

ADAMS STREET
84-11-6

PEAKS ISLAND

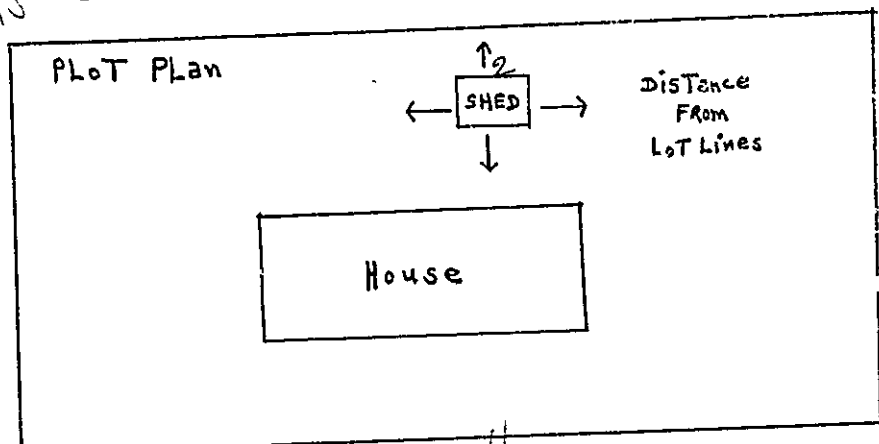
CHAMBERLAIN
8203-11-6

New Bldg
Plans 8-29-83

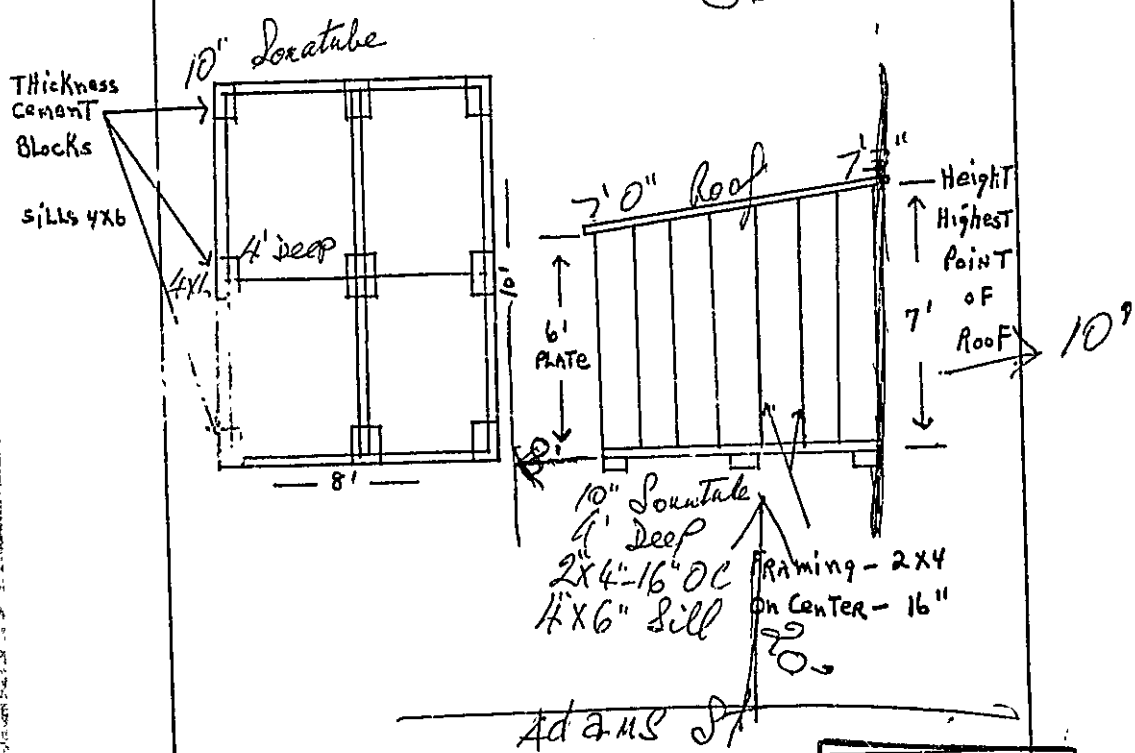
84-M-6
ADAMS ST.

UTILITY SHED

SAMPLE



Island Ave



STREET

RECEIVED
SEP 16 1981
DEPT. OF BLDG. INSP.
CITY OF PORTLAND



APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION PORTLAND, MAINE, .. Sept. 16, 1981

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION .. 84-M-6 Adams St, Peaks Island Fire District #1 #2

1. Owner's name and address Lockard Blaney - same Telephone

2. Lessee's name and address Telephone

3. Contractor's name and address Patrick Keane - Isl. Ave. Pks Isl. Telephone 766-2621

4. Architect Specifications Plans 04108 .. No. of sheets

Proposed use of building dwelling - year round with storage addition No. families 1

Last use dwelling No. families 1

Material No. stories Heat Style of roof Roofing

Other buildings on same lot Fee \$ 15.00

Estimated contractual cost \$ 500.00

FIELD INSPECTOR—Mr.

This application is for: @ 775-5451

Dwelling Ext. 234

Garage

Masonry Bldg:

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

GENERAL DESCRIPTION

To construct 12' x 5 1/2' storage shed attached to dwelling as per plans. 1 sheet of plans.

Stamp of Special Conditions

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

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

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

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

Kind of roof Rise per foot Roof covering

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

Framing Lumber—Kind Dressed or full size? Corner posts Sills

Size G Jer Columns under girders Size Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

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

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 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 number commercial cars to be accommodated

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

APPROVALS BY:

DATE

MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER

Will work require disturbing of any tree on a public street?

ZONING:

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

BUILDING CODE:

Fire Dept:

Health Dept:

Others:

Signature of Applicant

Type Name of above

Patrick Keane

Phone # same

2 3 4

Other

and Address

FIELD INSPECTOR'S COPY



APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION _____ PORTLAND, MAINE, .. Sept. 16, 1981

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

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LOCATION .. 84-1/2 Adams St. Peaks Island Fire District #1 #2

1. Owner's name and address Lockard Blaney - same Telephone

2. Lessee's name and address Telephone

3. Contractor's name and address Patrick Keane - Isl. Ave. Pks Isl. Telephone 766-2621

4. Architect Specifications Plans 04108 .. No. of sheets

Proposed use of building .. Dwelling - year round with storage addition. families .. 1

Last use .. Dwelling No. families .. 1

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 500.00 Fee \$ 15.00

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451

Dwelling Ext. 234 To construct 12' x 5 1/2' storage shed attached to dwelling as per plans. 1 sheet of plans.

