

SANDPIPER ROAD
85-M-4

PEAKS ISLAND

CERTIFICATE OF APPROVAL
FOR INTERNAL PLUMBING

TOWN/CITY OF
057 71

LPI NUMBER
1123

DATE ISSUED
9 13 08 10
Month Day Year

THE TOWN/CITY OF

Portland

No. 38809 IC

Certificate of App. Number

Installer's Name
Last Name
C. CASEY
F I M I

Installer
 Code

1. Owner
2. Licensed Master Plumber
3. Licensed Oil Burner
4. Employees of Public Utilities
5. Manufacturer
6. Dealer

Owner
Patrick J. Gardner
Address
Lot 85 011-4
St/Lot Number
Street, Road Name
Sanctuary Road
Subdivision

(Location where plumbing was done and inspected)

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL
NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS
INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING REGULATIONS.

OWNER'S COPY

Signature of LPI
NOV 7 1990

Date Inspected

ORIGINAL—To be sent to: Department of Human Services,
Division of Health
Engineering, Augusta, Maine 04301

**CERTIFICATE OF APPROVAL
FOR INTERNAL PLUMBING**

THE TOWN/CITY OF Porter

TOWN/CITY CODE 05170 LPI NUMBER 1123 DATE ISSUED 11/07/80 No **38809 IC**
 Month Day Year
 Certificate of App Number
 Installer's Name CASEY F I M I E Installer Code 2
 Owner Patrick J. Gardner
 Address Lot 85 M-4 Sandown Road
 Sub/Lot Number Street, Road Name Subdivision
 (Location where plumbing was done and inspected)

- 1 Owner
- 2 Licensed Master Plumber
- 3 Licensed Oil Burner
- 4 Employees of Public Utilities
- 5 Manufactured Housing Dealer
- 6 Manufactured Housing Mechanic

THE INTERNAL PLUMBING INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN TESTED IN MY PRESENCE, FOUND TO BE FREE FROM LEAKS, AND WAS INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE PLUMBING REGULATIONS.

TOWN'S COPY

Signature of LP: _____
 Date Inspected NOV 7 1980
 ORIGINAL—To be sent to: Department of Human Services,
 Division of Health
 Engineering, Augusta, Maine 04333

INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF Porter

Town/City Code 05170 LPI Number 1123 Date Issued 11/07/80 INSTALLER'S License No. 1775 No **38809 IP**
 Month Day Year
 PERMIT NUMBER
 Address of Where Plumbing Is Done LOT 85 M-4 SANDOWN ROAD Subdivision SANDOWN Installer Code 2
 S/Lot Number Street/Road Name
 Name of Owner GARDNER F I M I PE Mailing Address _____ Zip Code _____
 Last Name

Type of Construction	1 New	3 Addition	5 Replacement of Hot Water Heater	7 Hook-up of Modular Home
	2 Remodeling	4 Remodeling & Addition	6 Hook-up of Mobile Home	8 Other (Specify) <u>1</u>

Plumbing To Serve	1 Single (Res)	3 Mobile Home	5 Commercial	7 Other (Specify) <u>1</u>
	2 Multi-Fam (Res)	4 Modular Home	6 School	

Number of Fixtures or Hook Ups

Sink(s) <u>1</u>	Toilet(s) <u>1</u>	Bathtub(s) <u>1</u>	Levatorie(s) <u>1</u>	Shower(s) <u>1</u>	Urinal(s) <u>1</u>
Clothes Washer(s) <u>1</u>	Dish-Washer(s) <u>1</u>	Hot Water Heater(s) <u>1</u>	Floor Drain(s) <u>1</u>	Hook-Up(s) <u>1</u>	

This "Internal Plumbing 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 from the LPI.

SCHEDULE OF FEES		
1-10	Fixtures	\$2.00 each
11-20	Fixtures	\$1.00 each
21	Fixtures on up	\$.50 each
	Hook Ups	\$2.00 each

NOTE: Hotwater Heater (Tank or Tankless) is a Fixture!

