

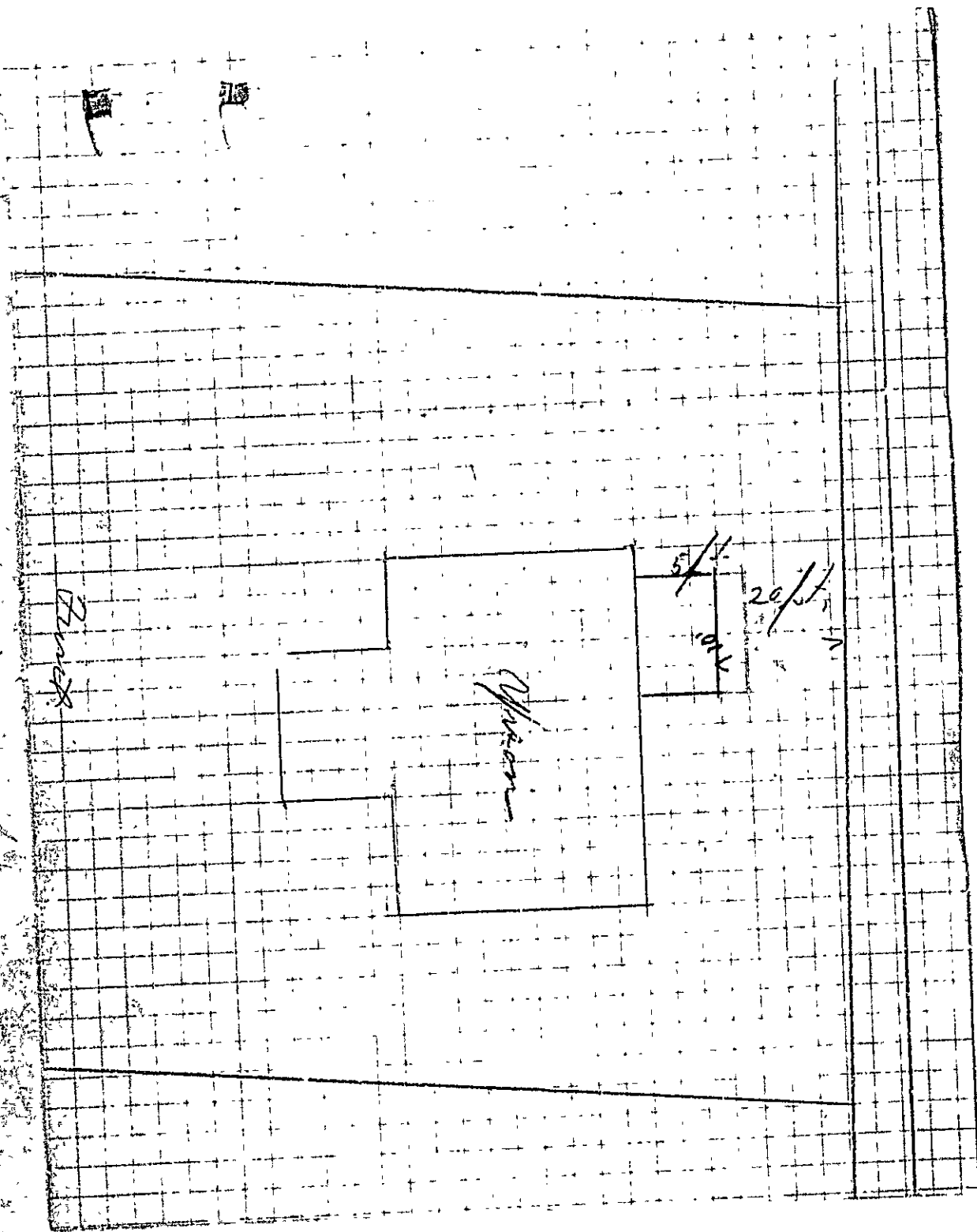
SUNSET AVE. - GREAT DIAMOND ISL. -
83A-K-9-10