Garage

Masonry Bldg. Stamp of Special Conditions

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

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Other:

DETAILS OF NEW WORK

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

Is connection to be made to public sewer? If not, what is proposed for sewage?

Has septic tank notice been sent? Form notice sent?

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

Kind of roof Rise per foot Roof covering

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

Framing Lumber - Kind Dressed or full size? Corner posts Sills

Size Girder Columns under girders Siz: Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

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

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 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 ... number commercial cars to be accommodated ...

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

APPROVALS BY: DATE MISCELLANEOUS

BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street? ...

ZONING:

BUILDING CODE: Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

Fire Dept.:

Health Dept.:

Others:

Signature of Applicant Phone # Same

Type Name of above Patrick Keane Patrick Keane 2 3 4

Other

and Address



APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION _____ PORTLAND, MAINE, .. Sept. 16, 1981

To the DIRECTOR OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

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LOCATION **84-M-6 Adams St. Peaks Island**

1. Owner's name and address **Lockard Blaney - same**

2. Lessee's name and address

3. Contractor's name and address **Patrick Keane - Isl. Ave. Peaks Isl.**

4. Architect

Proposed use of building **dwelling - year round with storage addition**

Last use **dwelling**

Material

Other buildings on same lot

Estimated contractual cost \$ **500.00**

Fire District #1 #2

Telephone

Telephone

Telephone **766-2621**

Specifications

Plans **04108**

No. of sheets

families **1**

No. families **1**

Roofing

Fee \$ **15.00**

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

This application is for: @ 775-5451

Dwelling

Garage

Masonry Bldg.

Metal Bldg.

Alterations

Demolitions

Change of Use

Other

To construct 12' x 5 1/2' storage shed attached to dwelling as per plans. 1 sheet of plans.

Stamp of Special Conditions

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PERMIT IS TO BE ISSUED TO 1 2 3 4

Other:

DETAILS OF NEW WORK

Is any plumbing involved in this work?

Is any electrical work involved in this work?

Is connection to be made to public sewer?

If not, what is proposed for sewage?

Has septic tank notice been sent?

Form notice sent?

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

Kind of roof

Rise per foot

Roof covering

No. of chimneys

Material of chimneys

of lining

Kind of heat

fuel

Framing Lumber—Kind

Dressed or full size?

Corner posts

Sills

Size Girder

Columns under girders

Size

Max. on centers

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.

Joists and rafters: 1st floor

2nd

3rd

roof

On centers: 1st floor

2nd

3rd

roof

Maximum span: 1st floor

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 ... number commercial cars to be accommodated ...

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APPROVALS BY: DATE

BUILDING INSPECTION—PLAN EXAMINER

ZONING:

BUILDING CODE:

Fire Dept.:

Health Dept.:

Others:

MISCELLANEOUS

Will work require disturbing of any tree on a public street? ..

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

Signature of Applicant

Type Name of above **Patrick Keane**

Phone # **same**

Other

and Address

APPLICANT'S COPY



APPLICATION FOR PERMIT

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION _____ PORTLAND, MAINE, Sept. 16, 1931

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The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building, structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION .. 84-14-6 Adams St., Peaks Island Fire District #1 #2

1. Owner's name and address Lockard, Blaney - same Telephone

2. Lessee's name and address Telephone

3. Contractor's name and address Patrick Keane - Isl. Avo. Pks Isl. Telephone 766-2621

4 Architect Specifications Plans 04108 .. No. of sheets

Proposed use of building .. dwelling - year round with storage addition families 1

Last use .. dwelling No. families 1

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 500.00 Fee \$ 15.00 ..

FIELD INSPECTOR—Mr. GENERAL DESCRIPTION

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Dwelling Ext. 234

Garage To construct 12' x 5 1/2' storage shed attached to dwelling as per plans. 1 sheet of plans.

Masonry Bldg.

Metal Bldg. Stamp of Special Conditions

Alterations

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

Framing Lumber—Kind Dressed or full size? Corner posts Sills

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

On centers: 1st floor 2nd 3rd roof

Maximum span: 1st floor 2nd 3rd roof

If one story building with masonry walls, thickness of walls? height?

ASSESSOR'S COPY

Complete
8-29-83

P. A.

ORIGINAL To be sent to Division of Health Engineering, Augusta, Maine 04333 by 1 1 77

MAINE DEPARTMENT OF HUMAN SERVICES
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

This is NOT a permit. This form when completed must be presented to the Local Health Director to obtain a permit. Page 1 of 2

Town: **Portland**
Street, road, etc.: **Adams Street**
Plumbing permit to: _____
Lot of Plumbing permit: _____

Owner of property: **Lockhart H. & J.J. Blaney**
Owner's address: **Adams St. Peaks Is., ME 04108**
Size of lot: **8519 Sq. Ft.**
Type of zoning: **2-2-S**
Type of land: Residential Short-land Resource Protection

Name & type of establishment (if other than private home): **Summer Home**

Name of applicant/Owner's agent: **Lionel Plante**

Applicant's address: **Island Ave.**
Tel: **766-2508**

Town: **Peaks Island**
Zip Code: **04108**

Applicant's signature: _____
Owner's signature: _____
Date: _____

Subdivision name: **Portland Assessors' Plan #84**
Lot No.: **84-M-6**

The application is for: New System Expanded System Replacement System Treatment Tank Only Disposal area Only

The water supply for this property is: Old well, depth _____ Drilled well, depth _____ Spring _____

depth: _____ Surface water Body Courts with disinfection without disinfection

Public Utility, name: **Pe. Wa. Dist.**

SITE INVESTIGATION Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II

Soil Profile No. 1	Soil Profile No.	Soil Profile No.	Soil Profile No.	Soil Profile No.
<input checked="" type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring
Organic strata Inches: 2"	Organic strata Inches: _____	Organic strata Inches: _____	Organic strata Inches: _____	Organic strata Inches: _____
1st strata Loam Inches: 6"	1st strata Inches: _____	1st strata Inches: _____	1st strata Inches: _____	1st strata Inches: _____
2nd strata Very Rocky Gravelly Loam Inches: 4"	2nd strata Inches: _____	2nd strata Inches: _____	2nd strata Inches: _____	2nd strata Inches: _____
3rd strata Very Rocky Gravelly Inches: 38"	3rd strata Inches: _____	3rd strata Inches: _____	3rd strata Inches: _____	3rd strata Inches: _____
Total Depth of observation hole inches: 50"	Total Depth of observation hole inches: _____	Total Depth of observation hole inches: _____	Total Depth of observation hole inches: _____	Total Depth of observation hole inches: _____
Max. Ground water table—mottling Inches: _____	Max. Ground water table—mottling Inches: _____	Max. Ground water table—mottling Inches: _____	Max. Ground water table—mottling Inches: _____	Max. Ground water table—mottling Inches: _____
Impervious layer, clay, etc. Inches: _____	Impervious layer, clay, etc. Inches: _____	Impervious layer, clay, etc. Inches: _____	Impervious layer, clay, etc. Inches: _____	Impervious layer, clay, etc. Inches: _____
Bedrock Inches: 49"	Bedrock Inches: _____	Bedrock Inches: _____	Bedrock Inches: _____	Bedrock Inches: _____
Type of Bedrock: Shale	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____
Surface slope: 0.5%	Surface slope: _____	Surface slope: _____	Surface slope: _____	Surface slope: _____
Soil Group & Condition per Table 9-1 of the Code, II: 63	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: _____

