

85-N-11 SEASHORE AVE.  
PEAKS ISLAND

MAINE DEPARTMENT OF HEALTH AND WELFARE APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT (For systems disposing of less than 2000 gallons per day) This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit Page 1 of 2

Town: **Portland-Peaks Island** Street, Road, etc.: **Seashore Ave** Permit No: \_\_\_\_\_ Date: \_\_\_\_\_  
 If on water body, give name: **Ocean**

Owner of property: **Betty & Howard Heller** 1235 Congress St, Portland  
 Size of lot: **20850 Sq. Ft.** (Sq. feet / Acres)

Name & type of establishment if other than private home: \_\_\_\_\_ Is lot Zoned?  Yes  No Type of Zoning:  Residential  Commercial  Resource Protection

Name of applicant: **Howard U. Heller** If you plan to use a previous subdivision approval in lieu of the APPLICABLE submit one of the following:  
 Deed restriction for private sewage disposal  
 Copy of the subdivision & soils report  
 Soils report from a State Agency

Applicant's address: **1235 Congress Street** Tel. No.: **773-0517**

Town: **Portland** zip code: **04102** Subdivision name: **Portland Assessors** Lot No.: **35-14-11**  
 Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Plan # **#85-1-11**

Owner's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

The water supply for this property is:  Dug well, depth \_\_\_\_\_, lining \_\_\_\_\_;  Drilled well, depth \_\_\_\_\_, lining \_\_\_\_\_;  Spring  \_\_\_\_\_

depth \_\_\_\_\_, lining \_\_\_\_\_;  Surface water  Body,  Course— with disinfection,  without disinfection  Public Utility, name \_\_\_\_\_

**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.	Soil Profile No.	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	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring
Organic strata: <b>Peat</b> Inches: <b>3</b>	Organic strata: <b>Peat</b> Inches: <b>4</b>	Organic strata: _____ Inches: _____	Organic strata: _____ Inches: _____	Organic strata: _____ Inches: _____
1st strata: <b>Very Sandy Loam</b> Inches: <b>7</b>	1st strata: <b>Loam</b> Inches: <b>15</b>	1st strata: _____ Inches: _____	1st strata: _____ Inches: _____	1st strata: _____ Inches: _____
2nd strata: <b>Very Rocky Sand Loam</b> Inches: <b>15</b>	2nd strata: <b>Very Rocky Sandy Loam</b> Inches: <b>13</b>	2nd strata: _____ Inches: _____	2nd strata: _____ Inches: _____	2nd strata: _____ Inches: _____
3rd strata: <b>Silty Sand</b> Inches: <b>17</b>	3rd strata: <b>Silty Sand</b> Inches: <b>36</b>	3rd strata: _____ Inches: _____	3rd strata: _____ Inches: _____	3rd strata: _____ Inches: _____
Total Depth of observation hole inches: <b>42"</b>	Total Depth of observation hole inches: <b>68"</b>	Total Depth of observation hole inches: _____	Total Depth of observation hole inches: _____	Total Depth of observation hole inches: _____
Max. Ground water table—mottling: <input checked="" type="checkbox"/> None Evident	Max. Ground water table—mottling: <input type="checkbox"/> None Evident	Max. Ground water table—mottling: <input type="checkbox"/> None Evident	Max. Ground water table—mottling: <input type="checkbox"/> None Evident	Max. Ground water table—mottling: <input type="checkbox"/> None Evident
Impervious layer, clay, etc.: <input checked="" type="checkbox"/> None Evident	Impervious layer, clay, etc.: <input checked="" type="checkbox"/> None Evident	Impervious layer, clay, etc.: <input type="checkbox"/> None Evident	Impervious layer, clay, etc.: <input type="checkbox"/> None Evident	Impervious layer, clay, etc.: <input type="checkbox"/> None Evident
Bedrock: <input type="checkbox"/> None Evident	Bedrock: <input checked="" type="checkbox"/> None Evident	Bedrock: <input type="checkbox"/> None Evident	Bedrock: <input type="checkbox"/> None Evident	Bedrock: <input type="checkbox"/> None Evident
Type of Bedrock: <b>42"</b>	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____
Surface slope: <b>1.0 %</b>	Surface slope: <b>1.5 %</b>	Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %
Soil Group & Condition per Table 9-1 of the Code, II: <b>5-a</b>	Soil Group & Condition per Table 9-1 of the Code, II: <b>5-b</b>	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 **12-13-75** (date), a site investigation for this project was completed. I supervised this soil evaluation and certify that the results indicated above best represent the soil conditions found. I also recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature and Registration/Certification Number: \_\_\_\_\_ Date signed: **12-28-75**

Soil Scientist  
 Geologist  
 Soil Engineer  
 Other, must show current letter of certification to LPI

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

SYSTEM:	TREATMENT TANK:	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION
		Type	SIZE	
<input type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe _____ See Chapter 9 of the Code, II.	<input type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer: _____ Size in gallons: _____ <input type="checkbox"/> Aerobic Tank Manufacturer: _____ Model No.: _____ Size in gallons: _____	<input type="checkbox"/> Trench System: Total trench length: _____ <input type="checkbox"/> Bed System Length: _____ Width: _____ <input type="checkbox"/> Chamber System: Number _____ <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type F <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____ <input type="checkbox"/> Non-discharge System Bed Length _____ Width _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provide J, type _____	<input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Medium Large <input type="checkbox"/> Large <input type="checkbox"/> Extra Large	Fill is— <input type="checkbox"/> required, <input type="checkbox"/> not required Fill will be _____ inches deep <b>DETAILS</b> <input type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input type="checkbox"/> is not required. The Dose will be _____ gallons <b>DISTANCES</b> <input 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 courses; (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs. <input 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.

PROPERTY/LOT LOCATION MAP

FOR THE USE OF LPI ONLY

Denial: A, application is denied for following reasons; portions of the Code II are cited. Form is incomplete (\_\_\_\_ pg) as to  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 4.5 and 9.5, Table 9-1 Group 1 and 10,  Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1.

System Proposed does not conform to Code; See Sections 8.

Site investigation indicates site modifications are necessary; See Sections 4.3, 4.4, 4.6, 8.7.

