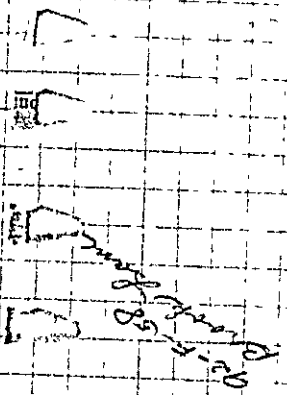
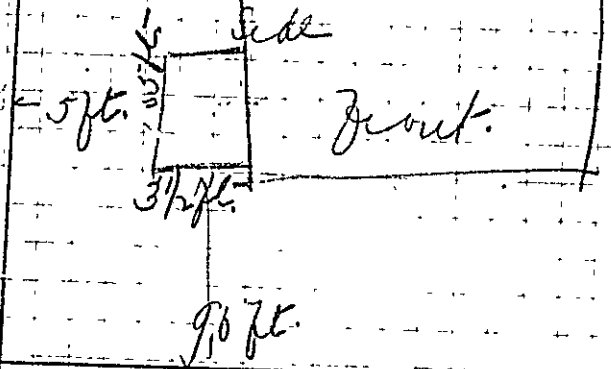


BROOK LANE, PEAKS ISLAND

92-P-58

(A) APARTMENT HOUSE ZONE





(A) APARTMENT HOUSE ZONE

# APPLICATION FOR PERMIT

PERMIT ISSUED

Permit No. 2170  
OCT 15 1929

Class of Building or Type of Structure Third Class

Portland, Maine, October 15, 1929

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location 310 1/2 Brookley Road, Peaks Ward 1 Within Fire Limits? No Dist. No. \_\_\_\_\_  
 Owner's or Lessee's name and address Mrs. Fred Prince & Mrs. Fred Guphill Telephone \_\_\_\_\_  
 Contractor's name and address E. P. Weaver, Sargent Road Peaks Telephone \_\_\_\_\_  
 Architect's name and address \_\_\_\_\_  
 Proposed use of building Cottage No. families \_\_\_\_\_  
 Other buildings on same lot none

### Description of Present Building to be Altered

Material Wood No. stories 1 1/2 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_  
 Last use Cottage No. families \_\_\_\_\_

### General Description of New Work

To enlarge present rear platform, 3 1/2' x 5'

STRENGTH OF OCCUPANT'S REQUIREMENT IS WAIVED  
NOTIFICATION BEFORE LAUNCHING OR CLOSING IS WAIVED

### Details of New Work

Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_  
 To be erected on solid or filled land? no 14 cart: or rock? \_\_\_\_\_  
 Material of foundation concrete Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_  
 Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
 Kind of roof none Roof covering \_\_\_\_\_  
 No. of chimneys 2 Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_  
 Kind of heat \_\_\_\_\_ Type of fuel \_\_\_\_\_ Distance, heater to chimney \_\_\_\_\_  
 If, oil burner, name and model \_\_\_\_\_  
 Capacity and location of oil tanks \_\_\_\_\_  
 Is gas fitting involved? \_\_\_\_\_ Size of service \_\_\_\_\_  
 Corner posts \_\_\_\_\_ Sills 4x8 \_\_\_\_\_ rd? \_\_\_\_\_ size \_\_\_\_\_  
 Material columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
 Studs (outside walls and carrying partitions) 2x4-16" O.C. Girders 6x8 or larger: Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.  
 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 \_\_\_\_\_  
 Total number commercial cars to be accommodated \_\_\_\_\_  
 Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? \_\_\_\_\_

### Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no  
 Plans filed as part of this application? yes No. sheets \_\_\_\_\_  
 Estimated cost \$ 15 Fee \$ .25  
 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 owner Marian A. Guphill

