APPLICATION FOR PERMIT

PERMIT ISSUED
MAY 24 1985
CITY of PORTLAND

B.O.C.A. USE GROUP .....
B.O.C.A. TYPE OF CONSTRUCTION ..... 0 511 .....
ZONING LOCATION ..... R-3 ..... PORTLAND, MAINE ... May 7, 1985

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 Ordinan of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

LOCATION ...36 Coolidge Avenue... ..... Fire District #1 ☐, #2 ☐
1. Owner's name and address ..George Hammond - same..... Telephone ...797-2223...
2. Lessee's name and address ..... Telephone .....
3. Contractor's name and address Owner..... No. of sheets .....
..... No. families ....1....
Proposed use of building ...dwelling.... ..... No. families .....
Last use ...same..... Roofing .....
Material ..... No. stories ..... Heat ..... Style of roof ..... Roofing .....
Other buildings on same lot .....
Estimated contractural cost $6,000.....

FIELD INSPECTOR—Mr. .....
@ 775-5451

Appeal Fees	$ .....
Base Fee	.....40.00
Late Fee	.....
TOTAL	$ .....

To construct 16½' x 17' 2 story addition to existing dwelling as per plans. work has been completed.

send permit to # 1 0410

Stamp of Special Conditions

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.. 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 ..... 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 .....
Kind of roof ..... Rise per foot ..... Roof covering .....
No. of chimneys ..... Material of chimneys ..... of lining ..... Kind of heat ..... fuel .....
Framing Lumber—Kind ..... Dressed or full size? ..... Corner posts ..... Sills .....
Size Girder ..... 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 .....

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? .....

APPROVALS BY: *DATE*
BUILDING INSPECTION—PLAN EXAMINER .....
ZONING: 5/17/85
BUILDING CODE: .....
Fire Dept.: .....
Health Dept.: .....
Others: .....

MISCELLANEOUS

Will work require disturbing of any tree on a public street? .....

Will there be in charge of the above work a person competent to see that the State and City requirements pertaining thereto are observed? .....

Signature of Applicant George H. Hammond Phone # same
Type Name of above George Hammond 1☒ 2☐ 3☐ 4☐
Other ... .
and Address .....

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

4 MR. IANUCCI

Permit No. 85/311

Location 36 Coolidge Cove

Owner Gloria Kalmpad

Date of permit 5-7-85

Approved 5-24-85

Dwelling - Additions

Garage

Alteration

NOTES

2 ft

5/28/85

CITY OF PORTLAND, MAINE
ZONING BOARD OF APPEALS

MERRILL S. SELTZER
Chairman
JOHN C. KNOX
Secretary
PETER F. MORELLI
THOMAS F. JEWELL
DAVID L. SILVERNAIL
MICHAEL E. WESTORT
DEWEY MARTIN

36 Coolidge Avenue

June 7, 1990

George W. and Gloria Hammond
36 Coolidge Avenue
Portland, Maine 04103

Dear Mr. and Mrs. Hammond:

This is in reference to your recent application for a conditional use appeal for approval by the Board of Appeals for your second apartment unit, which has been installed in your single family dwelling, which is located in the R-3 Residence Zone, at 36 Coolidge Avenue.

A copy of the section 14-88 (1)b. of the City Zoning Ordinance is also enclosed for your information. It would be well to review the criteria presented to determine whether or not your property meets the requirements contained therein. There is a fee of $50.00 for this appeal and additional costs will be incurred for publication and notices to property-owners within 500 feet of your dwelling.

There is a question as to whether or not the septic system is adequate to serve an additional unit, and whether the lot size is sufficient to support septic disposal for two dwelling units. A lower level dwelling unit shall have a minimum of two-thirds of its floor to ceiling height above the average adjoining ground level. There is also a question as to whether the window sizes and the door to outside meets the requirements of the Life Safety Code of the Fire Department. This may be verified with Lt. Garroway of the Fire Prevention Bureau.

When we receive a complete application in this office, we shall then be able to place your application on the agenda for a forthcoming meeting of the Board of Appeals.

Sincerely,

Warren J. Turner
Administrative Assistant

cc: Merrill S. Seltzer, Chairman, Board of Appeals
Joseph E. Gray, Jr., Director, Planning & Urban Development
P. Samuel Hoffses, Chief, Inspection Services
Merlin Leary, Code Enforcement Officer
William D. Giroux, Zoning Enforcement Officer
Charles A. Lane, Associate Corporation Counsel

CITY OF PORTLAND, MAINE
ZONING BOARD OF APPEALS

36 Coolidge Avenue

August 1, 1990

George W. and Gloria Hammond
36 Coolidge Avenue
Portland, Maine 04103

Dear Mr. and Mrs. Hammond:

Receipt is acknowledged of your application for a conditional use appeal to obtain approval for a change of use from single family to two family for your residence, which is located in the R-3 Residence Zone. Section 14-88(1)b of the City Zoning Ordinance contains the criteria for this conversion to a two family dwelling. Please furnish floor plans.

This conditional use appeal will be placed on the agenda for the August 16th meeting of the Board of Appeals scheduled for 7 P.M. in Room 209, City Hall, Portland, Maine. A copy of the agenda for that meeting will be sent to you as soon as copies become available for distribution.

We hope that you will plan to attend the meeting on August 16th in order to answer any questions the Board may have concerning your appeal.