On **7/27/77** (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and site of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: _____
Date signed: **August 4, 1977**
Health Engineering License No: **00003**

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED, Show location of system and details on sketches on page 2, and refer to completed sample form.

<p>SYSTEM:</p> <input checked="" type="radio"/> COMBINED SYSTEM <input type="radio"/> SEPARATED SYSTEM <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Inclinorator Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Other, describe _____ See Chapter 9 of the Code, II	<p>TREATMENT TANK:</p> <input checked="" type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Size in gallons: 750 Gallon	<p>CUBERSURFACE ABSORPTION AREA</p> <p>Type: <input type="radio"/> Trench System, Total trench length: Not Applicable</p> <p><input checked="" type="radio"/> Bed System Length: 25' Width: 15'</p> <p><input type="radio"/> Chamber System, Number: Not Applicable</p> <p><input type="radio"/> Mound System, Length: Not Applicable Width: at base</p> <p><input type="radio"/> Special System, Length: Not Applicable Width: Not Applicable</p> <p>WAIVER <input type="radio"/> Required <input checked="" type="radio"/> Not Required </p>	<p>SITE MODIFICATION NCT Fill will be: APPLICABLE in us fill; _____ in downhill </p> <p>DETAILS <input type="radio"/> A Distribution Box is required Pumping is: <input type="radio"/> required, <input checked="" type="radio"/> is not required The Dose will be _____ gallons </p> <p>DISTANCES <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies </p>
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PROPERTY/LOT LOCATION MAP: **SEE DETAILED SITE PLAN SHEET 2 of 2**

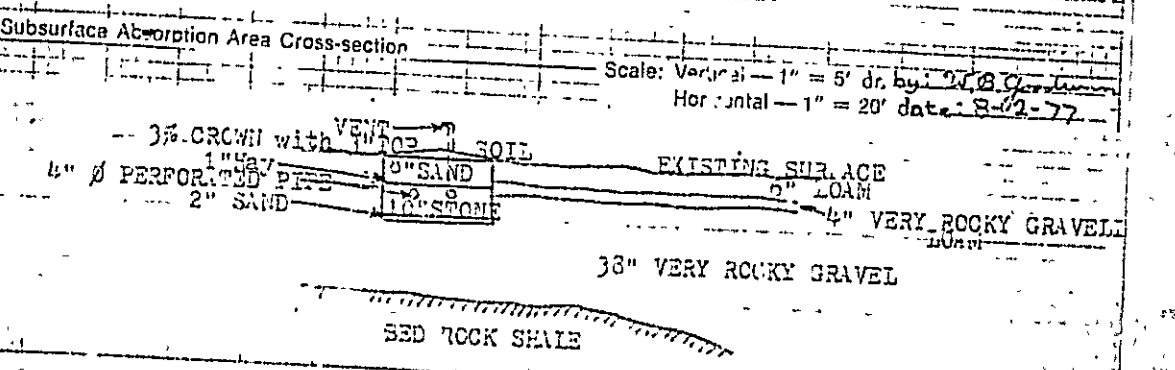
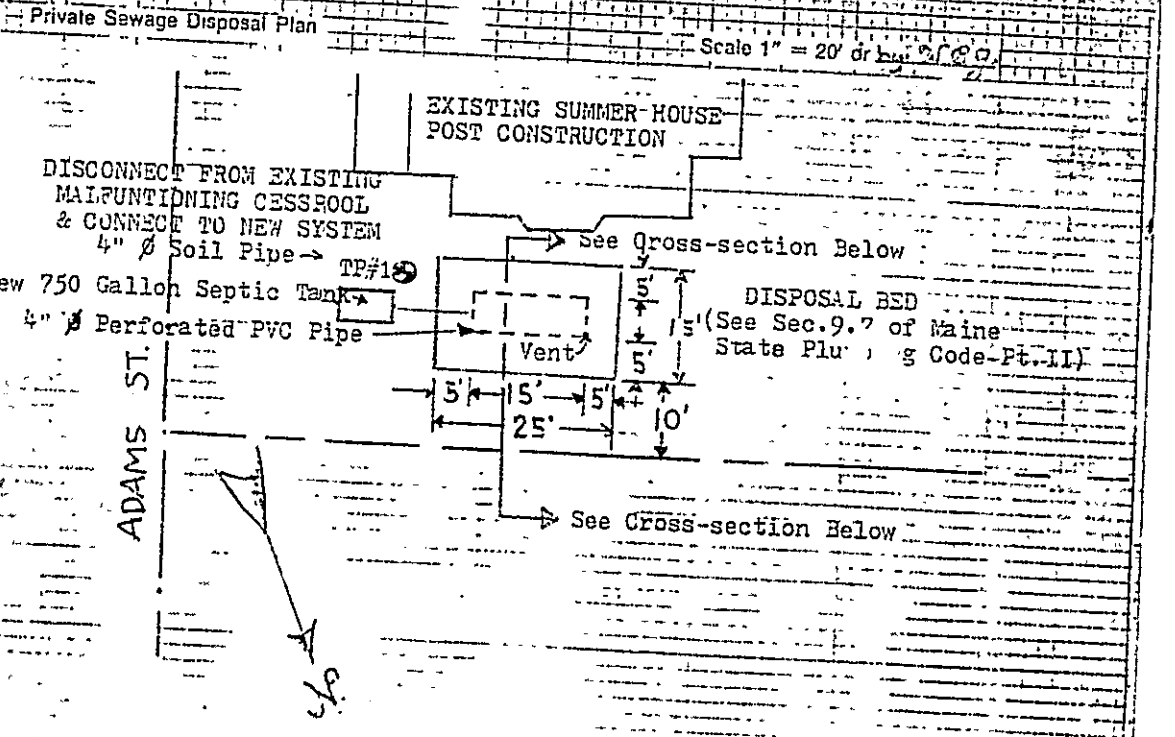
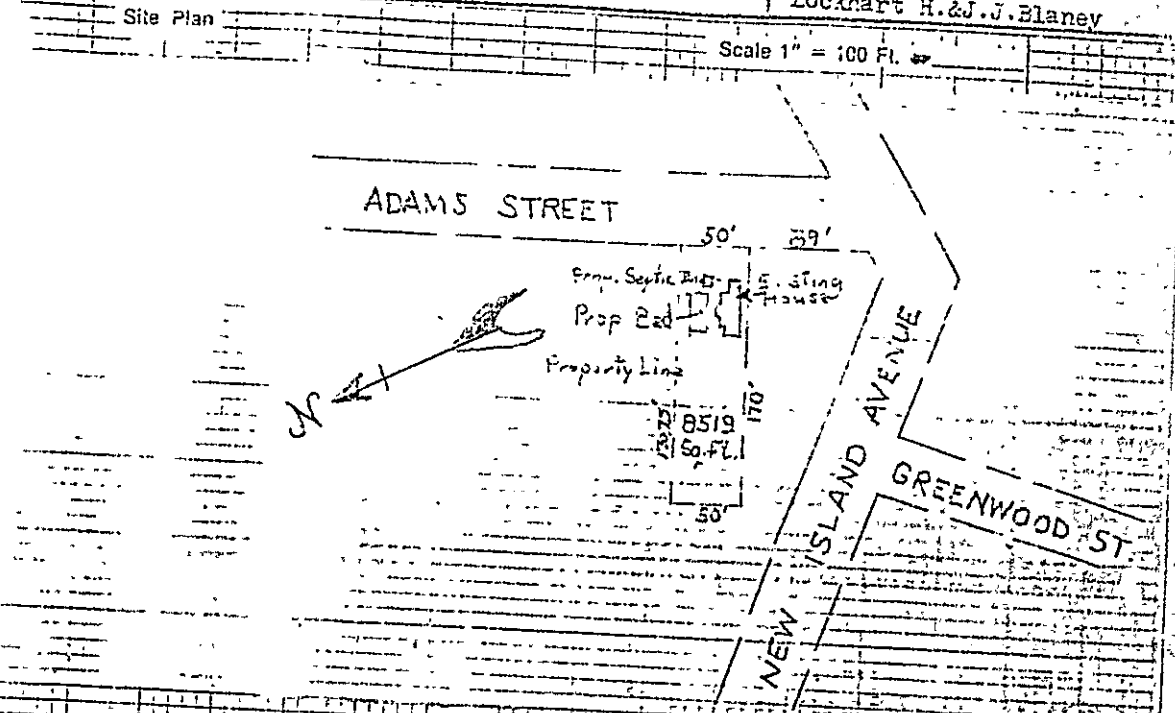
FOR THE USE OF LPI ONLY