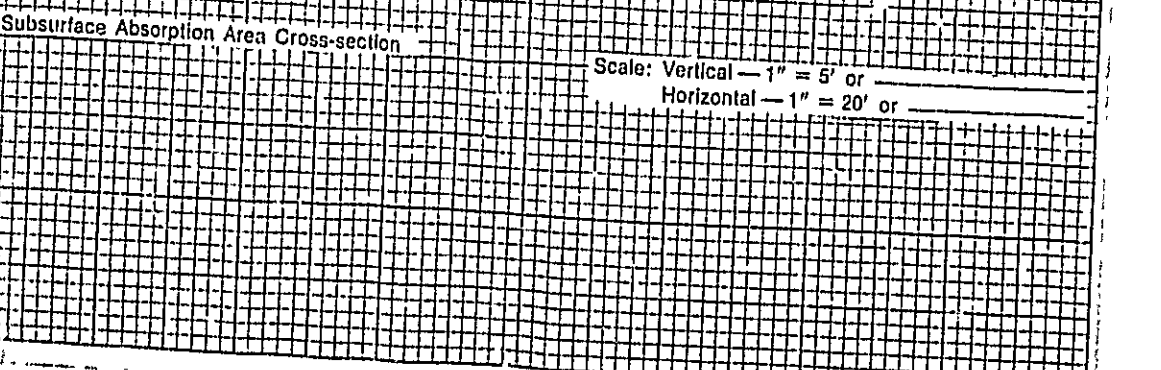
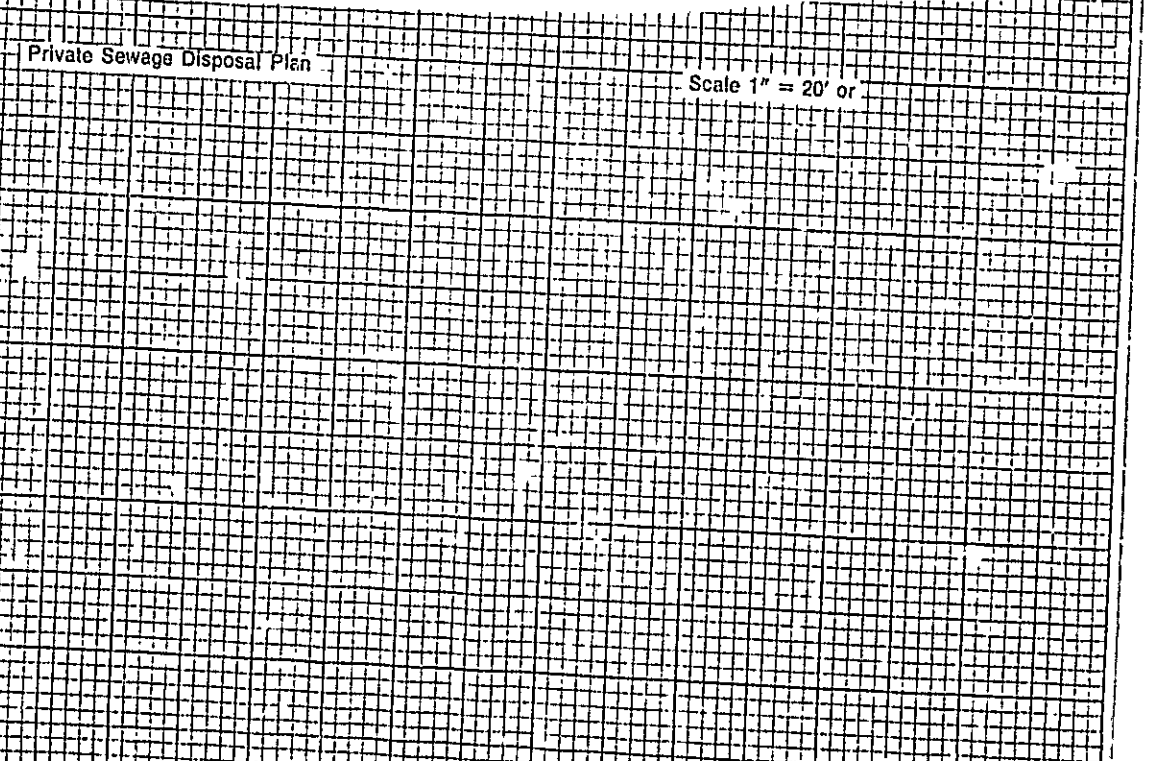
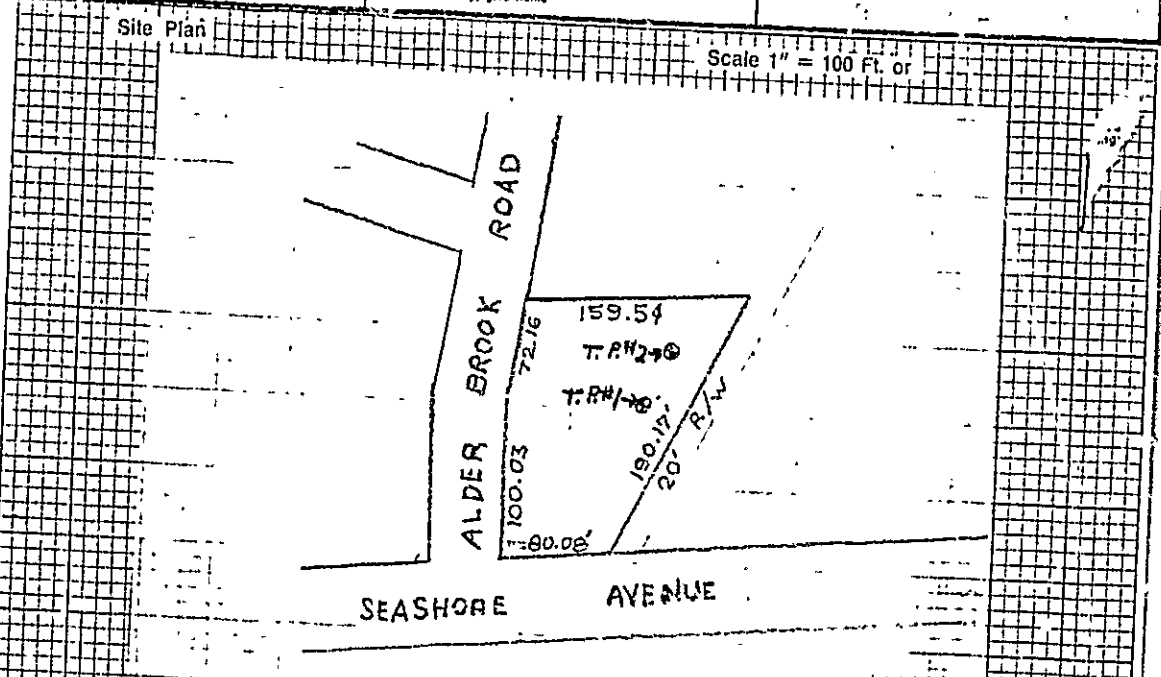
Miscellaneous \_\_\_\_\_ See Section \_\_\_\_\_

Acceptance: Application for permit is approved  with condition specified; comply with Section \_\_\_\_\_  without condition.

