

SPRING AVENUE - GREAT DIAMOND ISL.  
83A-G-4 to 6

Red

PERMIT TO INSTALL PLUMBING

575 mg. lot, 61st Diamond IS

Date Issued **June 14, 1974**  
Portland Plumbing Inspector

Address 83A-G-1 to 6 Bay Ave. NUMBER 3703

Installation For 1-fam.

Owner of Bldg R Iph Morelli

Owner's Address a same

Plumber owner

By [Signature]  
**HOFFSES P.**  
App. Final Insp.

Date 6-14-74  
NO FEE

Date  
By

App. Final Insp.

Date  
By

Type of Bldg.

- Commercial
- Residential
- Single
- Multi Family
- New Construction
- Remodeling

NEW	REPL			
			SINKS	
			LAVATORIES	
			TOILETS	
			BATH TUBS	
			SHOWERS	
			DRAINS FLOOR SURFACE	
			HOT WATER TANKS	
			TANKLESS WATER HEATERS	
			GARBAGE DISPOSALS	
1			SEPTIC TANKS	
			HOUSE SEWERS	1 2.00
			ROOF LEADERS	
			AUTOMATIC WASHERS	
			DISHWASHERS	
			OTHER	
			<u>Base Fee</u>	3.00
			<b>TOTAL</b>	<b>1 5.00</b>

Building and Inspection Services Dept.: Plumbing Inspection

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering  
(207)289-3828

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street	SPRING AVENUE
Subdivision Lot #	GREAT DIAMOND ISLAND
PROPERTY OWNERS NAME	
Last: MORELLI	First: JOHN & ROBERT
Applicant Name	83-A-G-004
Mailing Address of Owner/Applicant (if Different)	56 CATHEDRAL CIRCLE NASHUA, N.H.

PORTLAND Date Permitted: 10/9/89 Local Plumbing Inspector Signature: <i>[Signature]</i> Chief Plumbing Inspector	4231 \$1,410.00 L.P.I. # 011241	OWN COPY <input type="checkbox"/> Fee <input type="checkbox"/> Fee Charged
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**Owner/Applicant Statement**  
 I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

**Caution: Inspection Required** 2-2-93

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

*A. Rowe done w/o inspection*

Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

<p><b>THIS APPLICATION IS FOR:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NEW SYSTEM</li> <li><input checked="" type="checkbox"/> REPLACEMENT SYSTEM</li> <li><input type="checkbox"/> EXPANDED SYSTEM</li> <li><input type="checkbox"/> EXPERIMENTAL SYSTEM</li> </ol> <p><b>SEASONAL CONVERSION</b> to be completed by the LPI</p> <ol style="list-style-type: none"> <li><input type="checkbox"/> SYSTEM COMPLIES WITH RULES</li> <li><input type="checkbox"/> CONNECTED TO SANITARY SEWER</li> <li><input type="checkbox"/> SYSTEM INSTALLED - P# _____</li> <li><input type="checkbox"/> SYSTEM DESIGN RECORDED AND ATTACHED</li> </ol>	<p><b>THIS APPLICATION REQUIRES:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NO RULE VARIANCE</li> <li><input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</li> <li><input checked="" type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form                     <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> Requiring Local Plumbing Inspector Approval</li> <li><input type="checkbox"/> Requires State and Local Plumbing Inspector Approval</li> </ol> </li> <li><input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</li> </ol>	<p><b>INSTALLATION IS:</b></p> <p>COMPLETE SYSTEM</p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</li> <li><input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</li> <li><input type="checkbox"/> ENGINEERED (+2030 ypd) INDIVIDUALLY INSTALLED COMPONENTS:</li> <li><input type="checkbox"/> TREATMENT TANK (ONLY)</li> <li><input type="checkbox"/> HOLDING TANK _____ GAL</li> <li><input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</li> <li><input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> </ol>
<p><b>IF REPLACEMENT SYSTEM:</b> PRE-1953                  YEAR FAILING SYSTEM INSTALLED</p> <p><b>THE FAILING SYSTEM IS:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> BED</li> <li><input type="checkbox"/> CHAMBER</li> <li><input type="checkbox"/> TRENCH</li> <li><input type="checkbox"/> OTHER: _____</li> </ol>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</li> <li><input type="checkbox"/> MODULAR OR MOBILE HOME</li> <li><input type="checkbox"/> MULTIPLE FAMILY DWELLING</li> <li><input type="checkbox"/> OTHER _____ SPECIFY _____</li> </ol>	<p><b>TYPE OF WATER SUPPLY</b></p> <p>SUMMER PUBLIC WATER</p>
<p><b>SIZE OF PROPERTY</b> .75 AC ±</p>	<p><b>ZONING</b></p>	