INSPECTION COPY

894

Ward 1 Permit No. 287970

Location Kasieker Broken Rd Peaks

Owner Mrs. Fred Prince et al

Date of permit 10/15/26

Notif. closing-in

In closing-in

Final Notif

Final Inspn

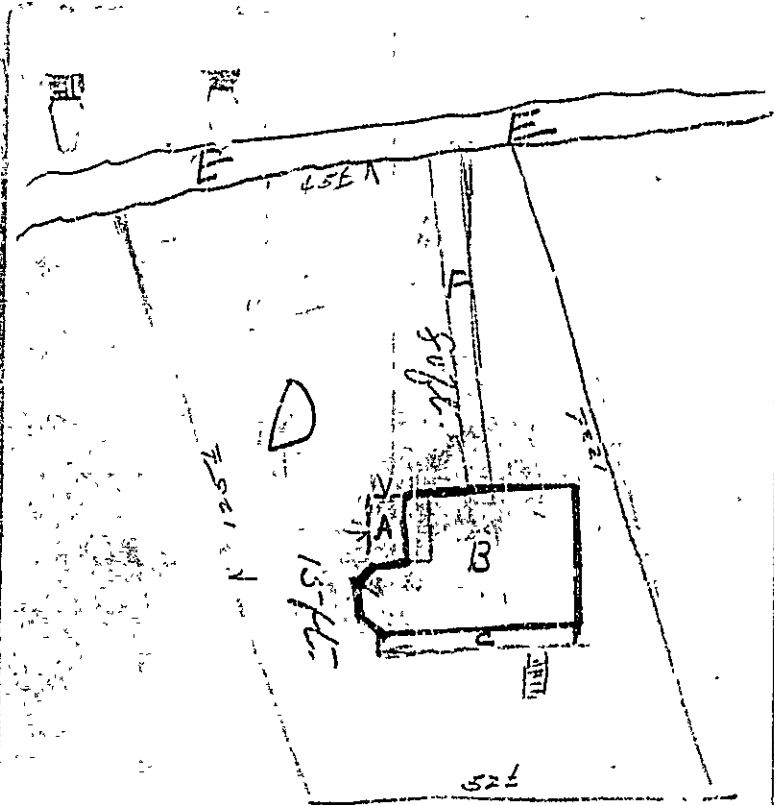
Cert. of Occupancy issued

NOTRS

3/1/29

P.I.F.





- A = Prospective addition 9' x 12'  
one storage  
no cellar
- B = Present Cottage
- C = Piazza
- D = Entire Lot
- E = Humboldt Ave Road
- F = Path to Cottage





# APPLICATION FOR PERMIT

PERMIT ISSUED  
0217

MAR 6 1928

Class of Building or Type of Structure Third Class

Portland, Maine, March 1, 1928

To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

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

Location Enoch's Cove, Peaks Island Ward 1 Within Fire Limits: No Dist. No. \_\_\_\_\_  
 Owner's or Lessee's name and address Enoch's Cove Mrs. F. C. Prince & Mrs. Fred Curball Telephone \_\_\_\_\_  
 Contractor's name and address E. E. Weaver, Sargent Rd. Peaks Island Telephone Peaks 222  
 Architect's name and address \_\_\_\_\_  
 Proposed use of building Cottage No. families 1  
 Other buildings on same lot none

### Description of Present Building to be Altered

Material Wood No. stories 2 1/2 Heat \_\_\_\_\_ Style of roof \_\_\_\_\_ Roofing \_\_\_\_\_  
 Last use Cottage No. families \_\_\_\_\_

### General Description of New Work

To erect addition to cottage 9'x 12', one story

NOTIFICATION BEFORE WORKING  
24 HOURS IN ADVANCE  
REQUIREMENT IS WAIVED

### Details of New Work

Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_  
 To be erected on solid or filled land? \_\_\_\_\_ earth or rock? \_\_\_\_\_  
 Material of foundation Cedar Posts Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_  
 Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
 Kind of roof Flat (shed) Roof covering Asphalt roll Class O Uni. Lab.  
 No. of chimneys no Material of chimneys \_\_\_\_\_ of lining \_\_\_\_\_  
 Kind of heat \_\_\_\_\_ Type of fuel \_\_\_\_\_ Distance, heater to chimney \_\_\_\_\_  
 If oil burner, name and model \_\_\_\_\_  
 Capacity and location of oil tanks \_\_\_\_\_  
 Is gas fitting involved? \_\_\_\_\_ Size of service \_\_\_\_\_  
 Corner posts 4x4 Sills 4x6 Girt or ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
 Material columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
 Studs (outside walls and carrying partitions) 2x4-16" O. C. Girders 6x8 or larger. Bridging in every floor and flat roof span over 8 feet. Sills and corner posts all one piece in cross section.  
 Joists and rafters: 1st floor 2x6 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ roof 4x6  
 On centers: 1st floor 18" 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ roof 18"  
 Maximum span: 1st floor \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_ roof 12'

