

City of Portland, Maine – Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 57 Whittier Street		Owner: Ted & Linda Leyme		Phone: 772-8489		Permit No: 980661	
Owner Address: Same		Leasee/Buyer's Name:		Phone:		Business Name:	
Contractor Name: American Concrete		Address: 1022 Minot Ave. Auburn		Phone: (207) 784-1388		<div style="border: 2px solid black; padding: 5px; text-align: center;"> PERMIT ISSUED Permit Issued: JUN 22 1998 CITY OF PORTLAND </div>	
Past Use:		Proposed Use: Replace existing Steps		COST OF WORK: \$ 360.00		PERMIT FEE: \$ 25.00	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: (u) Use Group: R3 Type: 5B 00CA96 Signature: <i>Hoffman</i>	
Proposed Project Description:		Signature:		PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Zone: CBL: 426-B-026 R-5 Zoning Approval: <i>OK with conditions shall not increase beyond the existing footprint</i>	
		Action:		Approved <input type="checkbox"/> Approved with Conditions: <input type="checkbox"/> Denied <input type="checkbox"/>		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 major <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By:		Date Applied For:		Signature:		Date:	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:**
- Approved
 - Approved with Conditions
 - Denied

Date: _____

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 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 provisions of the code(s) applicable to such permit

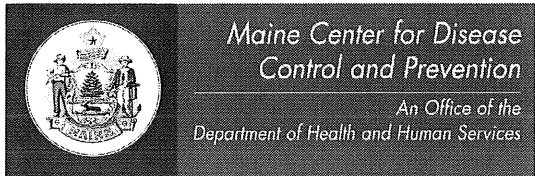
American Concrete Industries
1022 Minot Ave.
Auburn, Maine 04210

Via Mail - 17 June 1998

SIGNATURE OF APPLICANT _____ ADDRESS: _____ DATE: _____ PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE: _____

CEO DISTRICT 6



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel. (207) 287-8016
Fax (207) 287-9058; TTY (800) 606-0215

Tel. (207) 287-5672

Subsurface Wastewater Unit

Fax (207) 287-4172

May 23, 2012

Tammy Munson
City of Portland
389 Congress Street
Portland, ME 04101

Subject: LPI Signature for Variance

Dear Ms. Munson:

I am writing in regards to permit #117121 that was sent to us to be processed. I cannot process this application until the Local Plumbing Inspector signs the Variance Form. It is stated on this application that it is Local Plumbing Inspector Approval for this application and does need the Local Plumbing Inspector's signature.

If you have any question on this matter, feel free to contact me at 287-5672.

Sincerely,

Wendy Austin, Office Associate II
Subsurface Wastewater Unit
Department of Health & Human Services

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests prior to rendering a decision.

I, Jonathan Rivera, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I do do not) approve the requested variance. I will will not) issue a permit for the system's installation as proposed by the application.

LPI Signature

Date 07/27/12

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Environmental Health.

I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I do do not) recommend the issuance of a permit for the system's installation as proposed by the application.

LPI Signature

Date

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (does does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

SIGNATURE OF THE DEPARTMENT

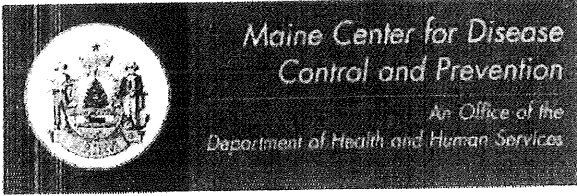
DATE

- Notes:
1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)
 2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

**SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT
WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).**

CHARACTERISTIC	POINT ASSESSMENT
Soil Profile	
Depth to Groundwater/Restrictive Layer	
Terrain	
Size of Property	
Waterbody Setback	
Water Supply	
Type of Development	
Disposal Area Adjustment	
Vertical Separation Distance	
Additional Treatment	
TOTAL POINT ASSESSMENT:	

Minimum Points (Check One). Outside Shoreland Zone-50 Inside Shoreland Zone-65 Subdivision-65



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION		Town of <u>Portland (Peaks Island)</u>
Property Owner's Name:	<u>Kathie Smith</u>	Tel. No. _____
System's Location:	<u>457 Island Avenue (Map 90, Lot P-4)</u>	
Property Owner's Address:	_____	Zip Code _____
e-mail address:	_____	

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)	SECTION OF RULE
1. <u>To allow a replacement septic tank to be sited 5' min. from dwelling and 4' min. from property line</u>	<u>Sec. 8 (Table 8 A)</u>
2. <u>To allow a 3 : 1 slope variance for fill extensions near property lines, as necessary</u>	<u>Sec. 8, D. 1. (c)</u>
3. _____	_____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.

