



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date 6/19/90, 19__
 Receipt and Permit number 0378

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: Lot 92-6-B Pleasant St - Peak Island
 OWNER'S NAME: John Williamson ADDRESS: RFD 10 - Box 160 - Concord, NH

OUTLETS: Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____
 FEES

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

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

METERS: (number of) _____

MOTORS: (number of) Fractional _____
 1 HP or over _____

RESIDENTIAL HEATING: Oil or Gas (number of units) _____
 Electric (number of rooms) _____

COMMERCIAL OR INDUSTRIAL HEATING: Oil or Gas (by a main boiler) _____
 Oil or Gas (by separate units) _____
 Electric Under 20 kws _____ or 20 kws _____

APPLIANCES: (number of) Ranges _____ Water Heaters _____
 Cook Tops _____ Disposals _____
 Wall Ovens _____ Dishwashers _____
 Dryers _____ Compactors _____
 Fans _____ Others (denote) _____

TOTAL _____

MISCELLANEOUS: (number of) Branch Panels _____
 Transformers _____
 Air Conditioners Central Unit _____
 Separate Units (windows) _____

Signs 20 sq. ft. and under _____
 Over 20 sq. ft. _____

Swimming Pools Above Ground _____
 In Ground _____

Fire/Burglar Alarms Residential _____
 Commercial _____

Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____
 or 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-b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 5.00

INSPECTION: Will be ready on _____, 19__, or Will Call minimum fee _____

CONTRACTOR'S NAME: Bay Electric Co.
 ADDRESS: Box 6316 Cape Elizabeth

TEL: 799-0350
 MASTER LICENSE NO: 09171 SIGNATURE OF CONTRACTOR: [Signature]

LIMITED LICENSE NO: _____

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

CITY OF PORTLAND, MAINE
Department of Building Inspection



Certificate of Occupancy

LOCATION Pleasant Ave., Peaks Island

Date of Issue 92-G-8

9/15/90

Issued to Ruth Williamson

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. 9/2974, 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

Entire

Single-family dwelling

Limiting Conditions:

This certificate supersedes
certificate issued

Approved:

9-11-90

(Date)

Inspector

Inspector of Buildings

Notice: This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

002974
 Permit # _____ City of Portland BUILDING PERMIT APPLICATION Fee \$345.00 Zone _____ Map # _____ Lot# _____

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

Owner: Ruth Williamson Home Phone # 603-228-8185 - Concord, N.H.
 Address: 9 Cypress St., Concord, Office: 603-224-7413
 N.H. 03301 92-G-8 Pleasant St.
 LOCATION OF CONSTRUCTION Foundation
 Contractor: Alouette Yes Sub: Covington Johnson, P.I.
 Address: R.F.d. #1, Concord, N.H. Phone # 603-228-2004
 Est. Construction Cost: \$5,000.00 Proposed Use: Single Fam.
 Past Use: Vacant Lot
 # of Existing Res. Units _____ # of New Res. Units 120
 Building Dimensions L 30' W 24' Total Sq. Ft. _____
 # Stories 1 # Bedrooms 2 Lot Size: 54,527 S.F.
 Is Proposed Use: Seasonal _____ Condominium _____ Conversion _____
 Explain Conversion To construct sin. fam., 30'x24', as per 2
sets of Site Plans & 1 Const.