If one story building with masonry walls, thickness of walls? \_\_\_\_\_ height? \_\_\_\_\_

### If a Garage

No. cars now accommodated on same lot \_\_\_\_\_, to be accommodated \_\_\_\_\_

Total number commercial cars to be accommodated \_\_\_\_\_

Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? \_\_\_\_\_

### Miscellaneous

Will above work require removal or disturbing of any shade tree on a public street? no

Plans filed as part of this application? yes No. sheets 1

Estimated cost \$ 200 Fee \$ .75

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 owner Mrs. F. C. Prince & Mrs. Fred Curball

INSPECTION COPY

587

War / Permit No. 28/247

Location Knickerbocker Rd. Parks

Owner Mrs. F. C. Prince et al

Date of permit 3/6/68

Noti. closing-in

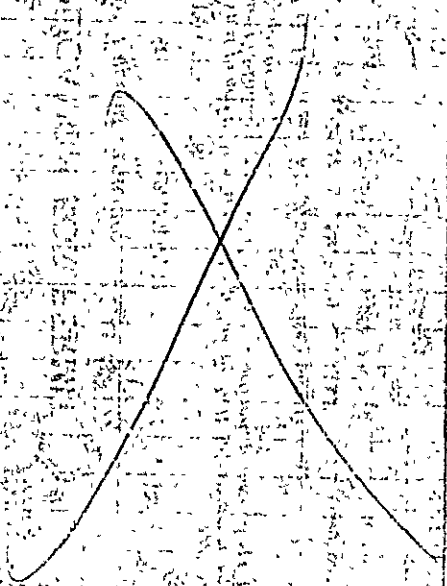
Inspu. closing-in

Final Notif.

Final Inspn. 6/19/68

Cert. of Occupancy issued 92

NOTES





**YOU!** Location, Ownership and detail must be correct, complete and legible. X  
 are responsible for complying with the separate application required for every building.  
 know the requirements to be filed with this application.

**READ!**  
**Application for Permit for Alterations, etc.**

Get All Questions Settled  
**BEFORE Commencing Work** Portland, Me., March 9, 1925 19

To the **INSPECTOR OF BUILDINGS**

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

**Description of Present Bldg.**

Location Evergreen Landing, Peaks Island yard l. .... in fire-limits? no.....  
 Name of Owner or Lessee, Mrs. Fred Prince Address 108 Noyes St.  
 " Contractor, J. E. Stimpson " Peaks Island  
 " Architect, .....  
 Material of Building is wood Style of Roof, pitch Material of Roofing, shingle.....  
 Size of Building is ..... feet long; ..... feet wide. No. of Stories, .....  
 Cellar Wall is constructed of ..... is ..... inches wide on bottom and batters to ..... inches on top.  
 Underpinning is ..... is ..... inches thick; is ..... feet in height.  
 Height of Building ..... 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 1 family.....

**Detail of Proposed Work**

Cut in two windows, cut in doors......  
all to comply with the building ordinance.....  
 .....  
 .....  
 ..... Estimated Cost \$ 600.....

**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 occupied? ..... 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? .....  
 How many feet will the External Walls be increased in height? ..... Party Walls .....  
 .....  
 .....

