



Cliff Island
State of Maine

~~1973~~ ¹⁰⁹ 1973 - A-30

WASTE DISCHARGE LICENSE CERTIFICATE
Department of Environmental Protection
Augusta, Maine 04330

No. 511

License is Void if Annual Renewal Fee of
\$ 5.00 is not remitted prior to
December 31, 1974

Initial July 25, 1973
Renewal October 1, 1976
Expires December 31, 1976

MRS. ELIZABETH TERRY AND MRS. GUDRUN PIERSON

is hereby granted a waste discharge license certificate from the State of Maine, Department of Environmental Protection according to the provisions of Maine Revised Statutes Amended, Title 38, Section 414, to discharge 400 gallons per day of treated sanitary wastewaters from a single family residence

Portland Municipality Cumberland County to Tidewater of Portland Class SA

License Parameters:

The following limits shall not be exceeded:
BOD 30.0 mg/l
Settleable Solids 0.1 ml/l
Total Coliform Bacteria 70 /100ml
Fecal Coliform Bacteria 15 /100ml
Flow 400 GPD

Given under our hand and seal this 20th day of August 1973

Elizabeth B. Terry

By *William R. Adams*
Commissioner

MUNICIPAL OFFICIAL COPY TO THE ATTACHED CONDITIONS

DEPARTMENT OF ENVIRONMENTAL PROTECTION

STANDARD CONDITIONS FOR SINGLE FAMILY AND COMMERCIAL WASTE DISCHARGE LICENSES

- A. The staff of the Department shall have the right of entry for the purpose of inspecting the treatment system and examining records.
- B. Flow measuring facilities of a design approved by the staff of the Department shall be installed at a time prior to the operation of the treatment facilities.
- C. Sampling facilities of a design approved by the staff of the Department shall be installed at a time prior to the operation of the treatment facilities.
- D. Preliminary engineering reports and plans must be submitted to the staff of the Department for approval prior to the issuance of the license certificate.
- E. Final plans and specifications must be submitted to the staff of the Department for approval at least 30 days prior to the installation of the treatment facilities.
- F. The staff of the Department will be notified immediately of any malfunction of any component of the waste water treatment system. In the event the waste water treatment system malfunctions, the waste water discharge is to cease within 24 hours unless authorization to the contrary is obtained from the staff of the Department.
- G. Periodic operational reports in such form and containing such information as the Department may require shall be completed and signed by the licensee and submitted to the staff of the Department.
- H. An alarm system which is operated on an independent source of power and of a design approved by the Department staff will be installed. The alarm system must be connected to a central location.
- I. All waste waters will be consigned to a municipal treatment system when said municipal system becomes available. This waste discharge license will automatically expire 90 days after a municipal facility becomes available unless this time is extended by the Board, in writing, for good cause shown.
- J. The licensee shall maintain a service contract for any and all treatment equipment and facilities with a service organization acceptable to the Department. A signed copy of the service contract must be forwarded to the Department's staff.
- K. Treatment facilities will be installed and operational prior to the discharge of any waste waters.
- L. The final effluent pipe must be placed in the receiving waters in such a manner that mixing and maximum dispersion of the waste waters will be achieved as rapidly as possible.
- M. When chlorination is used as the means of disinfection, a positive chlorine residual, measured by the Orthotolidine Test, of 1.0-2.0 mg/l will be maintained at all times. In addition, there must be available an on-site analytical technique that will detect the disinfectant in the mg/l range. Disinfection must accomplish the following results:



STANDARD CONDITIONS CONT.

(a) The pH of the effluent shall not be less than 6.0 nor greater than 8.5 at any time.

(b) The effluent shall contain neither a visible oil sheen, foam, nor floating solids at any time.

(c) The effluent shall not contain materials in concentrations or combinations which are hazardous or toxic to aquatic life; or which would impair the usages designated by the classification.

(d) The discharge shall not cause visible discoloration so as to impair the usages designated by the classification.

(e) Notwithstanding specific conditions of this license the effluent must not lower the water quality standards or impair the usages designated by the classification of the receiving waters.

(f) The discharge shall not cause turbidity in the receiving waters to exceed control values measured upstream of the discharge point which would impair the usages of the receiving waters designated by the classification.

N. The licensee shall not discharge or cause to be discharged any materials designated as hazardous or toxic under the provisions of Section 12, Federal Water Pollution Control Act, as amended, 33 U.S.C. 1162 (1971) or by the Department or which are known by the licensee to be hazardous or toxic.

FILED
CLIFF ISLAND

STATE OF MAINE
DEPARTMENT OF ENVIRONMENTAL PROTECTION
AUGUSTA, MAINE 04330

1972- 184
Application Number

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
(Single Residential Use Only)

Applications not properly prepared may be rejected or may be returned for correction. Please use typewriter or ink.

SECTION I

1a. Name Mrs. Elizabeth B. Terry and Mrs. Gudrun B. Pierson

1b. Mailing Address: P. O. Box 34 Telephone 766-2827
Street & Number

Cliff Island Cumberland Maine 04019
City County State Zip Code

1c. Location of proposed discharge site (at CMP Co. Pole #32) Telephone 766-2827
Street & Number

Cliff Island Cumberland Maine 04019
City County State Zip Code

A map and/or diagram illustrating the geographic site and locus of discharge must accompany this application. See Exhibit 1 C

1d. How long has the applicant been located at this site?
From 1929 To (present) Total Number of Years 44
Month Year Month Year

1e. Does the applicant lease the building? no Does the applicant lease the land? n/a If any terms of the lease have any effect on this application? n/a Please attach a copy of the lease to this application.

MUNICIPAL OFFICIAL-COPY

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY (Page 2)

1f. If the property is not owned by the applicant, indicate the name and address
of the owner. Name n/a

Address _____
Street & Number Telephone
City County State Zip Code

SECTION II

Topographical Information

A diagram to scale showing property characteristics must be submitted ---
See instruction booklet for details. See Exhibits 2 and 2 A

- 2a. Area of property 72,000 +/- square feet.
- 2b. Property line along public road 300 feet.
- 2c. Property line along shore 300 feet.

SECTION III

Soil Characteristics

- 3a. Type of Soil (use standard soil conservation terminology) thin layer of topsoil over ledge.
- 3b. Percolation data (include sketch to scale showing the location of holes).
Number of holes _____. Percolation rate _____. (If more than one
hole use separate sheet titled Exhibit 3b. See Exhibit 3 B)

SECTION IV

Sanitary waste water information.

