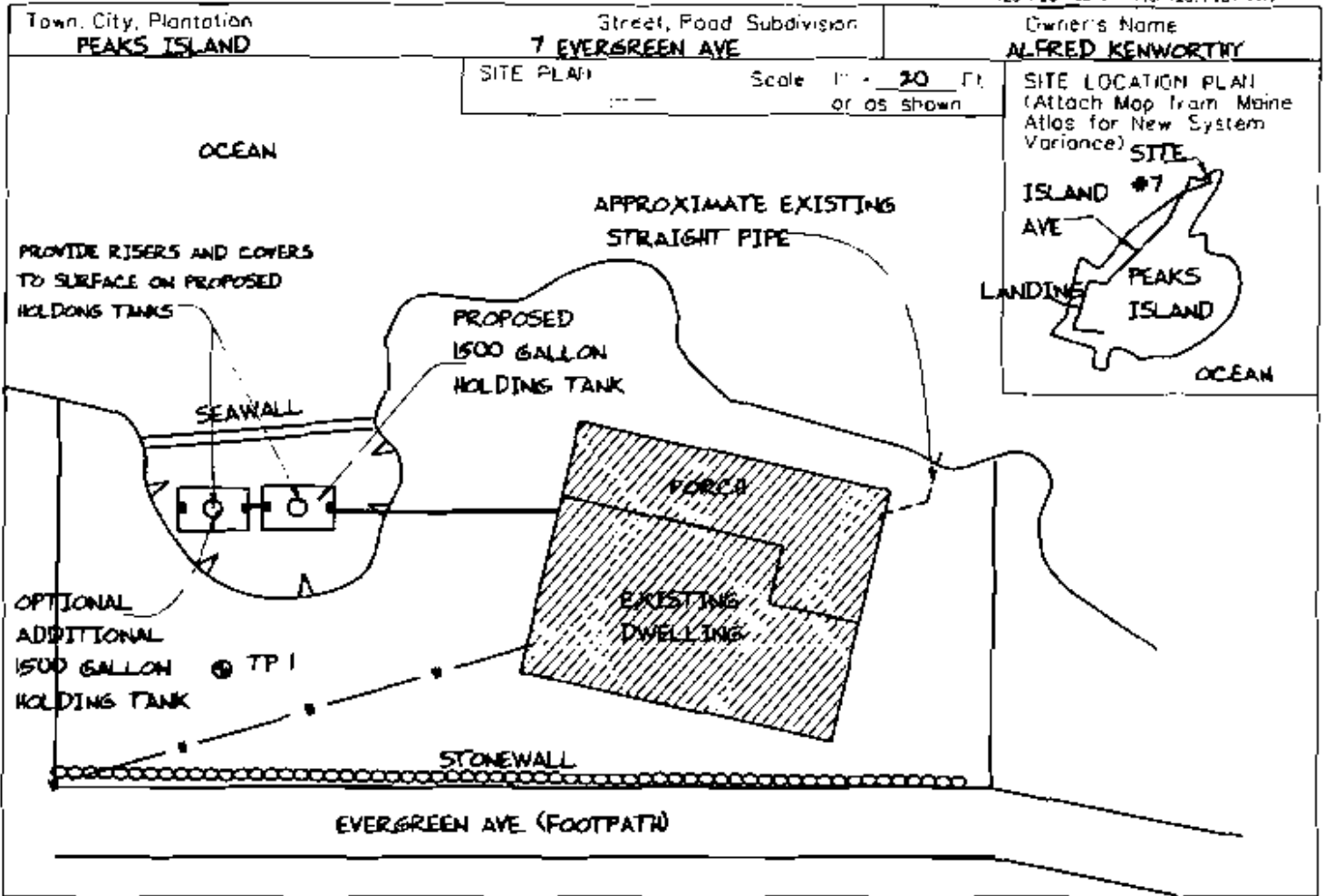
I certify that on 11/20/04 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 211)

Albert Frick
Site Evaluator Signature

SE = _____
Date: 11/12/2004

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10, 2nd
 1207 28th St., Bangor, ME 04401-2807



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

Observation Hole: TP A Test Pit Boring
 Depth of Organic Horizon Above Mineral Soil: _____

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
10	SANDY LOAM	FRIABLE	DARK YELLOW BROWN	
25	BEDROCK			
30				
40				
50				