For Official Use Only
 Date Dec. 7, 1989 Subdivision _____
 Inside Fire Alarm _____ Lot _____
 Bldg Code _____ Ownership _____ Public _____
 Time Limit _____ Private _____
 Estimated Cost: \$295.00 Minor, Minor Site Plan \$50.00
 Zoning: 1-R-1
 Street Frontage Provided: _____
 Provided Setbacks: Front _____ Back _____ Side _____
 Review Required: applicant says public writer
 Zoning Board Approval: Yes _____ No _____ Date: _____
 Planning Board Approval: Yes _____ No _____ Date: _____
 Conditional Use: _____ Variance _____ Site Plan _____ Subdivision _____
 Show _____ Yes _____ No _____ Floodplain Yes _____ No _____
 Sps _____
 Othe _____
 OK _____

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. Girders Size: _____
 3. Lally Column Spacing: _____ Size: _____
 4. Joists Size: _____ Spacing 16" O.C.
 5. Bridging Type: _____ Size: _____
 6. Floor Sheathing Type: _____ Size: _____
 7. Other Material: _____

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

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

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

Roof:
 1. Truss or Rafter Size _____
 2. Sheathing Type _____
 3. Roof Covering Type _____
 Span _____
 Size _____
 City of Portland

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 _____
 2. No. of Toilets or Showers _____
 3. No. of Sinks _____
 4. No. of Lavatories _____
 5. No. of Other Fixtures _____

Swimming Pools:
 1. Type: _____
 2. Pool Size: _____ Square Footage _____
 3. Must conform to National Electrical Code and State Law

Permit Received By Joyce M. Ringold
 Signature of Applicant _____ Date _____
 Signature of C.O. _____ Date _____
 Inspection Dates _____

PERMIT ISSUED
 00 295 DEC 26 1989
PERMIT ISSUED WITH LETTER

PLOT PLAN

N
↑

FEEES (Breakdown From Front)

Base Fee \$295.00
Subdivision Fee \$
Site Plan Review Fee \$ 50.00 Minor. Minor
Other Fees \$
(Explain)
Late Fee \$

Type

Inspection Record

Date

Type	Inspection Record	Date
		/ /
		/ /
		/ /
		/ /
		/ /

COMMENTS

*Bill Boothby called 29/02/89 C.K'd. \$
8-16-90 - OK fee*

Signature of Applicant

Guth Williamson

Date

10/ - / 89

BUILDING PERMIT REPORT

ADDRESS: 92-G-B. Pleasant Ave P.I. DATE: 29/Dec/89

REASON FOR PERMIT: To Construct Seasonal Single Family Dwelling.

BUILDING OWNER: Ruth Williamson

CONTRACTOR: Bullet Homes

PERMIT APPLICANT: owner

APPROVED: *1*2*6*7*9*10 DENIED:

CONDITION OF APPROVAL OR PENAL:

- *1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.
- *2.) Precaution must be taken to protect concrete from freezing.
- 3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.
- 4.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- 5.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by placing over the boiler, two(2) residential uprunker heads supplied from the domestic water.
- *6.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m²). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).
- *7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

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

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

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

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

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

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

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

Sincerely,


P. Samuel Hoffes
Chief of Inspection Services

/el
11/16/88

12. Applicant stated served by Public Water

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Ruth Williamson - 503-228-8185 - Home or 603-224-7413 - Office Date Dec. 7, 1989

Applicant Cypress St., Concord, N.H. 03301 Date Dec. 7, 1989

Mailing Address Single Family Address of Proposed Site 92-G-B Pleasant St., P. I.

Proposed Use of Site 54,527 S.F. / 720 S.F. Site Identifier(s) from Assessors Maps IR-1

Acres of Site 1 Ground Floor Coverage 720 S.F. Zoning of Proposed Site 92-G-B

Site Location Review (DEP) Required: () Yes () No Proposed Number of Floors 1

Board of Appeals Action Required: () Yes () No Total Floor Area 720 S.F.