Location—roads, landmarks: \_\_\_\_\_ Signed LPI: \_\_\_\_\_ Date: \_\_\_\_\_ HHC-200 8/75

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

Town	Street, Road, etc. If on water body, give name	Owner of property
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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 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 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 any advice or approval given by the Administrative Authority or its agent.

Date: \_\_\_\_\_

Applicant: \_\_\_\_\_

Signature Required

HMC-200 5/75

PERMIT TO INSTALL PLUMBING

Date Issued: \_\_\_\_\_  
 Address: 85-M-11 Seashore Ave. PERMIT NUMBER 468  
 Installation For: single family Peaks Island  
 Owner of Bldg.: Patrick Gardner  
 Owner's Address: same  
 Portland Plumbing Inspector: \_\_\_\_\_  
 By: ERNOLO R. GOODWIN Plumber: Jackson Y Gasey Date: 7/22/16

App. First Insp. \_\_\_\_\_  
 Date: \_\_\_\_\_  
 By: \_\_\_\_\_  
 App. Final Insp. \_\_\_\_\_  
 Date: \_\_\_\_\_  
 By: \_\_\_\_\_  
 Type of Bldg:  
 Commercial  
 Residential  
 Single  
 Multi-Family  
 New Construction  
 Remodeling

	NEW	REPL			
			SINKS		
			LAVATORIES		
			TOILETS		
			BATH TUBS		
			SHOWERS		
			DRAINS FLOOR SURFACE		
			HOT WATER TANKS		
			TANKLESS WATER HEATERS		
			GARBAGE DISPOSALS		
			SEPTIC TANKS		
			HOUSE SEWERS & chambers	1	25.00
			ROOF LEADERS		
			AUTOMATIC WASHERS		
			DISHWASHERS		
			OTHER		
			base fee		3.00
			TOTAL		28.00

Building and Inspection Services Dept.; Plumbing Inspection

ORIGINAL To be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

DEPARTMENT OF HEALTH AND WELFARE  
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT (For systems disposing of less than 2000 gallons per day)

This is NOT a permit, this form when completed must be presented to the Local Plumbing Inspector to obtain a permit.

Page 1 of 2

Town: **Portland Peaks Island** Street, Road, etc: **Seashore Ave.** Permit No: **4685** Date: **7/22/76**

Owner of property: **Patrick Gardner; 419E. Maple Ave. Otiswawa, Towa** Size of lot: **20850** So feet:  Acres

Name & type of establishment: **Jackson & Casey Plumbing & Heating, Corp.** Is lot Zoned?  Yes  No Type of Zoning:  Residential  Commercial  Resource Protection

Name of applicant: **Jackson & Casey Plumbing & Heating, Corp.** If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:  
 Deed restriction, plat, or app. process.  
 Copy of the subdivision & soil map (B.I.).  
 Soils report from a State Agency

Applicant's address: **Island Ave. Tel. No. 766-2817** Tel. No. **515-682-5225** Owner's address: **Ottumwa, Towa** App: **Peaks Is.** Owner: **52501** zip code: **04108**

Applicant's signature: **Patrick Gardner** Date: **7/17/76** Subdivisor name: **Portland Assessors** Lot No: **85-15-11** Plan # **85**

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

The water supply for this property is:  Dig well, depth \_\_\_\_\_;  Drilled well depth \_\_\_\_\_;  Spring  Surface water  Cddy,  Course— with disinfection,  without disinfection  Public Utility, name: **P. T. T.**

**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 1		Soil Profile No 2		Soil Profile No 3		Soil Profile No 4	
	<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	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring
Organic strata	Peat 3"	Organic strata	Peat 4"	Organic strata		Organic strata		Organic strata
1st strata	Loam Very Sandy 7"	1st strata	Loam 15"	1st strata		1st strata		1st strata
2nd strata	Very Rocky Silty Loam 15"	2nd strata	Very Rocky Silty Loam 13"	2nd strata		2nd strata		2nd strata
3rd strata	Silty Sand 17"	3rd strata	Silty Sand 36+1"	3rd strata		3rd strata		3rd strata
Total Depth of observation hole	Inches 42"	Total Depth of observation hole	Inches 68"	Total Depth of observation hole		Total Depth of observation hole		Total Depth of observation hole
Max Ground water table—mottling	<input checked="" type="checkbox"/> None Evident	Max Ground water table—mottling	<input type="checkbox"/> None Evident 65"	Max Ground water table—mottling		Max Ground water table—mottling		Max Ground water table—mottling
Impervious layer, clay, etc.	<input checked="" type="checkbox"/> None Evident	Impervious layer, clay, etc.	<input checked="" type="checkbox"/> None Evident	Impervious layer, clay, etc.		Impervious layer, clay, etc.		Impervious layer, clay, etc.
Bedrock	<input type="checkbox"/> None Evident 42"	Bedrock	<input checked="" type="checkbox"/> None Evident	Bedrock		Bedrock		Bedrock
Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock
Surface slope	0%	Surface slope	5%	Surface slope		Surface slope		Surface slope
Soil Group & Condition per Table 9.1 of the Code, II	5-A	Soil Group & Condition per Table 9.1 of the Code, II	5-D	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 **12-13-75** (date), a site investigation for this project was completed. I supervised this 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 on page 2.

