

SEASHORE AVENUE
89-1-8

PEAKS ISLAND





APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. 1
Portland, Maine, May 5, 1983

PERMIT ISSUED

MAY 6 1983

CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 82-990 relating 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 Lot 89-H-6 Seashore Ave. Peaks Isl. Within Fire Limits? Dist. No.

Owner's name and address John Ericksen - 14 Kendall St. Gardner, Mass. Telephone

Lessee's name and address Telephone

Contractor's name and address Jackson & Casey - Peaks Island Telephone 766-2817

Architect Plans filed No. of sheets

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

Last use No. families

Increased cost of work 30,000 Additional fee 160.00

Description of Proposed Work

To increase cost of work, original permit applied for on 10-15-82

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 of ing

No. of chimneys Material of chimneys Dressed or full size?

Framing lumber - Kind Sills Girt or ledger board? Size

Corner posts Columns under girders Size Max. on centers

Girders Size 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:

Signature of Owner Edward J. Casey

Approved: Inspector of Buildings

FILE COPY



CITY OF PORTLAND

JOSEPH E. GRAY, JR.
DIRECTOR OF PLANNING
AND URBAN DEVELOPMENT

OK
BY *Adelstein*
DATE *5-5-83*

May 5, 1983

Jackson & Casey Company
Island Avenue
Peaks Island, Maine 04108

Re: 89-H-8 Seashore Avenue, Peaks Island

Dear Sir:

You have been issued a permit to complete construction at the above address. The amount of contractual cost, estimated on the permit application, seems very low as to the extent of work completed at this time.

It is therefore necessary for you to file an amendment to your permit which shows a true estimated contractual cost, from \$45,000 to \$75,000.

Failure to abide with this request could necessitate a \$100.00 belated fee and a fine of from \$50.00 to \$1,000.00 per day. Please take care of this matter as soon as possible.

Yours truly,

P. Samuel Hoffes
Chief of Inspection Services

Code Enforcement Officer -



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION

00900

OCT 15 1982

ZONING LOCATION

PORTLAND, MAINE Oct. 12, 1982

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

89-4-6 Seashore Ave. Del.

CITY OF PORTLAND

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

LOCATION Fire District #1 , #2

1. Owner's name and address John Erickson - 14 Kenhill St. Garder, Mass. Telephone

2. Lessee's name and address Telephone

3. Contractor's name and address Jackson & Casey - Peaks Island Telephone 765-2417

No. of sheets 1

Proposed use of building Well - year round No. families

Last use No families

Material No stories Heat Style of roof Roofing

Other buildings on same lot 45,000

Estimated contractual cost \$ Appeal Fees \$

FIELD INSPECTOR - Mr. @ 775-5451 Base Fee 275.00

To construct 46' x 24' 1 story, single family dwelling, no garage as per plans, 10 sheets of plans.

Late Fee 235.00

TOTAL \$

Stamp of Special Conditions

send permit to # 3 0/108

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? yes Is any electrical work involved in this work? yes
Is connection to be made to public sewer? no If not, what is proposed for sewage?
Has septic tank notice been sent? septic tanks Form notice sent?
Height average grade to top of plate 46 Height average grade to top of curb 12
Size, front depth Post No. stories solid or filled land? earth or roof?
Material of foundation brick Thickness top bottom cellars asphalt shingles
Kind of roof 1 Rise per foot brick Roofing elec
No. of chimneys spruce Material of chimneys of lining Kind of heat fuel 8 x 10
Framing Lumber - Kind Dressed or full size? Corner posts 4 x 6 Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2 x 4-16" O. C. Bridging in every floor and flat roof span over 8 feet 2 x 8
Joists and rafters: 1st floor 16 2nd 3rd roof 16
On centers: 1st floor 2nd 3rd roof
Maximum span: 1st floor 2nd 3rd roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS
BUILDING INSPECTION - PLAN EXAMINER Will work require disturbing of any tree on a public street?
ZONING Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?
BUILDING CODE:
Fire Dept
Health Dept
Others:

Signature of Applicant Edward Casey for Phone #

Type Name of above Jackson & Casey 1 2 3 4

Other and Address



FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

Issued to **John Erickson** LOCATION **Lot 69-E-8 Seashore Ave. Peaks Island**
Date of Issue **July 12, 1983**

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. 82-900, 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

Limiting Conditions:
Entire

Single Family Dwelling

This certificate supersedes
certificate issued

Approved:

7-12-83
(Date)

William Abbott
Inspector

[Signature]
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 AMENDMENT TO PERMIT

PERMIT ISSUED

Amendment No. 1

Portland, Maine, May 5, 1983

MAY 6 1983

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

CITY OF PORTLAND

The undersigned hereby applies for amendment to Permit No. 82-90 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: Lot 89-H-8 Seashore Ave. Peaks Isl. Within Fire Limits? Dist. No.

Owner's name and address: John Erickson - 14 Kendall St. Gardner, Mass. Telephone

Lessee's name and address: Telephone

Contractor's name and address: Jackson & Casey - Peaks Island Telephone

Architect: Telephone 766-2817

Proposed use of building: dwelling - year round Plans filed No. of sheets

Last use: No. families 1

Increased cost of work: 30,000 No. families

Additional fee: 160.00

Description of Proposed Work

To increase cost of work, original permit applied for on 10-15-82.

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?

Girders Size Columns under girders Size

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. M. O'Dette
 INSPECTOR COBY

Signature of Owner Edmond Casey
 Approved:
 Inspector of Buildings

APPLICATION FOR PERMIT

PERMIT ISSUED

OCT 15 1932

B.O.C.A. USE GROUP 00900

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION .. R-3 PORTLAND, MAINE Oct 12, 1932

CITY OF PORTLAND

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

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

LOCATION Lot 83-H-8 Seashore Avenue, Peaks Island Fire District #1 , #2

1. Owner's name and address John Brickson - 14 Kendall St. Gardner, Mass Telephone

2. Lessee's name and address

3. Contractor's name and address Jackson & Casey - Peaks Island Telephone ... 766-2817

Proposed use of building dwelling - year round No. of sheets

Last use

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 45,000

FIELD INSPECTOR-Mr. @ 775-5451

Appeal Fees \$

Base Fee 235.00

Latc Fee

TOTAL \$ 235.00

To construct 46' x 24' 1 story, single family dwelling, no garage as per plans. 10 sheets of plans.

Stamp of Special Conditions

send permit to # 3 04108

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? yes Is any electrical work involved in this work? yes
Is connection to be made to public sewer? no If not, what is proposed for sewage?
Has septic tank notice been sent? septic tanks Form notice sent?
Height average grade to top of plate ... Height average grade to highest point of roof ...
Size, front 24 depth 46 No. stories 1 solid or filled land? solid ledge earth or rock? rock
Material of foundation post Thickness, top 12" Latom cellar crown space
Kind of roof pitch Rise per foot 5/12 Roof covering asphalt shingles
No. of chimneys 1 Material of chimney brick tile Kind of heat elec fuel
Framing lumber-Kind spruce Dressed or full size? Corner posts 4 x 6 Sills 6 x 10
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor 2 x 10, 2nd 3rd roof 2 x 8
On centers: 1st floor 16, 2nd 3rd roof 16
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

APPROVALS BY:

DATE

MISCELLANEOUS

BUILDING INSPECTION-PLAN EXAMINER

ZONING: O.H. M.C.P. 10/12/32

BUILDING CODE:

Fire Dept.:

Health Dept.:

Others: G.K. 1932

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.

Signature of Applicant Edward Casey Phone # same

Type Name of above Jackson & Casey for 1 2 3 4

Other address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY

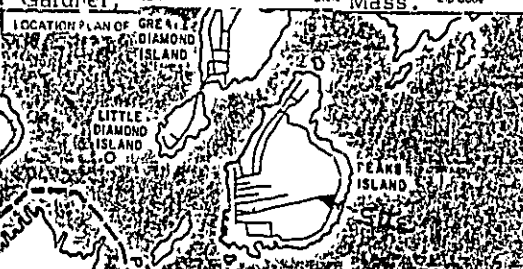
Handwritten signature of field inspector

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

HHE-200

This is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Page 1 of 2

This Application is For <input checked="" type="checkbox"/> New System <input type="checkbox"/> Replacement Of Entire System <input type="checkbox"/> Expanded System <input type="checkbox"/> Replacement Of Disposal Area Only <input type="checkbox"/> Conversion Permit		Valance <input type="checkbox"/> None Required <input type="checkbox"/> Replacement System Variance With LPI Approval <input type="checkbox"/> New System Variance <input type="checkbox"/> Dept. Review	
PROPERTY LOCATION Peaks Island, Town, Plantation		Seashore Street, Road Ave. PORTLAND ASSESSORS MAP 89 Subdivision Name BLK H # 6 Lot No	
PROPERTY OWNER or APPLICANT John Erickson		TYPE OF STRUCTURE, DESIGN FLOW! <input checked="" type="checkbox"/> Single Family Dwelling Number of Bedrooms 3 Design Flow 335 GPD Design Flow based on <input type="checkbox"/> Minimum <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Conservative <input type="checkbox"/> Reduction in Design Flow due to Water Conservation If so, specify type (s) _____	
Building Address 14 Kendall Street, Street Tel No (1140)		<input type="checkbox"/> Other Establishment Specify _____ Type of Facility _____ (Number of Employees, Seating Capacity, Building Size, etc.) Design Flow _____ GPD If greater than 2000 GPD Specify Professional Engineer	
Gardner, Town State Mass. Zip Code _____ 		PROPERTY INFORMATION Area of Property 28,655 <input type="checkbox"/> Sq Ft <input type="checkbox"/> Acres <input type="checkbox"/> Zoned <input type="checkbox"/> Not Zoned If zoned type of zoning RESIDENTIAL Property on Water Body, If so Name of Water Body OCEAN (HUSSEY SOUND) Water Supply is <input checked="" type="checkbox"/> Public Utility <input type="checkbox"/> Drilled Well _____ depth <input type="checkbox"/> Cng Well _____ depth <input type="checkbox"/> V ell Point <input type="checkbox"/> Sewing <input type="checkbox"/> Surface Water	

