PERMIT ISSUED
MAY 24 1989
City Of Portland

APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. 1

Portland, Maine, May 19, 1989

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 89/1800 *pertaining to the building or structure comprised in the original application 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 88-92 Central Ave., Peaks Island Within Fire Limits? Dist. No.

Owner's name and address Albert Presgraves — Upper A Street, Peaks Island Telephone 766-559

Lessee's name and address Telephone

Contractor's name and address owner Telephone

Architect Plans filed No. of sheets

Proposed use of building Single Fam. No. families 1

Last use same No. families 1

Increased cost of work: $1,600.00 Additional fee $30.00

Description of Proposed Work

Change of roof line and other minor interior renovations, as per plans. 3 sheets of plans.

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 chimneys of lining

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

Approved:
T.L. OK w/ AP 5-23-89

Signature of Owner

Approved:
Inspector of Buildings

INSPECTION COPY

FILE COPY

APPLICANT'S COPY

ASSESSOR'S COPY

7 mo. Addi

PERMIT # 001309 CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Albert Presgraves and Jean Marie Yasi -774-2112

Address: 41 Park Street, Portland, Me 04101

LOCATION OF CONSTRUCTION ~~Lot #52~~ Central Ave., Peaks Island

CONTRACTOR: owner SUBCONTRACTORS: 88 K 52

ADDRESS:

Est. Construction Cost: $80,640 Type of Use: single family

Past Use:

Building Dimensions L ___ W ___ Sq. Ft. ___ # Stories: ___ Lot Size: ___

Is Proposed Use: ___ Seasonal ___ Condominium ___ Apartment ___

___ Conversion - Explain Minor, MInor site plan and to construct new. 1 set of construction plans and 2 site plans submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units ___ # Of New Dwelling Units ___

For Official Use Only

Date March 8, 1989

Inside Fire Limits

Bldg Code

Time Limit

Estimated Cost $80,640

Value/Structure

Fee $50.00 - MInor, MInor site plan

$425.00 - Building fee

Subdivision: Yes / No

Name

Lot

Block

Permit Expiration:

Ownership: ___ Public ___ Private

PERMIT ISSUED

MAR 23 1989

City Of Portland

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 ___" 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 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

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: ___ Size
2. Ceiling Strapping Size ___ Spacing
3. Type Ceilings:
4. Insulation Type
5. Ceiling Height:

Roof:

1. Truss or Rafter Size ___ Spacing
2. Sheathing Type ___ Size
3. Roof Covering Type
4. Other

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.

Zoning:

District ___ Street Frontage Req.: ___ Provided

Required 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 ___

Shore and Floodplain Mgmt. ___ Special Exception ___

Other ___ (Explain)

Date Approved

Permit Received By Nancy Grossman

Signature of Applicant Albert N Presgraves Date 3-8-89

Signature of CEO (7) aa Date

Inspection Dates

White Tax Assesor Yellow-GPCOG White Tag -CEO

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date March 3, 1989
Receipt and Permit number 00094

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: 88-K-52 Central Avenue, Peaks Island

OWNER'S NAME: Albert Pressgraves ADDRESS: same

	FEES
OUTLETS:	
Receptacles ____ Switches ____ Plugmold ____ ft. TOTAL ____	
FIXTURES: (number of)	
Incandescent ____ Floures ____ (not strip) TOTAL ____	
Strip Flourescent ____ ft.	
SERVICES:	
Overhead X Underground ____ Temporary X TOTAL amperes 100	3.00
METERS: (number of) 1	.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 ____ Water Heaters ____	
Cook Tops ____ Disposals ____	
Wall Ovens ____ Dishwashers ____	
Dryers ____ Compactors ____	
Fans ____ Others (denote) ____	
TOTAL ____	
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:	5.00 Min.

INSPECTION:

Will be ready on ____, 19__; or Will Call x

CONTRACTOR'S NAME: William Flynn

ADDRESS: Peaks Island, Maine

TEL.: 766-2780

MASTER LICENSE NO.: 04548 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: ____

ELECTRICAL INSTALLATIONS—

Permit Number 00094

Location 88-K-5a [illegible]

Owner Albert [illegible]

Date of Permit 3/13/89

Final Inspection [illegible]

By Inspector [illegible]

Permit Application Register Page No. 57

CODE COMPLIANCE COMPLETED

DATE ___ / ___

INSPECTIONS: Service ___ by ___

Service called in ___

Closing-in ___ by ___

PROGRESS INSPECTIONS: ___ / ___ / ___

___ / ___ / ___

___ / ___ / ___

___ / ___ / ___

___ / ___ / ___

DATE:	REMARKS:

PERMIT # 10150

CITY OF Portland BUILDING-PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Albert Preagraves and Jean Marie Yast -774-2112

Address: 41 Park Street, Portland, Me 04101

LOCATION OF CONSTRUCTION ~~Lot 552~~ Central Ave., Peaks Island

CONTRACTOR: owner SUBCONTRACTORS: 88K 5 2

ADDRESS:

Est. Construction Cost: $80,640 Type of Use: single family

Past Use:

Building Dimensions L ___ W ___ Sq Ft ___ # Stories: ___ Lot Size: ___

Is Proposed Use: ___ Seasonal ___ Condominium ___ Apartment ___

___ Conversion - Explain Minor, Minor site plan and to construct new. 1 set of construction plans and 2 site plans. submitted.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units ___ # Of New Dwelling Units ___

For Official Use Only

Date March 8, 1989 Subdivision: Yes / No

Inside Fire Limits ___ Name ___

Bldg Code ___ Lot ___

Time Limit ___ Block ___

Estimated Cost $80,640 Permit Expiration: ___

Value/Structure ___ Ownership: ___ Public ___

Fee $50.00 - Minor, Minor site plan Private ___

$25.00 - Plumbing fee

PERMIT ISSUED

MAR 23 1989

City Of Portland

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 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

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: ___ Spacing ___
2. Ceiling Strapping Size
3. Type Ceilings
4. Insulation Type ___ Size
5. Ceiling Height:

Roof:

1. Truss or Rafter Size ___ Spacing ___
2. Sheathing Type ___ Size ___
3. Roof Covering Type
4. Other

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 00.00
5. No. of Other Fixtures 00.00 PP

Swimming Pools:

1. Type:
2. Pool Size: ___ x ___ Square Footage ___
3. Must conform to National Electrical Code and State Law.

Zoning:

District I R1 Street Frontage Req.: ___ Provided ___

Required 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 ___

Shore and Flood Plain Mgmt ___ Special Exception ___

Other ___ (Explain)

Date Approved ___

OK

PERMIT ISSUED WITH LETTER

Permit Received By Nancy Grossman

Signature of Applicant [signature] Date 3-3-89

Signature of CEO ___ Date ___

Inspection Dates ___

1 MA, Adalto

White-Tax Assesor Yellow-GPCOG White Tag-CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 25.00

Subdivision Fee $

Site Plan Review Fee $ 50.00 - Minor, Minor

qq Other Fees $ 400.00

(Explain)

Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS

Signature of Applicant Albert T. Musgrave Date 3-8-89

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 874-8300

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

March 22, 1989

Presgraves and Yasi
41 Park Street
Portland, Maine 04101

Re: Lot #52 Central Avenue, Peaks Island

Dear Sir:

Your application to construct a new single family dwelling has been reviewed and a permit is herewith issued subject to the following requirements:

Site Plan Review Requirements

Public Works	Approved	Steve Harris
Inspection Service	Approved	William Giroux

Building Code Requirements

1.) Please read and implement items 1,2,6,7,9 and 10 of the attached Building Permit Report.

2.) Submit to this office a complete set of building plans for approval before starting work.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief, Inspection Services

BUILDING PERMIT REPORT

ADDRESS: LOT #52 Central AVE P.E. DATE: 21/Mar/87

REASON FOR PERMIT: Single Family dwelling

BUILDING OWNER: Presgraves & Yasi

CONTRACTOR: Owners

PERMIT APPLICANT: "

APPROVED: 1, 2, 6, 7, 9 & 10 ~~DENIED~~:

CONDITION OF APPROVAL ~~OR DENIAL~~:

1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.

2.) Precaution must be taken to protect concrete from freezing.

3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.

4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.

5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.

6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet ($0.53m^2$). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).

7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fireresistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches cannot pass through any opening.

10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el
11/16/88

Applicant: Albert Presgraves Date:

Address: Lot #52 Central Ave P.I

Assessors No.:

CHECK LIST AGAINST ZONING ORDINANCE

Date - 3-20-89

Zone Location - IR1

Interior or corner lot -

Use - single family

Sewage Disposal - septic OK

Rear Yards - OK 30' req

Side Yards - OK 20' req

Front Yards - OK 30' req.

