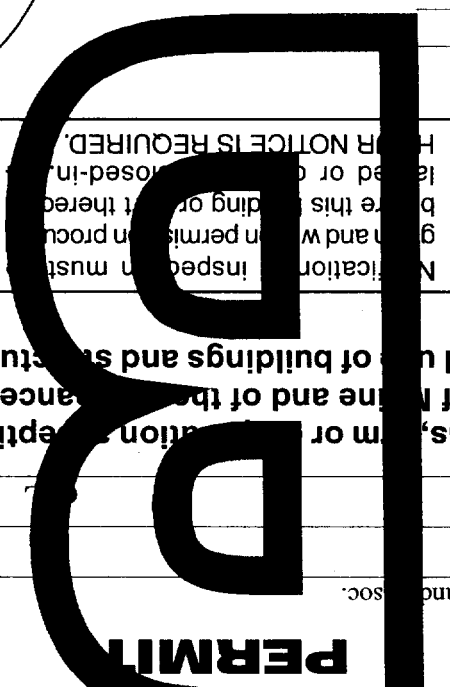


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

PERMIT SECTION



Please Read Application And Notes, If Any, Attached

This is to certify that State Of Maine/Maine Island soc. has permission to Install Privy AT 0 Jewell Island

Permit Number: 041363
CITY OF PORTLAND
NOV 16 2004
108 A001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all 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 inspection must be given and when permit is procured before this building or structure is occupied. YOUR NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Fire Dept.
Health Dept.
Appeal Board
Department Name

PENALTY FOR REMOVING THIS CARD

Director - Building & Inspection Services
[Signature]

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 04-1363	Issue Date: NOV 16 2004	CBL: 108 A001001
------------------------------	-----------------------------------	----------------------------

Location of Construction: O Jewell Island	Owner Name: State Of Maine	Owner Address: CITY OF PORTLAND	Phone:
Business Name:	Contractor Name: Maine Island Assoc.	Contractor Address: 41A Union Wharf Portland	Phone: 2077618225
Lessee/Buyer's Name	Phone:	Permit Type:	Zone:

Past Use: Jewell Island	Proposed Use: Jewell Island / Install Privy	Permit Fee: \$30.00	Cost of Work: \$1,000.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: J Type: N14 11/15/04 <i>[Signature]</i>	
		Signature:	Signature:	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)				
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied				
Signature: _____ Date: _____				

Permit Taken By: Idobson	Date Applied For: 0911312004	Zoning Approval		
------------------------------------	--	------------------------	--	--

<ol style="list-style-type: none"> 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.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> late: _____	Zoning Appeal <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 late: _____	Historic Preservation <input 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 late: _____
---	---	---	---

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 IN CHARGE OF WORK, TITLE DATE PHONE

City of Portland, Maine - Building or Use Permit

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

Permit No: 04-1363	Date Applied For: 09/13/2004	CBL: 108 A001001
------------------------------	--	----------------------------

Location of Construction: 0 Jewell Island	Owner Name: State Of Maine	Owner Address:	Phone:
Business Name:	Contractor Name: Maine Island Assoc.	Contractor Address: 41A Union Wharf Portland	Phone (207) 761-8225
Lessee/Buyer's Name	Phone:	Permit Type: Building Miscellaneous	

Proposed Use: Jewell Island / Install Privy	Proposed Project Description: Install Privy
---	---

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>Jewell Island</u>		
Total Square Footage of Proposed Structure <u>20</u>	Square Footage of Lot 200 <u>221 acres</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner: <u>State of ME</u> <u>Bureau of Parks + Lands</u>	Telephone: <u>284-4920</u>
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Steve Spencer,</u> <u>Bureau of Parks + Lands</u> <u>SHS #28, Augusta, ME 04333</u>	cost Of Work: \$ <u><#1000</u> Fee: \$ <u>30.-</u>
Current use: <u>Recreation</u>		
if the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: _____		
Project description: _____		
Contractor's name, address & telephone:		
Who should we contact when the permit is ready: <u>Maine Island Trail Assoc.</u>		
Mailing address: <u>41A Union Wharf, Portland, ME 04101</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>761-8225*</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 Officer or 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: <u>Vincent Marshall</u>	Date: <u>9/13/04</u>
---	----------------------