SOIL PROFILE DESCRIPTION Location of Observation Holes shown on page 2			
TEXTURAL DESCRIPTION OF EACH SOIL STRATA ENCOUNTERED	Observation Hole No 1 <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring	Observation Hole No 2 <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring	Observation Hole No _____ <input type="checkbox"/> Test Pit <input type="checkbox"/> Boring
	Organic Strata or (Existing Fill) Top Soil Thickness 3	Organic Strata or (Existing Fill) Top Soil Thickness 3	Organic Strata or (Existing Fill) _____ Thickness _____
	1st Original Mineral Soil Strata Dark Brown Gravelly Loam Depth from 0 to 10 Thickness 10	1st Original Mineral Soil Strata Dark Brown Gravelly Loam Depth from 0 to 7 Thickness 7	1st Original Mineral Soil Strata _____ Depth from _____ to _____ Thickness _____
	2nd Dark Red Loam Gravelly Loam Depth from 10 to 22 Thickness 12	2nd Dark Red Loam Gravelly Loam Depth from 7 to 19 Thickness 12	2nd _____ Depth from _____ to _____ Thickness _____
	3rd Yellow Brown Gravelly Loam Depth from 22 to 29 Thickness 7	3rd Yellow Brown Gravelly Loam Depth from 19 to 28 Thickness 9	3rd _____ Depth from _____ to _____ Thickness _____
	4th Yellow Brown Silty Gravelly Depth from 29 to 43+ Thickness 19+	4th Yellow Brown Silty Gravelly Depth from 28 to 40 Thickness 12	4th _____ Depth from _____ to _____ Thickness _____
1st Depth of Observation Hole 48	Total Depth of Observation Hole 40	Total Depth of Observation Hole _____	
Depth from top of ORIGINAL MINERAL SOIL	Maximum Seasonal High Ground Mottling <input type="checkbox"/> None evident Water Table Depth 34	Maximum Seasonal High Ground Mottling <input type="checkbox"/> None evident Water Table Depth 30	Maximum Seasonal High Ground _____ <input type="checkbox"/> None evident Water Table Depth _____
Depth to Restrictive Layer <input type="checkbox"/> None evident	Depth to Restrictive Layer <input checked="" type="checkbox"/> None evident	Depth to Restrictive Layer <input type="checkbox"/> None evident	
Depth to Bedrock <input type="checkbox"/> None evident	Depth to Bedrock 52	Depth to Bedrock 40	Depth to Bedrock <input type="checkbox"/> None evident
PROFILE 2 CONDITION 6 SLOPE 5%	PROFILE 2 CONDITION C SLOPE 10%	PROFILE _____ CONDITION _____ SLOPE _____%	

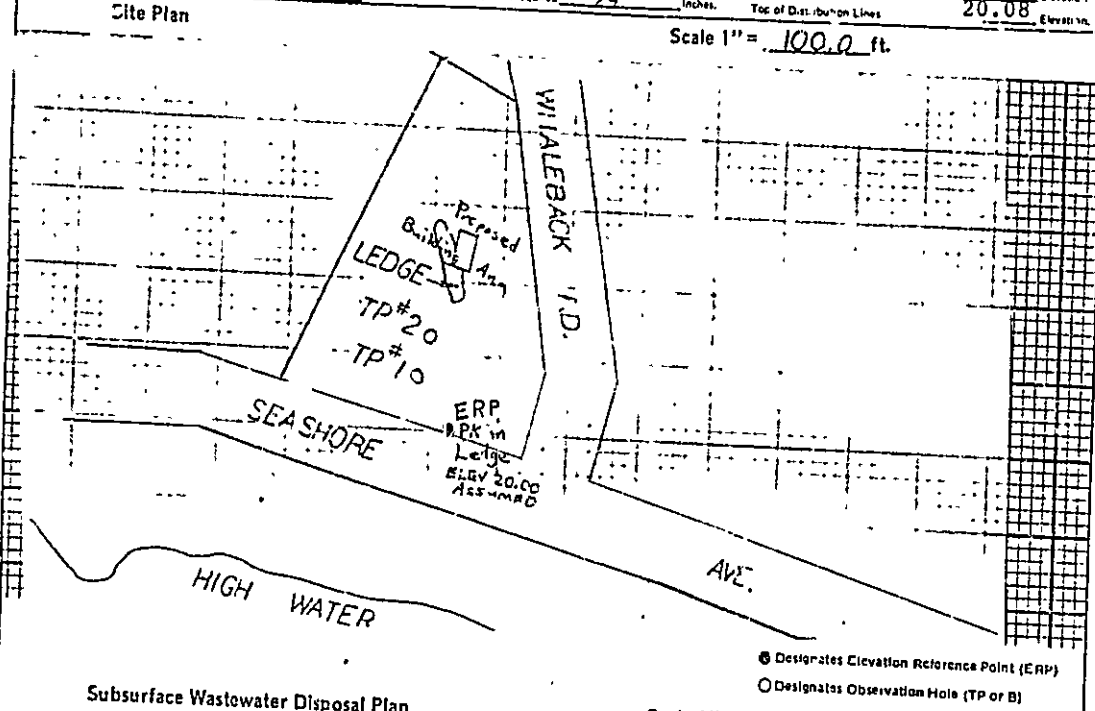
DISPOSAL SYSTEM PROPOSED Location of system and Details on Proposed Plan on page 2			
TYPE OF SYSTEM <input checked="" type="checkbox"/> Combined System <input type="checkbox"/> Separated System If separated system, type of black waste disposal system to be used <input type="checkbox"/> Compost <input type="checkbox"/> Pit Privy <input type="checkbox"/> Eased Vault Privy <input type="checkbox"/> Other: _____ Specialty: <input type="checkbox"/> Separated Laundry System <input type="checkbox"/> Primitive System <input type="checkbox"/> Holding Tank	TREATMENT TANK <input type="checkbox"/> Septic Tank <input type="checkbox"/> Aerobic Tank Size 1,000 Gals. DOSAGE <input checked="" type="checkbox"/> Pumping is not required <input type="checkbox"/> Pumping is required The dose should be _____ # Dosage chamber capacity shall be _____ Gals. <input checked="" type="checkbox"/> System should be vented	SUBSURFACE DISPOSAL AREA *% <input type="checkbox"/> Trench Disposal Area Total linear feet of trench _____ ft Number of Trench lines _____ ft Length of each trench line _____ ft Depth of Stone _____ inches Reduction on trench length due to stone depth _____ % <input checked="" type="checkbox"/> Bed Disposal Area Total bed area 1,000 sq. ft Number of beds 1 Width 20 ft Length 50 ft <input type="checkbox"/> Chamber Disposal Area Total chamber area _____ sq. ft Number of chambers _____ Width _____ ft Length _____ ft <input type="checkbox"/> H 20 required	SYSTEM SIZE RATING <input type="checkbox"/> Small <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Large <input type="checkbox"/> Extra Large DISPOSAL AREA ELEVATION Depth of Upper a Foot required 5 inches Depth of Disposal Fill required 29 inches Reference Elevation Point established at 20.00 Elevation Lowest Area Bottom to be established at 19.00 Elevation Top of Distribution Lines or Top of Chambers 20.08 Elevation * Yes <input type="checkbox"/> No: The proposed subsurface disposal area will be located at least 100 feet from any and all wells, springs, surface water bodies and courses (lake, pond, ocean, brook stream, river), swamps, marshes, and bogs * Yes <input checked="" type="checkbox"/> No: The proposed subsurface disposal area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies

FOR USE BY SITE EVALUATOR On 8/26/79 (Date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the above type and size of subsurface wastewater disposal system. I also rec... and the proposed disposal system layout (Location of own on page 2)	Signature of Site Evaluator <i>William B. Goodwin</i> Date signed May 18, 1982 Site Evaluator License Number 00003
FOR USE BY OWNER/APPLICANT I certify that all the information submitted to be true and correct to the best of my knowledge. I understand that any falsification of this application is reason to deny a permit to install a disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I also understand that no guarantee is intended or implied by reason of any advice or approval given.	Signature of Owner/Applicant <i>John Erickson</i> Date signed May 20, 1982 PERMIT NO. _____ E Date Issued 1/8 HHE 200 RV/80
FOR USE BY LPI: This Application is approved if conditions specify. <input type="checkbox"/> This Application is denied due to: <input type="checkbox"/> System is not in accordance with Rules <input type="checkbox"/> Application is incomplete <input type="checkbox"/> Application is unclear <input type="checkbox"/> Development is in violation of other Regulations, etc.	Signature of LPI <i>Smallwood</i> Date 5/21/82

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

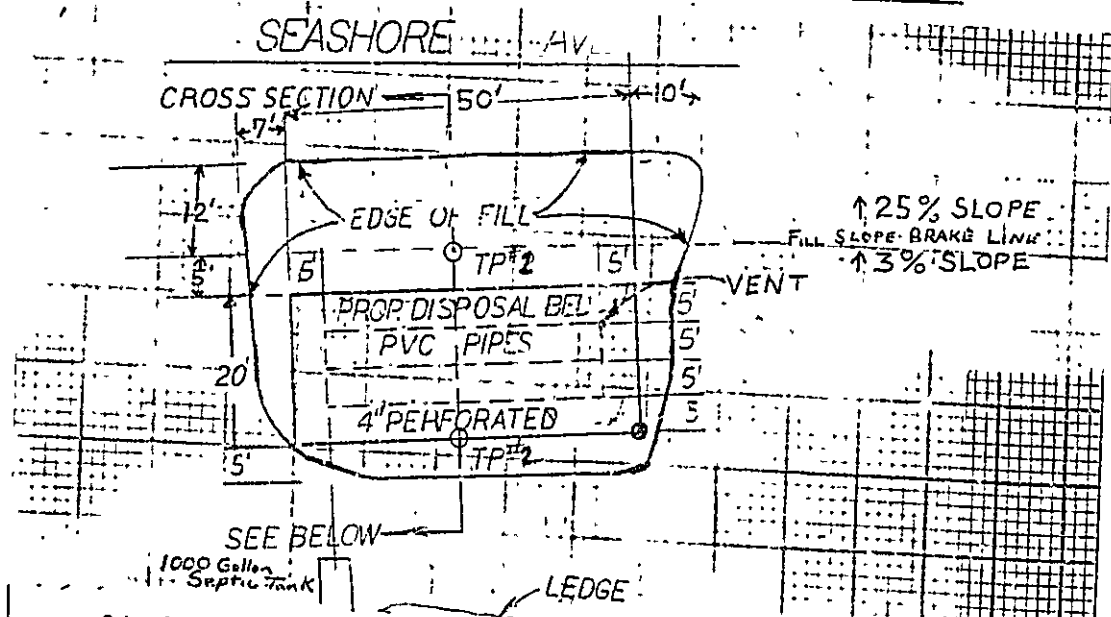
Page 2 of 2

PROPERTY LOCATION PORTLAND, PEAKS ISLAND Town, Plan/Zone		SEASHORE Street Road AVE.		PORTLAND ASSES. MAP 89 LOT #8	
PROPERTY OWNER or APPLICANT JOHN ERICKSON		DISPOSAL AREA ELEVATION		Subdivision Name BTK H	
		Depth of Upslope Fill required <u>5</u> inches.		Reference Elevation Point established at <u>20.00</u> Elevation.	
		Depth of Downslope Fill required <u>29</u> inches.		Disposal Area Bottom to be established at <u>19.00</u> Elevation.	
				Top of Distribution Lines <u>20.08</u> Elevation.	