ALBERT FRICK, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available; enhances the potential of the site for subsurface wastewater disposal; and that the system should function properly.

Albert Frick SIGNATURE OF SITE EVALUATOR 10/26/2011 DATE

PROPERTY OWNER

Danielle Mulhern / LPA Inc. am the owner agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

Danielle M. Mulhern / LPA Inc. SIGNATURE OF OWNER 10-28-11 DATE
X AGENT FOR THE OWNER

250.00

2011 11 26 83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-3166

PROPERTY LOCATION

>>< LOCAL PLUMBING INSPECTOR APPROVAL REQUIRED <<

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

Street or Road: **457 ISLAND AVENUE**

Subdivision, Lot #:

Town/City

Date Permit Issued

117121

Local Plumb. Ins. Signature

OWNER/APPLICANT INFORMATION

Name (last, first, MI): **SMITH KATHIE** Owner Applicant

Mailing Address of Applicant: **LIONEL PLANTE ASSOCIATES
98 ISLAND AVENUE
PEAKS ISLAND, ME. 04108**

Daytime Tel. #:

Local Plumb. Ins. Signature

The Subsurface Wastewater Disposal System ~~shall~~ 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 # **90** Lot # **P-4**

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.

CAUTION: INSPECTION REQUIRED

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

Daniel M. Mulhern/LPA 10/28/11
Signature of Owner/Applicant Date

(1st) Date Approved

Local Plumbing Inspector Signature

(2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

- 1. First Time System
- 2. Replacement System
- Type Replaced:
- Year Installed:
- 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 & alt 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

6,419 SQ. FT. ACRES

DISPOSAL SYSTEM TO SERVE

- 1. Single Family Dwelling Unit, No. of Bedrooms: **3**
- 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: **1008** sq. ft. lin. ft.
- 21 ELJEN IN-DRAIN 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

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

**3 BEDROOMS AT
90 GALLONS PER
DAY EACH**

SOIL DATA & DESIGN CLASS

PROFILE: **3** CONDITION: **A/C**

at Observation Hole # **TP 1**
Depth **32**"
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

EFFLUENT/EJECTOR PUMP

- 1. Not required
 - 2. May be required
 - 3. Required
- Specify only for engineered systems: _____
- DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. **N 43** d **39** m **60** s
Lon. **W 70** d **11** m **30** s
If g.p.s., state margin of error

SITE EVALUATOR STATEMENT

I Certify that on **8/6/2002** (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 #

Date

ALBERT FRICK
Site Evaluator Name Printed

(207) 839-5563
Telephone Number

ALBERT@ALBERTFRICK.COM
E-mail Address

ALBERT FRICK ASSOCIATES - 95A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator

Page 1 of 3
HHE-200 Rev. 02/2011

~~117121~~
250.00

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Date: Department of Public Services
 Division of Health Engineering, Station 50 SHS
 Phone: 387-2127 FAX: (207) 287-4172