Sincerely,

Warren J. Turner
Administrative Assistant

cc: Merrill S. Seltzer, Chairman, Board of Appeals
Joseph E. Gray, Jr., Director, Planning & Urban Development
P. Samuel Hoffses, Chief, Inspection Services
William D. Giroux Zoning Enforcement Officer
Merlin Leary, Code Enforcement Officer
Charles A. Lane, Associate Corporation Counsel

CITY OF PORTLAND, MAINE
ZONING BOARD OF APPEALS

July 26, 1990

RE: 36 Coolidge Avenue

George & Gloria Hammond
36 Coolidge Avenue
Portland, Maine 04103

Dear Mr. and Mrs. Hammond:

Upon a review of your land and building, it has been determined that you have a parcel of more than 10,000 square feet in the group of lots where your residence is located. We apologize for the misunderstanding regarding your property, but there are no numbers assigned due to the fact that your street is unaccepted.

If you can arrange to come in and complete your application and sign the building permit application form, we shall try to place your conditional use appeal o the agenda for the August 16th meeting of the Board of Appeals. We shall need additional information right away, to include the following:

a. A photograph of your residence, which can be reproduced by xeroxing; and whether your lot will support septic disposal;
b. Floor plans for each of the two units showing that the apartments meet the minimum size in square footage;

c. A lower level dwelling unit shall have a minimum of two-thirds of its floor to ceiling height above the average adjoining ground level;

d. There is a question as to whether the floor to ceiling height is adequate (7-1/2 feet) and whether the windows and doors are of adequate size to meet the requirements of the Life Safety Code of the Fire Department.

When we receive a complete application in this office, we can then place this conditional use appeal on the agenda for the next meeting of the Board of Appeals.

Sincerely,

Warren J. Turner

Warren J. Turner
Administrative Assistant

/el

cc: Merrill S. Seltzer, Chairman, Board of Appeals
Joseph E. Gray, Jr., Director, Planning & Urban Development
William D. Giroux, Zoning Codes Enforcement Officer
Merlin Leary, Code Enforcement Officer

389 CONGRESS STREET • PORTLAND, MAINE 04101 • TELEPHONE (207) 874-8300

CITY OF PORTLAND, MAINE
ZONING BOARD OF APPEALS

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Chairman

JOHN C. KNOX
Secretary

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MICHAEL E. WESTORT
DEWEY MARTIN

36 Coolidge Avenue

July 3, 1990

George & Gloria Hammond
36 Coolidge Avenue
Portland, Maine 04103

Dear Mr. and Mrs. Hammond:

We are unable to schedule your conditional use appeal until we receive more information regarding your proposed use of the property, which is located in the R-3 Residence Zone. In order to continue processing this conditional use appeal, we shall require some additional information.

Minimum Lot Size: A minimum sized lot of at least 10,000 square feet is required for all applications for a conditional use appeal when a change of use for converting a single family to a two family is anticipated.

The State Plumbing Code requires a minimum of 40,000 sq. ft. in lot size for a two family and a soils analysis must be conducted before the building permit can be issued.

A list of the elements needed for review of your appeal is enclosed. We shall need a cover letter explaining what you want to do and a plot plan showing necessary parking off street, and the dimensions and distances to the lot line front, side and rear. We shall need a floor plan for each of the apartments showing proposed and existing rooms with dimensions. A photo of the property should accompany each application with ten (10) copies of each application so that copies can be disseminated to each Board of Appeals Member. This appeal will not be scheduled until all of these materials are received in this office. Receipt of the $50 fee is acknowledged.

Sincerely,

Warren J. Turner

Warren J. Turner
Administrative Assistant

Enclosures: List of Meeting dates and Necessary Material for an Appeal

cc: Merrill S. Seltzer, Chairman, Board of Appeals
Joseph E. Gray, Jr., Director, Planning & Urban Development
P. Samuel Hoffses, Chief, Inspection Services
Merlin Leary, Code Enforcement Officer
William D. Giroux, Zoning Enforcement Officer
Charles A. Lane, Associate Corporation Counsel

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street Subdivision Lot #	MAP 349, LOTS 15,16,17,18 36 COOLIDGE AVENUE

PROPERTY OWNERS NAME

Last: HAMMOND First: GEORGE

Applicant Name:	L.P.S. WILSON & SONS
Mailing Address of Owner/Applicant (If Different)	P.O. BOX 1028 WESTBROOK, ME. 04092

PORTLAND 4091 TOWN COPY

Date Issued 12.27.90 $ 40.00 Fee Double Fee Charged ☐

Local Plumbing Inspector Signature L.P.I. # 0122

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.

Signature of Owner/Applicant 12/21/90 Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules

Local Plumbing Inspector Signature 1/2/91 Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM DEC 28 1990
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY	ZONING
.75 AC.±	

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☐ Requires Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☒ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☑ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd
INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK ___ _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC
SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET
SPECIFY: _____

PUMPING
1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED
DOSE: _____ GALS.

