

OK
lig

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION
PERMIT

No. _____

This is to certify that John Feeney
has permission to Construct foundation for single family
AT Bayberry Lane Peaks Island

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification for inspection must be given and written permission procured before this building or part thereof is either or otherwise closed-in.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____

Department Name _____

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant John Feeney (766-2488)

Date August 31, 1988

Mailing Address ~~XXXXXXXXXX~~ Hussey Road, Peaks Island

Address of Proposed Site Bayberry Lane, Peaks Island

Proposed Use of Site single family

Lot # 89-J-5

Acreage of Site / Ground Floor Coverage 3/4 acre / 30,000 sq ft

Site Identifier(s) from Assessors Maps R-1

Zoning of Proposed Site _____

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

Proposed Number of Floors 1

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

Total Floor Area 30,000 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

DOES NOT COMPLY

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: _____

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

Applicant: John Feaney

Date: Aug 29, 1988

Address: Bayberry Lane Peaks Island

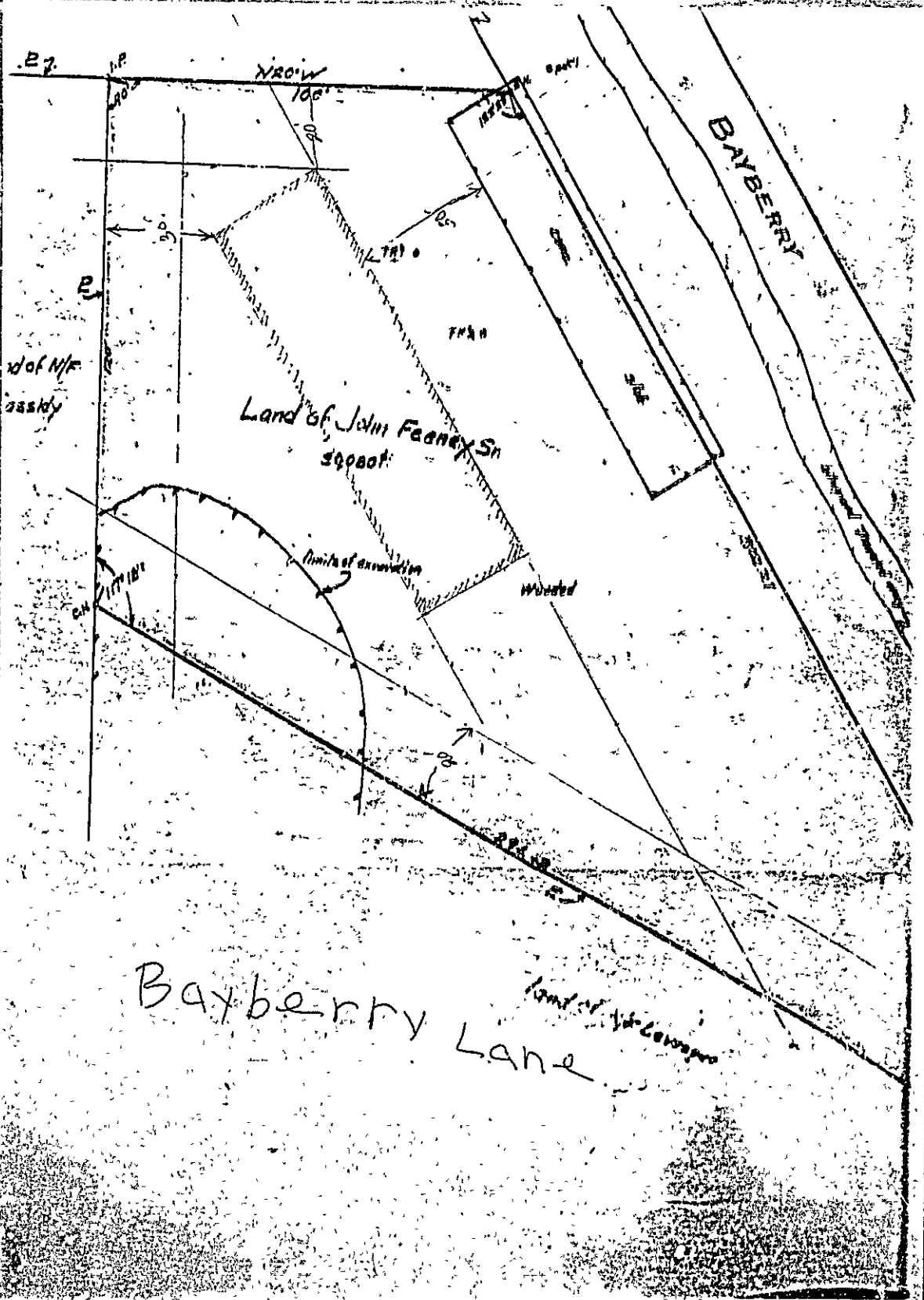
Assessors No.: 89-1-5

CHECK LIST AGAINST ZONING ORDINANCE

- Date -
- Zone Location - IR-1
- Interior or corner lot - Near Corner
- Use - Install Foundation only
- Sewage Disposal - septic
- Rear Yards - 30' required
- Side Yards - 20' 20' required
- Front Yards - 50' 30' required
- Projections -
- Height - ?
- Lot Area - 28,468 sq. ft. (North 1/2 subdivision)
- Building Area - 30' x 100' = 3,000 sq. ft. c. 1972
