

PLEASANT AVENUE PEAKS ISLAND
87-K-3



(A) APARTMENT HOUSE ZONE

APPLICATION FOR PERMIT

Class of Building or Type of Structure Third Class

Portland, Maine, May 22, 1947

PERMIT 1950
01107
MAY 23 1947

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

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

Location Pleasant Avenue, Peaks Island Within Fire Limits? No Dist. No. _____
 Owner's name and address Mrs. Cecil Campbell, Pleasant Avenue (or Spruce St.) Portland Telephone _____
 Lessee's name and address _____ Telephone _____
 Contractor's name and address G. E. Jordan, Pleasant Ave., Peaks Island Telephone 144-2
 Architect _____ Specifications _____ Plans _____ No. of sheets _____
 Proposed use of building Cottage _____ No. families _____
 Last use Cottage _____ No. families _____
 Material Wood No. stories 1 Heat Stove Style of roof Pitch Roofing Asphalt
 Other buildings on same lot None _____
 Estimated cost \$ 75 Fee \$.50

INSPECTION NOT COMPLETED General Description of New Work

87-K-3
 with roof
 Demolish existing front porch/11x24 to the sills and re-build same size making the new roof flatter to secure better head room for entrance
 Present foundation and sills will remain.
 New 4x6 plate on approximate ~~4x~~ 8' span to carry new piazza roof.
 To straighten out two sheathed partitions first floor now on an angle.

4.5 x 8 x 4.5 = 1620
 4 x 6 on 8' span = 1752
 2 x 4 on 9' span = 290
 9 x 1.83 x 4.5 = 741
 9 x 1.83 x 30 = 494

Permit Issued with Memo

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation _____ Thickness, top _____ bottom _____ cellar _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys _____ Material of chimney _____ of lining _____ Kind of heat _____ fuel _____
 Framing lumber—Kind _____ Dressed or full size? _____
 Corner posts 4x4 Sills _____ Girt or ledger board? _____ Size _____
 Girders _____ Size _____ 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 2x4
 On centers: 1st floor _____, 2nd _____, 3rd _____, roof 22"
 Maximum span: 1st floor _____, 2nd _____, 3rd _____, roof 9'
 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? _____

APPROVAL

Miscellaneous

Will work require disturbing of any tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

G. E. Jordan
 N.Y.

INSPECTION COPY

Signature of owner Mrs. Cecil Campbell By _____



RECEIVED
 MAY 28 1917
 DEPT. OF BLD'G INSP.
 CITY OF PORTLAND

Carel Campbell 516 Portland
 Street Portland, Me

Memorandum from Department of Building Inspection, Portland, Maine
Pleasant Avenue, Peaks Island (Mrs. Cecil Campbell)—Alterations to cottage for
Mrs. Cecil Campbell by G. C. Jordan, contractor—5/23/47
To Contractor & Owner:

This permit has to be issued relying upon the fact that the contractor is responsible for compliance with the requirements of the Building Code in detail irrespective of the information or lack of information given on the application for the permit, because the description of the work on the application is of little value in determining in advance of issuance of the permit whether or not the details as planned would comply with the Building Code.

No information is given as to the adequacy of the existing foundation and sills, on the basis I presume that no change is to be made in them, but I recommend to the owner that both sills and foundations be thoroughly examined as well as first floor framing to see if it may not be good economy to make repairs or strengthen now while the superstructure of the piazza is removed. I take it from the description on the application that the present first floor framing is also to remain since no information is given as to the framing of any new floor. I understand also that both present and proposed piazzas are open without enclosure.

Nothing is given about the steepness of the new roof except the statement that the new roof will be flatter than the existing one. In any case, however, the 2x4 rafters shown 22" from center to center and on spans of 9' are not strong enough. If the pitch of the new roof is 5" or more to the foot horizontal, 2x4's set with the 4-inch dimension upright would satisfy the requirements but only if they were not more than 12" from center to center. Otherwise, 2x6's should be used but they could be 24" from center to center.

The 4x6 plate will, of course, be set with the 6-inch dimension upright.