CRITERIA FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
SINGLE FAMILY DWELLING (2 BEDROOM-180)
APARTMENT (1 BEDROOM-120)
DESIGN FLOW: 300 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 28"

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 500 Sq. Ft.
   ☒ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____
20 PLASTIC CHAMBERS

SITE EVALUATOR STATEMENT

On DECEMBER 7, 1990 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Albert Frick — Site Evaluator Signature
163 — SE#
12/10/90 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

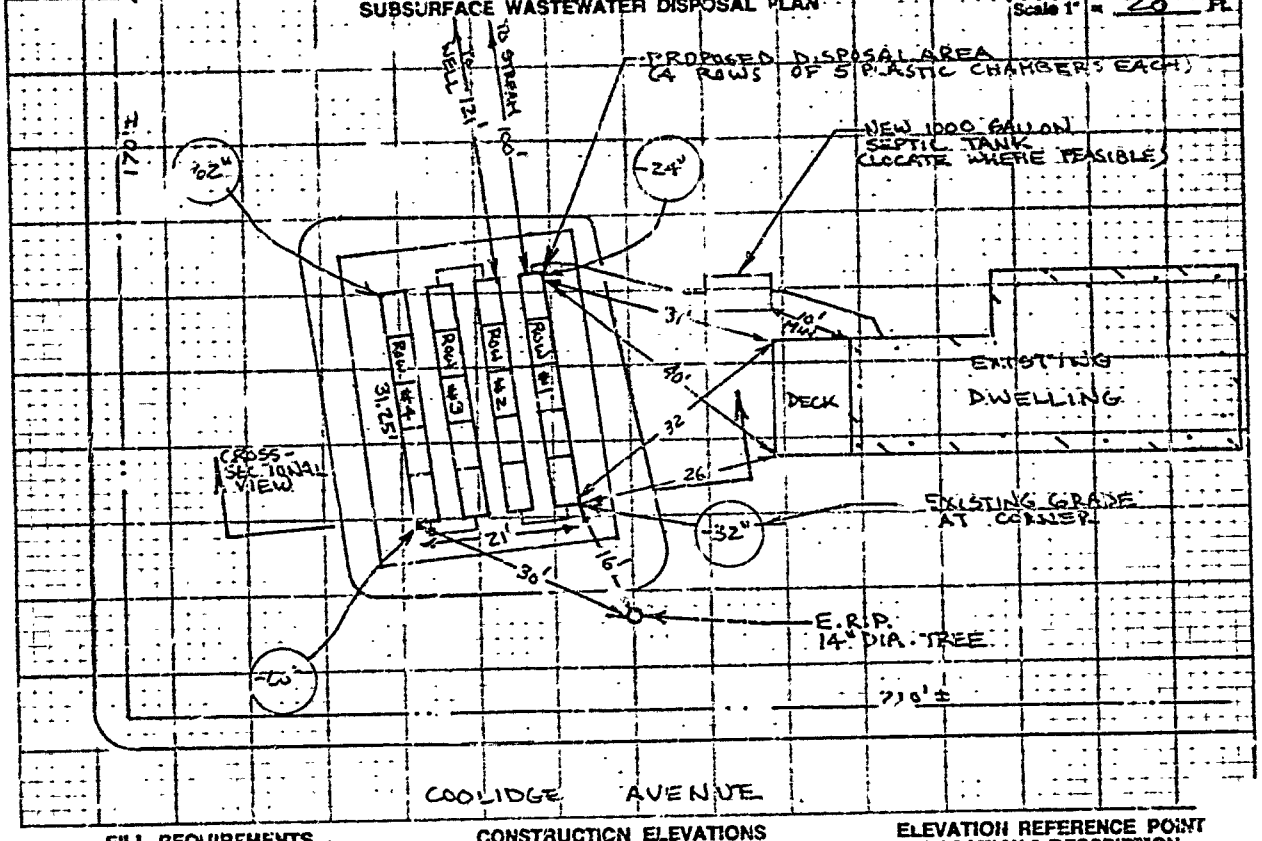
Department of Human Services
Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation: PORTLAND | Street, Road, Subdivision: 36 COOLIDGE AVENUE | Owners Name: HAMMOND, GEORGE

SUBSURFACE WASTEWATER DISPOSAL PLAN

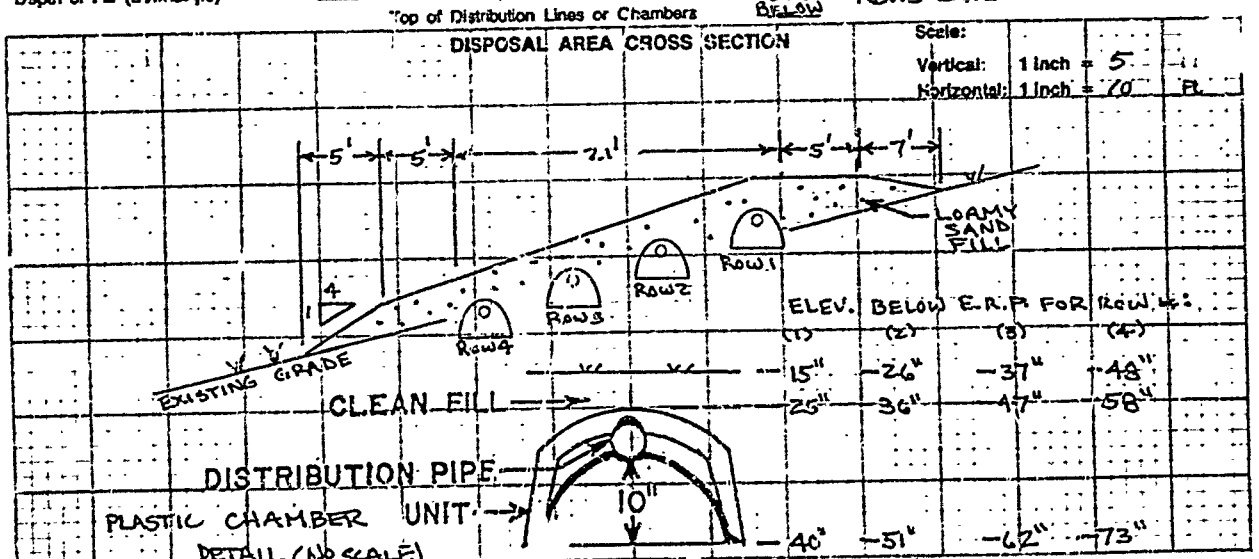
Scale 1" = 20 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	9" - 17"	Reference Elevation is	00 SEE DETAIL BELOW	NAIL IN 14" DIA. TREE, 12" ABOVE BASE.
Depth of Fill (Downslope)	12" - 14"	Bottom of Disposal Area		
		Top of Distribution Lines or Chambers		

DISPOSAL AREA CROSS SECTION

Scale: Vertical: 1 Inch = 5 Ft. Horizontal: 1 Inch = 10 Ft.



