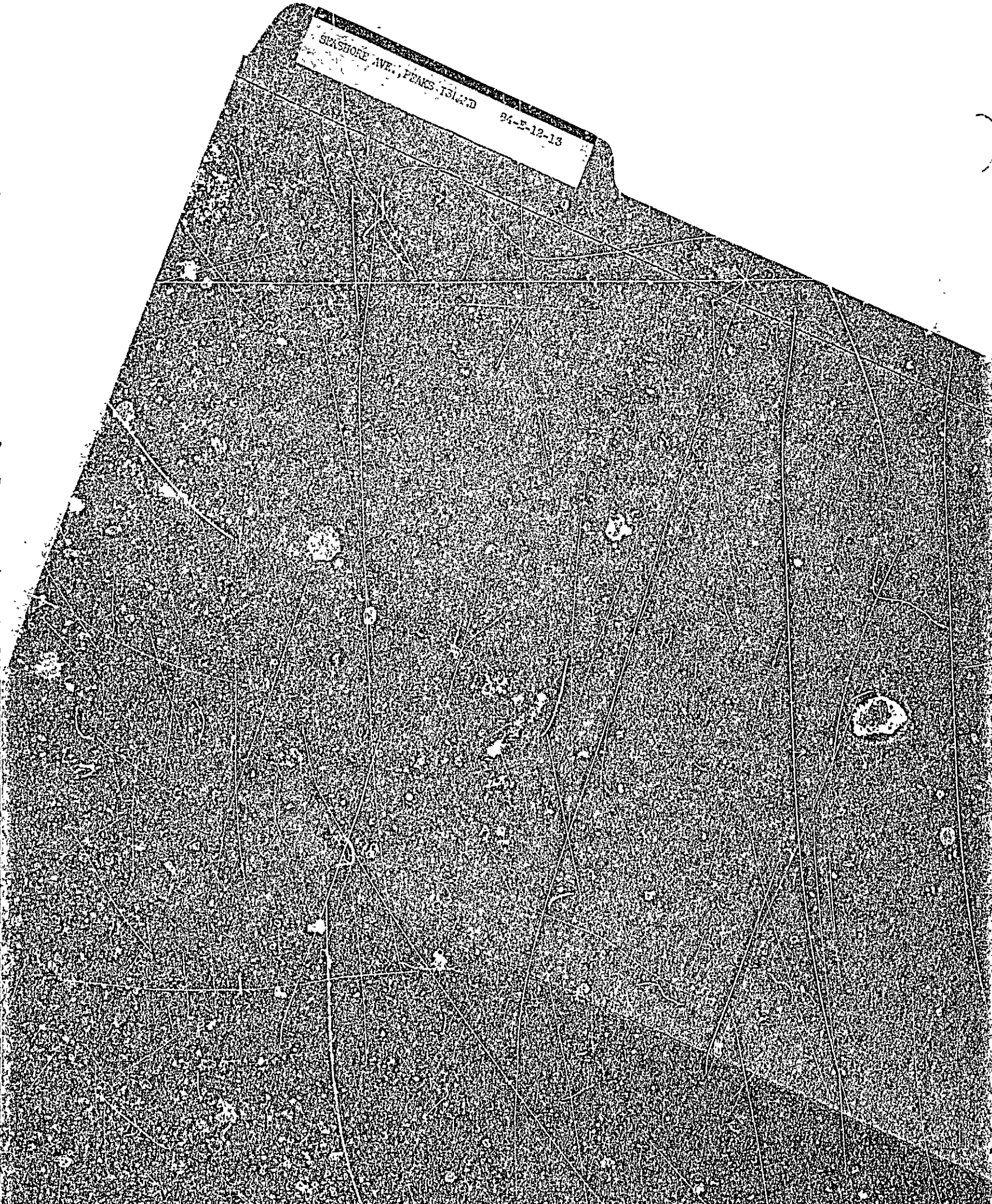


SEASIDE AVE., PEAKS ISLAND 94-2-12-13



PERMIT TO INSTALL PLUMBING Lot 84-E-12&13

PERMIT NUMBER **3408**

Address Seashore Av., Peaks Isl

Installation For. Septic Tank

Owner of Bldg. Lester Knox

Owner's Address same as above

Plumber: Lionel Plante, Isl Ave

Date. 10/30/73

NFW

REPL

NO

PL

Date Issued **10/30/73**

Portland Plumbing Inspector

By **ERNOLD R GOODWIN**

App. First Insp.