Denial, Application is denied for following reasons, portions of the Code II are cited:
 Form is incomplete (_____) 93 35 10 General Info. Site Investigation. System Proposed.
 Site Plan. Disposal System Plan. Cross-Section. Statement. See Section 2-3
 Site investigation indicates site is: totally unsuitable for disposal system. Sections 4-3, 4-5, Table 9-1 Group 4 and 13 suitable for system proposed. Sections 4-3, 4-5, Table 9-1
 System Proposed does not conform to Code, See Sections 9
 Site investigation indicates site modifications are necessary. See Sections 9 13 14 15 16 17

Accepted _____
 Date: _____
 Signature: *Lionel Plante*
 Date: _____
 MHE-200 1777

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
 (For systems discharging of less than 2000 gallons per day)

Portland Peaks Island
 Street, Road, etc. Adams Street
 If on water body, give name
 Owner of property
 Lockhart H. & J. Blaney



I certify that all the information submitted to be true and correct, and I understand that issuance of a permit is based upon the information and plans submitted by the applicant, and I understand that any falsification of information is cause for denial of a permit to install a private sewage disposal system, and that the permit is valid for a one (1) year period from the date of permit issuance. I understand that this guarantee is intended to protect the public and is not intended to be a warranty given by the Administrative Authority or its agent.

Signature: _____
 Date: _____
 Applicant: _____
 Owner: _____

MS-200 1/77

CERTIFICATE OF APPROVAL

FOR SEWAGE DISPOSAL FOR THE TOWN/CITY OF _____

OWNER _____

Cert. of App Number
No 2278 EC

ADDRESS _____, MAINE
Location where system was installed and inspected

Date C O A Issued
Month Day Year

Installer's Name _____
Last Name F.I. M.I.

Date Inspected
Month Day Year

Date Permit Issued

THE SUBSURFACE SEWAGE DISPOSAL SYSTEM AND/OR COMPONENT(S) INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN PERSONALLY EXAMINED AND HAS BEEN PROPERLY INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE SUBSURFACE SEWAGE DISPOSAL REGULATIONS.

State Office
Use Only
Date Recd _____

Signature of LPI _____

ORIGINAL—To be sent to Department of Human Services
Division of Health Engineering 221 State Street Augusta, Maine 04333

SUBSURFACE SEWAGE DISPOSAL PERMIT FOR THE TOWN/CITY OF _____

Town/City Code _____ LPI Number _____ License Number _____ Date Issued _____ PERMIT NUMBER
Month Day Year **No 2278 EP**

Address of System & Location _____
St/Lot Number _____ Street, Road Name/Subdivisor _____ St Rd Av/Lot _____
1 Owner 2 Builder Code
3 Installer 4 Developer Issued
5 Realtor 6 Other

Name of Applicant _____
Last Name of Applicant / _____ F.I. M.I. _____
Mailing Address _____ Zip Code _____

Permit Issuance	1. Regular	2. Local Variance	3. State Variance	4. Local Waiver Option	_____	_____	_____	_____
Type of System	1. New	2. Replacement	3. Expansion	4. Experimental	_____	_____	_____	_____
System to Serve	1. Single (Res)	3. Mobile Home	5. School	Code	Units	Design Flow	_____	_____
Complete System (work with)	2. Multi-Fam (Res)	4. Commercial	6. Other (Specify)	_____	_____	_____	_____	_____
Treatment Tank (only)	1. Trench	3. Chamber	5. Special System (Include Waterless Toilet)	Code	Quant	Fee	_____	_____
Disposal Area (only)	2. Bed	4. Mound	(\$25 Each)	_____	_____	_____	_____	_____
Waterless Toilet	1. Septic (\$10 each)	2. Aerobic (\$10 each)	_____	_____	_____	_____	_____	_____
Other Systems	1. Trench	2. Bed	3. Chamber	4. Mound	5. Other (\$20 each) (Specify)	_____	_____	_____
STATE OFFICE USE ONLY	1. P & I Privy	2. Vault Privy	3. Compost Toilet (\$10 each)	_____	_____	_____	_____	_____
Signature of LPI	_____				Administrative Fee	_____	_____	_____
Date Received	_____	Receipt Number	_____	Money Received	Total of Double Fee	_____	_____	_____
Administrative Code	Form 200	LPI to Insert soil Category (L)	_____	Double Fee	1. Yes	_____	_____	_____