Perhaps if we had more details to give the correct picture of what is proposed, we could be of more service, but it seems best to issue the permit on this basis relying on the fact that the contractor is bound to comply with the Building Code anyway and if this memorandum reflects misunderstanding of the situation that he will take the matter up further before proceeding and give us enough information to work on. For instance, judging merely from the information on the application, it appears that both existing and proposed piazza have the dimensions of 11 x 24, and proposed piazza to have 4x4 posts spaced 3' from center to center along the 24-foot dimension, thus indicating that the rafters will run the 11-foot way, but the span of the rafters is given as only 9'. No doubt there is a good explanation—(Signed) Warren McDonald
CC: Mrs. Cecil Campbell, Pleasant Ave., Peaks Island
Inspector of Buildings



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

PERMIT ISSUED

01174
MAY 29 1947

Class of Building or Type of Structure Third Class
Portland, Maine, May 28, 1947

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

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

Location Pleasant Avenue, Peaks Island Within Fire Limits? no Dist. No. _____
 Owner's name and address Cecil Campbell, Pleasant Ave., Peak Island Telephone _____
 Lessee's name and address former owner Albert Marr Telephone _____
 Contractor's name and address George Keening, Willow St., Peaks Island Telephone no
 Architect _____ Specifications _____ Plans no No of sheets _____
 Proposed use of building Cottage No. families _____
 Last use _____ No. families _____
 Material frame No. stories 1 1/2 Heat _____ Style of roof pitch Roofing _____
 Other buildings on same lot _____ Fee \$ 50
 Estimated cost \$ 75

General Description of New Work

To demolish existing outside chimney and construct chimney inside.

87-K-3

INSPECTION NOT COMPLETE

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor.

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____
 Height average grade to top of plate _____ Height average grade to highest point of roof _____
 Size, front _____ depth _____ No. stories _____ solid or filled land? _____ earth or rock? _____
 Material of foundation concrete ledge _____ Thickness, top _____ bottom _____ cellar _____
 Material of underpinning _____ Height _____ Thickness _____
 Kind of roof _____ Rise per foot _____ Roof covering _____
 No. of chimneys 1 Material of chimneys brick lining tile Kind of heat stove fuel _____
 Framing lumber—Kind _____ Dressed or full size? _____
 Corner posts _____ Sills _____ Girt or ledger board? _____ Size _____
 Girders _____ Size _____ 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? _____

Miscellaneous

Will work require disturbing of any tree on a public street? no
 Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Mrs. Cecil Campbell

APPROVED:

Signature of owner

By:

George Keening

INSPECTION COPY

Permit No. 47/1171
Location Pleasant Ave. Peaks Id.
Owner Cecil Campbell
Date of permit 5/29/47
Notif. closing-in _____
Inspn. closing-in _____
Final Notif. _____
Final Inspn. _____
Cert. of Occupancy issued _____

NOTES

INSPECTION NOT COMPLETED

023966

Permit # 023966 City of Portland BUILDING PERMIT APPLICATION Fee \$30 Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form. 774-6121

Owner: Thomas F. Haskell Phone # 682x2737x

Address: RT1-Box 1525; Sebago Lake, ME 04075

LOCATION OF CONSTRUCTION Pleasant Ave- Peaks Island

Contractor: Steve Sanborn Sub: 87-K-3

Address: _____ Phone # _____

Est. Construction Cost: 2000 Proposed Use: 1-fam w repairs

_____ Past Use: 1-fam

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion repair foundation - structural

For Official Use Only

Date 7/29/92 Subdivision _____ Name AUG - 4 1992

Inside Fire Limits _____ Lot _____

Dldg Co. _____ Ownership: Public Private

Time Limit _____ Estimated Cost 2000

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____

Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other WDA 8-3-92

Foundation:

- Type of Soil: _____
- Set Backs - Front _____ Rear _____ Side(s) _____
- Footings Size: _____
- Foundation Size: _____
- Other _____

Floor:

- Sills Size: _____ Sills must be anchored.
- Girder Size: _____
- Lally Column Spacing: _____ Size: _____
- Joists Size: _____ Spacing 16" O.C.
- Bridging Type: _____ Size: _____
- Floor Sheathing Type: _____ Size: _____
- Other Material: _____

Exterior Walls:

- Studding Size _____ Spacing _____
- No. windows _____
- No. Doors _____
- Header Sizes _____ Span(s) _____
- Bracing: Yes _____ No _____
- Corner Posts Size _____
- Insulation Type _____ Size _____
- Sheathing Type _____ Size _____
- Siding Type _____ Weather Exposure _____
- Masonry Materials _____
- Metal Materials _____

Interior Walls:

- Studding Size _____ Spacing _____
- Header Sizes _____ Span(s) _____
- Wall Covering Type _____
- Fire Wall if required _____
- Other Materials _____

Ceiling:

- Ceiling Joists Size: _____ Not in District nor Landmark
- Ceiling Strapping Size _____ Spacing _____ Does not require review
- Type Ceilings: _____ Requires Review
- Insulation Type _____ Size _____
- Ceiling Height: _____

Roof:

- Truss or Rafter Size _____ Span _____ Action: Approved
- Sheathing Type _____ Size _____ Approved with conditions
- Roof Covering Type _____

Chimneys:

Type: _____ Number of Fire Places _____ Date: 7-29-92 Signature: _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

- Approval of soil test if required Yes _____ No _____
- No. of Tubs or Showers _____
- No. of Flushes _____
- No. of Lavatories _____
- No. of Other Fixtures _____

Swimming Pools:

- Type: _____
- Pool Size: _____ x _____ Square Footage _____
- Must conform to National Electrical Code and State Law.

