

MAINE DEPARTMENT OF HUMAN SERVICES APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT		This is NOT a permit, this form when completed must be presented to the Local Plumbing Inspector to issue a permit.		Page 1 of 2
Town Portland If on water body give name Spring Cove Island	Street, Road, etc. Spring Cove Ave. If on water body give name	Plumbing Permit No. 2279	Date of Plumbing Permit 7/6/77	
Owner of property Carnal L. Saw	Owner's address 61 Thomas, Portland	Site of lot 21, 650	Zoning <input type="checkbox"/> Shoreland <input checked="" type="checkbox"/> Residential	
Name & type of establishment If other than private home _____ god	Is lot Zoned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Type of Zoning Residential	Resource Protection <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands	
Name of applicant Owner's name Lionel B. Saw	If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="checkbox"/> Dead restriction re private sewage disposal <input type="checkbox"/> Copy of the subdivision's title report <input type="checkbox"/> Soils report from a State Agency		PA	
Applicant's address Street, Box, etc. Island Ave.	Tel No. 766-2500	Town Spring Island		Zip Code 04103
Applicant's signature <i>John B. Saw</i>	Owner's signature <i>Carnal L. Saw</i>	Date 6/22/77	Subdivision name City of Portland Assessors Plan 105G	Lot No. 106-A-9
This application is for: <input checked="" type="checkbox"/> New System <input type="checkbox"/> Expanded System <input type="checkbox"/> Replacement System <input type="checkbox"/> Replacement of <input type="checkbox"/> Testman Tank Only <input type="checkbox"/> Disposal Area Only				
The water supply for this property is: <input type="checkbox"/> Dug well depth _____ <input type="checkbox"/> Drilled well, depth _____ <input type="checkbox"/> Spring _____				
Depth _____ Lining _____ Surface water <input type="checkbox"/> Body, <input type="checkbox"/> Course, <input type="checkbox"/> with disinfection, <input type="checkbox"/> without disinfection, <input checked="" type="checkbox"/> Public Utility, name _____				

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.	Soil Profile No.	Soil Profile No.	Soil Profile No.
Organic strata Top Soil Inches 2"	Organic strata Inches	Organic strata Inches	Organic strata Inches	Organic strata Inches
1st strata Dr. Br. Inch. 12"	1st strata Inch. 12"	1st strata Inch. 12"	1st strata Inch. 12"	1st strata Inch. 12"
2nd strata Sandy Inch. 36"	2nd strata Inch. 36"	2nd strata Inch. 36"	2nd strata Inch. 36"	2nd strata Inch. 36"
3rd strata Clay Inch. 12"	3rd strata Inch. 12"	3rd strata Inch. 12"	3rd strata Inch. 12"	3rd strata Inch. 12"
Total Depth of observation hole inches 50"	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches
Max. Ground water table Inches	Max. Ground water table Inches	Max. Ground water table Inches	Max. Ground water table Inches	Max. Ground water table Inches
Impervious layer, clay, etc. Inches	Impervious layer, clay, etc. Inches	Impervious layer, clay, etc. Inches	Impervious layer, clay, etc. Inches	Impervious layer, clay, etc. Inches
Bedrock Type of Bedrock	Bedrock Type of Bedrock	Bedrock Type of Bedrock	Bedrock Type of Bedrock	Bedrock Type of Bedrock
Surface slope 0.5 %	Surface slope %	Surface slope %	Surface slope %	Surface slope %
Soil Group & Condition per Table 9-1 of the Code, II B-1	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II

On **May 17, 1977**, a site investigation for this project was completed. I conducted this site 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: **William B. Goodwin** Health Engineering License No. **00003**
Date signed: **JUNE 1, 1977**

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

SYSTEM <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 _____	TREATMENT TANK <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal See 14 gallons 750 GALLONS <input type="checkbox"/> Aerobic Tank Manufacturer _____ Model No _____ See 14 gallons	SUBSURFACE ABSORPTION AREA Type _____ SIZE _____ <input type="checkbox"/> Trench System: Total trench length _____ <input checked="" type="checkbox"/> Bed 5' Length 20' Width 20' <input type="checkbox"/> Chamber System Number _____ <input type="checkbox"/> Type A _____ Single File _____ <input type="checkbox"/> Type B _____ Cluster _____ <input checked="" type="checkbox"/> Mound System Length NOT APPLICABLE Width _____ at base _____ <input type="checkbox"/> Special System Length _____ Width _____ WAIVER <input type="checkbox"/> Required <input checked="" type="checkbox"/> Not Required		SITE MODIFICATION Fill will be <input checked="" type="checkbox"/> APPLICABLE _____ In uphill; _____ In downhill DETAILS NOT APPLICABLE <input checked="" type="checkbox"/> A Distribution Box is required Pumping is <input type="checkbox"/> required, <input 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, creek), swamps, marshes, and bogs. <input type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 200 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.		