- Area per Family - Recent subdivision
- Width of Lot - 130'
- Lot Frontage - 302'
- Off-street Parking - 0, K1
- Loading Bays -

Forms HHE 200 are enclosed

- Site Plan -
- Shoreland Zoning -
- Flood Plains -



SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: **PORTLAND PEAKS ISLAND**

Street: **BAYBERRY LANE**

Subdivision/Lot #: **TAX MAP 89 BLOCK J LOT 5**

PROPERTY OWNERS NAME

Last: **FEENEY** First: **JOHN**

Applicant Name: **JOHN FEENEY**

Mailing Address of Owner/Applicant (If Different): **HUSSEY ROAD PEAKS ISLAND MAINE 04108**

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:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS
1 BED 3 TRENCH
2 CHAMBER 4 OTHER _____

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
- Requires both State and Local Plumbing Inspector Approval

DISPOSAL SYSTEM TO SERVE:

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

INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
PUBLIC WATER

SIZE OF PROPERTY 28,468 SF **ZONING** IR 1

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE _____ GALS.

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

2 BEDROOM CONSERVATIVE 300

LOW VOLUME TOILET 30

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE 4 CONDITION A III

DEPTH TO LIMITING FACTOR 22

SIZE RATING USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM LARGE
- LARGE
- EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq. Ft.
- CHAMBER 350* Sq. Ft. REGULAR H 20
- TRENCH _____ Linear Ft.
- OTHER: _____

SITE EVALUATOR STATEMENT * USED 14 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION SITE EVALUATION WAIVED BY LOCAL OPTION

On MAY 20 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. Jordan 0003/4814 9/9/87
Site Evaluator or Professional Engineer's Signature SE# IPE# Date