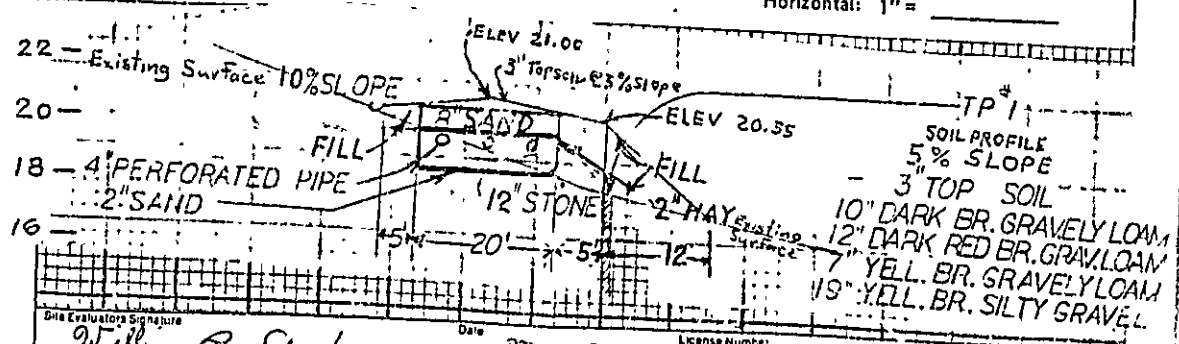


Subsurface Wastewater Disposal Plan

Scale 1" = 20' or _____



Subsurface Wastewater Disposal Area Cross-section



Die Evaluator Signature: William B. Goodwin Date: May 18, 1982 License Number: 0003

CERTIFICATE OF APPROVAL

FOR WASTEWATER DISPOSAL FOR THE TOWN/CITY OF Portsmouth

Town/City Code: 0477 LPI Number: 00123 Date Issued: 13 21 82
 Month Day Year

37473 EC
 Certificate of App. Number

Installer's Name: CAISEY F.I.M.I. EL

Installer Code: 3
 1. Owner
 2. Builder
 3. Installer
 4. Developer
 5. Realtor
 6. Other

Owner: J. J. Robinson

Address: 87-113 Washburn Circle
 Location where system was installed and inspected.

THE SUBSURFACE WASTEWATER DISPOSAL SYSTEM OR COMPONENT(S) INSTALLED PURSUANT TO THE ABOVE CERTIFICATE OF APPROVAL NUMBER HAS BEEN PERSONALLY EXAMINED AND HAS BEEN PROPERLY INSTALLED IN COMPLIANCE WITH THE MUNICIPAL AND STATE SUBSURFACE WASTEWATER DISPOSAL RULES AND THE HHE-200 FORM PERFORMED BY

00003 ON 5 21 82
 (Site Evaluator Number) Month, Day, Year

Signature of LPI: Franklin J. Goodwin

Date Inspected: AUG 25 1982

TOWN'S COPY

SUBSURFACE WASTEWATER DISPOSAL PERMIT FOR THE TOWN/CITY OF Portsmouth

Town/City Code: 0477 LPI Number: 00123 Date Issued: 13 21 82 Evaluator Number: 00123
 Month Day Year

37473 EP
 PERMIT NUM. & Code

Address of System's Location: 87-113 WASHBURN AVENUE

Issue Code: 3
 1. Owner
 2. Builder
 3. Installer
 4. Developer
 5. Realtor
 6. Other

Name of Owner: ROBINSON F.I.M.I. 14
 Last Name F.I.M.I.

Mailing Address: 14 Washburn Circle Zip Code: 03801

Permit Issuance	1. No Variance Required	2. Replacement Variance	3. New System Variance	4. Local Site Evaluation Waiver Option	<input checked="" type="checkbox"/>	
Type of System	1. New	2. Replacement	3. Expansion	4. Experimental	5. Engineered	<input checked="" type="checkbox"/>
Replacement or Malfunction	If system is being replaced or is a malfunction, enter year of original system installation				<input type="text"/>	
System to Serve	1. Single (Res)	3. Mobile Home	5. Commercial	7. Other (Specify)	<input type="text"/>	
Complete System	1. Bed	2. Chamber	3. Special System (includes one waterless toilet)	4. Other (Specify)	5. Trench	<input type="text"/>
Settlement Tank ONLY	1. Septic	2. Aerobic	3. Holding	<input type="text"/>		
Disposal Area ONLY	1. Bed	2. Chamber	3. Laundry Waste	4. Other (Specify)	<input type="text"/>	
Waterless Toilets	1. Pit Privy	2. Vault Privy	3. Compost Toilet	4. Other (Specify) (\$10 each)	<input type="text"/>	
LPI to Insert Profile (S) <input type="checkbox"/> Soil Condition (L) <input type="checkbox"/>					Total Fee <u>40.00</u>	

TOWN'S COPY

IMPORTANT: Note the following conditions:
 1. This Permit is non-transferable to another person or party.
 2. If construction has not started within 6 months from the Date of Issue, this Permit becomes invalid.

If Double Fee Check () Box

Signature of LPI

HHE-210 RV 7/80

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

This is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

This Application is For: New System Replacement of Entire System Expanded System Replacement of 1 or 2 Sumps Conversion Permit

Variance: None Required Replacement system via 400 GPD LPI Approval Dept Review New System Variance

PROPERTY LOCATION: **PORTLAND**
Peaks Island, Town, Plantation
Seashore Street, Road, Ave. **PORTLAND ASSESSORS**
MAP 89 Subdivision Name **BLK H** # 6 Lot No

PROPERTY OWNER OR APPLICANT: **John Erickson**

Mailing Address: **14 Kendall Street** Street
Tel No: **01440**

Gardner, Town, State **Mass.**, Zip Code

TYPE OF STRUCTURE, DESIGN FLOW
 Single Family Dwelling Number of Bedrooms **3** Design Flow **335** GPD
Design Flow based on: Minimum Moderate Conservative
 Reduction in Design Flow due to Water Conservation
If so, specify type (s) _____
 Other Establishment Specify _____ Type of Facility _____
(Number of Employees Seating Capacity, Built Size etc)
Design Flow _____ GPD If greater than 2000 GPD Specify Professional Engineer

PROPERTY INFORMATION
Area of Property **28,655** Sq Ft Acres Zoned Not Zoned
If zoned, type of zoning **RESIDENTIAL**
Property on Water Body (i.e. Name of Water Body) **OCEAN (HUSSEY SOUND)**
Water Supply is: Public Utility Drilled Well _____ depth
 Dug Well _____ depth Well Point Spring Surface Water

SOIL PROFILE DESCRIPTION Location of observation Holes shown on page 2

TEXTURAL DESCRIPTION OF EACH SOIL STRATA ENCOUNTERED	Observation Hole No. 1		Observation Hole No. 2		Observation Hole No. 3	
	Test Pit	Boring	Test Pit	Boring	Test Pit	Boring
Organic Strata or (Existing Fill) Top Soil Thickness 3			Organic Strata or (Existing Fill) Top Soil Thickness 3		Organic Strata or (Existing Fill) _____ Thickness _____	
1st Original Mineral Soil Strata Dark Brown Gravelly Loam Depth from 0 to 10' Thickness 10'			1st Original Mineral Soil Strata Dark Brown Gravelly Loam Depth from 0 to 7' Thickness 7		1st Original Mineral Soil Strata _____ Depth from 0 to _____ Thickness _____	
2nd Dark Red Brown Gravelly Loam Depth from 10 to 22' Thickness 12			2nd Dark Red Brown Gravelly Loam Depth from 7 to 19' Thickness 12		2nd _____ Depth from _____ to _____ Thickness _____	
3rd Yellow Brown Gravelly Loam Depth from 22 to 29' Thickness 7			3rd Yellow Brown Gravelly Loam Depth from 19 to 28' Thickness 9		3rd _____ Depth from _____ to _____ Thickness _____	
4th Yellow Brown Silty Gravel Depth from 29 to 48+ Thickness 19+			4th Yellow Brown Silty Gravel Depth from 28 to 40' Thickness 12		4th _____ Depth from _____ to _____ Thickness _____	
Total Depth of Observation Hole 48			Total Depth of Observation Hole 40		Total Depth of Observation Hole _____	
Maximum Seasonal High Ground Mottling <input type="radio"/> None evident Water Table Depth 34			Maximum Seasonal High Ground Mottling <input type="radio"/> None evident Water Table Depth 30		Maximum Seasonal High Ground _____ <input type="radio"/> None evident Water Table Depth _____	
Depth to Restrictive Layer <input checked="" type="radio"/> None evident			Depth to Restrictive Layer <input checked="" type="radio"/> None evident		Depth to Restrictive Layer <input type="radio"/> None evident	
Depth to Bedrock <input type="radio"/> None evident			Depth to Bedrock <input type="radio"/> None evident		Depth to Bedrock <input type="radio"/> None evident	
PROFILE 2 CONDITION 6 SLOPE 5%			PROFILE 2 CONDITION C SLOPE 10%		PROFILE _____ CONDITION _____ SLOPE _____%	

DISPOSAL SYSTEM PROPOSED Location of system and Details on Proposed Plan on page 2

TYPE OF SYSTEM: Combined System Separate System

TREATMENT TANK: Septic Tank Aerobic Tank Size **1,000** Gals

SUBSURFACE DISPOSAL AREATYPE: Trench Disposal Area Bed Disposal Area

SYSTEM SIZE RATING: Small Medium Medium Large Large Extra Large

DISPOSAL AREA ELEVATION: **5** inches
Depth of Upslope Fill required: **29** inches
Reference Elevation Point established at: **20.00** Elevation
Disposal Area Bottom to be established at: **19.00** Elevation
Top of Distribution Lines or Top of Chambers: **20.08** Elevation

Yes No The proposed subsurface disposal area will be located at least 100 feet from any and all wells, springs, surface water bodies and courses (lake, pond, ocean, brook, stream, river), swamps, marshes, etc., bogs

Yes No The proposed subsurface disposal area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies

FOR USE BY LPI EVALUATOR
On **8/26/75** date, a site investigation for this project was completed. I conducted the evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the above type and size of subsurface wastewater disposal system. I also recommend the proposed disposal system layout and location shown on page 2.

Signature of LPI Evaluator: **William B. Gardiner** License Number: **00003**
Date signed: **May 18, 1975**

FOR USE BY OWNER/APPLICANT
I certify that all the information submitted to be true and correct to the best of my knowledge. I understand that by this location of this application is reason to deny a permit to install a disposal system and that the permit is valid for a 12 month period from the date of permit issuance. I also understand that no guarantee is intended or implied by reason of any advice or approval given.

