

CITY OF PORTLAND WASTEWATER CAPACITY APPLICATION

Department of Public Services,
55 Portland Street,
Portland, Maine 04101-2991



Bradley Roland, P.E.
Water Resources Division

Date: 6/20/17

1. Please, Submit Utility, Site, and Locus Plans.

Site Address: 17 BISHOP ST. Chart Block Lot Number: _____

Proposed Use: INTERMEDIATE CARE
 Previous Use: HANDICAP FAMILY UNIT
 Existing Sanitary Flows: _____ GPD
 Existing Process Flows: _____ GPD
 Description and location of City sewer that is to receive the proposed building sewer lateral.
- EXISTING -

Site Category	Commercial (see part 4 below)	<input type="checkbox"/>
	Industrial (complete part 5 below)	<input type="checkbox"/>
	Governmental	<input type="checkbox"/>
	Residential	<input type="checkbox"/>
	Other (specify)	<input checked="" type="checkbox"/>

INTERMEDIATE CARE

Clearly, indicate the proposed connections, on the submitted plans.

2. Please, Submit Contact Information.

City Planner's Name: _____ Phone: justin@theplymouthhouse.com
 Owner/Developer Name: PINE TREE RECOVERY CTR. c/o JUSTIN BARRETT
 Owner/Developer Address: _____
 Phone: 603 630 2520 Fax: _____ E-mail: justin@theplymouthhouse.com
 Engineering Consultant Name: MECHANICAL SYSTEMS ENGINEERING
 Engineering Consultant Address: _____
 Phone: 207 846-1441 Fax: 846-1443 E-mail: kurt@mechanicalsystemseng.com

Note: Consultants and Developers should allow +/- 15 days, for capacity status, prior to Planning Board Review.

3. Please, Submit Domestic Wastewater Design Flow Calculations. SEE CALCS NEXT SHEET

Estimated Domestic Wastewater Flow Generated: _____ GPD
 Peaking Factor/ Peak Times: _____
 Specify the source of design guidelines: (i.e. "Handbook of Subsurface Wastewater Disposal in Maine," "Plumbers and Pipe Fitters Calculation Manual," "Portland Water District Records, Other (specify) _____

Note: Please submit calculations showing the derivation of your design flows, either on the following page, in the space provided, or attached, as a separate sheet.