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 4th floor of City Hall

Check #
15230

COPY

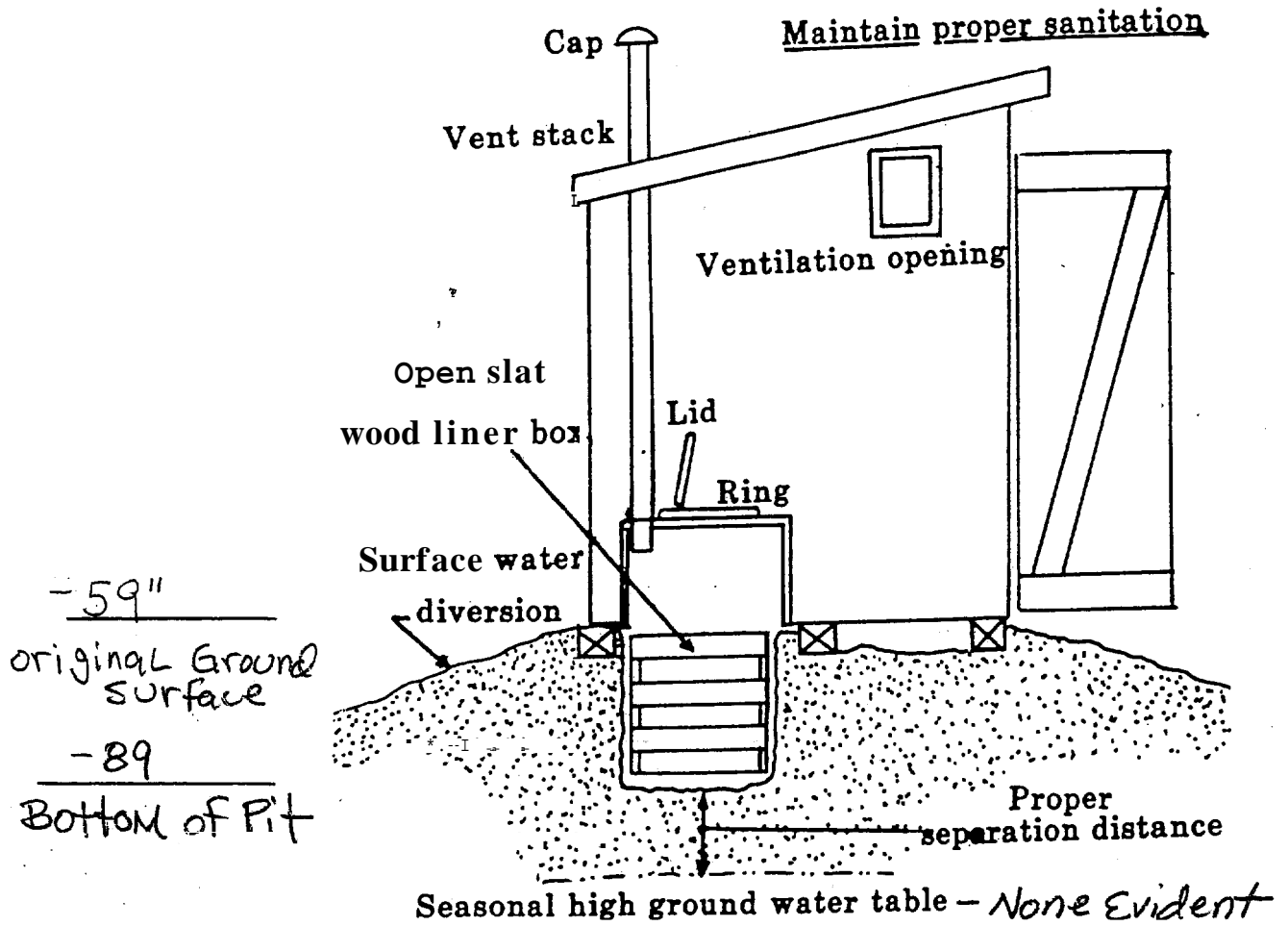
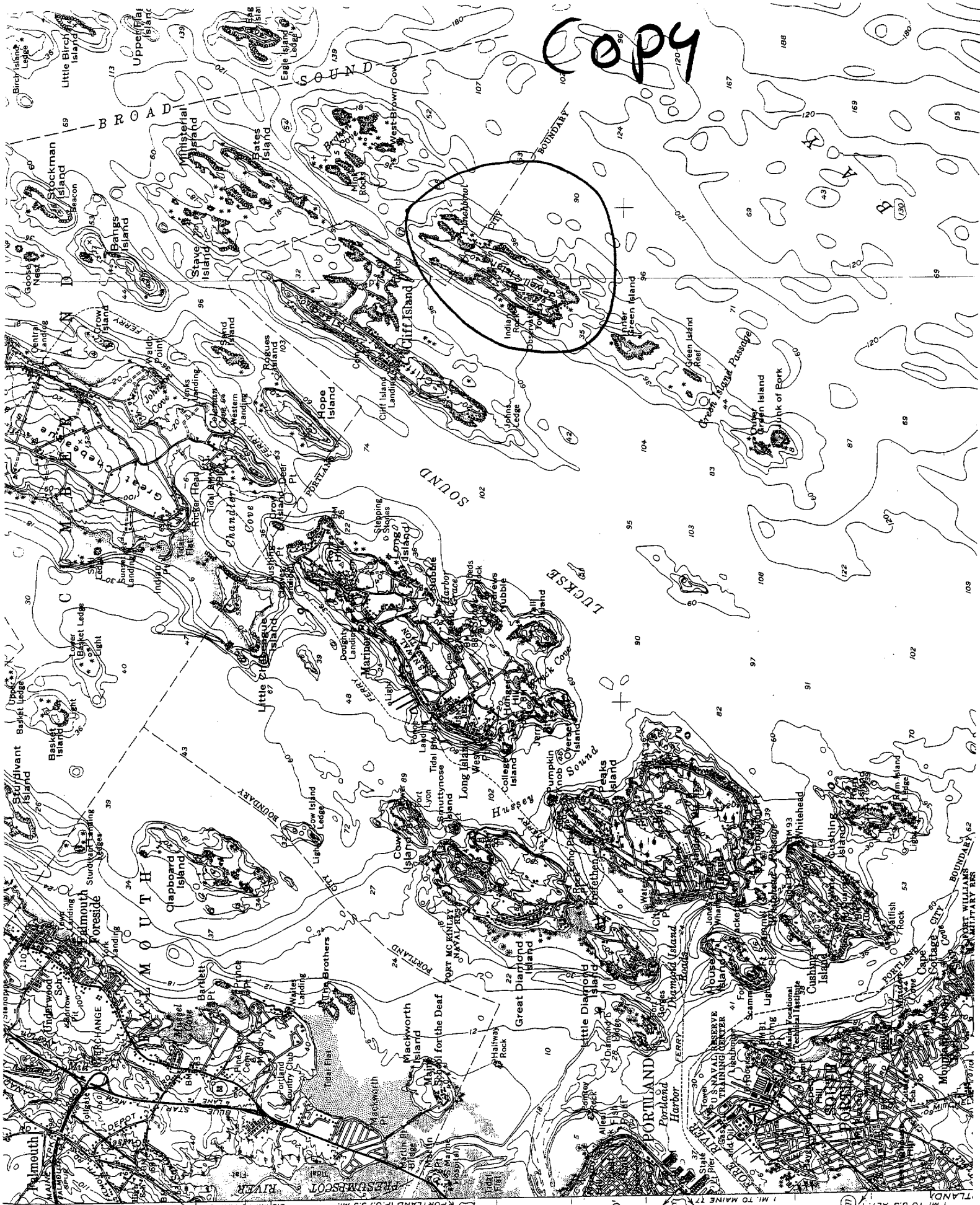