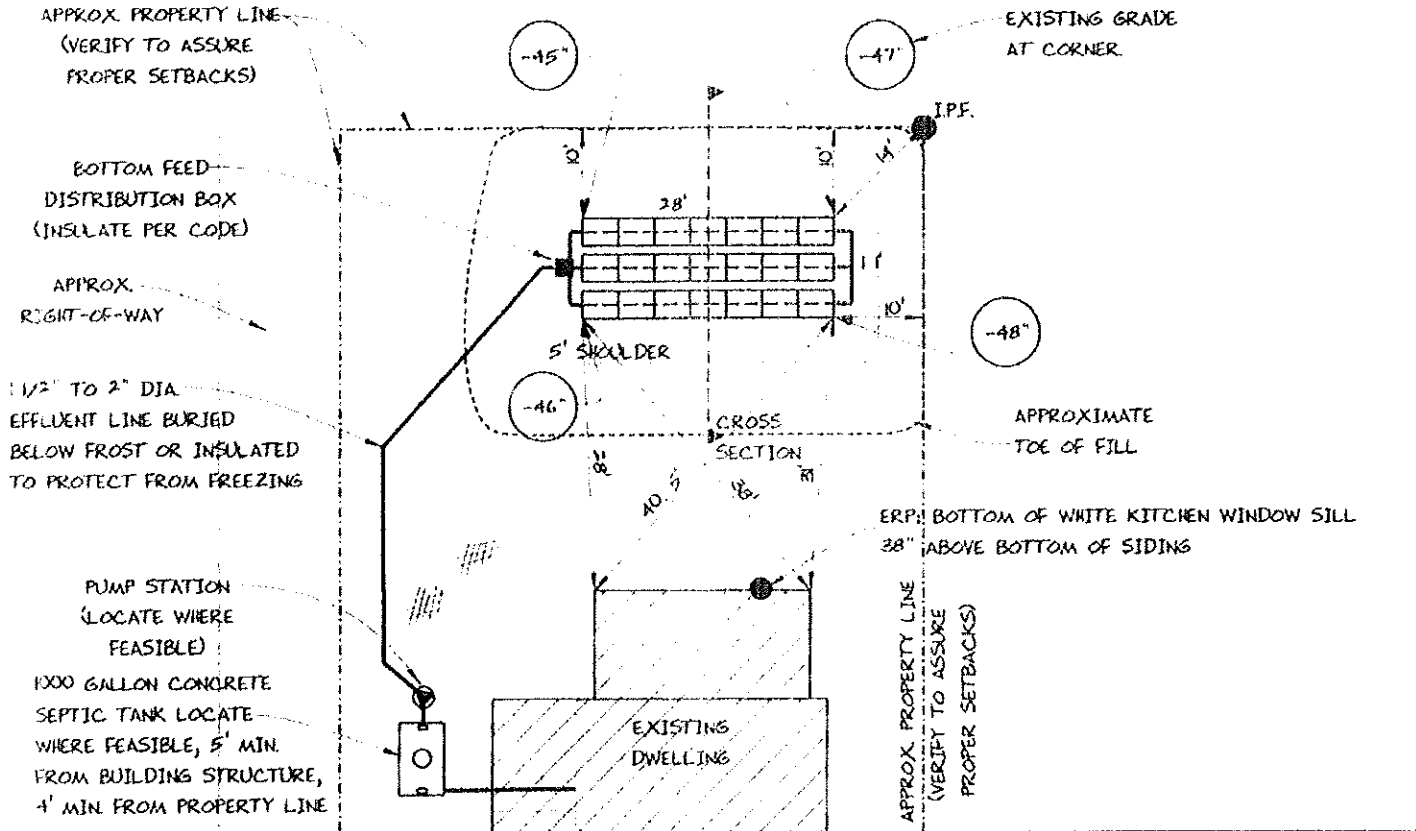
OWN: City of Portland
 PORTLAND, PEAKS ISLAND

ADDRESS: 457 ISLAND AVENUE

OWNER'S NAME: KATHIE SMITH

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20'



FILL REQUIREMENTS

Depth of Fill (Upslope) = 15" - 17"
 Depth of Fill (Downslope) = 16" - 18"

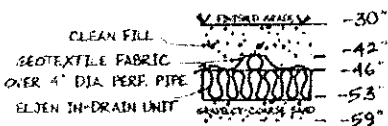
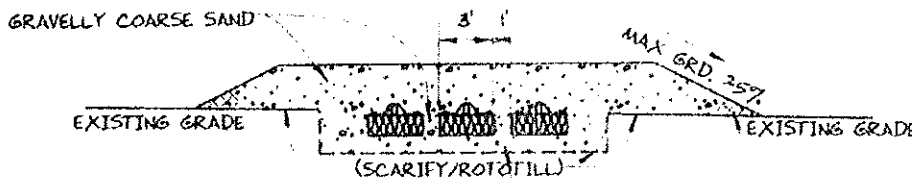
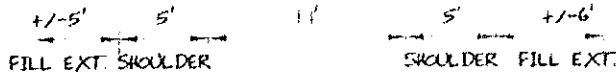
CONSTRUCTION ELEVATIONS
 Finished Grade Elevation
 Top of Distribution Pipe or Proprietary Device
 Bottom of Disposal Area