Page: 13
HHE-200 Rev. 4/83

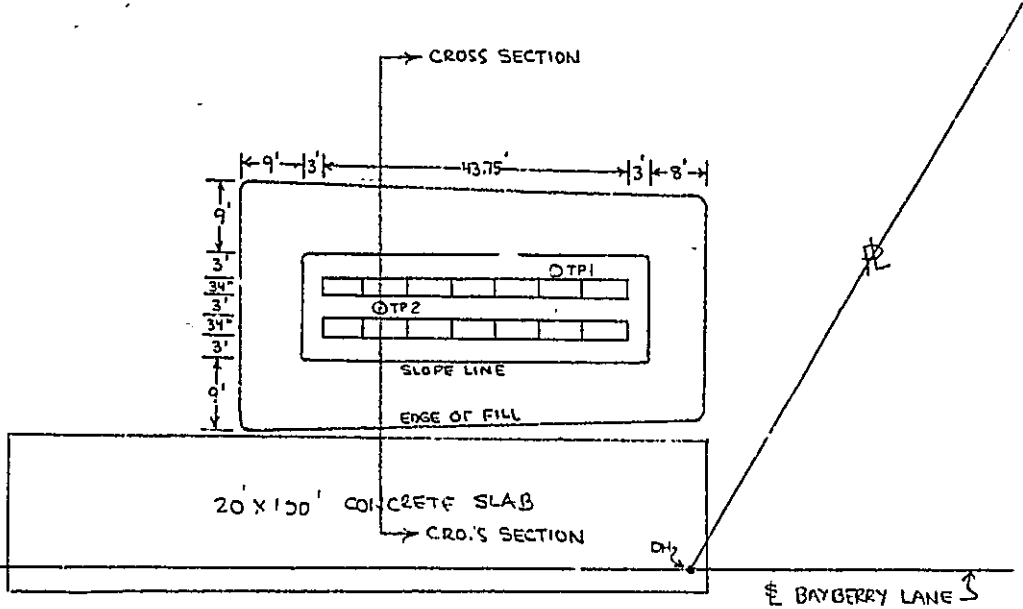
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

City, Location: **PORTLAND PEAKS ISLAND BAYBERRY LANE** Street, Road, Subdivision: **89-J-5** Owners Name: **JOHN FEENEY**

SUBSURFACE WASTEWATER DISPOSAL PLAN

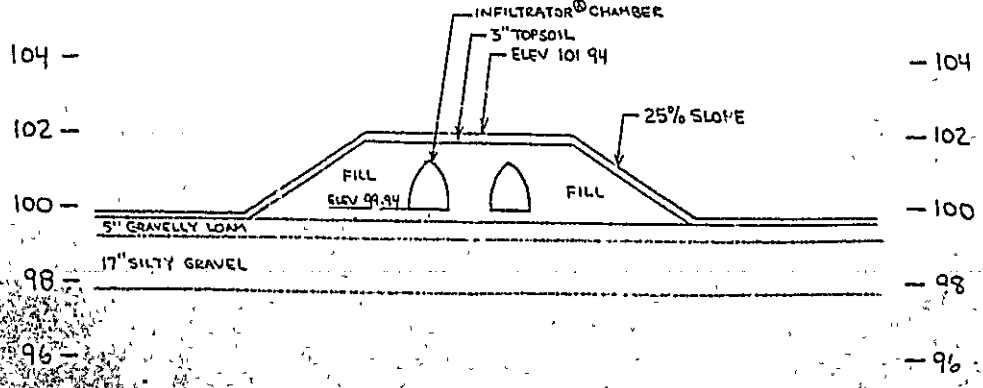
Scale 1" = 20 Ft.



FILL REQUIREMENTS Depth of Fill (Upslope) <u>25</u> Depth of Fill (Downslope) <u>26</u>	CONSTRUCTION ELEVATIONS Reference Elevation is <u>100.00</u>	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION DRILL HOLE EASTERLY CORNER OF LOT ON OLD FOUNDATION SLAB
	Bottom of Disposal Area <u>99.94</u>	
	Top of Distribution Lines or Chambers <u>101.19</u>	