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 applicant says public water

Use complies with Zoning Ordinance — Staff Review Below

Zoning: **SPACE & BULK**, as applicable

	DPTC	ZONE LOCATED	VEHICLE OR COMMERCIAL LOT	40 FT. SETBACK AREA (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	OFF-STREET PARKING	LOADING BAYS	
COMPLIES																			
COMPLIES CONDITIONALLY																			CONDITIONS SPECIFIED BELOW
DOES NOT COMPLY																			REASONS SPECIFIED BELOW

REASONS: OK W/D Plan 12-29-89

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW

Steve HARRIS

Processing Form

Ruth Williamson - 603-228-8185 - Home or
Applicant 603-224-7413 - Office
Cypress St., Concord, N.H. 03301

Dec. 7, 1989

Mailing Address
Single Family

92-G-B Pleasant St., P. I.
Address of Proposed Site

Proposed Use of Site
54,927 S.F. / 120 S.F.

Site Identifier(s) from Assessors Maps
IR-1

Acreage of Site / Ground Floor Coverage

Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No
Board of Appeals Action Required: () Yes () No
Planning Board Action Required: () Yes () No

Proposed Number of Floors 1
Total Floor Area 720 S.F.

Other Comments:

Date Dept. Review Due:

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received)

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

REASONS:

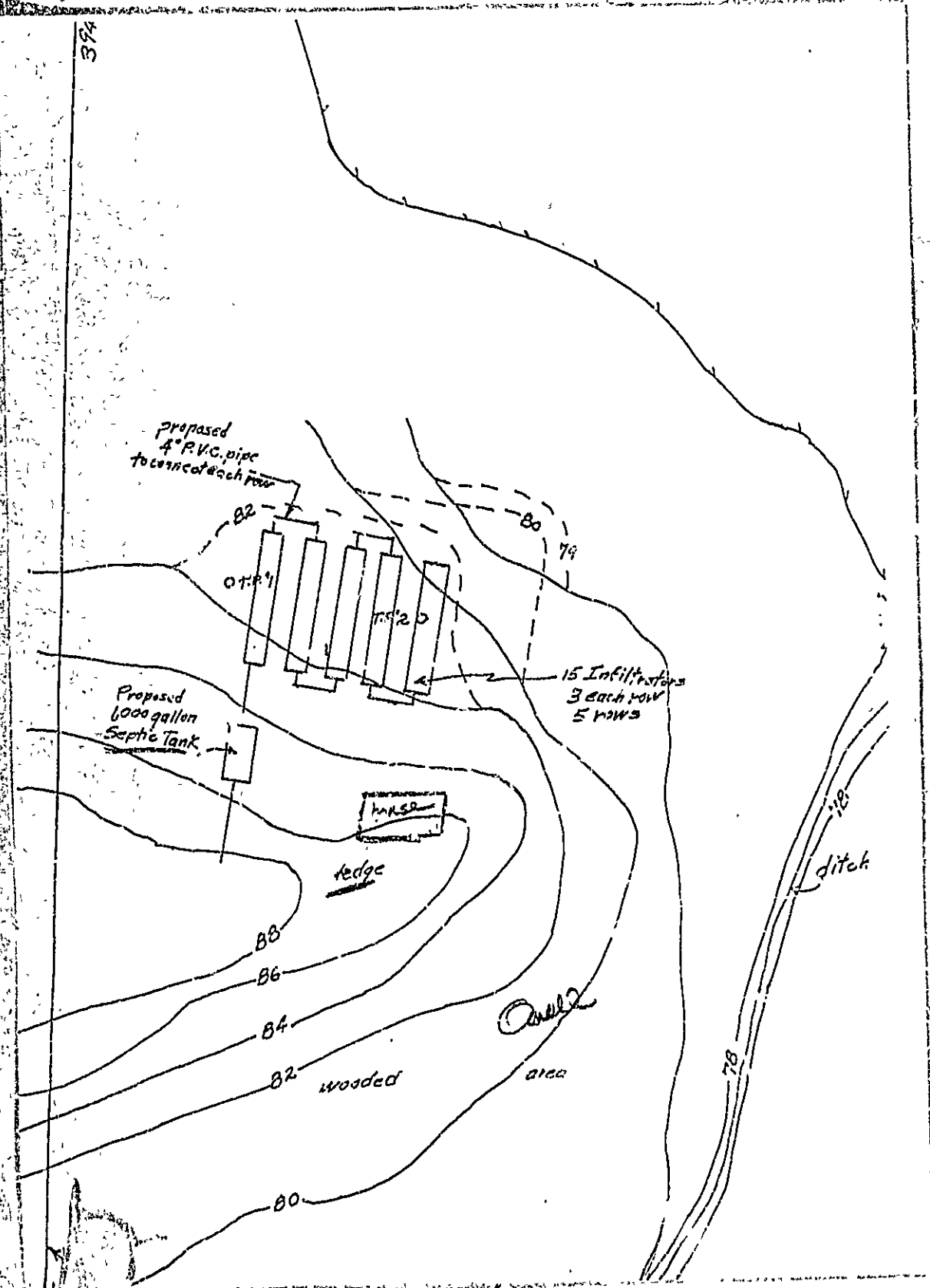
(Attach Separate Sheet if Necessary)