Projections - none

Height - 2 story

Lot Area - OK

Building Area - OK

Area per Family - OK

Width of Lot - OK

Lot Frontage - OK

Off-street Parking - OK

Loading Bays - N/A

Site Plan -

Shoreland Zoning -

Flood Plains -

PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT# _____

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

Owner: Albert M. Presgraves and Jean Marie Yasi - 774-2112

Address: 41 Park St., Portland, Me 04101

LOCATION OF CONSTRUCTION 1 Center Trader Ave - P.I.

CONTRACTOR: owner SUBCONTRACTORS: SEE K-2

ADDRESS:

Est. Construction Cost: XXXXXXX Type of Use: Minor, Minor Site Plan

Past Use:

Building Dimensions L___ W___ Sq Ft.___ # Stories___ Lot Size:___

Is Proposed Use: ___ Seasonal___ Condominium___ Apartm

___ Conversion - Explain

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units ___ # Of New Dwelling Units ___

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 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

Interior Walls:

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

For Official Use Only

Date June 23, 1988 Subdivision: Yes / No

Inside Fire Limits ___ Name ___

Bldg Code ___ Lot ___

Time Limit ___ Block ___

Estimated Cost ___ Permit Expiration ___

Value Structure ___ Ownership ___ Public ___ Private

Fee $50.00 - Minor, Minor site plan

Ceiling:

1. Ceiling Joists Size:
2. Ceiling Stringing Size ___ Spacing
3. Type Ceilings:
4. Insulation Type ___ Size
5. Ceiling Height:

Roof:

1. Truss or Rafter Size ___ Span
2. Sheathing Type ___ Size
3. Roof Covering Type
4. Other

Chimney:

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.

Zoning:

District TR 1 Street Frontage Req.: ___ Provided ___

Required 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 ___

Shore and Floodplain Mgmt. ___ Special Exception ___

Other ___ (Explain)

Date Approved

Permit Received By Nancy L. Drema

Signature of Applicant ___ Date ___

Signature of CEO ___ Date ___

Inspection Date

White-Tax Assesor Yellow-GPCOG White Tag-CEO

PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Albert A. Fressgrave and Jean Marie Yani - 774-2[illegible]

Address: 41 Park St., Portland, Me 04101

LOCATION OF CONSTRUCTION: Central Ave PI

CONTRACTOR: owner SUBCONTRACTORS: [illegible]K-2

ADDRESS:

Est. Construction Cost: [illegible] Type of Use: Major/Minor Site Plan

Past Use:

Building Dimensions: L___ W___ Sq Ft___ # Stories: [illegible]

Is Proposed Use: ___ Seasonal ___ Condominium ___ Apartment ___ Conversion - Explain ___

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

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 Sizes _____ Span(s)
5. Bracing: Yes _____ No.
6. Corner Posts Size
7. Insulation Type
8. Sheathing Type
9. Siding Type _____ Weather Exposure
10. Masonry Materials
11. Metal Materials

Interior Walls:

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

For Official Use Only

Date June 23, 1988 Subdivision: Yes / No

Inside Fire Limits: Name

Bldg Code: Lot

Time Limit: Block

Estimated Cost: Permit Expiration:

Value of Structure: Ownership: _____ Public _____ Private

Fee $2. 10 - Minor/Minor Site Plan

Ceiling:

1. Ceiling Joists Size
2. Ceiling Strapping Size _____ Spacing
3. Type Ceilings
4. Insulation Type _____ Size
5. Ceiling Height

Roof:

1. Trusses or Rafter Size _____ Span
2. Sheathing Type _____ Size
3. Roof Covering Type
4. Other

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: _____ Square Footage
3. Must conform to National Electrical Code and State Law.

Zoning: IB-1

District: _____ Street Frontage Req. _____ Provided

Required 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

Shore and Floodplain Mgmt: _____ Special Exception

Other _____ (Explain)

Date Approved

Permit Received By Nancy L. [illegible]

Signature of Applicant _____ Date

Signature of CEO _____ Date

Inspection Dates

White-Tax Assesor Yellow-GPCOG White Tag-CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $

Subdivision Fee $

Site Plan Review Fee $50.00 Minor, Minor

Other Fees $

(Explain)

Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS

Signature of Applicant _____ Date _____

41 Park Street, No. 2
Portland, Maine 04101
August 14, 1988

Mr. Samuel Hoffses, Chief
Inspection Services Division
Department of Planning & Urban Development
389 Congress Street
Portland, Maine 04101

Dear Mr. Hoffses:

In regard to the letter from Mr. Turner dated August 9, 1988, we would like to explain our plans for building our house on Peaks Island. (Part of lot 88-K-2.)

We submitted the Site Plan application and understand that it was approved. We are planning to have an inground septic disposal system, and the Soil Evaluation forms (HHE-200) are currently being prepared by a lisenced Soil Evaluator. The house design is now conceptually complete, but the construction drawings will not be finished for another month or so. We intend to file for the building permit, with the fee, plans, etc. as soon as possible, but not for at least a month. We plan to have the house finished by September 1, 1989, so construction of the foundation might start later this Fall or early next Spring.

In the meantime, we would like to build a storage shed for storing materials and tools that will be used to build the foundation. We applied for a permit for this building on August 1, 1988, and about a week later we submitted a "Plot Plan" showing its proposed location to Warren Turner. We were hoping that this could be approved and built before all of the house application information was available.

If we can answer any questions, please call Albert weekdays at 774-2112, or Jenny at 773-7534.

Sincerely,

Jenny Yasi & Albert Presgraves

Albert Presgraves
and Jenny Yasi

cc: Warren Turner, Zoning Enforcement Inspector
Arthur Addato, Code Enforcement Officer

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Central Avenue
Peaks Island
Part 88-K-2

August 9, 1988

Mr. Albert Presgraves
and Ms. Jean Marie Yasi
41 Park Street
Portland, Maine 04102

Dear Mr. Presgraves and Ms. Yasi:

On July 19th we sent a letter requesting payment of the fee for a building permit and construction plans for the building to be built on Central Avenue, Peaks Island. We have not yet received your fee or the construction plan for the building.

We shall also need information concerning whether the building proposed will be connected to the City sewer, or if there will be inground septic disposal. If there will be inground septic disposal, we shall need to have Forms HHE-200, Results of Soils Analysis for the proposed building site must be submitted in triplicate, before a building permit for the proposed dwelling can be issued. Site plan review for this building has been completed and approved.

Please furnish the above fee, construction plan, and Forms HHE-200 for the site, so that we may proceed to process your application for a building permit for a single family dwelling on Central Avenue, Peaks Island.

Sincerely,

Warren J. Turner

Warrren J, Turner
Zoning Enforcement Inspector

cc: Joseph E. Gray, Jr., Director, Planning & Urban Development
Alexander Jaegerman, Chief Planner
P. Samuel Hoffses, Chief, Inspection Services
Arthur Addato, Code Enforcement Officer

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

July 19, 1988

Presgraves & Yasi
41 Park Street
Portland, ME 04101

RE: Central Avenue, Peaks Island, 88-K-2

Dear Sir:

Your application for a minor minor site plan has been completed and a building permit can be issued after you submit your building plans and paid for the building permit.

If you have any questions regarding this requirement, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief, Inspection Services

PSH/jq

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Central Ave.
Peaks Island
Part 88-K-2

July 27, 1988

Mr. Albert M. Presgraves
and Ms. Jean Marie Yasi
41 Park Street
Portland, Maine 04102

Dear Mr. Presgraves and Ms. Yasi:

In addition to the construction plan for your building at Central Avenue, on Peaks Island, with the fee to cover the cost of construction for the building, we shall need information concerning whether the building proposed will be connected to the City sewer, or whether there will be septic disposal. If there is to be septic disposal inground, then a Form HHE-200 containing the results of soils analysis on the proposed building site must be provided before a permit for the construction of the proposed dwelling can be issued.

Please furnish the above additional information concerning your proposed building site, in order that we may proceed with the processing of your building permit for a single family dwelling on Central Avenue.