- 4a. Describe the means of disposing or treating any waste waters other than sanitary
waste waters. N/A

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY (Page 3)

SECTION V

Existing Treatment Information

5a. Are there existing Treatment facilities? Yes X No _____

5b. If yes, describe: Direct discharge of all liquid waste without treatment through soilpipe overboard.

5c. Will these existing facilities (or a part thereof) be utilized in the proposed treatment system: Yes X No _____ If yes, describe (Please submit plans and specifications of those facilities to be utilized): Simply that the house-end of the soilpipe will bring the influent into the new system and the shore end of the pipe will carry the effluent from the plant to the water.

SECTION VI

Proposed Treatment Information

6a. Describe fully the proposed treatment system. An aerobic treatment plant, Model 6A as manufactured by Nayadic Sciences and distributed in Maine by ENCO Sciences of Rockland, Me. This unit has a capacity of 600 gals per day and will satisfactorily treat the wastes from a 3-bedroom, 1-bath 30' x 40' house where 4 people reside seasonally.

6b. Describe fully how the treatment plant operates: Raw wastewater flows into the combination aeration-settling chamber and is mixed with recirculated sludge. The treated wastewater then flows into a clarification zone and over a weir to the chlorine contact chamber. (See exhibits 6b-1, 6b-2, 6b-3, 6b-4, & 6b-5)

6c. What is the estimated cost for the proposed treatment facility? Treatment Unit \$1200; chlorination unit \$200; Installation \$250.

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY (Page 4)

6d. What is the estimated annual operating costs of the proposed facility?
Chlorine \$40/yr; Maintenance-Service Agreement \$110/yr; Repairs \$20/yr;
Electricity \$100/yr; TOTAL \$270/yr (see exhibit 6d)

SECTION VII

Influent and Effluent Information

Parameter	Influent	Effluent	Source of data
7a. Flow gpd	600	600	
7b. B.O.D. mg/l	205	25	*
7c. B.O.D. lbs/day			
7d. Settleable Solids mg/l		.2	
7e. Suspended Solids mg/l	174		
7f. Suspended Solids lbs/day			
7g. Total Phosphorus mg/l			
7h. Total Phosphorus lbs/day			
7i. Chlorine Residual mg/l		2.0	

If the parameter values are not from actual measurement of the waste under question the source of the data must be clearly indicated. The following information is necessary Title, publisher, author(s), edition, year published and page number. * Influent: Per capita loadings of domestic wastewater, Zanoni, Journal W.P.C.F. Sept. 1972, page 1756.
Effluent: Tests by N.S.P.

SECTION VIII

Receiving Water Information

Fresh Surface Water

- 8a. Name of receiving waters n/a
- 8b. Drainage area above point of discharge _____ square miles.

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY (Page 5)

8c. 7 day - 10 year drought flow _____ c.f.s.

8d. Classification of receiving waters Class _____.

8e. What is the temperature of the receiving waters.

Minimum _____ °C Maximum _____ °C.

Marine Waters

8f. Name of receiving waters Casco Bay

8g. What is the temperature of the receiving waters

Minimum 40 °C Maximum 70 °C.

8h. Describe physical characteristics of receiving water in vicinity of discharge.

The shore is all ledge except for a tiny rocky beach 100' to NE
of pipe outlet (scill on applicant's property). Because of sharply
sloping ledge, low tide is only 15 to 25 feet beyond high tide, and
there are no tidal flats within 1/2 mile.

8i. Marine resources in the area.

Shellfish: Commercial Mess _____.

Lobstering yes _____ no. fishing grounds _____ yes no.

SECTION IX

CONSULTING ENGINEERING FIRM

9a. Name _____

9b. Business Address _____
Street & Number Telephone

City County State Zip Code

9c. Project Engineer _____

9d. Maine Registration Number _____

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY Page 6

Mrs. Elizabeth B Terry hereby applies for a waste discharge license
~~(for herself and her sister-in-law)~~
from the State of Maine Department of Environmental Protection under the provision
of title 38, Chapter 4, Section 414 of the Maine Revised Statutes of 1964, as
amended, to discharge into a segment of Casco Bay
presently classified as S A and located at Cliff Island, Maine

Applicant agrees to submit all plans and specifications for the approval of the
Department and such approval shall be obtained prior to the commencement of con-
struction. Applicant further agrees that the staff of the Department may inspect
the facility at various stages of construction to ascertain that said facility is
conforming to the plans and specifications so approved.

The information contained in this application and all attached exhibits are, to
the best of my knowledge, true. Upon the discovery of inaccurate information, any
waste discharge license which may have been granted on the basis of this application
will be null and void.

All materials submitted to substantiate this application shall be considered part
of the application and identified by the applicant as exhibits.

I, Elizabeth B. Terry, have read, am familiar with, and understand the
statutory requirements of Maine Revised Statutes Annotated, Title 38, Chapter 3,
Protection and Improvement of Waters.

X SIGNED Elizabeth B. Terry DATE June 22, 1973

If the applicant has been assisted in preparing this application, the person assist-
ing in the preparation shall sign below.

Name of Party Assisting Finestkind Excavators E.P.D.

Address Cliff Island, Maine 04019 766-2827
Street & Number Telephone

City County State Zip Code
SIGNED R. K. [Signature] DATE June 2, 1973

APPLICATION FOR SANITARY WASTE WATER DISCHARGE LICENSE
SINGLE RESIDENTIAL USE ONLY (Page 7)

SECTION XI

Mrs. Elizabeth B. Terry and Mrs. Gudrun B. Pierson

Name of Applicant

an applicant for a waste discharge license has provided

Name

Portland, Maine

and Title of Municipal Official

Name of Municipality

a copy of an application for a waste discharge license dated

Month Day Year

Date: June 22, 1973

Month Day Year

x Elizabeth B. Terry
Signature of Applicant

Name of Municipal Official

Title

Municipality

received a copy of

Name of Applicant

application for a waste discharge license on

Month

Day

Year

Date:

Month

Day

Year

Signature of Municipal Official

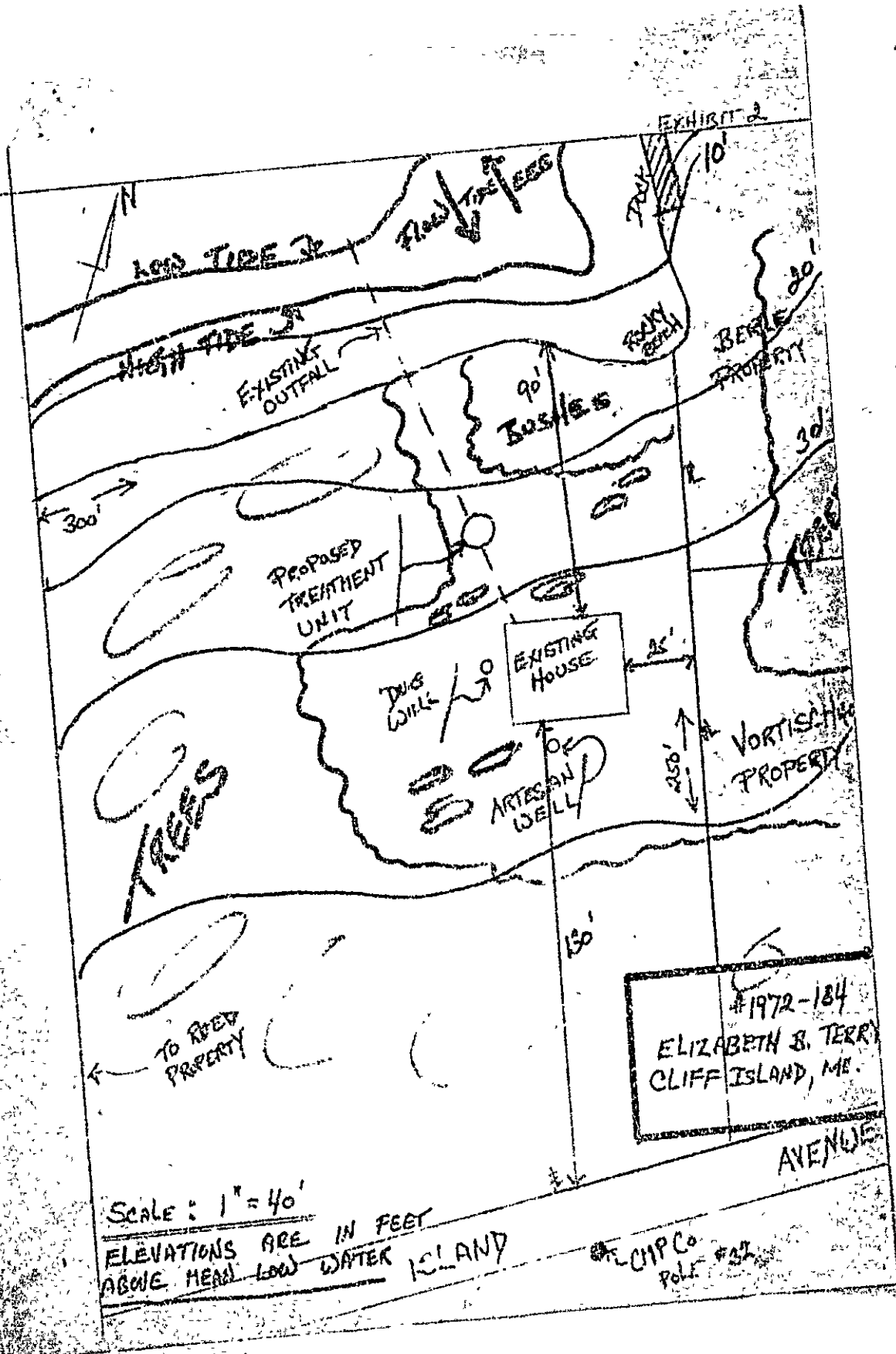
Title

FOR OFFICE USE ONLY

REVIEW OF APPLICATION FORM AND EXHIBITS

1. Date of Application _____ Date Received _____
Month Day Year Month Day Year
 2. Reviewing Officer _____ Title _____
Signature
 3. Application found to be in order: Yes ___ No ___ Date _____
Month Day Year
 4. Application returned to applicant for correction. Date _____
Month Day Year
 5. Preliminary Report Filed _____ Map Filed _____
Yes ___ No ___ Yes ___ No ___
- Diagram Filed _____
Yes ___ No ___

(See attached sheet for explanation of references.)

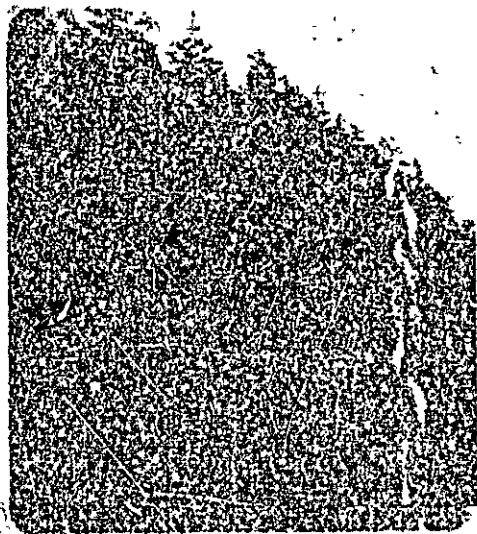


Scale: 1" = 40'
 ELEVATIONS ARE IN FEET
 ABOVE MEAN LOW WATER ISLAND

CHPCo
 POLF #32

#1972-184
 ELIZABETH B. TERRY
 CLIFF ISLAND, ME.
 AVENUE

EXHIBIT 2a



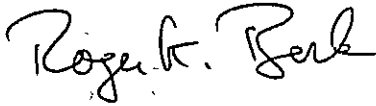
VIEW OF TERRY PROPERTY FROM OCEAN.
HOUSE IS TO LEFT AND ABOVE PICTURE.
PRESENT (AND FUTURE) OUTFALL CAN BE
SEEN IN CENTER OF PHOTO.

#1972-184
ELIZABETH B. TERRY
CLIFF ISLAND, ME.

#1972-184

Exhibit 3-b

The slope of the Elizabeth B. Terry property from the ocean exceeds 20 degrees above horizontal and the property is strewn with ledge at many intervals. Hence a leach bed is totally unfeasible.