ELEV. BELOW E.R.P. FOR ROW #:

(1)	(2)	(3)	(4)
-15"	-26"	-37"	-48"
-25"	-36"	-47"	-58"
-40"	-51"	-62"	-73"

Albert Ferick — Site Evaluator Signature
163 — SE#
12/10/90 — Date

HHE-200 Rev. 1/84

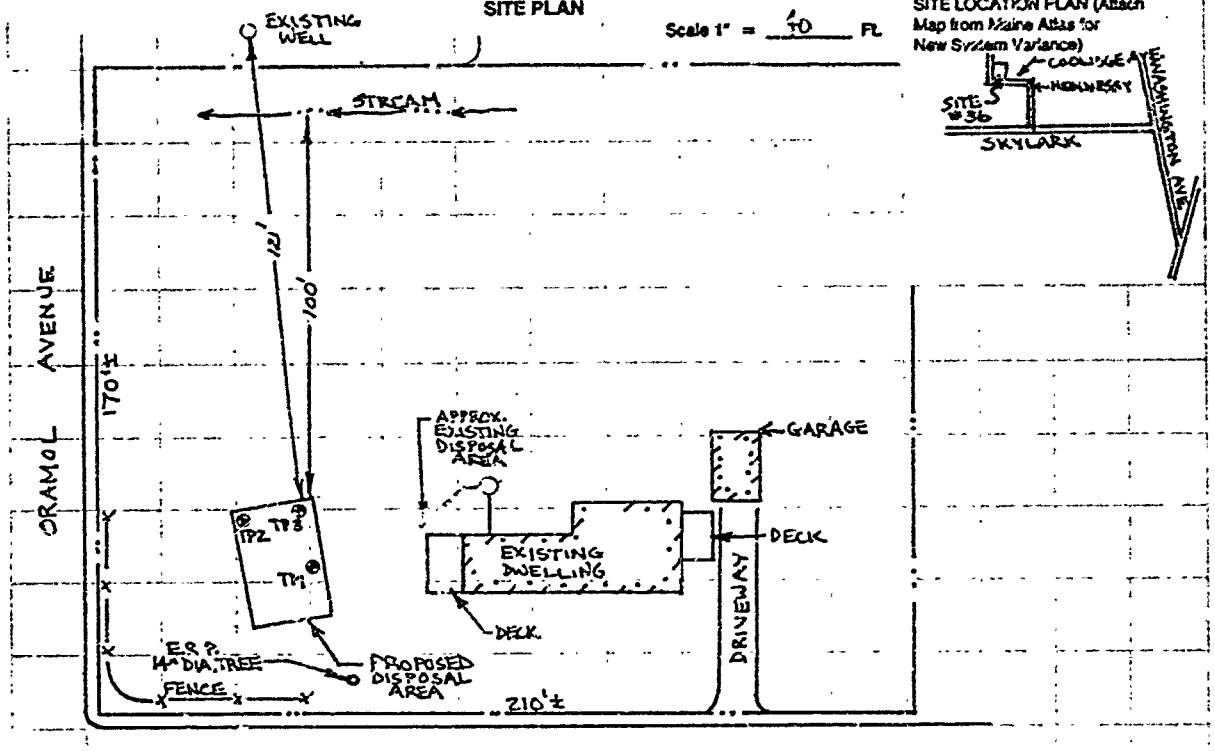
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: PORTLAND | Street, Road, Subdivision: 36 COOLIDGE AVENUE | Owners Name: HAMMOND, GEORGE

SITE PLAN

Scale 1" = 10 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole TP1 ☒ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
0 SANDY LOAM		DARK BROWN 10YR 3/3	
10	FRIABLE	DARK YELLOWISH BROWN	
15 LOAMY SAND		LIGHT OLIVE BROWN	
30 LOAMY SAND & SAND	SOMEWHAT FIRM	OLIVE	COMMON DISTINCT
50 (LIMIT OF EXCAVATION AT 50")			FREE WATER

Soil Profile	Classification Condition	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
3	C	____ %	28"	

Observation Hole TP2 ☒ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
0 SANDY LOAM		DARK BROWN	
10			
15 LOAMY SAND	FRIABLE	DARK YELLOWISH BROWN	
30 LOAMY SAND AND SAND	FIRM		FREE WATER AND COMMON DISTINCT
50 BEDROCK			

Soil Profile	Classification Condition	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
2	A/C	____ %	28"	

Albert Frick — Site Evaluator Signature
163 — SE#
12/10/90 — Date

Albert Frick Associates, Inc.
Soil Scientists & Site Evaluators
95A County Road Gorham, Maine 04038
(207) 839-5563

Town, City, Plantation	Street, Road, Subdivision	Owners Name
PORTLAND	36 COOLIDGE AVENUE	HAMMOND, GEORGE