DISPOSAL AREA CROSS SECTION

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



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

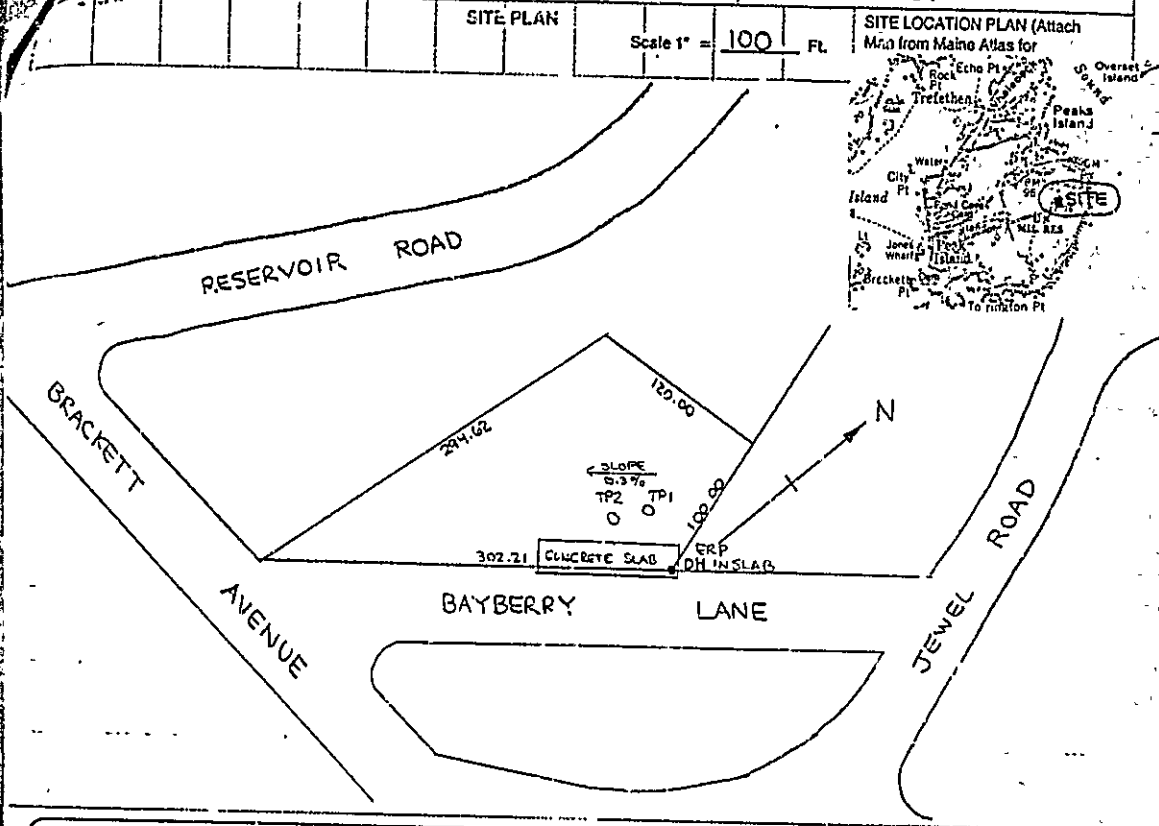
003/4814
BPE #

9/9/87
Date

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Plant/Block: PORTLAND PEAKS ISLAND BAYBERRY LANE Street, Road, Subdivision: 89-J-5 Owners Name: JOHN FEENEY



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

Observation Hole _____ Test Pit Boring
2" SOD _____ * Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	GRAVELLY LOAM		DARK BROWN	
10	SILTY GRAVEL	LOOSE	RED BROWN	NONE EVIDENT
38	BEDROCK			

Soil: 4 Classification: AIII Slope: 0.3% Limiting Factor: 28
 Ground Water Root Zone 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	GRAVELLY LOAM		DARK BROWN	
10	SILTY GRAVEL	LOOSE	RED BROWN	NONE EVIDENT

Soil: 4 Classification: AIII Slope: 0.3% Limiting Factor: 22
 Ground Water Root Zone Layer Bedrock

Site Evaluator or Professional Engineer's Signature: *William B. Jambura* 0003/4814 9/9/87
 Page 2 of 3
 HNE-200 Rev. 4/83

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

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

Owner: John Feeny (766-2488)

Address: Hussey Road, Peaks Island 64107

LOCATION OF CONSTRUCTION Bayberry Lane, Peaks Island

CONTRACTOR: XXXXXXXX Jay Brown SUBCONTRACTORS: 766-2670

ADDRESS: City Point Rd., Peaks Island

Est. Construction Cost: \$7,000 Type of Use: XXXXXXXXXXXX single family

Past Use: _____

Building Dimensions L _____ W _____ Sq. Ft. _____ # Stories _____ Lot Size _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain KKKK foundation only as per plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings: # 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. Gully Column Spacing: _____ Size: _____
4. Joists Size: _____ Spacing 18" 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 _____ s _____ No. _____
6. Corner Pos _____
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 29, 1988 Subdivision: Yes / No _____