Roger K. Berle

Finestkind Excavators, E.P.D.

EXHIBIT 6B-1

1972-184

AEROBIC SEWAGE TREATMENT SYSTEMS

Specifications for Model M-6A

Nayadic Sciences, Inc.

Uwchland, Pa.

Treatment:

Extended Aeration

Capacity (Hydraulic):

holding -- 600 gallons

Treated -- 400 gallons

Test Results
(N.S.F. schedule
4I program)

Suspended Solids mg/l	Inf	199	229	196	378	236	160	172
	Eff	20	20	16	26	21	29	26
ROD mg/l	Inf	217	172	196	348	232	225	265
	Eff	14	16	16	28	20	27	39
Dissolved Oxygen mg/l	Eff	5.7	5.1	4.3	2.2	3.4	4.2	3.7

Size:

Settling chamber (outer tank) = 42 cubic ft
Detention time = 18.6 hours
Aeration chamber (inner tank) = 24 cubic ft
Detention time = 10.7 hours

Weir Overflow Rate:

25.5 gallons/foot/day

Organic Loading:

.5 to 1.2 pounds BOD/day

Aeration Rate:

3 cfm @ 3 PSIG which is 2.5 cfm/#POD

Compressor:

1/2 HP, 1750 rpm, 60 cycle, 115 V
7.0 Amp UL File No. E22-922 Model #
727AA3-530 Mfr. by Thomas Industries

Operational Cost:

2.45 to 3.17 / month

Diffuser:

PCI-hydro-Chek (Disc plate body with
snap on air check diaphragm) U.S. Pat.
3525436

Air Line:

PVC

Outlet Pipe Nipple:

PVC

Recirculation Pipe:

40" Length 3" Diameter PVC

EXHIBIT 6B-2

#1972-184

Warning Device: Alarm (Low pressure pneumatic indicator micro-switch 13 NF compact indicator-- stainless steel)

Unit Construction: 3/16 Fibreglass

Material Specifications: Polyester Laminate (Glidden 4728 or equal with over 33% glass content, Owens-Corning Fibreglass 825-DA-211, Producing typical cured properties as follows:

- A) Flexural strength - 36,520 PSI
- B) Flexural modulus - 1.49×10^6 PSI
- C) Tensile strength - 16,210 PSI
- D) Heat distortion temp - 183 degrees

Gel-Coat (High performance sanitary Gel-Coat, Glidden-762-W-02-105 or equal. Approved by NSF and in accordance with requirements of USAS-21241-1967)

Dimensions of Unit: 75" Height 68" Diameter 280 lbs.

Method of Effluent Discharge: Subsurface to drain or tile field (surface or stream discharge upon health dept. approval)

#1972-184

EXHIBIT 68-3

The ANSWER to Sewage Treatment

Raw sewage flows by gravity from the home and is discharged directly into the center of our combination aeration settling tank. There it is immediately mixed with recirculated activated sludge. Sewage solids, after being aerated in this compartment, biologically destroy themselves. The treated sewage then flows into a clarification zone and over the weir to the discharge pipe. Our quiet air compressor can be installed in some section of the home or at a location outside the home.

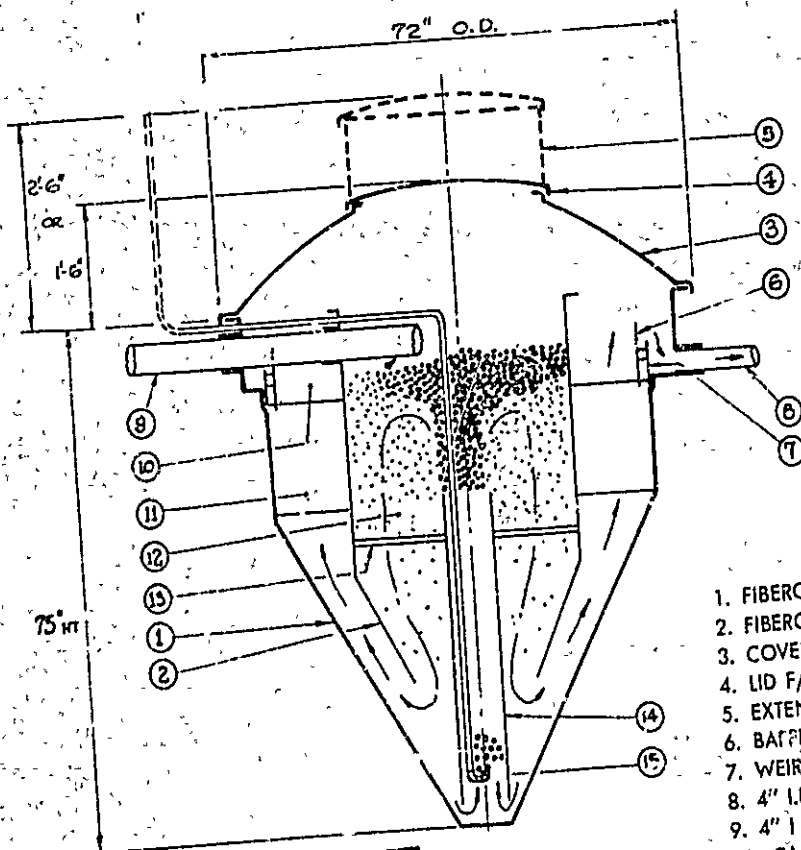
The treatment plant is usually beneath ground. A four-inch waste pipe runs from the house to the plant's influent line. Tubing is brought from the compressor to the plant's air supply line, which runs to a diffuser at the bottom of the tank. The clear effluent is piped to a nearby drainfield and dispersed into the ground. The plant is then ready to treat your sewage.