Figure 13-1 Pit Privy

COPY

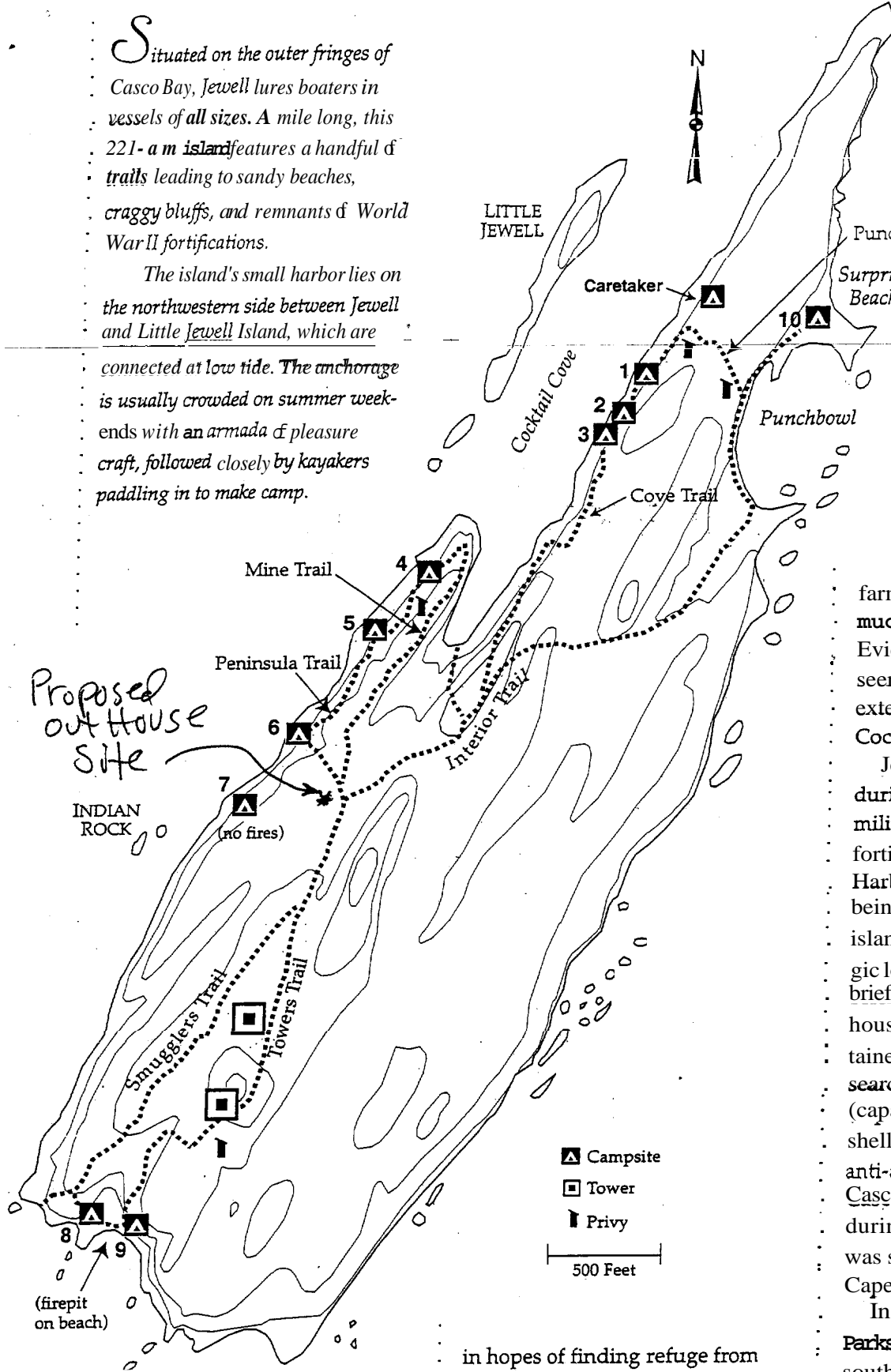


PORTSMOUTH, N. H. 5.5 MI. 3.2 MI. TO INTERCHANGE I
 BIDEFORD 21 MI. 1.3 MI. TO PORTLAND
 1.6 MI. TO U.S. I. 40
 1 MI. TO MAINE 77
 1 MI. TO U.S. ALT. 11

Jewell Island

Situated on the outer fringes of Casco Bay, Jewell lures boaters in vessels of all sizes. A mile long, this 221-a.m island features a handful of trails leading to sandy beaches, craggy bluffs, and remnants of World War II fortifications.

The island's small harbor lies on the northwestern side between Jewell and Little Jewell Island, which are connected at low tide. The anchorage is usually crowded on summer weekends with an armada of pleasure craft, followed closely by kayakers paddling in to make camp.



farming, and they converted much of the island to pasture. Evidence of agriculture can still be seen in the sparsely forested area extending inland from the head of Cocktail Cove.