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p><b>TREATMENT TANK</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</li> <li><input type="checkbox"/> AEROBIC</li> </ol> <p>SIZE: 1000 GALS.</p>	<p><b>WATER CONSERVATION</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NONE</li> <li><input type="checkbox"/> LOW VOLUME TOILET</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> <li><input type="checkbox"/> ALTERNATIVE TOILET</li> </ol> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NOT REQUIRED</li> <li><input checked="" type="checkbox"/> MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)</li> <li><input type="checkbox"/> REQUIRED</li> </ol> <p>DOSE: _____ GALS.</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING EMPLOYEES, WATER RECORDS, ETC)</b></p> <p>SINGLE FAMILY DWELLING (4 BEDROOMS)</p> <p>DESIGN FLOW 360 (GALLONS/DAY)</p>				
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PROFILE</td> <td>CONDITION</td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">D</td> </tr> </table> <p>DEPTH TO LIMITING FACTOR: 14</p>	PROFILE	CONDITION	3	D	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> SMALL</li> <li><input type="checkbox"/> MEDIUM</li> <li><input checked="" type="checkbox"/> MEDIUM-LARGE</li> <li><input type="checkbox"/> LARGE</li> <li><input type="checkbox"/> EXTRA LARGE</li> </ol>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> BED _____ Sq Ft</li> <li><input checked="" type="checkbox"/> CHAMBER 600 _____ Sq Ft INFILTRATION: <input type="checkbox"/> REGULAR <input type="checkbox"/> H 20</li> <li><input type="checkbox"/> TRENCH _____ Linear Ft.</li> <li><input type="checkbox"/> OTHER _____</li> </ol>	
PROFILE	CONDITION						
3	D						

### SITE EVALUATOR STATEMENT

On JULY 7, 1989 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

*Albert Feick* 163 7/24/89

Site Evaluator Signature SE# Date

(Local Plumbing Inspector's Signature  
 Permit is for Seasonal Conversion.) Page 1 of 3  
HHE-200 Rev. 11/86

WASTEWATER DISPOSAL SYSTEM APPLICATION

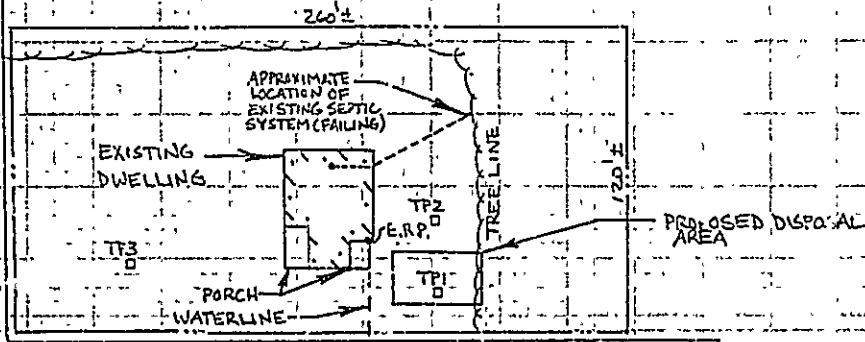
Department of Human Services  
Division of Health Engineering

City, Plantation: PORTLAND Street, Road, Subdivision: SPRING AVENUE, GREAT DIAMOND ISLAND Owners Name: MORELLI, JOHN & ROBERT

SITE PLAN

Scale 1" = 60 Ft.

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



SPRING AVENUE

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

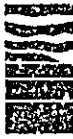
Observation Hole <u>TP1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring				Observation Hole <u>TP2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring			
* Depth of Organic Horizon Above Mineral Soil				* Depth of Organic Horizon Above Mineral Soil			
Texture	Consistency	Color	Mottling	Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN		SANDY LOAM			
	FRIABLE	10YR 2.5/3			FRIABLE		COMMON DISTINCT
		YELLOWISH					
		BROWN	FEW, FINE				Δ Δ Δ
SANDY			COMMON	LOAMY			FREE WATER
SAND	FIRM	LIGHT OLIVE BROWN	DISTINCT	SAND	FIRM		
LIMIT OF EXCAVATION (REFUSAL - LARGE STONE)				LIMIT OF EXCAVATION			
				FREE WATER			
Soil Profile <u>3</u>	Classification <u>D</u> (Cohesion)	Slope %	Limiting Factor <u>14</u>	Soil Profile <u>3</u>	Classification <u>D</u> (Cohesion)	Slope %	Limiting Factor <u>8</u>
<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Bedrock				<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Bedrock			

