

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town or Plantation: **PORTLAND GREAT DIAMOND ISLAND**

Street: **SPRING AVENUE**

Subdivision Lot #: **TAX MAP 83A BLOCK L LOTS 1,2,3,8,9**

PROPERTY OWNERS NAME

Last: **GIGGEY** First: **FREDERICK W.**

Applicant Name: **FREDERICK W GIGGEY**

Mailing Address of Owner/Applicant (if Different): **SPRING AVENUE GREAT DIAMOND ISLAND, MAINE 04109**

PORTLAND PERMIT # **3,476** TOWN COPY

Fee: **\$1410.00** Double Fee Charged

L.P.I. # **11212**

Date Issued: **6/19/89**

Local Plumbing Inspector Signature: *[Signature]*

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.

Signature of Owner/Applicant: *[Signature]* Date: **6/19/89**

Caution: Inspection Required

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

Local Plumbing Inspector Signature: *[Signature]* Date Approved: **7/3/89**

PERMIT INFORMATION

THIS APPLICATION IS FOR:

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

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED: _____

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: _____

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

DISPOSAL SYSTEM TO SERVE:

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

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

TYPE OF WATER SUPPLY

PUBLIC WATER

SIZE OF PROPERTY: **59,050 SF** ZONING: **IR2**

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: **1000** GALS.

WATER CONSERVATION

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

SPECIFY: _____

PUMPING

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

DOSE: **15** GALS

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

3 BEDROOM CONSERVATIVE 450

LOW VOLUME TOILET 45

DESIGN FLOW: 405 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: **4** CONDITION: **C**

DEPTH TO LIMITING FACTOR: **24**

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq. Ft.
- CHAMBER **525** Sq. Ft. REGULAR H-2C
- TRENCH _____ Linear Ft.
- OTHER: _____

SITE EVALUATOR STATEMENT * USED 21 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On **JUNE 4, 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: *William B. Johnson* Date: **6/19/89**

Site Evaluator or Professional Engineer's Signature
SE # **1003/4814** Page 1 of 3
* Local Plumbing Inspector's Signature if a Local Use Evaluation Waiver under a Local Order

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

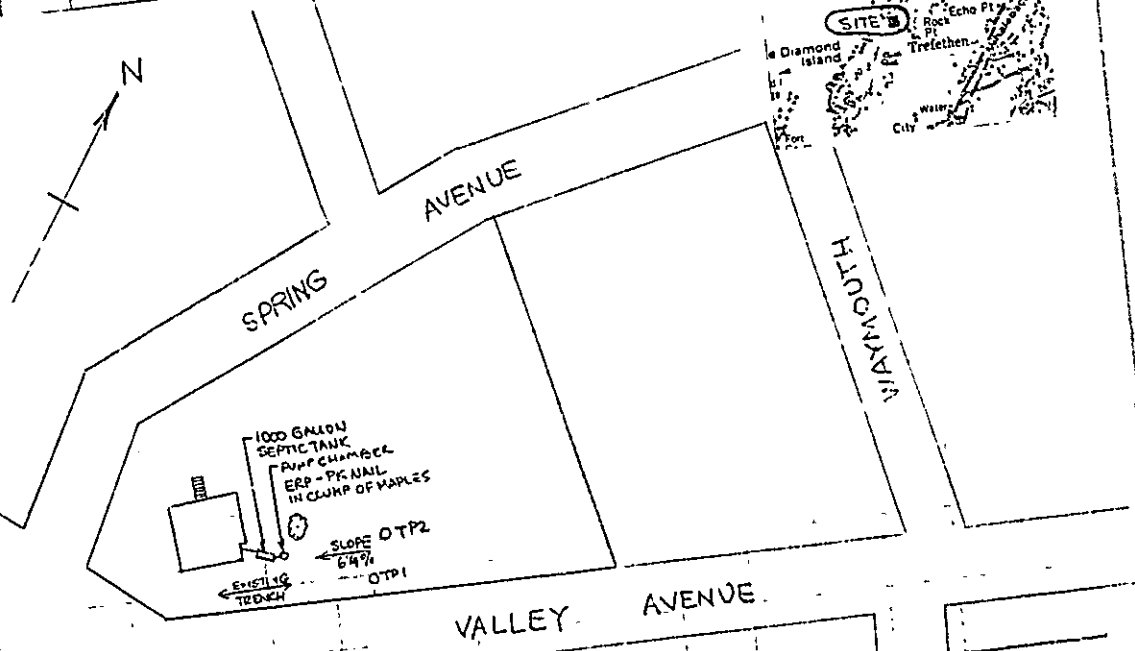
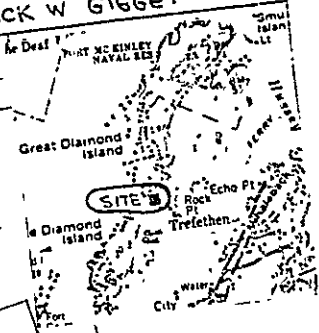
Street, Road, Subdivision
GREAT DIAMOND ISLAND SPRING AVE SSA-L-1,2,3,8,9