Soil Classification: 2 Profile A Condition
 Slope: _____
 Limiting Factor: 21"
 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

63
 SE

11/12/2024
 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

State Department of Health Services
 Division of Health Engineering, Section 10
 2275 34th Street, San Diego, CA 92161-1772

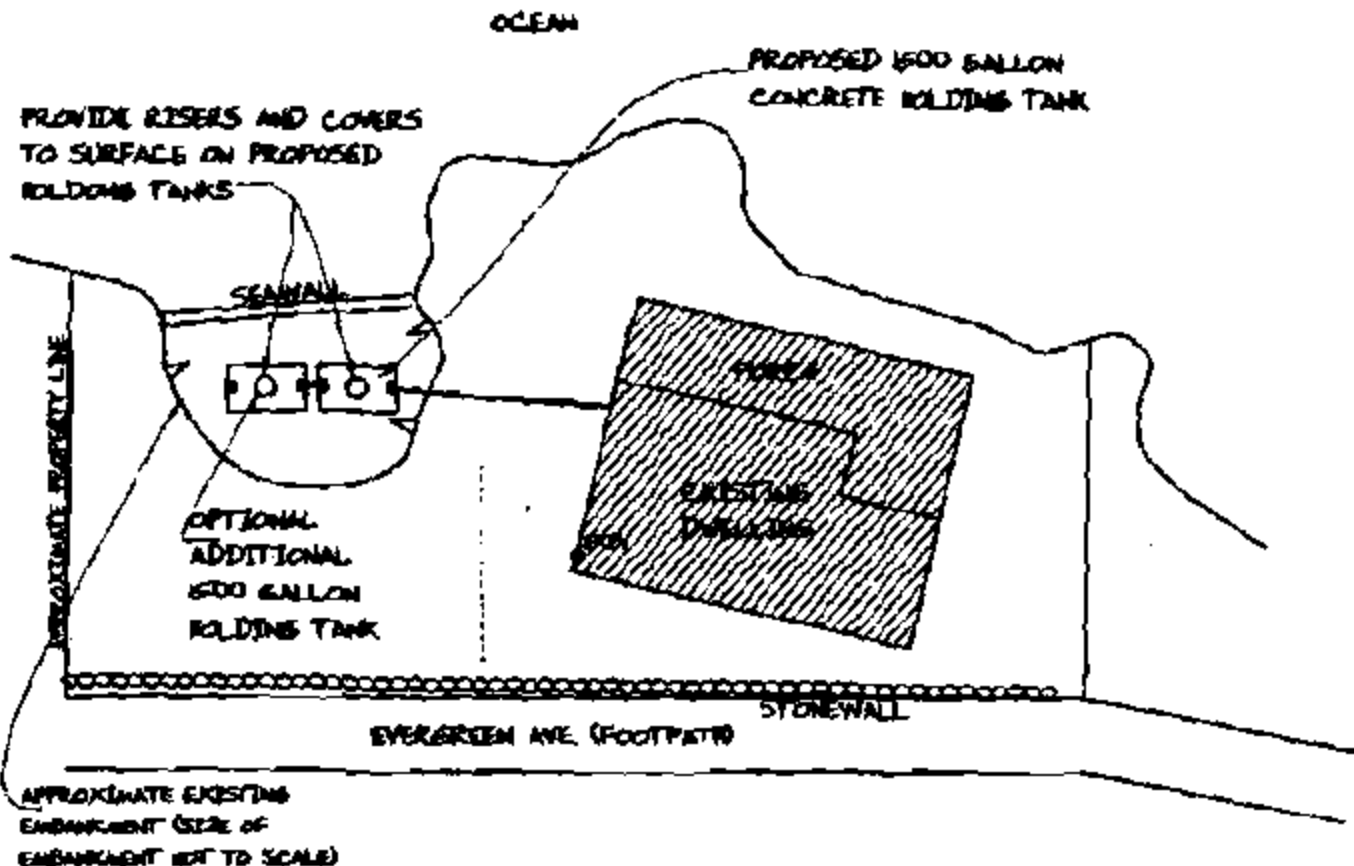
Town, City, Plantation
PEAKS ISLAND

Street, Road, Subdivision
7 EVERGREEN AVE

Owner's Name
ALFRED KENWORTHY

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20' FT.