Date

By

App. Final Insp.

Date

By

Type of Bldg.

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

ERNOLD R GOODWIN
CHIEF PLUMBER

		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS	FLOOR	SURFACE
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		2.00
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		LABOR FEE		3.00
		TOTAL		5.00

Building and Inspection Services Dept: Plumbing Inspection

Date Issued **October 30, 1973**
 - Portland Plumbing Inspector
 By **ARNOLD R GOODWIN**

App. First Insp.
 Date _____
 By _____

App. Final Insp. **10/30/73**
 Date _____
 By _____

- Type of Bldg.
- Commercial
 - Residential
 - Single
 - Multi Family
 - New Construction
 - Remodeling

PERMIT TO INSTALL PLUMBING
 Address **/Seaside Ave., Peaks IS 84-E-12&13**
 Installation For **1 fam.** PERMIT NUMBER **3407**

Owner of Bldg **Lester Knox**
 Owner's Address **same**
 Plumber: **owner**

NEW	REPL		Date	NO	FEES
		SINKS			
		LAVATORIES			
		TOILETS			
		BATH TUBS			
		SHOWERS			
		DRAINS			
		FLOOR SURFACE			
	1	H ² WATER TANKS			
		TANKLESS WATER HEATERS			
		GARBAGE DISPOSALS			
		SEPTIC TANKS			
		HOUSE SEWERS			
		ROOF LEADERS			
		AUTOMATIC WASHERS			
		DISHWASHERS			
		OTHER			
		Base Fee			3.00
		TOTAL	1		5.00

Building and Inspection Services Dept.: Plumbing Inspection



APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class

PERMIT ISSUED

01508
NOV 13 1962

CITY OF PORTLAND

PORTLAND MAINE, November 13, 1962

To the INSPECTOR OF BUILDINGS, Portland, Me.

The undersigned hereby applies for a permit to repair or renew roof covering of the following described building in accordance with the laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Seashore Ave. Peaks Island (Lots 62-63) 84-E-12-13