Sincerely,

Warren J. Turner

Warren J. Turner
Zoning Enforcement Inspector

cc: P. Samuel Hoffses, Chief, Inspection Services
Arthur Addato, Code Enforcement Officer

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form

Albert Presgraves and Jean Marie Yasi - 774-2112
Applicant

March 8, 1989
Date

41 Park Street, Portland, Me 04101
Mailing Address

Lot #52 Central Avenue, Peaks Island
Address of Proposed Site

Single family
Proposed Use of Site

68-K-52
Site Identifier(s) from Assessors Maps

1.53 acres / 1,152 sq ft
Acreage of Site / Ground Floor Coverage

IR-1
Zoning of Proposed Site

Site Location Review (DEP) Required: ( ) Yes ( ) No

Board of Appeals Action Required: ( ) Yes ( ) No

Planning Board Action Required ( ) Yes ( ) No

Proposed Number of Floors 2

Total Floor Area 1,792 sq ft

Other Comments:

Date Dept. Review Due:

BUILDING DEPARTMENT SITE PLAN REVIEW
(Does not include review of construction plans)

☐ Use does NOT comply with Zoning Ordinance
- ☐ Requires Board of Appeals Action
- ☐ Requires Planning Board/City Council Action

Explanation:

☒ Use complies with Zoning Ordinance — Staff Review Below

Zoning: SPACE & BULK, as applicable	DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS	
COMPLIES																			
COMPLIES CONDITIONALLY																			CONDITIONS SPECIFIED BELOW
DOES NOT COMPLY																			REASONS SPECIFIED BELOW

REASONS:

OK WM 3-20-89

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

Department of Human Services

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Albert Presgraves and Jean Marie Yasi - 774-2112
Applicant

March 8, 1989
Date

41 Park Street, Portland, Me 04010
Mailing Address

Lot #52 Central Avenue, Peaks Island
Address of Proposed Site

Single family
Proposed Use of Site

86-K-52
Site Identifier(s) from Assessors Map

1.53 acres / 1,152 sq ft
Acreage of Site / Ground Floor Coverage

IR-1
Zoning of Proposed Site

Site Location Review (DEP) Required: ( ) Yes ( ) No

Board of Appeals Action Required: ( ) Yes ( ) No

Planning Board Action Required: ( ) Yes ( ) No

Proposed Number of Floors 2

Total Floor Area 1,792 sq ft

Other Comments: _____

Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received)

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER	
APPROVED																
APPROVED CONDITIONALLY																CONDITIONS SPECIFIED BELOW
DISAPPROVED																REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

OK

Stephen K. Harris 3/15/89
SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

Department of Human Services
Division of Health Engineering
(207) 289-3826

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PORTLAND PERMIT # 3,323 APPLICANTS COPY

Date Permit Issued: 3 8 1 8 9 | 1 1 0 1 0 1 0 | FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature: [signature] L.P.I. # 1 1 6 2 1 3

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER TWO YEARS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

PROPERTY ADDRESS

Town Or Plantation	PORTLAND PEAKS ISLAND
Street Subdivision Lot #	CENTRAL AVE 88-K-52 TAX MAP 58, BLOCK K, PART LOT 2

PROPERTY OWNERS NAME

Last: PRESGRAVES First: ALBERT

Applicant Name:	ALBERT PRESGRAVES
Mailing Address of Owner/Applicant (If Different)	41 PARK ST. #2 PORTLAND, ME 04101

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 — Date

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 — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☒ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
   ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   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 3. ☐ TRENCH
2. ☐ CHAMBER 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	ZONING
1.53 ACRES	IR-1

TYPE OF WATER SUPPLY

DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☐ Regular ☒ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS

WATER CONSERVATION

1. ☐ NONE
2. ☒ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

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

3 BEDROOM MINIMUM	270
LOW VOLUME TOILET	- 27
DESIGN FLOW.	243 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
4.	A III

DEPTH TO LIMITING FACTOR: 24.

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 350* Sq. Ft.
   ☒ REGULAR ☐ H 20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

* USED 14 INFILTRATOR® POLYETHELENE CHAMBERS IN TRENCH CONFIGURATION.

☐ SITE EVALUATION WAIVED BY LOCAL OPTION

On OCTOBER 24, 1987 (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.

William B Gardner — 0003 / 4814 — 9/28/88

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

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

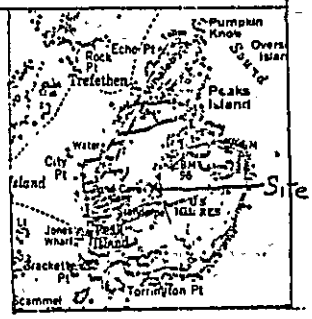
Department of Human Services
Division of Health Engineering

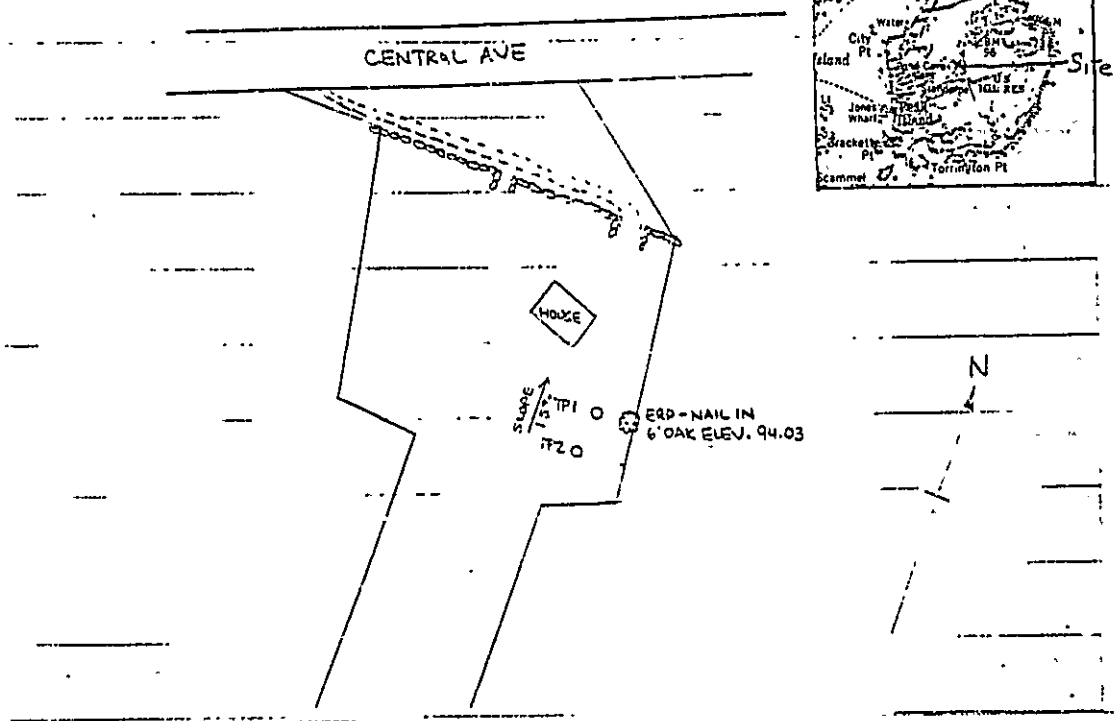
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City Plantation	Street, Road, Subdivision	Owner's Name
PORTLAND PEAKS ISLAND	CENTRAL AVE 88-K-PART 2	ALBERT PRESGRAVES

SITE PLAN

Scale 1" = 100 Ft.





SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole 1 ☒ Test Pit ☐ Boring

2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	GRAVELLY LOAM		DARK BROWN	
6–10			BROWN	
10–30	LOAMY GRAVEL	LOOSE	RED BROWN	NONE
30–50				FEW
50	BEDROCK			

Soil (Prime)	Classification (Condition)	Slope	Limiting Factor	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
4	AIII	1½ %	28	

Observation Hole 2 ☒ Test Pit ☐ Boring

2" SOD * Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	GRAVELLY LOAM		DARK BROWN	
6–10			BROWN	
10–30	LOAMY GRAVEL	LOOSE	RED BROWN	NONE
30–50				FEW
50	BEDROCK			

Soil (Prime)	Classification (Condition)	Slope	Limiting Factor	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
4	AIII	1½ %	24	