FILL REQUIREMENTS

Depth of Fill (minimum) 1'-0"
 Depth of Fill (maximum) 2'-0"
 DEPTHS AT CROSS-SECTION (When below)

CONSTRUCTION ELEVATIONS

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

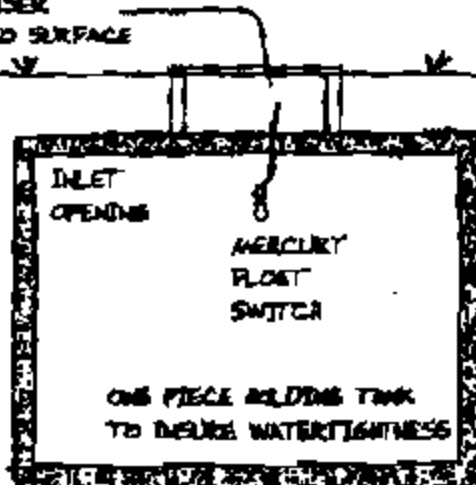
SEE
 DETAIL
 1022

ELEVATION REFERENCE POINT

Location & Description
 Reference Elevation at R.F. #
 SCALE:
 VERTICAL: 1" = 4'
 HORIZONTAL: 1" = 20'

DISPOSAL AREA CROSS SECTION

PROVIDE RISER
 & COVER TO SURFACE



Albert Frick
 Site Evaluator Signature

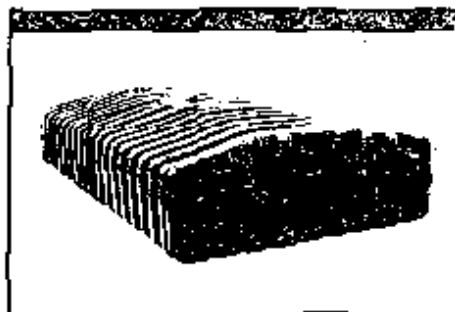
EB
 SE

Date

11/12/2004

YOUR ONE-STOP SEPTIC TANK SUPPLIER!

There are Wedco Septic Tanks for virtually every size and type of application and installation. Wedco Tanks have been designed to conform to all local codes and regulations.



S211 SURFACE HOLDING TANK



S250 PUMPING CHAMBER



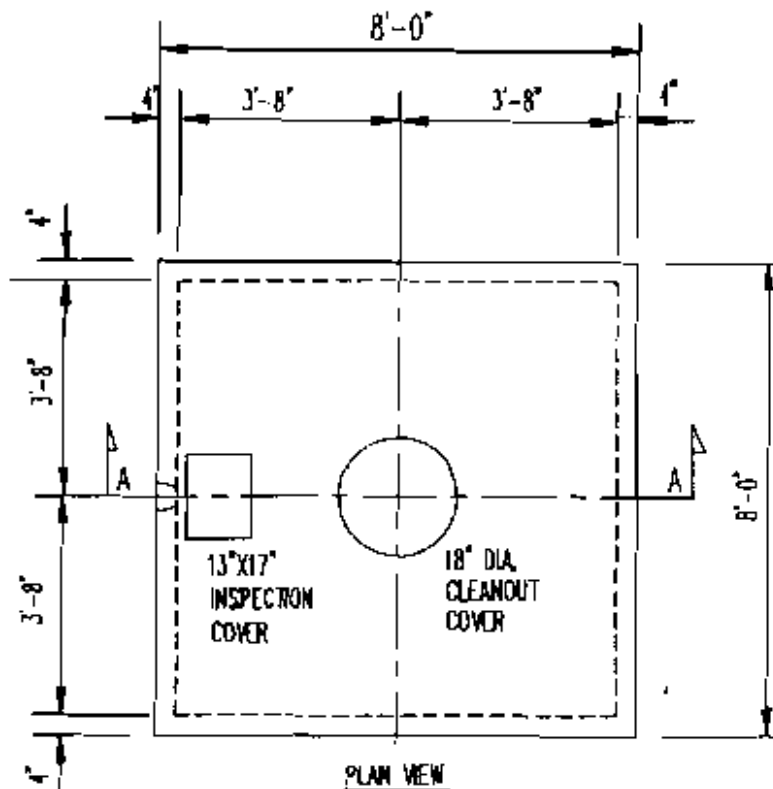
STANDARD WEDCO SEPTIC TANK
AVAILABLE IN SEVERAL SIZES