1962
SUNSET AVE.
GREAT DIAMOND ISL.

Print

Opinion

5/11
20/11





(R) GENERAL RESIDENCE ZONE PERMIT ISSUED

APPLICATION FOR PERMIT

Permit No. 91036

Class of Building or Type of Structure First Class

Portland, Maine, July 9, 1936

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to erect alter install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location Great Diamond Island Ward Isl. 2 Within Fire Limits? no Dist. No. _____
Owner's name and address Charles Upson, Great Diamond Telephone _____
Contractor's name and address R. C. Maxwell, 444 Sawyer St. Portland Telephone 4-0898
Architect's name and address _____
Proposed use of building Cottage No. families _____
Other buildings on same lot _____
Plans filed as part of this application? yes No. of sheets 1
Estimated cost \$ 200 Fee \$ 75

Description of Present Building to be Altered

Material wood No. stories 1 1/2 Heat _____ Style of roof _____ Roofing _____
Last use Cottage No. families _____

General Description of New Work

To build one story frame addition 5' x 10' on rear of building

CERTIFICATE OF OCCUPANCY REQUIREMENT IS WAIVED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Height average grade to top of plate _____
Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof 1 1/2'
To be erected on solid or filled land? solid earth or rock? earth
Material of foundation iron columns Thickness, top _____ bottom _____
Material of underpinning _____ Height _____ Thickness _____
Kind of Roof pitch Rise per foot 7" Roof covering Asphalt roofing glass 0 and 1-b
No. of chimneys no Material of chimneys _____ of lining _____
Kind of heat _____ Type of fuel _____ Is gas fitting involved? _____
Corner posts 4x4 Sills 4x8 Girt or ledger board? _____ Size _____
Material columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-1 C. C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.
Joists and rafter: 1st floor 2-6 2nd _____ 3rd _____ roof 2-6
On centers: 1st floor 14" 2nd _____ 3rd _____ roof 14"
Maximum span: 1st floor 6' 2nd _____ 3rd _____ roof _____
If one story building with masonry walls, thickness of walls? _____ height? _____

If a Garage

No. cars now accommodated on same lot _____ to be accommodated _____
Total number commercial cars to be accommodated _____
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes
Signature of owner Charles Upson

INSPECTION COPY

7/10/36

Ward 2 Permit No. 26/1026

Location Great Diamond Island

Owner - Chas. H. Upson

Date of permit 9/9/36

Notif closing-in

Insr closing-in

Final Notif. ON NO1 COMPLETE

Final Insp...

Cert. of Occupancy issued

NOTES
1/18/37. Permitted to build windows
boarded etc.

83a

K

9-10

CERT. OF OCCUPANCY

924333

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee 220 Zone _____ Map # _____ Lot # _____
 Please fill out any part which applies to job. Proper plans must accompany form. 50 - MMSP PERMIT ISSUED

Owner: Elizabeth A. Weber Phone # 766-5061
 Address: P O Box 4804 - Portland, ME 04112
 LOCATION OF CONSTRUCTION Sunset Ave- Great Diamond Isl
 Contractor: Ted Weber Sub: 83-A-K-5,10
 Address: _____ Phone # _____
 Est. Construction Cost: XXXXXX Proposed Use: 1-fam dwlg
40,000 Past Use: vacant lot
 # of Existing Res. Units _____ # of New Res. Units _____
 Building Dimensions L 32 W 28 Total Sq. Ft. _____
 # Stories: 1 1/2 # Bedrooms 2 Lot Size: 21,643 sq ft
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion: Construct 1-fam dwlg

Pg. Official Use Only
 Date: 10/20/92 Subdivision: NOV 18 1992
 Inside Fire Limits _____ Name _____
 Blg Code: _____ Lot _____
 Time Limit: _____ Ownership: CITY OF PORTLAND
 Estimated Cost: 40,000 Private _____
 Zoning: IR2
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required:
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
 Special Exception _____
 Other (Explain) W.D. - 11-17-92

Foundation: _____ & MMSP
 1. Type of Soil: _____
 2. Set Backs: Front _____ Rear _____ Side(s) _____
 3. Footings Size: _____
 4. Foundation Size: _____
 5. Other _____

Mr. Weber is willing to offer transportation for any inspections (lobsterboat) for any inspections (lobsterboat)
 Floors:
 1. Sills Size: _____ Sills must be anchored.
 2. Girder Size: 766-5061 * Size: _____
 3. Lally Column Spacing _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

Exterior Walls:
 1. Studding Size _____ Spacing _____
 2. No. windows _____
 3. No. Doors _____
 4. Header Sizes _____
 5. Bracing: Yes _____ No _____
 6. Corner Posts Size _____
 7. Insulation Type _____ Size _____
 8. Sheathing Type _____ Size _____
 9. Siding Type _____ Weather Exposure _____
 10. Masonry Materials _____
 11. Metal Materials _____