William B. Goodman — Site Evaluator or Professional Engineer's Signature

0003/48.4 — SE# / PE#

9/28/88 — Date

HHE-200 Rev. 4/83

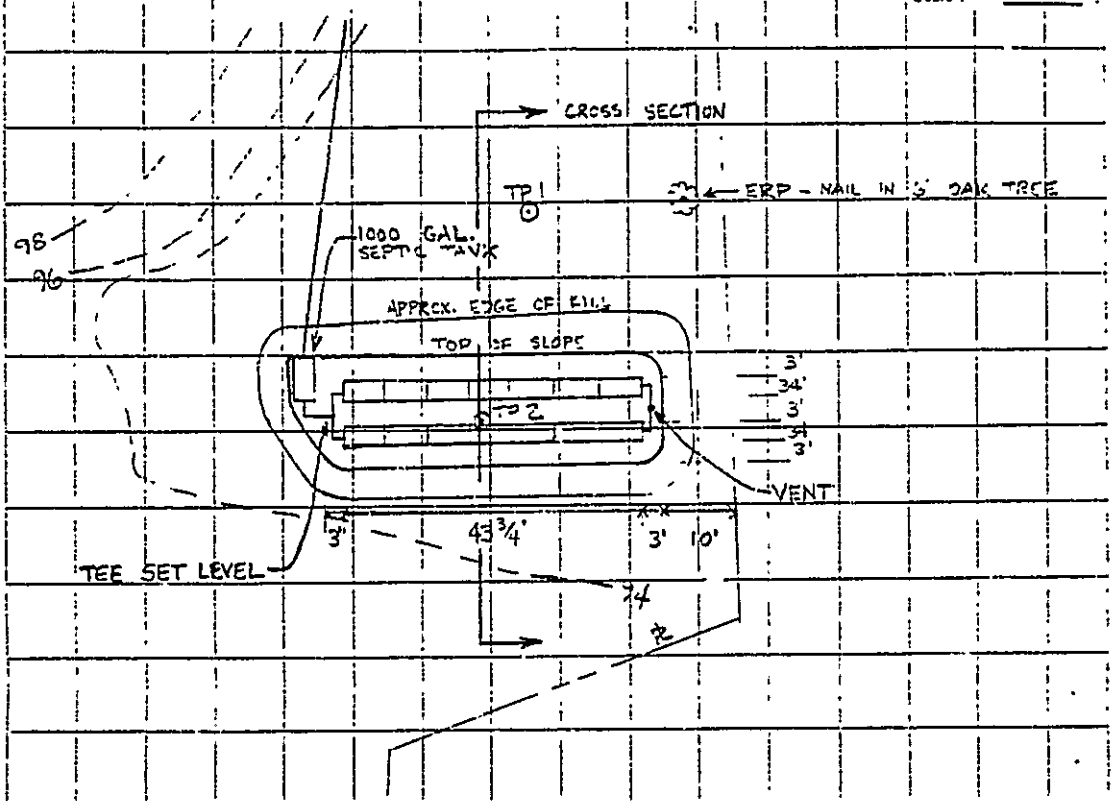
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
PORTLAND, PEAKS ISLAND.	CENTRAL AVE. 88- K- PART 2	ALBERT PRESGRAVES

SUBSURFACE WASTEWATER DISPOSAL PLAN

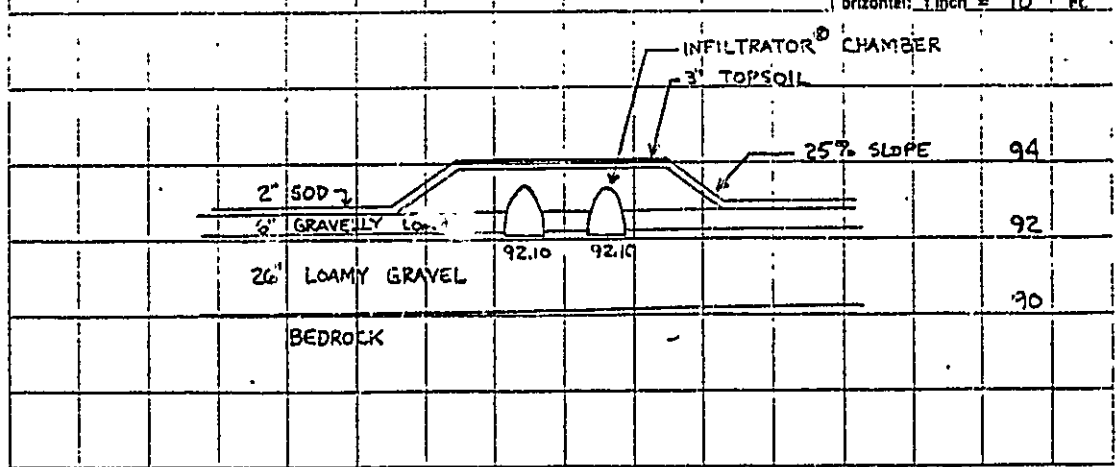
Scale 1" = 20 ft



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	13 '	Reference Elevation is	94.03	NAIL IN 6" OAK 22' EASTERLY
Depth of Fill (Downslope)	18 '	Bottom of Disposal Area	92.10	OF TEST PIT 1, NEAR EAST ℄
		Top of Distribution Lines or Chambers	93.35	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 4 Ft.
Horizontal: 1 inch = 10 Ft.



William R. Goodman
Site Evaluator or Professional Engineer's Signature

3/4814
SE # / PE #

9/28/88
Date

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
Processing Form

Albert M. Presgraves and Jean Marie Yasi
Applicant

June 23, 1988
Date

[illegible] Park Street, Portland Me 04101
Mailing address

Central Avenue, Peaks Island
Address of Proposed Site

Single family dwelling
Proposed Use of Site

Part of 88-K-2
Site Identifier(s) from Assessors Maps

1.53 acres / 28x36(Porch10x20)
Acreage of Site / Ground Floor Coverage

IR-1
Zoning of Proposed Site

Site Location Review (DEP) Required: ( ) Yes ( ) No

Proposed Number of Floors 2

Board of Appeals Action Required: ( ) Yes ( ) No

Total Floor Area 2,072 sq. ft.

Planning Board Action Required: ( ) Yes ( ) No

Other Comments: _____

Date Dept. Review Due: _____

BUILDING DEPARTMENT SITE PLAN REVIEW
(Does not include review of construction plans)

☐ Use does NOT comply with Zoning Ordinance
- ☐ Requires Board of Appeals Action
- ☐ Requires Planning Board/City Council Action

Explanation _____

☐ Use complies with Zoning Ordinance — Staff Review Below

Zoning: SPACE & BULK, as applicable	DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS	
COMPLIES																			
COMPLIES CONDITIONALLY																			CONDITIONS SPECIFIED BELOW
DOES NOT COMPLY																			REASONS SPECIFIED BELOW

REASONS: _____

_____
SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Albert H. Presgraves and Jean Marie Yasi
Applicant

41 Park Street, Portland Me 04101
Mailing Address

Single family dwelling
Proposed Use of Site

1.53 acres / 28x36(Porch10x20)
Acreage of Site / Ground Floor Coverage

Ju. e 23, 19
Date

Central Avenue, Peaks Island
Address of Proposed Site

Part of 88-K-2
Site Identifier(s) from Assessors Maps

IR-1
Zoning of Proposed Site

Site Location Review (DEP) Required: ( ) Yes ( ) No

Board of Appeals Action Required: ( ) Yes ( ) No

Planning Board Action Required: ( ) Yes ( ) No

Proposed Number of Floors 2

Total Floor Area 2,072 sq. ft.

Other Comments: _____

Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

_____ (Date Received)

	TRAFFIC CIRCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER	
APPROVED																
APPROVED CONDITIONALLY																CONDITIONS SPECIFIED BELOW
DISAPPROVED																REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

Stephen K. Harris 7/12/88
SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

PERMIT ISSUED

MAY 24 1989

City Of Portland

APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. 1

Portland, Maine, May 19, 1989

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No 89/1800 *pertaining to the building or structure comprised in the original application 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 88-K-52 Central Ave., Peaks Island Within Fire Limits? Dist. No.

Owner's name and address Albert Presgraves - Upper A Street, Peaks Island Telephone 766-5593

Lessee's name and address Telephone

Contractor's name and address owner Plans filed No. of sheets

Architect No. families 1

Proposed use of building Single Fam. No. families 1

Last use same Additional fee $30.00

Increased cost of work $1,600.00

Description of Proposed Work

Change of roof line and other minor interior renovations, as per plans. 3 sheets of plans.

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 chimneys of lining

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

Approved: IR-1 OK WD HLP 5-23-89

Signature of Owner

Approved: Inspector of Buildings

INSPECTION COPY

FILE COPY

APPLICANT'S COPY

ASSESSOR'S COPY

7 mo. Addato

BUILDING PERMIT REPORT

ADDRESS: 88-K-52 Central Ave. P.I. DATE: 24/mar/89

REASON FOR PERMIT: INTERIOR RENOVATIONS

BUILDING OWNER: Presgraves

CONTRACTOR: owner

PERMIT APPLICANT: "

APPROVED: *6 *7 *9 ~~DENIED:~~

CONDITION OF APPROVAL ~~OR DENIAL:~~

1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.

2.) Precaution must be taken to protect concrete from freezing.

3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.

4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.

5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.

*6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m²). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).

*7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

8.) Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1-hour fireresistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches cannot pass through any opening.

10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

/el
11/16/88

CITY OF PORTLAND, MAINE

Department of Building Inspection

Certificate of Occupancy

LOCATION 88K-52 Central Avenue, P.I.

Date of Issue 9/18/89

Issued to Albert Preagraves & Jean Marie Yasi

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. 89/1800, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and 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
single family	Entire

Limiting Conditions:

This certificate supersedes certificate issued

Approved: 9-18-89

(Date) Inspector

Inspector of Buildings

Notice: This certificate identifies 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.

