

SPRING COVE AVE. CUSHING ISLAND
106E-8

ORIGINAL To be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

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 Cushings Island	Street, Road, etc.: Spring Cove Ave. If on water body, give name	Plumbing Permit No.: 1227	Date of Plumbing Permit: 6-23-77	
Owner of property: Robert L. Chase 772-1735		Owner's address: 107 Pine St. Portl.		Size of lot: 300 sq feet <input type="radio"/> Acres
Name & type of establishment if other than private home: Twisting Butter Cottage		Is lot 30' Zoned? <input type="radio"/> Yes <input type="radio"/> No	Type of Zoning: Residence	<input type="radio"/> Shore and <input type="radio"/> Residence Protection
Name of applicant: Robert L. Chase		If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="radio"/> Dead/Restriction re. private sewage disposal <input type="radio"/> Copy of the subdivision's soils report <input type="radio"/> Soils report from a State Agency NA		
Applicant's address: Spring Cove Ave.		Tel. No.: 755-2508		
Town: Portland	Zip Code: 04108	Subdivision name: City of Portland Assessors Plan 105-A		Lot No.: 106A-E-8
Applicant's signature: <i>Robert L. Chase</i>		Date: _____		
Owner's signature: <i>Robert L. Chase</i>		Date: _____		
This application is for: <input checked="" type="radio"/> New System <input type="radio"/> Expanded System <input type="radio"/> Replacement System <input type="radio"/> Replacement of Treatment Tank Only <input type="radio"/> Disposal Area Only				
The water supply for this property is: <input type="radio"/> Dug well, cistern, lining <input type="radio"/> Drilled well, cistern, lining <input type="radio"/> Spring <input type="radio"/> Public Utility, name _____				
depth _____; Surface water <input type="radio"/> Body, <input type="radio"/> Course <input type="radio"/> With disinfection <input type="radio"/> Without disinfection <input checked="" type="radio"/> 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.	
	<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	Top Soil	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata
Inches: 2"		Inches:	Inches:	Inches:	Inches:	Inches:	Inches:	Inches:
1st strata	Dr. Br. Sand Loam	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata	1st strata
Inches: 14"		Inches:	Inches:	Inches:	Inches:	Inches:	Inches:	Inches:
2nd strata	Lt. Br. Sand Loam	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata	2nd strata
Inches: 25"		Inches:	Inches:	Inches:	Inches:	Inches:	Inches:	Inches:
3rd strata	Lt. Br. Sand Silty Loam	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata
Inches: 12"		Inches:	Inches:	Inches:	Inches:	Inches:	Inches:	Inches:
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:	Total Depth of observation hole, inches:	Total Depth of observation hole, inches:	Total Depth of observation hole, inches:
Max. Ground water table, molting: 48"	<input type="radio"/> None Evident	Max. Ground water table, molting:	Max. Ground water table, molting:	Max. Ground water table, molting:	Max. Ground water table, molting:	Max. Ground water table, molting:	Max. Ground water table, molting:	Max. Ground water table, molting:
Impervious layer, clay, etc.: _____	<input checked="" type="radio"/> None Evident	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____
Bedrock: 30"	<input type="radio"/> None Evident	Bedrock: _____	Bedrock: _____	Bedrock: _____	Bedrock: _____	Bedrock: _____	Bedrock: _____	Bedrock: _____
Type of Bedrock: Schist		Type of Bedrock:	Type of Bedrock:	Type of Bedrock:	Type of Bedrock:	Type of Bedrock:	Type of Bedrock:	Type of Bedrock:
Surface slope: 1.0 %		Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %	Surface slope: _____ %
Soil Group & Condition per Table 9-1 of the Code, II: B-2		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 **11/14/77** (date), a site investigation for this project was conducted. 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: *William B. Goodwin* Health Engineering License No. **00003**
Date signed: **Nov 24, 1977**