**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 J. E. Stimpson  
 Address Island Ave. Peaks Island

PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK



1

1281

MP  
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*Bank Land*  
Evergreen Landing, Peaks  
Lot 20  
March 7, 1925

*Wm. Fred Prince*  
*92 4.58*  
*6375*

INVESTMENT OF INVESTMENT MONEY

AN EXPENSE ON JAN 21ST

REQUIREMENTS MUST BE OBTAINED BEFORE DECIDING MON

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Division of Health Engineering  
(207) 289-3826

**PROPERTY ADDRESS**

Town Or Plantation: PORTLAND PEAKS ISLAND

Street: BROOK LANE

Subdivision/Lot #: TAX MAP 92, BLOCK F LOTS 58, 59

**PROPERTY OWNERS NAME**

Last: WILBUR First: DEBORAH

Applicant Name: DEBORAH WILBUR

Mailing Address of Owner/Applicant (if different): 112 SCHOOL STREET, CONCORD NEW HAMPSHIRE 03301

PORTLAND PERMIT # 1,687 TOWN COPY

Date Permitted: 4-17-86 Fee: \$440  Fee Charged

Signature: [Signature] L.P.I. # 1213

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

**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: JUL 7 - 1986

**PERMIT INFORMATION**

<p><b>THIS APPLICATION IS FOR:</b></p> <p>1. <input type="checkbox"/> NEW SYSTEM</p> <p>2. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> SEASONAL CONVERSION</p> <p>5. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p><b>THIS APPLICATION REQUIRES:</b></p> <p>1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p><input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>3. <input type="checkbox"/> Requires only Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval</p>	<p><b>INSTALLATION IS COMPLETE SYSTEM</b></p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+2000 gpd)</p> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED <u>1900±</u></p> <p>THE FAILING SYSTEM IS:</p> <p>1. <input type="checkbox"/> BED 2. <input type="checkbox"/> TRENCH</p> <p>3. <input type="checkbox"/> CHAMBER 4. <input checked="" type="checkbox"/> OTHER <u>OVERBOARD DISCHARGE</u></p>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER _____ SPECIFY _____</p>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><u>PUBLIC WATER</u></p>
<p><b>SIZE OF PROPERTY</b></p> <p><u>11,324</u></p>	<p><b>ZONING</b></p> <p><u>IR1</u></p>	

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<p><b>TREATMENT TANK</b></p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input checked="" type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <u>1000</u> GALS.</p>	<p><b>WATER CONSERVATION</b></p> <p>1. <input type="checkbox"/> NONE</p> <p>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED</p> <p>DOSE: _____ GALS</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p>3 BEDROOM CONSERVATIVE <u>450</u></p> <p>LOW VOLUME TOILET <u>-45</u></p>
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <p>PROFILE: <u>2</u> CONDITION: <u>ATL</u></p> <p>DEPTH TO LAYING FACTOR: <u>25</u></p>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input checked="" type="checkbox"/> MEDIUM-LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRA LARGE</p>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <p>1. <input checked="" type="checkbox"/> BED <u>1300</u> Sq. Ft.</p> <p>2. <input type="checkbox"/> CHAMBER _____ Sq. Ft.</p> <p><input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	<p><b>DESIGN FLOW</b></p> <p><u>405</u> (GALLONS/DAY)</p>

**SITE EVALUATOR STATEMENT**

On SEPTEMBER 21, 1985 (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.

Signature: [Signature] Date: 11/23/85

DR: Evaluator or Professional Engineer's Signature  
Local Plumbing Inspector's Approval if a Local Site Extension Waiver under a Local Option