Permit Received By Louise F. Chase

Signature of Applicant Thomas F. Haskell Date 7-29-92

CEO's District 6

CONTINUED TO REVERSE SIDE 17 MA. ROAD.

Ivory Tag - CEO

White - Tax Assessor

930558

87-K-3

Permit # 930558 City of Portland BUILDING PERMIT APPLICATION Fee \$70 Zone Map # Lot #

Please fill out any part which applies to job. Proper plans must accompany form.
Owner: Thomas F. Haskell Phone # 774-6121 642-2737
Address: RT1 Box 1525 Sebago Lake, ME 04075
LOCATION OF CONSTRUCTION 40 Pleasant Ave- Peaks Island
Contractor: owner Sub:
Address: Phone #
Est. Construction Cost: \$2400 Proposed Use: 1-fam w deck
Past Use: 1-fam
of Existing Res. Units # of New Res. Units
Building Dimensions L W Total Sq. Ft.
Stories: # Bedrooms Lot Size:
Is Proposed Use: Seasonal Condominium Conversion
Explain Conversion construct deck - 5'x12' & extr renovations

PERMIT ISSUED
For Official Use Only
Date: 6/28/93 Subdiv. #
Inside Fh. Limits Name
Bldg Code: Lot
Time Limit: Ownership
Estimated Cost: 2400 CITY OF PORTLAND

Zoning: 87 K 3
Street Frontage Provided:
Provided Setbacks: Front Back Side Side
Review Required:
Zoning Board Approval: Yes No Date:
Planning Board Approval: Yes No Date:
Conditional Use: Variance Site Plan Subdivision
Shoreland Zoning Yes No Floodplain Yes No
Special Exception
Other (Explain)

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

Ceiling:
1. Ceiling Joists Size: Not in District nor Landmark
2. Ceiling Strapping Size Spacing Does not require review
3. Type Ceilings:
4. Insulation Type Size Requires Review
5. Ceiling Height: *****

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

Roof:
1. Truss or Rafter Size Span Action: Approved.
2. Sheathing Type Size Approved with Conditions
3. Roof Covering Type:
Chimneys:
Type: Number of Fire Places Signature:

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

Heating: Type of Heat:
Electrical: Service Entrance Size: Smoke Detector Required Yes No
Plumbing:
1. Approval of soil test if required Yes No
2. No. of Tubs or Showers
3. No. of Flushes
4. No. of Lavatories
5. No. of Other Fixtures
Swimming Pools:
1. Type:
2. Pool Size: x Square Footage
3. Must conform to National Electrical Code and State Law.

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

Permit Received By Louise E. Chase
Signature of Applicant Thomas F. Haskell Date 6/28/93
Signature of CEO Thomas F. Haskell Date
Inspection Dates

PLUMBING APPLICATION

PROPERTY ADDRESS:
 Town Or Plantation: Peaks Island
 Street Subdivision Lot #: 40 Pleasant Av.

PROPERTY OWNERS' NAME:
 Last: Haskell First: Tom
 Applicant Name: A.C.B. Plumbing
 Mailing Address of Owner/Applicant (If Different): 7 Fernand Rd. Freeport Me 04932

MISC 6

Department of Human Services
 Division of Health Engineering
 (207) 289-3828

PORTLAND
 Date Permit Issued: 6-29-93
 4812 TOWN COPY
 License # 1201 FEE Charge
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 0124

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: Alan C. Haskell
 Date: 6-29-93

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: Arthur Youve
 Date Approved: 7-28-93

PERMIT INFORMATION

This Application is for:
 1. NEW PLUMBING
 2. RELOCATED PLUMBING

Type Of Structure To Be Served:
 1. SINGLE FAMILY DWELLING
 2. MODULAR OR MOBILE HOME
 3. MULTIPLE FAMILY DWELLING
 4. OTHER - SPECIFY _____

Plumbing To Be Installed By:
 1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER/MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER

LICENSE # 1201

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR <input type="checkbox"/> HOOK-UP to an existing subsurface wastewater disposal system. <input type="checkbox"/> PIPING RELOCATION of sanitary lines, drains, and piping without new fixtures	1	Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other		Water Heater
Number of Hook-Ups & Relocations	Fixtures (Subtotal) Column 2		5	Fixtures (Subtotal) Column 1
Hook-Ups & Relocation Fee			1	Fixtures (Subtotal) Column 2
			6	Total Fixtures
			\$2400.	Fixture Fee
			\$600.	Hook-Up & Relocation Fee
			\$3000.	Total