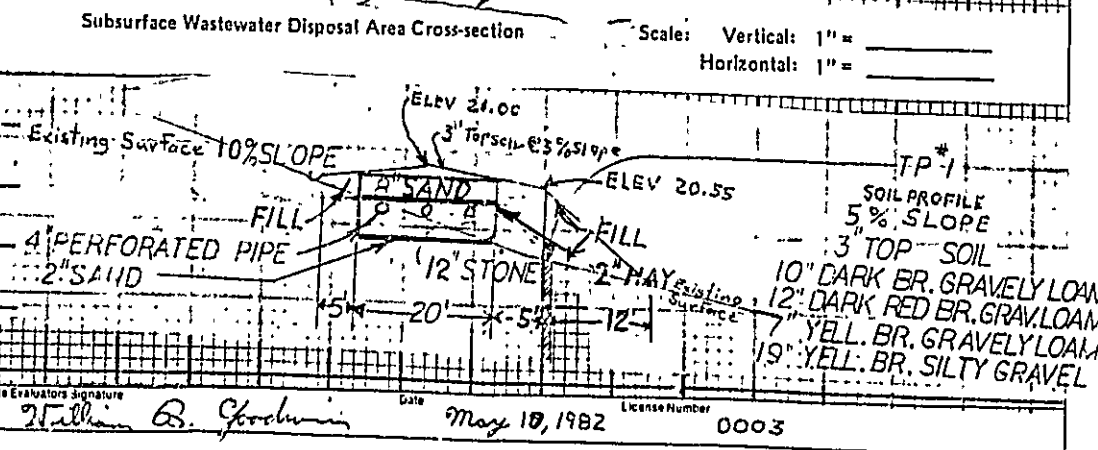
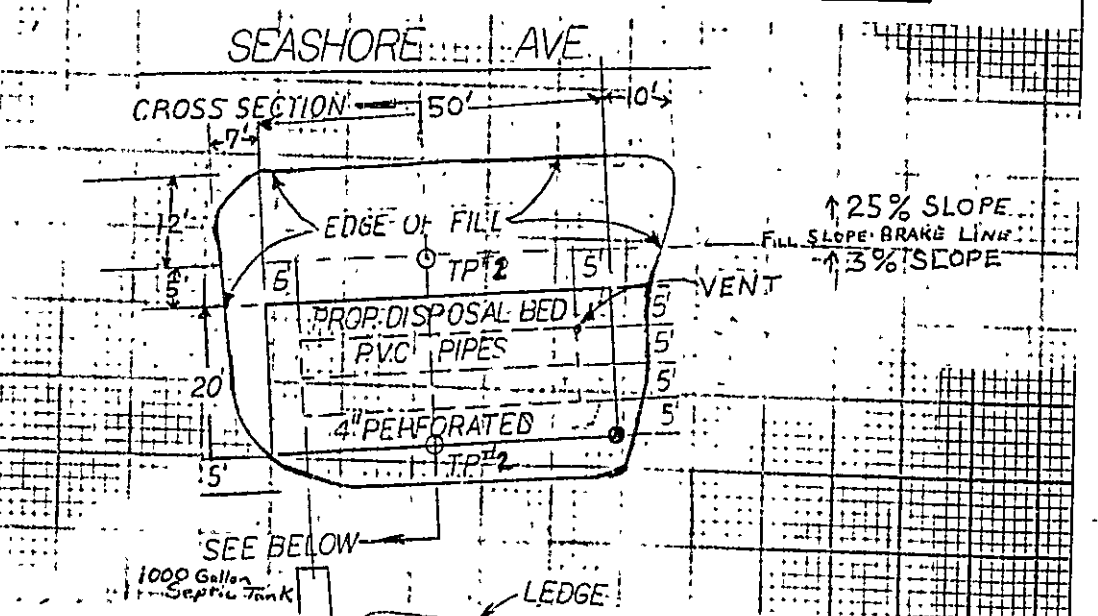
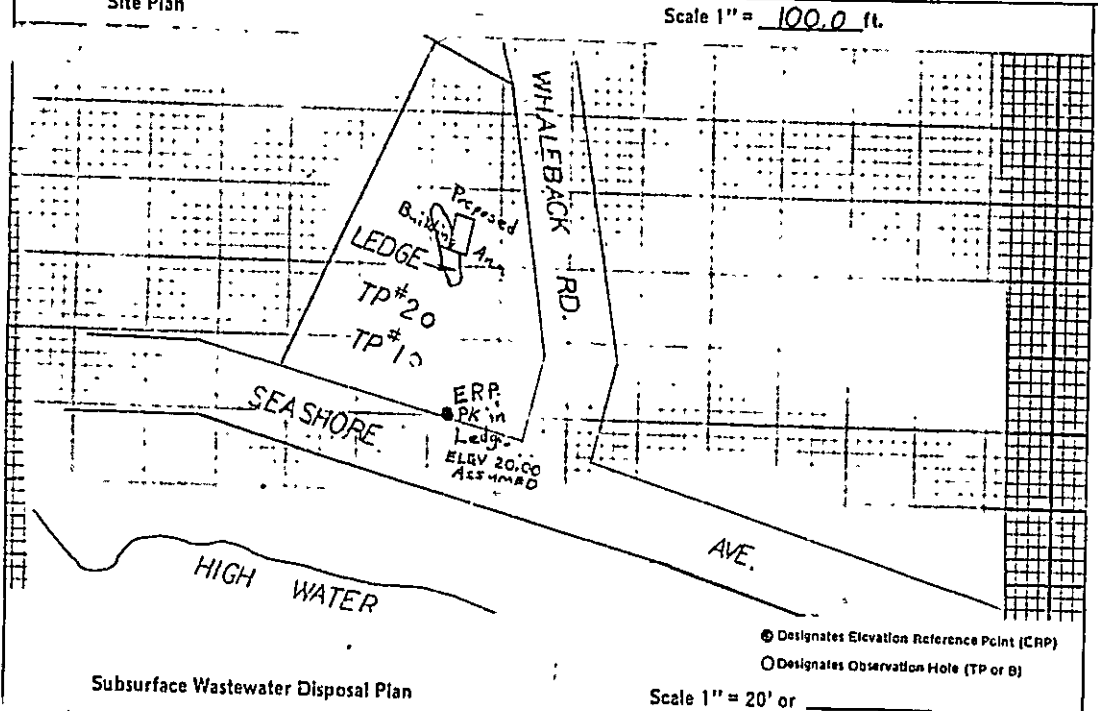
Signature of Owner/Applicant: **John Erickson**
Date: **5/21/75**

PERMIT NO. **1571953**
Date Issued: **1/18**

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

Page 2 of 2

PROPERTY LOCATION PORTLAND, PEAKS ISLAND Town, Plantation		SEASHORE Street Road AVE.		PORTLAND ASSES. MAP 89, LOT #8	
PROPERTY OWNER or APPLICANT JOHN ERICKSON		DISPOSAL AREA ELEVATION Depth of Upslope Fill required <u>5</u> inches. Depth of Downslope Fill required <u>29</u> inches.		Subdivision Name RLK H Rise since Elevation Point established at <u>20.00</u> Elevation. Disposal Area Bottom to be established at <u>19.00</u> Elevation. Top of Distribution Lines <u>20.08</u> Elevation.	



Site Evaluator's Signature: William B. Goodman Date: May 10, 1982 License Number: 0003

2-H-68



Location. Ownership and detail must be correct, complete and legible.
Separate application required for every building.
Plans must be filed with this application.

Application for Permit for Alterations, etc.

Portland, September 12, 1925

To the

INSPECTOR OF BUILDINGS:

The undersigned applies for a permit to alter the following described building:—

Location Seashore Avenue, Seaside, Oregon, Island Ward 1 in fire-limits 110
 Name of Owner or Lessee Robert L. Whitcomb Address 259 Woodford Street
 " " Contractor OWNER
 " " Architect
 Material of Building is wood Style of Roof pitch Material of Roofing asphalt
 Size of Building is 32ft feet long; 30ft feet wide. No. of Stories 1
 Cellar Wall is constructed of posts is inches wide on bottom and batters to inches on top.
 Underpinning is is inches thick; is feet in height.
 Height of Building 17ft Wall, if Brick; 1st 2d 3d 4th 5th
 What was Building last used for cottage No. of families 1
 What will Building now be used for cottage (one family)

Description of Present Bldg.

RECEIVED

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK

Detail of Proposed Work

put on asphalt roof over piazza all to comply with the building ordinance
 Estimated Cost \$ 100.

If Extended On Any Side

Size of Extension, No. of feet long; No. of feet wide; No. of feet high above sidewalk;
 No. of Stories high; Style of Roof; Material of Roofing;
 Of what material will the Extension be built; Foundation;
 If of Brick, what will be the thickness of External Walls inches; and Party Walls inches.
 How will the extension be connected? How connected with Main Building?

When Moved, Raised or Built Upon

No. of Stories in height when Moved, Raised, or Built upon; Proposed Foundations
 No. of feet high from level of ground to highest part of Roof to be built; Party Walls
 How many feet will the External Walls be increased in height?

If Any Portion of the External or Party Walls Are Removed

Will an opening be made in the Party or External Walls in story.
 Size of the opening; How protected;
 How will the remaining portion of the wall be supported?

Signature of Owner or Authorized Representative

Robert L. Whitcomb
259 Woodford St. Seaside, Ore.

Address

PERMIT TO INSTALL PLUMBING

Address 84-R-32 PERMIT NUMBER **2597**

Installation For one family

Owner of R^{ty} : Arthur Kollar

Owner's Address same

Plumber Patrick Dubois 21 New Rd. Scarborough Date: 7-11-83

NEW	REPL		NO.	FEE.
		SINKS		
x		LAVATORIES	3	9.00
x		TOILETS	3	9.00
x		BATH TUBS	1	3.00
		SHOWERS		
		DRAINS FLOOR SURFACE		
x		HOT WATER TANKS	1	9.00
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
		SEPTIC TANKS		
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
TOTAL				30.00

Date Issued 7-11-83
 in
 Portland Plumbing Inspector
 By ERNOLO P. GOODWIN

App. First Insp.
 Date 7-15-83
 By ERNOLO P. GOODWIN

Type of Bldg.