Jewell next rose in prominence during World War II, when the military determined that the fortifications protecting Portland Harbor were inadequate. Jewell, being one of the outermost islands, was an important strategic location for defense. For a brief period during WWII, Jewell housed 400 troops who maintained two observation towers, a searchlight, two six-inch guns (capable of firing 100-pound shells 17 miles), and four 90-mm anti-aircraft guns. Although Casco Bay was never threatened during the War, a German U-Boat was sighted between Jewell and Cape Small in June, 1942.

In 1972, Maine's Bureau of Parks and Recreation acquired the southern end of Jewell, and four years later, the State bought the remainder of the island. Jewell has been administered as an undeveloped recreational use island since 1972, and more formally beginning in 1988, when Jewell became one of the first islands on the Maine Island Trail

in hopes of finding refuge from King Philip's War. However, in 1676, a group of Indians attacked their house, kidnapping several of the inhabitants.

By 1713, peace had returned to Casco Bay. An interesting sequence of settlers attempted to seek their fortune on Jewell

History

Although tales of pirate treasure abound, the island is actually named for George Jewell, who reportedly bought the island from local Indians in 1636

COPY

108 A 001

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

>> Caution Permit Required -- Attach in Space Below <<

PROPERTY LOCATION	
City, Town, or Plantation	Portland
Street or Road	Old Warf Trail
Subdivision, Lot #	Jewell Island

PORTLAND PERMIT # 9098 APPLICANTS COPY
 Date Permit Issued: 9/13/03 FEE \$100.00 If Double Fee Charged

OWNER/APPLICANT INFORMATION	
Name (last, first, MI)	Spencer Steve <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant
Mailing Address of Owner/Applicant	Bureau of Parks & Lands SHS #28, Augusta, Me. 04333
Daytime Tel. #	289-4926

Local Plumbing Inspector Signature: _____ L.P.I. # _____

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER _____ YEARS FROM DATE ISSUED UNLESS WORK HAS COMMENCED

Municipal Tax Map # _____ LOT # _____

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 of Owner or Applicant _____ Date _____

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

Local Plumbing Inspector Signature _____ (2nd) Date Approved _____

PERMIT INFORMATION

TYPE OF APPLICATION <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	DISPOSAL SYSTEM COMPONENTS <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input checked="" type="checkbox"/> 3. Alternative Toilet, specify: <u>Pit Privy</u> <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 (2000 gpd or more) <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 <u>221</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	DISPOSAL SYSTEM TO SERVE <input type="checkbox"/> 1. Single Family Dwelling Unit, No. of bedrooms: _____ <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input checked="" type="checkbox"/> 3. Other: <u>State Park Facility</u> (specify) Current Use: <input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TYPE OF WATER SUPPLY <input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: <u>N/A</u>

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <u>N/A</u> <input type="checkbox"/> b. Low profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY _____ gallons	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <u>N/A</u> <input type="checkbox"/> a. Cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE _____ <input type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input 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 <u>N/A</u> <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW <u>N/A</u> gallons per day BASED ON: <input type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 502.2 (other facilities) SHOW CALCULATIONS -- for other facilities --
SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>12, B, J</u> at Observation Hole # <u>1</u> Depth <u>48"</u> Elevation <u>-131"</u> OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Small -- 2.0 sq. ft./gpd <u>N/A</u> <input type="checkbox"/> 2. Medium -- 2.6 sq. ft./gpd <input type="checkbox"/> 3. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 4. Large -- 4.1 sq. ft./gpd <input type="checkbox"/> 5. Extra-Large -- 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required <u>N/A</u> Specify only for engineered systems: DOSE: _____ gallons	<input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER-METER DATA

SITE EVALUATOR STATEMENT

I certify that on 7/31/03 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

David P. Rocque SE # 154 Date 7/31/03
 Site Evaluator Signature
David P. Rocque Telephone # 622-7487
 Site Evaluator Name Printed