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole TP3 ☒ Test Pit ☐ Boring

____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling
0 SANDY LOAM		DARK BROWN	
10 LOAMY SAND	FRIAB	DARK YELLOWISH BROWN	
20 LOAMY SAND AND SAND	FIRM	OLIVE	COMMON DISTINCT
50 LIMIT OF EXCAVATION			

Soil	Classification	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
Profile	Condition	8 %	28 "	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole ____ ☐ Test Pit ☐ Boring

____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling
0			
10			
20			
30			
40			
50			

Soil	Classification	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
Profile	Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole ____ ☐ Test Pit ☐ Boring

____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling
0			
10			
20			
30			
40			
50			

Soil	Classification	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
Profile	Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole ____ ☐ Test Pit ☐ Boring

____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling
0			
10			
20			
30			
40			
50			

Soil	Classification	Slope	Limiting Factor	Ground Water / Restrictive Layer / Bedrock
Profile	Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Albert Frick — 163 — 12/10/90
Site Evaluator — SE# — Date

paid July 3, 1990 Mailed in

Permit # ____ **City of** Portland **BUILDING PERMIT APPLICATION** **Fee** $50.00 **Zone** ____ **Map #** ____ **Lot#** ____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: George & Gloria Hammond Phone: 797-2323
Address: 36 Coolidge Av., Portland, Maine 04103
LOCATION OF CONSTRUCTION: 36 Coolidge Ave.
Contractor: ____ Sub: ____
Address: ____ Phone #: ____
Est. Construction Cost: ____ Proposed Use: ____
Past Use: ____
# of Existing Res. Units: ____ # of New Res. Units: ____
Building Dimensions L ____ W ____ Total Sq. Ft. ____
Stories: ____ # Bedrooms ____ Lot Size: ____ to basement
Is Proposed Use: Seasonal ____ Condominium ____ Conversion ____
Explain Conversion: To legalize 2nd apartment - already existing - @ time of appeal

For Official Use Only
Sub-division: ____
Date: July 31, 1990
Inside Fire Limits: ____ Name: ____
Bldg Code: ____ Lot: ____
Time Limit: ____ Ownership: ____ Public / Private
Estimated Cost: ____

Zoning:
Street Frontage Provided: ____
Provided Setbacks Front ____ Back ____ Side ____ Side ____
Review Required:
Zoning Board Approval: Yes ____ No ____ Date: ____
Planning Board Approval: Yes ____ No ____ Date: ____
Conditional Use: ____ Variance ____ Site Plan ____ Subdivision ____
Shore and Zoning Yes ____ No ____ Floodplain Yes ____ No ____
Special Exception ____
Other (Explain) ____

Foundations: Sp list 349-G-1,2,17,18 = vacant lot
1. Type of Soil: ____
2. Set Backs - Front ____ Rear ____ Side(s) ____
3. Footings Size: ____
4. Foundation Size: 349-G-3,15,16 = 1 - fam
5. Other: ____

Floor:
1. Sills Size: ____ Sills must be anchored.
2. Girder Size: ____
3. Lally Column Spacing: ____ Size: ____
4. Joists Size: ____ Spacing 16" O.C.
5. Bridging Type: ____ Size: ____
6. Floor Sheathing Type: ____ Size: ____
7. Other Material: ____

Exterior Walls:
1. Studding Size ____ Spacing ____
2. No. windows ____
3. No. Doors ____
4. Header Sizes ____ Span(s) ____
5. Bracing: Yes ____ No. ____
6. Corner Posts Size ____
7. Insulation Type ____ Size ____
8. Sheathing Type ____ Size ____
9. Siding Type ____ Weather Exposure ____
10. Masonry Materials ____
11. Metal Materials ____

Interior Walls:
1. Studding Size ____ Spacing ____
2. Header Sizes ____ Span(s) ____
3. Wall Covering Type ____
4. Fire Wall if required ____
5. Other Materials ____

Ceiling:
1. Ceiling Joists Size ____
2. Ceiling Strapping Size ____ Spacing ____
3. Type Ceilings ____
4. Insulation Type ____ Size ____
5. Ceiling Height: ____

Roof:
1. Truss or Rafter Size ____ Span ____
2. Sheathing Type ____ Size ____
3. Roof Covering Type ____

Chimneys:
Type: ____ Number of Fire Places ____

Heating:
Type of Heat: ____

Electrical:
Service Entrance Size: ____ Smoke Detector Required Yes ____ No ____

Plumbing:
1. Approval of soil test if required Yes ____ No ____
2. No. of Tubs or Showers ____
3. No. of Flushes ____
4. No. of Lavatories ____
5. No. of Other Fixtures ____

Swimming Pools:
1. Type: ____
2. Pool Size: ____ x ____ Square Footage ____
3. Must conform to National Electrical Code and State Law.

Permit Received By: Latini
Signature of Applicant: George Hammond Date: 7/31/90
Signature of CEO ____ Date ____
Inspection Dates ____

White-Tax Assesor Yellow-GPCOG White Tag-CEO

Approval Conditional

paid July 3, 1990 Mailed in

Permit # _____ **City of** Portland **BUILDING PERMIT APPLICATION Fee** $50.00 **Zone**_____ **Map #**_____ **Lot#** _____

Please fill out any part which applies to job. Proper plans must accompany form.

Owner: George & Gloria Hammond Phone: 797-2323

Address: 36 Coolidge Av., Portland, Maine 04103

LOCATION OF CONSTRUCTION: 36 Coolidge Ave.