Owners Name
FREDERICK W GIGGEY

Plantation
GREAT DIAMOND ISLAND SPRING AVE SSA-L-1,2,3,8,9

SITE PLAN

Scale 1" = 100' FL



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)
Observation Hole 2 Test Pit Boring

Observation Hole	Texture	Consistency	Color	Mottling
2" SoD	LOOSE	DAEK BROWN		
0				
6	SANDY LOAM	SLIGHTLY FRIABLE	MEDIUM BROWN	NONE
10				
15				
20				
30	CLAYEY GRAVEL	FRIABLE	GRAY BROWN	FEW
40				
50	CLAY	PLASTIC	GRAY	

Texture	Consistency	Color	Mottling
LOAM	LOOSE	DAEK BROWN	
SANDY LOAM	SLIGHTLY FRIABLE	MEDIUM BROWN	NONE
GRAVELLY LOAM	SLIGHTLY FRIABLE	RED-BROWN	
CLAYEY GRAVEL	FRIABLE	GRAY BROWN	FEW
CLAY	PLASTIC	GRAY	

Soil Profile 4 Classification C Slope 6 1/4 % Limiting Factor 24

Soil Profile 4 Classification C Slope 6 1/4 % Limiting Factor 24

William B. Johnson
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

6/19/89
Date

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

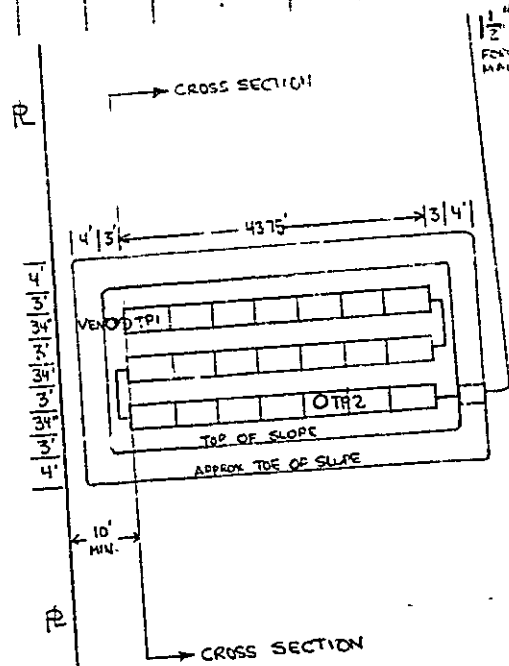
City, Plantation
ST. LAND GREAT DIAMOND ISLAND SPRING AVE 83A-L-1,2,3,8,9

Owners Name
FREDERICK W. GIGGEY

Scale 1" = 20' FL.