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date August 1, 19 89
Receipt and Permit number 00558

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: 88-K-52 Central Avenue, Peaks Island, Maine

OWNER'S NAME: Albert Presgraves ADDRESS: same

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____	
FIXTURES: (number of)	
Incandescent _____ Flourescent _____ (not strip) TOTAL _____	
Strip Flourescent _____ ft.	
SERVICES: 100 temp.	3.00
Overhead X Underground _____ Temporary _____ TOTAL amperes 200	3.00
METERS: (number of) 2	1.00
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 _____ Water Heaters _____	
Cook Tops _____ Disposals _____	
Wall Ovens _____ Dishwashers _____	
Dryers _____ Compactors _____	
Fans _____ Others (denote) _____	
TOTAL _____	
MISCELLANEOUS: (number of)	
Branch Pancls _____	
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:	7.00

INSPECTION:

Will be ready on _____, 19__; or Will Call X

CONTRACTOR'S NAME: William Flynn

ADDRESS: Centennial St., Peaks Island

TEL.: 766-2780

MASTER LICENSE NO.: 4548 SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: _____

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

Park Island

ELECTRICAL INSTALLATIONS

Permit Number 06 558

Location PF 52 Park Ave

Owner Albert Pierrus

Date of Permit 12/14/06

Final Inspection 12-13-06

By Inspector [illegible]

Permit Application Register Page No. 67

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS: ____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

____ / ____ / ____

DATE:	REMARKS

APPLICATION FOR PERMIT

DEPARTMENT OF BUILDING INSPECTIONS SERVICES

ELECTRICAL INSTALLATIONS

Date June 28 19 89

Receipt and Permit number 0046

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: 88-K-52 Central Avenue, Peaks Island

OWNER'S NAME: Albert Presgraves ADDRESS: Upper A Street, Peaks Island

	FEES
OUTLETS: Receptacles 65 Switches 15 Plugmold ____ ft. TOTAL 80	8.00
FIXTURES: (number of) Incandescent 12 Flourescent 2 (not strip) TOTAL 14	3.40
Strip Flourescent ____ ft.	
SERVICES: Overhead ____ Underground ____ Temporary ____ TOTAL amperes ____	
METERS: (number of) ____	
MOTORS: (number of) Fractional 2	1.00
1 HP or over ____	
RESIDENTIAL HEATING: Oil or Gas (number of units) ____	
Electric (number of rooms) 6	6.00
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 2; Water Heaters ____; Disposals ____; Dishwashers 1; Compactors ____; Others (denote) ____ TOTAL 5	7.50
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:	25.90

INSPECTION:

Will be ready on ____, 19__; or Will Call XXX

CONTRACTOR'S NAME: Albert Presgraves/owner

ADDRESS: ____

TEL.: 774-2112

MASTER LICENSE NO.: ____ SIGNATURE OF CONTRACTOR:

LIMITED LICENSE NO.: ____ Albert T Presgraves

INSPECTOR'S COPY — WHITE

OFFICE COPY — CANARY

CONTRACTOR'S COPY — GREEN

Parks Island

ELECTRICAL INSTALLATIONS—

Permit Number 00 Elep

Location 8P 152 - Santa Rosa

Owner Albert Presgrave

Date of Permit 6-28-89

Final Inspection 2-13-90 SB

By Inspector J. Vinn

Permit Application Register Page No. 67

INSPECTIONS: Service _____ by _____

Service called in _____

Closing-in _____ by _____

PROGRESS INSPECTIONS:

_____ / _____

_____ / _____

_____ / _____

_____ / _____

_____ / _____

_____ / _____

DATE:	REMARKS.

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS

Town Or Plantation	Peaks Island Portland
Street Subdivision Lot #	Central Ave. P.I. 55-K-52

PROPERTY OWNER'S NAME

Last: Presgraves First: Albert

Applicant Name:	(owner)
Mailing Address of Owner/Applicant (If Different)	Upper A St, P.I. 04108

PORTLAND PERMIT # 3,460 TOWN COPY

Date Permit Issued 6/2/89 $ 27 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 123

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.

Albert Presgraves 6-12-89
Signature of Owner/Applicant Date

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 Date Approved 9/27/89

PERMIT INFORMATION

This Application Is for

1. ☑ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

JUN 1 1989

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 # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number	Column 2 Type of Fixture	Column 1 Number	Column 1 Type Of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	1	Hosebibb / Sillcock	1	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR		Urinal	1	Sink
HOOK-UP: to an existing subsurface wastewater disposal system.		Drinking Fountain	2	Wash Basin
		Indirect Waste	1	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	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups & Relocations		Other: _____	1	Water Heater
$ Hook-Up & Relocation Fee		Fixtures (Subtotal) Column 2	8	Fixtures (Subtotal) Column 1
			1	Fixtures (Subtotal) Column 2
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			9	Total Fixtures
			$ 27.	Fixture Fee
			$	Hook-Up & Relocation Fee
			$ 27.	Permit Fee Total

HHE-211 Rev. 5/86

TOWN COPY

PERMIT # 001300 CITY OF Portland BUILDING PERMIT APPLICATION MAP #_____ LOT#_____

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

Owner: XXXXX A Prosgraves & J. Yasi - 773-7534 H. 774-2112 - Bus.

Address: Peaks Island, Maine 04108 ~~Upper A Street~~

LOCATION OF CONSTRUCTION 88-K-52 Peaks Island (Central Ave.)

CONTRACTOR: ~~XXXXX~~ Peak Const. - 774-4730 SUBCONTRACTORS_____

ADDRESS: Portland, Maine

Est. Construction Cost: 1,200.00 Type of Use:_____

Past Use:_____

Building Dimensions L___ W___ Sq. Ft.___ # Stories:___ Lot Size:___

Is Proposed Use:_____ Seasonal_____ Condominium_____ Apartment_____

Conversion - Explain To construct 10'x12' shed, as per plan.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units_____ # Of New Dwelling Units_____

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_____
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 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_____

Interior Walls:

1. Studding Size_____ Spacing_____
2. Header Sizes_____ Span(s)_____
3. Wall Covering Type_____
4. Fire Wall if required_____
5. Other Materials_____

For Official Use Only

Date August 1, 1988
Inside Fire Limits_____
Bldg Code_____
Time Limit_____
Estimated Cost 1,200.00
Value/Structure_____
Fee 25.00

Subdivision: Yes / No
Name_____
Lot_____
Block_____
Permit Expiration:_____
Ownership: Public / Private

New residence under site plan review
Lorettes Lobi

Ceiling:

1. Ceiling Joists Size:_____
2. Ceiling Strapping Size_____ Spacing_____
3. Type Ceilings:_____
4. Insulation Type_____ Size_____
5. Ceiling Height_____

PERMIT ISSUED
OCT 19 1988
City Of Portland

Roof:

1. Truss or Rafter Size_____ Span_____
2. Sheathing Type_____ Size_____
3. Roof Covering Type_____
4. Other_____

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 C.O. Yes_____ No_____
2. No. Tubs or Showers_____
3. No. of Flushes_____
4. No. of Stories_____
5. No. of Fixtures_____

Square Footage_____

Conforms to National Electrical Code and State Law.

IR-1 Street Frontage Req.:_____ Provided_____

Required Setbacks: Front_____ Back_____ Side_____ Side_____

Required:

Planning Board Approval: Yes_____ No_____ Date:_____

Planning Board Approval: Yes_____ No_____ Date:_____

Conditional Use:_____ Variance_____ Site Plan_____ Subdivision_____

Shore and Floodplain Mgmt._____ Special Exception_____

Other_____ (Explain)_____

Date Approved 8-8-88 Conditions

Permit Received By Joyce M. Rinaldi

Signature of Applicant Albert Prosgraves C.R. Date Aug 1 1988

Signature of CEO_____ Date_____

Inspection Dates_____

White-Tax Assessor Yellow-GPCOG White Tag -CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 25.00
Subdivision Fee $
Site Plan Review Fee $
Other Fees $
(Explain)
Late Fee $

Inspection Record

Type	Date
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /
	/ /

COMMENTS

Signature of Applicant Albert Fresgraves C.R.

Date August 1 1988

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Central Ave.
Peaks Island
Part 88-K-2

July 27, 1988

Mr. Albert M. Presgraves
and Ms. Jean Marie Yasi
41 Park Street
Portland, Maine 04102

Dear Mr. Presgraves and Ms. Yasi:

In addition to the construction plan for your building at Central Avenue, on Peaks Island, with the fee to cover the cost of construction for the building, we shall need information concerning whether the building proposed will be connected to the City sewer, or whether there will be septic disposal. If there is to be septic disposal inground, then a Form HHE-200 containing the results of soils analysis on the proposed building site must be provided before a permit for the construction of the proposed dwelling can be issued.

Please furnish the above additional information concerning your proposed building site, in order that we may proceed with the processing of your building permit for a single family dwelling on Central Avenue.

Sincerely,

Warren J. Turner

Warren J. Turner
Zoning Enforcement Inspector

cc: P. Samuel Hoffses, Chief, Inspection Services
Arthur Addato, Code Enforcement Officer

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS

Town Or Plantation	PORTLAND PEAKS ISLAND
Street Subdivision Lot #	CENTRAL AVE TAX MAP 88, BLOCK K, PART LOT 2.