Owner's name and address Verna Hurley

Contractor's name and address Charles Franco Winding Way

Use of building—Present Dwelling Telephone _____

No. of Stories 1 Style of roof pitch Proposed _____ Telephone _____

Type and Grade of roofing to be used Asphalt Class C Und.Lab. Dwelling _____

Type of present roof covering Asphalt

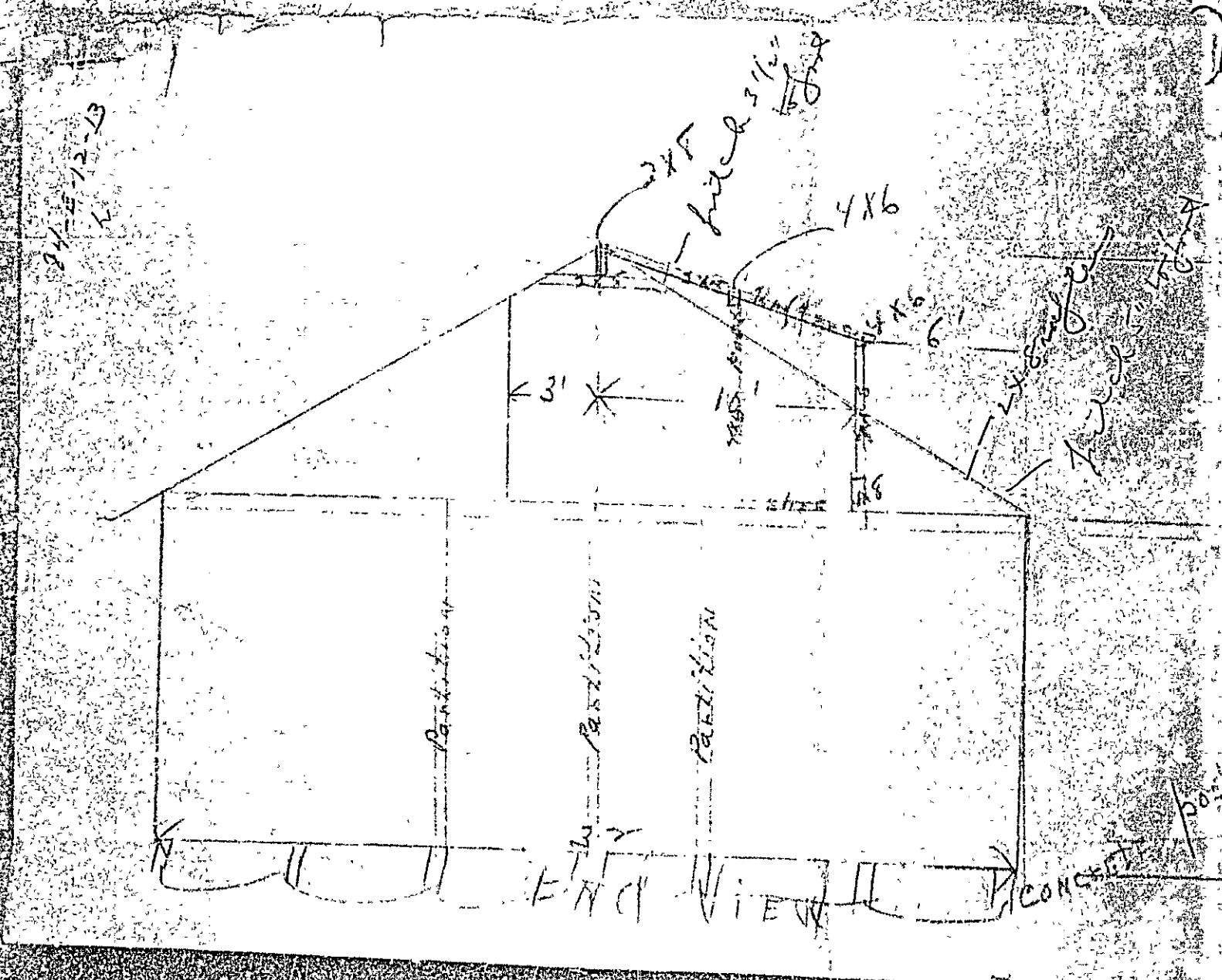
GENERAL DESCRIPTION OF NEW WORK

To cover half of roof.