Signature and Registration/Certification Number: **William B. Goodwin**  
Date signed: **7-5-76**

Soil Scientist  
 Geologist  
 Soil Engineer  
 Other, must show current letter of certification to LPI

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

<b>SYSTEM:</b> <input checked="" type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe _____ See Chapter 9 of the Code, II.	<b>TREATMENT TANK:</b> <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer— Size in gallons <b>1,000 Gal</b> <input type="checkbox"/> Aerobic Tank Manufacturer— Model No Size in gallons	<b>SUBSURFACE ABSORPTION AREA</b>		<b>SITE MODIFICATION</b> Fill is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> not required Fill will be _____ inches deep <b>DETAILS</b> <input type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> is not required The Dose will be _____ gallons <b>DISTANCES</b> <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 courses (lakes, ponds, ocean, brook, stream, river); swamps, marshes and 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 or springs producing 2000 gallons or more of water per day and any public water supplies.
		Type _____ SIZE _____ <input type="checkbox"/> Trench System: Total trench length <b>NOT APPLICABLE</b> <input type="checkbox"/> Bed System <b>NOT APPLICABLE</b> Length _____ <input checked="" type="checkbox"/> Chamber System Number <b>5</b> <input type="checkbox"/> Type A <input type="checkbox"/> Single file <input checked="" type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ <b>NOT APPLICABLE</b> <input type="checkbox"/> Special System Length _____ <b>NOT APPLICABLE</b> <input type="checkbox"/> Non discharge System Length _____ <b>NOT APPLICABLE</b> Holding Tank Size _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provided, type _____		

**PROPERTY LOCATION MAP**

FOR THE USE OF LPI ONLY

Form is incomplete ( ) as to:  General info,  Investigation,  System Proposed,  Site Plan,  Disposal System Plan,  Cross-Section,  Statement,  Section 23

Site investigation indicates site is:  totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9.1 Group 9 and 10.  Unsuitable for system proposed; Sections 4.7, 4.6, 9.5, Table 9.1

System Proposed does not conform to Code. See Sections 9.

Site Investigation indicates site modifications are necessary; See Sections  4.3,  4.4,  4.6,  9.7.

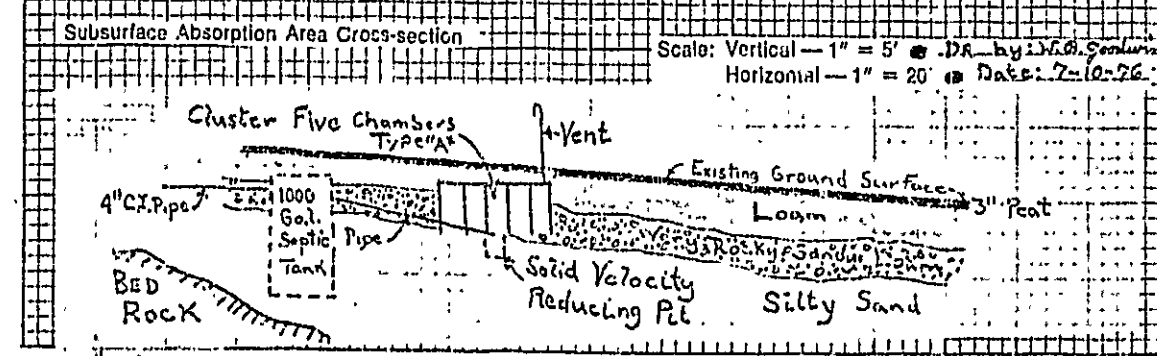
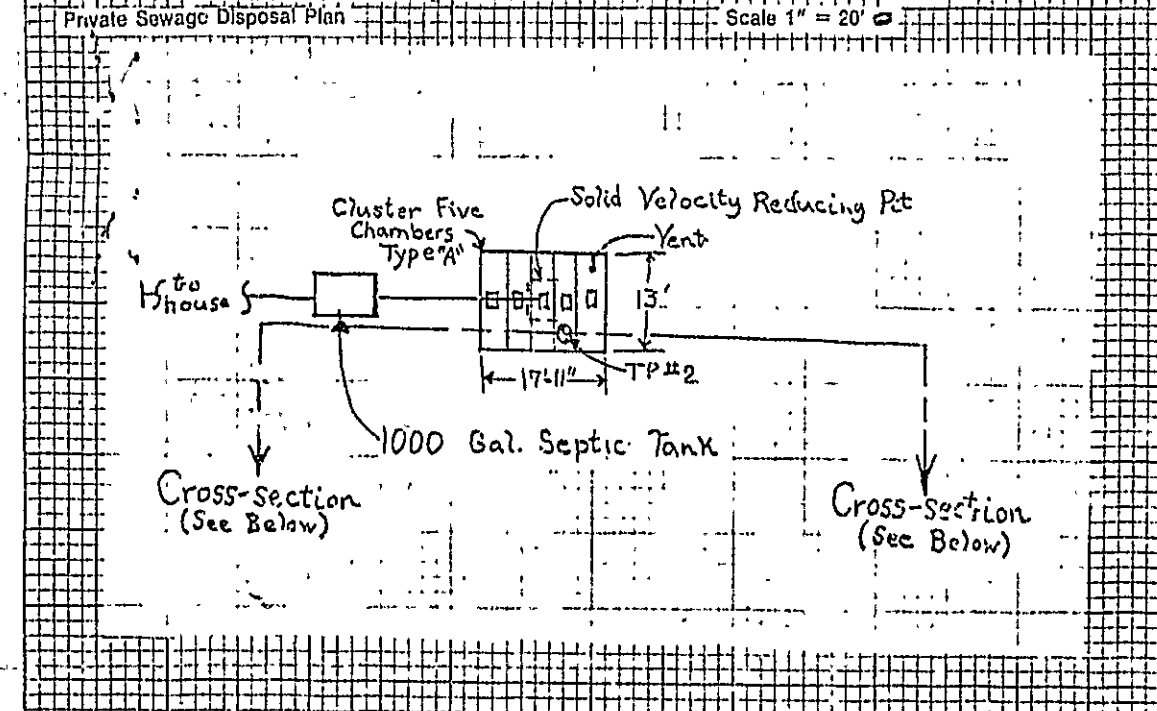
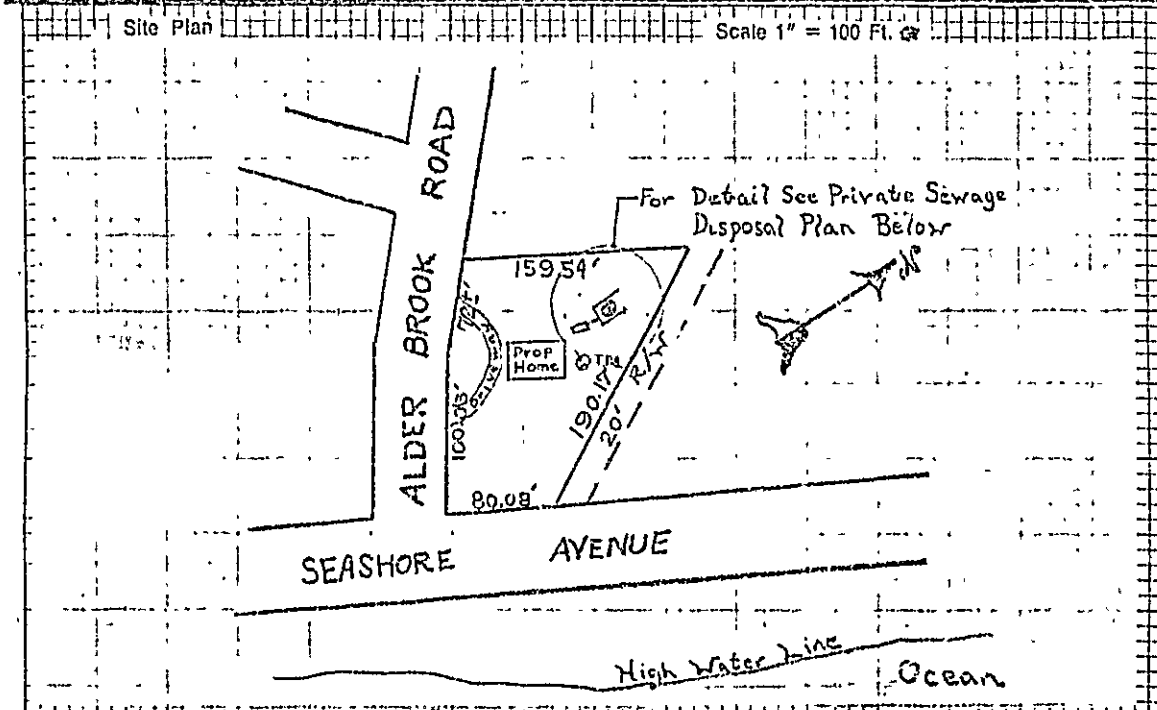
Miscellaneous: \_\_\_\_\_ See Section \_\_\_\_\_