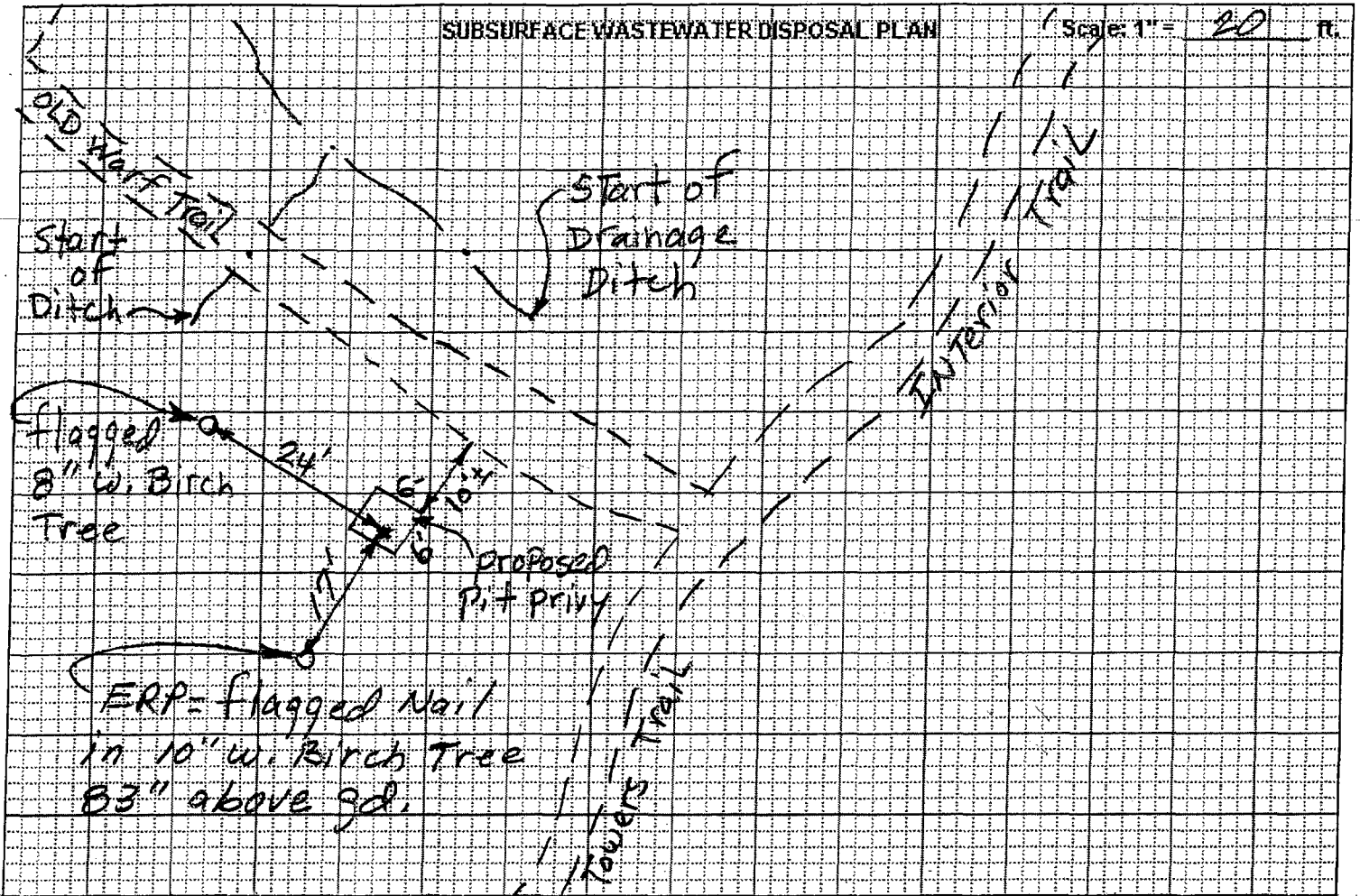
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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