WEDCO SEPTIC AND SURFACE HOLDING TANKS

MODEL	WEIGHT		LENGTH		WIDTH		HEIGHT		LIQUID LEVEL AT OUTLET		INLET HEIGHT		MAN-LL HOLES DIAMETER		CAPACITY		
	KG	LBS	CM	IN	CM	IN	CM	IN	CM	IN	CM	IN	CM	IN	LITRES	IMPGALS	US GALS
WP2300	140	310	305	120	107	42	127	50	92	36	107	42	51	20	2300	600	800
WP2700	160	350	300	118	127	50	125	53	89	36	102	40	51	20	2700	600	700
WP3400	165	365	310	127	124	49	135	53	89	36	102	40	51	20	3400	750	900
WR3400	166	365	241	95	124	49	163	64	102	52	147	58	51	20	3400	750	900
WP3600	220	485	371	146	127	50	125	53	99	39	112	44	51	20	3600	800	1000
WR4000	181	400	272	107	125	53	173	68	102	52	147	58	51	20	4000	880	1050
WP5000	272	600	350	145	130	51	164	64	122	48	135	53	51	20	5000	1100	1300
S211/SURFACE HOLDING TANK	227	500	401	158	201	79	76	30	-	-	60	27	51	20	5000	1100	1300

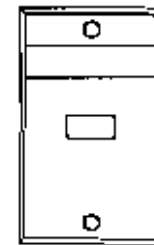
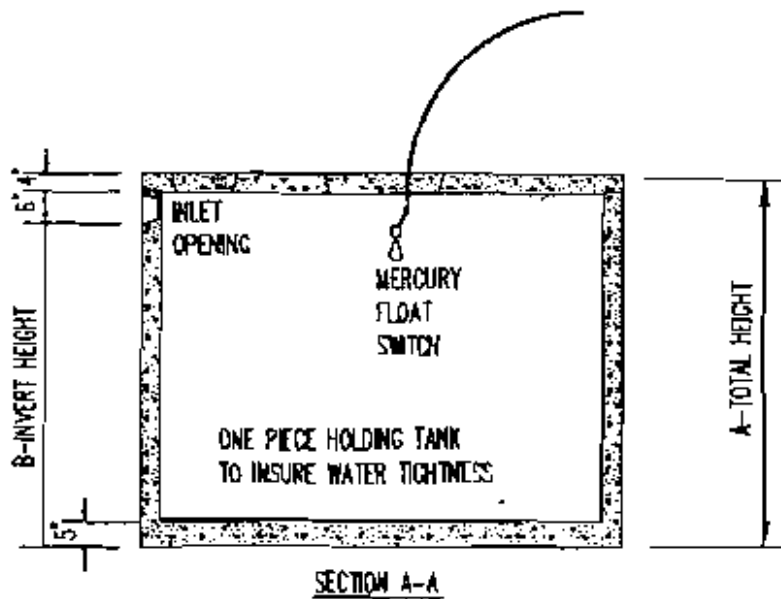
All Wedco Septic Tanks may be converted to holding tanks.

*All U.S. Wedco Septic Tanks are equipped with gas deflectors, to comply with regulatory requirements.



ITEM NO.	1450	1451	1452
GALLONS	1000	1500	2000
A	56"	66"	76"
B	46"	56"	66"
TOTAL WEIGHT	12,600	14,500	15,800

OR EQUIVALENT



PEABODY BARNES

HIGH WATER ALARM
INCLUDES STAINLESS
STEEL WALL PLATE
WITH RED JEWEL LIGHT
AND ONE MERCURY FLOAT
SWITCH WITH 10' OF
18/2 CORD.

NOTES:

1. CONCRETE: 5000 PSI AFTER 28 DAYS.
2. REINFORCING: 6X6/10/10 W.W.M WITH ADDITIONAL NO. 4 BAR AROUND OPENINGS.
3. TANKS ARE AVAILABLE WITH 6" THICK, H2O LOADED COVERS.



