

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3126

PROPERTY ADDRESS

Town Or Platination	PORTLAND - LONG ISLAND
Street	BEACH AVE
Subdivision Lot #	TAX MAP 96 BLOCK C LOT 39
PROPERTY OWNERS NAME	
KANNHEISER	RONALD
Last:	First:
Applicant Name:	RONALD KANNHEISER
Mailing Address of Owner/Applicant (if Different)	3 WESCOTT ROAD STONEHAM MASSACHUSETTS

PORTLAND PERMIT # 715 TOWN COPY

Date Permitted: 9/10/85 Fee: \$140

Signature: *Ronald Kannheiser* L.P.I. # 1121

Local Plumbing Inspector Signature

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any false information is cause for the Local Plumbing Inspector to deny a Permit.

Ronald Kannheiser
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

Local Plumbing Inspector Signature: *AA*

Date Approved: **MAY 31 1985**

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. NEW SYSTEM
2. REPLACEMENT SYSTEM
3. EXPANDED SYSTEM
4. SEASONAL CONVERSION
5. EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. NO RULE VARIANCE REQUIRED
2. NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
3. Requires only Local Plumbing Inspector Approval
4. Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

1. NON-ENGINEERED SYSTEM
2. PRIMITIVE SYSTEM (Includes Alternating Toilet)
3. ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. TREATMENT TANK (ONLY)
5. HOLDING TANK
6. ALTERNATIVE TOILET (ONLY)

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

1. SED
2. CHAMBER
3. TRENCH
4. OTHER _____

DISPOSAL SYSTEM TO SERVE:

1. SINGLE FAMILY DWELLING
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER _____ SPECIFY _____

7. NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ENGINEERED DISPOSAL AREA (ONLY)
9. SEPARATED LAUNDRY SYSTEM

SIZE OF PROPERTY
117,840 SF.

ZONING
R-3 RESIDENTIAL

TYPE OF WATER SUPPLY
WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. SEPTIC: Regular Low Profile
2. AEROBIC

SIZE: 750 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 (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)
3. REQUIRED

DOSE: _____ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC)

-2 BEDROOM
CONSERVATIVE
-LOW VOLUME
TOILET

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
6	C

DEPTH TO LAYING FACTOR: 38

SIZING RATINGS USED FOR DESIGN PURPOSES

1. SMALL
2. MEDIUM
3. MEDIUM-LARGE
4. LARGE
5. EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. BEC 400 Sq Ft
2. CHAMBER _____ Sq Ft
 REGULAR H 20
3. TRENCH _____ Linear Ft
4. OTHER: _____

DESIGN FLOW: 270
(GALLONS/DAY)

SITE EVALUATOR STATEMENT

SITE EVALUATION WAIVED BY LOCAL OPTION

On September 23, 1984 (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.

William B. Jordan
Site Evaluator or Professional Engineer's Signature

0003/4814
SC# / PE#

9/26/84
Date

* Local Plumbing Inspectors 1-prepare & Local Site Evaluation Waiver under a Local Option