•Marinas

•Tide-water retreats

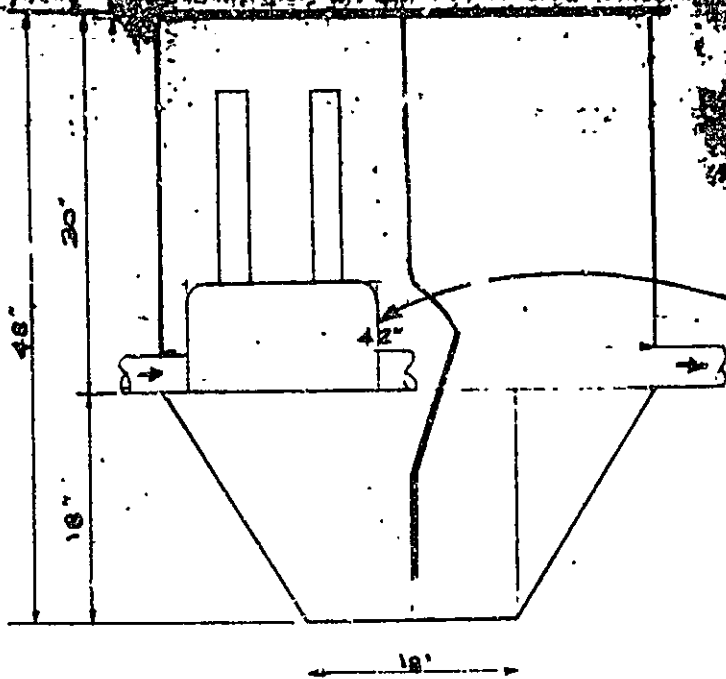
•Apartment Complexes

•Single-Family Dwellings



1. FIBERGLASS OUTER TANK
2. FIBERGLASS INNER TANK
3. COVER F/G
4. LID F/G
5. EXTENSION F/G
6. Baffle
7. WEIR
8. 4" I.D. EFFLUENT LINE
9. 4" I.D. INFLUENT LINE
10. CLARIFICATION ZONE
11. GUSSETS @ 90°
12. TURBULENT AREA
13. SUPPORT RODS
14. RECIRCULATING TUBE
15. AIR INLET & LINE
16. COMPRESSOR
17. ALARM

1970	BOD		% Red.	Suspended Solids	
	Infl (mg/l)	Eff. (mg/l)		In Effluent (mg/l)	Effluent (mg/l)
February	250	30	(88%)	30	38
March	270	60	(80%)	50	25
April	310	30	(90%)	32	34
May	220	25	(88%)	50	48
June	295	27	(91.5%)	25	28
July	315	40	(87%)	52	30
August	205	34	(83.5%)	30	31
September	240	20	(91.7%)	28	29
October	210	20	(90%)		



SIDE VIEW
SCALE 1"=1'-0"

Capacity of contact Tank - 67 Gallons

Areas

Flange	$\frac{1.5}{12} \times 13.56$	= 1.69
Upper Sides	$\frac{160 \times 30}{144}$	= 31.25
Lower Sides	$\frac{109 \times 18}{144}$	= 13.63
Bottom	$\frac{1.5 \times 1.5}{4}$	= 2.25
		<hr/> 48.8

CHLORINATION
UNIT

for use with Nyadec
Sciences Aerobic
Treatment Plants

SANURIL
CHLORINATOR
As manufactured by
DIAMOND SHARCK CORP.
(MODEL 200)

EXHIBIT GR-4
1978-184

FIG 5 CUT-AWAY VIEW MINI-SAN MODEL 200 CHLORINATOR

#1972-184

EXHIBIT 6B-5

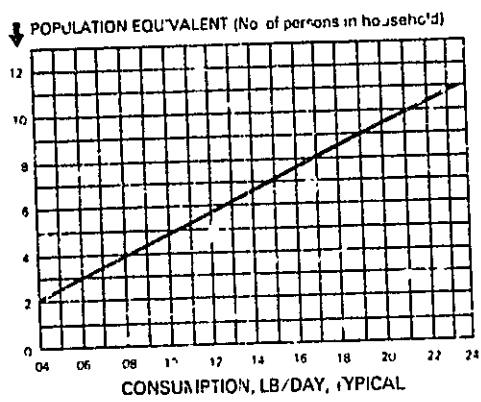
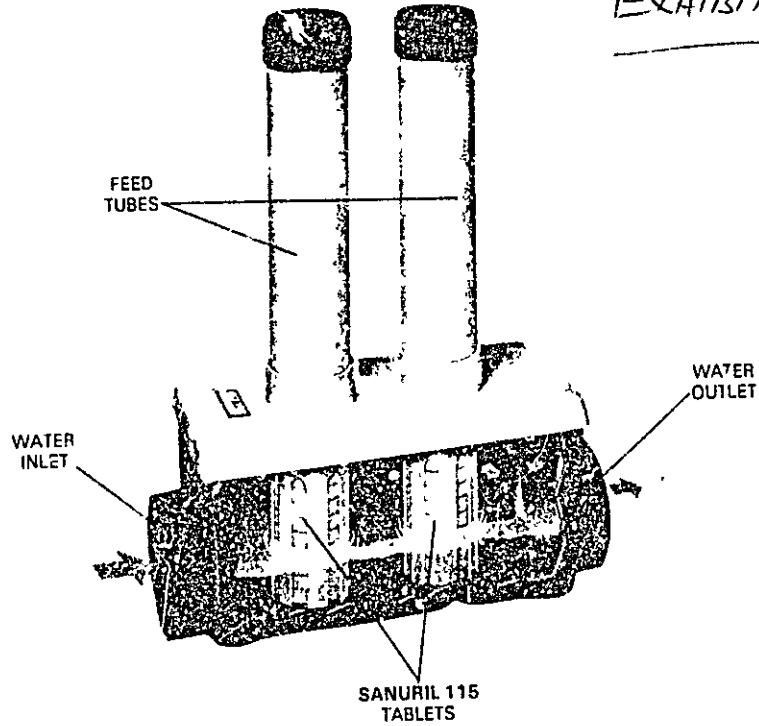


FIG 6 SANURIL 115 CONSUMPTION VS POPULATION EQUIVALENT

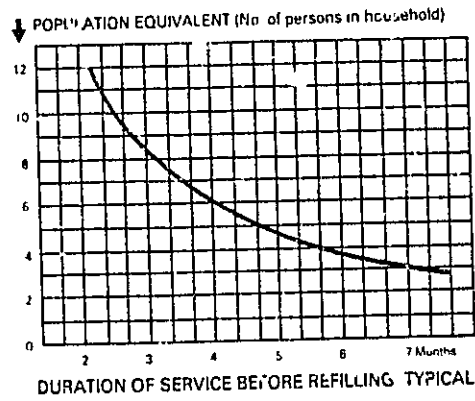


FIG 7 TYPICAL PERIODS OF CONTINUOUS OPERATION BETWEEN REFILLING OF FEED TUBES VS POPULATION

TECHNICAL SERVICES
FOR
WASTEWATER TREATMENT

Tel. (207) 832-7543



MEMBER M.W.W.C.A.