Fixture Fee	<u>18.00</u>
Hook Up Fee	<u>0.00</u>
Administrative Fee	<u>3.00</u>
Total Fee	<u>21.00</u>

Double Fee Check Box

TOWN'S COPY

Signature of LPI _____

HHE 211 Rev 4/79



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 18, 19 80

Receipt and Permit number A 45636

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: 85-4 Sandpiper Road Pks. Island

OWNER'S NAME: P. J. Gardner ADDRESS: lives there summers

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>1-30</u> ✓	3.00
FIXTURES: (number of)	
Incandescent _____ Fluorescent _____ (not strip) TOTAL <u>1-10</u> ✓	3.00
Strip Fluorescent _____ ft. _____	
SERVICES:	
Overhead _____ Underground <u>x</u> Temporary _____ TOTAL amperes <u>200</u> ✓	3.00
METERS: (number of) <u>1</u>	.50
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 <u>x</u> _____ Water Heaters <u>x</u> _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL _____	3.00
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 _____	
Repairs after fire _____	
Emergency Lights, battery _____	
Emergency Generators _____	
	INSTALLATION FEE DUE: _____
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT DOUBLE FEE DUE: _____	
FOR REMOVAL OF A "STOP ORDER" (304-16.b) _____	
	TOTAL AMOUNT DUE: <u>12.50</u>

INSPECTION:

Will be ready on _____, 19____; or Will Call xx

CONTRACTOR'S NAME: Paul DeBevoise Inc.

ADDRESS: 55 R. Pleasant Hill Rd. Falmouth

TEL.: 797-5072

MASTER LICENSE NO.: 655 SIGNATURE OF CONTRACTOR: _____

LIMITED LICENSE NO.: _____ *Paul DeBevoise*

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN



APPLICATION FOR PERMIT

PERMIT ISSUED
JUL 25 1978
CITY OF PORTLAND

B.O.C.A. USE GROUP
B.O.C.A. TYPE OF CONSTRUCTION 0 0627
ZONING LOCATION PORTLAND, MAINE, July 20, 1978

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 85-M-4 Sanopiper Road, Peaks Island Me.
1. Owner's name and address Patrick G. Gardner - 419 E. Maple St. Fire District #1 #2
2. Lessee's name and address Telephone
3. Contractor's name and address Telephone
4. Architect Telephone
Proposed use of building dwelling Specifications Plans No. of sheets
Last use No. families 1
Material No stories Heat Style of roof No families
Other buildings on same lot Roofing
Estimated contractual cost \$ 26,000
Fee \$ 104.00 pd.

FIELD INSPECTOR—Mr. 775-5451 Ext. 234 GENERAL DESCRIPTION

This application is for:
Dwelling
Garage
Masonry Bldg.
Metal Bldg.
Alterations
Deletions
Change of Use
Other

To construct single family dwelling 24 x 32, to be used as year round not summer cottage.

Stamp of Special Conditions
Send permit to Mr. Gardner, Seashore Ave. Peaks Island, C/O Thomas Frary

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? ... YES
Is connection to be made to public sewer? ...
Has septic tank notice been sent? ...
Height average grade to top of plate ... 15 ft.
Size, front ... 32 depth ... 24 No. stories ... 1 1/2
Material of foundation ... concrete Thickness, top ... bottom ... cellar
Kind of roof ... pitch Rise per foot ... 12/12 Roof covering ... asphalt shingles
No. of chimneys ... 2 Material of chimneys ... metal Kind of heat ... oil fuel
Framing Lumber—Kind ... standard Dressed or full size? Corner posts ... Sills ... 2 x 12
Size Girder ... Columns under girders ... Size ... Max. on centers ...
Studs (outside walls and carrying partitions) 2x4-15" O. C. Bracing 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 EX. MINER
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 ... Patrick G. Gardner Phone # 56-5553
Type Name of above ... Patrick G. Gardner 1 2 3 4
Other and Address

FIELD INSPECTOR'S COPY

NOTES

Dec 20/78
Not started waiting for

Spring of 79

May 10/79 nothing started.

