

PLUMBING APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation: Portland
Street: Great Diamond Island
Subdivision Lot #: Blk # 18

PROPERTY OWNERS NAME

Last: Dieter First: Associates

Applicant Name: DAVID AAS/COV INC.
29 Vannal Avenue
PORTLAND, MAINE 04103

Mailing Address of Owner/Applicant (If Different):

PORTLAND PERMIT # 2,665 TOWN COPY

Date of Permit: 12.14.87 \$ 32 L.P.I. # _____

David Aas/Cov Inc. License # _____

FEE Charged

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: Dec 10 1987

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Local Plumbing Inspector Signature: _____ Date Approved: JAN 6 - 1988

PERMIT INFORMATION

This Application is for:

1. NEW PLUMBING
2. RELOCATED PLUMBING

Type Of Structure To Be Served:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER - SPECIFY: _____

Plumbing To Be Installed By:

1. MASTER PLUMBER
2. OIL BURNER MAN
3. MFG'D. HOUSING DEALER/MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER

LICENSE # 12052

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type Of Fixture	Number	Column 1 Type Of Fixture
	HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District	1	Hosebibb / Silcock	2	Bath/Tub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal	1	Sink
	HOOK-UP: to an existing sub/surface wastewater disposal system		Drinking Fountain	2	Wash Basin
			Indirect Waste	2	Water Closet (Toilet)
			Water Treatment Softener, filter, etc.	1	Dishes Washer
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cuspidor	1	Garbage Disposal
			Bidet		Laundry Tub
	Hook-Up (Subtotal)		Other: _____	1	Water Heater
\$	Hook-Up Fee		Fixtures (Subtotal) Column 2	10	Fixtures (Subtotal) Column 1
				1	Fixtures (Subtotal) Column 1
				11	Total Fixtures
				\$ 5	Fixture Fee
				\$	Permit Fee
				\$ 32	Total Fee

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

PERMIT # 1163

CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Diamond Cove Assoc.

Address: P.O. Box 3572 Port C/O Dictar Assoc. 04104 797-6241

LOCATION OF CONSTRUCTION: Building #18 Port McKinley Gr. Dia. #181

CONTRACTOR: Everett Dobson & SUBCONTRACTORS

ADDRESS: same as owner

Est. Construction Cost: 60,000 Type of Use: single family

Post Use: single family

Building Dimensions: 1-30 w 21-5 Sq. Ft. 1290 Stories: 2 Lot Size: _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Concrete - Explan. Int. and ext. renovations as per plans

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only
Of Dwelling Units _____ # Of New Dwelling Units _____

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

Floor:
1. Sills Size: _____ Sills must be anchored.
2. Girder Size: _____
3. Lally Column Spacing: _____
4. Joists Size: _____ Size: _____
5. Bridging Type: _____ Spacing 16" O.C.
6. Floor Sheathing Type: _____ Size: _____
7. Other Material: _____ Size: _____

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

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

For Official Use Only	
Date: <u>December 16, 1987</u>	Subdivision: Yes <input type="checkbox"/> No <input type="checkbox"/>
Inside Fire Limits: _____	Name: _____
Blgd Code: _____	Lot: _____
Time Limit: _____	Block: _____
Estimated Cost: <u>60,000</u>	Permit Expiration: _____
Value/Structure: _____	Ownership: _____
Fee: <u>320</u>	Public <input type="checkbox"/> Private <input type="checkbox"/>

Ceiling:
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type: _____
5. Ceiling Height: _____ Size _____

Roof:
1. Truss or Rafter Size: _____
2. Sheathing Type: _____ Size _____
3. Roof Covering Type: _____ Size _____
4. Other _____

Chimneys:
Type: _____ Number of Fire Places _____
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 Pools:
1. Type: _____
2. Pool Size: _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Zoning:
District: _____ Street Frontage Req: _____ Provided _____
Required Setbacks: Front _____ Back _____ Side _____ Side _____

Review:
Zoning Board Approval: Yes No Date: _____
Planning Board Approval: Yes No Date: _____
Conditional Use: _____ Variance Site Plan _____
Special Use: _____
Other: _____ (Explain) _____
Date Approved: _____

Permit Received By: A.L. Bent Jr.