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

#30-

87-K-3

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 889-3326

PROPERTY ADDRESS

Town Or Plantation: PORTLAND PEAKS ISLAND

Street: PLEASANT AVENUE

Subdivision Lot #: TAXMAP 87 BLOCK K LOT 3

PROPERTY OWNERS NAME

Last: HASKELL First: THOMAS & CAROL

Applicant Name: THOMAS HASKELL

Mailing Address of Owner/Applicant (If Different): RT #1 BOX 1525 SEBAGO LAKE ME 04075

6

Caution: Permit Required

PORTLAND 4814 TOWN COPY

Date Permit Expires: 7/16/93

Local Plumbing Inspector Signature: [Signature]

Chief District: [Signature]

FEE: \$139

Double Fee Charged:

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 3/26/93

Caution: Inspection Required

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

Local Plumbing Inspector Signature: Arthur Rowe Date Approved: 7-28-93

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. NEW SYSTEM

2. REPLACEMENT SYSTEM

3. EXPANDED SYSTEM

4. SEASONAL CONVERSION

5. EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. NO RULE VARIANCE REQUIRED

2. NEW SYSTEM VARIANCE

3. REPLACEMENT SYSTEM VARIANCE

4. Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM:

1. NON-ENGINEERED SYSTEM

2. PRIMITIVE SYSTEM (Includes Alternative Toilet)

3. ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. TREATMENT TANK (ONLY)

5. HOLDING TANK

6. ALTERNATIVE TOILET (ONLY)

7. NON-ENGINEERED DISPOSAL AREA (ONLY)

8. ENGINEERED DISPOSAL AREA (ONLY)

9. SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED: _____

THE FAILING SYSTEM IS:

1. BED 2. CHAMBER 3. TRENCH 4. OTHER

DISPOSAL SYSTEM TO SERVE:

1. SINGLE FAMILY DWELLING

2. MODULAR OR MOBILE HOME

3. MULTIPLE FAMILY DWELLING

4. OTHER SPECIFY: _____

SIZE OF PROPERTY: 2775 SF **ZONING:** IR2

TYPE OF WATER SUPPLY: PUBLIC WATER

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK:

1. SEPTIC: Regular Low Profile

2. AEROBIC

S.I.E.: N/A GALS.

WATER CONSERVATION:

1. NONE

2. LOW VOLUME TOILET

3. SEPARATED LAUNDRY SYSTEM

4. ALTERNATIVE TOILET SPECIFY: _____

PUMPING:

1. NOT REQUIRED

2. MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)

3. REQUIRED DOSE: _____ GALS.

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

4 BEDROOM MODERATE 480

20%

DESIGN FLOW: 96 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES:

PROFILE: 4 CONDITION: B

DEPTH TO LIMITING FACTOR: >50

SIZE RATINGS USED FOR DESIGN PURPOSES:

1. SMALL

2. MEDIUM

3. MEDIUM-LARGE

4. LARGE

5. EXTRA LARGE

DISPOSAL AREA TYPE/SIZE:

1. BED _____ Sq. Ft.

2. CHAMBER 125* Sq. Ft. REGULAR H-20

3. TRENCH _____ Linear Ft.

4. OTHER: _____

SITE EVALUATOR STATEMENT * USED 5 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On July 12 1993 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Site Evaluator or Professional Engineer's Signature: Thomas R. Adams SE # PE # 277/4798 Date: 7/2/93

* Local Plumbing Inspector's Signature & a Local Site Evaluation Waiver under a Local Order

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

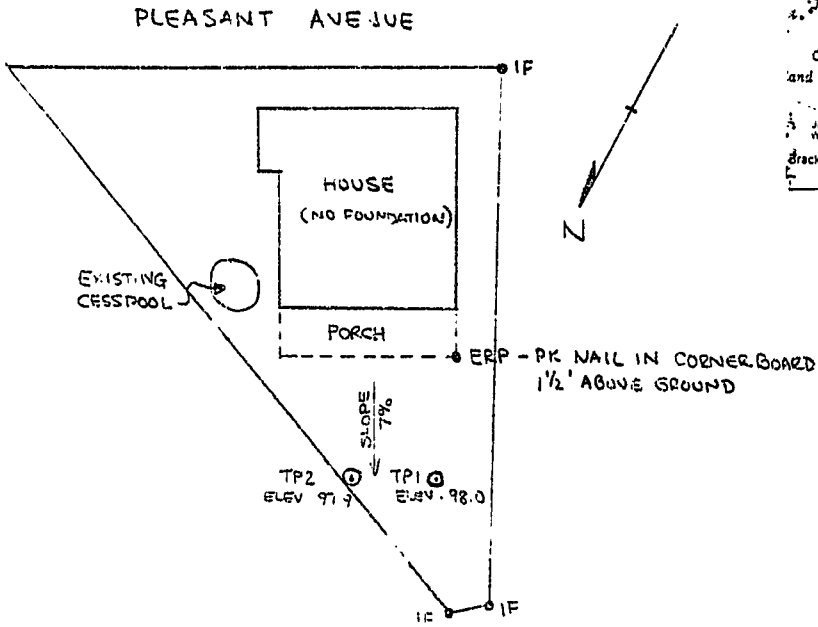
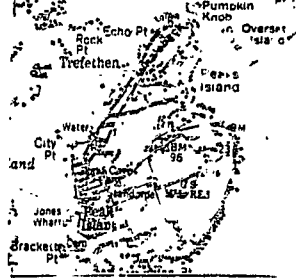
Division of Health Engineering