June 13/79 Foundations

June 29/79 Foundations placed
waiting on house plans.

Sept 27/79 House plans submitted. The
contractor will be going ahead with building
& hopefully will not stop until its complete.

May 13, 1980 Drilling completed.
Pipes will limit Pooling back
Drilling - underground elec source!

Permit No. 578 / 1627

Location

Shelburne, Vt. Col. Rd.

Owner

Chas. H. Knecht

Date of permit

7-21-78

Approved

7-25-78



CERTIFICATE OF APPROVAL

FOR SEWAGE DISPOSAL FOR THE TOWN/CITY OF Paris

OWNER Arthur L. Gaudin
 ADDRESS 100 York St. Paris, Maine
Location where system was installed and inspected

Cert. of App. Number
No. 2289 EC

Date C.O.A. Issued
JUN 13 1978
Month Day Year

Installer's Name W. H. K. S. M. I. C. A. S. - 4 F.I. M.I.

Date Inspected
JUN 13 1978
Month Day Year

Date Permit Issued
5 4 78

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.

Arthur L. Gaudin
 Signature of LPI

State Office Use Only
 Date Received

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 Paris

Town/City Code	LPI Number	License Number	Date Issued	PERMIT NUMBER
<u>05170</u>	<u>0127</u>	<u>09003</u>	<u>10 14 78</u>	No. 2289 EP
Address of System's Location	St/Lot Number	Street, Road Name/ Subdivision	St. Rd. Av./Lot	
<u>SYSTEM</u>	<u>0127</u>	<u>100 YORK ST. PARIS</u>	<u>100</u>	
Name of Applicant	Last Name of Applicant	F.I.	M.I.	Mailing Address
<u>GARDNER</u>	<u>GARDNER</u>	<input type="checkbox"/>	<input type="checkbox"/>	<u>100 YORK ST. PARIS</u>
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) 2. Multi Fam (Res) 3. Mobile Home 4. Commercial 5. School 6. Other (Specify)			
Complete System (Tank with)	1. Trench 2. Bed 3. Chamber 4. Mound 5. Special System (includes one Waterless Toilet)			
Treatment Tank (only)	1. Septic (\$10 each) 2. Aerobic (\$10 each) 3. Holding (\$20 each)			
Disposal Area (only)	1. Trench 2. Bed 3. Chamber 4. Mound 5. Other (\$20 each) (Specify)			
Waterless Toilets	1. Pit Privy 2. Vault Privy 3. Compost Toilet (\$10 each)			
Other Systems	1. Laundry Waste 2. Separate Chambers (Specify)			
STATE OFFICE USE ONLY	Signature of LPI	Administrative Fee	Total or Double Fee	Double Fee
Date Received	Receipt Number	Money Received		1. Yes <input type="checkbox"/>
Administrative Code	Form 200	LPI to Inspect soil Category (L) <input type="checkbox"/> (S) <input type="checkbox"/>		

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.
 Original—To be sent to: Department of Human Services, Division of Health Engineering 221 State Street, Augusta, Maine 04333
 Refer to Sec. 2.6 for Fee Schedule on Systems over 2000 Gal/Day

PHE 210-377

STATE DEPARTMENT OF HUMAN SERVICES
 APPLICANT'S PRIVATE SEWAGE DISPOSAL PERMIT

Location: **Portland, Iowa**
 City, Road, etc.: **Onway Ave. & Sandpiper Rd.**
 If on water body give name: _____

Page 1 of 2

Owner of property: **Derrick Cardner**
 Owner's address: **4192 Maple Ave. Ottumwa, Iowa**