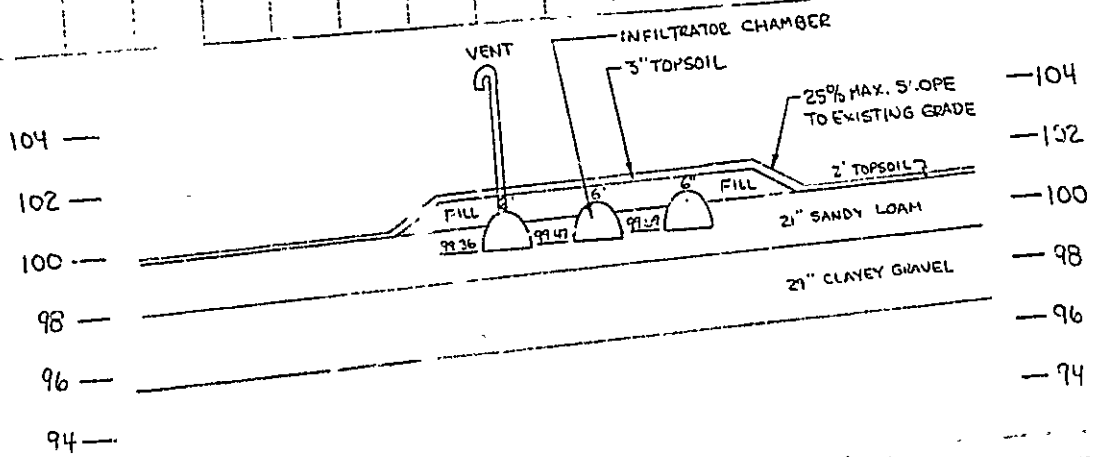
SUBSURFACE WASTEWATER DISPOSAL PLAN

VALLEY AVENUE



NOTE: SFPDC TANK MUST BE 8' FROM BUILDING.
PUMP CHAMBER MUST BE 15' FROM BUILDING.

FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) 12"	Reference Elevation is 100.00	PK NAIL IN CLUMP OF MAPLES NORTHEASTERLY OF HOUSE
Depth of Fill (Downslope) 12"	Bottom of Disposal Area SEE CROSS SECTION	
	Top of Distribution Lines or Chambers SEE V-SECTION	
DISPOSAL AREA CROSS SECTION		Scale:
		Vertical: 1 inch = 5' FL
		Horizontal: 1 inch = 10' FL



William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # / PE #

6/19/89
Date



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date September 9, 1991, 19
 Receipt and Permit number 3695

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: GT. Diamond Island Spring/Bay Sts 083-A-L-001-001
 OWNER'S NAME: Fred Giggey ADDRESS: SAA

OUTLETS:	FEES
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____	
FIXTURES: (number of)	
Incandescent _____ Fluorescent _____ (not strip) TOTAL _____	
Strip Fluorescent _____ ft. _____	
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____	
METERS: (number of) _____	
MOTORS: (number of)	
Fractional _____	
1 HP or over _____	
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	
Electric (number of rooms) _____	
COMMERCIAL OR INDUSTRIAL HEATING:	
Oil or Gas (by a main boiler) _____	
Oil or Gas (by separate units) _____	
Electric Under 20 kws _____ Over 20 kws _____	
APPLIANCES: (number of)	
Ranges _____	Water Heaters _____
Cook Tops _____	Disposals _____
Wall Ovens _____	Dishwashers _____
Dryers _____	Compactors _____
Fans _____	Others (denote) _____
TOTAL _____	
MISCELLANEOUS: (number of)	
Branch Panels _____	
Transformers _____	
Air Conditioners Central Unit _____	
Separate Units (windows) _____	
Signs 20 sq. ft. and under _____	
Over 20 sq. ft. _____	
Swimming Pools Above Ground _____	
In Ground _____	
Fire/Burglar Alarms Residential _____	
Commercial _____	
Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____	
over 30 amps _____	
Circus, Fairs, etc. _____	
Alterations to wires <u>moving existing meter enclosure</u> _____	5.00
Repair meter _____	
Emergency Lights, battery _____	
Emergency Generators _____	
FOR AND FOR REV	INSTALLATION FEE DUE: _____
AL WORK NOT ON ORIGINAL PERMIT	DOUBLE FEE DUE: _____
OF A "STOP ORDER" (304-16.b)	TOTAL AMOUNT DUE: <u>15.00</u>

INSPECTION: Will be ready on 9-11-91, 1991; or Will Call _____
 CONTRACTOR'S NAME: John Perry Electric
 ADDRESS: 381 Danforth St
 TEL: 773-5874
 MASTER LICENSE NO.: 3695 SIGNATURE OF CONTRACTOR: _____
 LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