Town, City, Plantation: **PORTLAND PEAKS ISLAND PLEASANT AVE 87-K-3** Street, Road, Subc.v.310
 Owners Name: **THOMAS & CAROL HASKELL**

SITE PLAN

Scale 1" = 20' FL

SITE LOCATION PLAN (Attach)



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)				
Observation Hole 1		<input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		
○ Depth of Organic Horizon Above Mineral Soil				
Texture	Consistency	Color	Mottling	
LOAM	FRAGILE	BROWN		
GOBBLY LOAMY SAND	LOOSE	RED BROWN	NONE EVIDENT	
VERY GOBBLY SAND				
Soil Profile		Score	Limiting Factor	Other
4	B	750		<input type="checkbox"/> Ground Water <input type="checkbox"/> Permeable Layer <input type="checkbox"/> Barrock
Observation Hole 2		<input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		
○ Depth of Organic Horizon Above Mineral Soil				
Texture	Consistency	Color	Mottling	
LOAM	FRAGILE	BROWN		
GOBBLY LOAMY SAND	LOOSE	RED BROWN		
VERY GOBBLY SAND				
Soil Profile		Score	Limiting Factor	Other
4	B	750		<input type="checkbox"/> Ground Water <input type="checkbox"/> Permeable Layer <input type="checkbox"/> Barrock

Thomas R. Adams 277/4798 7/93

Evaluator or Professional Engineer's Signature

SE #/ PE #

Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

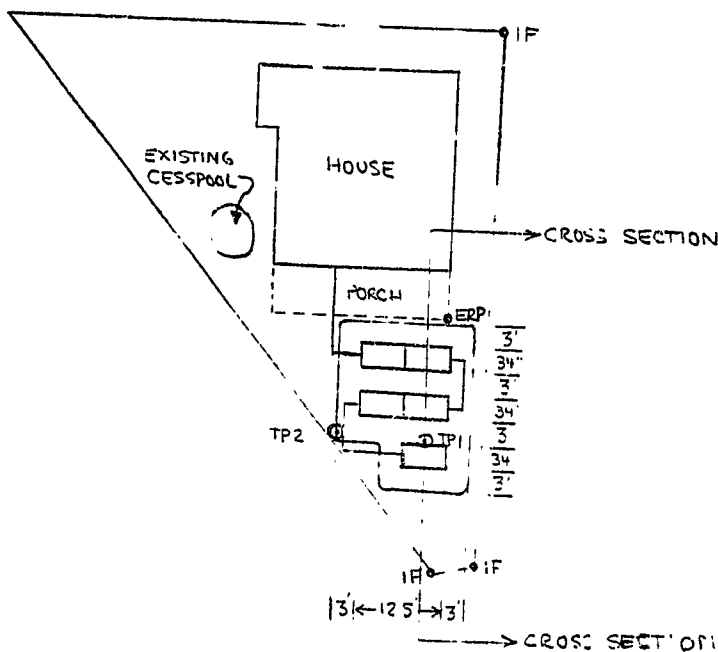
Department of Human Services
Division of Health Engineering

Town, City, Plantation: PORTLAND PEAKS ISLAND
Street, Road, Subdivision: PLEASANT AVE 27-K-3
Owners Name: THOMAS & CAROL HASKELL