JOHN FANCY, INC.

Box 152, Waldoboro, Maine 04572

AGREEMENT TO SERVICE PLANT

As provided in the agreement between John Fancy, Inc. (the servicer) and Enco Sciences (the distributor), the firm of John Fancy, Inc. will provide a standard Maintenance-Service Agreement on all Enco Science wastewater treatment units of 3,000 gallons per day or less for a period of one year after installation. The rates for this service contract are shown below:

1 Family residence or subsurface discharge less than 1,000 gallons per day	\$110 yr.
2,500 gallons per day	\$180 yr.

After the first year the owner may extend the Maintenance-Service contract at the standard rates.

This agreement is void for any treatment unit where the installation is done in an unworkmanlike manner, thus rendering the unit unsatisfactory for operation. It is also void if the unit or its components are installed in such a location that they are inaccessible for servicing.

#1972-184

ELIZABETH B. TERRY
CLIFF ISLAND, ME.



R2 RESIDENCE ZONE

APPLICATION FOR PERMIT

PERMIT ISSUED
JUL 16 1958
CITY OF PORTLAND

Class of Building or Type of Structure

Third Class

Portland, Maine July 15, 1958

To the INSPECTOR OF BUILDING, S. PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish install the following building structure equipment in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location: Sunset Road Cliff Island Maine (109C-A-21-34) Within Fire Limits? no Dist. No.
Owner's name and address: Alf. K. Berle and Gudrun B. Pierson Telephone
Lessee's name and address: Cliff Island Me. Telephone
Contractor's name and address: owner Telephone
Architect: Specifications: Plans yes No. of sheets 1
Proposed use of building: Dwelling No. families 1
Last use: " No. families 1
Material: frame No. stories 1 Heat Style of roof Roofing
Other buildings on same lot
Estimated cost \$ 300.00 Fee \$ 2.00

General Description of New Work

To construct 12' x 16' addition in rear of building for extension of kitchen. Floor joists 2x6 16" o.c. 2x6 roof rafters 12" o.c. Asphalt roofing. foundation will be concrete piers at least 4' below grade. Sills 4x6-corner posts 4x4. 6x8 at grade 12x12 at bottom.

To construct platform 10' x 18' on side of dwelling-no roof. concrete piers at least 4' below grade. Floor joists 2x6 16" o.c. span 9'-sills 4x6

To cover roof on rear of building with asphalt paper gravel surface.

double 2x4 plate extension of existing plate.

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. PERMIT TO BE ISSUED TO

Details of New Work

Is any plumbing involved in this work? no Is any electrical work involved in this work? yes
Is connection to be made to public sewer? If not, what is proposed for sewage?
Has septic tank notice been sent? Form notice sent?
Height average grade to top of plate 8' Height average grade to highest point of roof 11'
Size, front depth No. stories solid or filled land? ledge earth or rock?
Material of foundation Thickness, top bottom cellar
Material of underpinning Height Thickness
Kind of roof Rise per foot Roof covering
No. of chimneys Material of chimneys of lining Kind of heat fuel
Framing Lumber-Kind hemlock Dressed or full size? dressed Corner posts Sills
Size Girder Columns under girders Size Max. on centers
Kind and thickness of outside sheathing of exterior walls?
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 2nd 3rd roof
On centers: 1st floor 2nd 3rd roof
Maximum span: 1st floor 2nd 3rd roof
If one story building with masonry walls, thickness of walls? height?

If a Garage

No. cars now accommodated on same lot, to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVED:

Handwritten signature and date: O.N. - 7/16/58 - ags

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes
Alf. K. Berle & Gudrun B Pierson

Handwritten signature: alf K. Berle

Signature of owner by:

INSPECTION COPY

PERMIT REPORT

NOTES

5/29/89 - *already done*
E 88

[The notes section contains a large handwritten 'X' over the lined area.]

Permit No. 58/910

Location Amherst Hall City, Amherst, MA

Owner Col. F. B. [unclear] & [unclear]

Date of permit 7/16/88

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

Certif. of Occupancy Issued

Staking Out Notice

Form Check Notice

[The right side of the form contains several horizontal lines, mostly blank or with very faint, illegible markings.]



R2 RESIDENCE ZONE
APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. #1
Portland, Maine, June 23, 1958

PERMIT ISSUED

JUL 16 1958

CITY OF PORTLAND

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. . . . pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location Island Ave. Cliff Island Me. Within Fire Limits? no Dist. No.
 Owner's name and address Charles M Thomson, 4 Forest St. Byfield Mass. Telephone
 Lessee's name and address Telephone
 Contractor's name and address owner Telephone
 Architect Telephone
 Proposed use of building Dwelling Plans filed No. of sheets
 Last use No. families 1
 Increased cost of work No. families
 Additional fee, \$ 50

Description of Proposed Work

To relocate the required parking area from the rear yard to the front yard as per revised site plan attached.

Appeal sustained 7/3/58

Details of New Work Permit to owner

Is any plumbing involved in this work? Is any electric work involved in this work?
 Height average grade to top of plate Height average grade to highest point of roof
 Size, front depth No. stories solid or filled land? earth or rock?
 Material of foundation Thickness, top bottom cellar
 Material of underpinning Height Thickness
 Kind of roof Rise per foot Roof covering
 No. of chimneys Material of chimneys of lining
 Framing lumber—Kind Dressed or full size?
 Corner posts Sills Girt or ledger board? Size
 Girders Size Columns under girders Size Max. on centers
 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 2nd 3rd roof
 On centers: 1st floor 2nd 3rd roof
 Maximum span: 1st floor 2nd 3rd roof