*Albert Frick*  
Site Evaluator Signature

163  
SE#

JULY 7, 1989  
Date

Page 2 of 3  
4HE-203 Rev 1/84



**Albert Frick Associates, Inc.**  
 Soil Scientists & Site Evaluators  
 95A County Road Gorham, Maine 04038  
 (207) 839-5563

Town, City, Plantation: **PORTLAND** Street, Road, Subdivision: **SPRING AVENUE, GREAT DIAMOND ISLAND** Owners Name: **MORELLI, JOHN & ROBERT**

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole: **TP 3**  Test Pit  Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6	SANDY	FRIABLE	DARK BROWN	
10	LOAM		YELLOWISH BROWN	
15				CRACKING (DISTINCT)
20	LOAMY SAND	FIRM		
30				
40				
50				

Soil Profile: **3** Classification: **D** Consistency: **3** Slope: **14** % Limiting Factor: **14**  Ground Water  Restrictive Layer  Bedrock

Observation Hole:  Test Pit  Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Consistency: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_  Ground Water  Restrictive Layer  Bedrock

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole:  Test Pit  Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Consistency: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_  Ground Water  Restrictive Layer  Bedrock

Observation Hole:  Test Pit  Boring

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Consistency: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_  Ground Water  Restrictive Layer  Bedrock

Site Evaluator: *Albert Frick* SE#: **163** Date: **JULY 7, 1989**

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

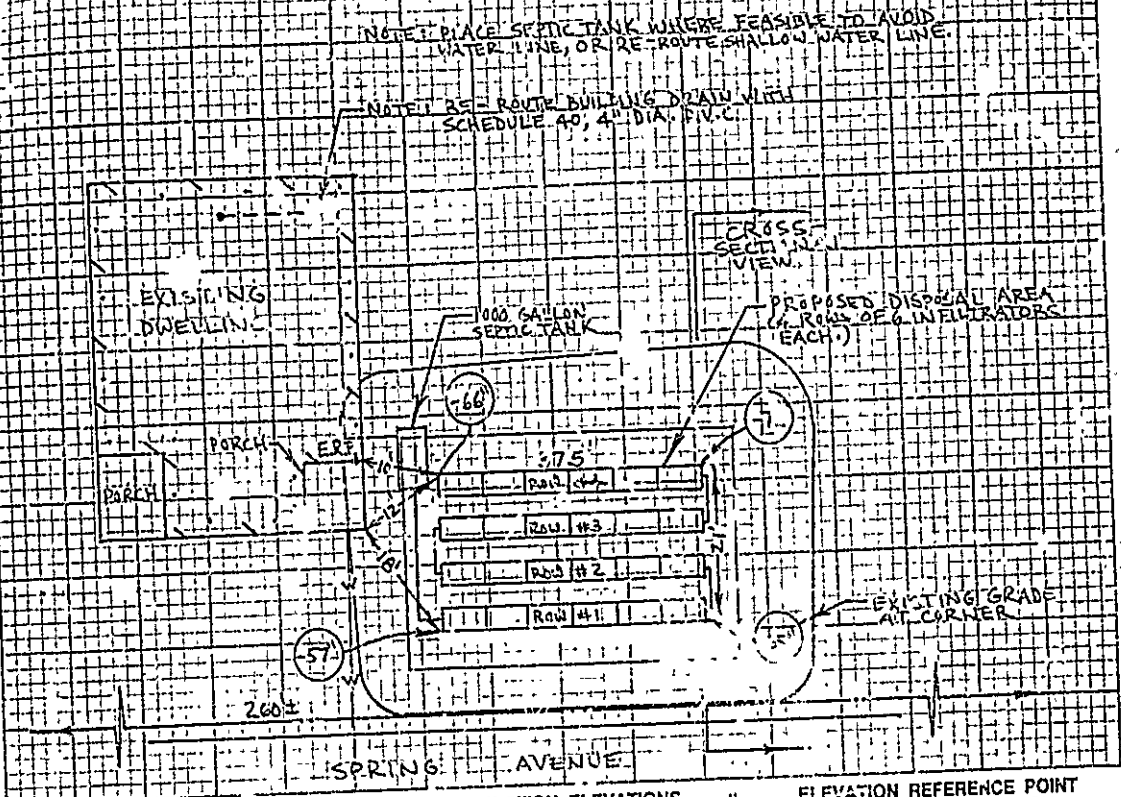
Department of Human Services  
Division of Health Engineering

Portland, Oregon  
Street, Road, Subdivision: SPRING AVENUE, GREAT DIAMOND ISLAND  
Owners Name: MORELLI, JO. N. & ROBERT  
Scale: 1" = 20' F.