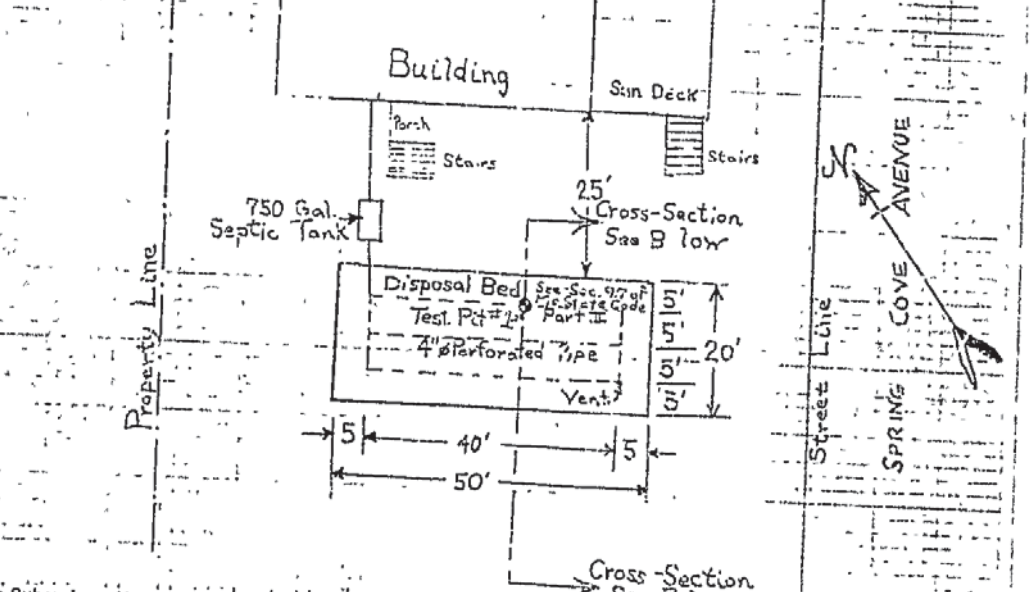
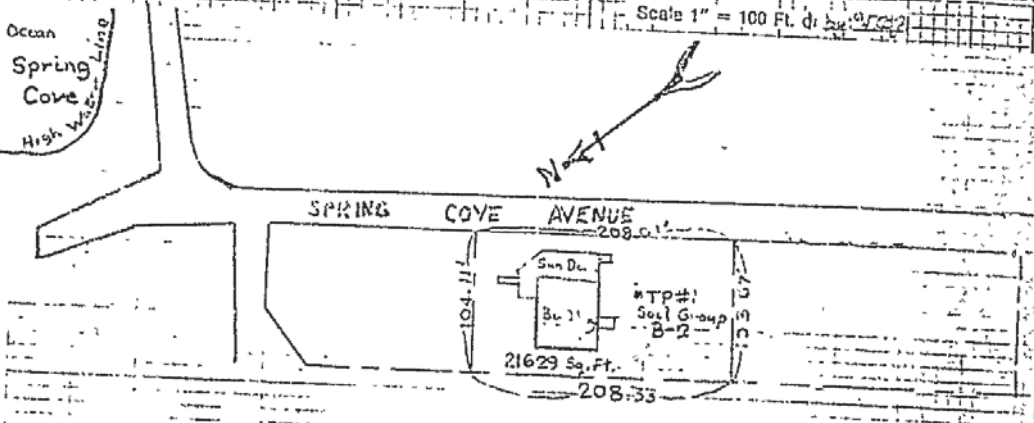
PROPERTY/LOT LOCATION MAP

FOR THE USE OF LPI ONLY

Denial, Application is denied for following reasons, portions of the Code if are cited
 Form is incomplete (____ pg) 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, Title 9-1 Group 2 and 10. Unsuitable for system proposed; Sections 4.3, 4.9, 9.5, Table 9-1.
 System Proposed does not conform to Code; See Sections 9 _____
 Site investigation indicates site modifications are necessary; See Sections 4.3, 4.4, 4.6, 8.7.
 Miscellaneous _____
 Sew Section _____
 Acceptance: Application for permit is approved with condition specified, comply with Section _____
 Signed: **Edward J. [Signature]** Date: **7/15/77**

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Town: Portland Street: Road, etc. Spring Cove Ave Owner of property: Carmel J. Davy
 Cushman's Island If on water body, give name



Statement: This permit may be issued unless signed by me, 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 as given by the applicant. I also understand that any falsification of information for a permit is cause for a permit to be voided. I understand that any falsification of information for a permit is cause for a permit to be voided. I understand that any falsification of information for a permit is cause for a permit to be voided.