Contractor:_____ Sub:_____

Address:_____ Phone #_____

Est. Construction Cost:_____ Proposed Use:_____

_____ Past Use:_____

# of Existing Res. Units_____ # of New Res. Units_____

Building Dimensions L_____ W_____ Total Sq. Ft._____ in basement

Stories:_____ # Bedrooms_____ Lot Size:_____

Is Proposed Use: Seasonal_____ Condominium_____ Conversion_____

Explain Conversion To legalize 2nd apartment - already existing - @ time of appeal

Sp/Lot 349-G-1,2,17,18 = vacant land

Foundation:
1. Type of Soil:_____
2. Set Backs - Front_____ Rear_____ Side(s)_____
3. Footings Size:_____
4. Foundation Size:_____
5. Other 349-G-3,15,16 = 1 - Lane 92

Floor:
1. Sills Size:_____ Sills must be anchored.
2. Girder Size:_____
3. Lally Column Spacing:_____ Size:_____
4. Joists Size:_____ Spacing 16" O.C.
5. Bridging Type:_____ Size:_____
6. Floor Sheathing Type:_____ Size:_____
7. Other Material:_____

Exterior Walls:
1. Studding Size_____ Spacing_____
2. No. windows_____
3. No. Doors_____
4. Header Sizes_____ Span(s)_____
5. Bracing: Yes_____ No._____
6. Corner Posts Size_____
7. Insulation Type_____ Size_____
8. Sheathing Type_____ Size_____
9. Siding Type_____ Weather Exposure_____
10. Masonry Materials_____
11. Metal Materials_____

Interior Walls:
1. Studding Size_____ Spacing_____
2. Header Sizes_____ Span(s)_____
3. Wall Covering Type_____
4. Fire Wall if required_____
5. Other Materials_____

Appeal sustained 8-16-90

For Official Use Only

Date July 31, 1990 Subdivision: Name_____

Inside Fire Limits_____ Lot_____

Bldg Code_____ Ownership: _____ Public

Time Limit_____ _____ Private

Estimated Cost:_____

Zoning:
Street Frontage Provided:_____
Provided Setbacks: Front_____ Back_____ Side_____ Side_____

Review Required:
Zoning Board Approval: Yes____ No____ Date:_____
Planning Board Approval: Yes____ No____. Date:_____
Conditional Use:_____ Variance_____ Site Plan_____ Subdivision____
Shoreland Zoning Yes____ No____ Floodplain Yes____ No____
Special Exception_____
Other (Explain)_____

Ceiling:
1. Ceiling Joist Size:_____
2. Ceiling Strapping Size_____ Spacing_____
3. Type Ceilings:_____
4. Insulation Type_____ Size_____
5. Ceiling Height:_____

Roof:
1. Trusses or Rafter Size_____ Span_____
2. Sheathing Type_____ Size_____
3. Roof Covering Type_____

Chimneys:
Type:_____ Number of Fire Places_____

Heating:
Type of Heat:_____

Electrical:
Service Entrance Size:_____ Smoke Detector Required Yes____ No____

Plumbing:
1. Approval of soil test if required Yes_____ No_____
2. No. of Tubs or Showers_____
3. No. of Flushes_____
4. No. of Lavatories_____
5. No. of Other Fixtures_____

Swimming Pools:
1. Type:_____
2. Pool Size: _____ x _____ Square Footage_____
3. Must conform to National Electrical Code and State Law.

Permit Received By Latini

Signature of Applicant George Hammond Date 7/31/90
George Hammond

Signature of CEO_____ Date_____

Inspection Dates_____

White-Tax Assesor Yellow-GPCOG White Tag -CEO

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	PORTLAND
Street Subdivision Lot #	MAP 349, LOTS 15,16,17,18 36 COOLIDGE AVENUE

PROPERTY OWNERS NAME

Last: [redacted] First: [redacted]

Applicant Name:	LES WILSON & SONS
Mailing Address of Owner/Applicant (If Different)	P.O. BOX 1028 WESTBROOK, ME. 04092

PORTLAND 4091 TOWN COPY

Date Permit Issued: 12/27/90 $ 140.00 FEE ☐ # Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 01,127

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.

[redacted] 12/27/90
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Martin Dean 1/2/91
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM - DEC 28 1990
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED -- P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY	ZONING
.75 AC.±	

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE
Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
a. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☒ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM
(Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)
INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC
SIZE: 1000 GALS.

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 28"

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET
SPECIFY: _____

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

PUMPING
1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED
(DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED
DOSE: _____ GALS.

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 600 Sq. Ft.
☒ REGULAR ☐
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____
20 PLASTIC CHAMBERS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
SINGLE FAMILY DWELLING (2 BEDROOM-180)
APARTMENT (1 BEDROOM-120)

DESIGN FLOW: 300 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On DECEMBER 7, 1990 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

[redacted] [redacted] 12/10/90
Site Evaluator Signature SE# Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