**SUPERIOR
CONCRETE CO., INC.
AUBURN, ME.**

**RESIDENTIAL
HOLDING TANK**



Portland Water District

225 Douglass St. • P.O. Box 3553 • Portland, ME 04104-355

(207) 774-596

FAX (207) 761-833

www.pwd.org

November 10, 2004

Mr. Alfred Kenworthy
389 Porter Street
Melrose, MA 02176

Dear Mr. Kenworthy,

As per our phone conversation on November 8, 2004, please accept this letter as confirmation that the Peaks Island Wastewater Treatment Facility will accept trucked in holding tank waste contingent upon the following procedures:

1. Scheduling

- All loads delivered to the facility will have to be scheduled 24 hours in advance to assure that an operator is present during off loading. To schedule delivery contact Bob Waterman at 774-5961 extension 3698 or call the Peaks Island treatment facility at 766-5821.
- All deliveries should be scheduled between the hours of 9:00 AM and 1:00 PM.
- An operator is present at the facility Monday through Friday during the period between May 15 and September 30. From September 30 through May 15, we expect to staff the facility on Monday, Wednesday and Friday. Full day staffing of the facility can not be expected on holidays.
- The District may alter its schedule during the September through May time period so advance scheduling becomes more important during that period.

2. Off Loading

- The nature of the treatment process at the Peaks Island facility will require controlled off loading of all holding tank deliveries. The hauler should be prepared to control the discharge rate from his vehicle to 50 gallons per minute. Therefore, a 3000 gallon load will require approximately one hour to discharge.
- Off loading will be restricted to the appropriate location at the Peaks Island WWTF.

3. Pricing

- The Portland Water District will bill the hauler of holding tank wastes at the rate of \$16.00 per load plus \$5.00 per thousand gallons. The hauler must clearly prove to the PWD operator present, the volume of any delivery less than a full truck. Billing will be adjusted to the nearest 100 gallons based on the hauler submitting a District issued manifest.

4. Other Requirements

- All haulers discharging loads at District facilities must be licensed by the Portland Water District and provide a Certificate of Insurance that meets District criteria.



Portland Water District

225 Douglass St. • P.O. Box 3553 • Portland, ME 04104-3553

(207) 774-5961

FAX (207) 761-8300

www.pwd.org

- Only holding tank wastes will be accepted at the Peaks Island facility. Holding tank waste is defined as, "Any waste derived from the temporary storage of sanitary waste including those derived from sinks and sanitary plumbing fixtures. Holding tank wastes are expected to exhibit pollutant concentrations similar to that of typical domestic wastewater". At no time will septage, defined as "any waste, refuse, effluent, sludge or other material derived from a septic tank, cesspool, vault privy or similar source which concentrates wastes or to which chemicals have been added" be allowed to be discharged at the Peaks Island WWTF.
- The Portland Water District requires the hauler to provide a sample of each load delivered to District facilities.

I would not expect any problems with the handling of holding tank wastes at the Peaks Island facility. However, the District will have to reserve the right to direct all loads to the mainland if it is determined that the Peaks Island facility is incapable of handling holding tank waste. If you should have any further questions, please don't hesitate to contact me at 207-774-5961 extension 3075.

Regards,

Portland Water District

Michael Greene

Plant/Systems Manager, Wastewater

mgreene@pwd.org

cc: Stuart Rose, Maine DEP
Craig Butterfield, Chief Operator EEWTF
Bob Waterman, Operations Foreman

APPLICATION/AGREEMENT for HOLDING TANK INSTALLATION

92717

PROPERTY OWNER INFORMATION

Name Alfred W. Kenworthy Jr Trustee / Barbara H Kenworthy, Trustee
 Mailing Address 389 Parker Street
 City/Town Melrose State MA Zip 02176
 Daytime telephone number 781 - 665 - 9235

PROPERTY LOCATION

Street, Road, Route 7 Evergreen Avenue
 City/Town Portland, Pecks Island Zip 02148

APPLICATION FOR (check one)

- First Time Installation (If this is checked, give Town's Ordinance adoption date 1 1)
- First Time Installation, non-residential only, less than 100 gpd or 500 gal/week
- Replacing an existing overboard discharge, surface wastewater discharge or malfunctioning subsurface wastewater system
- Replacing an existing holding tank

CONDITIONS FOR APPROVAL

- * The installation of a conventional disposal system is not possible due to unacceptable site and/or soil conditions, lot configuration, or other constraints
- * Public sewer is not available.
- * All existing or proposed plumbing fixtures shall be installed or modified for water conservation and all water closets shall meet the Federal standard of 1.6 gallons per flush.

REQUIREMENTS FOR APPROVAL

- A Completed Application shall consist of:
 - * This form (HHE-304) completed with all signatures.
 - * A completed *Subsurface Wastewater Disposal System Application* (HHE-200) prepared by a Licensed Site Evaluator.