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

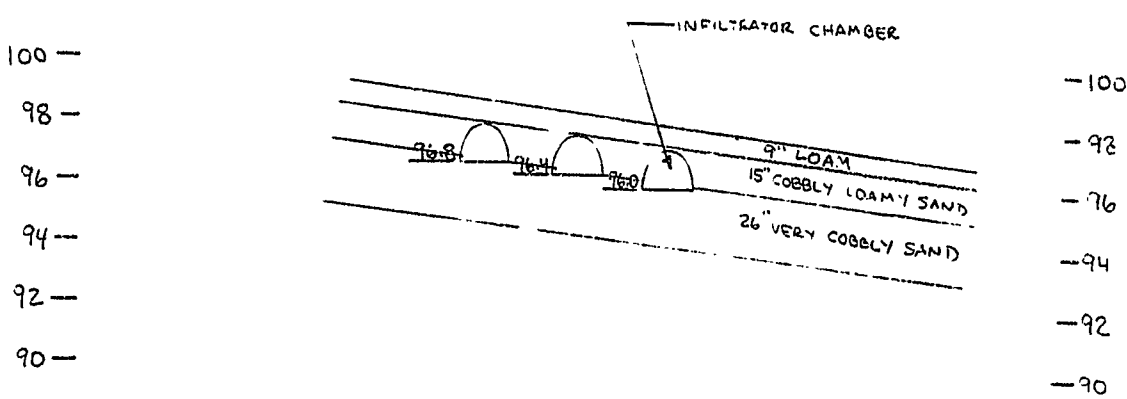
PLEASANT AVENUE



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	0	Reference Elevation is	90.00	PK NAIL IN CORNERBOARD OF COTTAGE 1/2 ABOVE GROUND	
Depth of Fill (Downslope)	0	Bottom of Disposal Area	SEE CROSS SECTION		
		Top of Distribution Lines or Chambers	" " "		

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 10 Ft.



Thomas R. Adams
Site Evaluator or Professional Engineer's Signature

277/4798
SE # / RE #

7/2/93
Date

Page 3 of 3
HHE-200 Rev 4

REPLACEMENT SYSTEM VARIANCE REQUEST

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application for the proposed replacement system which does not comply with the Rules. The LPI shall review the Replacement System Variance Request and Application and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System from the rules.
2. A system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

GENERAL INFORMATION

Permit No. _____ E Town of PORTLAND
Date Permit Issued _____ MONTH/DAY/YEAR
Property Owner's Name: THOMAS & CAROL HASKELL Tel. No. _____
System's Location: PLEASANT AVENUE STREET
PEAKS ISLAND TOWN Maine 04108 ZIP
Property Owner's Address: RT # 1 Box 1525 TOWN
(if different from above) SEBAGO LAKE STREET MAINE 04073 ZIP
TOWN STATE ZIP

SPECIFIC INSTRUCTIONS TO THE:

LPI:

If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, they you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

SITE EVALUATOR:

If after completing the Application, you find that a variance for the proposed replacement system is needed, then complete the Replacement Variance Request with your signature on reverse side of form.

PROPERTY OWNER:

It has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

The OWNER shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached Application, I understand that the proposed system is not in total compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

Thomas E. Haskell
PROPERTY OWNER'S SIGNATURE

3 July 93
DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
SOILS					
Soil Profile	Ground Water Table	to 6"		Inches	
Soil Condition	Restrictive Layer	to 6"		inches	
from HHE-200	Bedrock	to 10"		inches	
SETBACK DISTANCES (IN FEET)	FROM:	TREATMENT TANK	DISPOSAL AREA	TREATMENT TANK	DISPOSAL AREA
Potable Water Supplies	1. Well: > 2000 gal/day	100'	300'		
	2. Well: < 2000 gal/day				
	a. Neighbor's	50'	60'		
	b. Property Owner's	25'	50'		
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Perennial	50'	60'		
	2. Intermittent	15'	20'		
	3. Manmade drainage ditch	10'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With Basement	5'	10'		
	2. Without Basement	5'	10'		10'
Property Line		4'	5'		5'

OTHER

1. Fill extension Grade—to 3:1

2.

3.

Footnotes:

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the top of the fill does not extend to the 3:1 slope.

Thomas R. Adams

SITE EVALUATOR'S SIGNATURE

7/2/93

DATE

LPI STATEMENT

I, _____, LPI for the Town of _____ have conducted an on-site inspection for the proposed replacement system and have determined to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Wastewater Disposal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

a. (approve, disapprove) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant.