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation

PORTLAND LONG ISLAND

Street, Road, Subdivision

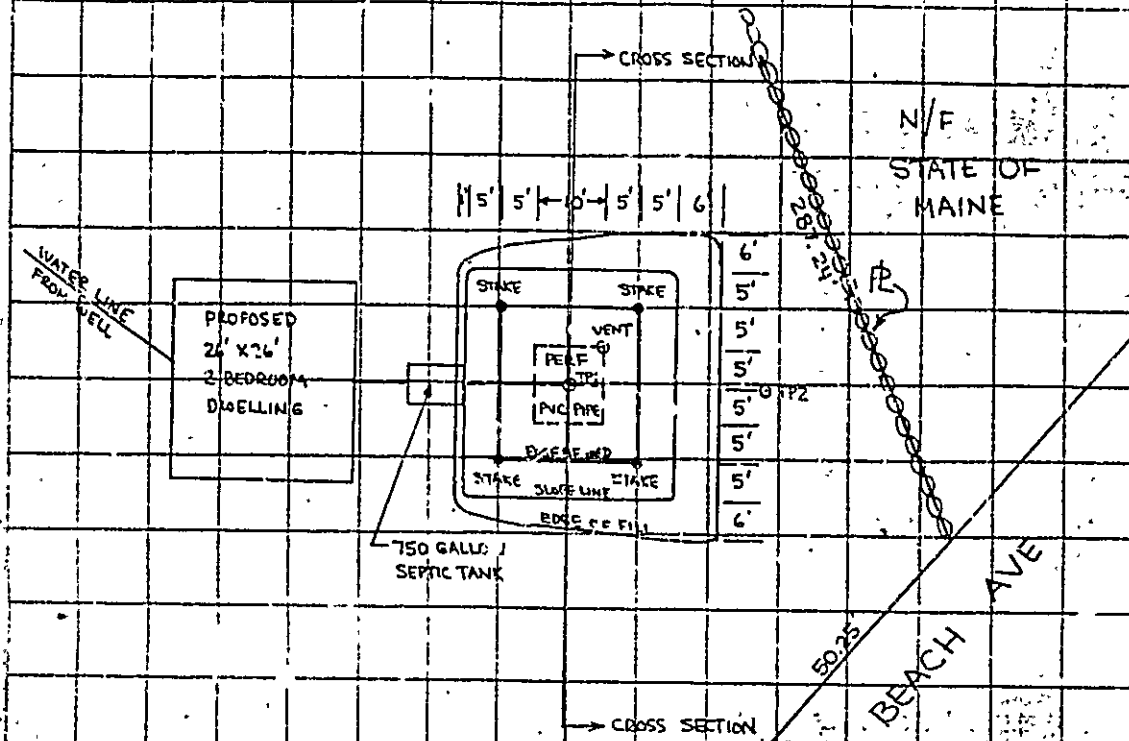
BEACH ROAD 96-C-39

Owner's Name

RONALD KANNHEISER

SUBSURFACE WASTEWATER DISPOSAL PLAN

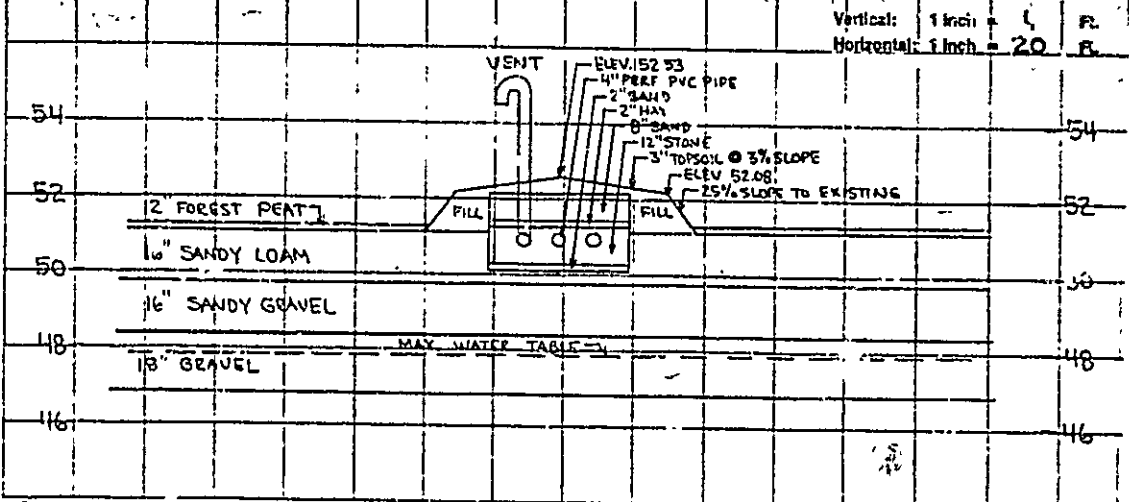
Scale 1" = 20' R.L.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION TOP OF GRANITE MONUMENT ON SOUTHWEST SIDE OF BEACH ROAD
Depth of Fill (Upslope)	3'	Reference Elevation is	52.00	
Depth of Fill (Downslope)	17'	Bottom of Disposal Area	50.08	
		Top of Distribution Lines or Chambers	51.16	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 4' R.L.
Horizontal: 1 inch = 20' R.L.