- Commercial
- Residential
- Single
- Multi Fam.
- New Construction
- Remodeling

Building and Inspection Services Dept.: Plumbing Inspection

CERTIFICATE OF APPROVAL
FOR INTERNAL PLUMBING

TOWN/CITY CODE
05170

LPI NUMBER
001123

DATE PERMIT ISSUED
4 12 83
Month Day Year

THE TOWN/CITY OF Portland

No. 71423 IC

Installer's Name
CASEY
F.I.M.I. Code
EPL

- Certificate of App. Number
- 1. Owner
 - 2. Licensed Master Plumber
 - 3. Licensed Oil Burner/Jan
 - 4. Employee of Public Utilities
 - 5. Manufactured Housing Dealer
 - 6. Manufactured Housing Mechanic
 - 7. Limited License

Owner James Erickson
Address 894-2 Washburn Ave. Portland
St./Lot Number Street, Road Name Subdivision
(Location where plumbing was done and inspected)

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

Emilio J. Gordin
Signature of LPI

OWNER'S COPY

Date Inspected JUL 12 1983

ORIGINAL—To be sent to: Department of Human Services
Division of Health Engineering

**CERTIFICATE OF APPROVAL
FOR INTERNAL PLUMBING**

THE TOWN/CITY OF Roseland

TOWN/CITY CODE 05170 LPI NUMBER 00123 DATE PERMIT ISSUED 4/28/83
Month Day Year

No 71423 IC
Certificate of App. Number

Installer's Name CASEY F I M I EL

Owner John ...
Address Box 8911 ...
St./Lot Number Street, Road Name Subdivision
(Location where plumbing was done and inspected)

- Installer Code 2
- 1. Owner
 - 2. Licensed Master Plumber
 - 3. Licensed Oil Burnerman
 - 4. Employee of Public Utility
 - 5. Manufactured Housing Dealer
 - 6. Manufactured Housing Mechanic
 - 7. Limited License

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

Arnold J. Goodwin
Signature of LPI

TOWN'S COPY

Date Inspected JUL 12 1983
ORIGINAL - To be sent to: Department of Human Services
Division of Health Engineering

INTERNAL PLUMBING PERMIT FOR THE TOWN/CITY OF

Roseland

Town/City Code 05170 LPI Number 00123 Date Issued 4/28/83 INSTALLER'S 1097
Month Day Year License No

No 71423 IP
PERMIT NUMBER

Address of Where Plumbing Is Done 8911-RS ...
St./Lot Number Street/Road Name Subdivision

Name of Owner ERIK ...
Last Name F I M I Mailing Address Zip Code

- Installer Code 2
- 1. Owner
 - 2. Licensed Master Plumber
 - 3. Licensed Oil Burnerman
 - 4. Employee of Public Utility
 - 5. Manufactured Housing Dealer
 - 6. Manufactured Housing Mech
 - 7. Limited License

Type of Construction	1. New	3. Addition	5. Replacement of Hot Water Heater	7. Hook-up of Modular Home		
	2. Remodeling	4. Remodeling & Addition	6. Hook-up of Mobile Home	8. Other (Specify) <u>1</u>		
Plumbing To Serve	1. Single (Res)	3. Mobile Home	5. Commercial	7. Other (Specify) <u>1</u>		
	2. Multi-Fam (Res)	4. Modular Home	6. School			
Number of Fixtures or Hook Ups	Sink(s) <u>1</u>	Toilet(s) <u>2</u>	Bathtub(s) <u>1</u>	Lavatories <u>3</u>	Shower(s) <u>1</u>	Urinal(s) <u>1</u>
	Clothes Washer(s) <u>1</u>	Dish-Washer(s) <u>1</u>	Hot Water Heater(s) <u>1</u>	Floor Drain(s) <u>1</u>	SLYR Hook Up(s) <u>1</u>	

TOWN'S COPY
MAY 4 1983

IMPORTANT: Note the following conditions
1. This Permit is non-transferable to another person or party.
2. If construction has not started within 6 months from the Date of Issue, this Permit becomes invalid.

Dept. of Human Services
Div. of Health Engineering

Fixture Fee 32.00
Hook Up Fee 0.00
Total Fee 32.00
If Double Fee Check Box

Signature of LPI _____ HME 211 Rev 7/80



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date April 11, 19 83
 Receipt and Permit number B 09725

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: 89-H- 8 Seashore Ave. Peaks Island
 OWNER'S NAME: John Erickson ADDRESS: 14 Kenfall St. Gardiner, Mass

OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL 31-60 FEES 5.00
~~5.00~~

FIXTURES: (number of) Incandescent 20 Fluorescent _____ (not strip) TOTAL 20 4.00
 Strip Fluorescent _____ ft. _____

SERVICES: Overhead x Underground _____ Temporary _____ TOTAL amperes 200 3.00

METERS: (number of) 1 _____ .50

MOTORS: (number of) Fractional 1 _____ .50
 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 _____ x _____ Water Heaters _____ x _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____ x _____
 Dryers _____ x _____ Compactors _____
 Fans _____ x _____ Others (denote) _____ x _____ 9.00
 TOTAL _____ 6.00

MISCELLANEOUS: (number of) Branch Panels _____
 Transformers _____
 Air Conditioners Central Unit _____
 Separate Units (windows) _____
 Signs 20 sq. ft. & 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 _____

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 28.00

INSPECTION: Will be ready on 4-12-83, 1983; or: Will Call _____
 CONTRACTOR'S NAME: Charles Mastroiua
 ADDRESS: 168 Veranda Street
 TEL.: _____
 MASTER LICENSE NO.: 2387 SIGNATURE OF CONTRACTOR: C. Mastroiua
 LIMITED LICENSE NO.: _____

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

13

APPLICATION FOR PERMIT

0847

PERMIT ISSUED
AUG 6 1985
City Of Portland

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

ZONING LOCATION PORTLAND, MAINE Aug. 5, 1985

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

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

LOCATION 89-H-8 Seashore Avenue, Peaks Island Fire District #1 #2
1. Owner's name and address John E. & Patricia Erickson - same Telephone
2. Lessee's name and address Telephone 503 Portland 04106
3. Contractor's name and address Elliott Chamberlain - 12 Ardsley Ave, Telephone XXXXXX
No. of sheets 773-3587

Proposed use of building No. families 1-fam.
Last use No. families same

Material No stories Heat Roofing

Other buildings on same lot

Estimated contractual cost \$ 5,000.00
FIELD INSPECTOR—Mr
@ 775-5451

Appeal Fees \$
Base Fee
Late Fee
TOTAL \$ 45.00

To construct 16' x 20' addition on left side of existing building, as per plan, for family room.

Stamp of Special Conditions

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work? ...yes.....
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber—Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor 2nd 3rd , roof
On centers: 1st floor 2nd 3rd , roof
Maximum span: 1st floor 2nd 3rd , roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE
BUILDING INSPECTION—PLAN EXAMINER
ZONING:
BUILDING CODE:
Fire Dept.:
Health Dept.:
Others:

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...

Signature of Applicant Phone #
Type Name of above Elliott Chamberlain 1 2 3 4
Other
and Address

APPLICATION FOR PERMIT

PERMIT

B.O.C.A. USE GROUP

0 847

AUG 6 1985

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION

R-3

PORTLAND, MAINE Aug. 5, 1985

City Of Portland

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

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

LOCATION 89-H-8 Seashore Avenue, Peaks Island Fire District #1 , #2

1. Owner's name and address John E. & Patricia Erickson - same Telephone

2. Lessee's name and address Telephone Portland 04106

3. Contractor's name and address Elliott Chamberlain - 12 Ardsley Ave Telephone ~~XXXXXX~~

..... No. of sheets 773-3587

Proposed use of building ... construct addition for family room No. families 1-fam.

Last use No families same

Material No. stories Heat Style of roof Roofing

Other buildings on same lot

Estimated contractual cost \$ 5,000.00. Appeal Fees \$

FIEL INSPECTOR - Mr. Base Fee

@ 775-5451

Late Fee

TOTAL \$ 45.00

To construct 16' x 20' addition on left side of existing building, as per plan, for family room.

Stamp of Special Conditions

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work? ..yes.....
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber—Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor 2nd 3rd roof
On centers: 1st floor 2nd 3rd roof
Maximum span: 1st floor 2nd 3rd roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

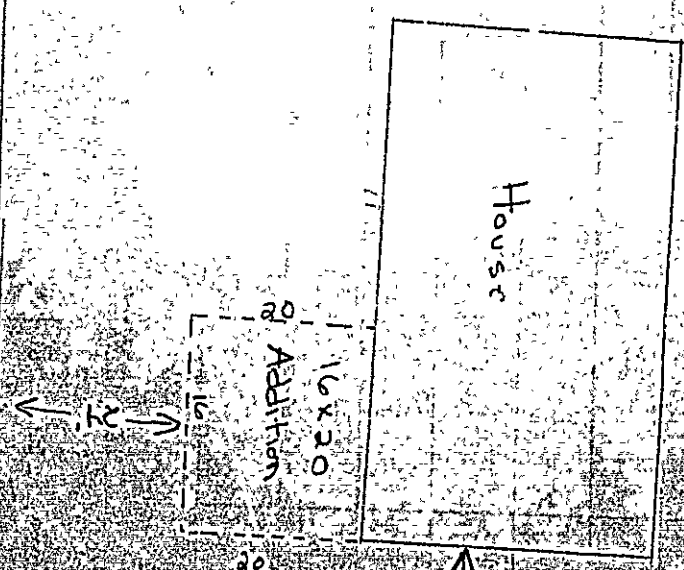
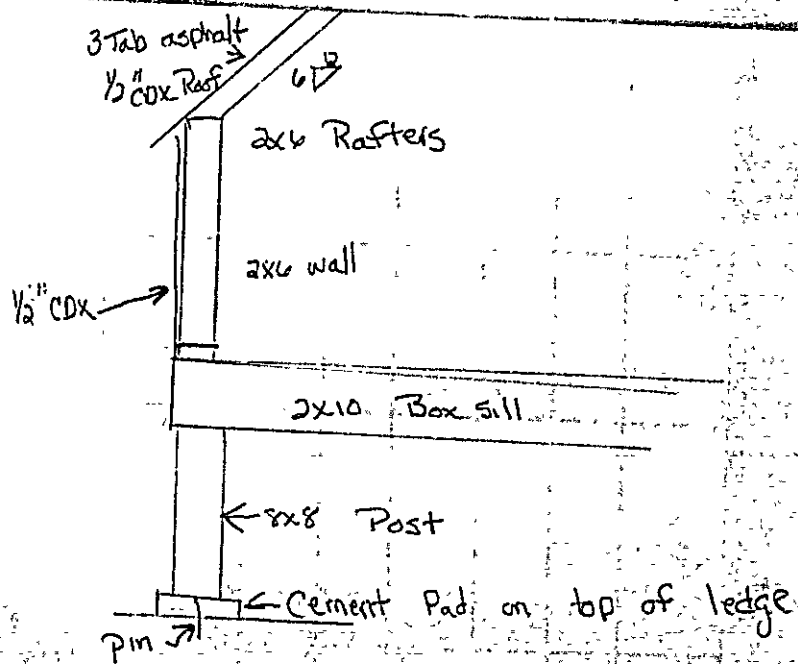
No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVAL BY: BUILDING INSPECTION PLAN EXAMINER
ZONING:
BUILDING CODE:
Fire Dept.
Health Dept.
Others:

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

Signature of Applicant: Elliott Chamberlain
Type Name of above: Elliott Chamberlain
Phone:
Other and Address:

FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY
M. Ballato



RECEIVED
 AUG 5 1985
 DEPT. OF BUILDING INSPECTIONS
 CITY OF PORTLAND

Seashore ave
 89-14-8

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP 643

MAY 27 1986

B.O.C.A. TYPE OF CONSTRUCTION

ZONING LOCATION PORTLAND, MAINE ... May 20, 1986

City Of Portland

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

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

- LOCATION 89-H-008 Seashore Avenue, Peaks Island
1. Owner's name and address John & Patricia Erickson - same
2. Lessee's name and address
3. Contractor's name and address Owner

Proposed use of building Dwelling
Last use
Material No. stories Heat Style of roof Roofing
Other buildings on same lot
Estimated contractual cost \$2,000

FIELD INSPECTOR-Mr. @ 775-5451
Appeal Fees \$
Base Fee 30.00
Late Fee
TOTAL \$

To construct 17 x 28 deck on dwelling as per plans. 4. sheets of plans.