Signature of Applicant: David Bateman Date: 12/16/87

Signature of CEO: David Bateman Date: _____

Inspection Dates: _____

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3526

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street	GREAT DIAMOND ISLAND
Subdivision Lot #	DIAMOND SHORE PO-D
TAX MAP 83 - BLOCK A - LOTS 1, 3, 4, 8, 12, 11	

PROPERTY OWNERS NAME

GLICKMAN ALBERT	ALBERT
Last:	First:
Applicant Name: ALBERT GLICKMAN	
Mailing Address of Owner/Applicant (if Different): GREAT DIAMOND ISLAND, MAINE 04109	

PORTLAND PERMIT # 2,507 TOWN COPY

Date Issued: 9/10/87 FEE \$140.00 or Double Fee Charged

L.P.I. # _____

Albert B. Glickman

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.

Albert B. Glickman 3/18/87
Signature of Owner/Applicant Date

Caution: Inspection Required

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

Paul J. G...
Local Plumbing Inspector Signature

NOV 5 1987
Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. NEW SYSTEM
2. REPLACEMENT SYSTEM
3. EXPANDED SYSTEM
4. SEASONAL CONVERSION
5. EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. NO RULE VARIANCE REQUIRED
2. NEW SYSTEM VARIANCE
Attach New System Variance Form
3. REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
4. Requires only Local Plumbing Inspector Approval
5. Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

1. NON-ENGINEERED SYSTEM
2. PRIMITIVE SYSTEM
(Includes Alternative Toilet)
3. ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. TREATMENT TANK (ONLY)
5. HOLDING TANK
6. ALTERNATIVE TOILET (ONLY)
7. NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ENGINEERED DISPOSAL AREA (ONLY)
9. SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED 1900±

THE FAILING SYSTEM IS:

1. BED
2. CHAMBER
3. TRENCH
4. OTHER: OVERBOARD DISCHARGE

DISPOSAL SYSTEM TO SERVE:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER _____ SPECIFY _____

TYPE OF WATER SUPPLY:

PUBLIC WATER (SEASONAL)

SIZE OF PROPERTY: 100 ACRES ±

ZONING: I R 1

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. SEPTIC: Reg. In. 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
(DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
3. REQUIRED

DOSE: 15 GALS

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

7 BEDROOM MINIMUM

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: 4 CONDITION: C

DEPTH TO LIMITING FACTOR: 26

SIZING RATINGS USED FOR DESIGN PURPOSES:

1. SMALL
2. MEDIUM
3. MEDIUM-LARGE
4. LARGE
5. EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. BED _____ Sq. Ft.
2. CHAMBER 825 Sq. Ft.
3. REGULAR H 2'
4. TRENCH _____ Linear Ft.
5. OTHER: _____

DESIGN FLOW: 630 (GALLONS/DAY)

SITE EVALUATOR STATEMENT - USED 32 INFILTRATOR POLYETHYLENE CHANGERS IN TRENCH CONFIGURATION

On JULY 7, 1987 (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.

William G. Gorman CC-3/4814
Site Evaluator or Professional Engineer's Signature Date: 8/18/87

Local Plumbing Inspector Signature & Local Site Evaluation Waiver under a Local Order: _____ SE# / PE#

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1E-200 Rev. 4/83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation

Street, Block, Subdivision

Owners Name

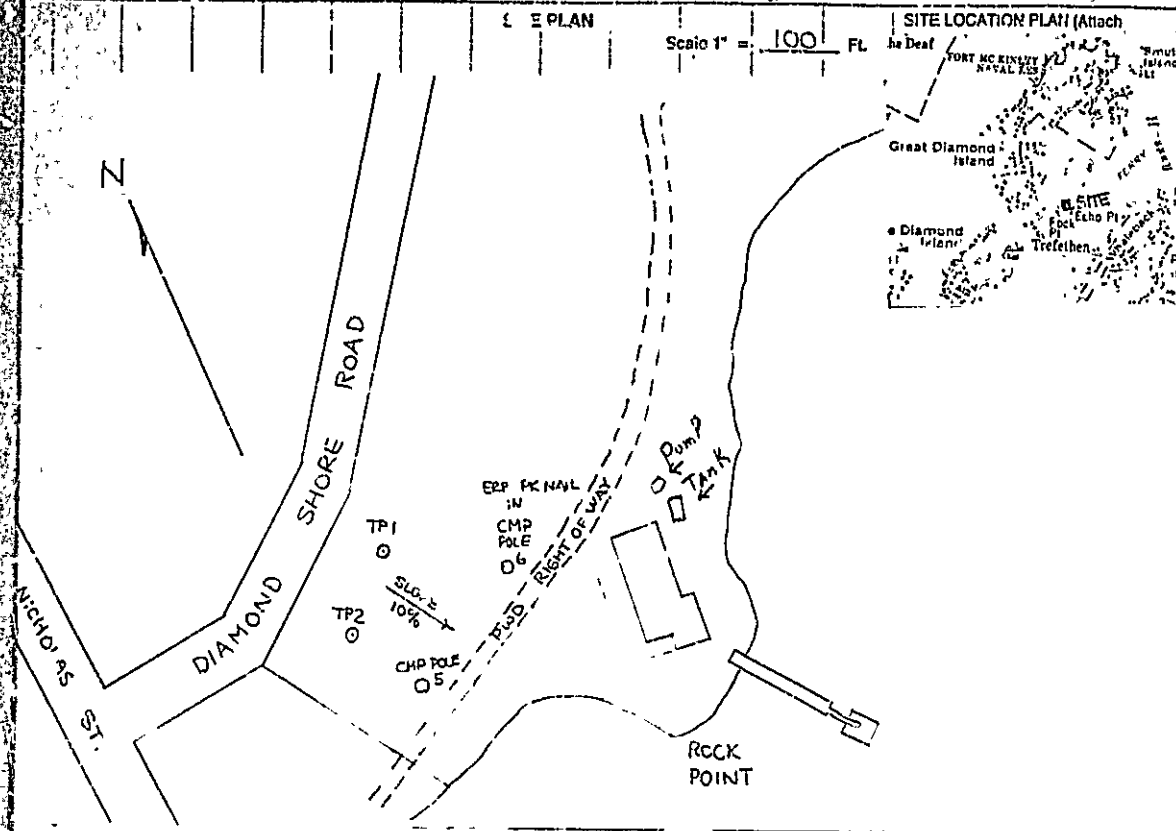
PORTLAND GREAT DIAMOND ISLAND DIAMOND SHORE RD 93-A-124, 8, 12, 14

ALBERT GLICKMAN

PLAN

Scale 1" = 100' FL

SITE LOCATION PLAN (Attach)



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 1 Test Pit Boring

3' SOD * Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM	LOOSE	DARK BROWN	NONE
LOAMY SAND	SLIGHTLY FRIABLE	RED BROWN	FEW

Soil Profile	Classification	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
H	C	10%	26	

Observation Hole 2 Test Pit Boring

3' SOD * Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN	NONE
LOAMY GRAVEL	LOOSE	RED BROWN	FEW

Soil Profile	Classification	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
H	C	10%	30	