## SUBSURFACE WASTEWATER DISPOSAL PLAN

NOTE: PLACE SEPTIC TANK WHERE FEASIBLE TO AVOID WATER LINE, OR RE-ROUTE SHALLOW WATER LINE.

NOTE: RE-ROUTE BUILDING DRAIN WITH SCHEDULE 40, 4" DIA. F.V.C.

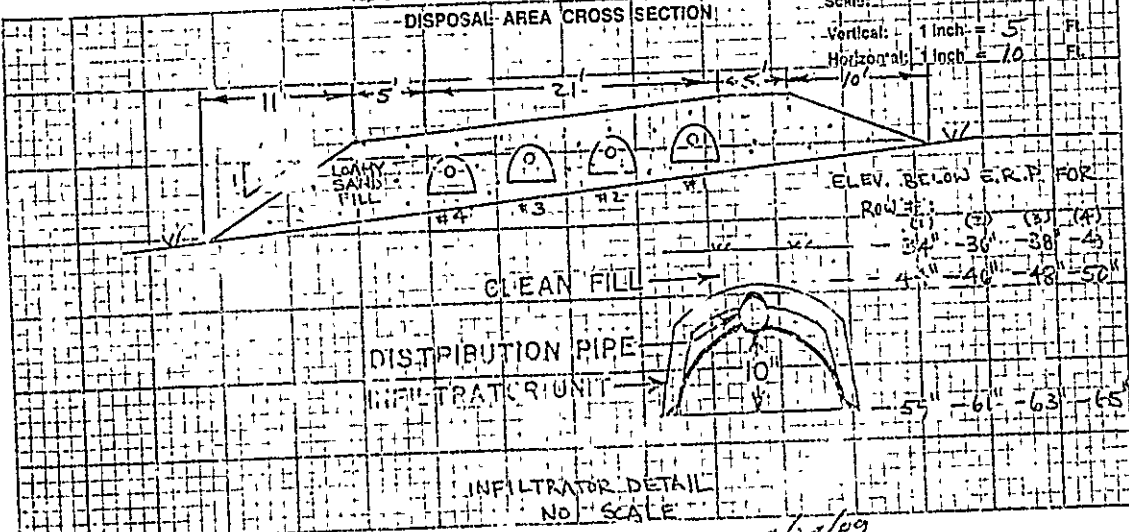


**FILL REQUIREMENTS**  
Depth of Fill (Upslope) 23" - 31"  
Depth of Fill (Downslope) 24" - 37"

**CONSTRUCTION ELEVATIONS**  
Reference Elevation is 00"  
Bottom of Disposal Area  
Top of Distribution Lines or Chambers

**ELEVATION REFERENCE POINT LOCATION & DESCRIPTION**  
TOP OF VINYL SIDING, WHICH IS  
BOTTOM OF GRAY TRIM OF PORCH.

*00" SEE DETAIL BELOW*



*Albert [Signature]*  
Site Evaluator Signature

163  
SEA

7/24/89  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS  
Town Or Plantation: **PORTLAND**  
Street: **SPRING AVENUE**  
Subdivision Lot #: **GREAT DIAMOND ISLAND**  
PROPERTY OWNERS' NAME:

PORTLAND 3604 TOWN COPY  
Date Permit Issued: **8/31/89** Double Fee Charged:   
L.P.I. # **1910015**  
Local Plumbing Inspector's (LPI)

Last: **MORELLI** First: **JOHN & ROBERT**

Applicant Name:  
Mailing Address of Owner (if Applicant is different): **RURAL CIRCLE**

I certify that the info. knowledge and understanding of the Plumbing Inspector is to the best of my reason for the Local  
Statement  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Caution: Inspection Required**  
I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.  
Signature: **A. A. JAN 5** Date Applied: **1990**

## PERMIT INFORMATION

**THIS APPLICATION IS FOR:**  
1.  NEW SYSTEM  
2.  REPLACEMENT SYSTEM  
3.  EXPANDED SYSTEM  
4.  EXPERIMENTAL SYSTEM

**SEASONAL CONVERSION**  
to be completed by the LPI  
5.  SYSTEM COMPLIES WITH RULES  
6.  CONNECTED TO SANITARY SEWER  
7.  SYSTEM INSTALLED - P# \_\_\_\_\_  
8.  SYSTEM DESIGN RECORDED AND ATTACHED

**THIS APPLICATION REQUIRES:**  
1.  NO RULE VARIANCE  
2.  NEW SYSTEM VARIANCE  
Attach New System Variance Form  
3.  REPLACEMENT SYSTEM VARIANCE  
Attach Replacement System Variance Form  
a.  Requiring Local Plumbing Inspector Approval  
b.  Requires State and Local Plumbing Inspector Approval  
4.  MINIMUM LOT SIZE VARIANCE