Date: _____
 Applicant: _____
 Owner: _____

MAINE DEPARTMENT OF HUMAN SERVICES
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

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.: Marin Cove Ave. Plumbing Permit No.: _____ Date of Plumbing Permit: _____
 Owner or Property: Cushings Island If on water body give name: _____
 Owner's address: Cornel L. Davy 51 Thomas, Portland
 Name & type of establishment if other than private home: _____
 Name of applicant: _____
 Applicant's address: Island Av. Tel No: 76-1311
 Town: Cushings Island Zip Code: 04103
 Applicant's signature: _____ Date: 04103
 Owner's signature: _____ Date: _____

Site of lot: 21,620 Sq. feet
 Is lot Zoned? Yes No
 If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:
 Dead restriction re private sewage disposal
 Copy of the subdivision's soils report
 Soils report from a State Agency

Subdivision name: City of Portland Assessors Plan 1966 Lot No: 1066-A-9

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: Public Utility, name _____
 Surface water Bore Course With disinfection Without disinfection Spring

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.		Soil Profile No.		Soil Profile No.		Soil Profile No.
	<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	
Organic strata Top Soil	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata
1st strata Dr. Br. <u>21"</u>	1st strata <u>12"</u>	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata
2nd strata <u>Dr. Br. Sandy</u>	2nd strata <u>Dr. Br. Sandy</u>	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata
3rd strata <u>Clay</u>	3rd strata <u>Clay</u>	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata
Total Depth of observation hole inches <u>50"</u>	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches
Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>	Max. Ground water table mottling <u>None Evident</u>
Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>	Impervious layer, clay, etc. <u>None Evident</u>
Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>
Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>	Surface slope <u>0.5%</u>
Soil Group & Condition per Table 9-1 of the Code, II <u>B-7</u>	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II

On May 19, 1974, a site investigation for this project was completed. I conducted 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: _____ Date signed: JUNE 1, 1977
 Health Engineering License No. 00003

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 checked="" 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, describe: _____ See Chapter 9 of the Code, II.	TREATMENT TANK: <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons: <u>750 gallons</u> <input type="checkbox"/> Aerobic Tank Manufacturer: _____ Model No.: _____ Size in gallons: _____	SUBSURFACE ABSORPTION AREA Type: <input checked="" type="checkbox"/> Trench System: Total trench length <u>NA</u> <input type="checkbox"/> Dnd System: Length <u>30'</u> Width <u>20'</u> <input type="checkbox"/> Chamber System: Number _____ <input type="checkbox"/> Type A _____ <input type="checkbox"/> Type B _____ <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System: Length <u>NOT APPLICABLE</u> Width: _____ at base <input type="checkbox"/> Special System Length _____ Width _____	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	SITE MODIFICATION Fill will be: <input checked="" type="checkbox"/> APPLICABLE _____ in uphill; _____ in downhill. DETAILS: <input checked="" type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> A Distribution Box is required. Pumping is: <input type="checkbox"/> required, <input type="checkbox"/> is not required. The Dose will be _____ gallons.
		WAIVER <input type="checkbox"/> Required <input checked="" type="checkbox"/> Not Required		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 supply.

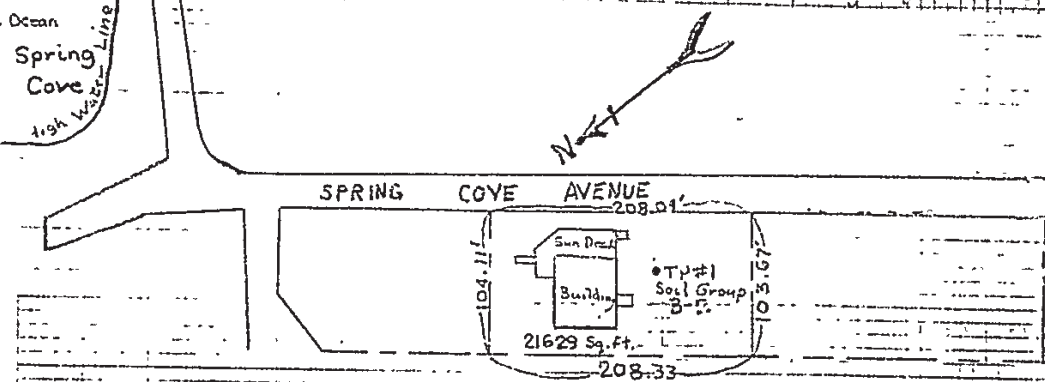
FOR THE USE OF LPI ONLY
 Form is incomplete (_____) as to: General Info, Site Investigation, System Proposed, Site Plan, Disposal System Plan, Cross Section, Statement. See Section 23
 Site Investigation indicates site is: totally unsuitable for disposal system; Sections 45 and 95, Table 9-1 Group 1 and 10 Unsuitable for system proposed; Sections 47, 48, 95, Table 9-1
 System proposed does not conform to Code; See Sections 9.
 Site Investigation indicates site modifications are necessary. See Sections 43, 44, 46, 47, 48, 87.
 Miscellaneous: _____
 Accepts Application for permit: approved with condition specified, comply with Section _____
 without condition.
 Signed LPI: _____ Date: JUL 8 1977
 HNE-200-1/77