Name: _____

Fire Limits: _____ Lot: _____

Hdg Code: _____ Block: _____

Area Limit: _____ Term: Expiration: _____

Estimated Cost: \$7,000 Public: _____

Value/Structure: _____ Ownership: _____ Private: _____

Fee: \$55.00

Celling:

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 _____ 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. _____
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 _____

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 Groseman

Signature of Applicant John E. Feeny Date 8/29/88

Signature of CEO _____ Date _____

Inspection Dates _____

PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION

MAP # _____ LOT# _____

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

Owner: John Feeney (766-2488)

Address: Hussey Road, Peaks Island 04108

LOCATION OF CONSTRUCTION Bayberry Lane, Peaks Island

CONTRACTOR: XXXXXXXX Jay Brown SUBCONTRACTORS: 766-2670

ADDRESS: City Point Rd., Peaks Island

Est. Construction Cost: \$7,000 Type of Use: XXXXXXXXXXXX single family Ceiling:

Part Use: _____

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

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain RHHK foundation only as per plans.

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. of Rows _____

3. No. of Courses _____

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: <u>August 29, 1988</u>	Subdivision: Yes / No _____
Inside Fire Limits _____	Name _____
Bldg. Code _____	Lot _____
Time Limit _____	Block _____
Estimated Cost: <u>\$7,000</u>	Permit Expiration _____
Value/Structure _____	Ownership: _____ Public _____
Fees: <u>\$55.00</u>	Private _____

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 _____ 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: _____ x _____ Square Footage _____

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

Zoning:

District _____ Street Frontage Req: _____ Provided _____

Required Setbacks: Front _____ Back _____ 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: John E. Feeney Date 8/29/88

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assessor

Yellow GPCOG

White Tag - CEO

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

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

Owner: John Feeney (766-2488)

Address: Halsey Road, Peaks Island 04107

LOCATION OF CONSTRUCTION Bayberry Lane, Peaks Island

CONTRACTOR: ~~XXXXXXXXXX~~ Jay Brown SUBCONTRACTORS: 766-2570

ADDRESS: City Point Rd., Peaks Island

Est. Construction Cost: \$7,000 Type of Use: ~~XXXXXXXXXXXX~~ single family

Fast Use: _____

Building Dimensions: L _____ W _____ Sq. Ft. _____ # Stories: _____ L: Size _____

Is Proposed Use: _____ Seasonal _____ Co. idominium _____ Apartment _____

Conversion - Explain RHH foundation only as per plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundations:

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 h. required _____
5. Other Materials _____

For Official Use Only

Date AUGUST 29, 1988
 Inside Fire Limits _____
 Bldg Code _____
 Time Limit _____
 Estimated Cost: \$7,000
 Value/Structure _____
 Fee: \$55.00

Subdivision: Yes / No _____
 Name _____
 Lot _____
 Block _____
 Permit Expiration: _____
 Ownership: _____ Public _____ Private _____

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

Zoning:
 District _____ Street Frontage Req.: _____ Provided _____
 Required Setbacks: Front _____ Back _____ 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 John E. Feeney Date 8/29/88

Signature of CEO _____ Date _____

Inspection Dates _____

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

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PERMIT # _____ CITY OF Portland BUILDING PERMIT APPLICATION MAP # 271

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

Owner: John Feeney (766-2488)

Address: Hussey Road, Peaks Island 04107

LOCATION OF CONSTRUCTION Bayberry Lane, Peak Island

CONTRACTOR: ~~XXXXXXXXXX~~ Jay Brown SUBCONTRACTORS 766-2670

ADDRESS: City Point Rd., Peaks Island

Est. Construction Cost: \$7,000 Type of Use: ~~XXXXXXXXXXXX~~ single family

Past Use: _____

Building Dimensions L _____ W _____ Sq Ft. _____ # Stories _____ Lot Size _____

Is Proposed Use: _____ Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain XXXX foundation only as per plans.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Unit _____

Foundation:

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

Floors:

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 _____
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: <u>August 29, 1988</u>	Subdivision: <u>17</u> No. _____
Inside Fire Limits: _____	Name: _____
Bldg Code: _____	Lot: _____
Time Limit: _____	District: _____
Estimated Cost: <u>\$7,000</u>	Permit Expiration: _____
Value of Structure: _____	Ownership: _____
Fee: <u>\$55.00</u>	Public: _____

- 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 _____ 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: _____ 00.00

- 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 _____

Review Required:

Zoning Board Approval: Yes _____ No _____ Date: _____

Planning Board Approval: Yes _____ No _____ Date: _____

Conditional Use: _____ Variance _____ Site Plan _____

Shore and Floodplain Mgmt _____ Special Exemption _____

Other (Explain) _____

Date Approved: Aug 27, 1988

Permit Received By Nancy Crossman

Signature of Applicant: John E. Feeney Date: 8/29/88

Signature of CEO _____ Date _____

Inspection Dates _____

FLOR PLAN

N



FEES (Breakdown From Front)

	Type	Inspection record	Date
Base Fee \$25.00			
Subdivision Fee \$			
Site Plan Review Fee \$			
Other Fees \$30.00			
(Explain)			
Late Fee \$			

COMMENTS

Signature of Applicant *John E. Seerney Jr* Date *8/29/88*

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3926

PROPERTY ADDRESS

Town Or Plantation: **PORTLAND PEAKS ISLAND**

Street: **BAYBERRY LANE**

Subdivision Lot #: **TAX MAP 89 BLOCK J LOTS**

PROPERTY OWNERS NAME

Last: **FEENEY** First: **JOHN**

Applicant Name: **JOHN FEENEY**

Mailing Address of Owner/Applicant (if Different): **HUSSEY ROAD PEAKS ISLAND MAINE 04103**

PORTLAND PERMIT # **3,132** TOWN COPY

Date Permit Issued: **10/13/88** \$ **1510.10** FEE

Local Plumbing Inspector Signature: *[Signature]* L.P.I. # **011244**

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: *John Feeney* Date: **10/12/88**

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: *[Signature]* Date Approved: **5-20-89**

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

3. REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form

4. Requires only Local Plumbing Inspector Approval

5. Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

1. NON ENGINEERED SYSTEM

2. PRIMITIVE SYSTEM (Includes Alternative Toilet)

3. ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. TREATMENT TANK (ONLY)

5. HOLDING TANK

6. ALTERNATIVE TOILET (ONLY)

7. NON-ENGINEERED DISPOSAL AREA (ONLY)

8. ENGINEERED DISPOSAL AREA (ONLY)

9. SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

1. BED 2. TRENCH

3. 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: **28,468 SF**

ZONING: **IR 1**

TYPE OF WATER SUPPLY

PUBLIC WATER

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 (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)

3. REQUIRED

DOSE: _____ GALS

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

2 BEDROOM CONSERVATIVE 300

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: **4** CONDITION: **AIII**

DEPTH TO LIMITING FACTOR: **22**

SIZE RATINGS USED FOR DESIGN PURPOSES

1. SMALL

2. MEDIUM

3. MEDIUM-LARGE

4. LARGE

5. EXTRALARGE

DISPOSAL AREA TYPE/SIZE

1. BED _____ Sq. Ft.

2. CHAMBER **350** Sq. Ft.

3. TRENCH _____ Linear Ft.

4. OTHER: _____

LOW VOLUME TOILET 30

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT * USED 14 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On **MAY 20 1987** (date) I conducted a site evaluation for this project and certify that the data reported is accurate. This system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Site Evaluator or Professional Engineer's Signature: *William B. Goodrum* ID: **0003/4814** Date: **9/9/87**

* Local Plumbing Inspector Signature if a Local Site Evaluation is performed under a Local Order