Interior Walls:
 1. Studding Size _____ Spacing _____
 2. Header Sizes _____ Spacing _____
 3. Wall Covering Type _____
 4. Fire Wall if required _____
 5. Other Materials _____

Ceiling:
 1. Ceiling Joists Size: _____
 2. Ceiling Strapping Size _____ Spacing _____
 3. Type Ceilings: _____
 4. Insulation Type _____ Size _____
 5. Ceiling Height: _____
 Roof:
 1. Truss or Rafter Size _____ Span _____ Action _____
 2. Sheathing Type _____ Size _____
 3. Roof Covering Type _____
 Chimneys:
 Type: _____ Number of Fire Places _____
 Heating:
 Type of Heat: _____
 Electrical:
 Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____
 Plumbing:
 1. Approval of soil test if required Yes _____ No _____
 2. No. of Tubs or Showers _____
 3. No. of Flushes _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____

Swimming Pool:
 1. Type: _____
 2. Pool Size: _____
 3. Must conform to National Electrical Code _____
 Permit Received By Louise Chase
 Signature of Applicant William E. Weber Date 10/20/92
 CEO's District 6 William E. Weber

PERMIT ISSUED WITH LETTERS

PERMIT ISSUED

CONTINUED TO REVERSE SIDE [6] Mr. Rowland
 White - Tax Assessor
 Ivory Tag - CEO

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS

Town Or Plantation: Portland
 Street: Great Diamond Island
 Subdivision Lot #: Sunset Ave
 Assessor's: 83A-K-510

PROPERTY OWNERS NAME

Last: Weber First: Elizabeth A.

Applicant Name: Ed (W.S.) Weber

Mailing Address of Owner/Applicant (if different):
Sunset Ave
6 Diamond Island Portland
04109

6

PORTLAND 4614 TOWN COPY

Date Permitted: 12/10/92 Fee: 60.00

Arthur Poore L.P.L. # 0112-4
 Chief Plumbing Inspector

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.

Ed (W.S.) Weber 12/18/92
 Signature of Owner/Applicant Date

Caution: Inspection Required

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

Arthur Poore 11-28-94
 Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
- Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (includes Alternative Toilet)
- ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER _____

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

SIZE OF PROPERTY: 21,643 sq. ft.

ZONING: Residential

TYPE OF WATER SUPPLY

Portland Water District

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- NONE
- LOW FLOW TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS

CRITICAL AREA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

Single Family Dwelling (2 Bedrooms)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
<u>2</u>	<u>C</u>

DEPTH TO LIMITING FACTOR: 34

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRALARGE

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq. Ft.
- CHAMBER _____ Sq. Ft.
 - REGULAR
 - H-20
- TRENCH _____ Linear Ft.
- OTHER _____

DESIGN FLOW: 240 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 9/7/92 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system proposed is in accordance with the Subsurface Wastewater Disposal Rules.

Arthur Poore 43 1513 10/11/92
 Site Evaluator or Professional Engineer's Signature SE/PE# Date

* Local Plumbing Inspector Signature if a Local Site Evaluation Waiver under a Local Option