Name & type of establishment if other than private home: _____

Name of applicant: **Jackson & Casey Plumbing & Heating, Corp.**

Applicant's address: **Island Ave. Ottumwa, Iowa**
 Tel. No.: **766-2917**
 City: **Ottumwa, Iowa**

Applicant's signature: *[Signature]*
 Date: _____

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

The water supply for this property: City water, main Well Other: _____

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.	Soil Profile No. 4/22/78		Soil Profile No.		Soil Profile No.	
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring
1	Forest Peat 1" Organic strata	Forest Peat 3" Organic strata	Forest Peat 1" Organic strata	Forest Peat 3" Organic strata	Forest Peat 1" Organic strata	Forest Peat 3" Organic strata
2	Loam 6" 1st strata	Very Sandy Loam 2" 1st strata	Loam 6" 1st strata	Very Sandy Loam 2" 1st strata	Loam 6" 1st strata	Very Sandy Loam 2" 1st strata
3	Red Br. Rocky Sandy Loam 18" 2nd strata	Red Br. Rocky Sandy Loam 32" 2nd strata	Red Br. Rocky Sandy Loam 18" 2nd strata	Red Br. Rocky Sandy Loam 32" 2nd strata	Red Br. Rocky Sandy Loam 18" 2nd strata	Red Br. Rocky Sandy Loam 32" 2nd strata
4	Red Br. Very Rocky 12" 3rd strata	Gray Br. Silty Gravel 8" 3rd strata	Red Br. Very Rocky 12" 3rd strata	Gray Br. Silty Gravel 8" 3rd strata	Red Br. Very Rocky 12" 3rd strata	Gray Br. Silty Gravel 8" 3rd strata
Total Depth of observation hole inches: 65" 42" _____ _____						
Max. Ground water table molting: None Evident None Evident _____ None Evident None Evident _____						
Impervious layer, clay, etc.: None Evident None Evident _____ None Evident None Evident _____						
Bedrock: None Evident None Evident _____ None Evident None Evident _____						
Type of Bedrock: Shale Shale _____ Shale Shale _____						
Surface slope: 1.0 % 3.0 % _____ _____						
Soil Group & Condition per Table 9-1 of the Code, II: SA SA _____ _____						

On **July 18, 1978**, a site investigation for this project was completed. I conducted the soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown in page 2.

Signature: **William B. Goodwin**
 Date signed: **May 1, 1978**
 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

SYSTEM:
 COMBINED SYSTEM
 SEPARATED SYSTEM (If separated system—type of sewer waste disposal system to be used)
 Sealed Vault Pipe
 Open Pit Pipe
 Common Toilet
 Private Toilet
 Chemical Toilet
 Other, describe _____

TREATMENT TANK:
 Septic Tank
 Concrete
 Fiberglass
 Metal
 Size in gallons: **1,000 GALLON**

Aerobic Tank
 Model No. _____
 Size in gallons: **7 APPL. LOAD**

UNDER-SURFACE ABSORPTION AREA:
 Type: Trench System: Total trench length: **200'**
 Bed System: Length: **NOT APPLICABLE**
 Chamber System: Number: _____
 Mound System: Length: **NOT APPLICABLE**
 Special System: Length: _____

SIZE:
 Very Small
 Small
 Medium
 Medium-Large
 Large
 Extra Large

WARRANTY:
 Required
 Not Required

SITE MODIFICATION:
 It will be: **NO**
 In uphill: **12"** In downhill: **12"**

DETAILS:
 A Distribution Box is required
 Pumping is: required, is not required.
 The flow will be _____ gallons

DISTANCES:
 Yes 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, stream, river), camps, marshes, and dogs
 Yes No The proposed subsurface absorption area will be located at least 200 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.