Stamp of Special Conditions
PERMIT ISSUED WITH LETTER

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

DETAILS OF NEW WORK

Is any plumbing involved in this work? Is any electrical work involved in this work?
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate Height average grade to highest point of roof
Size, front depth No. stories solid or filled land? earth or rock?
Material of foundation Thickness, top bottom cellar
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber-Kind Dressed or full size? Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor, 2nd, 3rd, roof
On centers: 1st floor, 2nd, 3rd, roof
Maximum span: 1st floor, 2nd, 3rd, roof
If one story building with masonry walls, thickness of walls? height?

IF A GARAGE

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE
BUILDING INSPECTION-PLAN EXAMINER
ZONING: O.K. Permit May 24, 1986
BUILDING CODE:
Fire Dept.
Health Dept.
Others:

MISCELLANEOUS
Will work require disturbing of any tree on a public street?
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed?

Signature of Applicant sent in by mail Phone # same
Type Name of above John Erickson 1 2 3 4

PERMIT ISSUED WITH LETTER

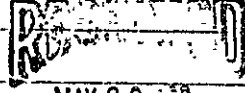
FIELD INSPECTOR'S COPY APPLICANT'S COPY OFFICE FILE COPY

Handwritten signature/initials

John E. Erickson
Seaside Avenue
P.O. Box 24
Peters Island, Me 03400
89-11-008

May 9, 1968

Building Department
City of Portland



DEPT OF BUILDINGS
CITY OF PORTLAND

I request I be issued a building permit to put a 17x28 foot deck on my home.

See attached diagram, the area marked in Blue (#2) will be the new deck area.

I plan to do the work myself. Cost of materials (see attachment from Hancock Lumber) is \$1571.00 and I figure the cost of my labor would make the project a \$2000.00 deal.

I have enclosed a check for \$30.00 which would cover the basic charge and an additional \$5.00 for the additional \$1,000.00.

Should additional information be required, please let me know.

Home: 766-5502 - Work 773-5656

89-11-8

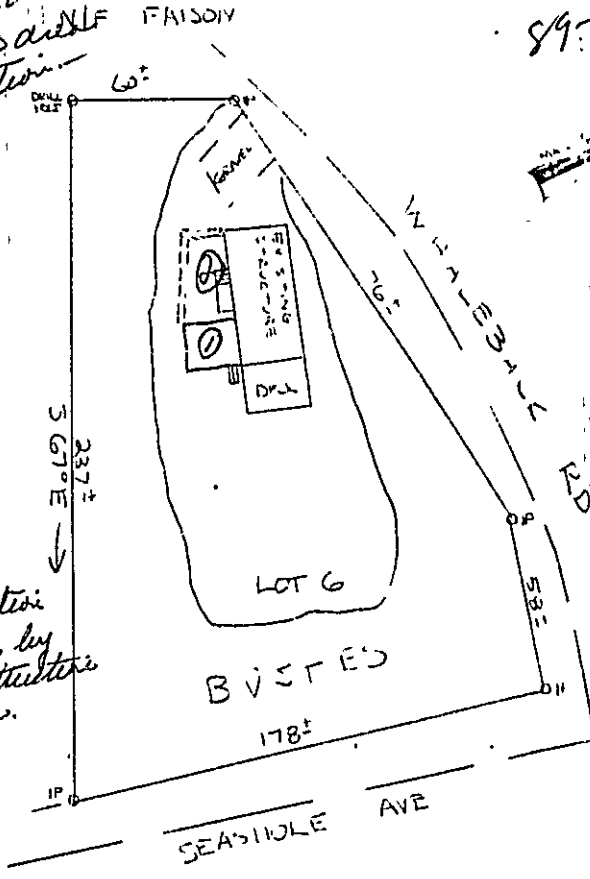
CERTIFICATION PLAN FOR DEPOSITORS TRUST COMPANY

② Proposed deck to close the deck created by addition - Deck 20x17 -

89-H-8

NIF
YVEKS
LOT 5

① A 20x17 addition added last year by Chamberland Construction Bldg Permit OK'd.



FOR:
JOHN E. + PATRICIA ERICKSON

MORTGAGE SURVEY P.L.V.

LOCATION SEASHORE AVE PEAKS ISLAND
PORTLAND, ME
SCALE 1" = 40' DATE 10/3/93

NOTE: THIS IS A TAPE SURVEY AND NOT AN INSTRUMENT SURVEY. THEREFORE THIS PLOT PLAN IS FOR MORTGAGE PURPOSES ONLY TO PIONEER NATIONAL TITLE INSURANCE COMPANY, ITS SUCCESSORS AND ASSIGNEES. IN INTEREST, I HEREBY CERTIFY THAT I HAVE EXAMINED THE PREMISES AND ALL BASEMENTS, ENCROACHMENTS AND BUILDINGS ARE LOCATED ON THE GROUND AS SHOWN AND THAT THE PREMISES SHOWN HEREON ARE THE SAME AS DESIGNATED IN BOOK 4656 PAGE 222 IN CUMMISLAND COUNTY REGISTRY OF DEEDS.

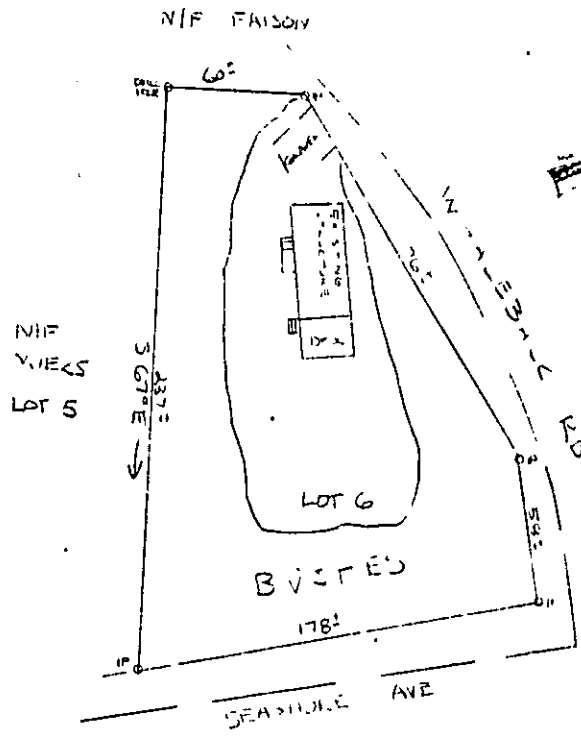


RECEIVED
MAY 20 1996

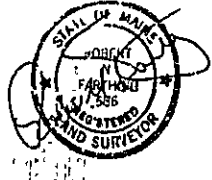
City of Building Inspector
CITY OF PORTLAND

SURVEYED BY SURVEY, INC.
50 WINDHAM, MAINE

CERTIFICATION PLAN FOR DEPOSITORS TRUST COMPANY



FOR:
JOHN E + PATRICIA ERIKSON



MORTGAGE SURVEY PLAN

LOCATION SEASIDE AVE PEAKS ISLAND
PORTLAND, ME.

SCALE 1" = 40' DATE: 10/13/86

NOTE THIS IS A TAPE SURVEY AND NOT AN INSTRUMENT SURVEY THEREFORE THIS PLOT PLAN IS FOR MORTGAGE PURPOSES ONLY TO PIONEER NATIONAL TITLE INSURANCE COMPANY, ITS SUCCESSORS IN INTEREST I HEREBY CERTIFY THAT I HAVE EXAMINED THE PREMISES AND ALL EASEMENTS, ENCROACHMENTS AND BUILDINGS ARE LOCATED ON THE GROUND AS SHOWN AND THAT THE PREMISES SHOWN HEREON ARE THE SAME AS DESIGNATED IN BOOK 156, PAGE 222 IN CUMBERLAND COUNTY REGISTRY OF DEEDS

SURVEYED BY SURVEY INC. 50 WINDHAM, MAINE

89-A-8

RECEIVED
MAY 20 1986

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

ANCOCK LUMBER

P.O. BOX 8 - CASCO, MAINE 04015

CUSTOMER

**** IF YOU'RE THINKING ABOUT BUILDING A HOUSE **
**** HAVE WE GOT PLANS FOR YOU! ****
**** PLAN NIGHTS - APRIL 10, 17 AND 24 7:30 TO 9:00 ******

SCO
7-4201

SO. PARIS 743-7916 WINDHAM 822-6111 SANFORD 324-4000 KENNEBUNK 935-3553 YARMOUTH 648-5555
 PAGE 2 BRIAN G HANLON 33 HASKELL AVE
 SO PORTLAND ME 04106

ESTIMATE ONLY - PRICES GOOD PORT
 FOR ONLY ITEMS LISTED AND 13
 *DELIVERED WITHIN 30 DAYS * 0

RECEIVED

MAY 20 1986

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

89-A-8

INVOICE NO.	INVOICE DATE	CUSTOMER ACCOUNT NO.	CUSTOMER ORDER NO.	SOLD BY	DELIVERY DATE	SPECIAL INSTRUCTIONS	YARD	
383674	04/09/86	2:37 PM06437-00		88-GREG C.	04/09/86		300	
ITEM	QUANTITY	DESCRIPTION	UNIT PRICE	TAX	NET AMOUNT			
21010KD	2	2X10-10 SPRUCE D4S KD	33.33	BF	66.66			
5468	6	5/4X6-8 SPRUCE DECKING PAD	2.00	BF	12.00			
28PTL	7	2X8 P.T. LATTICE PANEL	1.80	BF	12.60			
16GCN	50	# 16D GALVANIZED COMMON NAILS	2.42	EA	121.00			
3GCN	25	# 7SD GALVANIZED COMMON NAILS	4.03	EA	100.75			
MSO	1	# 00# 2 1/4 GALV SCREWS	34.00	EA	34.00			
MSO	1	FRIEGHT TO PEAKS ISLAND	17.50	EA	17.50			
			330.40	EA	330.40			
			150.00	EA	150.00			
METHOD OF PAYMENT								
<input type="checkbox"/> BANKCARD	<input type="checkbox"/> GIFT CERT.	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK	<input type="checkbox"/> C.O.D.	NET INVOICE			
					1497.02	SALES TAX		
						PERCENT		
						AMOUNT		
						INVOICE TOTAL	1571.87	
CONDITION OF SALE								
LOADED BY		PICK UP		TERMS A LATE CHARGE OF 1 1/2% PER MONTH WILL BE APPLIED TO PAST DUE CHARGES 30 DAYS AFTER THE END OF THE MONTH IN WHICH THE CHARGES WERE MADE AND NO FURTHER CHARGES WILL BE PERMITTED UNTIL ALL AMOUNTS DUE ARE PAID IN FULL MINIMUM LATE CHARGE \$1.00.				
DELIVERED BY		DELIVERY		10% HANDLING CHARGE ON ALL MATERIALS RETURNED UNLESS WE ARE AT FAULT				
		CHECKED		BALANCE IS DUE IN FULL BY 10th OF FOLLOWING MONTH.				
				RECEIVED	CUSTOMER SIGNATURE			
				GOOD CONDITION				