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

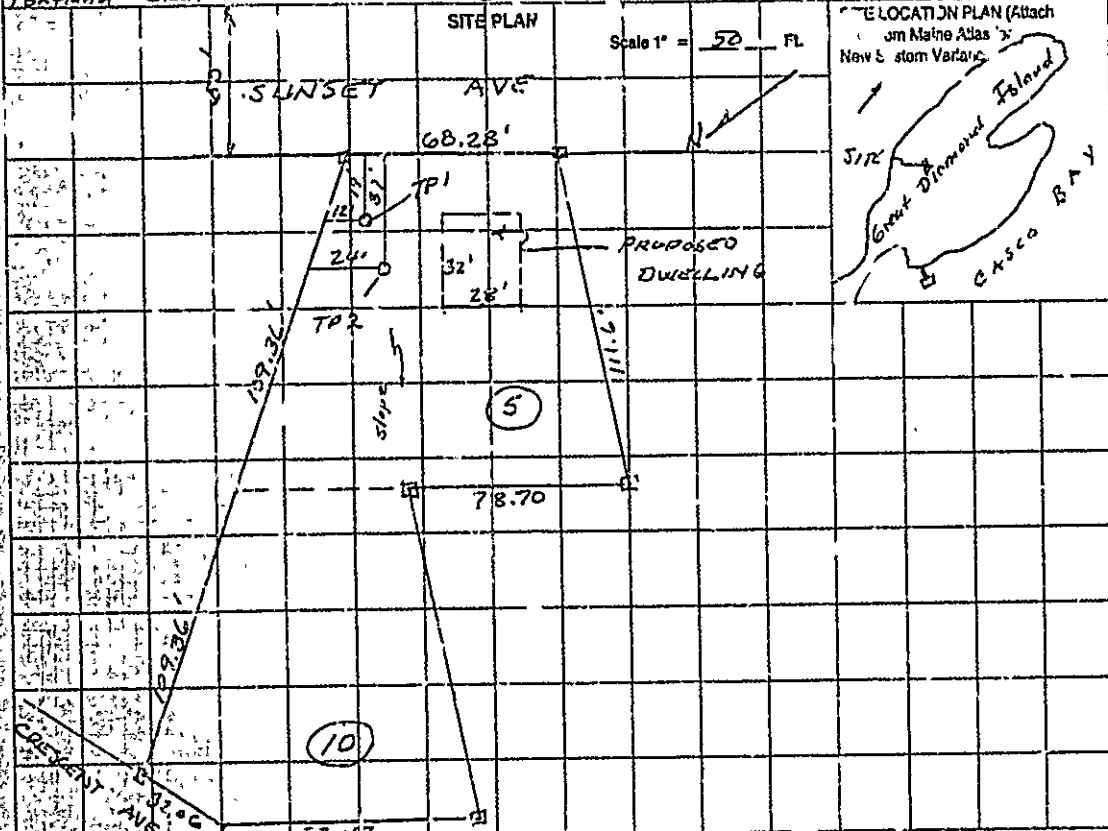
Portland - Grand Diamond Is.

Street, Road, Subdivision

Sunset Ave

Owners Name

Elizabeth Weber



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observations Holes Shown Above)

Observation Hole 1 Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	P.S.L.		DB	
4	Loamy Sand			
10			Med. B.	
15		Friable		
20	P.S.L.		L.B.	Root to 28"
25				
30	P.S.L.		L.G.B.	Root to 40"
40				
50				

Soil Profile <u>2</u>	Classification <u>C</u>	Slope <u>8%</u>	Limiting Factor <u>36</u>	<input type="checkbox"/> Ground Water <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Bedrock
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Observation Hole 2 Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	P.S.L.		DB	
4	Loamy Sand			
10			MB	
15		Friable		
20	P.S.L.		L.F.B.	Root to 26"
25				
30				
40				
50				

Soil Profile <u>60</u>	Classification <u>C</u>	Slope <u>8%</u>	Limiting Factor <u>34</u>	<input type="checkbox"/> Ground Water <input type="checkbox"/> Rooting Layer <input type="checkbox"/> Bedrock
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Robert Johnson
Site Evaluator or Professional Engineer's Signature