Page 1 of 3  
HHC-20C Rev. 4/81

Comm. City, P.S. 11-301

Street, Road, Subdivision

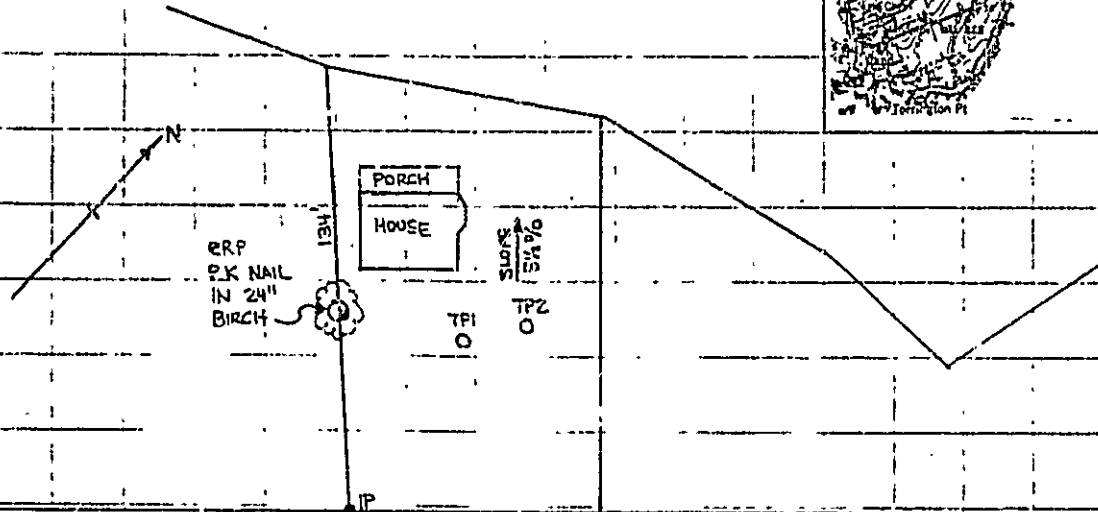
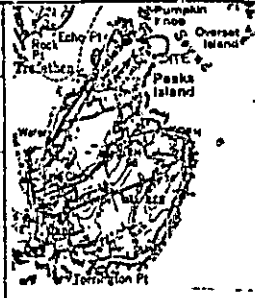
Owner Name

PORTLAND PEAKS ISLAND BROOK LANE 92-F-58, 59

DEBORAH WILBUR

SITE PLAN

Scale 1" = 50 ft.



BROOK LANE

**SOIL DESCRIPTION AND CLASSIFICATION**

(Location of Observation Holes Shown Above)

Observation Hole 1  Test Pit  Boring

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

Texture	Consistency	Color	Mottling
		RED BROWN	
		BROWN	
SANDY LOAM	LOOSE		NONE
		RED BROWN	
			FEW
BEDROCK			

Soil 2 Classification AIII Slope 5.5% Limiting Factor 17

Ground Water  Buried Layer  Surface

Observation Hole 2  Test Pit  Boring

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

Texture	Consistency	Color	Mottling
		RED BROWN	
		BROWN	
SANDY LOAM	LOOSE	BROWN	NONE
		RED BROWN	
BEDROCK			