Approved: Albert J. Sears

Charles M Thomson
Signature of Owner by: CM Thomson

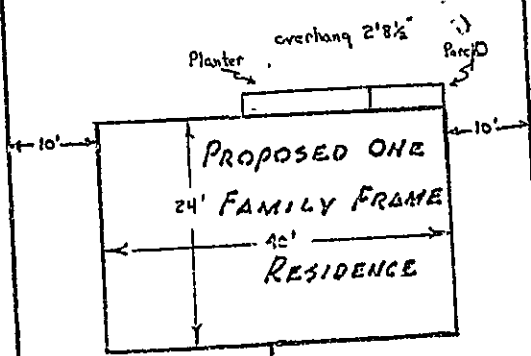
INSPECTION COPY
CS-105

Approved: 7/6/58 [Signature]
Inspector of Buildings

T-M

OCEAN FRONT
60.0' along rear lot line

LOT NO 109CA-2
6,000 S/F +

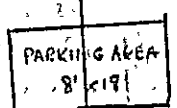


VACANT LOT

VACANT LOT

Eaves project 4 1/2"

Before notice is given for
check of location, street
line and grade will be
procured from and staked
out by Dept. of Public Works
Applicant takes full respon-
sibility for accuracy of
lot boundary markings



81'

60.0'

LOT LINES

ISLAND AVENUE

FLAT PLAN

PROPOSED DWELLING ON LOT 109CA2
~~ISLAND AVENUE~~
ISLAND AVENUE CLIFF ISLAND
OWNER - BUILDER C.M. THOMSON

SCALE: 1/8" = 1 ft.

AP - Island Ave., Cliff Island
(Assessors Lot No. 109CA-2)
Proposed Dwelling and Zoning Appeal Relating
to Location of Required Parking Space

June 23, 1958

cc to Corp. Counsel

Mr. Charles M. Thomson,
4 Forest St.
Byfield, Mass.

Dear Mr. Thomson:

Proposed amendment of building permit authorizing construction of a cottage on Island Ave., Cliff Island (Assessors Lot No. 109CA-2) cannot be approved and issued under the Zoning Ordinance because the site plan filed with the application for the amendment indicates that the required parking space is proposed in the front yard of the dwelling contrary to Section 14A of the Zoning Ordinance.

You have indicated your desire to seek a variance from the Zoning Board of Appeals and because the parking space which you have shown in the rear yard on the site plan filed with the application for the permit for construction of the dwelling, would be most difficult if not impossible to reach from Island Avenue because of outcropping ledge and other terrain features. Such an appeal is to be filed at the office of Corporation Counsel where you will find a copy of this letter.

Very truly yours,

Warren McDonald
Inspector of Buildings

W:CD/11



(A) APARTMENT HOUSE ZONE
APPLICATION FOR PERMIT

PERMIT ISSUED
0143
AUG. 6 1951
CITY OF PORTLAND

Class of Building or Type of Structure Third Class

Portland, Maine, August 3, 1951

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for a permit to erect alter repair demolish or ~~move~~ all the following building structure ~~equipment~~ in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith and the following specifications:

Location Sunset Rd., Cliff Island 09C-A-21-34 Within Fire Limits? no Dist. No. _____

Owner's name and address Rosa Berle, Cliff Island Telephone _____

Lessee's name and address _____ Telephone _____

Contractor's name and address Alfred Cote, Cliff Island Telephone _____

Architect _____ Telephone _____

Proposed use of building Cottage Specifications _____ Plans yes Telephone _____

1st use _____ No. of sheets 1

Material from _____ No. families _____

Other buildings on same lot _____ No. families _____

Estimated cost \$ 200 Roofing _____

~~INSPECTION NOT COMPLETED 6-2-52~~

General Description of New Work

Fee \$ 2.00

To construct 9'x8' addition to existing kitchen, cutting in new door
To cover roof of cottage with Class C Und. Lab. asphalt roofing

2x4 plate extension of existing plate

It is understood that this permit does not include installation of heating apparatus which is to be taken out separately by and in the name of the heating contractor. **PERMIT TO BE ISSUED TO** owner

Permit Issued with Letter

CERTIFICATE OF OCCUPANCY
REQUIREMENT IS WAIVED

Details of New Work

Is any plumbing involved in this work? _____ Is any electrical work involved in this work? _____

Height average grade to top of plate 9' Height average grade to highest point of roof 12'

Size, front _____ depth _____ No. stories 1 solid or filled land? solid earth or rock? earth

Material of foundation concrete piers at least 4' below grade Thickness top 8" bottom 10" cellar no

Material of underpinning _____ Height _____ Thickness _____

Kind of roof shed extension on existing roof _____ Roof covering asphalt roofing Class C Und. Lab.

No. of chimneys _____ Material of chimneys _____ of lining _____ Kind of heat _____ fuel _____

Framing lumber—Kind hemlock Sills 4x6 6" upright _____ Dressed or full size? dressed

Corner posts 4x4 Girders _____ Size _____ Columns under girders _____ Size _____

Studs (outside walls and carrying partitions) 2x4-16" O. C. Bridging in every floor and flat roof span over 8 feet. Max. on centers _____

Joists and rafters: _____ no ceiling _____

On centers: 1st floor 2x6, 2nd _____, 3rd _____, roof 2x4

Maximum span: 1st floor 16", 2nd _____, 3rd _____, roof 16"

If one story building with masonry walls, thickness of walls? _____, 2nd _____, 3rd _____, roof 9' height? _____

If a Garage

No. cars now accommodated on same lot _____, to be accommodated _____ number commercial cars to be accommodated no
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building? _____

Miscellaneous

Will work require disturbing of any tree on a public street? no
Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? yes

Rosa Berle

By ajf. Rank

APPROVED:

with letter
ajf

INSPECTION COPY

Signature of owner

Permit No. 51/1431

Location Amal Rd Opp St

Owner Ravi Ravi

Date of permit 8/6/51

Notif. closing-in

Inspn. closing-in

Final Notif.

Final Inspn.

Copy of permit issued
NO PERMITS NOT COMPLETED

NOTES SECTION
APPLICATION FOR PERMIT

Application for permit to construct new work in the vicinity of the existing structure.