approved

William B. [Signature] 12/29/89
SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

394



SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

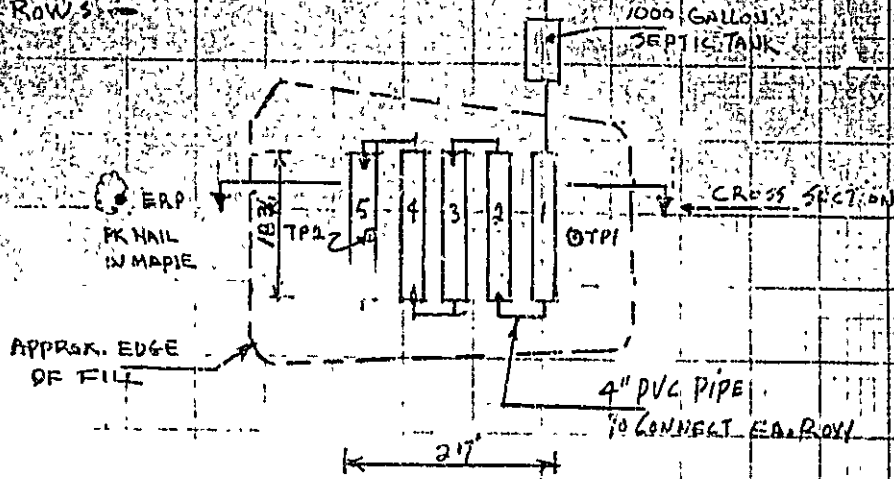
Town, City, Plantation

Street, Road, Subdivision

Date Issued of Human Services
Division of Health Engineering

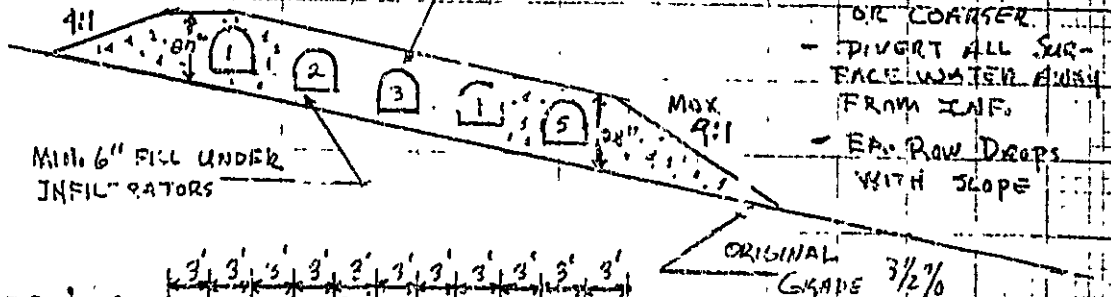
PORTLAND PEAKS ISLAND PLEASANT AVE. 99-G-8 KEATHVILLE, N.H.
SUBSURFACE WASTEWATER DISPOSAL PLAN