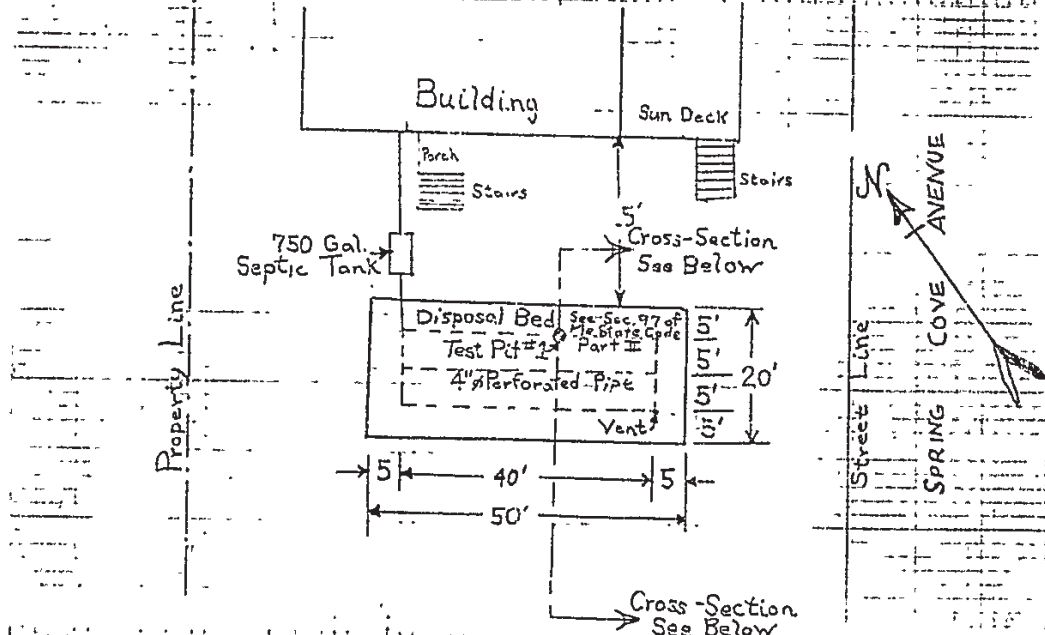
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

City Portland	Street, Road, etc. Spring Cove Ave	Owner of property Carmel L. Davy
County Cushings Island	If on water body, give name	

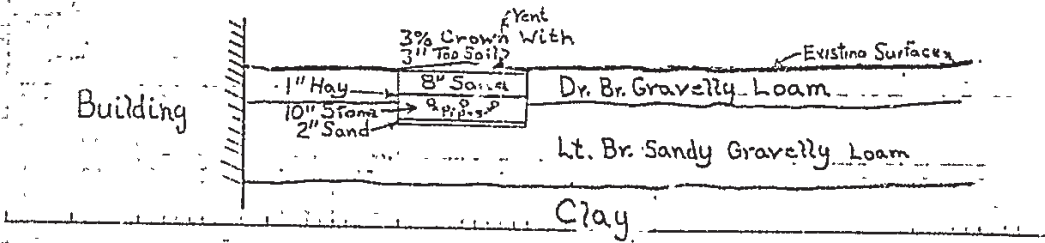
Site Plan Scale 1" = 100 Ft. dr by: *[Signature]*



Private Sewage Disposal Plan Scale 1" = 20' date: May 21, 1977



Subsurface Absorption Area Cross-section Scale: Vertical 1" = 5' dr by: *[Signature]*
Horizontal 1" = 20' date: May 24, 1977



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 of this agent.

Signature Required

Applicant: _____
Owner: _____