ELEVATION REFERENCE POINT

SEE DETAIL BELOW
 Location & Description BOTTOM OF WHITE KITCHEN WINDOW SILL, 38" ABOVE SIDING
 Reference Elevation is: 0.0' or -----

SCALE:
 VERTICAL: 1" = 5 FT
 HORIZONTAL: 1" = 10 FT

DISPOSAL AREA CROSS SECTION



GRAVELLY COARSE SAND
 CAP TOE OF FILL WITH SANDY LOAM MATERIAL

Site Evaluator Signature

Albert Frick

16.3

10/26/2011
 Date

BUILDING PERMIT REPORT

DATE: 20 June 98 ADDRESS: 57 Whittier ST. (426-B-026)
REASON FOR PERMIT: To replace existing steps
BUILDING OWNER: Ted & Linda Leyme
CONTRACTOR: American Concrete
PERMIT APPLICANT: ↑
USE GROUP R-3 BOCA 1996 CONSTRUCTION TYPE 5B

CONDITION(S) OF APPROVAL

This Permit is being issued with the understanding that the following conditions are met:

Approved with the following conditions: *1, *2, *29

1. This permit does not excuse the applicant from meeting applicable State and Federal rules and laws.
2. Before concrete for foundation is placed, approvals from the ~~Development Review Coordinator~~ and Inspection Services must be obtained. (A 24 hour notice is required prior to inspection)
3. Precaution must be taken to protect concrete from freezing.
4. It is strongly recommended that a registered land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
5. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by fire partitions and floor/ceiling assembly which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of ½ inch gypsum board or the equivalent applied to the garage means of ½ inch gypsum board or the equivalent applied to the garage side. (Chapter 4 Section 407.0 of the BOCA/1996)
6. All chimneys and vents shall be installed and maintained as per Chapter 12 of the City's Mechanical Code. (The BOCA National Mechanical Code/1993).
7. Sound transmission control in residential building shall be done in accordance with Chapter 12 section 1214.0 of the city's building code.
8. Guardrails & Handrails: A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Groups 42" , except Use Group R which is 36". In occupancies in Use Group A, B, H-4, I-1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect. (Handrails shall be a minimum of 34" but not more than 38". Use Group R-3 shall not be less than 30", but not more than 38".) Handrail grip size shall have a circular cross section with an outside diameter of at least 1 1/4" and not greater than 2".
9. Headroom in habitable space is a minimum of 7'6".
10. Stair construction in Use Group R-3 & R-4 is a minimum of 10" tread and 7 3/4" maximum rise. All other Use group minimum 11" tread. 7" maximum rise.
11. The minimum headroom in all parts of a stairway shall not be less than 80 inches. (6' 8")
12. Every sleeping room below the fourth story in buildings of use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside without the use of special knowledge or separate tools. Where windows are provided as means of egress or rescue they shall have a sill height not more than 44 inches (1118mm) above the floor. All egress or rescue windows from sleeping rooms shall have a minimum net clear opening height dimension of 24 inches (610mm). The minimum net clear opening width dimension shall be 20 inches (508mm), and a minimum net clear opening of 5.7 sq. ft.
13. Each apartment shall have access to two (2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
14. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hour, including fire doors with self closer's. (Over 3 stories in height requirements for fire rating is two (2) hours.)
15. The boiler shall be protected by enclosing with (1) hour fire-rated construction including fire doors and ceiling, or by providing automatic extinguishment.
16. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the

provisions of the City's Building Code Chapter 9, Section 19, 920.3.2 (BOCA National Building Code/1996), and NFPA 101 Chapter 18 & 19. (Smoke detectors shall be installed and maintained at the following locations):

- In the immediate vicinity of bedrooms
- In all bedrooms
- In each story within a dwelling unit, including basements

In addition to the required AC primary power source, required smoke detectors in occupancies in Use Groups R-2, R-3 and I-1 shall receive power from a battery when the AC primary power source is interrupted. (Interconnection is required)