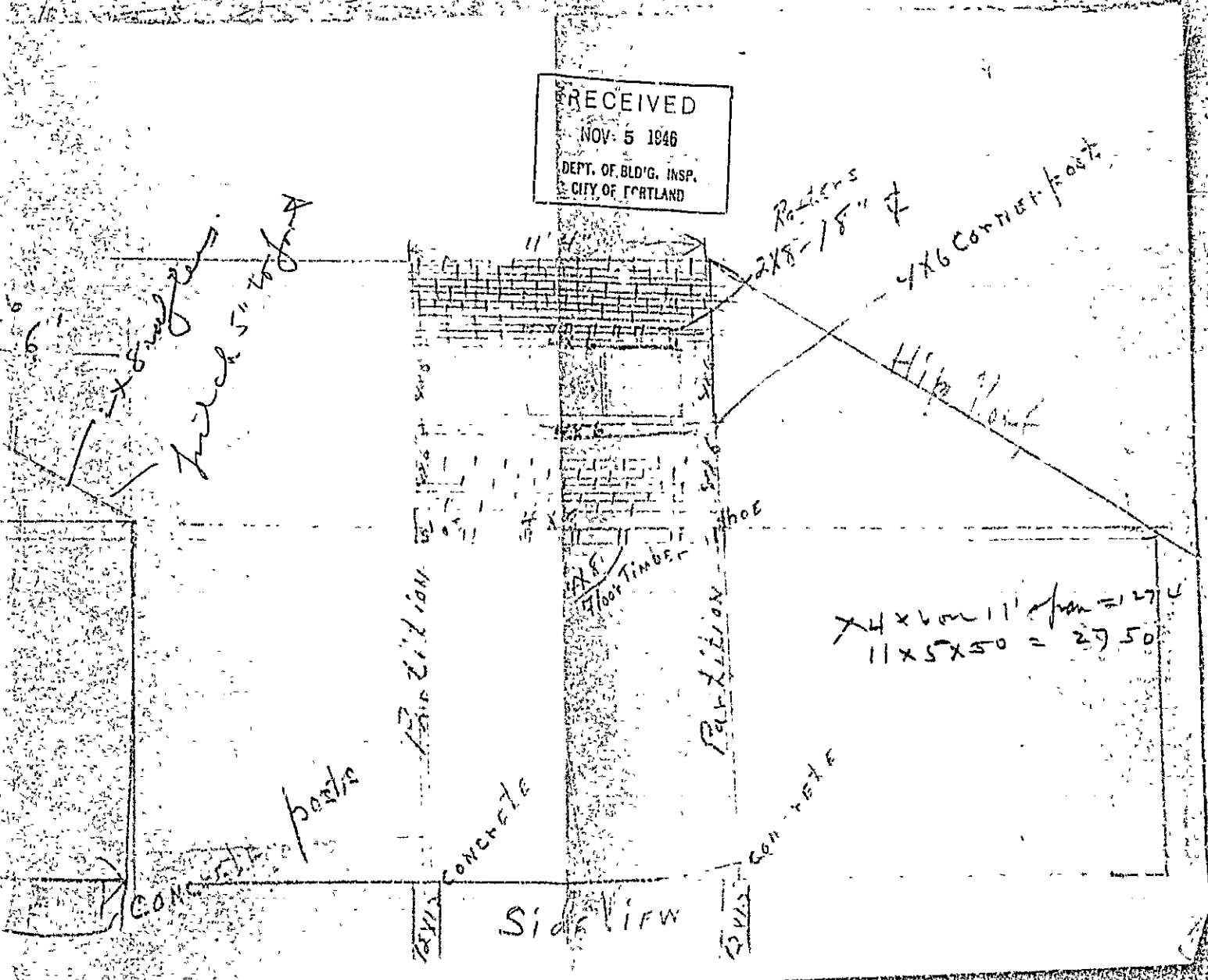
Fee \$ 50

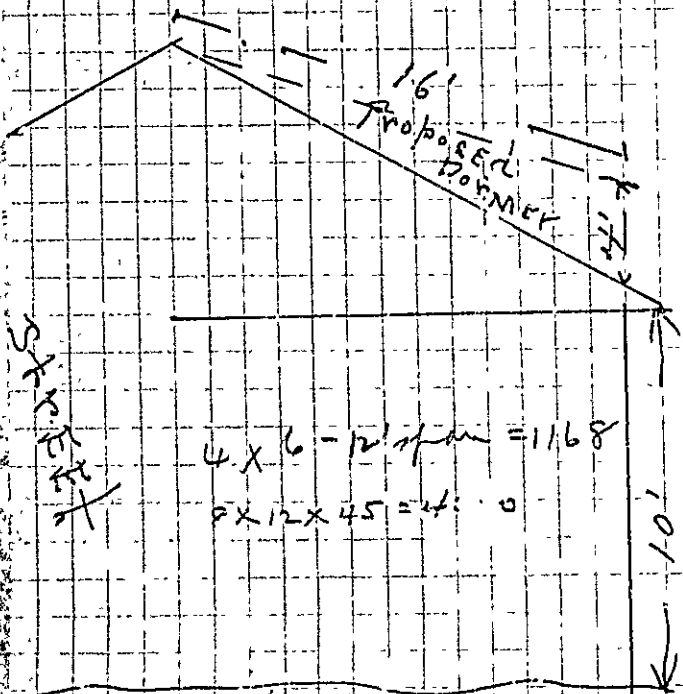
INSPECTION COPY

Signature of Owner by: Charles Franco

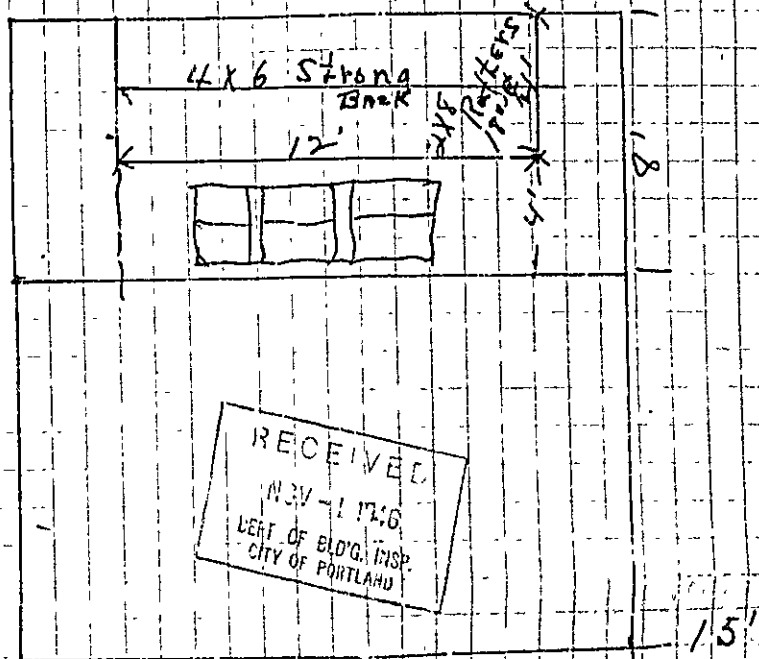


RECEIVED
NOV. 5 1946
DEPT. OF BLD'G. INSP.
CITY OF PORTLAND





SIDE VIEW



BACK LINE

40'

Memorandum from Department of Building Inspection, Portland, Maine
Seashore Avenue, Peaks Island (Mrs. J. Edmund Hurley)--Construction of 12-foot dormer
window on cottage for Mrs. J. Edmund Hurley by F. W. Stephenson,
builder--11/2/40

To Builder:

There will be some delay in issuing this permit.

I do not understand just how you intend to support this dormer roof down through the building and at the same time tie the face of the dormer across to the other side of the roof.

If you are able to give us a complete framing plan both of present roof and of proposed framing, showing all essential details and including necessary plan view and cross-section and including the header over the triple mullion window, it would help materially.

Because of the structural condition of many of the buildings on the Island, one of our inspectors usually looks over such a job before a permit is issued. The one who would normally do this work is now on vacation. About ten days will elapse before he could get down there, and the pressure of work in this office will not allow anyone else to take over this assignment.

The pitch of this new roof will be so slight that it is necessary to consider it structurally as practically a flat roof which means that extra steps must be taken to support the new rafters at the ridge down through the building to the ground, and to tie the base of the new rafters across the building to offset the spread of the rafters and avoid possibility of pushing the top of the face of the dormer outwards. Your sketch contains no answer to these questions, neither are we able to determine from it what would support 4x6 "strong back" under either end down through the building to the ground.