Williams B. Goodwin
Site Evaluator or Professional Engineer's Signature

0003/9819
SE #1 PE #

9/26/87
Date

Page 3 of 3
MHE-200 Rev 42

CITY OF PORTLAND, MAINE

459

SITE PLAN REVIEW

Processing Form

Ronald L Kannheiser

Feb. 4, 1985

Applicant: 3 Wescott Road - Stoneham, Ma. Date: Feb. 4, 1985
 Mailing Address: 1 family summer cottage Address of Proposed Site: 96-C-39 Beach Ave, Long Island
 Proposed Use of Site: 58,460 sq ft, 26' x 26' Site Identifier(s) from Assessors Maps: 96-C-39
 Acreage of Site / Ground Floor Coverage: _____ Zoning of Proposed Site: R-3

Site Location Review (DEP) Required: () Yes (✓) No Proposed Number of Floors: 2
 Board of Appeals Action Required: () Yes (✓) No Total Floor Area: _____
 Planning Board Action Required: () Yes (✓) No

Other Comments: _____
 Date Dept. Review Due: _____

BUILDING DEPARTMENT SITE PLAN REVIEW

(Does not include review of construction plans)

- Use does NOT comply with Zoning Ordinance
- Requires Board of Appeals Action
- Requires Planning Board/City Council Action

Explanation: _____

Use complies with Zoning Ordinance — Staff Review Below

Zoning SPACE & BULK, as applicable

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK APPLICABLE (SEC. 21)	USE	SEWAGE DISPOSAL	REAR YARDS	SIDE YARDS	FRONT YARDS	PROJECTIONS	HEIGHT	LOT AREA	BUILDING AREA	AREA PER FAMILY	WIDTH OF LOT	LOT FRONTAGE	STREET PARKING	LOADING BAYS
	✓	✓	✓	✓	✓	✓	✓	✓	NA	✓	✓	✓	✓	✓	✓	OK	NA
COMPLIES																	
COMPLIES CONDITIONALLY																	
DOES NOT COMPLY																	

CONDITIONS SPECIFIED BELOW
 REASONS SPECIFIED BELOW

REASONS: OK.

Warren J. Turner 2/7/85
 SIGNATURE OF REVIEWING STAFF/DATE

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Ronald H. Larner

Applicant _____

Date Jan. 4, 1968

Mailing Address _____

Address of Proposed Site _____

Proposed Use of Site _____

Site Identifier(s) from Assessors Maps _____

Area of Site / Ground Floor Coverage _____

Zoning of Proposed Site _____

Site Location Review (DEP) Required: () Yes () No

Proposed Number of Floors _____

Board of Appeals Action Required: () Yes () No

Total Floor Area _____

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dep. Review Due: _____

FIRE DEPARTMENT REVIEW

(Date Received) _____

	ACCESS TO SITE	ACCESS TO STRUCTURES	SUFFICIENT VEHICLE TURNING ROOM	SAFETY HAZARDS	HYDRANTS	STAIRCASE CONNECTIONS	SUFFICIENCY OF WATER SUPPLY	OTHER	
APPROVED									CONDITIONS SPECIFIED BELOW
APPROVED CONDITIONALLY									
DISAPPROVED									

REASONS: _____

(Attach Separate Sheet if Necessary)

SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Ronald H. Schneider

Job. 4. 1985

Applicant 3 Hancock Road - Stoneham, Ma.

Date

Mailing Address 1 Farley Street Stage

Address of Proposed Site 26-C-10 Beach Ave. Long Island

Proposed Use of Site 57,460 sq/ft. 26' x 26'

Site Identifier(s) from Assessors Maps X-2

Acreage of Site / Ground Floor Coverage

Zoning of Proposed Site

Site Location Review (DEP) Required: () Yes () No

Proposed Number of Floors 2

Board of Appeals Action Required: () Yes () No

Total Floor Area

Planning Board Action Required: () Yes () No

Other Comments:

Date Dept. Review Due:

FIRE DEPARTMENT REVIEW

(Date Received)

	ACCESS TO SITE	ACCESS TO STRUCTURES	SUFFICIENT VEHICLE TURNING ROOM	SAFETY HAZARDS	HYDRANTS	SIAMENSE CONNECTIONS	SUFFICIENCY OF WATER SUPPLY	OTHER	
APPROVED									
APPROVED CONDITIONALLY									CONDITIONS SPECIFIED BELOW
DISAPPROVED									REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

SIGNATURE OF REVIEWING STAFF/DATE

FIRE DEPARTMENT COPY

CITY OF PORTLAND, MAINE
SITE PLAN REVIEW
 Processing Form

459

Applicant: Microsoft Bank + Strength, Ltd. Date: 2/11/85

Mailing Address: 1000 Broadway, Suite 1000 Address of Proposed Site: 1000 Broadway, Suite 1000

