

# PLUMBING APPLICATION

**PROPERTY ADDRESS**

Town Or Plantation: Portland  
 Street: 105-L-9  
 Subdivision Lot #: Anderson av. Littleton

**PROPERTY OWNERS NAME**

Last: Travis First: Joseph

Applicant Name: Daves

Mailing Address of Owner/Applicant (if Different): same

PORTLAND PERMIT # 494 TOWN COPY

Date Permit Issued: 6-11-84 \$ 21 FEE  
 Double Charged

L.P.I. # 123

*Paul J. ...*  
Local Plumbing Inspector Signature

**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.

*Joseph Travis* 6-11-84  
Signature of Owner/Applicant Date

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

*Paul J. ...* AP  
Local Plumbing Inspector Signature Date Approved: DEC 11 1985

**PERMIT INFORMATION**

This Application is for:

- NEW PLUMBING
- RELOCATED PLUMBING

Type Of Structure To Be Served:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER - SPECIFY \_\_\_\_\_

Plumbing To Be Installed By:

- MASTER PLUMBER
- OIL BURNERMAN
- MFG D. HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # \_\_\_\_\_

Number	Hook-Ups And Piping Relocation	Column 2		Column 1	
		Number	Type Of Fixture	Number	Type Of Fixture
	HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	1	Hose/Stub / Sillcock		Bathtub (and Shower)
			Floor Drain	1	Shower (Separate)
			Unnal	1	Sink
	HOOK-UP: to an existing subsurface wastewater disposal system.		Drinking Fountain		Wash Basin
			Indirect Waste	1	Water Closet (Toilet)
			Water Treatment Strainer, Filter, etc	1	Clothes Washer
			Grease/Oil Separator		Dish Washer
			Dental Cuspidor		Garbage Disposal
	PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures		Bidet		Laundry Tub
			Other: _____	1	Water Heater
		Hook-Ups (Subtotal)		Fixtures (Subtotal) Column 2	7
\$	Hook-Up Fee				Fixtures (Subtotal) Column 2
				7	Total Fixtures
				\$ 21	Fixture Fee
				\$	Hook-Up Fee
				\$ 21	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

TOWN COPY

ORIGINAL — To be sent to Division of Health Engineering, Augusta, Maine 04330

MAINE DEPARTMENT OF HEALTH AND WELFARE APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT (For systems disposing of less than 7000 gallons per day) 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

Town Portland Street, Road, etc. Anderson Ave Little Diamond Island If on water body, give name Permit No. 105-L-9 Date \_\_\_\_\_

Owner of property Joseph Feeney Owner's address 17 Charles St. Houiton Me 04730 Size of lot 11,400  Sq. feet  Acres  
 Name & type of establishment Summer Residence Is lot Zoned?  Yes  No Type of Zoning  Residential  Commercial  Resource Protection

Name of applicant Theodore T Rand If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:  
 Deed restriction re private sewage disposal  
 Copy of the subdivision's soils report  
 Soils report from a State Agency  
 Applicant's address Little Diamond Island Tel. No. 766-2087  
 Town Portland Maine 04109 Subdivision name Assessors 105-L Lot No. 9

Applicant's signature Theodore T Rand Date 3/19/82  
 Owner's signature \_\_\_\_\_ Date \_\_\_\_\_

This application is for  New System  Expanded System  Replacement System  Replacement of  Treatment Tank Only  Disposal Area Only  
 The water supply for this property is  Dug well, depth \_\_\_\_\_, lining \_\_\_\_\_,  Drilled well, depth \_\_\_\_\_, lining \_\_\_\_\_,  Spring  depth \_\_\_\_\_, lining \_\_\_\_\_,  Surface water  Body,  Course  with disinfection.  without disinfection.  Public Utility, name PUDIST

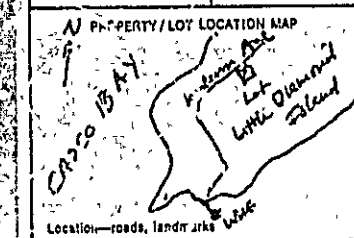
SITE INVESTIGATION Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II