Acceptance: Application for permit is approved  with condition specified. Comply with Section \_\_\_\_\_

Signed by: **William B. Goodwin** Date: **7/21/76** HNE-200 5/75

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

Town <u>Portland - Peaks Island</u>	Street, Road, etc. <u>Seashore Ave.</u> If on water body, give name <u>Hussy Sound</u>	Owner of property <u>Patrick Gardner</u>
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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 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 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 any advice or approval given by the Administrative Authority or its agent.

Signature Required

Date: \_\_\_\_\_

Applicant: Patrick Gardner

Owner: Patrick Gardner



# APPLICATION FOR PERMIT

**PERMIT ISSUED**

B.O.C.A. USE GROUP .....  
B.O.C.A. TYPE OF CONSTRUCTION ..... *01175*  
ZONING LOCATION ..... PORTLAND, MAINE Sept. 14, 1994

SEP 21 1994

**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 *85-11 Seashore Avenue, Peaks Island, Maine*

1. Owner's name and address *P. J. Gardner - Sandpiper Rd., Peaks Isl.* Fire District *1* #2

2. Lessee's name and address *P. O. Box 30, 4168* Telephone *766-2370*

3. Contractor's name and address *owner* Telephone .....

Proposed use of building ..... No. of sheets *1*

Last use ..... No. families .....

Material ..... No. stories ..... Heat ..... Style of roof ..... No. families .....

Other buildings on same lot ..... Roofing .....

Estimated contractual cost \$ *500.00*

FIELD INSPECTOR—Mr. .... Appeal Fee \$ .....

@ 775-5451

Base Fee .....

Late Fee .....

TOTAL \$ *15.00*

To construct foundation, 24' x 24', for 2 1/2 story air la family house, as per plan.

Stamp or Special Conditions

**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? ..... 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 ..... ceiling .....

Kind of roof ..... Rise per foot ..... Roof covering .....

No. of chimneys ..... Material of chimneys ..... Spacing ..... Kind of heat ..... rise

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

APPROVALS BY: ..... DATE ..... MISCELLANEOUS: *NO*

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

Fire Dept. .... to see that the State and City requirements pertaining thereto

Health Dept. .... are observed? *Yes*

Others: .....

Signature of Applicant *P. J. Gardner* Phone *766-2370*

Type Name of above ..... 1  2  3  4

Other and Address .....

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP ..... B.O.C.A. TYPE OF CONSTRUCTION ..... 0124 FEB 25 1985

ZONING LOCATION ..... PORTLAND, MAINE Feb. 13, 1985

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:

- 1. LOCATION ..... 85+M-11, Seaside Ave. Seaside Island ..... Fire District #1 [ ] #2 [ ]
2. Owner's name and address ..... P. J. Gardner, Sandpaper Bldg, P.O. Box 131 Telephone ... 766-2379
3. Lessee's name and address ..... P. O. Box 38 04108 Telephone .....
3. Contractor's name and address ..... Owner ..... Telephone .....

Proposed use of building ..... Dwelling - year round ..... No. of sheets .....
Last use ..... No. families .....
Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....
Other buildings on same lot .....
Estimated contractual cost \$ ..... 30,000. Appeal Fees \$ .....

FIELD INSPECTOR - Mr. @ 775-5451 Base Fee ..... 150.00.
Late Fee .....
TOTAL \$ ..... 150.00.

To construct 24' x 24' single family dwelling with overhang of 1' on each side of dwelling as per plans. 4 sheets of plans, foundation applied for and issued on another permit send permit to # 1 04108 Stamp of Special Conditions

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? ... yes. Is any electrical work involved in this work? ... yes.
Is connection to be made to public sewer? ... no. If not, what is proposed for sewage? ... existing septic
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 spar 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 ..... Patrick J. Gardner Phone # ..... same
Type Name of above ..... 1 [ ] 2 [ ] 3 [ ] 4 [ ]
Other ..... and Address .....



# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-5326

**PROPERTY ADDRESS**

Town Or Plantation: PEARL ISLAND  
 Street: 85 M. 11 SEASHORE  
 Subdivision/Lot #

**PROPERTY OWNERS NAME**

Last: ADDER First: PATRICK  
 Applicant Name: DICARLO  
 Mailing Address of Owner/Applicant (if Different): Box 28 Pearl Is.