**INSTALLATION IS:**  
COMPLETE SYSTEM  
1.  NON-ENGINEERED SYSTEM  
2.  PRIMITIVE SYSTEM  
(Includes Alternative Toilet)  
3.  ENGINEERED (+2000 gpd)  
**INDIVIDUALLY INSTALLED COMPONENTS:**  
4.  TREATMENT TANK (CYL)  
5.  HOLDING TANK \_\_\_\_\_ GAL  
6.  ALTERNATIVE TOILET (ONLY)  
7.  NON ENGINEERED DISPOSAL AREA (ONLY)  
8.  ENGINEERED DISPOSAL AREA (ONLY)  
9.  SEPARATED LAUNDRY SYSTEM

**IF REPLACEMENT SYSTEM:** PRE-YEAR FAILING SYSTEM INSTALLED (1983)  
THE FAILING SYSTEM IS:  
1.  BED 3.  TRENCH  
2.  CHAMBER 4.  OTHER \_\_\_\_\_

**DISPOSAL SYSTEM TO SERVE:**  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER \_\_\_\_\_ SPECIFY \_\_\_\_\_

**TYPE OF WATER SUPPLY**  
SUMMER PUBLIC WATER

SIZE OF PROPERTY: **.75 AC ±** ZONING: \_\_\_\_\_

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

**TREATMENT TANK**  
1.  SEPTIC:  Regular  Low Profile  
2.  AEROBIC  
SIZE: **1000** GALS.

**WATER CONSERVATION**  
1.  NONE  
2.  LOW VOLUME TOILET  
3.  SEPARATED LAUNDRY SYSTEM  
4.  ALTERNATIVE TOILET  
SPECIFY: \_\_\_\_\_

**PUMPING**  
1.  NOT REQUIRED  
2.  MAY BE REQUIRED  
(DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)  
3.  REQUIRED  
DOSE: \_\_\_\_\_ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC)

**SINGLE FAMILY DWELLING (4 BEDROOMS)**  
DESIGN FLOW: **360** (GALLONS/DAY)

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**  
PROFILE: **3** CONDITION: **D**  
DEPTH TO LIMITING FACTOR: **14**

**SIZE RATINGS USED FOR DESIGN PURPOSES**  
1.  SMALL  
2.  MEDIUM  
3.  MEDIUM-LARGE  
4.  LARGE  
5.  EXTRA LARGE

**DISPOSAL AREA TYPE/SIZE**  
1.  ED \_\_\_\_\_ Sq. Ft.  
2.  INFILTRATION TRENCH (6.00) \_\_\_\_\_ Sq. Ft.  
REGULAR  H 20  
3.  TRENCH \_\_\_\_\_ Lateral Ft.  
4.  OTHER \_\_\_\_\_

## SITE EVALUATOR STATEMENT

On **JULY 7, 1989** (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Signature: **Albert Frick** SE# **163** Date: **7/24/89**

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)  
Page 1 of 3  
HHE 200 Rev. 11/85

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

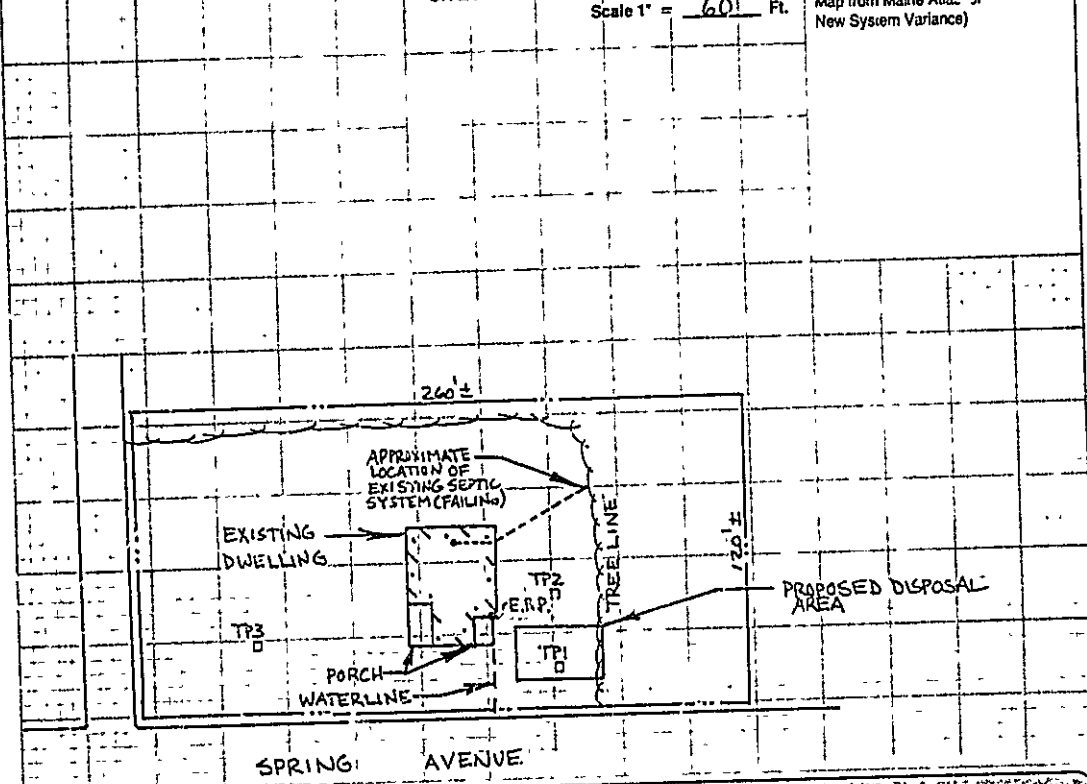
Department of Human Services  
Division of Health Engineering