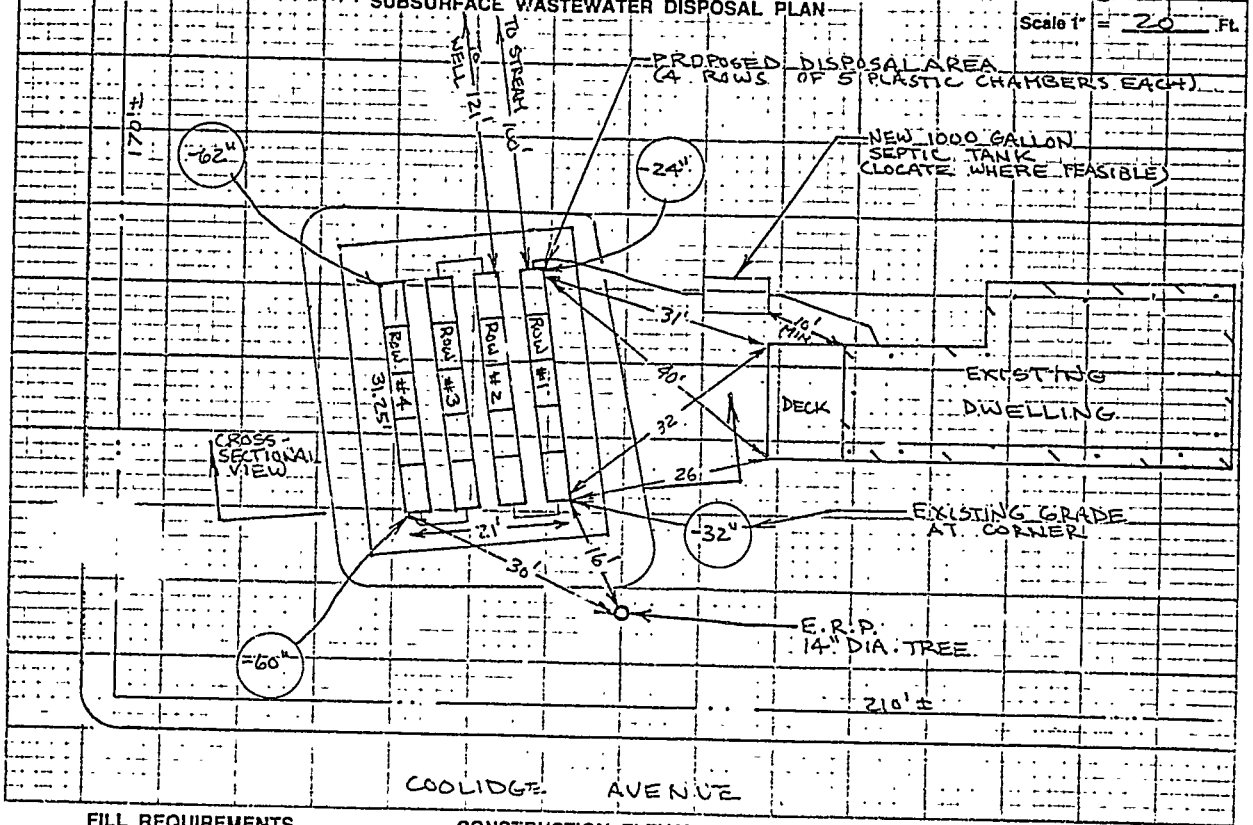
Town, City, Plantation: PORTLAND

Street, Road, Subdivision: 36 COOLIDGE AVENUE

Owners Name: [redacted]

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope): 9" - 17"

Depth of Fill (Downslope): 12" - 14"

CONSTRUCTION ELEVATIONS

Reference Elevation is: ~~DD~~ SEE DETAIL BELOW

Bottom of Disposal Area

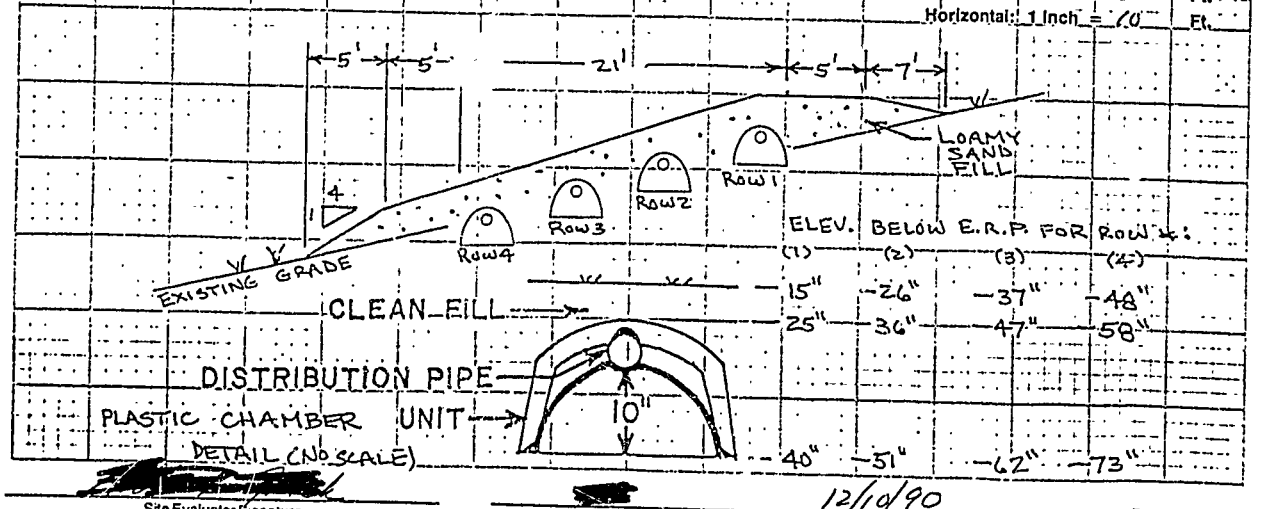
Top of Distribution Lines or Chambers

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL IN 14" DIA. TREE, 12" ABOVE BASE.