Soil Profile No.	Soil Profile No. 1		Soil Profile No. 2		Soil Profile No. 3		Soil Profile No. 4	
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring
Organic strata	Inches		Inches		Inches		Inches	
1st strata	<u>DBFSL</u>		<u>Dark Dense Silty Sand Many Fines</u>		<u>DBFSL</u>		<u>Dark Dense Silty Sand Many Fines</u>	
Inches	<u>5"</u>		<u>13"</u>		<u>6"</u>		<u>5"</u>	
2nd strata	<u>Medium Sand Many Fines</u>		strata		<u>Medium Sand Many Fines</u>		strata	
Inches	<u>14"</u>		Inches		<u>14"</u>		Inches	
3rd strata	<u>Gr Brown Silty Sand</u>		strata		<u>Yellow Brown Silty Sand Many Fines</u>		strata	
Inches	<u>15"</u>		Inches		<u>16"</u>		Inches	
Total Depth of observation hole	Inches		Inches <u>47"</u>		Inches		Inches <u>42"</u>	
Max. Ground water table—mottling	Inches		Inches <u>35"</u>		Inches		Inches <u>36"</u>	
Impervious layer, clay, etc.	Inches		Inches <u>35"</u>		Inches		Inches <u>36"</u>	
Bedrock	Inches		Inches		Inches		Inches	
Type of Bedrock	Inches		Inches		Inches		Inches	
Surface slope	%		<u>6%</u>		%		<u>5%</u>	
Soil Group & Condition per Table 9-1 of the Code, II	C-2		C-2		C-2		C-2	

On 3/17/82 (date), a site investigation for this project was completed. I supervised this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.  
 Signature and Registration/Certification Number Theodore T Rand 143  
 Date signed 3-19-82  
 Soil Scientist  
 Geologist  
 Soil Engineer  
 Other, must show current letter of certification to LPI

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM:	TREATMENT TANK:	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION
		Type	SIZE	
<input checked="" type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe	<input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer— <u>7SD</u> Size in gallons <input type="checkbox"/> Aerobic Tank Manufacturer— <u>_____</u> Model No. <u>_____</u> Size in gallons <u>_____</u>	<input type="checkbox"/> Trench System: Total length _____ <input type="checkbox"/> Bed System: <u>Round Chamber</u> Length <u>8'</u> Width <u>8'</u> <input type="checkbox"/> Chamber System: Number _____ Type A _____ Type F _____ <input type="checkbox"/> Mound System: Length _____ Width _____ <input type="checkbox"/> Special System: Length _____ Width _____ <input type="checkbox"/> Non-discharge System: Bed Length _____ Width _____ Holdup Tank Size _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provided, type _____	<input type="checkbox"/> Very Small <input type="checkbox"/> Small <input checked="" type="checkbox"/> Medium Large <input type="checkbox"/> Large <input type="checkbox"/> Extra Large	Fill in— <input checked="" type="checkbox"/> required, <input type="checkbox"/> not required Fill will be <u>6-8"</u> inches deep DETAILS <input checked="" type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> is not required. The Dose will be _____ gallons DISTANCES <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption 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. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 300 feet from any springs producing 2000 gallons per day and any public water supply.



FOR THE USE OF LPI ONLY  
 Denial. Application is denied for following reasons; portions of the Code II are cited.  
 Form is incomplete  as to  General Info  Site Investigation  System Proposed  
 Site Plan  Disposal System Plan  Cross-Section  Statement. See Section 2.3.  
 Site Investigation indicates site is  totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 4 and 10.  Unsuitable for system proposed; Sections 4.3, 4.5, 9.3, Table 9-1.  
 System Proposed does not conform to Code; See Sections 8 \_\_\_\_\_  
 Site Investigation indicates site modifications are necessary; See Sections  4.3.  4.4.  4.5.  8.7.  
 Miscellaneous \_\_\_\_\_ See Section \_\_\_\_\_  
 Acceptance: Application for permit is approved  with conditions specified, comply with section \_\_\_\_\_  
 without conditions.  
 Signed Theodore T Rand Date 3/22/82 WHE 203 7/74

APPLICATION FOR PERMIT

PERMIT ISSUED

MAR 20 1983

B.O.C.A. USE GROUP .....

B.O.C.A. TYPE OF CONSTRUCTION 00213

ZONING LOCATION R-2 PORTLAND, MAINE March 28, 1983

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 105-L-9 Anderson Avenue, Little Diamond Island Fire District #1 , #2

1. Owner's name and address Joseph Feeney- 17 Charles St. Houlton, Me. Telephone .....

2. Lessee's name and address .....

3. Contractor's name and address Ted Rand - Little Diamond Island 04109 Telephone # 766-2087

Proposed use of building summer cottage No. of sheets .....

Last use .....

Material .....

Other buildings on same lot .....

Estimated contractual cost \$ 20,000 Appeal Fees \$ .....