- 15 - INFILTRATORS
- 3 - EA. ROW
- 5 - ROWS



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	27'	Reference Elevation is	1000	PK NAIL IN MAPLE TREE	
Depth of Fill (Downslope)	27'	Bottom of Disposal Area	5 FT BELOW	36' WESTERLY OF T.P. 2	
		Top of Distribution Lines or Chambers			

DISPOSAL AREA CROSS SECTION			Scale:	
BOTTOM	TOP		Vertical:	1 Inch = 5 FT.
T#1 101.0	T#1 102.5		Horizontal:	1 Inch = 10 FT.
T#2 100.8	T#2 102.1			
T#3 100.6	T#3 101.9			
T#4 100.4	T#4 101.7			
T#5 100.2	T#5 101.5			

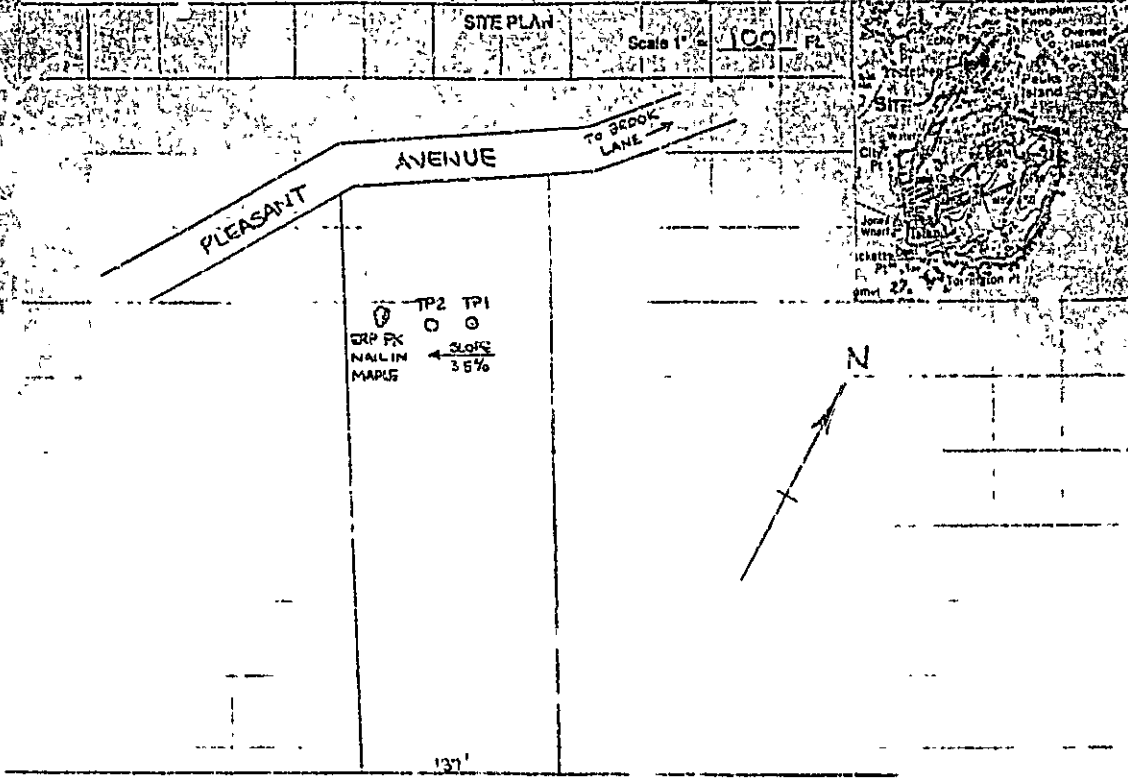


- CLEAR & SCARIFY UNDER ALL FILL
- FILL SANDY LOAM OR COARSER
- DIVERT ALL SURFACE WATER AWAY FROM INF.
- EA. ROW DROPS WITH SLOPE