Town, City, Plantation: **PORTLAND** Street, Road, Subdivision: **SPRING AVENUE, GREAT DIAMOND ISLAND** Owners Name: **MORELL, JOHN & ROBERT**

SITE PLAN

Scale 1" = 60' Ft.

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



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

Observation Hole TP1  Test Pit  Boring

Observation Hole TP2  Test Pit  Boring

\* Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN	
	FRIBLE	10YR 3/3	
		YELLOWISH	
LOAMY SAND		BROWN	FEW, FAINT
	FIRM	LIGHT OLIVE BROWN	COMMON, DISTINCT
LIMIT OF EXCAVATION (REFUSAL - LARGE STONE)			

DEPTH BELOW MINERAL SOIL SURFACE (inches): 0, 6, 10, 15, 20, 30, 40, 50

Soil Profile: 3 Classification: D Slope: 14 % Limiting Factor: 14  Ground Water  Rooting Layer  Bedrock

\* Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM			
	FRIBLE		COMMON, DISTINCT
LOAMY SAND			FREE WATER
SAND	FIRM		
LIMIT OF EXCAVATION			

DEPTH BELOW MINERAL SOIL SURFACE (inches): 0, 6, 10, 15, 20, 30, 40, 50

Soil Profile: 3 Classification: D Slope: 8 % Limiting Factor: 8  Ground Water  Rooting Layer  Bedrock

*Albert Frick*  
Site Evaluator Signature

163  
SE#

JULY 7, 1989  
Date





**Albert Frick Associates, Inc.**  
 Soil Scientists & Site Evaluators  
 95A County Road Gorham, Maine 04038  
 (207) 839-5563

Town, City, Plantation: PORTLAND Street, Road, Subdivision: SPRING AVENUE, GREAT DIAMOND ISLAND Owners Name: MORELLI, JOHN & ROBERT

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole: TP 3  Test Pit  Boring

\* Depth of Organic Horizon Above Mineral Soil: \_\_\_\_\_

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6	SANDY	FRIABLE	DARK BROWN	
10	LOAM		YELLOWISH	
15			BROWN	
15				COMMONLY DISTINCT
20	LOAMY	FIRM		
25	SAND			
30				
40				
50				

Soil Profile: 3 Classification: D Slope: \_\_\_\_\_ % Limiting Factor: 14

Ground Water  Restrictive Layer  Bedrock

Observation Hole: \_\_\_\_\_  Test Pit  Boring

\* Depth of Organic Horizon Above Mineral Soil: \_\_\_\_\_

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_

Ground Water  Restrictive Layer  Bedrock

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole: \_\_\_\_\_  Test Pit  Boring

\* Depth of Organic Horizon Above Mineral Soil: \_\_\_\_\_

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_

Ground Water  Restrictive Layer  Bedrock

Observation Hole: \_\_\_\_\_  Test Pit  Boring

\* Depth of Organic Horizon Above Mineral Soil: \_\_\_\_\_

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
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50				

Soil Profile: \_\_\_\_\_ Classification: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_