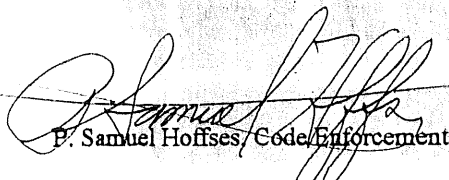
17. A portable fire extinguisher shall be located as per NFPA #10. They shall bear the label of an approved agency and be of an approved type.
18. The Fire Alarm System shall be maintained to NFPA #72 Standard.
19. The Sprinkler System shall maintained to NFPA #13 Standard.
20. All exit signs, lights, and means of egress lighting shall be done in accordance with Chapter 10 Section & Subsections 1023. & 1024. Of the City's building code. (The BOCA National Building Code/1996)
21. Section 25-135 of the Municipal Code for the City of Portland states, "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".
22. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act Title 5 MRSA refers, shall obtain a certification from a design professional that the plans commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.
23. Ventilation shall meet the requirements of Chapter 12 Sections 1210. Of the City's Building Code.
24. All electrical, plumbing and HVAC permits must be obtained by a Master Licensed holders of their trade.
25. All requirements must be met before a final Certificate of Occupancy is issued.
26. All building elements shall meet the fastening schedule as per Table 2305.2 of the City's Building Code. (The BOCA National Building Code/1996).
27. Ventilation of spaces within a building shall be done in accordance with the City's Mechanical Code (The BOCA National Mechanical Code/1993).
28. Please read and implement the attached Land Use-Zoning report requirements.

*29. *This permit is being issued with the condition that the proposed stairs will not increase beyond the existing footing of the original stairs*

30. _____

31. _____

32. _____



P. Samuel Hoffses, Code Enforcement

cc: Lt. McDougall, PFD
Marge Schmuckal

*City Portland
Postcard*

PS Form 3600-R - First-Class Mail and First-Class Package Service - Permit Imprint

Final

Postage Summary

Account Holder:	BERKELEY MAILINGS 91 BRUCE HILL RD CUMBERLAND CENTER, ME 04021 -3525 Contact: DAVE DAIGLE (207) 878 - 3223	Mailing Agent:		Org. For Mailing is Prepared:	CITY OF PORTLAND 389 CONGRESS ST OFC PORTLAND, ME 04101 -3529														
Account Number:	1756610																		
Permit:	Permit Imprint 6			Processing Category:	Postcards Only														
	CRID: 4279876		CRID: 5752635		CRID: 5752635														
Post Office Of Mailing:	PORTLAND ME 04101-9651	Mailer's Mailing Date:	09/20/2012	Weight of Single Piece:	0.0063 lbs.														
Post Office of Permit:	PORTLAND ME 04101-9651																		
Total Pieces:	283 pcs.	Total Weight:	1.7829 lbs.	Total Postage:	\$ 90.56														
No of Containers:	<table border="1"> <tr> <td>1' MM Trays</td> <td>2' MM Trays</td> <td>2' EMM Trays</td> <td>Flat Trays</td> <td>Sacks</td> <td>Pallets</td> <td>Other</td> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>					1' MM Trays	2' MM Trays	2' EMM Trays	Flat Trays	Sacks	Pallets	Other	1						
1' MM Trays	2' MM Trays	2' EMM Trays	Flat Trays	Sacks	Pallets	Other													
1																			
Move Update Method:	Alternative Method	NSA:	NO	Election Mail:	NO														
Mailpieces contain reply postcard or reply envelope: NO			Mailpieces contain Only contents that are not required to be mailed FCM: NO																
Mailpieces contain a DVD/CD or other Disk: NO			Round Trip Only: 1 DVD/CD or other Disk: NO																
Incentive/Discount Claimed: N/A			Type of Fee: N/A																
Mail Arrival Date and Time: 09/20/2012 14:39		Payment Date and Time: 09/20/2012 14:40																	
Comments:																			

Part B: Nonautomation Prices

Line Number	Title	Description	Price	Quantity	Subtotal Postage	Discount Total	Fee Total	Postage
B2	Single-Piece	Postcards	0.320	283pcs.	\$ 90.5600	0	0	\$ 90.5600
					Part B Total (Add lines B1-B18)			\$ 90.5600
					Total Postage From All Parts			\$ 90.56