FIELD INSPECTOR - Mr. [Name] 20,000 Base Fee 110.00

@ 775-5451 Late Fee .....

TOTAL \$ .....

No. of sheets .....

No. families .....

No. families .....

Roofing .....

Roofing .....

Roofing .....

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send permit to # 3 04109

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? If not, what is proposed for sewage? septic system

Has septic tank notice been sent? yes Form notice sent? .....

Height average grade to top of plate 20' Height average grade to highest point of roof 25'

Size, front 32 depth 24 No. stories 1 1/2 solid or filled land? earth or rock? earth

Material of foundation pressure treated Thickness, top .....

Kind of roof pitch plies Rise per foot 5/12 & 12/12 Roof covering asphalt shingles

No. of chimneys 1 Material of chimneys block of lining tile Kind of heat stove heat

Framing Lumber--Kind pine & spruce S.P. Dressed or full size? Corner posts 4 x 6 Sills 6 x 8

Size Girder 6 x 8 Columns under girders on posts 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 2 x 8 2nd .....

On centers: 1st floor 16 2nd .....

Maximum spans: 1st floor .....

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

IF A GARAGE

No. cars now accommodated on same lot .....

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

APPROVALS BY: DATE MISCELLANEOUS

BUILDING INSPECTION-- (IN EXAMINER) Will work require disturbing of any tree on a public street? no

ZONING: [Signature] 3/28/83

BUILDING CODE: .....

Fire Dept.: .....

Health Dept.: .....

Others: [Signature] .....

Signature of Applicant [Signature] Phone # .....

Type Name of above Ted Rand for Joseph Feeney 1  2  3  4

Other .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

and Address .....

[Handwritten signature]