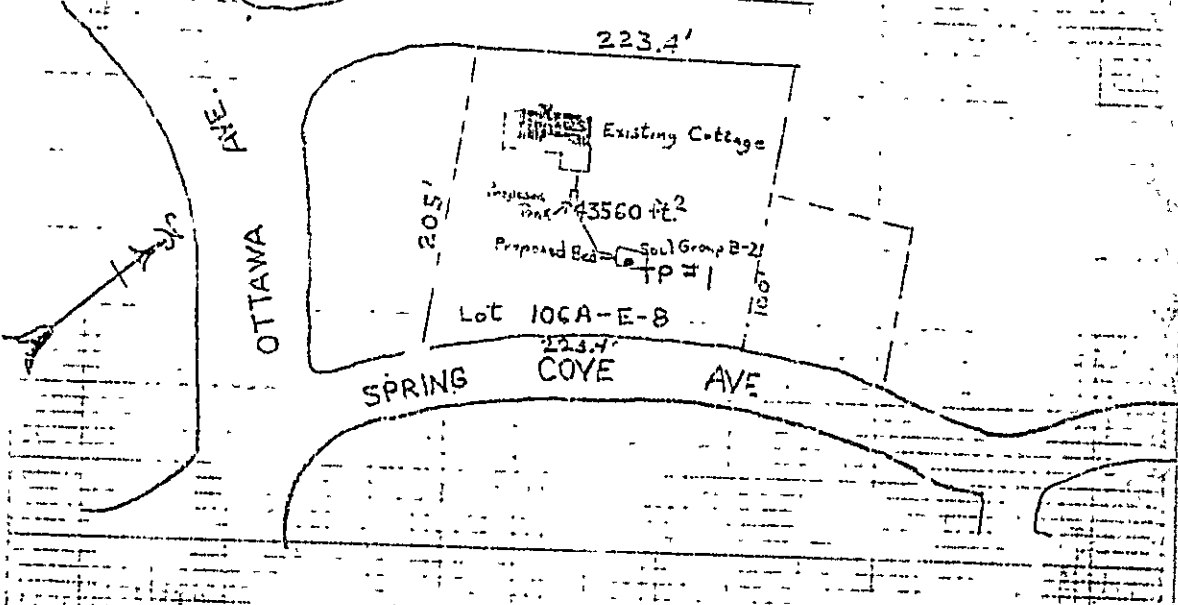
PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM: <input type="radio"/> COMBINED SYSTEM <input checked="" type="radio"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Incinerator Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Other, describe _____ See Chapter 9 of the Code, II	TREATMENT TANK: <input checked="" type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Size in gallons: 75 <input type="radio"/> Aerobic Tank Manufacturer: _____ Model No.: _____ Size in gallons: _____	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION Fill will be: NA in uphill; _____ in downhill
		<input type="radio"/> Trench System: Total trench length: _____ <input type="radio"/> Bed System: Length: 20' Width: 20" <input type="radio"/> Chamber System: _____ <input type="radio"/> Type A _____ <input type="radio"/> Type B _____ <input type="radio"/> Type C _____ <input type="radio"/> Mound System: Length _____ Width _____ at base: NA <input type="radio"/> Special System: Length _____ Width _____	<input type="radio"/> Very Small <input type="radio"/> Small <input type="radio"/> Medium <input type="radio"/> Medium Large <input type="radio"/> Large <input type="radio"/> Extra Large	DETAILS <input checked="" type="radio"/> A Distribution Box is required NA <input type="radio"/> Pumping is required <input type="radio"/> is not required The Dose will be _____ gallons
PROPERTY/LOT LOCATION MAP 		FOR THE USE OF LPI ONLY <input type="radio"/> Denial: Application is denied for following reasons; portions of the Code II are cited form is incomplete (____ pp.) as to: <input type="radio"/> General Info. <input type="radio"/> Site Investigation. <input type="radio"/> System Proposed. <input type="radio"/> Site Plan <input type="radio"/> Disposal System Plan <input type="radio"/> Cross-Section. <input type="radio"/> Statement. See Section 23. <input type="radio"/> Site Investigation indicates site is: <input type="radio"/> totally unsuitable for disposal system; Sections 45 and 95, Table D-1 Group 9 and 11. <input type="radio"/> Unacceptable for system proposed; Sections 43, 48, 95, Table 9-1 <input type="radio"/> System Proposed does not conform to Code; See Sections 9. <input type="radio"/> Site Investigation indicates site modifications are necessary; See Sections <input type="radio"/> 43, <input type="radio"/> 44, <input type="radio"/> 45, <input type="radio"/> 87. <input type="radio"/> Miscellaneous: _____ See Section _____ <input type="radio"/> Compliance: Application for permit is approved with condition specified, comply with Section _____ Signature: <i>William B. Goodwin</i> Date: 6/22/77 HNE-200-1177		