PROPERTY OWNER INFORMATION AND REQUIREMENTS

- I (we) Alfred W. Kenworthy Jr own the property described in this Application/Agreement.
1. Holding tanks require regular pumping by a licensed pumper. The owner must pay this service.
 2. The holding tank will be pumped at least once a year by the pumper listed on this application. Another pumper may be used if the listed pumper is notified and the LPI approves the change. The new pumper will then be listed on an attachment to this agreement.
 3. A water meter shall be installed at the owner's expense if required by the LPI.
 4. All records of pumping and water use (if required) must be kept for at least three years and shall be made available to the LPI or other official if requested.
 5. A holding tank for new construction can only be replaced by a system meeting first time system requirements.
 6. Once approved this form must be recorded at the Registry of Deeds, cross referenced to the owner's deed.
 7. We agree to comply with any additional requirements of the Town.

We state that all the information presented with this application is true and accurate, we acknowledge the foregoing items and agree to comply with all the requirements.

Property Owner(s) Signature Alfred W. Kenworthy Jr Trustee Date 1/20/05
 Property Owner(s) Signature Barbara H Kenworthy Trustee Date 1/20/05

SITE EVALUATION STATEMENT

I, ALBERT FRICK, state that I have evaluated the subject property and found that a subsurface wastewater disposal system is not practical. Secondly, I have completed a Subsurface Wastewater Disposal System Application (HHE-200) proposing a holding tank installation for the property's wastewater disposal.

Site Evaluator's Signature

Albert Frick

Date

11/12/2004**HOLDING TANK PUMPER INFORMATION**

Business owner's name

T. Conington Services

License #

Scotia 10/05

Business name

Island 1947 ServicesDR. NEW

Mailing address

PO Box 48

City

Peaks Island

State

ME

Zip

07105

Business telephone

704 2375

Max. truck hauling capacity

300

gallons

Can pump:

seasonally1 year round

DEP licensed disposal site location

Peaks Island

Site #

Peak Bay DR PEAKS ISL**HOLDING TANK PUMPER STATEMENT**

I, T. CONINGTON SERVICES, own and operate a septage pumping business named in this Application/Agreement, and have contracted with the property owner(s) to pump and properly dispose of the tank's waste. I further state that the tank, and that the wastewater will be disposed of at a Department of Environmental Protection licensed disposal location.

Holding Tank Pumper's Signature

T. Conington

Date

11/17/05**Municipal Officers Statement**

I (we) have reviewed the information submitted in support of this application.

I (we) find that the installation of the holding tank will not violate any local ordinances.

I (we) will authorize the LPI to enforce the requirements of this agreement, the Subsurface Wastewater Disposal Rules and any local ordinances, including recordkeeping and required pumping.

I (we) recommend that the LPI issue the necessary permits for the installation of the holding tank.

Signature

Title

Date

Signature

Title

Date

Signature

Title

Date

Local Plumbing Inspector's Statement

I have reviewed this application and find that the issuance of a permit for the holding tank complies with the Subsurface Wastewater Disposal Rules and all pertinent local ordinances.

Additional Requirements:

Signature

Date

John Elias Baidacci
Governor



John R. Nicholas
Commissioner

Maine Department of Health and Human Services
11 State House Station
Augusta, Maine 04333-0011
Division of Health Engineering
October 26, 2004

Mr. Alfred Kenworthy
389 Porter Street
Melrose, MA

Subject: Site Visit - Kenworthy Property - Peaks Island - Portland, Maine

Dear Mr. Kenworthy:

On Friday October 22, 2004 I visited your property to review the subsurface wastewater disposal design prepared by Albert Frick Associates dated December 12, 2003. Also present were Mr. Frick, Philip Garwood and Stuart Rose of the Maine Department of Environmental Protection, yourself and your wife. A representative of the city of Portland was invited but did not attend. The design was disallowed in our letter of January 23, 2004 due to recommendations from the local plumbing inspector.

It is our understanding that a license for the existing overboard discharge cannot be considered by the DEP as the past use of the property does not fit the criteria established by past attorney general rulings. As the public sewer does not serve this part of the island, subsurface wastewater disposal is the only remaining option to eliminate the unlicensed discharge.

As Section 1906.1.7 classifies overboard discharges, whether licensed or not, as replacement systems the design prepared by Mr. Frick can be considered given the limitations of the site. A holding tank would also be appropriate given the seasonal use of the property; and would seem to be a more financially and environmentally acceptable solution. As soon as a complete holding tank application is received we will process same for approval.