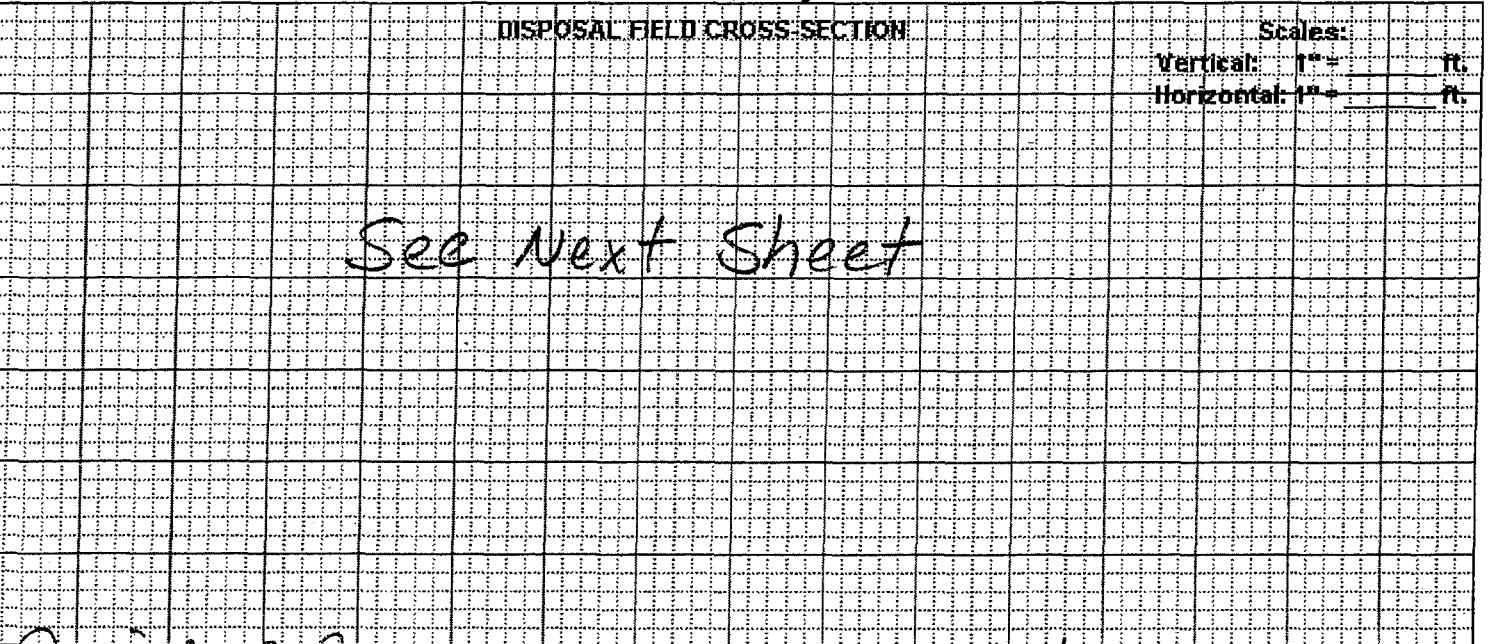
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 FAX (207) 287-3165