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

PORTLAND PEAKS ISLAND BAYBERRY LANE 89-J-5

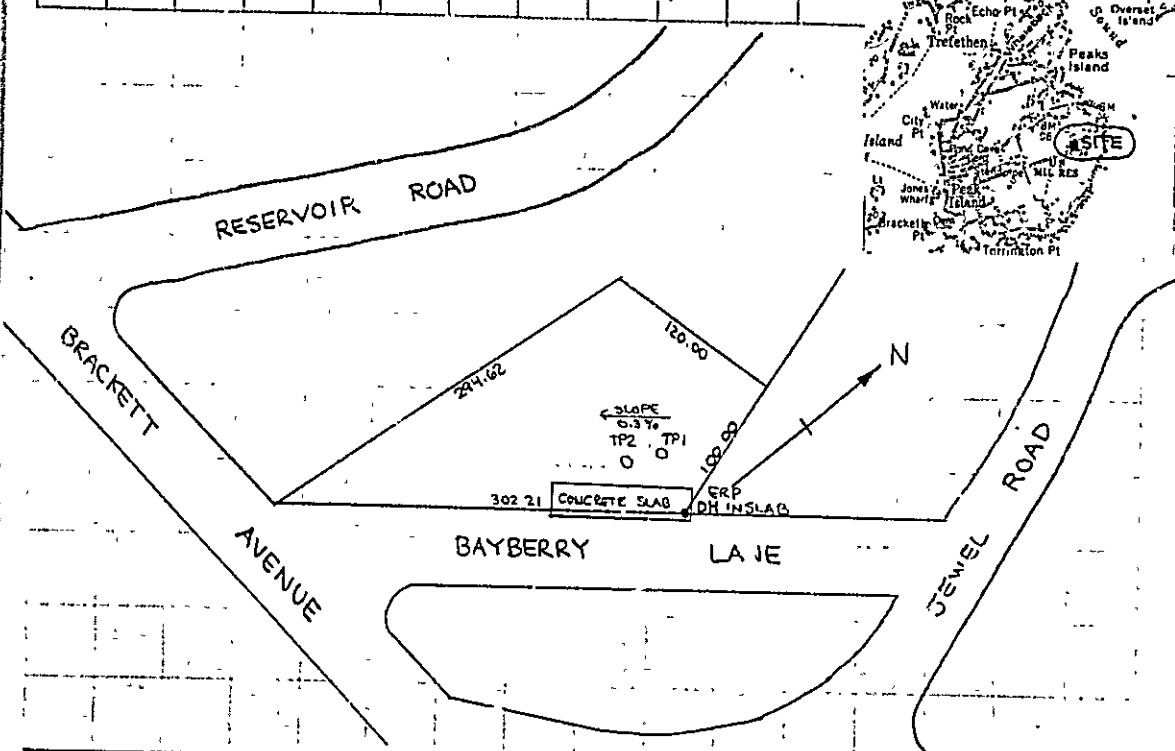
Owners Name

JOHN FEENEY

SITE PLAN

Scale 1" = 100 Ft.

SITE LOCATION PLAN (Attach Map from Maine Atlas for



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 1 Test Pit Boring
2" SOD

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
	0-6	GRAVELLY LOAM		DARK BROWN
6-15		LOOSE		
15-20	SILTY GRAVEL		RED BROWN	NONE EVIDENT
20-30				
30-50	BEDROCK			

Soil 4
Classification AIII
Slope 0.3 %
Limiting Factor 2B
 Ground Water
 Resonance Layer
 Bedrock

Observation Hole 2 Test Pit Boring
2" SOD

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
	0-6	GRAVELLY LOAM		DARK BROWN
6-15		LOOSE		
15-20	SILTY GRAVEL		RED BROWN	NONE EVIDENT
20-30				
30-50				

Soil 4
Classification AIII
Slope 0.3 %
Limiting Factor 2Z
 Ground Water
 Resonance Layer
 Bedrock