PROPERTY OWNERS NAME

Last: PRESGRAVES First: ALBERT

Applicant Name:	ALBERT PRESGRAVES
Mailing Address of Owner/Applicant (If Different)	41 PARK ST. #2 PORTLAND, ME 04101

Caution: Permit Required

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

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 — Date

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 — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☒ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
   ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   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 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

DISPOSAL SYSTEM TO SERVE:

1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

TYPE OF WATER SUPPLY

DRILLED WELL

SIZE OF PROPERTY	ZONING
1.53 ACRES	IR-1

DESIGN DETAILS (SYSTEM LAYOUT S[illegible]N ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☐ Regular ☒ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

1. ☐ NONE
2. ☒ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS

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

3 BEDROOM MINIMUM 270

LOW VOLUME TOILET -27

DESIGN FLOW: 243 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
4	A III

DOPTITO LIMITING FACTOR: 7"

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 350* Sq. Ft.
   ☒ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

* USED 14 INFILTRATOR® POLYETHELENE CHAMBERS IN TRENCH CONFIGURATION.

SITE EVALUATOR STATEMENT

☐ SITE EVALUATION WAIVED BY LOCAL OPTION

On OCTOBER 24, 1987 (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.

William B. Goodwin — 0003/4814 — 9/28/88

Site Evaluator or Professional Engineer's Signature — CEO / PE# — Date

Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

HHE-200 Rev. 4/83

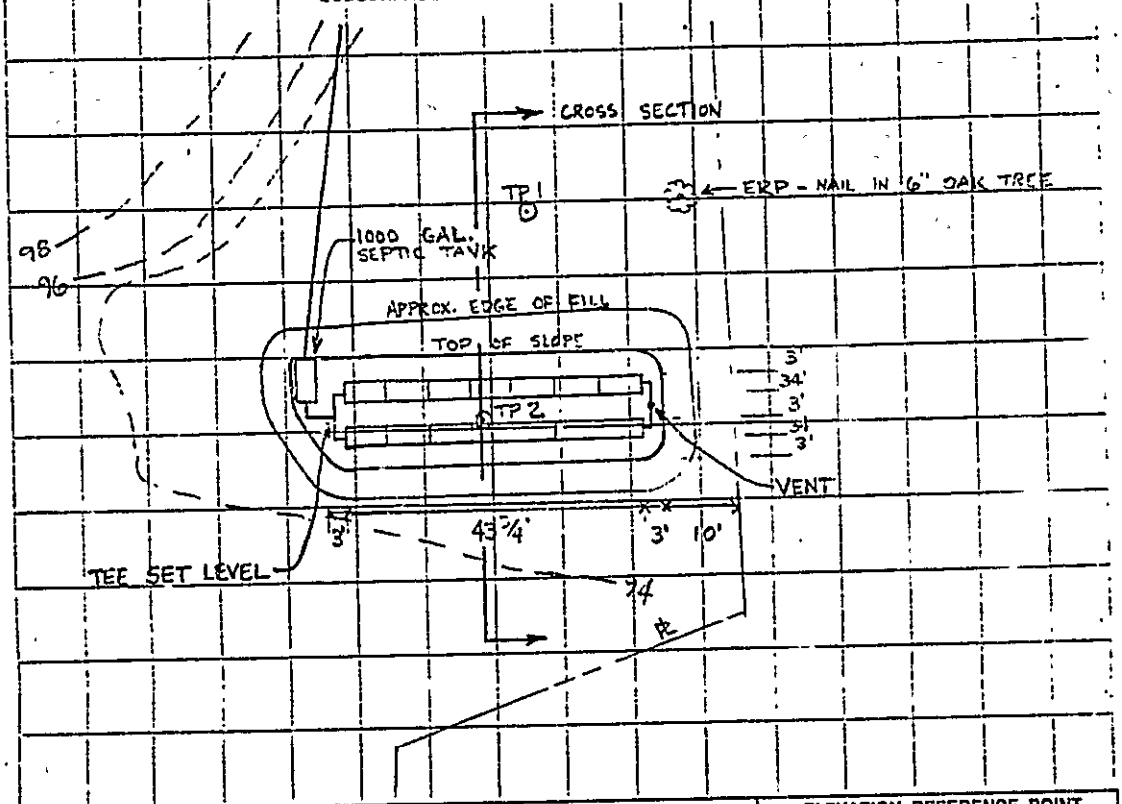
Department of Human Services
Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation	Street, Road, Subdivision	Owners Name
PORTLAND, PEAKS ISLAND,	CENTRAL AVE. 88- K- PART 2	ALBERT PRESGRAVES

SUBSURFACE WASTEWATER DISPOSAL PLAN

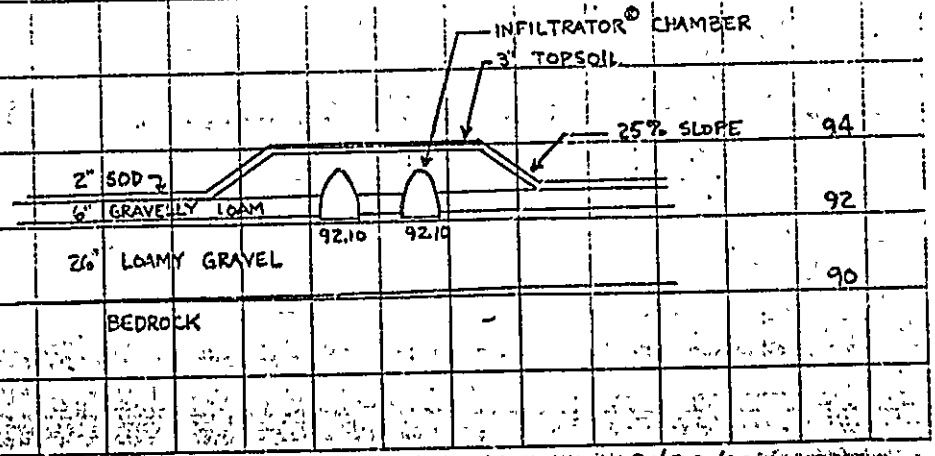
Scale 1" = 20 ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	13"	Reference Elevation is	94.03	NAIL IN 6" OAK 22' EASTERL'
Depth of Fill (Downslope)	18"	Bottom of Disposal Area	92.10	OF TEST PIT 1, NEAR EAST ℄
		Top of Distribution Lines or Chambers	93.35	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 4 Ft.
Horizontal: 1 inch = 10 Ft.



Site Evaluator or Professional Engineer's Signature — SE# / PE# 3/4814 — Date 9/28/88

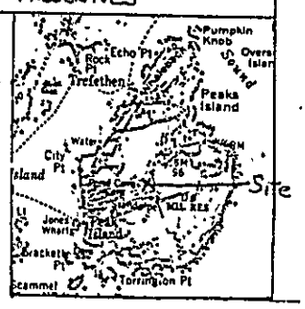
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

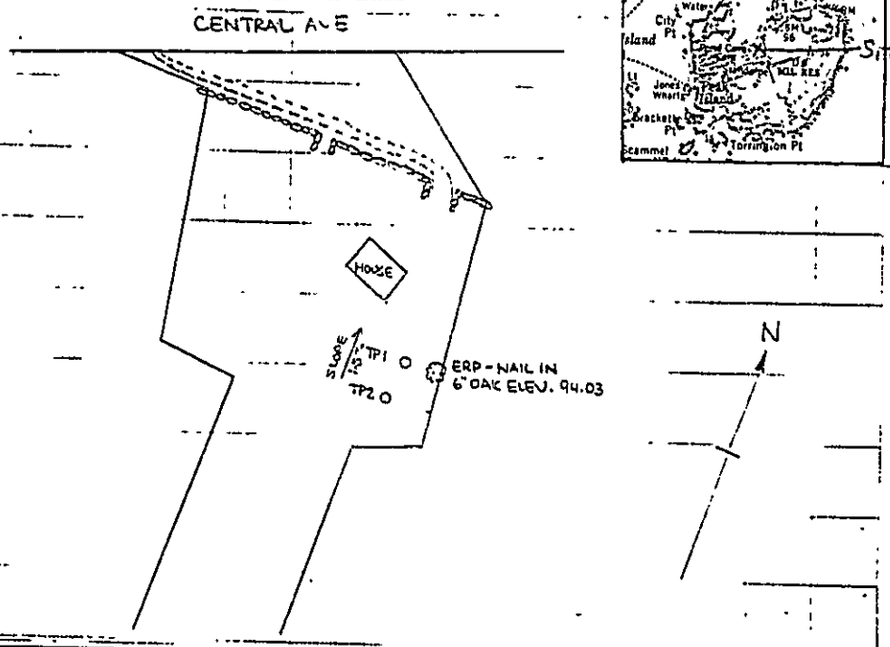
Department of Human Services
Division of Health Engineering

Town, City, Plantation: PORTLAND PEAKS ISLAND
Street, Road, Subdivision: CENTRAL AVE 88-K-PART 2
Owners Name: ALBERT PRESGRAVES

SITE PLAN

Scale 1" = 100 FT.





SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole 1 ☒ Test Pit ☐ Boring

2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	GRAVELLY LOAM		DARK BROWN	
6–10			BROWN	
10–15	LOAMY GRAVEL	LOOSE	RED BROWN	NONE
15–20				
20–30				FEW
30–40	BEDROCK			
40–50				

Soil	Classification	Slope	Limiting Factor	
4 (Prime)	AIII (Common)	1½ %	28"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole 2 ☒ Test Pit ☐ Boring

2" SOD * Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	GRAVELLY LOAM		DARK BROWN	
6–10			BROWN	
10–15	LOAMY GRAVEL	LOOSE	RED BROWN	NONE
15–20				
20–30				FEW
30–40	BEDROCK			
40–50				

Soil	Classification	Slope	Limiting Factor	
4 (Prime)	AIII (Common)	1½ %	24"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

William B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE# / PE#

9/28/88
Date

HHE-200 Rev. 4/83

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

Central Avenue
Peaks Island
Part 88-K-2

August 9, 1988

Mr. Albert Presgraves
and Ms. Jean Marie Yasi
41 Park Street
Portland, Maine 04102

Dear Mr. Presgraves and Ms. Yasi:

On July 19th we sent a letter requesting payment of the fee for a building permit and construction plans for the building to be built on Central Avenue, Peaks Island. We have not yet received your fee or the construction plan for the building.

We shall also need information concerning whether the building proposed will be connected to the City sewer, or if there will be inground septic disposal. If there will be inground septic disposal, we shall need to have Forms HHE-200, Results of Soils Analysis for the proposed building site must be submitted in triplicate, before a building permit for the proposed dwelling can be issued. Site plan review for this building has been completed and approved.

Please furnish the above fee, construction plan, and Forms HHE-200 for the site, so that we may proceed to process your application for a building permit for a single family dwelling on Central Avenue, Peaks Island.

Sincerely,

Warren J. Turner

Warrren J. Turner
Zoning Enforcement Inspector

cc: Joseph E. Gray, Jr., Director, Planning & Urban Development
Alexander Jaegerman, Chief Planner
P. Samuel Hoffses, Chief, Inspection Services
Arthur Addato, Code Enforcement Officer

CITY OF PORTLAND, MAINE
389 CONGRESS STREET
PORTLAND, MAINE 04101
(207) 775-5451

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

P. SAMUEL HOFFSES, CHIEF
INSPECTION SERVICES DIVISION

July 19, 1988

Presgraves & Vasi
41 Park Street
Portland, ME 04101

RE: Central Avenue, Peaks Island, 88-K-2

Dear Sir:

Your application for a minor minor site plan has been completed and a building permit can be issued after you submit your building plans and paid for the building permit.

If you have any questions regarding this requirement, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses
Chief, Inspection Services

PSH/jq

F-31

Receipt - Applicant's Copy

CITY OF PORTLAND, MAINE

Department of Building Inspection

8/1 1988

Received from Jeanmarie Yosi Albert M Pressgraves a fee

of Twenty Five Dollars No/100 Dollars $25.00

for permit to install / erect / alter / move / demolish Construct shed 10'x12'.

at Central Ave. P.A. Est Cost $ 1,200.00

S S-K-52

P. Samuel Hoffses
Inspector of Buildings

Per: JMR

Ck. # 1069

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less $5. or 10% whichever is greater.

02639

FILL IN AND SIGN WITH INK

PERMIT ISSUED
OCT 2 1989
City Of Portland

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, ...

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location . Centennial St. Peaks Isl. Use of Building. Single family ..... No. Stories 2 ..... New Building / Existing

Name and address of owner of appliance Lawrence Walden/Centennial St. PI .....

Installer's name and address Portland Comfort Systems/~~Street~~ **** Street 295 Forest Ave #327 05101 ..... Telephone 874-0277

General Description of Work

To install forced hot water heating system .....

IF HEATER, OR POWER BOILER

Location of appliance workshop ..... Any burnable material in floor surface or beneath? no .....

If so, how protected? ..... Kind of fuel? #2 oil .....

Minimum distance to burnable material, from top of appliance or casing top of furnace 8' .....

From top of smoke pipe 6' ..... From front of appliance 4' ..... From sides or back of appliance 2' .....

Size of chimney flue power vented Other connections to same flue no .....

If gas fired, how vented? no ..... Rated maximum demand per hour .....

Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes .....

IF OIL BURNER

Name and type of burner Peerless ..... Labelled by underwriters' laboratories? yes .....

Will operator be always in attendance? no ..... Does oil supply line feed from top or bottom of tank? bottom .....

Type of floor beneath burner concrete ..... Size of vent pipe 1¼" .....

Location of oil storage workshop ..... Number and capacity of tanks 1/275 gallon tank .....

Low water shut off yes ..... Make safeguard ..... No. OEM 180 .....

Will all tanks be more than five feet from any flame? yes ..... How many tanks enclosed? no .....

Total capacity of any existing storage tanks for furnace burners 1/275 gallon .....

IF COOKING APPLIANCE

Location of appliance ..... Any burnable material in floor surface or beneath? .....

If so, how protected? ..... Height of Legs, if any .....

Skirting at bottom of appliance? ..... Distance to combustible material from top of appliance? .....

From front of appliance ..... From sides and back ..... From top of smokepipe .....

Size of chimney flue ..... Other connections to same flue .....

Is hood to be provided? ..... If so, how vented? ..... Forced or gravity? .....

If gas fired, how vented? ..... Rated maximum demand per hour .....

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

.....

02639

FILL IN AND SIGN WITH INK

PERMIT ISSUED
OCT 2 1989
City Of Portland

APPLICATION FOR PERMIT FOR HEATING, COOKING OR POWER EQUIPMENT

Portland, Maine, ...

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to install the following heating, cooking or power equipment in accordance with the Laws of Maine, the Building Code of the City of Portland, and the following specifications:

Location Centennial St. Peaks Isl. Use of Building Single family No. Stories 2 New Building / Existing

Name and address of owner of appliance Lawrence Walden/Centennial St. PI

Installer's name and address Portland Comfort Systems/Street XXXX Telephone 874-0277
**** Street 295 Forest Ave #327 05101

General Description of Work

To install forced hot water heating system

IF HEATER, OR POWER BOILER

Location of appliance workshop Any burnable material in floor surface or beneath? no

If so, how protected? Kind of fuel? #2 oil

Minimum distance to burnable material, from top of appliance or casing top of furnace 8'

From top of smoke pipe 6' From front of appliance 4' From sides or back of appliance 2'

Size of chimney flue power vented Other connections to same flue no

If gas fired, how vented? no Rated maximum demand per hour

Will sufficient fresh air be supplied to the appliance to insure proper and safe combustion? yes

IF OIL BURNER

Name and type of burner Peerless Labelled by underwriters' laboratories? yes

Will operator be always in attendance? no Does oil supply line feed from top or bottom of tank? bottom

Type of floor beneath burner concrete Size of vent pipe 1¼"

Location of oil storage workshop Number and capacity of tanks 1/275 gallon tank

Low water shut off yes Make safeguard No. OEM 180

Will all tanks be more than five feet from any flame? yes How many tanks enclosed? no

Total capacity of any existing storage tanks for furnace burners 1/275 gallon

IF COOKING APPLIANCE

Location of appliance Any burnable material in floor surface or beneath?

If so, how protected? Height of Legs, if any

Skirting at bottom of appliance? Distance to combustible material from top of appliance?

From front of appliance From sides and back From top of smokepipe

Size of chimney flue Other connections to same flue

Is hood to be provided? If so, how vented? Forced or gravity?

If gas fired, how vented? Rated maximum demand per hour

MISCELLANEOUS EQUIPMENT OR SPECIAL INFORMATION

Amount of fee enclosed? 55.00 / 7,000.

