

SORRENTO RD. - LITTLE DIAMOND ISL.

105-N-14

PERMIT TO INSTALL PLUMBING

Date Issued

Portland Plumbing Inspector
By EHNOLD R GOODWIN

App. Firm Insp.

Date

By

App. Final Insp.

Date

By

Type of Bldg.

- Commercial
- Residential
- Single
- Multi Family
- New Construction
- Remodeling

Address 105 N-14 Corrente Rd. Little Diamond Isl. PERMIT NUMBER **4704**
 Installation For Dwelling
 Owner of Bldg Esther Payne
 Owner's Address 602 Congress St.
 Plumber Theodore Rind Date 8/4/76

NEW	RFPL		INO	FEE
		SINKS		
		LAVATORIES		
		TOILETS		
		BATH TUBS		
		SHOWERS		
		DRAINS FLOOR SURFACE		
		HOT WATER TANKS		
		TANKLESS WATER HEATERS		
		GARBAGE DISPOSALS		
	1	SEPTIC TANKS <u>leaching system</u>	1	25.00
		HOUSE SEWERS		
		ROOF LEADERS		
		AUTOMATIC WASHERS		
		DISHWASHERS		
		OTHER		
		<u>base fee</u>		3.00
TOTAL:				28.00

Building and Inspection Services Dept.: Plumbing Inspection

DUPLICATE — To be retained by the Plumbing Inspector

MAINE DEPARTMENT OF HEALTH AND WELFARE APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT		(For systems disposing of less than 2000 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 <i>Portland</i>	Street, Road, etc. <i>Surrey's Road</i> If on water body give name <i>Deer Island</i>	Permit No. <i>4704</i>	Date <i>8/4/76</i>	
Owner of property <i>Esther Payne Gallagher</i>		Owner's address <i>Portland</i>	Size of lot <i>12391</i>	<input type="checkbox"/> Sq Ft <input type="checkbox"/> Acres
Name & type of establishment If other than private home		Is lot Zoned? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Zoning <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Resource Protection	
Name of applicant Owner's agent <i>Owner</i>		If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="checkbox"/> Deed restriction re. private sewage disposal <input type="checkbox"/> Copy of the subdivision's soils report <input type="checkbox"/> Soils report from a State Agency		
Applicant's address Street, Box, etc.		Tel No. <i>761-2879</i>		
Town		State	Subdivision name	Lot No. <i>105-N-14</i> <i>105-O-15</i>
Applicant's signature <i>Esther Payne Gallagher</i>		Date		
Owner's signature <i>Esther Payne Gallagher</i>		Date		
This application is for: <input type="checkbox"/> New System <input type="checkbox"/> Expanded System <input type="checkbox"/> Replacement System <input type="checkbox"/> Replacement of <input type="checkbox"/> Treatment Tank Only <input type="checkbox"/> Disposal Area Only				
The water supply for this property is: <input type="checkbox"/> Dug well, depth _____ lining _____ <input type="checkbox"/> Cased well, depth _____ lining _____ <input type="checkbox"/> Spring <input type="checkbox"/> _____				
depth _____ lining _____ Surface water. <input type="checkbox"/> Body, <input type="checkbox"/> Course— <input type="checkbox"/> with disinfection, <input type="checkbox"/> without, Gal. fraction <input type="checkbox"/> Public Utility, name <i>DN</i>				

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		Soil Profile No. 5	
	<input 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	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring
Organic strata	<i>Topsoil</i>		<i>Topsoil</i>		<i>Organic strata</i>		<i>Organic strata</i>		<i>Organic strata</i>	
Inches	<i>7"</i>		<i>2"</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
1st strata	<i>Coarse Brn. Sand & Gravel</i>		<i>Coarse Brn. Sand & Gravel</i>		<i>1st strata</i>		<i>1st strata</i>		<i>1st strata</i>	
Inches	<i>30"</i>		<i>37"</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
2nd strata	<i>Clayey Sand</i>		<i>Sand, some Clay Shales</i>		<i>2nd strata</i>		<i>2nd strata</i>		<i>2nd strata</i>	
Inches	<i>15"</i>		<i>20"</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
3rd strata	<i>Soft Manganese Shist</i>		<i>3rd strata</i>		<i>3rd strata</i>		<i>3rd strata</i>		<i>3rd strata</i>	
Inches	<i>2"</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
Total Depth of observation hole	<i>49"</i>		<i>62"</i>		<i>Total Depth of observation hole</i>		<i>Total Depth of observation hole</i>		<i>Total Depth of observation hole</i>	
Inches	<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
Max. Ground water table—mottling	<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident	
Inches	<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
Impervious layer, clay, etc.	<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident	
Inches	<i>32"</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>		<i>Inches</i>	
Bedrock	<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident		<input type="checkbox"/> None Evident	
Type of Bedrock	<i>Soft Manganese Shist</i>		<i>Type of Bedrock</i>		<i>Type of Bedrock</i>		<i>Type of Bedrock</i>		<i>Type of Bedrock</i>	
Surface slope	<i>2%</i>		<i>2%</i>		<i>Surface slope</i>		<i>Surface slope</i>		<i>Surface slope</i>	
Soil Group & Condition per Table 9 of the Code, II	<i>B-6</i>		<i>B-6</i>		<i>Soil Group & Condition per Table 9 of the Code, II</i>		<i>Soil Group & Condition per Table 9 of the Code, II</i>		<i>Soil Group & Condition per Table 9 of the Code, II</i>	