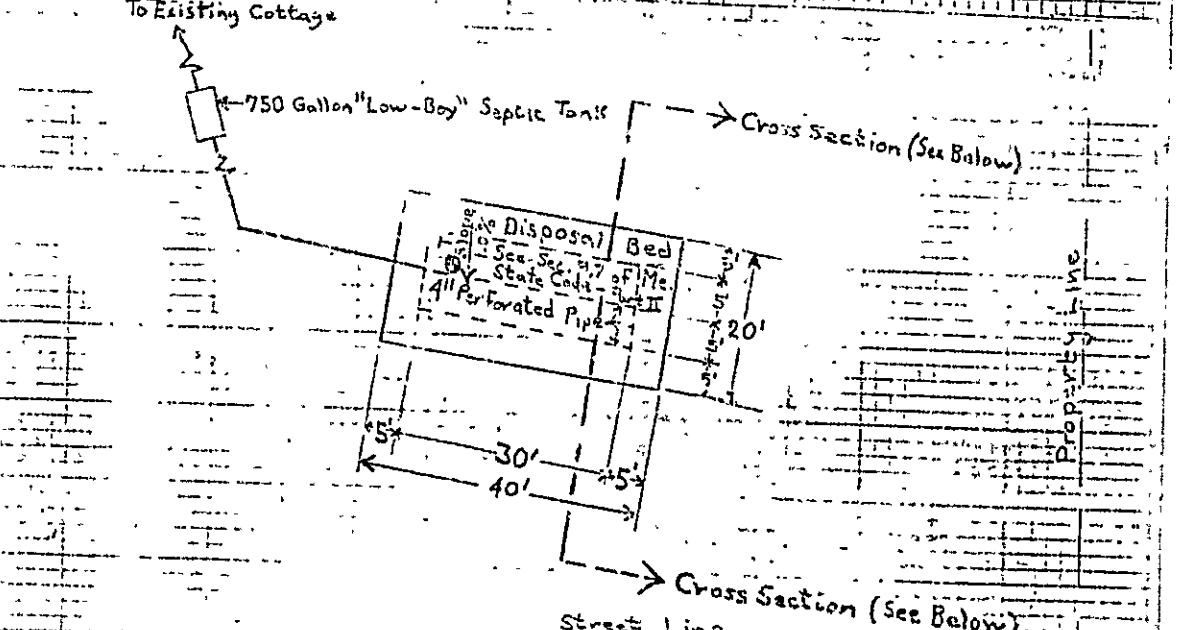
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(for systems disposing of less than 2000 gallons per day)

Town: **Portland**
 Street, P.O., etc.: **Spring Cove Ave.**
 If on water body, give name: _____
 Owner of property: **Robert I. Chase**

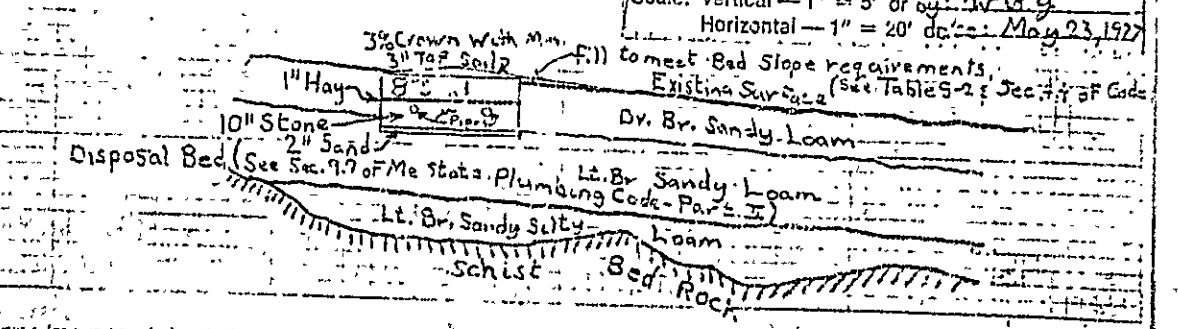
Site Plan
 Scale 1" = 100 Ft. dt. May 23, 1927



Private Sewage Disposal Plan
 Scale 1" = 20' dt. May 23, 1927



Subsurface Absorption Area Cross-section
 Scale: Vertical - 1" = 5' dt. May 23, 1927
 Horizontal - 1" = 20' dt. May 23, 1927



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 the application is reason to deny a permit to install a private sewage disposal system and that the permit is void for a six (6) month period from the date of permit issuance. I understand that no promise is intended or implied by return of any advice or approval given by the Administrative Authority or its agent.

Date: _____
 Applicant: _____
 Owner: *Robert I. Chase*

HME-200 1177