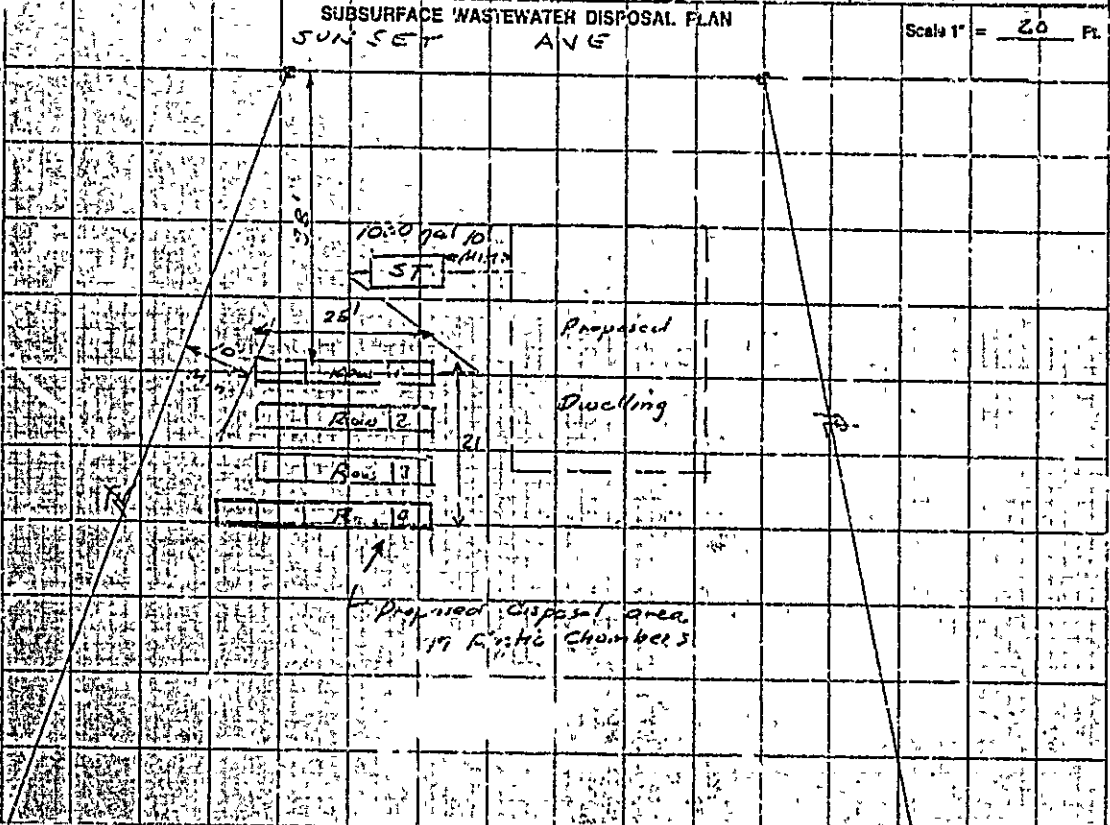
43 1513
SE# / PE#

10/11/92
Date

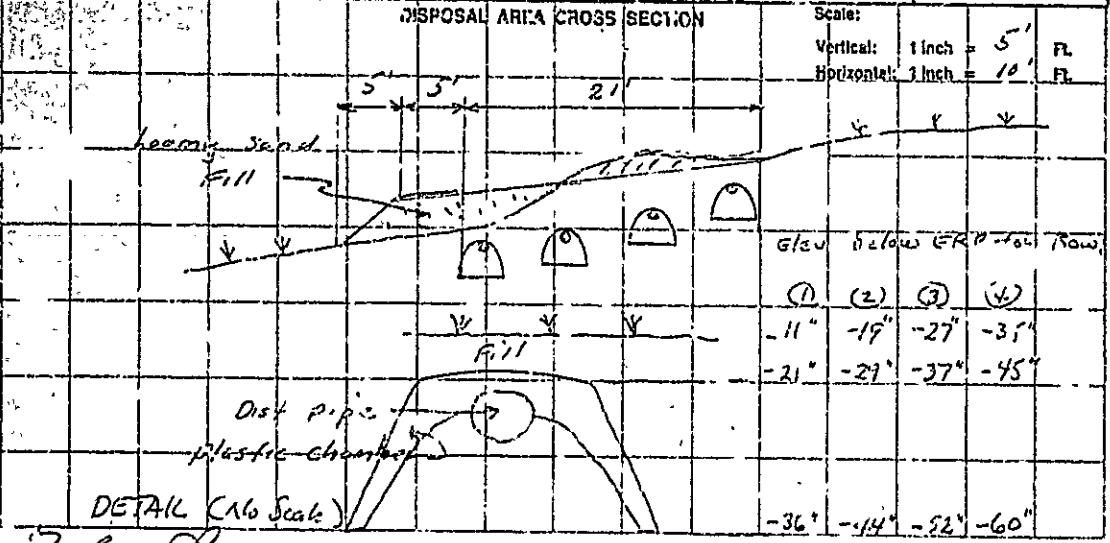
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: Portland, Grant Diamond Island
 Street, Road, Subdivision: 834 - R - 010 Sunset Ave
 Owners Name: Elizabeth Weber



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope): <u>0</u>	Reference Elevation Is: <u>0</u>	Nail in 6" Apple Tree 3' w.p.
Depth of Fill (Downslope): <u>24"</u>	Bottom of Disposal Area: <u> </u>	
	Top of Distribution Lines or Chambers: <u> </u>	



Signature: [Signature] 43 1513 10/1/72 Page 3 of 4
 Evaluator or Professional Engineer's Signature SE/PE # Date MHE-200 Rev 4/01