The 4x6 "strong back" shown on the plan, apparently would be supported only under each end. On this basis the beam would be on a 12-foot span and would be very far short of the strength needed to support the 2x8 rafters in their centers, the strength of the beam being about 1200 pounds and the weight which must be contemplated being over 4000. Obviously some other method than the one you propose will have to be adopted, and I suggest that you get this worked out and the information furnished here while you are waiting for our inspector to get to the Island.

WMCU/S

CC: Mr. J. Edmund Hurley
109 Spring Street
Hartford, Conn.

(Signed) Warren McDonald
Inspector of Buildings



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class

Portland, Maine, November 1, 1946

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location Seaside Avenue, Peaks Island Within Fire Limits? no Dist. No. _____

Owner's name and address Mrs. J. Edmund Hurley, 108 Spring St. Willimantic, Conn. Telephone _____

Lessee's name and address _____ Telephone _____

Contractor's name and address F. W. Stephenson, Peaks Island Telephone _____

Architect _____ Specifications _____ Plans yes No. of sheets 1

Proposed use of building Cottage No. families _____

Last use _____ No. families _____

Material frame No. stories 1 1/2 Heat _____ Style of roof pitch Roofing _____

Other buildings on same lot _____

Estimated cost \$ 300. Fee \$ 1.00

General Description of New Work

To construct 12' corner window on rear of cottage.