—OR—

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (recommend do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: _____

LPI'S SIGNATURE

DATE

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (does does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

SIGNATURE OF THE DEPARTMENT

DATE

928966

Permit # 928966 City of Portland BUILDING PERMIT APPLICATION Fee \$40 - Zone _____ Map # _____ Lot# _____

Please fill out any part which applies to job. Proper plans must accompany form. 774-6121

Owner: Thomas F. Haskell Phone # 642-2787x

Address: RT1-Box 1525; Sebago Lake, ME 04675

LOCATION OF CONSTRUCTION Pleasant Ave - Peaks Island

Contractor: Steve Sanborn Sub: 87-K-3

Address: _____ Phone # _____

Est. Construction Cost: 2000 Proposed Use: 1-fam w repairs

_____ Past Use: 1-fam

of Existing Res. Units _____ # of New Res. Units _____

Building Dimensions L _____ W _____ Total Sq. Ft. _____

Stories: _____ # Bedrooms _____ Lot Size: _____

Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____

Explain Conversion repair foundation - structural

PERMIT ISSUED

For Official Use Only

Date: 7/29/92 Subdivision: _____

Inside Fire Limits: _____

Bldg Code: _____

Time Limit: _____

Estimated Cost: 2000

Owner: _____

CITY OF PORTLAND

AUG - 4 1992

Zoning: _____

Street Frontage Provided: _____

Provided Setbacks: Front _____ Back _____ Side _____

Review Required: _____

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____

Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____

Special Exception _____

Other: (See plan)

Foundation:

1. Type of Soil: _____

2. Set Backs - Front _____ Rear _____ Side(s) _____

3. Footings Size: _____

4. Foundation Size: _____

5. Other: _____

Floor:

1. Sills Size: _____ Sills must be anchored.

2. Girder Size: _____

3. Lally Column Spacing: _____ Size: _____

4. Joists Size: _____ Spacing 16" O.C.

5. Bridging Type: _____ Size: _____

6. Floor Sheathing Type: _____ Size: _____

7. Other Material: _____

Exterior Walls:

1. Studding Size _____ Spacing _____

2. No. windows _____

3. No. Doors _____

4. Header Size _____ Span(s) _____

5. Bracing: Yes _____ No _____

6. Corner Posts Size _____

7. Insulation Type _____ Size _____

8. Sheathing Type _____ Size _____

9. Siding Type _____ Weather Exposure _____

10. Masonry Materials _____

11. Metal Materials _____

Interior Walls:

1. Studding Size _____ Spacing _____

2. Header Sizes _____ Span(s) _____

3. Wall Covering Type _____

4. Fire Wall if required _____

5. Other Materials _____

Ceiling:

1. Ceiling Joists Size: _____

2. Ceiling Strapping Size _____ Spacing _____

3. Type Ceiling: _____

4. Insulation Type _____ Size _____

5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Span _____

2. Sheathing Type _____ Size _____

3. Roof Covering Type _____

Action: Approved

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

1. Approval of soil test if required Yes _____ No _____

2. No. of Tubs or Showers _____

3. No. of Flushes _____

4. No. of Lavatories _____

5. No. of Other Fixtures _____

Swimming Pools:

1. Type: _____

2. Pool Size: _____ x _____ Square Footage _____

3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase

Signature of Applicant Thomas F. Haskell Date 7-29-92

CEO's District 6

CONTINUED TO REVERSE SIDE TE MA. ROU C.

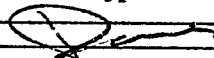
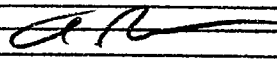
White - Tax Assessor

Ivory Tag - CEO

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 30 -
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Type	Inspection Record	Date
		6/29/94
		/ /
		/ /
		/ /
		/ /

COMMENTS

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as has authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT _____ ADDRESS _____ PHONE NO. _____

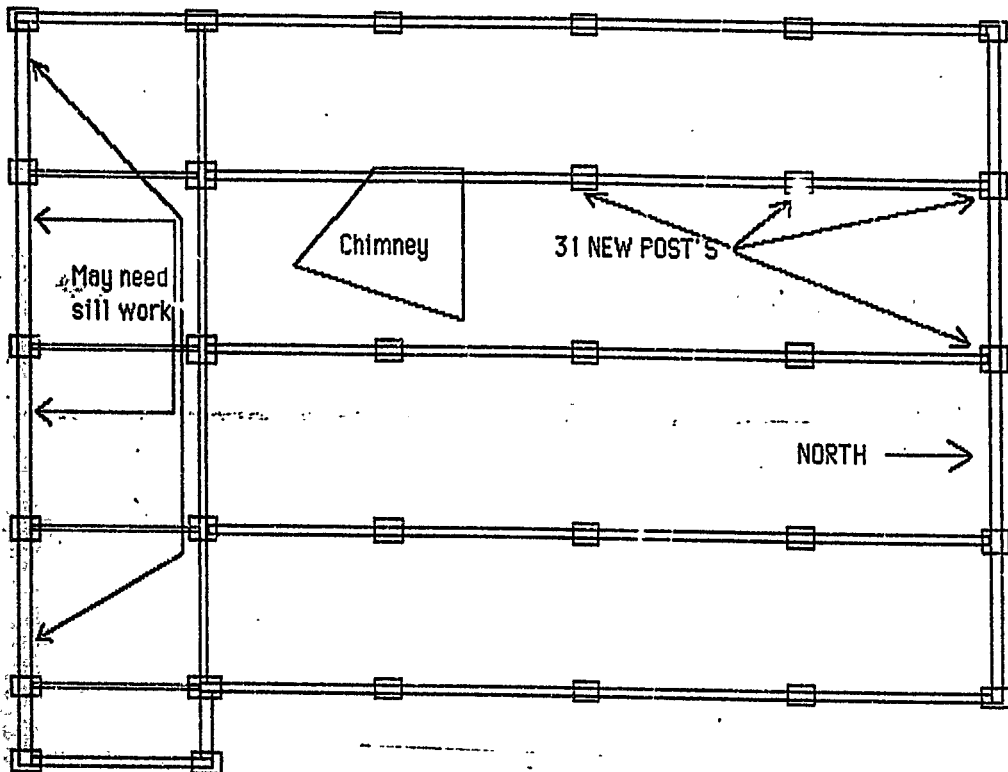
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE _____ PHONE NO. _____