Ground Water  Restrictive Layer  Bedrock

Site Evaluator: Albert Frick SE#: 163 Date: JULY 7, 1989

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

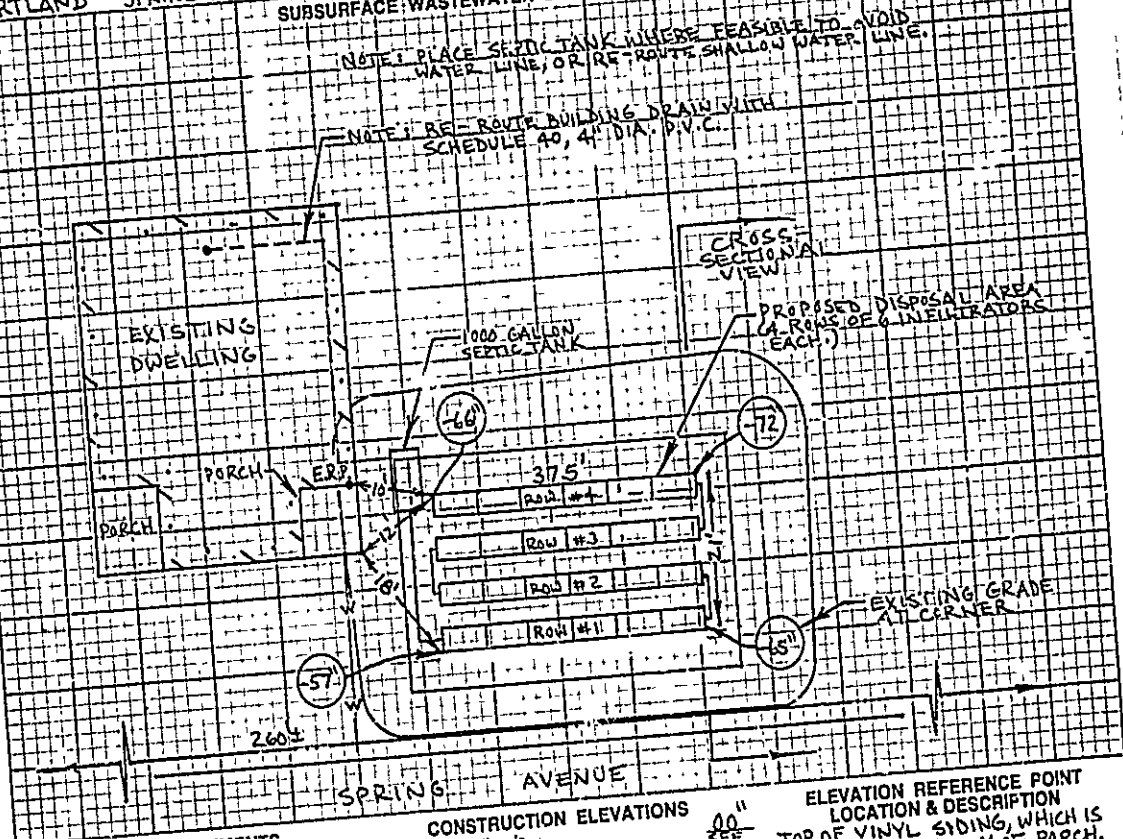
City, Plantation: **PORTLAND**  
Street, Road, Subdivision: **SPRING AVENUE, GREAT DIAMOND ISLAND**

Case Name: **MORELLI, JOHN & ROBERT**  
Scale: **1" = 20' FL**

**SUBSURFACE WASTEWATER DISPOSAL PLAN**

NOTE: PLACE SEPTIC TANK WHERE FEASIBLE TO AVOID WATER LINE, OR RE-ROUTE SHALLOW WATER LINE.

NOTE: RE-ROUTE BUILDING DRAIN WITH SCHEDULE 40, 4" DIA. P.V.C.