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



ELEV. BELOW E.R.P. FOR ROW #:

	(1)	(2)	(3)	(4)
	15"	-26"	-37"	-48"
	25"	-36"	-47"	-58"
	40"	-51"	-62"	-73"

Site Evaluator Signature

SE#

12/10/90
Date

HHE-200 Rev. 1/84

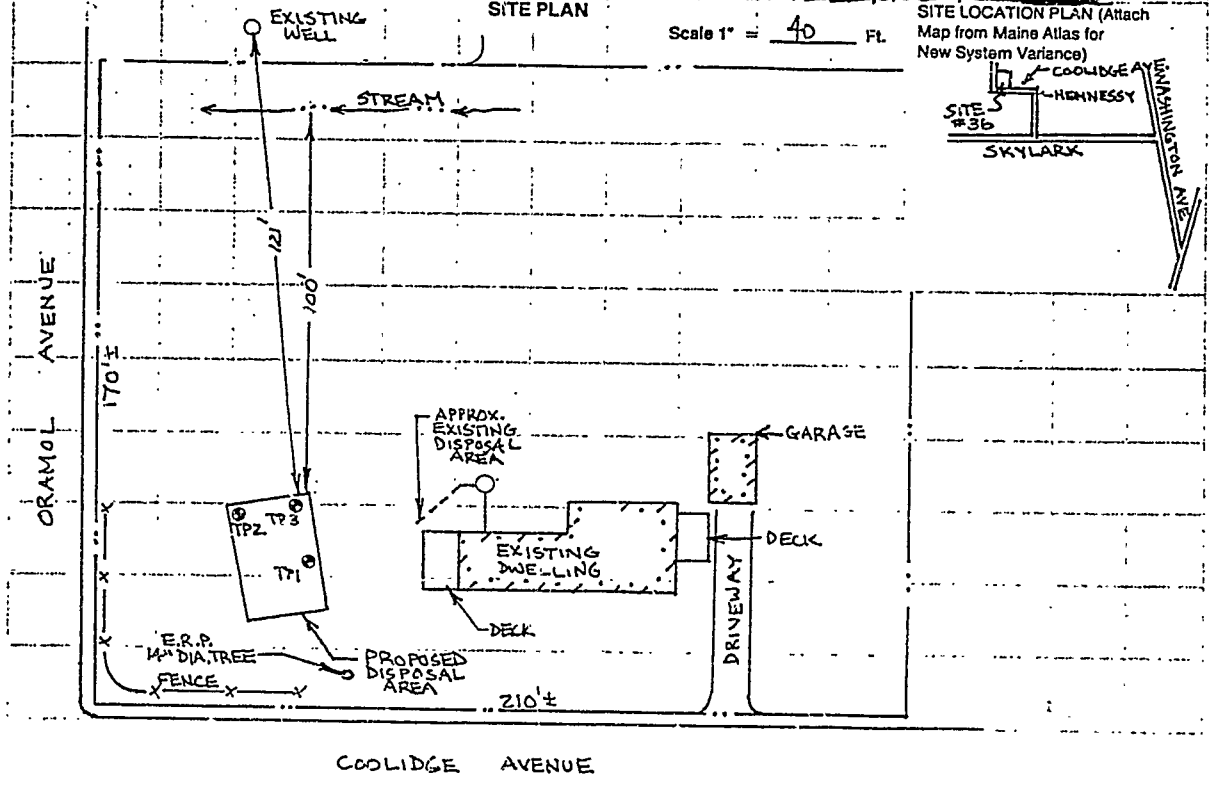
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
PORTLAND	36 COOLIDGE AVENUE	[redacted]

SITE PLAN

Scale 1" = 40 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole TP1 ☒ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN 10YR 3/3	
	FRIABLE	DARK YELLOWISH BROWN	
LOAMY SAND		LIGHT OLIVE BROWN	
LOAMY SAND & SAND	SOMEWHAT FIRM	OLIVE	COMMON DISTINCT
(LIMIT OF EXCAVATION AT 50")			FREE WATER

Soil Profile	Classification Condition	Slope %	Limiting Factor	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
3	C		28"	

Observation Hole TP2 ☒ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN	
LOAMY SAND	FRIABLE	DARK YELLOWISH BROWN	
LOAMY SAND AND SAND	FIRM		FREE WATER AND COMMON DISTINCT
BEDROCK			

Soil Profile	Classification Condition	Slope %	Limiting Factor	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
3	A/C		28"	

[redacted]
Site Evaluator Signature

[redacted]
SE#

12/10/90
Date

Albert Frick Associates, Inc.
Soil Scientists & Site Evaluators
95A County Road Gorham, Maine 04038
(207) 839-5563

Town, City, Plantation: PORTLAND | Street, Road, Subdivision: 36 COOLIDGE AVENUE | Owners Name: [redacted]

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole TP3 ☒ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling
SANDY LOAM		DARK BROWN	
LOAMY SAND	FRIABLE	DARK YELLOWISH BROWN	
LOAMY SAND AND SAND	FIRM	OLIVE	COMMON DISTINCT
LIMIT OF EXCAVATION			

Soil Classification	Slope	Limiting Factor	
Drainage / Condition	%	20	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling

Soil Classification	Slope	Limiting Factor	
Drainage / Condition	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling

Soil Classification	Slope	Limiting Factor	
Drainage / Condition	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Texture	Consistency	Color	Mottling

Soil Classification	Slope	Limiting Factor	
	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

[redacted] SE# 12/10/90

Site Evaluator SE# Date