3' 3' 3' 3' 3' 3' 3' 3' 3' 3'
 William B. Goodwin 003/4814 5/22/87
 Prof. Engineer Site Evaluator Signature SEP/PE.# Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation: **PORTLAND PEAKS ISLAND** Street, Road, Subdivision: **PLEASANT AVE 92-G-8** Owner's Name: **RUTH W. LAMSON**



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)			
Observation Hole <u>1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		Observation Hole <u>2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring	
2' FOREST PEAT - Depth of Organic Horizon Above Mineral Soil		2' FOREST PEAT - Depth of Organic Horizon Above Mineral Soil	
Texture	Consistency	Color	Mottling
0-4" SANDY LOAM			
4-15" LOAMY GRAVEL	LOOSE	RED BROWN	NONE
15-30" SILTY GRAVEL			FEW
30-40" BEDROCK			
40-50" BEDROCK			
Soil Type: <u>U</u>	Classification: <u>AII</u>	Slope: <u>3.5%</u>	Limit: <u>20</u>
<input checked="" type="checkbox"/> Condensed Observations <input type="checkbox"/> Detailed Observations			

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)			
Observation Hole <u>2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		Observation Hole <u>2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring	
2' FOREST PEAT - Depth of Organic Horizon Above Mineral Soil		2' FOREST PEAT - Depth of Organic Horizon Above Mineral Soil	
Texture	Consistency	Color	Mottling
0-6" SANDY LOAM		RED BROWN	
6-15" LOAMY SAND	LOOSE	RED YELLOW	NONE
15-30" SILTY GRAVEL	Moderately Friable	YELLOW GRAY	FEW
30-40" BEDROCK			
40-50" BEDROCK			
Soil Type: <u>U</u>	Classification: <u>AII</u>	Slope: <u>3.5%</u>	Limit: <u>20</u>
<input checked="" type="checkbox"/> Condensed Observations <input type="checkbox"/> Detailed Observations			

B. J. [Signature] 0003/4314 5/22/03
 Site Evaluator or Professional Engineer's Signature SE# / P.E.P. Date
 Page 2 of 3 NHE-200 Rev 4/81

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3625

PROPERTY ADDRESS

Town Or Plantation: **PORTLAND PEAKS ISLAND**

Street: **PLEASANT AVENUE**

Subdivision Lot #: **TAX MAP 92 BLOCK G LOT 8**

PROPERTY OWNERS NAME

Last: **WILLIAMSON** First: **RUTH**

Applicant Name: **RUTH WILLIAMSON**

Mailing Address of Owner/Applicant (if different): **1 CHURCH STREET GROVETON N.H.**

Caution: Permit Required

PORTLAND PERMIT # 21874 TOWN COPY

APPROVED FOR INSTALLATION ON 06/22/87

Local Plumbing Inspector Signature: *[Signature]*

Owner/Applicant Statement

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

Signature of Owner/Applicant: *[Signature]* 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: *[Signature]* Date Approved: **JUN 22 1987**

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 PFD 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

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

DISPOSAL SYSTEM TO SERVE:

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

SIZE OF PROPERTY: 54,527 SF **ZONING:** IR 1

TYPE OF WATER SUPPLY: DRILLED WELL OR SEASONAL PUBLIC WATER

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: ATII

DEPTH TO LIMITING FACTOR: 20

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRALARGE

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq Ft.
- CHAMBER 375 Sq Ft.
- TRENCH Infiltrator (15) Linear Ft.
- OTHER _____

SITE EVALUATOR STATEMENT

On OCTOBER 12 1986 (Date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Site Evaluator or Professional Engineer's Signature: *[Signature]* License # 0003/4814 Date: 6/22/87

* Local Plumbing Inspector Signature if a Local Site Evaluation Water User is a Local Option

Page 1 of 3
HHE-200 Rev 4/73