This "Subsurface Sewage Disposal Permit" is invalid if work is not commenced within six (6) months from date of issuance. Upon completion of work a "Certificate of Approval" must be obtained. HHE-210-077
Original—To be sent to: Department of Human Services, Division of Health Engineering 221 State Street, Augusta, Maine 04333
*Refer to Sec 2.5 for Fee Schedule on Systems over 2000 Gall/Day

PLUMBING DEPARTMENT OF MAINE PLUMBING PERMITS
 APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

This is NOT a permit. This form when completed and presented to the Local Plumbing Inspector to obtain a permit. Page 1 of 2

Town **Portland** Street/Road etc **Adams Street** Plumbing Permit No. **2278** Date **8/8/77**

Peaks Island If on water body give name

Owner of property **Lockhart H. & J.J. Blaney** Owner's address **Adams St. Peaks Is., Me. 04108** Size of lot **8519** Sq. Ft. Subdiv. Plat No. **84-14-6**

Name & use of establishment if other than private home **Summer Home** Is lot Yes No Type of zoning **RES.** Shoreland Resource Protection

Name of applicant **Lionel Blaney** If you plan to use a previous subdivision approval, attach a copy of site investigation. Please submit one of the following: Copy of previous investigation. Private sewage disposal report. Copy of the subdivision's soil report. Soil report from State Agency. **APPLICABLE**

Applicant's address **Island Ave.** Telephone **706-2508**

Town **Peaks Island** Zoning **04108** Site developer name **Portland assessors** Lot No. **84-14-6**

Applicant's signature **Lionel Blaney** Date **8/8/77** File No. **784**

This application is for: New System Expanded System Replacement System Repairment of Treatment Tank Only Disposal Area Only

The water supply in this area is: Surface Well Other Other with description Other with description Other with description

SITE INVESTIGATION State, local, or other reports on sketch on page 2, and refer to completed sample forms and check 4 of the Code, II.

Soil Profile No.	Soil Profile No. 1		Soil Profile No.		Soil Profile No.		Soil Profile No.	
	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring
Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata
Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches
1st strata	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata
Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches
2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata
Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches
3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata
Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches	Inches
Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches	Total Depth of observation hole, inches
Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting	Max. Ground water table, molting
Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.	Impervious layer, clay, etc.
Bedrock	Bedrock	Bedrock	Bedrock	Bedrock	Bedrock	Bedrock	Bedrock	Bedrock
Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock
Surface slope	Surface slope	Surface slope	Surface slope	Surface slope	Surface slope	Surface slope	Surface slope	Surface slope
Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II

On **7/29/77** (date), a site investigation for this project was completed. I conducted this soil evaluation and bring into the report indicated above best represent the soil conditions I find. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location as shown on page 2.

Signature **William P. Goodwin** Health Engineering License No. **00003**

Date signed **August 4, 1977**

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM <input checked="" type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM <input type="checkbox"/> SEWER VAULT PUMP <input type="checkbox"/> OPEN PIT PUMP <input type="checkbox"/> COMPOST TOILET <input type="checkbox"/> INCINERATOR TOILET <input type="checkbox"/> CHEMICAL TOILET <input type="checkbox"/> OTHER, describe	TREATMENT TANK <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons 750 Gallon <input type="checkbox"/> Aerobic Tank Manufacturer _____ Model No. _____ Size in gallons _____	SURFACE ABSORPTION AREA Type <input type="checkbox"/> Trench System: Total trench length <input checked="" type="checkbox"/> Not applicable <input type="checkbox"/> Bed System Length 25' Width 15' <input type="checkbox"/> Chamber System Number _____ <input type="checkbox"/> Mound System Length NOT APPLICABLE Width at base <input type="checkbox"/> Special System Length NOT APPLICABLE <input type="checkbox"/> WAIVER <input type="checkbox"/> Required <input checked="" type="checkbox"/> Not Required		SITE MODIFICATION NOT APPLICABLE Full will be _____ in uphill; _____ in downhill DETAILS <input type="checkbox"/> A Distribution Box is required Pumping is _____ required, <input checked="" type="checkbox"/> is not required The Dose will be _____ gallons <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No The proposed subsurface absorption area will be located at least 100 feet from any and all wells, springs, surface water bodies and collection lines (lake pond, open brook, stream, river, sea, etc., marshes, etc. bogs) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.
		See Chapter 9 of the Code, II	See Chapter 9 of the Code, II	See Chapter 9 of the Code, II

FOR THE USE OF LPI ONLY

Application is denied for following reasons, portions of the Code is cited:
 Form is incomplete _____ as to General info, Site Investigation, System proposed,
 S.W. Plot, Disposal System Plan, Cross Section, Assessor's Tax Section 23,
 Site investigation indicates site is totally unsuitable for disposal system, sections 45 and 46 Table 9-1 Group 3 and 10
 S.W. Plot Proposed does not conform to Code, S.W. Section 23,
 Site investigation indicates site conditions are not satisfactory, see sections 43 44 45 46