Town, City, Plantation _____ Street, Road, Subdivision _____ Owner or Applicant Name _____



BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Backfill (upslope) <u>0</u> "	Finished Grade Elevation <u>N/A</u> "	Location & Description: <u>Flagged Nail</u>
Depth of Backfill (downslope) <u>0</u> "	Top of Distribution Pipe or Proprietary Device <u>N/A</u> "	<u>in 10" w. Birch Tree</u>
DEPTHS AT CROSS-SECTION (shown below)	Bottom of Disposal Field (Pit) <u>-89</u> "	Reference Elevation is: <u>0.0</u> " or: _____



David P. Roegue 154 7/31/03
 Site Evaluator Signature CE # Date

Page 3 of 3
 HHE-200 Rev 10/02

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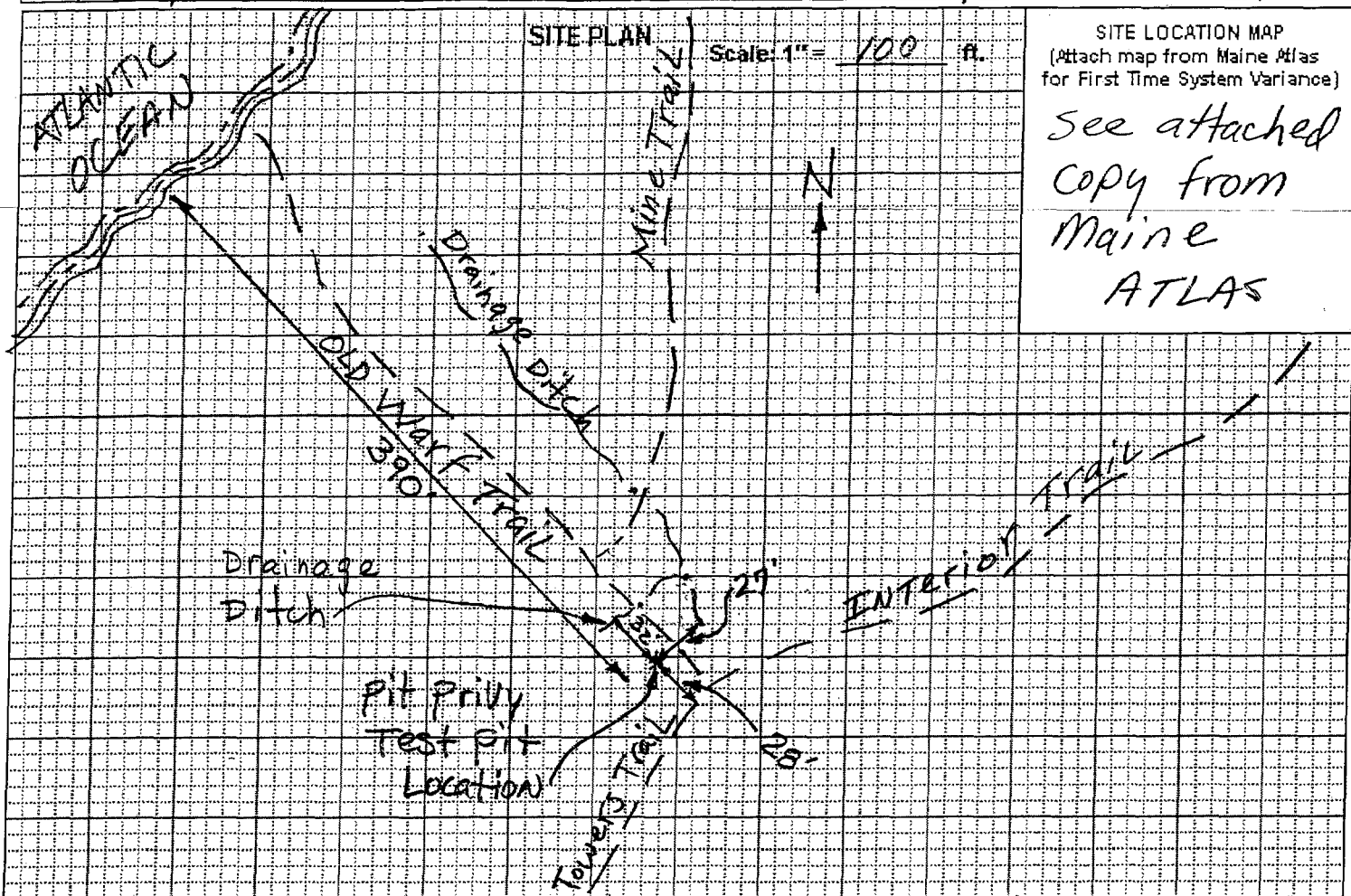
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-3165

Town, City, Plantation
Portland

Street, Road, Subdivision
OLD WOLF TRAIL

Owner or Applicant Name
Dept. of Conservation



SITE LOCATION MAP
(Attach map from Maine Atlas for First Time System Variance)
See attached copy from Maine ATLAS

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

Observation Hole # 2 Test Pit Boring
Depth of organic horizon above mineral soil _____

Texture	Consistency	Color	Mottling
Very gravelly		Various	
Stoney	Fricable	Shades of	NONE
Sandy		Brown	Observed
Loam fill			

Soil Profile <u>12</u>	Classification Condition <u>B</u>	Slope Percent <u>0-5</u>	Limiting Factor Depth <u>N/A</u>	<input type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole # _____ Test Pit Boring
Depth of organic horizon above mineral soil _____

Texture	Consistency	Color	Mottling
Tp1 is in the shoulder of a road most likely constructed for WWII Activities. Most of Island soils are very shallow to bedrock			

Soil Profile _____	Classification Condition _____	Slope Percent _____	Limiting Factor Depth _____	<input type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

David P. Poague
Site Evaluator/Signature

154
SE #

7/31/03
Date