Sincerely,

Russell G. Martin, PE, FNSPE
Program Director, Wastewater & Plumbing Control
Division of Health Engineering

CC Michael Nugent, LPI
Phil Garwood, MDEP
Stuart Rose, MDEP
Albert Frick, LSE

Physical Location of:
Division Office
161 Capitol Street
Augusta, Maine 04333-0011

(207) 287-5889
Fax: (207) 287-3185
TTY: (207) 287-5550

MAINE
OCT 29 2004

117
98



STATE OF MAINE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
161 CAPITOL STREET
11 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0011

JOHN ELIAS BALDAGGI
GOVERNOR

JOHN R. NICHOLAS
COMMISSIONER

HOLDING TANK DEED COVENANT FORM

Property Owner: Complete and record this form with your County Registry of Deeds. Then forward a copy of the recorded deed covenant to your municipality's Local Plumbing Inspector.

County Registrar: Please cross-reference this document with book and page no.

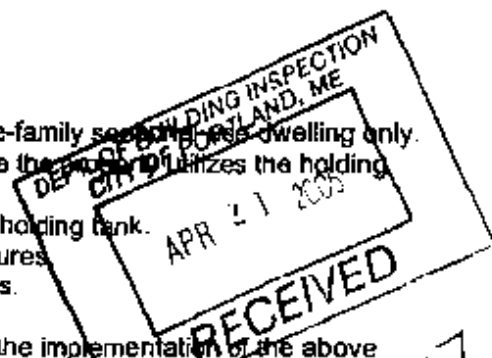
Property Owner Statement: I/we, BARBARA H KENWORTHY
ALFRED W. KENWORTHY JR are the
TRUSTEES OF EVERGREEN READY TRUST
owner(s) of the property located at 7 EVERGREEN AV PORTLAND (street)
PORTLAND (town).

The property's deed is recorded in book no. 11207, page no. 147, 148, 149 & 150

We state that the holding tank installation for the aforementioned property received approval by the town of PORTLAND and its officials

Stipulations of Covenant:

1. The 1,500 gallon holding tank(s) shall serve one three-bedroom single-family seasonal dwelling only.
2. There shall be no conversion of use from seasonal to year-round while the town utilizes the holding tank for wastewater disposal.
3. There shall be no additional bedrooms or structures connected to the holding tank.
4. All fixtures within the structure shall be low-flow, water-conserving fixtures.
5. The holding tank shall be equipped with both audible and visual alarms.



Municipal Approval Conditions: This approval has been granted subject to the implementation of the above conditions and said approval will become null and void if the required and stated conditions of approval are violated.

Property Owner signature(s) Alfred W Kenworthy Jr
Barbara Kenworthy
BARBARA KENWORTHY

92717

State of Maine Massachusetts
Middlesex
County of Cumberland, ss

Date 4/20/05

Received
Recorded Register of Deeds
Apr 21, 2005 09:35:10A
Cumberland County
John B O'Brien

Then personally appeared the above named Alfred W Kenworthy Jr (and)
Barbara H Kenworthy and (severally) acknowledged the foregoing instrument to be his or her (or their) free act and deed.

Before me Paul John Yanakakis
Justice of the Peace or Notary Public

PAUL JOHN YANAKAKIS
Notary Public Massachusetts
My Commission Expires October 23, 2009

HME-300 Rev. 3/97



L1 ± 05

Official Receipt for Recording in

Cumberland County Registry of Deeds
142 Federal Street
PORTLAND, MAINE 04101

Issued To:

ALFRED KENNEDY
389 PORTER ST

RELEASE MA 02176-

Recording Fees

Document Description	Number	Vol	Page	Recording Amount
REC 1-STATE OF MAINE DEPT OF HEALTH & HUMAN SE 2-KENNEDY, ALFRED W JR DB. 75: 16a	24004	22546	51	\$11.00
				\$11.00

Collected Amounts

Payment Type	Check Number	Amount
CASH		\$11.00
		\$11.00

Total Received : \$11.00
Less Total Recordings: \$11.00
Change Due : \$0.00

Thank You
JOHN B GIBSON - Registrar of Deeds

By - Jan Allen

Receipt# Date Time
0210130 04/21/2005 08:38a