Signature **William P. Goodwin** Date **8/3/77**

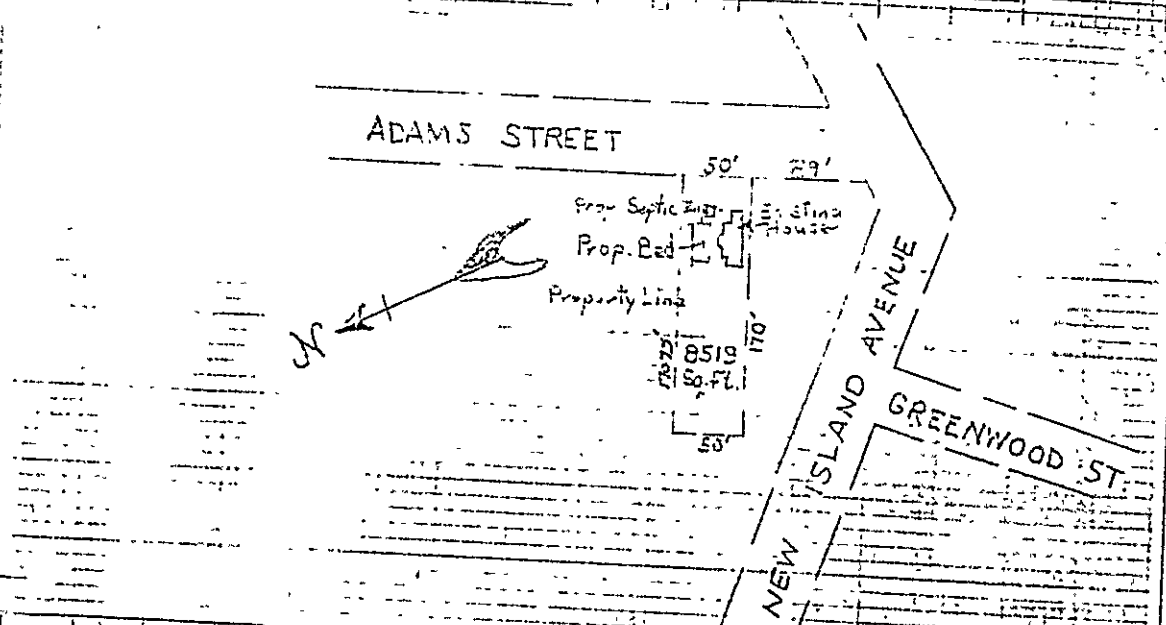
SEE DETAILED SITE PLAN SHEET 2 OF 2

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
 (For systems disposing of less than 2000 gallons per day)

Town Portland, Peaks Island	Street, Road, etc. Adams Street If on water body, give name	Owner of property Lockhart H. & J. Blaney
-----------------------------------	---	--

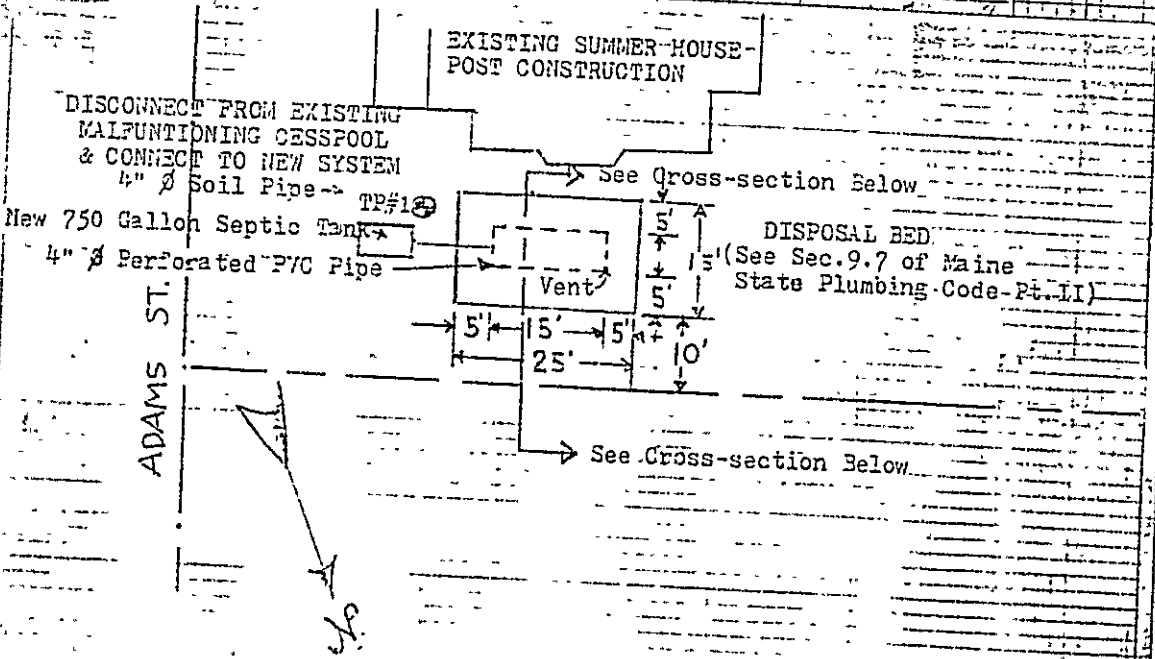
Site Plan

Scale 1" = 100 Ft. or



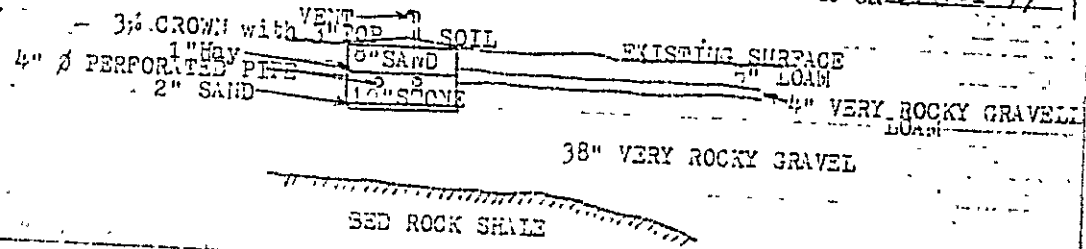
Private Sewage Disposal Plan

Scale 1" = 20' or



Subsurface Absorption Area Cross-section

Scale: Vertical - 1" = 5' dr. by *W.B.G.*
 Horizontal - 1" = 20' date: 8-2-77



I certify that the information furnished to me is true and correct, and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is void from the date of permit issuance. I understand that no guarantee is intended or implied by the issuance of the plans or approval given by the Administrative Authority or its agent.

Signature Required
 Date
 Applicant: *Paul Hedo*
 Owner:



APPLICATION FOR PERMIT

PERMIT ISSUED
APR 20 1939

Class of Building or Type of Structure Third Class

Portland, Maine, April 20, 1939

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 Adams Street, Peaks Island Ward 1 Within Fire Limits? No Dist. No. _____
 Owner's or Lessee's name and address Charles Blake, Adams St. Peaks Telephone _____
 Contractor's name and address Geo. A. Kenning, Willow St., Peaks Telephone 80
 Architect's name and address _____
 Proposed use of building Cottage No. families _____
 Other buildings on same lot _____

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 up top of one chimney

Details of New Work

Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
 To be erected on solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of roof _____ Roof covering _____
 No. of chimneys 1 Material of chimneys brick of lining _____
 Kind of heat _____ Type of fuel _____ Distance, heater to chimney _____
 If oil burner, name and model _____
 Capacity and location of oil tanks _____
 Is gas fitting involved? _____ Size of service _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 Material columns under girders _____ Size _____ Max. on centers _____
 Studs (outside walls and carrying partitions) 2x4-16" O. 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 rafters: 1st floor _____ 2nd _____ 3rd _____ roof _____
 On centers: 1st floor _____ 2nd _____ 3rd _____ roof _____
 Maximum span: 1st floor _____ 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
 Plans filed as part of this application? no No. sheets _____
 Estimated cost \$ 10. Fee \$ 25

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 Blake
Geo. A. Kenning

INSPECTION COPY

8750

Ward 1 Permit No. 29/577

Location Adams St. Peaks

Owner Charles Blake

Date of permit 4/20/29

Notif. closing-in

Inspn. closing-in

Final Notif.