On *8-2-76* (date) site investigation for this project was completed. I supervised the soil evaluation and certify that the results indicated are the best representation of 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: *Thomas J. Rand*
Registration/Certification: *76-N-1513*
Date: *8/1/76*

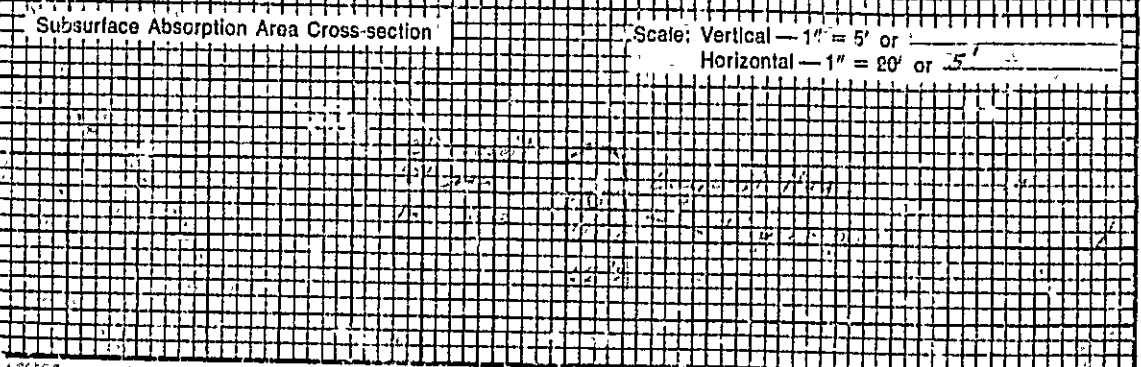
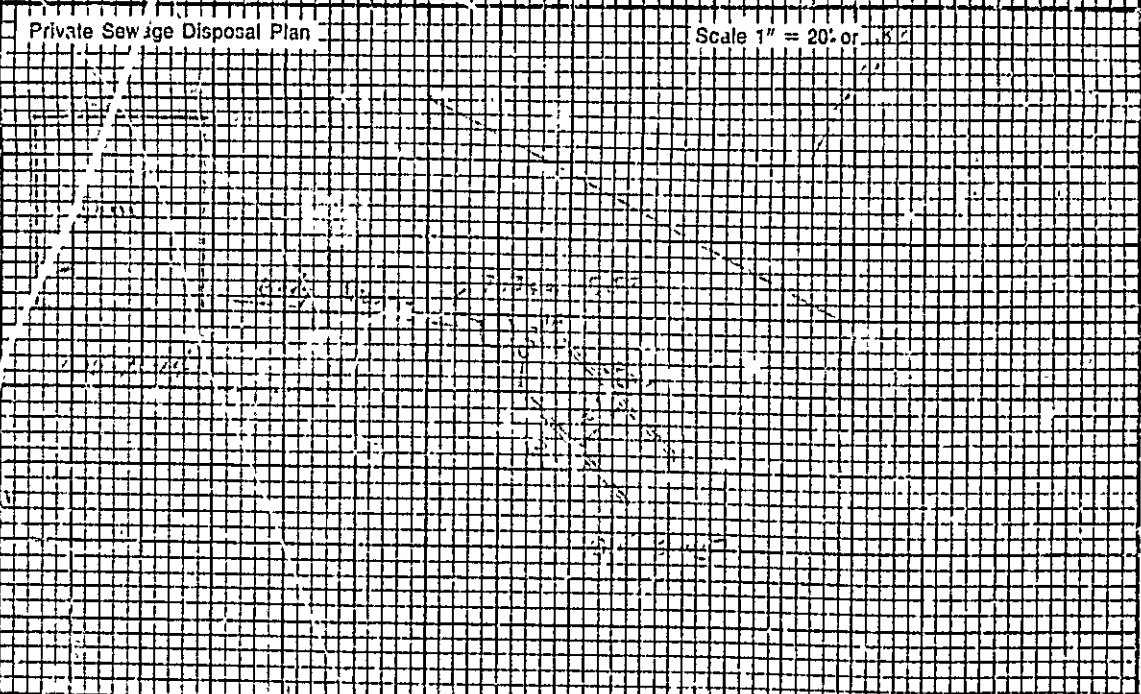
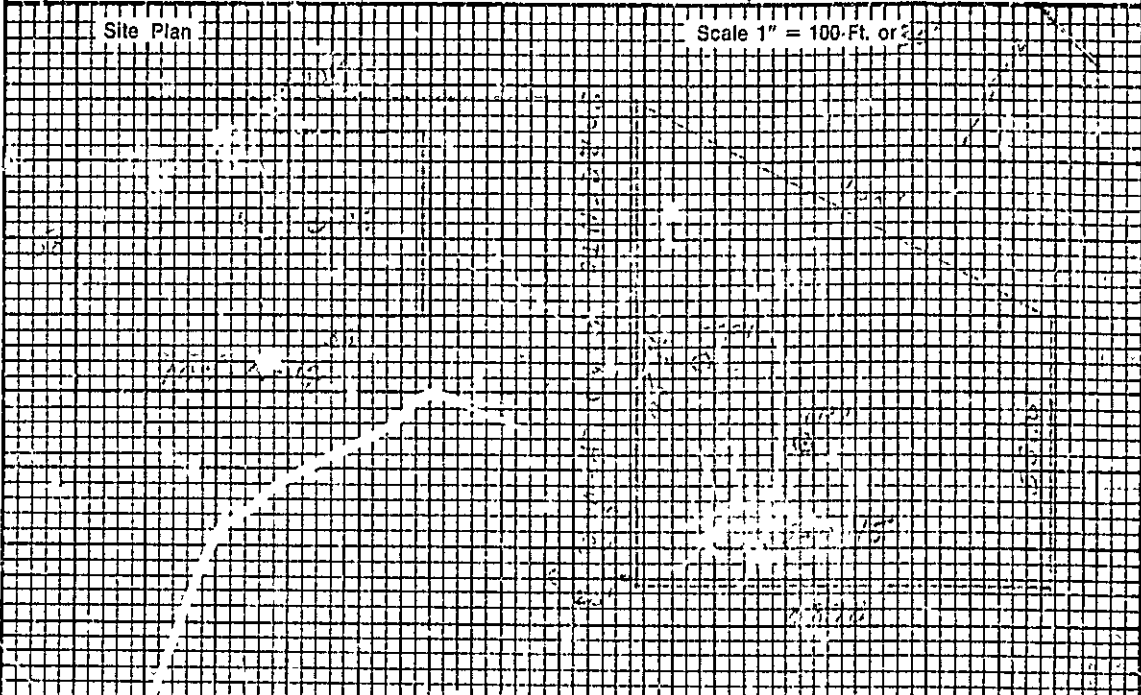
PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED. Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM <input type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <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 _____	TREATMENT TANK: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer _____ Size in gallons _____ <input type="checkbox"/> Aerobic Tank Manufacturer _____ Model No. _____ Size in gallons _____	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION: Fill is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> not required. Fill will be _____ inches deep. DETAILS: <input checked="" type="checkbox"/> Distribution Box is required. Pumping is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> is not required. The Dose will be _____ gallons. DISTANCES: <input 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 type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption 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.
		<input checked="" type="checkbox"/> French System: Total trench Length: <i>65'</i> <input type="checkbox"/> Sand System Length _____ Width _____ <input type="checkbox"/> Chamber System Number _____ <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type F <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____ <input type="checkbox"/> Non-discharge System Bed Length _____ Width _____ Holding Tank Size _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provided, type _____	SIZE: <input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Medium Large <input type="checkbox"/> Large <input type="checkbox"/> Extra Large	