PORTLAND PERMIT # 1,432 TOWN COPY

12/1/85 \$            FEE  Count In Fee  
 Local Plumbing Inspector Signature: [Signature] L.P.I. #           

**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: 12/1/85

**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: [Signature] Date Approved: JUL 31 1986

**PERMIT INFORMATION**

This Application is for:

- NEW PLUMBING
- RELOCATED PLUMBING

Type Of Structure To Be Served:

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

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D. HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE #           

FEB 25 1985

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type Of Fixture	Number	Column 1 Type Of Fixture
2	HOOK UP: to public sewer in those cases where the connection is not required and inspected by the local Regulatory District.	2	Hosebib / Sillcock	1	Bathtub (and Shower)
			Floor Drain		Shower (Separate)
			Urinal		Sink
	HOOK UP: to an existing subsurface water disposal system.		Drinking Fountain	2	Wash Basin
			Indirect Waste	2	Water Closet (Toilet)
			Water Treatment Softener, Filter, etc.	1	Clothes Washer
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Grease/Oil Separator		Dish Washer
			Dental Cuspliner		Garbage Disposal
			Bidet		Laundry Tub
	Hook-Ups (Subtotal)		Other	1	Water Heater
	Hook-Up Fee	2	Fixtures (Subtotal) Column 1	11	Fixtures (Subtotal) Column 1
			Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 2
			Total Fixtures	13	Total Fixtures

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

\$             
 \$ 3.34



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION: 85-N-11 Seashore Avenue, PI

Issued to P. J. Gardner

Date of Issue May 12, 1987

This is to certify that the building, premises, or part thereof, at the above location, built—altered—  
—changed as to use under Building Permit No. 87/1175, has had final inspection, has been found to conform  
substantially to requirements of Zoning Ordinance 67/124 Building Code of the City, and is hereby approved for  
occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY  
1 family dwelling

Entire building

Limiting Conditions:

This certificate supersedes  
certificate issued

Approved:

5-11-87 *Stephen Caldwell*  
(Date) Inspector

*[Signature]*  
Inspector of Building

Notice: This certificate certifies lawful use of building or premises, and ought to be transferred from  
owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

9-10-84

DEAR MR. WARD

HERE IS A STAMPED DRAW'G BY  
TED RAND SHOWING SHORE LINE  
OF PEAKS IS. ALSO I HAVE MADE  
A TRACING OF THE AREA IN QUESTION  
SHOWING MY PROPOSED HOUSE SITE  
250' FROM THE SHORE, PLEASE  
RETURN THE DRAW'G OF TED RAND  
WITH MY PERMIT.

THANK YOU

PJT. GARDNER

BOX 38

SANDPIPER RD

PEAKS IS ME

04108

766-2370

85-M-

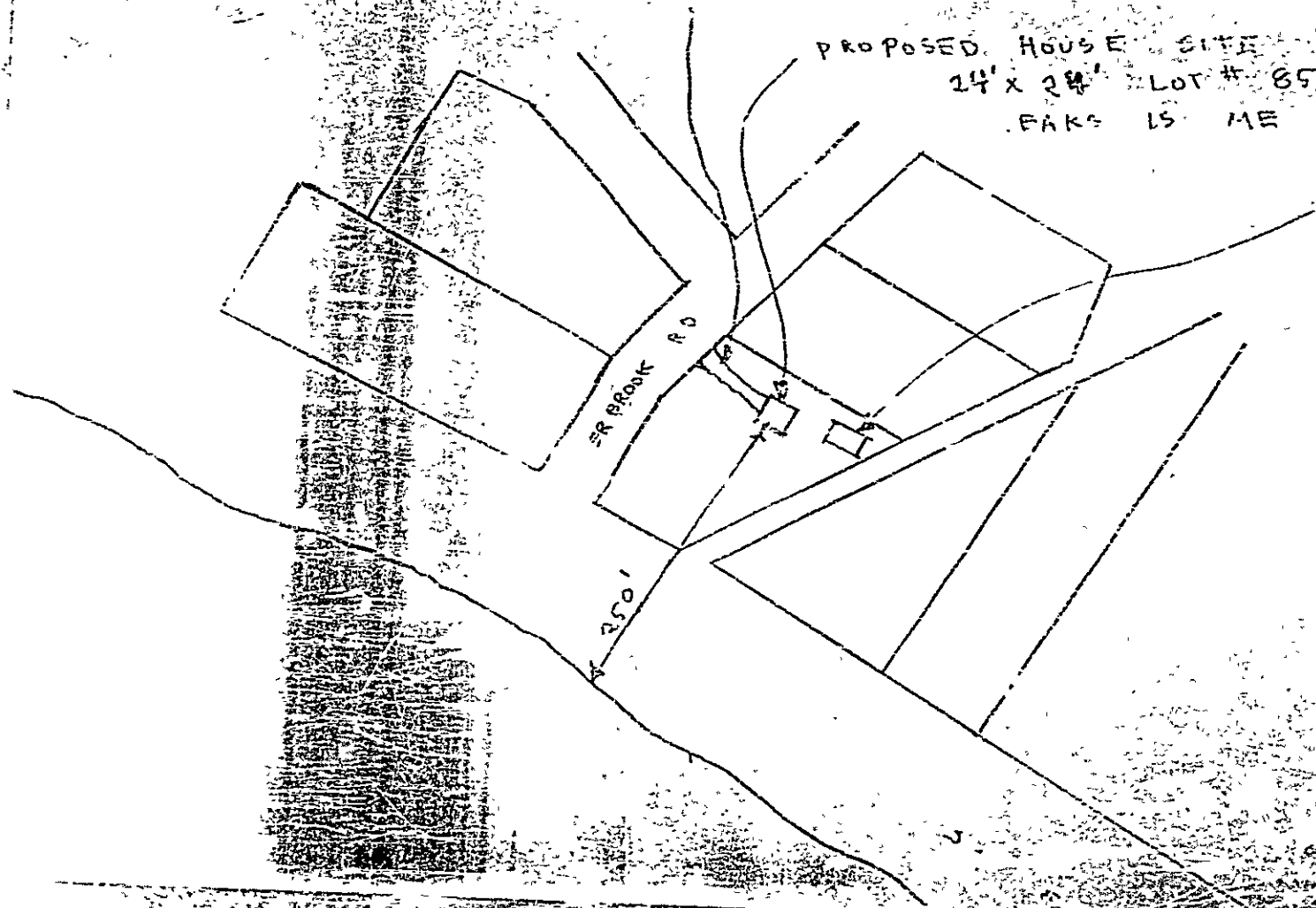
Sorghum Ave.