SUMNER Thomas F. Haskell

MAP
87

BLK
K

LOT
3



31 NEW POST'S As shown above,

10" Sonnetubes, 4' Deep where possible,
Pinned to ledge with 1/2" re-rod
where possible. 4" x 6" Pressure treated
posts with Galv. Post anchors bolted to
concrete. 45 Deg. bracing where possible.

Alternate Plan
8" x 8" Custom made Forms, with 4" x 6" Rgh.
Hemlock Post and the rest the same as
above

7-29-92

Thomas F. Haskell

990558

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$30. Zone _____ Map # _____ Lot# _____
Please fill out any part which applies to job. Proper plans must accompany form.

Owner: Thomas E. Haskell Phone # 774-6121 642-2737
Address: RT1 Box 1525 Sebago Lake, ME 04075
LOCATION OF CONSTRUCTION 40 Pleasant Ave- Peaks Island
Contractor: owner Sub: _____
Address: _____ Phone # _____
Est. Construction Cost: \$2400 Proposed Use: 1-fam w deck
Past Use: 1-fam
of Existing Res. Units _____ # of New Res. Units _____
Building Dimensions L _____ W _____ Total Sq. Ft. _____
Stories: _____ # Bedrooms _____ Lot Size _____
Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
Explain Conversion construct deck - 5'x12' & extr renovations

PERMIT ISSUED
For Official Use Only
Date: 6/28/93 Subdivision: _____
Name: JUL 1 1993
Inside Fire Limits _____
Bldg Code _____
Time Limit _____
Estimated Cost: 2400
Ownership: _____
City of Portland

Zoning: Street Frontage Provided: _____
Provided Setbacks: Front _____ Back _____ Side _____
Review Required:
Zoning Board Approval: Yes _____ No _____ Date: _____
Planning Board Approval: Yes _____ No _____ Date: _____
Conditional Use: Variance _____ Site Plan _____ Subdivision _____
Shoreland Zoning Yes _____ No _____ Floodplain Yes _____ No _____
Special Exception _____
Other (Explain) 6-30-9 HISTORIC PRESERVATION

Foundation: 87 K 3
1. Type of Soil: _____
2. Set Backs - Front _____ Rear _____ Side(s) _____
3. Footings Size: _____
4. Foundation Size: _____
5. Other _____

Ceiling:
1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____
Action: _____ Approved.
_____ Approved with conditions.
_____ Disreg.

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

Roof:
1. Truss or Raftor Size _____
2. Sheathing Type _____
3. Roof Covering Type _____
Date: 6/28/93
Signature: [Signature]

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

Chimneys:
Type: _____ Number of Fire Places _____
Heating:
Type of Heat: _____
Electrical:
Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

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

Plumbing:
1. Approval of soil test if required Yes _____ No _____
2. No. of Tubs or Showers _____
3. No. of Flushes _____
4. No. of Lavatories _____
5. No. of Other Fixtures _____
Swimming Pools:
1. Type: _____
2. Pool Size: _____ x _____ Square Footage _____
3. Must conform to National Electrical Code and State Law.

Permit Received By Louise E. Chase
Signature of Applicant Thomas E. Haskell Date 6/28/93
Signature of CEO Thomas E. Haskell Date _____
Inspection Dates _____

PLOT PLAN



FEES (Breakdown From Front)
Base Fee \$ 30-
Subdivision Fee \$ _____
Site Plan Review Fee \$ _____
Other Fees \$ _____
(Explain) _____
Late Fee \$ _____

Complete
w/ out sur
A.

Order	Date
	6/1/84
	1/1
	1/1
	1/1
	1/1

COMMENTS

Signature of Applicant _____

Date _____