PROPERTY/LOT LOCATION MAP 	FOR THE USE OF LPI ONLY Denial: Application is denied for following reasons: portions of the Code II are cited: Form is incomplete (____ pg.) as to <input type="checkbox"/> General Info, <input type="checkbox"/> Site Investigation, <input type="checkbox"/> System Proposed <input type="checkbox"/> Site Plan, <input type="checkbox"/> Disposal System Plan, <input type="checkbox"/> Cross-Section, <input type="checkbox"/> Placement, See Section 23 <input type="checkbox"/> Site investigation indicates site is <input type="checkbox"/> totally unsuitable for disposal system; Sections 45 and 95, Table 9-1 Group 1, 2, 9 and 10. <input type="checkbox"/> Unusable for system proposed; Sections 43, 44, 95, Table 9-1 <input type="checkbox"/> System Proposed does not conform to Code; See Sections 9 <input type="checkbox"/> Site Investigation indicates site modifications are necessary; See Sections <input type="checkbox"/> 43, <input type="checkbox"/> 44, <input type="checkbox"/> 46, <input type="checkbox"/> 47 Miscellaneous _____ See Section _____ Acceptance: Application for permit is approved <input type="checkbox"/> with condition specified, comply with Section _____ <input type="checkbox"/> without condition. Date: <i>7/30/76</i> LPI: <i>Thomas J. Rand</i>
	Owner: _____

DUPLICATE — To be retained by the Plumbing Inspector
 MAINE DEPARTMENT OF HEALTH AND WELFARE
 APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
 (For systems disposing of less than 2000 gallons per day)

Town Portland Street, Road, etc. L.H.G. Diamond Island Owner of property E. J. Shaw - Portland, Me.
 If on water body give name



Statement: (no permit may be issued unless signed)
 I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

Signature Required _____
 Date _____
 Applicant _____
 Owner _____