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

C003/4814
SEP/PE#

9/9/87
Date

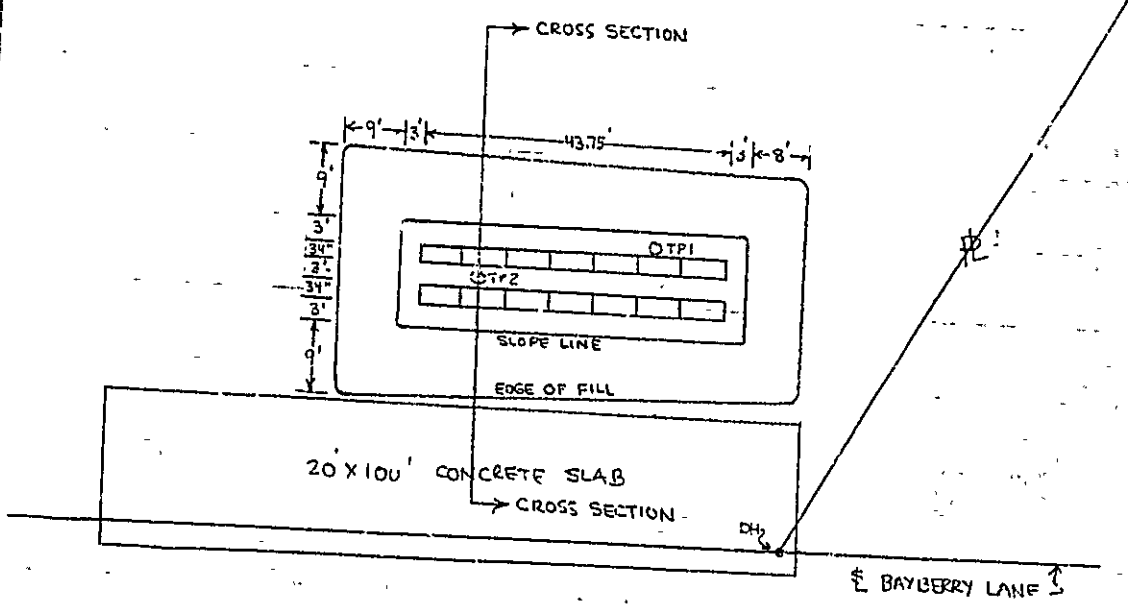
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation: **PORTLAND PEAKS ISLAND**
 Street, Road, Subdivision: **BAYBERRY LANE 89-J-5**
 Owners Name: **JOHN FEENEY**

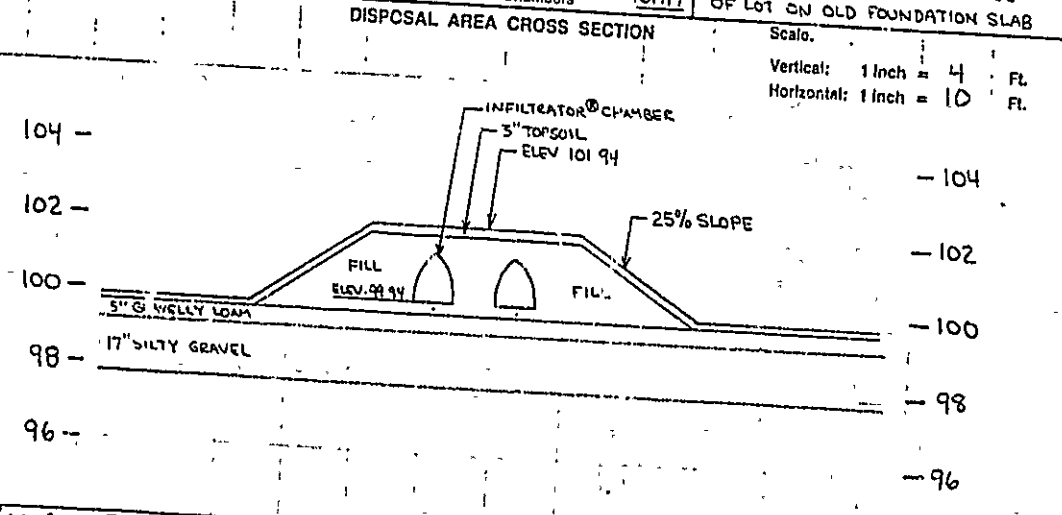
Department of Human Services
 Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' FL.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	25'	Reference Elevation is	100.00	DRILL HOLE EASTERLY CORNER OF LOT ON OLD FOUNDATION SLAB	
Depth of Fill (Downslope)	26'	Bottom of Disposal Area	99.94		
		Top of Distribution Lines or Chambers	101.19		



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

003/4814
 SE #1 PE #

7/9/87
 Date

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