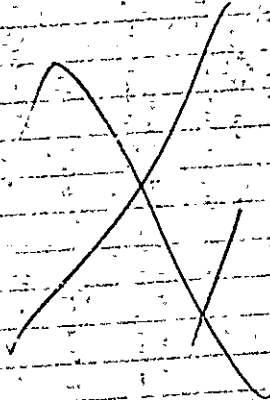
Final Inspn.

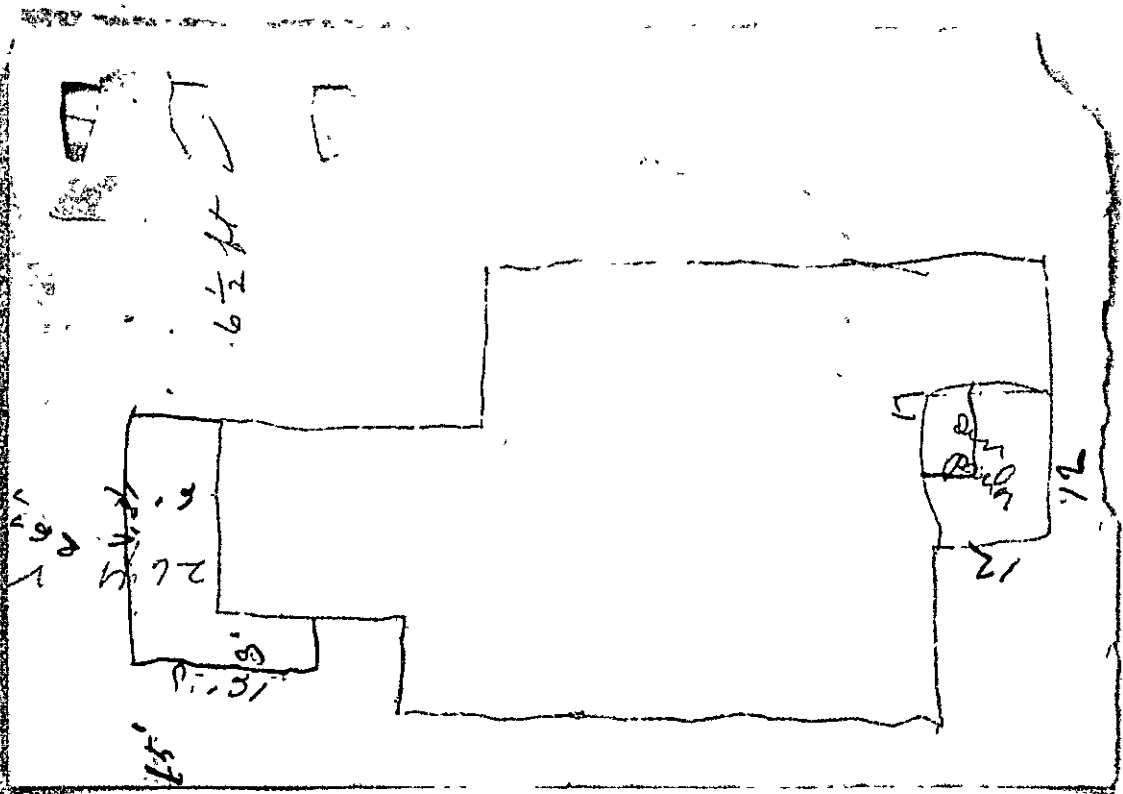
Cert. of Occupancy issued

NOTES

Page 84

16
M







APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class

Portland, Maine, April 5, 1929

PERMIT ISSUED
APR 8 1929

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 Adams Street Peaks Island Ward 1 Within Fire Limits? NO Dist. No. _____
Owner's or Lessee's name and address C. W. Blake, 425 Cumberland Ave. Telephone _____
Contractor's name and address E. H. Weaver, Sargent Road, Peaks Telephone 222
Architect's name and address _____
Proposed use of building Cottage No. families _____
Other buildings on same lot _____

Description of Present Building to be Altered

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

General Description of New Work

To ~~glass~~ in portion of existing front piazza, 12' x 12'
Existing with roof over same prior to Dec. 6, 1926
To construct open platform (no roof) approximately 16' x 19' on rear of cottage

Details of New Work

Size, front _____ depth _____ No. stories _____ Height average grade to highest point of roof _____
To be erected on solid or filled land? _____ earth or rock? _____
Material of foundation cedar posts Thickness, top _____ bottom _____
Material of underpinning _____ Height _____ Thickness _____
Kind of roof _____ Roof covering _____
No. of chimneys _____ Material of chimneys _____ of lining _____
Kind of heat _____ Type of fuel _____ Distance, heater to chimney _____
If oil burner, name and model _____
Capacity and location of oil tanks _____
Is gas fitting involved? _____ Size of service _____
Corner posts _____ Sills 4x6 Girt or ledger board? _____ Size _____
Material columns under girders _____ Size _____ Max. on centers _____
Studs (outside walls and carrying partitions) 2x4-16" O.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 rafters: 1st floor 2x6, 2nd _____, 3rd _____, roof _____
On centers: 1st floor _____, 2nd _____, 3rd _____, roof _____
Maximum span: 1st floor _____, 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
Plans filed as part of this application? yes No. sheets 1
Estimated cost \$ 25 Fee \$ 60
Will there be in charge of the above work a person competent to see the State and City requirements pertaining thereto are observed? Yes

Signature of owner: C. W. Blake
E. H. Weaver

INSPECTION COPY

Ward 1 Permit No. 29/445

Location Adams St. Peak

Owner C. W. Blake

Date Permit 4/5/29

Notif. closing-in

In spn. closing-in

in if.

Final Inspn.

Cert. of Occupancy issued

NOTES:

84 - Plan 8/4-B
M - Part 13
6 - Part 88

9/25/29 - Work done
A.J.B.