1. Name of applicant: Amal Rd Opp St

2. Address: Ravi Ravi

3. Description of work: Amal Rd Opp St

4. Date of application: 8/6/51

5. Name of engineer: Ravi Ravi

6. Name of contractor: Ravi Ravi

7. Name of architect: Ravi Ravi

8. Name of surveyor: Ravi Ravi

9. Name of inspector: Ravi Ravi

10. Name of permittee: Ravi Ravi

11. Name of owner: Ravi Ravi

12. Name of agent: Ravi Ravi

13. Name of agent: Ravi Ravi

14. Name of agent: Ravi Ravi

15. Name of agent: Ravi Ravi

16. Name of agent: Ravi Ravi

17. Name of agent: Ravi Ravi

18. Name of agent: Ravi Ravi

19. Name of agent: Ravi Ravi

20. Name of agent: Ravi Ravi

Description of New Work

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2. Address: Ravi Ravi

3. Description of work: Amal Rd Opp St

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11. Name of owner: Ravi Ravi

12. Name of agent: Ravi Ravi

13. Name of agent: Ravi Ravi

14. Name of agent: Ravi Ravi

15. Name of agent: Ravi Ravi

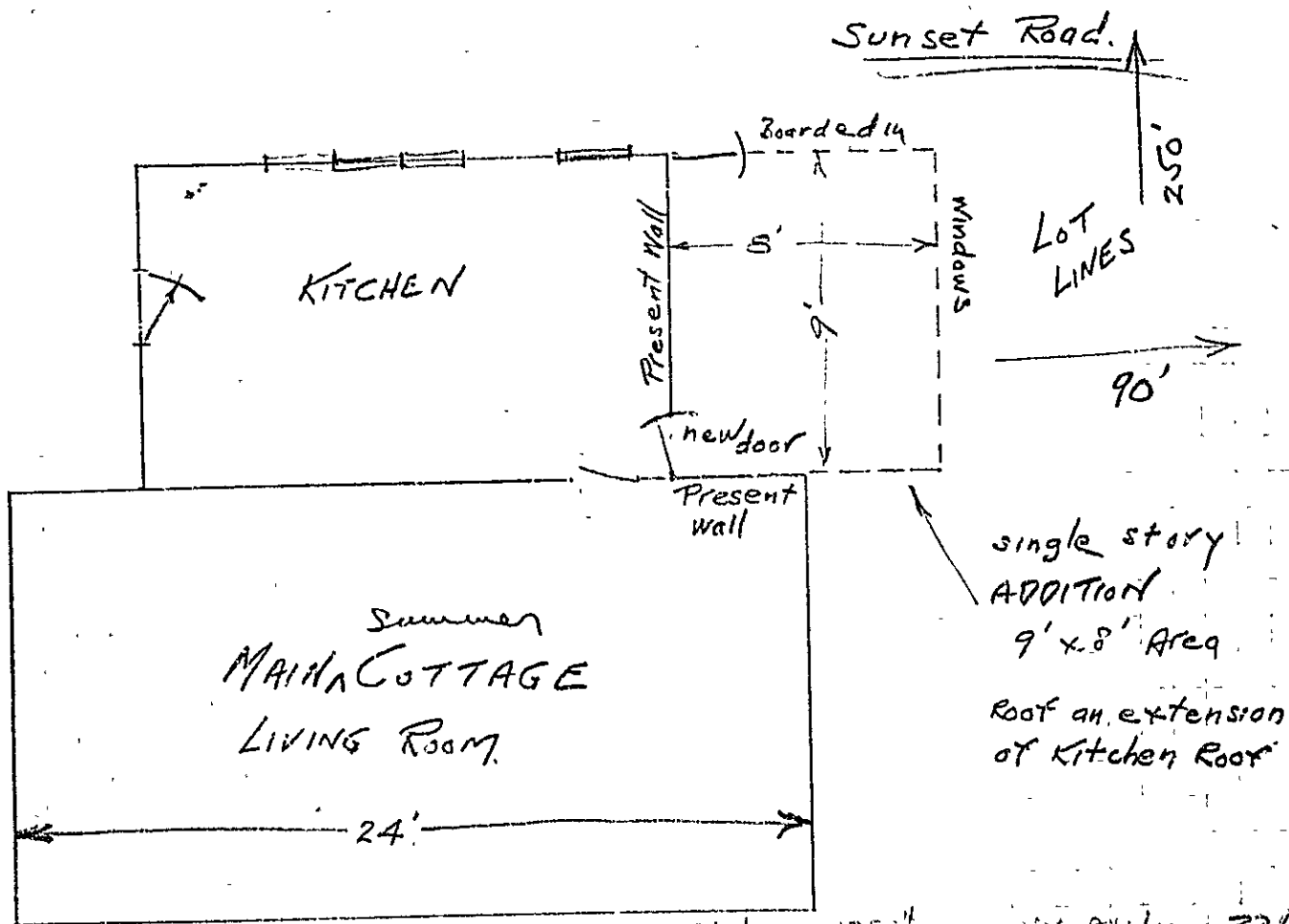
16. Name of agent: Ravi Ravi

17. Name of agent: Ravi Ravi

18. Name of agent: Ravi Ravi

19. Name of agent: Ravi Ravi

20. Name of agent: Ravi Ravi



RECEIVED
 AUG 3 1951.
 DEPT. OF BLD'G INSP.
 CITY OF PORTLAND

ROSA G. BERLE
 CLIFF ISLAND
 MAINE (CASCO BAY)

4/6 - 8' spars - 1752"
 $2(45 \times 8 \times 45) = 3240$
 $8 \times 8 \times 10 = 640$
 3880

$2 \times 11 - 8 \times 2 / \text{min} = 326$
 $326 = 41 \frac{1}{2} \text{ per sq ft}$
 81

Scale $\frac{1}{4}'' = 1'$
 $1'' = 4'$

Sketch By ALF K. Berle

Sunset Road, Cliff Island
(Assessor's Lot Nos. 109c-A-21-34)

August 6, 1951

Mr. Alf K. Berle
Cliff Island, Maine

Copy to, Mr. Alfred Cote
Cliff Island, Maine

Dear Mr. Berle:

Building permit for construction of an 8' x 9' addition to your cottage off Sunset Road, Cliff Island (Assessor's Lot Nos. 109c-A-21-34) is issued herewith subject to the following:

1. An intermediate pier besides that at the corner of the addition will be needed beneath the sill on the side where the floor and roof loads are to be carried. The 4x6 sill is required to be all one piece in cross section, not built up of 2-2x6's, and to be set with the 6" dimension upright. The floor joists are required either to be supported on top of the sills or notched over nailing strips no less than 2x3 nailed to the sides of the sills.

2. The 2x4 rafters running the 9' way of the addition will need to be spaced no more than 12" on centers in order to figure out, or 2x6's spaced not over 18" on centers may be used instead if desired.

Very truly yours,

Warren McDonald
Inspector of Buildings

AJS/B