HANCOCK LUMBER

P.O. BOX 8 - CASCO, MAINE 04015

CUSTOMER

**** IF YOU'RE THINKING ABOUT BUILDING A HOUSE ****
**** HAVE WE GOT PLANS FOR YOU! ****
**** PLAN NIGHTS - APRIL 10, 17 AND 24 - 6:30 TO 9:00 ****

CASCO
627-4207

SO. PARIS
743-7946

WINDHAM
892-8711

SANFORD
324-4000

KENNEBUNK
985-3553

YARMOUTH
848-5555

BRIAN O HANLON
33 HASKELL AVE

ESTIMATE ONLY-PRICES GOOD PORT
 FOR ONLY ITEMS LISTED AND 13
 *DELIVERED WITHIN 30 DAYS * 0

SOLD TO

DELIVER TO

50 PORTLAND ME 04106

RECEIVED

MAY 20 1986

DEPT. OF BUILDING INSPECTIONS
CITY OF PORTLAND

89-H-8

INVOICE NO.	INVOICE DATE	CUSTOMER ACCOUNT NO.	CUSTOMER ORDER NO.	SOLD BY	DELIVERY DATE	SPECIAL INSTRUCTIONS	YARD
393674	04/09/86 2:37 PM	10647-00		BR-GREG C.	04/09/86	1	3000
ITEM #	QUANTITY	DESCRIPTION	UNIT PRICE	PER	LD	NET AMOUNT	
11016KD	3	2X10-16 SPRUCE D4S KD	80 BF	460.000	MBF	36.80	
11014KD	3	2X10-14 SPRUCE D4S KD	69.99 BF	460.000	MBF	32.20	
2416	2	2X4-16 SPRUCE D4S PAD	21.33 BF	340.000	MBF	7.25	
2812KD	23	2X8-12 SPRUCE D4S KD	368 BF	405.000	MBF	149.04	
2810KD	23	2X8-10 SPRUCE D4S KD	306.66 BF	395.000	MBF	121.13	
2816KD	2	2X8-16 SPRUCE D4S KD	42.66 BF	395.000	MBF	16.85	
2814KD	2	2X8-14 SPRUCE D4S KD	37.33 BF	395.000	MBF	14.75	
13	200	1X3 SPRUCE STRAPPING 200/ 1	50 BF	350.000	MBF	17.50	
34616	46	5/4X6-16 SPRUCE DECKING PAD	460 BF	409.000	MBF	188.14	
34614	46	5/4X6-14 SPRUCE DECKING PAD	402.50 BF	409.000	MBF	164.62	
148PT	13	4X4-8 PT SEE CONSUMER INFO SHEET	138.66 BF	550.000	MBF	76.27	
1816CB	17	4X8X16 CEMENT BLOCK	17 EA	0.720	EA	12.24	
METHOD OF PAYMENT						NET INVOICE	INVOICE TOTAL
BANKCARD	GIFT CERT.	CASH	CHECK	C.O.D.	SALES TAX	AMOUNT	836.79
PAGE # 1						CONDITION OF SALE	
TERMS: A LATE CHARGE OF 1 1/2% PER MONTH WILL BE APPLIED TO PAST DUE CHARGES 30 DAYS AFTER THE END OF THE MONTH IN WHICH THE CHARGES WERE MADE AND NO FURTHER CHARGES WILL BE PERMITTED UNTIL ALL AMOUNTS DUE ARE PAID IN FULL. MINIMUM LATE CHARGE \$1.00.						PAY THIS AMOUNT	
10% HANDLING CHARGE ON ALL MATERIALS RETURNED UNLESS WE ARE AT FAULT. BALANCE IS DUE IN FULL BY 10th OF FOLLOWING MONTH.						CUSTOMER SIGNATURE	
LOADED BY		PICK UP					
DELIVERED BY		DELIVERY					
		CHECKED					

City of Portland, Maine - Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 516 Seashore Ave - Peaks Island		Owner: E. Van Snyder	Phone: 797-7500	Permit No: 941038
Owner Address: 516 Seashore Ave - Peaks Island, ME 04103		Lease/Buyer's Name:	Phone:	Business Name:
Contractor Name: Aria Pratt Carpentry		Address: 92 Leighton Rd - Falmouth, ME 04105		Phone: 797-7322
Past Use: 1-fam dwg	Proposed Use: 1-fam w addition	COST OF WORK: \$ 12,000	PERMIT FEE: \$99	Permit Issued: PERMIT ISSUED SEP 29 1994
Proposed Project Description: Construct addition 6'x14' (walk-in closet) (utility)		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B3 Type 5D BCCA 93	
Signature:		Signature:		Zone: CBL
Signature:		Signature:		CITY OF PORTLAND
Signature:		Signature:		Zoning Approval:
Signature:		Signature:		Special Zone or Reviews:
Signature:		Signature:		<input type="checkbox"/> Shoreland
Signature:		Signature:		<input type="checkbox"/> Wetland
Signature:		Signature:		<input type="checkbox"/> Flood Lane
Signature:		Signature:		<input type="checkbox"/> Subdivision
Signature:		Signature:		<input type="checkbox"/> Site Plan major <input type="checkbox"/> minor <input type="checkbox"/> none

- This permit application doesn't preclude the Applicant from meeting applicable State and Federal rules.
- Building permits do not include plumbing, sewer, or electrical work.
- Building permits are void if work is not started within (90) months of the date of issuance. False information may invalidate a building permit and stop all work.

L Chase
6/23/94

PERMIT ISSUED WITH REQUIREMENTS

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 his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit

SIGNATURE OF APPLICANT: *[Signature]* ADDRESS: *[Address]* DATE: *9/2/94* PHONE: *[Phone]*

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____

- Zoning Appeal**
- Variance
 - Miscellaneous
 - Conditional Use
 - Interpretation
 - Approved
 - Denied

- Historic Preservation**
- Not in District or Landmark
 - Does Not Require Review
 - Requires Review

- Action:
- Approved
 - Approved with Conditions
 - Denied

Date: *9/2/94*

CEO DIST. **6**
[Signature]

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

COMMENTS

4/24/96

Completed

[Signature]

Type	Inspection Record	Date
Foundation:	_____	_____
Framing:	_____	_____
Plumbing:	_____	_____
Final:	_____	_____
Other:	_____	_____

BUILDING PERMIT REPORT

Address 586 Seashore Ave. Peaks Isl Date 28/sep/94
Reason for Permit. To Construct 6'x14' addition
(walk-in closet) Bldg. Owner: C. Wm. Snyder
Contractor: Brian Pratt Carpentry
Permit Applicant: 11
Approval: /

CONDITION OF APPROVAL:

- * 1. Before concrete for foundation is placed, approvals from ~~Public Works and~~ Inspection Services must be obtained. (A 24 hour notice is required prior to inspection).
2. Precaution must be taken to protect concrete from freezing.
3. It is strongly recommended that a register land surveyor check all foundation forms before concrete is placed. This is done to verify that the proper setbacks are maintained.
4. All vertical openings shall be enclosed with construction having a fire rating of at least one (1) hr., including fire doors with selfclosers.
5. Each apartment shall have access to (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.
6. The boiler shall be protected by enclosing with one (1) hour fire rated construction including fire doors and ceiling, or by providing automatic extinguishment. Sprinkler piping serving not more than six sprinklers may be connected to a domestic water supply system having a capacity sufficient to provide 0.15 gallons per minute, per square foot of floor throughout the entire area. An INDICATING shut-off valve shall be installed in an accessible locations between the sprinkler and the connection to the domestic water supply. Minimum pipe size shall be 3/4 inch copper or 1 inch steel. Maximum coverage area of a residential sprinkler is 144 square feet per sprinkler.
7. 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 special knowledge or 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 room must have a 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), and a minimum net clear opening of 5.7 sq.ft.

(over)

City of Portland, Maine -- Building or Use Permit Application 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: 586 Seashore Ave- Peaks Isl		Owner: C. Wm. Snyder	Phone: 797-7600	Permit No: 941038
* Owner Address: 89 H 8 586 Seashore Ave- Peaks Island, ME 04108		Lease/Buyer's Name:	Phone:	Business Name:
Contractor Name: Brian Pratt Carpentry		Address: 92 Leighton Rd- Falmouth, ME 04105		Phone: 797-3322
Past Use: 1-fam dwlg	Proposed Use: 1-fam w addition	COST OF WORK: \$ 12,000	PERMIT FEE: \$ 80	Permit Issued: PERM ISSUED SEP 29 1994
Proposed Project Description: construct addition 6'x14' -(walk-in closet) (utility)		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group A Type 5B BOCA 93 Signature: <i>[Signature]</i>	Zone: CBL: PORTLAND Zoning Appeal: <i>[Signature]</i>
Signature: _____ Date: _____		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

L Chase
9/23/94

PERMIT ISSUED WITH REQUIREMENTS

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 his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT: *[Signature]* ADDRESS: _____ DATE: 9/23/94 PHONE: _____

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE: _____ PHONE: _____

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

CEO DISTRICT **6**
[Signature]
M.A. ROWE

8. All single and multiple station smoke detectors shall be of an approved type and shall be installed in accordance with the provisions of the building code 919.3.2 (BOCA National Building Code 1993), and NFPA 101 Chapter 18 & 19. (smoke detectors shall be installed and maintained at the following locations):

1. In the immediate vicinity of bedrooms
2. In all bedrooms
3. In each story within a dwelling unit, including basements

9. Private garages located beneath habitable rooms in occupancies in Use Group R-1, R-2, R-3 or I-1 shall be separated from adjacent interior spaces by Fire Partitions and floor/ceiling assembly ;lies which are constructed with not less than 1-hour fire resisting rating. Private garages attached side-by-side to rooms in the above occupancies shall be completely separated from the interior spaces and the attic area by means of 1/2 inch gypsum board or the equivalent applied to the garage side. (Chapter 4 section 407.0 of the BOCA/1993).

10. Guardrails & Handrails - A guardrail system is a system of building components located near the open sides of elevated walking surfaces for the purpose of minimizing the possibility of an accidental fall from the walking surface to the lower level. Minimum height all Use Group 42", except Use Group R which is 36". In occupancies in Use Group A, B, H-4, I1, I-2 M and R and public garages and open parking structures, open guards shall have balusters or be of solid material such that a sphere with a diameter of 4" cannot pass through any opening. Guards shall not have an ornamental pattern that would provide a ladder effect.