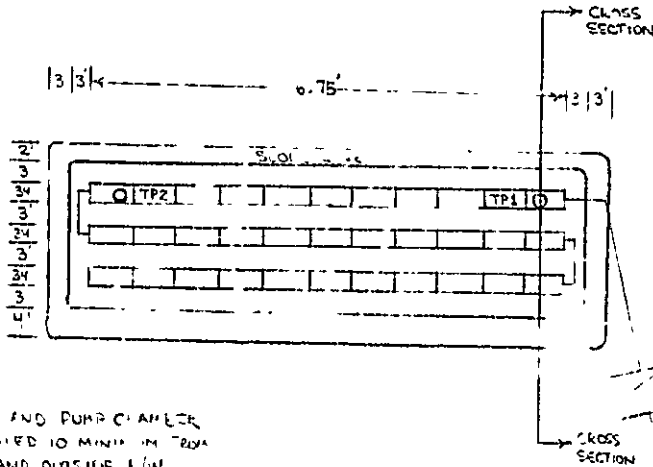
William B. Goodwin 0003/4814
 As Evaluator or Professional Engineer's Signature SE # / PE #

8/18/97
 Date

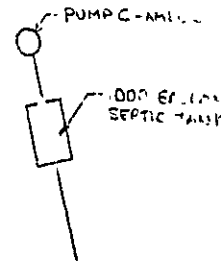
SUBSURFACE WASTEWATER DISP. SAI SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND GREAT DIAMOND ISLAND	Street, Road, Subdivision DIAMOND SHOPE RD 23-A-1, 3, 4, 9, 10, 14	Owners Name ALBERT GLICKMAN
SUBSURFACE WASTEWATER DISPOSAL PLAN		Scale 1" = 20' PL.



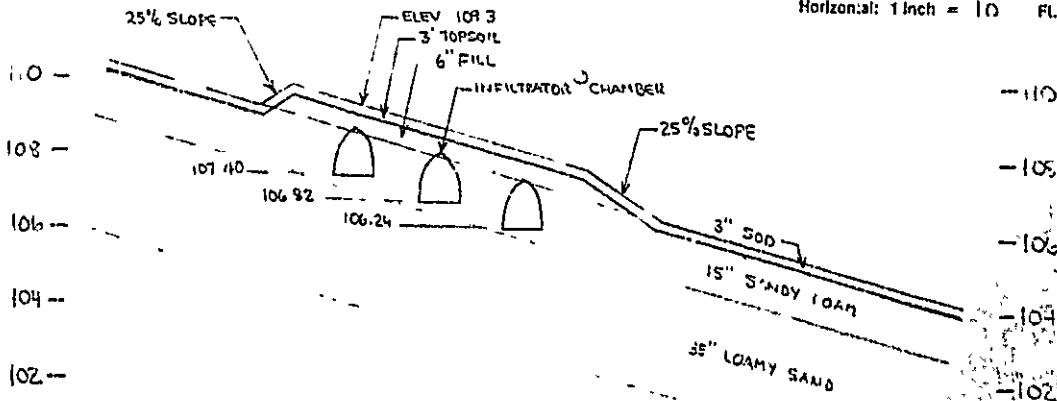
NOTES SEPTIC TANK AND PUMP CHAMBER MUST BE LOCATED TO MINIMIZE TRAFFIC WATER LINE AND OUTSIDE MAIN FULL LENGTH OF PIPE TO BE CENTERED OVER WATER LINE TO MAXIMIZE VERTICAL DISTANCE BETWEEN MAIN AND QUINCE IN SERVICE PIPE



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) 7"	Reference Elevation is Upper Reach 100.00	PK NAIL IN CMT POL #16
Depth of Fill (Downslope) 7"	Bottom of Disposal Area 107.40	
	Top of Distribution Lines or Chambers 108.45	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 4' Ft.
Horizontal: 1 Inch = 10' Ft.



Robert B. Conklin
Site Engineer or Professional Engineer's Signature

C903 / 4214
SE # / PE #

8/18/07
Date

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P 052 224 732

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to	Carl Potty
Street and No.	R.R. #2, Thomas Road
P.O., State and ZIP Code	Sebago, Maine 04075
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

* U.S. P.O. 1984460-14

PS Form 3526, Feb. 1982

Re: 23 Greenleaf St. - Fire Hall - Bldg. Insp. Addatc