Master Lic # 02891

APPROVED:

P. Samuel Hoffses

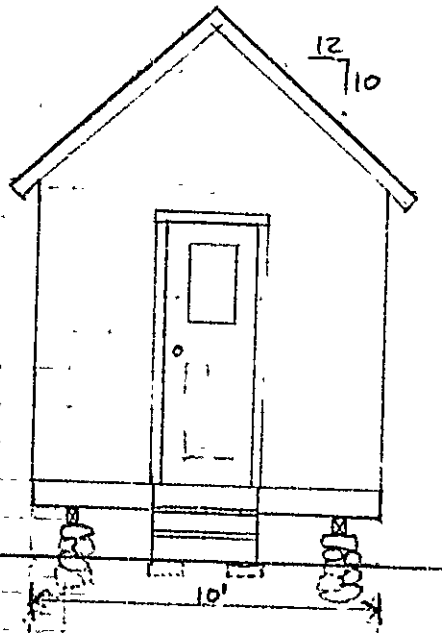
(7)

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

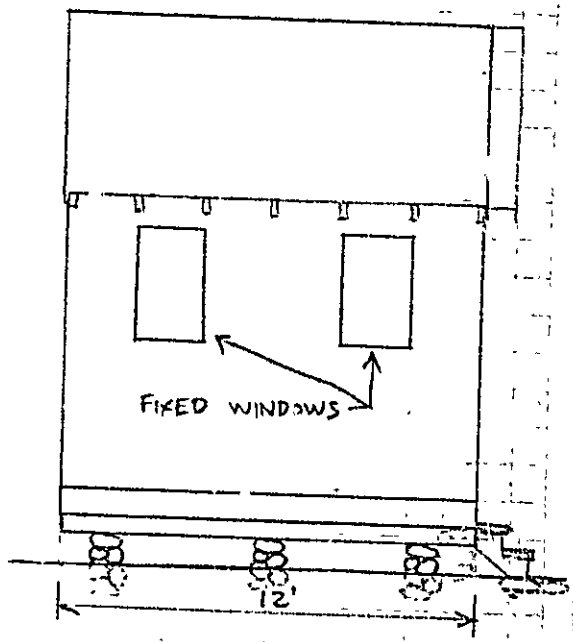
CS 300

Signature of Installer Charles B. Reid

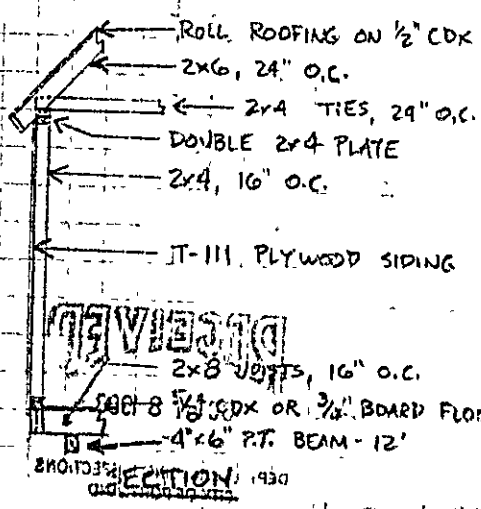
INSPECTION FILE APPLICANT'S ASSESSOR'S COPY



EAST ELEVATION



SOUTH ELEVATION



SECTION

NOTES:

1. FOUNDATION TO BE STACKED STONES.
2. NO WINDOWS ON NORTH AND WEST SIDES.
3. ALL TRIM IS 1x4.
4. STAIRS TO BE MADE OF 2x6 STOCK.

STORAGE SHED, 10' x 12'
JULY, 1988
FOR A. PROSGRAVES & J. YASI,
PEAKS ISLAND, MAINE

41 Park St, unit 2
88-K-52

030651

Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee $25. Zone _____ Map # _____ Lot# _____

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

Owner: Jenny Ruth Yasi Phone # 766-2604

Address: 7 Central Ave Ext. - Peaks Island, ME 04108

LOCATION OF CONSTRUCTION 7 Central Ave Ext- Peaks Isl

Contractor: _____ Sub.: _____

Address: _____ Phone # _____

Est. Construction Cost: _____ Proposed Use: 1-fam w home occp

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 Change of Use - from 1-family to 1-family with home occupation (Herbal crafts)

For Official Use Only

Date 7/28/93

Inside Fire Limits _____

Bldg Code _____

Time Limit _____

Estimated Cost _____

Subdivision: _____

Name _____

Lot _____

Ownership: _____ Public _____

PERMIT ISSUED

JUL 30 1993

CITY OF PORTLAND

Zoning:

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) _____

7-29-93

HISTORIC PRESERVATION

~~Not in District nor Landmark~~

~~Does not require review~~

~~Requires Review~~

Approved

Approved with Conditions

Denied

Date: 7/29/93

Signature: _____

88 X 52

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 _____
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 _____

Interior Walls:

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

PERMIT ISSUED WITH RECOMMENDATIONS

Ceiling:

1. Ceiling Joists Size: _____
2. Ceiling Strapping Size _____ Spacing _____
3. Type Ceilings: _____
4. Insulation Type _____ Size _____
5. Ceiling Height: _____

Roof:

1. Truss or Rafter Size _____ Spacing _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____

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 PERMIT ISSUED WITH RECOMMENDATIONS Date _____

Signature of Applicant Ruth Yasi Date 7/28/93

Jenny Ruth Yasi

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor Yellow-GPCOG White Tag-CEO

PLOT PLAN

N

FEES (Breakdown From Front)

Base Fee $ 25 -

Subdivision Fee $

Site Plan Review Fee $

Other Fees $

(Explain)

Late Fee $

Inspection Record

Type	Date
OK Above	7/28/93
	/ /
	/ /
	/ /
	/ /

COMMENTS

Signature of Applicant Amy Ruth Yazi

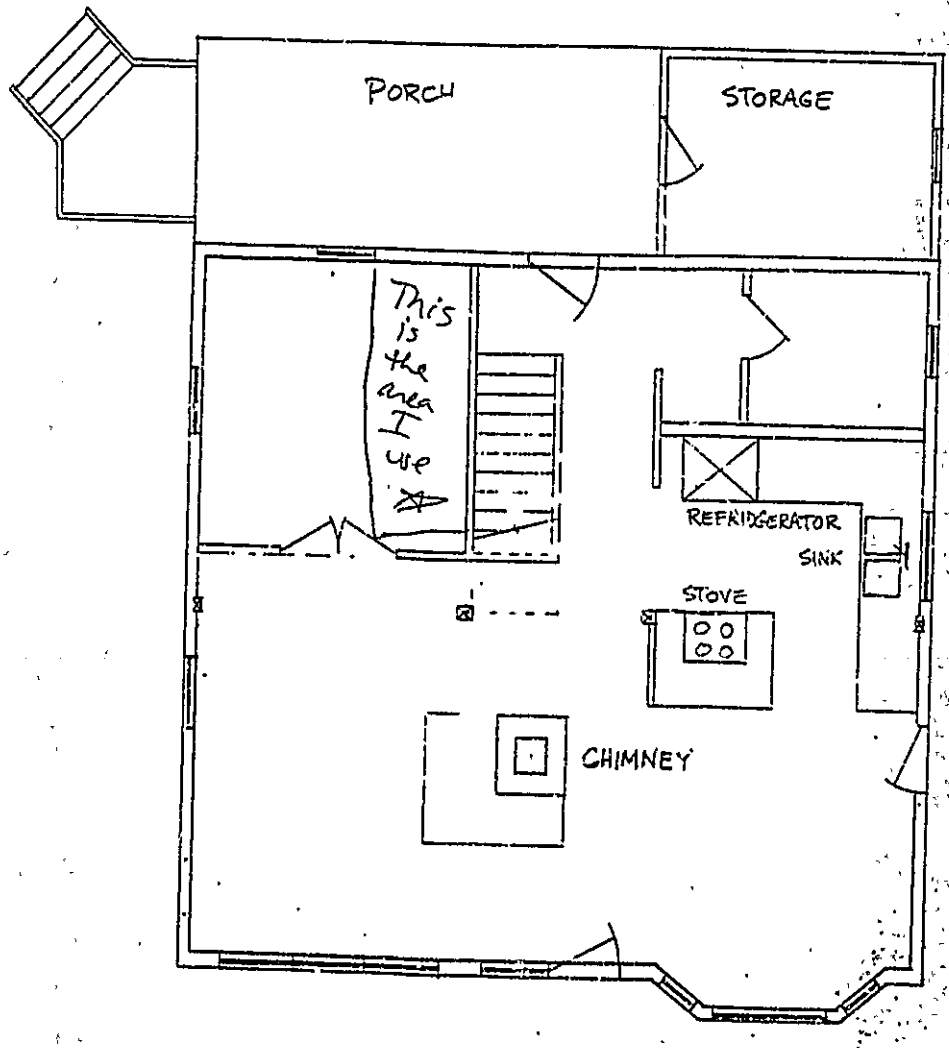
Date July 28, 93

Island Herbalist

I make and sell wholesale (to the Good Day Market, Peaks Island Mercantile, Condom Sense, Basics, Natural Grocer) a small number of a variety of herbal products including wreaths, potpourri, infused skin oils, lip balm, extracts (ie. 'Soup Herb' extract, etc.), herbal vinegars, dry tea blends, herbal bath blends.

I hope in the next year to begin making some catalog sales, which might also include herbal books. My business requires no additional parking, no modifications of our home. I have planted a large herb garden close to my house, which supplies wreathmaking materials.

Jenny Ruth Yasi
7 Central Ave. Ext.
Peaks Island, Maine 04108



N

FIRST FLOOR PLAN

0 4 8