11. All exit signs, lights and means of egress lighting shall be done in accordance with Chapter 10, section & subsections 1023.& 1024.0 of the City's building code (The BOCA National Building Code/1993).

12. Stair construction in Use Group R-3, R-4 is a minimum of 11" tread and 8-1/4" maximum rise.

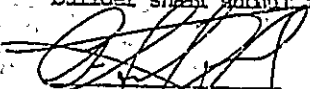
13. Headroom in habitable space is a minimum of 7'6".

14. The minimum headroom in all parts of a stairway shall not be less than 80 inches.

15. All construction and demolition debris must be disposed at the City's authorized reclamation site. The fee rate is attached. Proof of such disposal must be furnished to the office of Inspection Services before final certificate or occupancy is issued or demolition permit is granted.

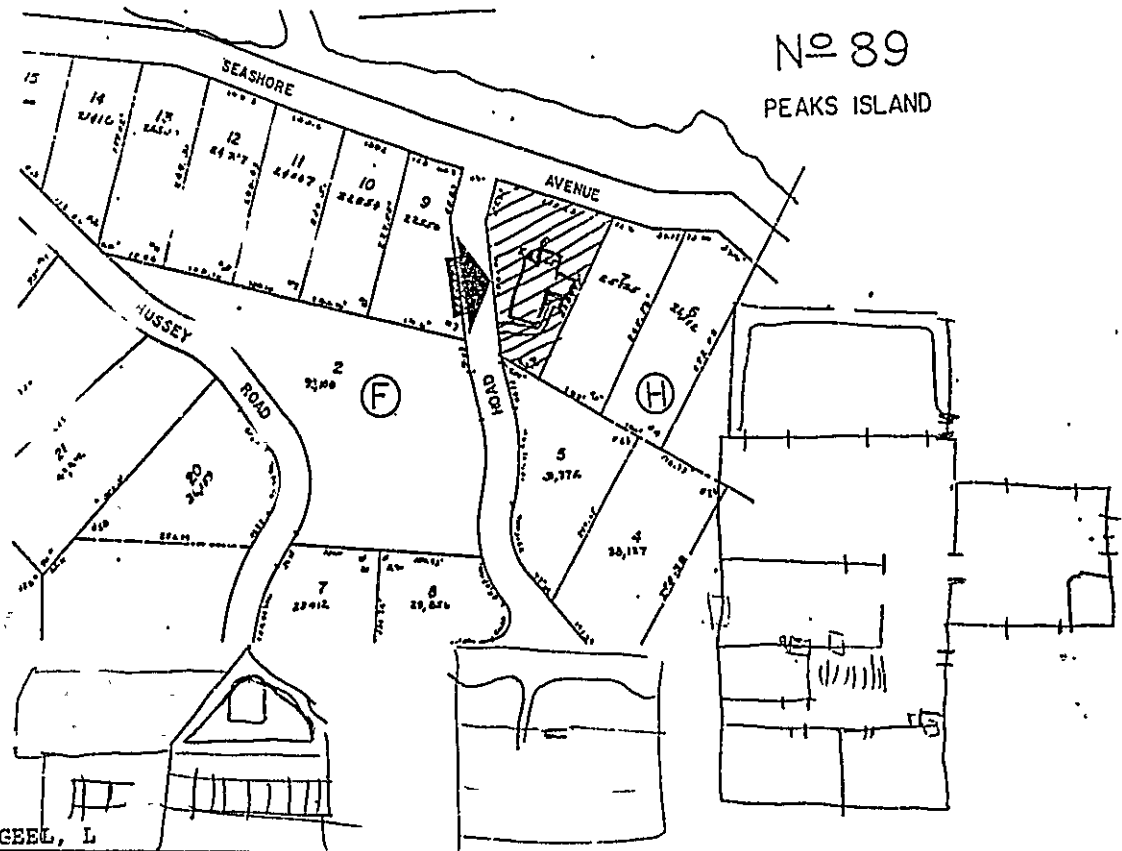
16. Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year".

17. The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 MRSA 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.


P. Samuel Hoffes
Chief of Inspections

/cmm 01/14/94(redo w/additions)

No 89
PEAKS ISLAND



GEEL, L

Code PI 352	Lot 89-H-8	Approx. 28,655 Sq. Ft.	Location Seashore Ave. & Whalebuck Rd., Peaks Island, Me. (Portland)	Price \$265,000
Rooms-Bed. 6 - 3	Baths 1 1/2	Age 10Yr	Color Brown	Taxes \$2,314.22
Sashes Yes	Hear Elec.	Hot Water Elec.	Sewer Septic	WaterDr. Well
Basement Partial	Garage/Other None			
1st Level Living Room with fireplace and Cathedral ceilings, Applianced Kitchen, Lg Studio/Den with Jacuzzi, 2 lge Bed-Rooms, full Bath, Utility Room.				
2nd Level Large Bedroom with skylight and double closet, 1/2 Bath, Loft with 2 skylights and wrought iron railings.				
3rd Level				
Comments Corner lot with spectacular views of ocean and Whalebuck Rock. Atrium doors from Living Room onto Lge. Deck overlooking rocky coast & and ocean			Offering subject to error, omission, prior sale, or change without notice 	
			334 FORE STREET P.O. BOX 7341 PORTLAND, ME. 04112 (207) 775-7253	

BRIAN PRATT CARPENTRY
92 Leighton Road
Falmcutn, Maine 04105
(207).797-3322

To: Dr. C. William Snyder, & Sheilah R. McLaughlin
586 Seashore Drive
Peaks Island
Portland, Maine 04108

For: Cost Estimate And Specifications For Boiler Room And
Walk-In Closet Addition

Construct addition according to plan including costs
of:

Shipping materials

Travel; 2 men, 1 vehicle

Plan and permit expenses

All disposal costs

Labor & Materials \$11,950.00

Specifications:

Pressure treated posts to ledge with pressure treated skirt

R-18 floor insulation includes rigid insulation vapor barrier beneath

R-19 walls (6"), R-30 ceiling (9")

3/4" T&G plywood sub-floor

3/4" board exterior sheathing

3/4" C.D.X. plywood roof deck

Vented soffit with Propervent channels to prevent air flow blockage

All exterior trim to be primed on all faces prior to installation

To ensure low maintenance on exterior

Clapboard siding to be primed on both sides to ensure excellent paint holding qualities and low maintenance

Site clean up upon completion

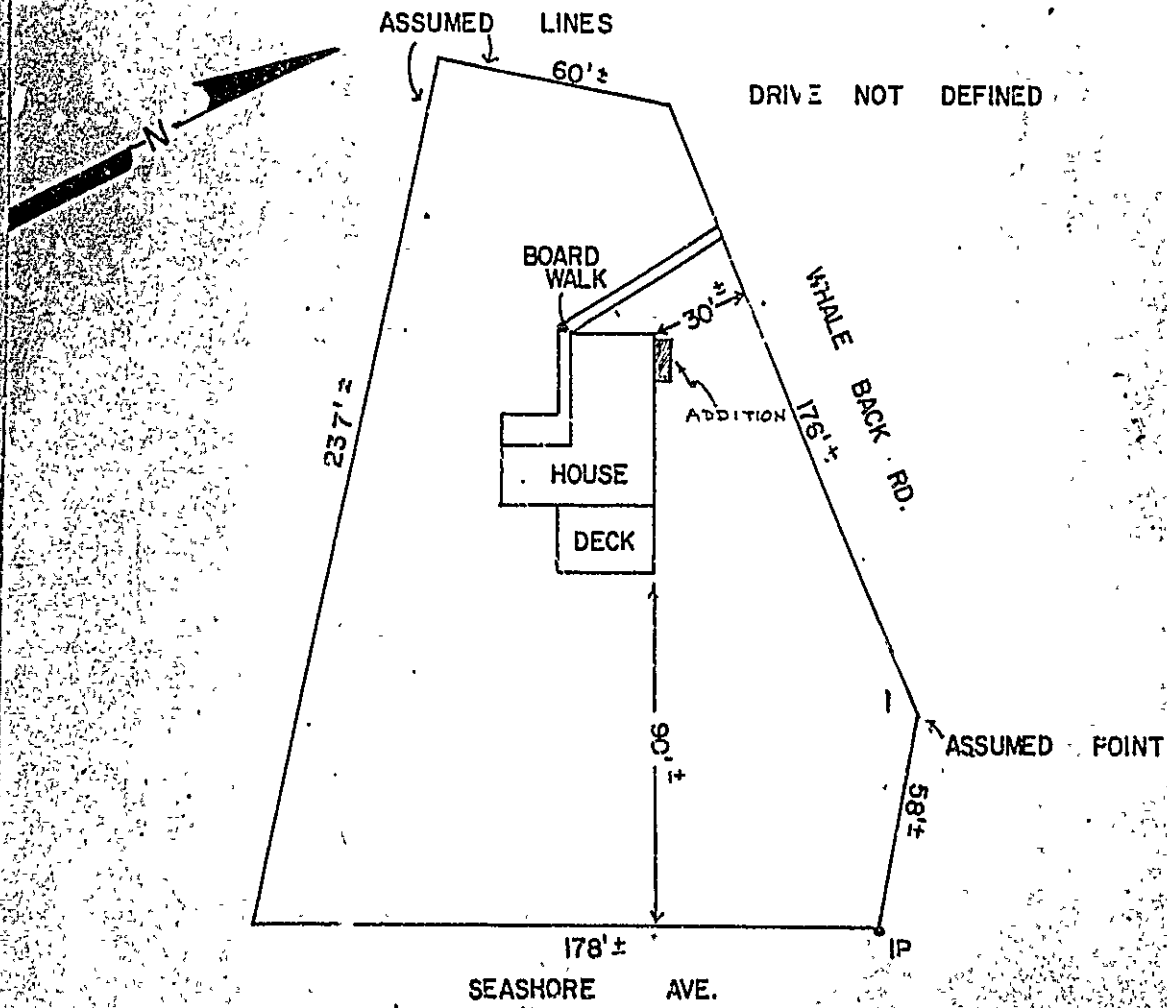
BRIAN PRATT CARPENTRY
92 Leighton Road
Falmouth, Maine 04105
(207) 797-3322

Notes:

Cost of boiler work handled by owner. An allowance for oil tank installation - crawl space skirt repair is included in the estimate.

An allowance for electrical work has been included in the estimated cost of this addition. It should be noted that the actual cost of the electrical work is likely to vary due to existing unknown construction and routing methods used. Actual cost of electrical will be billed at cost of labor and materials.

MORTGAGE INSPECTION PLOT PLAN



OWNER OF RECORD: Lucia Greef

LOCUS: Peaks Island, Portland, Me.

SCALE: 1" = 40'

"THIS IS NOT A BOUNDARY SURVEY"