Soil 2 Classification AIII Slope 5.5% Limiting Factor 25

Ground Water  Buried Layer  Surface

*William B. Jordan*  
Evaluating Professional/Engineer's Signature

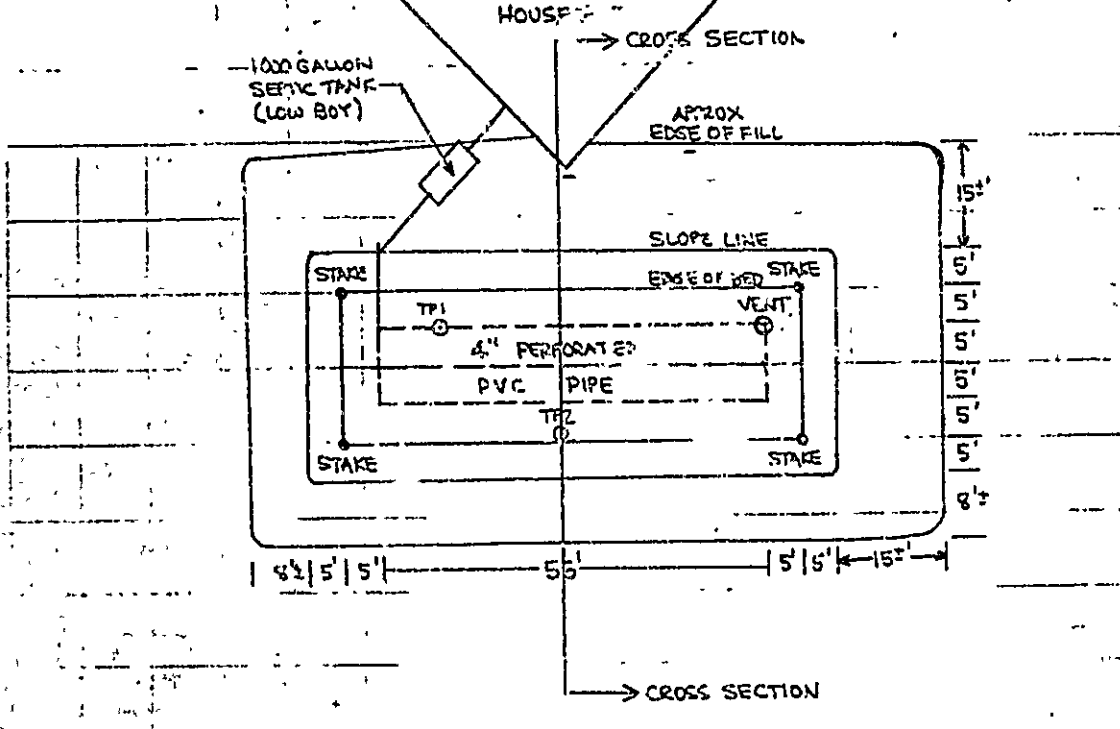
0003/4814  
SE#/PE#

11/23/85  
Date

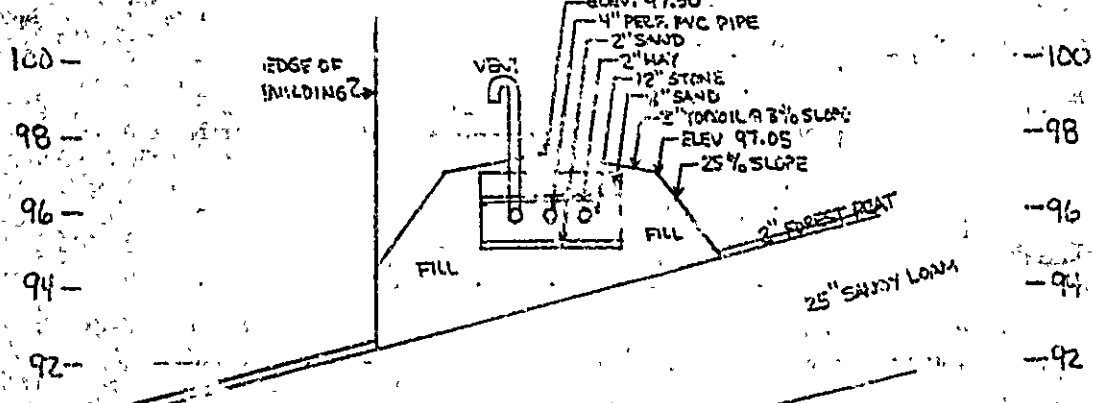
**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Division of Health Engineering

Town, City, Parish	Street, Road, Subdivision	Owners Name
PORTLAND PEAKS ISLAND	BROOK LANE 92-F-58,59	DEBORAH WILBUR
SUBSURFACE WASTEWATER DISPOSAL PLAN		Scale 1" = 20' Pl.



<b>FILL REQUIREMENTS</b>	<b>CONSTRUCTION ELEVATIONS</b>	<b>ELEVATION REFERENCE POINT LOCATION &amp; DESCRIPTION</b>
Depth of Fill (Up slope)	Reference Elevation	100.00
Depth of Fill (Down slope)	Bottom of Disposal Area	95.05
	Top of Distribution Lines or Chambers	98.13
		PK NAIL IN 2x4 BIRCH NEAR SOUTHWEST CORNER OF HOUSE
<b>DISPOSAL AREA CROSS SECTION</b>		
Scale:		
Vertical: 1 inch = 20' Pl.		
Horizontal: 1 inch = 4' Pl.		



Site Evaluator or Professional Engineer's Signature: *William B. Johnson*     
 Date: 11/23/85     
 Page 3 of 3     
 IRIE-200 Rev. 4/85