ACCESS ROAD TO HOUSE

PROPOSED HOUSE SITE  
24' x 24' LOT # 85-M-11  
BAKS IS ME

EXISTING SEPTIC SYSTEM  
INSTALLED AND  
INSPECTED OCT. 1971

FOOT PATIO TO  
TUBES 18' ON CE



Applicant: Patrick J. Gardner

Date: Feb. 21, 1985

Address: Seashore Ave.

Assessors No.: 85--M-11

CHECK LIST AGAINST ZONING ORDINANCE

Date -

Zone Location - R-3 Residence

Interior or corner lot - Corner lot

Use - Year-round dwelling (single family)

Sewage Disposal - septic system

Rear Yards - 0'

Side Yards - 40' & 80'

Front Yards - 80'

Projections -

Height - 3 story

Lot Area - 20,850 sq. ft.

Building Area - 900 sq. ft.

Area per Family - 6500 sq. ft. (sewered) 20,000 sq. ft. (septic)

Width of Lot - 100'

Lot Frontage - 80' on Seashore 172' on Alder Brook Road

Off-street Parking -

Loading Bays -

Site Plan -

Shoreland Zoning -

Flood Plains -

Has existing septic system  
been approved by the  
Plumbing Inspector?

N.J.T.

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP .....
B.O.C.A. TYPE OF CONSTRUCTION ..... 0117

SEP 21 1984

ZONING LOCATION ..... PORTLAND, MAINE Sept. 14, 1984

CITY OF PORTLAND

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

The undersigned hereby applies for a permit to erect, alter, repair, demolish 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-11 Seashore Avenue, Peaks Island, Maine ..... Fire District #.  #1  #2

1. Owner's name and address P. J. Gardner - Sandpiper Rd., Peaks Isl. Telephone 766-2370
2. Lessee's name and address P. O. Box 38 04108 Telephone
3. Contractor's name and address OWNER Telephone

Proposed use of building ..... No. of sheets 1
Last use ..... No. families

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing

Other buildings on same lot
Estimated contractual cost \$ 500.00 Appeal Fees \$ 5
Base Fee
Late Fee

FIELD INSPECTOR—Mr. @ 775-5451 TOTAL \$ 15.00

To construct foundation, 24' x 24', for 2 1/2 story single family house, as per plan.

Stamp of Special Conditions

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? 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 Soil or filled land?
Material of foundation Thickness, top bottom
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 MISCELLANEOUS
BUILDING INSPECTION—PLAN EXAMINER Will work require disturbing of any tree on a public street? no
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? yes
Fire Dept.:
Health Dept.:
Others:

Signature of Applicant P. J. Gardner Phone #
Type Name of above P. J. Gardner 65 2 3 4
Other and Address

NOTES

10-11-89. *Sana Tulu*  
*set OK.* *ca*

[Blank lined area for notes]

[Blank lined area for notes]

[Blank lined area for notes]

Permit No *8V-1175*

Location *85-11-11-11* *Shaker*

Owner *Q J Jachin*

Date of permit *9-14-89*

Approved *9-21-89*

Dwelling *Foundation*

Grade

Alteration

PERMIT ISSUED

APPLICATION FOR PERMIT

FEB 25 1985

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION ..... 0-124 .....

ZONING LOCATION ..... R-3 ..... PORTLAND, MAINE ... Feb. 11, 1985

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 ..... 85-M-11 Seashore Avenue, Peaks Island ..... Fire District #1 , #2 
1. Owner's name and address P. J. Gardner, Sandpiper Rd., Peaks Island Telephone ... 766-2370
2. Lessee's name and address ..... P. O. Box 38 04108 Telephone .....
3. Contractor's name and address ..... Owner ..... Telephone .....

Proposed use of building ..... dwelling - year round ..... No. of sheets .....
Last use ..... No. families ..... 1 .....

Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....
Other buildings on same lot .....

Estimated contractual cost \$ 30,000 .....

FIELD INSPECTOR - Mr. ..... @ 775-5451

Appeal Fees \$ .....
Base Fee ..... 150.00 ..
Late Fee .....
TOTAL \$ ..... 150.00 ..

To construct 24' x 24' single family dwelling with overhang of 1' on each side of dwelling as per plans. 4 sheets of plans, foundation applied for and issued on another permit.

Stamp of Special Conditions

send permit to # 1 04108

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

DETAILS OF NEW WORK

Is any electrical work involved in this work? yes
Is any plumbing work involved in this work? yes
Is any mechanical work involved in this work? yes
Is any work to be made to public sewer? no
If not, what is proposed for sewage? existing septic
Form notice sent?
Height average grade to highest point of roof
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 or masonry 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? .....

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? .....

APPROVALS BY: DATE
BUILDING INSPECTION - PLAN EXAMINER
ZONING:
BUILDING CODE:
Fire Dept.
Health Dept.
Other:
Signature of Applicant: Patrick J. Gardner
Name of above: Patrick J. Gardner
Phone #:
Other and Address:
FIELD INSPECTOR'S COPY
APPLICANT'S COPY
OFFICE FILE COPY

Handwritten signature: D. M. Edlato



NOTES

3-1-85 - Site OK. Battery  
 garden, floor joists in  
 OK. Other OK on weather  
 permit. *aa*

6-25-85 - Frame OK  
 Blocking, Banding  
 (beams) wind, OK  
 Finish Stages. *aa*