PROPERTY/LOG: _____

FOR THE USE OF LPI ONLY

Form is complete if _____

Site Investigation indicates site is totally unsuitable for disposal system; Sections 4.3 and 9.5, Table 9-1 Group 3 and 10

System proposed does not conform to Code, see Sections 9

Site Investigation indicates site modification necessary; See Sections 4.3, 4.4, 4.6, 4.7, 4.8, 4.9

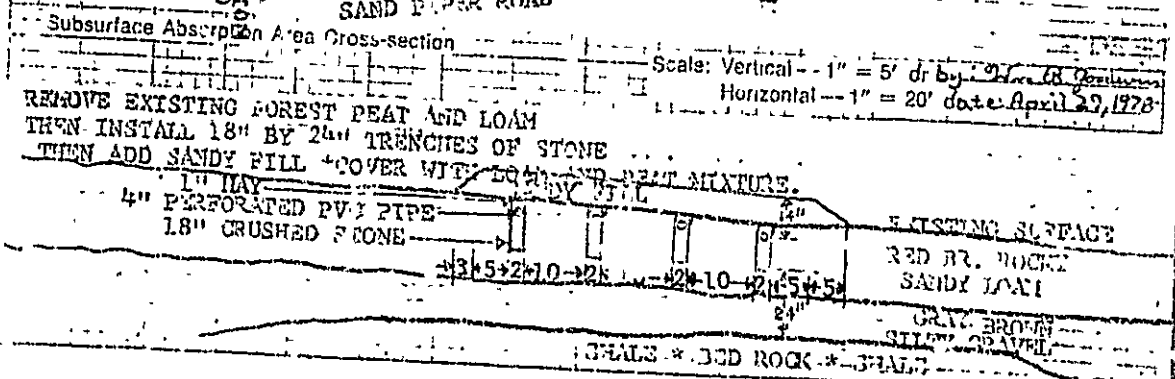
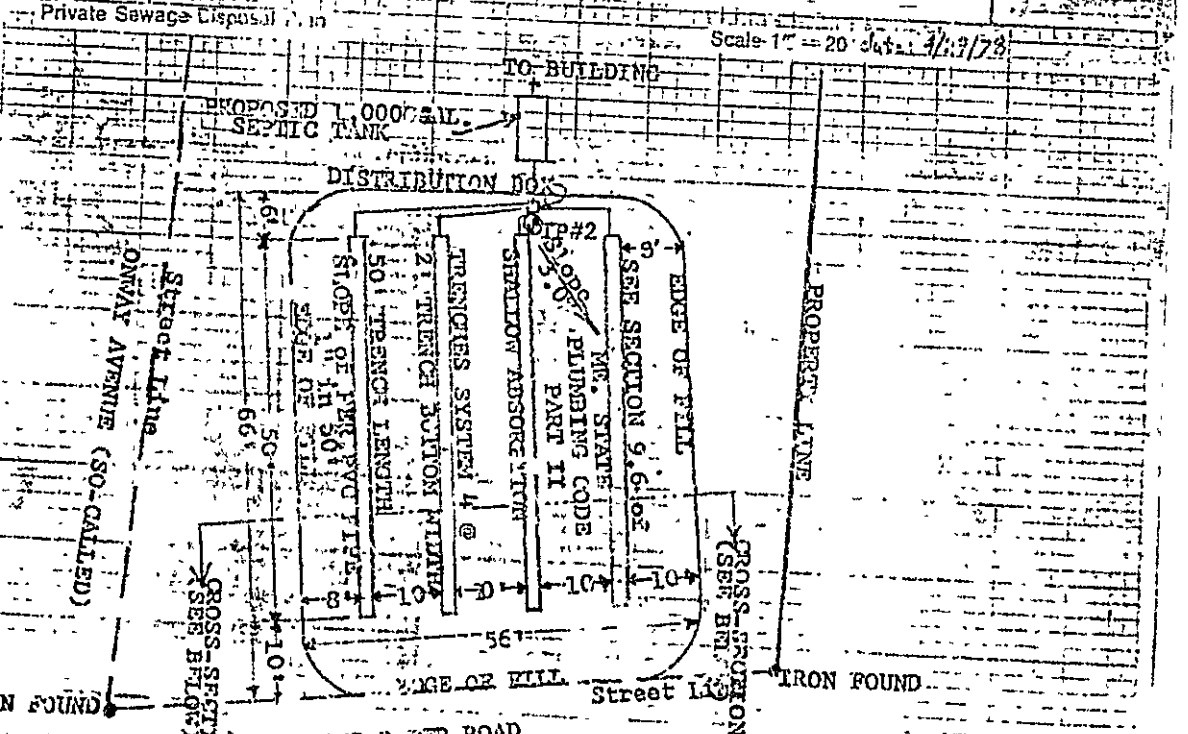
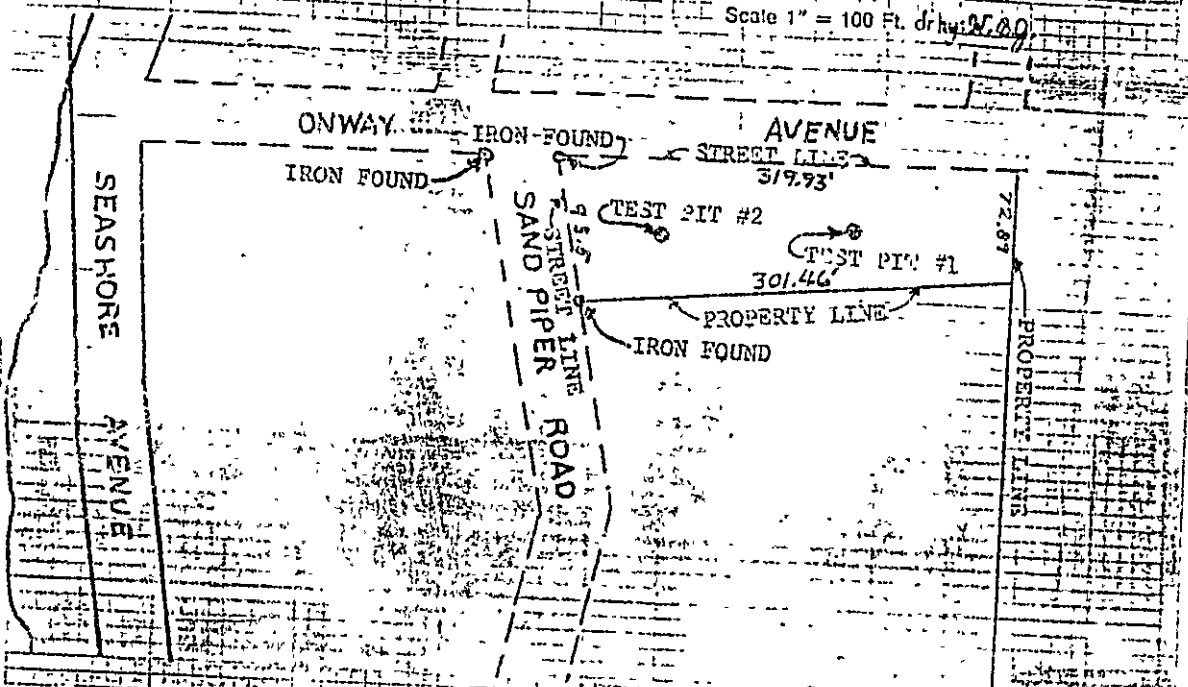
Acceptance Application (Type 1) approved _____ with condition specified, comply with Section _____

Signature: *[Signature]* Date: **5/1/78**

SEE DETAILS OF THE PLAN ON PAGE 2 OF 2

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

PORTLAND PEAKS ISLAND
 Street, Road, etc. SANDPIPER ROAD No. ONWAY AVENUE
 If on water body, give name
 Owner of property Patrick Gardner



Statement: (no permit may be issued unless signed)
 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. I 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 valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of my act or approval given by the Administrative Authority of its agent.
 Signature Required: _____
 Date: _____
 Applicant: _____