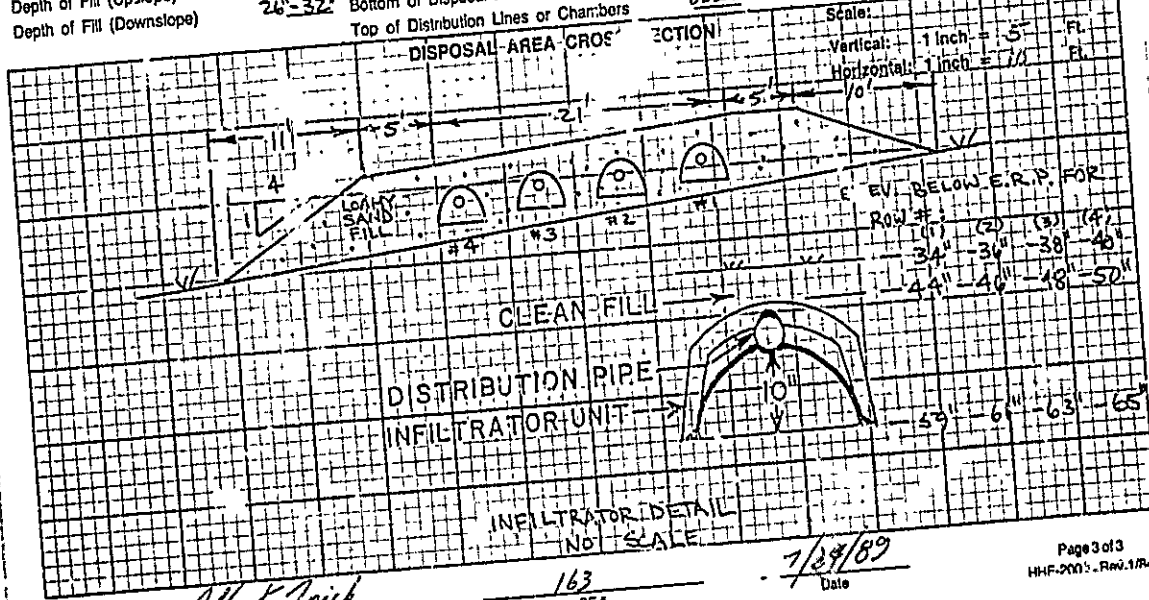
**FILL REQUIREMENTS**

Depth of Fill (Upslope)	23" - 31"
Depth of Fill (Downslope)	26" - 32"

**CONSTRUCTION ELEVATIONS**

Reference Elevation is	00" SEE DETAIL BELOW
Bottom of Disposal Area	
Top of Distribution Lines or Chambers	

**ELEVATION REFERENCE POINT LOCATION & DESCRIPTION**  
TOP OF VINYL SIDING, WHICH IS BOTTOM OF GRAY TRIM OF PORCH.



Albert Feick  
Site Evaluator Signature

163  
SE#

7/29/89  
Date

## REPLACEMENT SYSTEM VARIANCE REQUEST

### THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application for the proposed replacement system which does not comply with the Rules. The LPI shall review the Replacement System Variance Request and Application and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System from the rules.
2. A system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

### GENERAL INFORMATION

Town of PORTLAND

Permit No. \_\_\_\_\_ E

Date Permit Issued \_\_\_\_\_  
MONTH/DAY/YEAR

Property Owner's Name: MORELLI, JOHN & ROBERT Tel. No. \_\_\_\_\_

System's Location: SPRING STREET (GREAT DIAMOND ISLAND)  
STREET

PORTLAND Maine \_\_\_\_\_  
TOWN ZIP

Property Owner's Address: 56 CATHEDRAL CIRCLE  
STREET  
(if different from above)

NASHUA NEW HAMPSHIRE  
TOWN STATE ZIP

### SPECIFIC INSTRUCTIONS TO THE:

#### LPI:

If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, then you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

#### SITE EVALUATOR:

If after completing the Application, you find that a variance for the proposed replacement system is needed, then complete the Replacement Variance Request with your signature on reverse side of form.

#### PROPERTY OWNER:

It has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

The OWNER shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached Application, I understand that the proposed system is not in total compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

  
PROPERTY OWNER'S SIGNATURE

8/10/89  
DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
<b>SOILS</b>					
Soil Profile	Ground Water Table	to 6"		14 inches	
Soil Condition	Restrictive Layer	to 6"		inches	
from HHE-200	Bedrock	to 10"		inches	
<b>SETBACK DISTANCES (IN FEET)</b>					
	FROM:	TREATMENT TANK	DISPOSAL AREA	TREATMENT TANK	DISPOSAL AREA
Potable Water Supplies	1. Well: > 2000 gal/day	100'	300'		
	2. Well: < 2000 gal/day				
	a. Neighbor's	50'	60'		
	b. Property Owner's	25'	50'		
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Perennial	50'	60'		
	2. Intermittent	15'	20'		
	3. Manmade drainage ditch	10'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With Basement	5'	10'		
	2. Without Basement	5'	10'		
Property Line		4'	5'		

**OTHER**

1. Fill extension Grade to 3:1 NEAR FRONT PROPERTY LINE

2.

3.

**Footnotes:**

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope.

Albert Frick  
SITE EVALUATOR'S SIGNATURE

7/25/89  
DATE

**LPI STATEMENT**

I, Ernest J. Jordan, LPI for the Town of Baldwin 5170 have conducted an on-site inspection for the proposed replacement system and have determined to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Wastewater Disposal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

a.  approve,  do not approve the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant.

—OR—

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I  recommend  do not recommend the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: \_\_\_\_\_

Ernest J. Jordan  
LPI'S SIGNATURE

8/21/89  
DATE

**FOR USE BY THE DEPARTMENT ONLY**

The Department has reviewed in \_\_\_\_\_ 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