7-19-85 - Frame  
 OK. To sheet. *aa*

8-13-85 - Closing  
 in Part OK. Final  
 OK. *aa*

8-23-85 - Roof  
 trusses OK. Closed  
 in. *aa*

10-18-85 - Checked  
 OK. *aa*

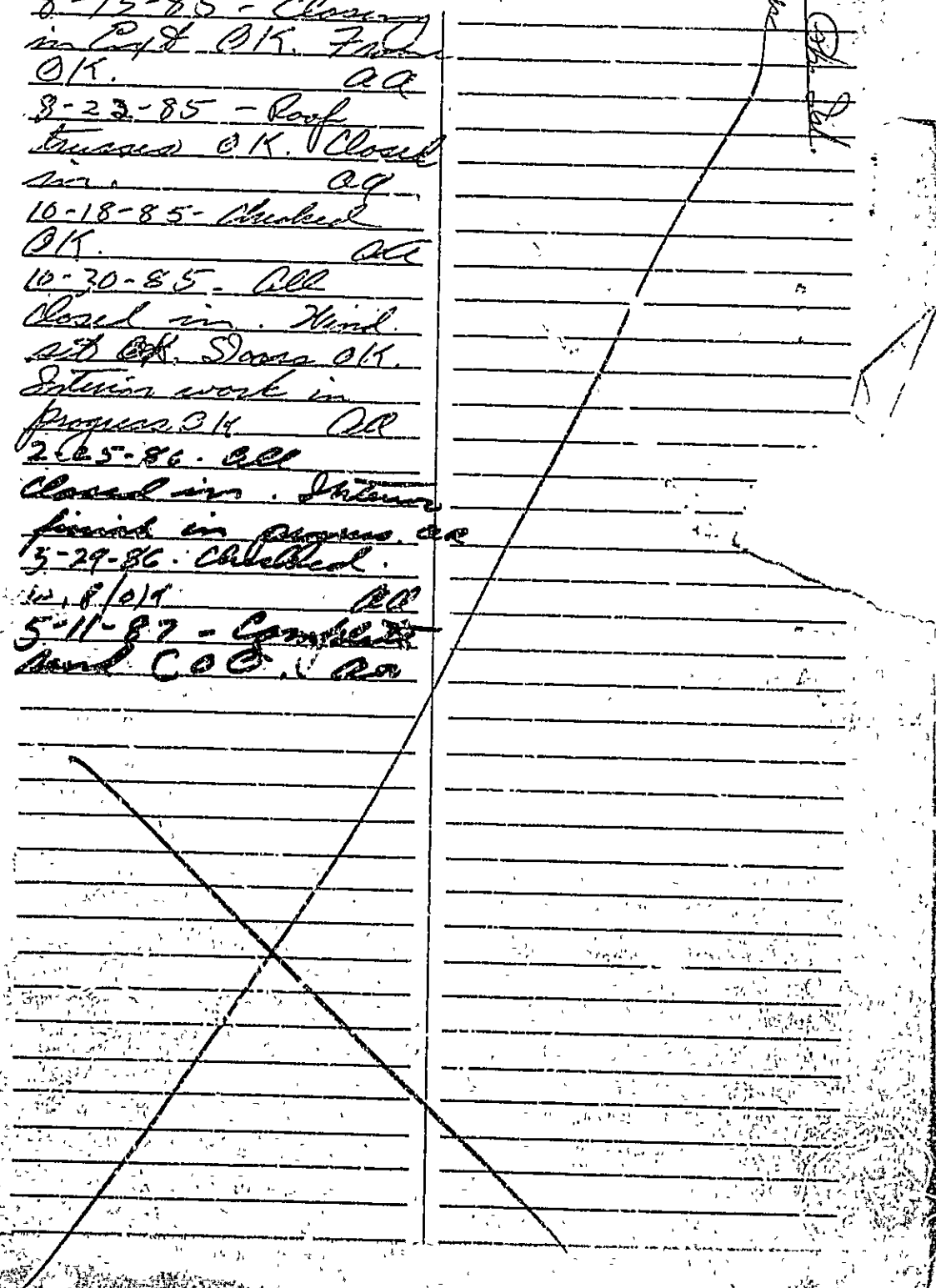
10-30-85 - All  
 closed in. Wind  
 set OK. Doors OK.  
 Interior work in  
 progress OK. *aa*

2-25-86 - all  
 closed in. Interior  
 finish in progress. *aa*

3-29-86 - Checked.  
 in. 8/0/1. *aa*

5-11-87 - Complete  
 final COC. *aa*

Permit No. 85/121  
 Location 85 N-11 Parkway Lane Okla. Pal.  
 Owner *Catfish Landers*  
 Date of permit 2-11-85  
 Approved 2-25-85  
 Dwelling - Single Family  
 Garage  
 Alteration





**APPLICATION FOR PERMIT**  
 DEPARTMENT OF BUILDING INSPECTION SERVICES  
 ELECTRICAL INSTALLATIONS

Date Dec. 4, 19 85  
 Receipt and Permit number D 05294

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-M-11 Seashore Ave. Peaks Isl.  
 OWNER'S NAME: Patrick Gardner ADDRESS: Box 38 Pks Isl.

	FEES
OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>65</u>	5.50
FIXTURES: (number of) Incandescent _____ Fluorescent <u>2</u> (not strip) TOTAL <u>1-10</u>	3.00
Strip Fluorescent _____ ft. _____	
SERVICES: Overhead <u>xx</u> Underground _____ 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) <u>2x 8</u>	8.00
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 _____ 1 _____ Cook Tops _____ Wall Ovens _____ Dryers _____ 1 _____ Fans _____	4.50
Water Heaters _____ 1 _____ Disposals _____ Dishwashers _____ Compactors _____ Others (denote) _____	
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 _____	1.00
Circus, Fairs, etc. _____ Alterations to wires _____ Repairs after fire _____ Emergency Lights, battery _____ Emergency Generators _____	

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... INSTALLATION FEE DUE:  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) ..... DOUBLE FEE DUE:  
 SERVICE IS BEING INSTALLED BY 5 TOTAL AMOUNT DUE: 25.50  
 INSPECTION: JOE HAYES 08268 REE \* Box 302 GORHAM

Will be ready on \_\_\_\_\_, 19 \_\_\_\_; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: REST OF WORK IS BEING DONE BY MR. GARDNER  
 ADDRESS: Box 38, Pks Isl.  
 TEL: 765-2370  
 MASTER LICENSE NO. \_\_\_\_\_  
 LIMITED LICENSE NO. \_\_\_\_\_  
 SIGNATURE OF CONTRACTOR: [Signature]

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

ELECTRICAL INSTALLATIONS

Permit Number 05294

Location 85-M-11 Seabrook

Owner G. Gardner

Date of Permit 12-11-85

Final Inspection [Signature]

By Inspector [Signature]

Permit Application Register Page No. 95

INSPECTIONS: Service ✓ by Libby  
Service called in OK  
Closing-in 2-25-86 by Libby

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE:	REMARKS:
<u>6/19/86</u>	<u>Completed -</u>

[Signature]  
[Signature]

CODE COMPLIANCE FILED  
6/19/86