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

NOTES

5-20-87 - Completed

Permit No. 83/0213

Location 105/1-9 Coakburn

Owner S-98-83

Date of permit 3-28-83

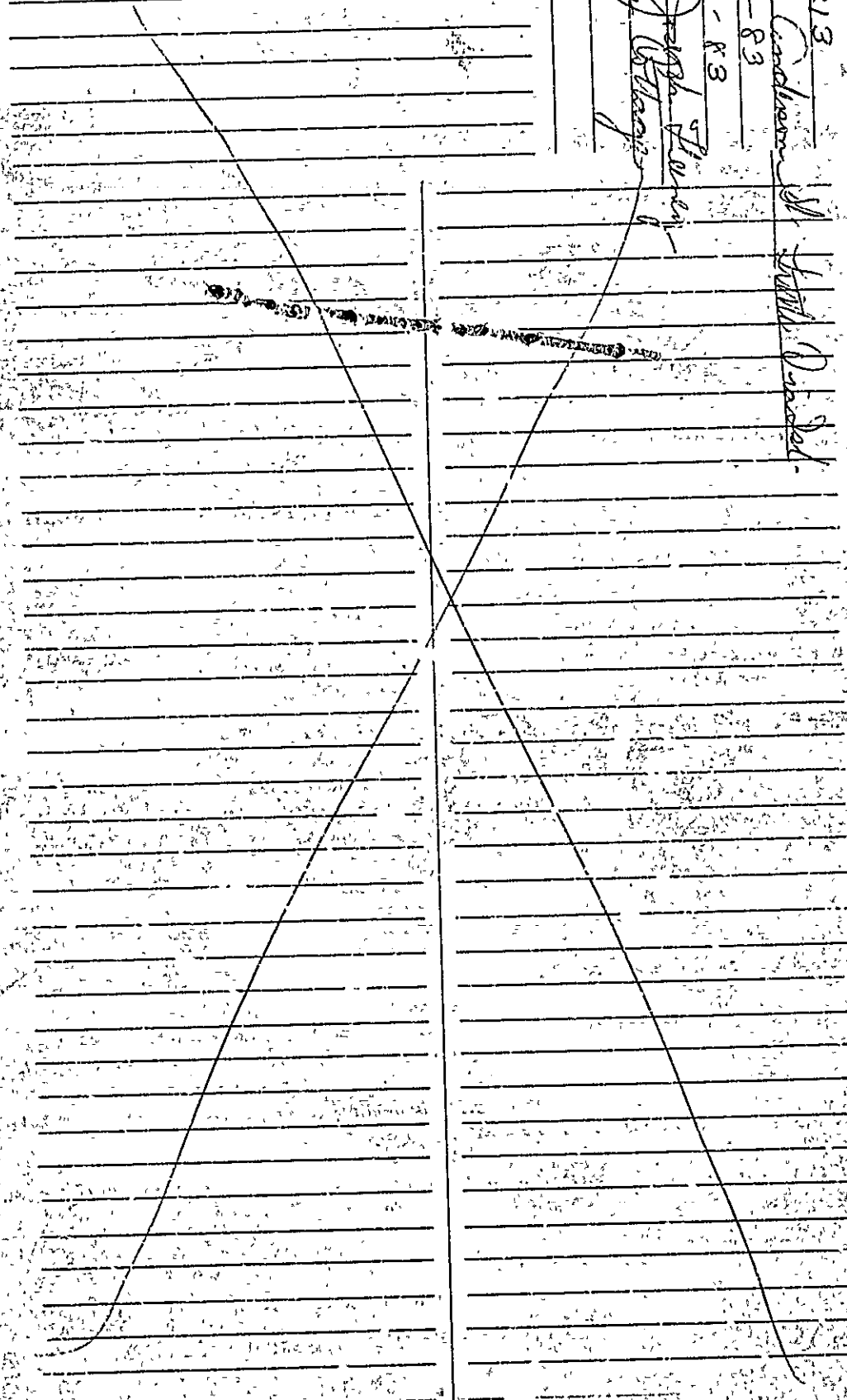
Approved Captain Joseph Stewin

Dwelling Shandy Cottage

G. 2gc

Alteration

W. H. D. Dwyer





**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date April 25, 1984  
 Receipt and Permit number B21623

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: 105-L-9 Anderson Ave. Little Diamond Isl.

OWNER'S NAME: Joseph Feeney ADDRESS: Houlton, Maine

OUTLETS: Receptacles \_\_\_\_\_ Switches \_\_\_\_\_ Plugmold \_\_\_\_\_ ft. TOTAL 1-30 ..... 3.00

FIXTURES: (number of) Incandescent x Fluorescent \_\_\_\_\_ (not strip) TOTAL 6 ..... 3.00  
 Strip Fluorescent \_\_\_\_\_ ft. ....

SERVICES: Overhead x Underground \_\_\_\_\_ Temporary \_\_\_\_\_ TOTAL amperes 100 ..... 3.00

METERS: (number of) 1 ..... .50

MOTORS: (number of) Fractional \_\_\_\_\_  
 1 HP. or over \_\_\_\_\_

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

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

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

TOTAL \_\_\_\_\_

MISCELLANEOUS: (number of) Branch Panels \_\_\_\_\_  
 Transformers \_\_\_\_\_  
 Air Conditioners: Central Unit \_\_\_\_\_  
 Separate Units (windows) \_\_\_\_\_  
 Signs 20 sq. ft. and under \_\_\_\_\_  
 Over 20 sq. ft. \_\_\_\_\_  
 Swimming Pools Above Ground \_\_\_\_\_  
 In Ground \_\_\_\_\_  
 Fire/Burglar Alarms Residential \_\_\_\_\_  
 Commercial \_\_\_\_\_  
 Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under \_\_\_\_\_  
 over 30 amps \_\_\_\_\_  
 Circus, Fairs, etc. \_\_\_\_\_  
 Alterations to wires \_\_\_\_\_  
 Repairs after fire \_\_\_\_\_  
 Emergency Lights, battery \_\_\_\_\_  
 Emergency Generators \_\_\_\_\_

INSTALLATION FEE DUE: \_\_\_\_\_  
 FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: \_\_\_\_\_  
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....  
 TOTAL AMOUNT DUE: 12.50

INSPECTION: Tel. Rand has key for dwelling  
 Will be ready on ready, 1984; or Will Call \_\_\_\_\_

CONTRACTOR'S NAME: Hannans Elec  
 ADDRESS: 51 Lawn Ave. So. Portland  
 TEL: \_\_\_\_\_

MASTER LICENSE NO.: 2885 SIGNATURE OF CONTRACTOR: [Signature]

LIMITED LICENSE NO.: \_\_\_\_\_

ELECTRICAL INSTALLATIONS

Permit Number: 21623

Location: 185-1-9 R.R. Bldg.

City: Finney

Date of Permit: 4-25-64

Final Inspection: \_\_\_\_\_

By Inspector: \_\_\_\_\_

Permit Application Register Page No. 50

INSPECTIONS: Service \_\_\_\_\_ by \_\_\_\_\_  
Service called in \_\_\_\_\_  
Closed in \_\_\_\_\_ by \_\_\_\_\_

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_

DATE:	REMARKS:
5/16/64	Contractor called for signal - I told them transmittion is the problem, only one hour a day - I said we could try to get it in the next future.

*W. Brown*  
*W. Brown*