APPLICATION FOR PERMIT

PERMIT ISSUED

JUN 4 1986

B.O.C.A. USE GROUP
 B.O.C.A. TYPE OF CONSTRUCTION 702
 ZONING LOCATION ... IR-1 ... PORTLAND, MAINE ... May 30, 1986

City Of Portland

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect, alter, repair, demolish, move or install the following building structure, equipment or change use in accordance with the Laws of the State of Maine, the Portland B.O.C.A. Building Code and Zoning Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION ... 84-M-006 Adams St. Peaks Isl. 04108 ... Fire District #1 , #2
 1. Owner's name and address Lockhart H Blaney - same ... Telephone 766-5595...
 2. Lessee's name and address ... Telephone
 3. Contractor's name and address Roger Ererton - Greenwood St. Pks Isl ... Telephone
 Proposed use of building ... dwelling - year round ... No of sheets
 Last use ... same ... No families ... 1
 Material ... No. stories ... Heat ... Style of roof ... Roofing
 Other buildings on same lot
 Estimated contractual cost \$... 1,000
 FIELD INSPECTOR—Mr
 @ 775-5451

Appral Fees \$
 Base Fee 25.00
 Late Fee
 TOTAL \$

To construct 14'9" x 22' deck on back and side of dwelling as per plans. 1 sheet of plans.

send permit to # 1 04108

Stamp of Special Conditions

PERMIT ISSUED WITH LETTER

NOTE TO APPLICANT: Separate permits are required by the installers and subcontractors of heating, plumbing, electrical and mechanicals.

DETAILS OF NEW WORK

Is any plumbing involved in this work? ... no Is any electrical work involved in this work? ... no
 Is connection to be made to public sewer? If not, what is proposed for sewage?
 Has septic tank notice been sent? Form notice sent?
 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
 Kind of roof Rise per foot Roof covering
 No. of chimneys Material of chimneys of lining Kind of heat fuel
 Framing Lumber—Kind Dressed or full size? Corner posts Sills
 Size Girder Columns under girders Size Max. on centers
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
 Joists and rafters: 1st floor 2nd 3rd roof
 On centers: 1st floor 2nd 3rd roof
 Maximum span: 1st floor 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 number commercial cars to be accommodated
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE
 BUILDING INSPECTION—PLAN EXAMINER
 ZONING: O.K. W.D.T. May 31, 1986
 BUILDING CODE:
 Fire Dept.:
 Health Dept.:
 Others:

MISCELLANEOUS

Will work require disturbing of any tree on a public street? ... DO
 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 Applicant Lockhart H. Blaney Phone # 617-270-2541
 Type Name of above Lockhart H Blaney 1 2 3 4
 Other
 and Address

PERMIT ISSUED WITH LETTER

Handwritten signature: M.M. ...

APPLICANT'S COPY

OFFICE FILE COPY

NOTES

C-3-87-Completed and

Alteration

Garage Stack, back & side ex.

Dwelling (insheet 14 1/2" x 28 1/2")

Approved 6/14/86

Date of permit 5/30/86

Owner Ac/Sheet H. Blomberg

Location 841-177-006, Rogers St

Permit No. 86/702

[Lined area for notes, partially crossed out with a diagonal line]

[Large lined area for notes, crossed out with a diagonal line]



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

June 3, 1986

RE: 86-M-006 Adams St. Peaks Island

Mr. Lockhart H. Blaney
84-M-006 Adams Street
Peaks Island, Maine 04108

Dear Sir:

Your application to construct a 14'9" X 22' deck has been reviewed and a building permit is herewith issued subject to the following requirements:

1. Guards shall not be less than 30" in height above the deck; and,
2. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches can not pass through any opening.

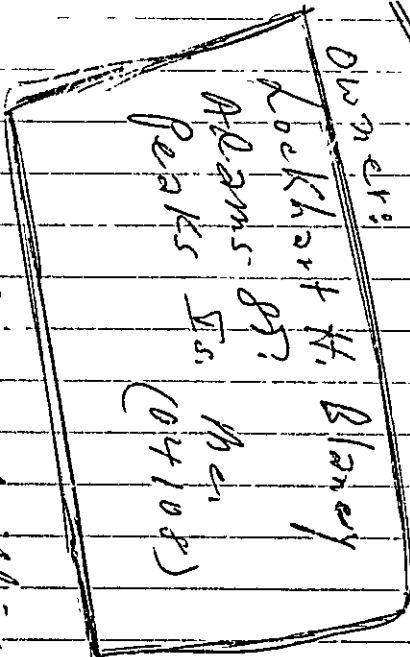
If you have any questions on these requirements, please call this office.

Sincerely,

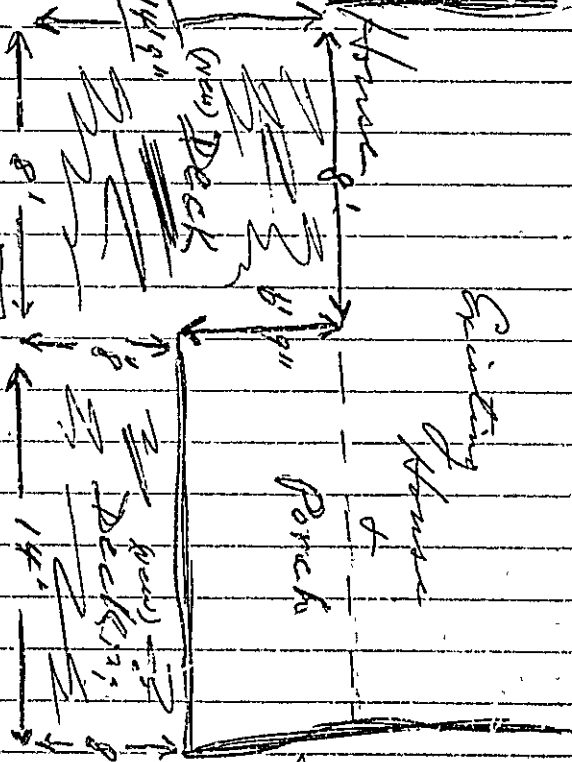
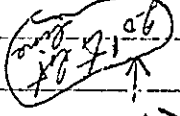
P. Samuel Hoffses
Chief of Inspection Services

PSH/el

84 M-004
Adam St.



Deck (in wood)
 Deck Spruce Wood
 Pre-Pressure (6"x6")
 Posts (wood) (6"x6")
 Cement (floor)

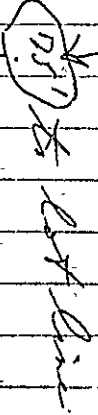


5/30/86 - Request Building Permit for new deck
 (84 M-006)

DEPT. OF BUILDING INSPECTIONS
 CITY OF PORTLAND

MAY 30 1986

RECEIVED



IR-2 Zone

Pealrs Island
Adams St.
Lockhart H. Blauig

25' Front Yard

Need not be further back than house
on either side of same block

Rear Yard 25'

Side Yard 20'

Interior lot

RECEIVED

MAY 30 1986

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND