

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that PETER J IRREVOCABLE REALTY TRUST LEAHY

Located At 33 CITY VIEW AVE

CBL: 105-N-001-001

Job ID: 2011-11-2781-SUBSRF

has permission to Install Replacement Sub-surface 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


11/30/2011
Code Enforcement Officer / Plan Reviewer

**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.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **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.**

Required Inspections:

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

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-11-2781-SUBSRF

Located At: 33 CITY VIEW AVE

CBL: 105- N-001-001

Conditions of Approval:

Building

1. Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
2. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm, HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.

#117137 2011 11 2781

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
 Div of Environmental Health - 11 SHS
 (207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION		>>CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<
City, Town, or Plantation	PORTLAND; LITTLE DIAMOND ISLAND	
Street or Road	33 CITY VIEW ROAD	
Subdivision, Lot #		The Subsurface Wastewater Disposal System <i>shall not</i> be installed until a Permit is attached HERE by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.
OWNER/APPLICANT INFORMATION		
Name (last, first, MI) <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant PETER J. LEAHY IRREVOCABLE REALTY TRUST		
Mailing Address of Applicant	C/O ANNIE LEAHY P.O. BOX 7606 PORTLAND, ME 04112	
Daytime Tel. #		
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED
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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.
Signature of Owner/Applicant		Local Plumbing Inspector Signature
Date: 21 Nov 2011		(1st) Date Approved
		(2nd) Date Approved

Municipal Tax Map # 105 Lot # N-1-2 NOV 21 2011

PERMIT INFORMATION

TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced: UNKNOWN Year Installed: UNKNOWN <input checked="" type="checkbox"/> 3. Expanded System <input checked="" type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. >25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENTS <input checked="" type="checkbox"/> 1. Complete Non-Engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-Engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-Engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000gpd+) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY 12,320 <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 4 <input type="checkbox"/> 2. Multiple Family Dwelling, No of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify)	TYPE OF WATER SUPPLY <input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Current Use <input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input checked="" type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: 1000 GAL	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. Cluster array <input checked="" type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular <input type="checkbox"/> d. H-20 loaded <input type="checkbox"/> 4. Other: _____ SIZE: 1296 sq. ft. <input type="checkbox"/> lin. ft. 27 ELJEN IN-DRAIN UNITS	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. Increase in tank capacity <input type="checkbox"/> d. Filter on tank outlet	DESIGN FLOW 360 gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities EXISTING 3 BEDROOMS POTENTIAL EXPANSION TO 4 BEDROOMS AT 90 GALLONS PER DAY EACH
SOIL DATA & DESIGN CLASS PROFILE: 12 / CONDITION: B at Observation Hole # TP 1 Depth " _____" of Most Limiting Soil Factor	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium - 2.6 sq.ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq.ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq.ft./gpd <input type="checkbox"/> 4. Extra-Large - 5.0 sq.ft./gpd	EFFLUENT/EJECTOR PUMP <input checked="" type="checkbox"/> 1. Not required <input type="checkbox"/> 2. May be required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER-METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. N43 d 39 m 53.92 s Lon. W70 d 12 m 37.61 s if g.p.s., state margin of error

SITE EVALUATOR STATEMENT

I Certify that on 6/30/2011 (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

63
 SE #

7/8/2011
 Date

ALBERT FRICK
 Site Evaluator Name Printed

(207) 839-5563
 Telephone Number

ALBERT@ALBERTFRICK.COM
 E-mail Address

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; LITTLE DIAMOND ISLAND**
 Street, Road Subdivision: **33 CITY VIEW ROAD**
 Owner's Name: **PETER J. LEAHY IRREVOCABLE REALTY TRUST**

SITE PLAN Scale: 1" = **40** Ft or as shown

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

APPROX EXISTING SEPTIC TANK AND DISPOSAL AREA

EXISTING DWELLING

PROPOSED DISPOSAL AREA

HILLSIDE ROAD (PAPER R.O.W.)

CITY VIEW ROAD (GRAVEL)

PROPERTY INFORMATION PER TOWN TAX MAP AND AERIAL PHOTOGRAPH. VERIFY TO ASSURE SETBACKS SHOWN

ELIZABETH ROAD (PAPER R.O.W.)

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				
10	SANDY LOAM	FRIABLE	VARIABLE BROWN TO YELLOW BROWN	
20				
30				
40				
50	LIMIT OF EXCAVATION			

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
12	B	0-3	<input type="checkbox"/> Restrictive Layer
Profile	Condition		<input type="checkbox"/> Bedrock
			<input type="checkbox"/> Pit Depth

Albert Frick
Site Evaluator Signature

163
SE

7/8/2011
Date

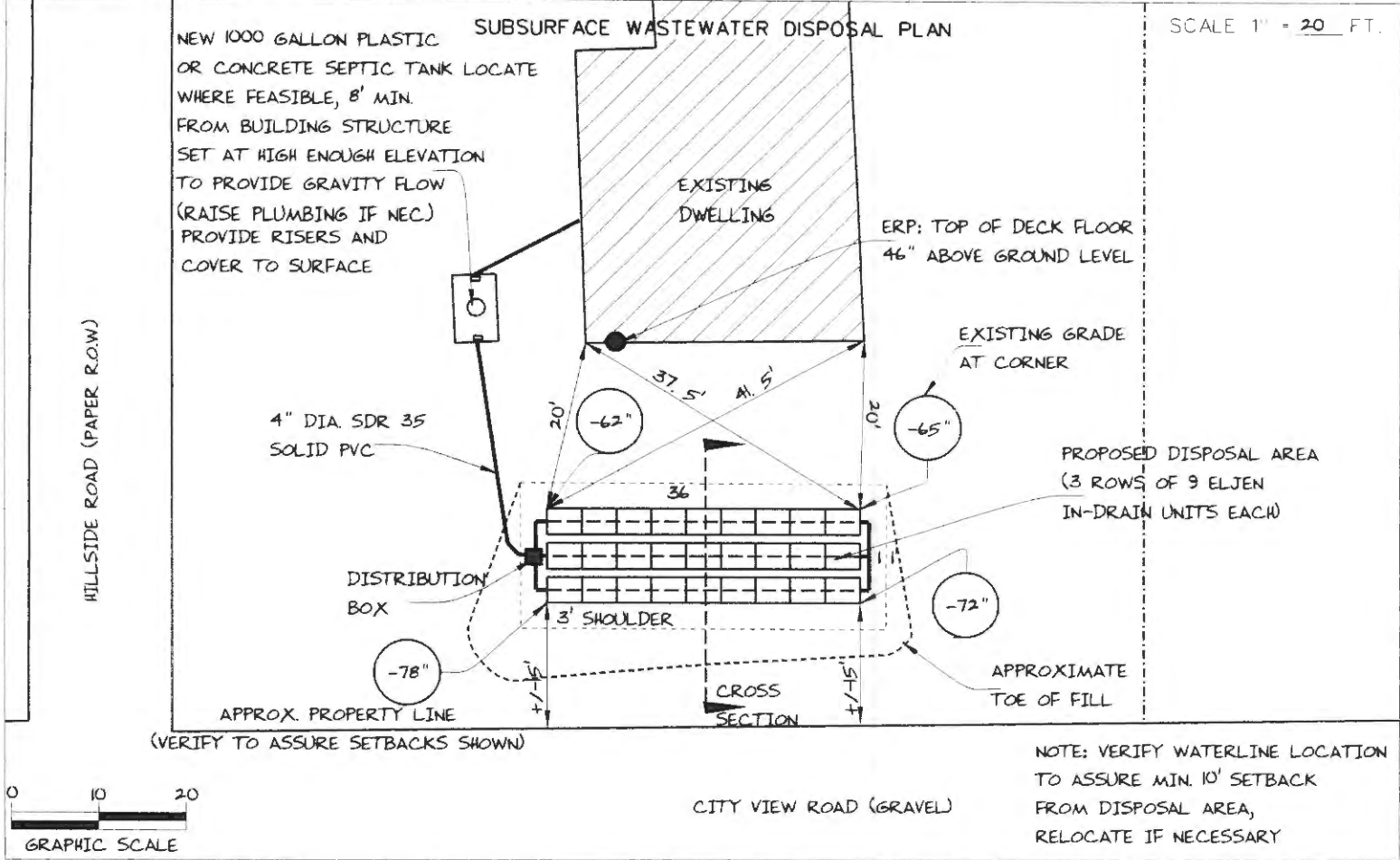
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HHE-200 Rev. 10 02

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; LITTLE DIAMOND ISLAND**
 Street, Road, Subdivision: **33 CITY VIEW ROAD**
 Owner's Name: **PETER J. LEAHY IRREVOCABLE REALTY TRUST**

SCALE 1" = 20 FT.



FILL REQUIREMENTS

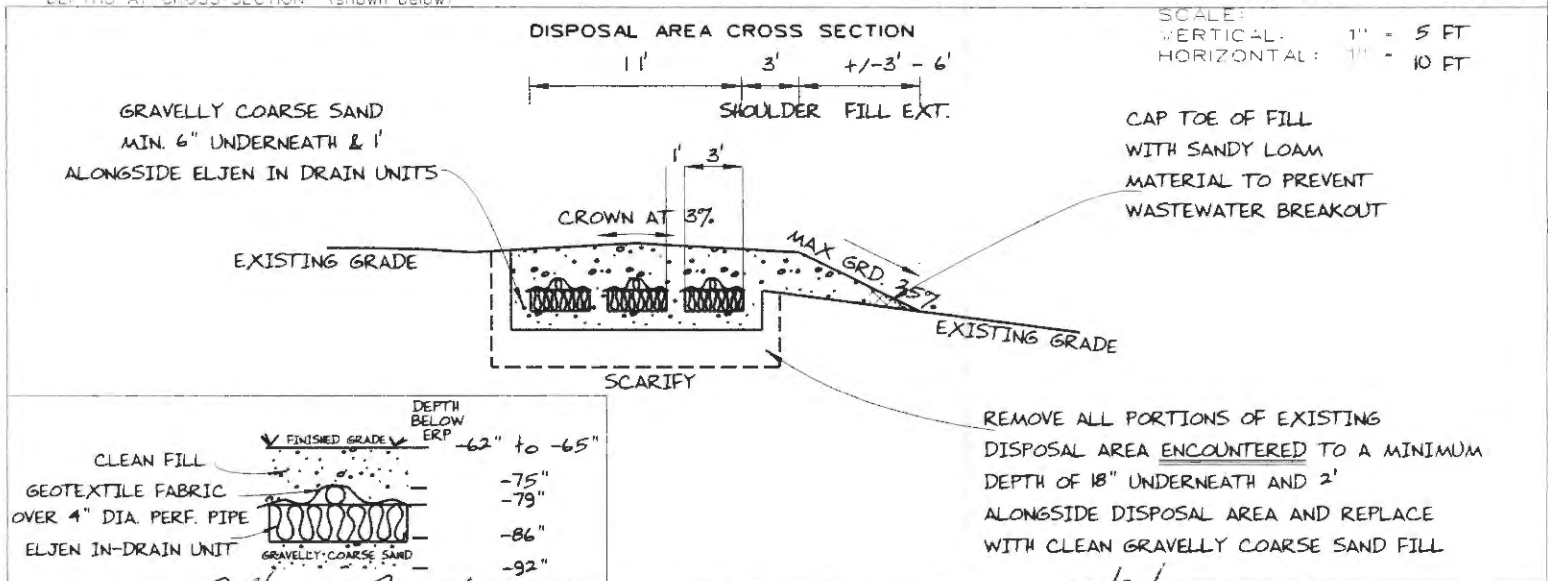
Depth of Fill (Upslope) : 0"
 Depth of Fill (Downslope) : 7" - 13"
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

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

ELEVATION REFERENCE POINT

SEE DETAIL BELOW
 Location & Description TOP OF PORCH FLOOR, 46" ABOVE GRADE
 Reference Elevation is: 0.0" or -----



Albert Frick
 Site Evaluator Signature

163
 SE *

7/8/2011
 Date

PORTLAND, LITTLE DIAMOND ISLAND

33 CITY VIEW ROAD

PETER J. LEAHY IRREVOCABLE REALTY TRUST

TOWN

LOCATION

APPLICANT'S NAME

- 7) The actual waste water flow or number of bedrooms shall not exceed the design criteria indicated on this application without a re-evaluation of the system as proposed
- 8) The general minimum setbacks between a well (public or private) and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.
- 9) When a gravity system is proposed: BEFORE CONSTRUCTION/INSTALLATION BEGINS, the system installer or building contractor shall review the elevations of all points given in this application and the elevation of the existing and/or proposed building drain and septic tank inverts for compatibility to minimum pitch requirements. In gravity systems, the invert of the septic tank(s) outlet(s) should be at least 4 inches above the invert of the distribution box outlet at the disposal area.
- 10) When an effluent pump is required: Pump stations should be sized per manufacturer's specifications to meet lift requirements and friction loss. Provisions shall be made to make certain that surface and ground water does not enter the septic tank or pump station, by sealing/grouting all seams and connections, and by placement of a riser and lid at or above grade. An alarm device warning of a pump failure shall be installed. Also, when pumping is required of a chamber system, install a 'T' connection in the distribution box and place 3 inches of stone or a splash plate in the first chamber. Insulate gravity pipes, pump lines and the distribution box as necessary to prevent freezing.
- 11) On all systems, remove the vegetation, organic duff and old fill material from under the disposal area and any fill extension. Additional fill beyond indicated on plan may be necessary to replace organic matter. On sites where the proposed system is to be installed in natural soil, scarify the bottom and sides of the excavated disposal area with a rake. Do not use wheeled equipment on the scarified soil surface. For systems installed in fill, scarify the native soil by roto-tilling or scarifying with teeth of backhoe to a depth of at least 8 inches over the entire disposal and fill extension area to prevent glazing and to promote fill bonding. Place fill in loose layers no deeper than 8 inches and compact before placing more fill (this ensures that voids and loose pockets are eliminated to minimize the chance of leakage or differential settling). Do not use wheeled equipment on the scarified soil area until after 12 inches of fill is in place. Keep equipment off proprietary devices. Divert the surface water away from the disposal area by ditching or shallow landscape swales.
- 12) Unless noted otherwise, fill shall be gravelly coarse sand, which contains no more than 5% fines (silt and clay). Crushed stone shall be clean and free of any rock dust from the crushing process.
- 13) Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 14) Seed all filled and disturbed surfaces with perennial grass seed, with 4" min. soil or soil amendment mix suitable for growing, then mulch with hay or equivalent material to prevent erosion. Alternatively, bark or permanent landscape mulch may be used to cover system. Woody trees or shrubs are not permitted on the disposal area or fill extensions.
- 15) If an advanced wastewater treatment unit is part of the design, the system shall be operated and maintained per manufacturer's specifications.



Albert Frick Associates, Inc.
Soil Scientists & Site Evaluators

95A County Road Gorham, Maine 04058
(207) 859-5565

Fill Estimation Worksheet

Albert Frick Associates Inc.

95A County Road

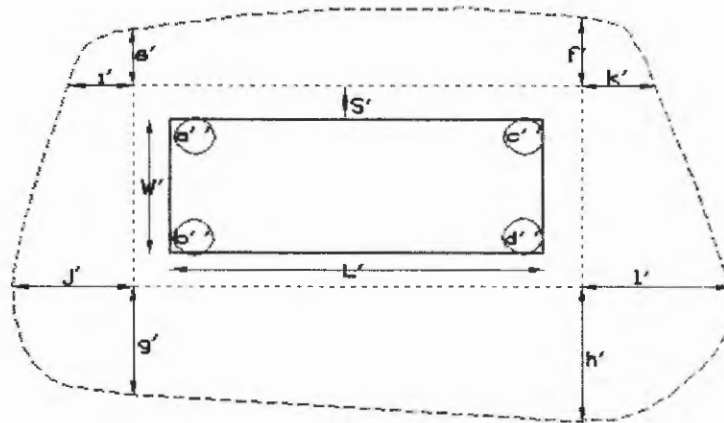
Gorham, Me 04038

839-5563 FAX - 839-5564

E-Mail - AFA@Maine.RR.Com

Town: Portland, Little Diamond Island
 Project owner/applicant: Leahy
 Address:

This worksheet is being provided as a complimentary tool to assist in estimating the **approximate** amount of fill required to construct the proposed system. This worksheet does not substitute for a personal visit to the site for your own estimate. These calculations are intended to serve as a check to your work. Site features beyond the model (terrain) can vary to effect model projections.



Length (L)	36 feet
Width (W)	11 feet
Shoulder (S)	3 feet
<u>Depth of fill:</u>	
upper left (a)	27 inches
upper right (c)	27 inches
lower left (b)	27 inches
lower right (d)	27 inches
<u>Fill Extension:</u>	
left up (e)	0 feet
right up (f)	0 feet
left down (g)	3 feet
right down (h)	6 feet
upper left (i)	0 feet
lower left (j)	0 feet
upper right (k)	3 feet
lower right (l)	6 feet
Cost of fill per yard= \$ 0.00	

Body	60 cubic yards
Fill Down	8 cubic yards
Fill Up	0 cubic yards
Fill left	0 cubic yards
Fill right	4 cubic yards
Fill upleft	0 cubic yards
Fill upright	1 cubic yards
Fill downleft	1 cubic yards
Fill downright	1 cubic yards

SubTotal=	75 cubic yards
Shrinkage %=	15 %
Total Backfill	86 cubic yards

Adjusted cost of Total Backfill= \$ -

* Does not include removal of existing disposal area.

**CITY OF PORTLAND, MAINE
REAL ESTATE TAX ROLL
TAX YEAR 2011**

PARCEL ID	TAX ACCT ID	OWNER INFORMATION	PROPERTY DESCRIPTIONS	TYPE	VALUATION AMOUNT	TAXABLE VALUE	TAX AMOUNT
105 - N-001-001	15186	LEAHY PETER J IRREVOCABLE REALTY TRUST 4 BLACKSMITH RD MILTON, MA 02186	105-N-1-2 CITY VIEW AVE 33 HILLSIDE RD LITTLE DIAMOND ISLAND 12320 SF	LAND VALUE BUILDING VALUE TAXABLE	180,300 91,500 271,800	271,800	4,870.66
397 - D-013-001	40846	LEAHY THOMAS J & PAMELA B JTS	397-D-13 PINELOCH DR 147-151 12248 SF	LAND VALUE BUILDING VALUE HOMESTEAD EXEMPTION TAXABLE	87,900 177,000 -10,000 254,900	254,900	4,567.82
178 - C-023-001	25060	LEAHY-LIND SHARON A	178-C-23 REDLON RD 16-20 10934 SF	LAND VALUE BUILDING VALUE HOMESTEAD EXEMPTION TAXABLE	93,200 167,900 -10,000 251,100	251,100	4,499.72
033 - J-020-001	5102	LEAPING FISH LLC	33-J-20 CUMBERLAND AVE 369-371 HANOVER ST 1-3 2295 SF	LAND VALUE BUILDING VALUE TAXABLE	60,400 168,000 228,400	228,400	4,092.94
044 - C-004-001	6468	LEAPING FISH LLC	44-C-4-5 YORK ST 191-195 4799 SF	LAND VALUE BUILDING VALUE TAXABLE	150,400 142,900 293,300	293,300	5,255.94
213 - C-010-001	29002	LEARY CHARLES L	213-C-10-13 WESTBROOK ST 1216-1228 AREA 1 4161SF AREA 2 7615 SF	LAND VALUE BUILDING VALUE TAXABLE	10,000 0 10,000	10,000	179.20
213 - E-006-001	29018	LEARY CHARLES L	213-E-6 WESTBROOK ST 1225-1231 15098 SF	LAND VALUE BUILDING VALUE HOMESTEAD EXEMPTION TAXABLE	214,300 145,400 -10,000 349,700	349,700	6,266.62
012 - G-013-001	1016	LEARY EDWARD S	12-G-13-14 WALNUT ST 101-105 2947 SF	LAND VALUE BUILDING VALUE TAXABLE	91,300 137,300 228,600	228,600	4,096.52
		23 SNOW RD SCARBOROUGH, ME 04074					



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

Nov. 01 2011

Received from Annex Sealy

Location of Work 33 City View Dr

Cost of Construction \$ Building Fee:

Permit Fee \$ Site Fee:

Certificate of Occupancy Fee:

Total:

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

Other Sub Surface 1001 Engineered system

CBL: 105 N 1001

Check #: 175 Total Collected \$ 360.00

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

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