Permit Issued with Letter

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

Is any plumbing work involved in this work? _____ Is any electrical work involved in this work? _____

Height average grade to top of plate _____ Height average grade to highest point of roof _____

Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____

Material of foundation _____ Thickness, top _____ bottom _____ cellar _____

Material of underpinning _____ Height _____ Thickness _____

Kind of roof flat-shed Rise per foot 1" Roof covering asphalt roofing Class C Und. Lab.

No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____

Framing lumber—Kind hemlock Dressed or full size? dressed

Corner posts 4x6 Sills _____ Girt or ledger board? _____ Size _____

Girders _____ Size _____ Columns under girders _____ Size _____ Max. on center _____

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 3 feet _____

Joists and rafters: 1st floor _____, 2nd _____, 3rd _____, roof 2x6

On centers: 1st floor _____, 2nd _____, 3rd _____, roof 16"

Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof 8'

If one story building with masonry walls, thickness of walls? _____ height? 4x6 carrying girder

If a Garage

No. cars now accommodated on same lot _____ to be accommodated _____ number commercial cars to be accommodated _____

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

APPROVED:

Miscellaneous

Will work require disturbing of any 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

Mrs. J. Edmund Hurley

Signature of owner

By:

F. W. Stephenson

INSPECTION COPY

46/2205

Seaside on Peaks

Mrs. J. Edmund Hensley

Date of permit 11/6/46

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

#13/47 & Co.

Cert. of Occupancy issued

NOTES

~~Structure under construction
Seaside on Peaks
Clearance of site
May 16/46
*Checked off as the building
has been only 1/2 done~~

SEASIDE ON PEAKS



City of Portland.

Dec 17th 1912

To the Inspector of Buildings of the City of Portland:

The undersigned respectfully makes application for a permit to erect ~~enlarge~~ a building on Seashore Ave. street, at number 31 to be one stories high 45 1/2 feet long, 31 feet wide, also an addition to be one stories high, 22 feet long, 1 1/2 feet wide and to be used as a Lawyer's office.

The material to be used in the erection enlargement of said building is to be as follows:

- Exterior walls to be made of Wood
- Roof to be made of Wood
- Gutters to be made of Iron
- Cornices to be made of Wood
- Bay windows to be made of Wood
- Door windows to be made of Wood
- The builder is J. A. Wiley Address Portland, Ore
- The architect is J. L. & R. Stevens Address Portland, Ore
- The owner is Barbara Hubbard Address Boston, Mass

(Applicant to sign here) J. A. Wiley

OFFICE OF
INSPECTOR OF BUILDINGS,
FOR THE
CITY OF PORTLAND.
OFFICE HOURS
10-12 A. M. 4-6 P. M.

The above petition was granted the _____ day of _____ 1912.

Seashore Cove, Peaks ^V

H. H. H. H.
VT

Russell Cove

lots 62-63

E. 12-13

84-A-3212

PERMIT NO. 2863

DATE OF ISSUE 12-19-12

LOCATION

Peaks Island
Seashore Cove

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3620

PROPERTY ADDRESS

Town Or Plantation: Prakes Island
Street: Seaside St
Subdivision Lot #: 12-13

PROPERTY OWNERS NAME

Last: KNOY First: Leslie

Applicant Name: Island Bay Services Inc

Mailing Address of Owner/Applicant (if Different):

PORTLAND PERMIT # 3,039 TOWN COPY

Date Permit Issued: 8/25/88 \$ 20 FEE Double Fee Charge

[Signature] L.P.I. # _____
(For Lot Plumber's Inspector 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] Date: 8/25/88

Caution: Inspection Required

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

[Signature] Date Approved: AUG 25 1988

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 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: 1974

THE FAILING SYSTEM IS:

BED TRENCH
 CHAMBER 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

Public

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 (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
3 REQUIRED

DOSE: _____ GALS

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

DESIGN FLOW _____ (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE _____ CONDITION _____

DEPTH TO LIMITING FACTOR _____

SIZE 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 _____ Sq. Ft.
 REGULAR H 20
3 TRENCH _____ Linear Ft.
4 OTHER: _____

SITE EVALUATOR STATEMENT

On _____ (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.

Site Evaluator or Professional Engineer's Signature: _____ SE# / PE# _____ Date _____

Local Plumbing Inspector Signature if a Local Site Evaluator is used under a Local Option: _____

TOWN COPY