Proposed Use of Site: Office Site Identifier(s) from Assessors Maps: 1000 Broadway, Suite 1000

Acres of Site: 0.01 Ground Floor Coverage: 1000 sq ft Zoning of Proposed Site: Office

Site Location Review (DEP) Required: () Yes (X) No Proposed Number of Floors: 1

Board of Appeals Action Required: () Yes (X) No Total Floor Area: 1000 sq ft

Planning Board Action Required: () Yes (X) No

Other Comments: _____

Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received)

	TRAFFIC SIGNALIZATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER		
APPROVED	X	X	NA	NA	NA	NA	X	NA	X	OK	X	OK	NA	NA		CONDITIONS SPECIFIED BELOW	
APPROVED CONDITIONALLY																	REASONS SPECIFIED BELOW
DISAPPROVED																	REASONS SPECIFIED BELOW

REASONS: NA: Not Applicable

(Attach Separate Sheet if Necessary)

Robert J. Roy 2/12/85
 SIGNATURE OF REVIEWING STAFF / DATE

PUBLIC WORKS DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Applicant: Donald L. [unclear] Date: Feb. 4, 1985

Mailing Address: [unclear] Address of Proposed Site: [unclear]

Proposed Use of Site: [unclear] Site Identifier(s) from Assessors Maps: [unclear]

Acreage of Site / Ground Floor Coverage: 26' x 26' Zoning of Proposed Site: [unclear]

Site Location Review (DEF) required: () Yes () No Proposed Number of Floors: [unclear]

Board of Appeals Action Required: () Yes () No Total Floor Area: [unclear]

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

PLANNING DEPARTMENT REVIEW

(Date Received) _____

- Major Development — Requires Planning Board Approval: Review Initiated
- Minor Development — Staff Review Below

	LOADING AREA	PARKING	CIRCULATION PATTERNS	ACCESS	PEDESTRIAN WALKWAYS	SCREENING	LANDSCAPING	SPACE & BULK OF STRUCTURES	LIGHTING	CONFLICT WITH CITY PROJECTS	FINANCIAL CAPACITY	CHANGE IN SITE PLAN
APPROVED	NA	✓	✓	✓	✓	NA	NA	✓	NA	NA		
APPROVED CONDITIONALLY												CONDITIONS SPECIFIED BELOW
DISAPPROVED												REASONS SPECIFIED BELOW

REASONS: _____

(Attach Separate Sheet if Necessary)

B. [unclear] 2/12/85

SIGNATURE OF REVIEWING STAFF/DATE

PLANNING DEPARTMENT COPY



APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION 01.23

FEB 25 1985

ZONING LOCATION PORTLAND, MAINE Oct. 21, 1984

CITY OF PORTLAND

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

LOCATION 96-C-39 Beach Avenue, Long Island

Fire District #1 #2
Telephone 1-617-4385612

1. Owner's name and address: Ronald L. Kanheiser - 3 Mascott Rd.

2. Lessee's name and address:

3. Contractor's name and address: OWNER

Proposed use of building: Cottage

Last use: vacant lot

Material: No. stones Heat Style of roof

Other buildings on same lot: NO

Estimated contractual cost \$ 22,000.00

FIELD INSPECTOR—Mr.

@ 775-545'

To construct 26' x 26' cottage, as per plans.

2-story building - no garage

No. of sheets
No. families
No. families
Roofing
Appeal Fees \$
Basic plan fee 50.00
Late Fee 11-5-84
TOTAL \$125.00

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 Is any electrical work involved in this work? YES
Is connection to be made to public sewer? yes If not, what is proposed for sewer? SEPTIC SYSTEM
Has septic tank notice been sent? YES Form notice sent? YES
Height average grade to top of plate: 13' Height average grade to highest point of roof: 25'
Size, front: 26' depth: 26' No. stories: 2 solid or filled land? solid earth or rock? both
Material of foundation: concrete and tubes Thickness, top: 9" bottom: cellar: NO
Kind of roof: patch hip roof Rise per foot: 6/12 Roof covering: asphalt shingle
No. of chimneys: 1 Material of chimneys: of lining: Kind of heat: fuel wood
Framing Lumber—Kind: SPF40F Dressed or full size? dressed Corner posts: 6x6 pressure treated
Size Girder: 4x6 Columns under girders: NO Size: Max. on centers:
Studs (outside walls and carrying partitions): 2x-16" O. C. Bidding in every floor and flat roof span over 8 feet.
Joists and rafters: 1st floor: 2x6 2nd: 2x6 3rd: roof: 2x6
On centers: 1st floor: 16" 2nd: 16" 3rd: roof: 16"
Maximum span: 1st floor: 6' 2nd: 3rd: roof: 12'
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:
BUILDING CODE:
Fire Dept.:
Health Dept.:
Others:

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

Signature of Applicant: *Ronald L. Kanheiser* Phone # 4-7-1612

Type Name of above: Ronald L. Kanheiser 1 2 3 4 XX

Other
and Address

FIELD INSPECTOR'S COPY

APPLICANT'S COPY

OFFICE FILE COPY



APPLICATION FOR PERMIT
DEPARTMENT OF BUILDING INSPECTIONS SERVICES
ELECTRICAL INSTALLATIONS

Date October 23, 1985
 Receipt and Permit number 05131

To the CHIEF ELECTRICAL INSPECTOR, Portland, Maine:

The undersigned hereby applies for a permit to make electrical installations in accordance with the laws of Maine, the Portland Electrical Ordinance, the National Electrical Code and the following specifications:

LOCATION OF WORK: Lot #96-C-39, Beach Avenue, Long Island
 OWNER'S NAME: Ronald Kannheiser ADDRESS: SAME

OUTLETS:	Receptacles <u>X</u> Switches <u>X</u> Plugmold _____ ft. TOTAL 1-30	FEES	
FIXTURES: (number of)	Incandescent <u>X</u> Fluorescent _____ (not strip) TOTAL 1-10		3.00
	Strip Fluorescent _____ ft.		3.00
SERVICES:	Overhead <u>X</u> Underground _____ Temporary _____ TOTAL amperes 200		3.00
METERS: (number of)	<u>1</u>		.50
MOTORS: (number of)	Fractional _____ 1 HP or over _____		
RESIDENTIAL HEATING:	Oil or Gas (number of units) _____ Electric (number of rooms) <u>4</u>		4.00
COMMERCIAL OR INDUSTRIAL HEATING:	Oil or Gas (by a main boiler) _____ Oil or Gas (by separate units) _____ Electric Under 20 kws _____ Over 20 kws _____		
APPLIANCES: (number of)	Ranges <u>1</u> Water Heaters <u>1</u> Cook Tops _____ Disposals _____ Wall Ovens _____ Dishwashers _____ Dryers _____ Compactors _____ Fans _____ Others (denote) _____		
	TOTAL <u>2</u>		3.00
MISCELLANEOUS: (number of)	Branch Panels _____ Transformers _____ Air Conditioners Central Unit _____ Separate Units (windows) _____ Signs 20 sq. ft. and under _____ Over 20 sq. ft. _____ Swimming Pools Above Ground _____ In Ground _____ Fire/Burglar Alarms Residential _____ Commercial _____ Heavy Duty Outlets, 220 Volt (such as welders) 30 amps and under _____ over 30 amps _____ Circus, Fairs, etc. _____ Alterations to wires _____ Repairs after fire _____ Emergency Lights, battery _____ Emergency Generators _____		

FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT INSTALLATION FEE DUE: _____
 FOR REMOVAL OF A "STOP ORDER" (304-16.b) DOUBLE FEE DUE: _____
 TOTAL AMOUNT DUE: 16.50

INSPECTION: Will be ready on 10/23, 1985 or Will Call _____
 CONTRACTOR'S NAME: Seacoast Electric
 ADDRESS: Long Island, Maine
 TEL: 774-6179
 MASTER LICENSE NO: X 03088 SIGNATURE OF CONTRACTOR: Harry G. Papelee
 LIMITED LICENSE NO: _____

INSPECTOR'S COPY — WHITE
 OFFICE COPY — CANARY
 CONTRACTOR'S COPY — GREEN

ELECTRICAL INSTALLATIONS

Permit Number 05131

Location 20796 Cecelia Blvd. No.

Owner CR Home Depot

Date of Permit 10-13-85

Final Inspection 5/17/87

By Inspector [Signature]

Permit Application Register Page No. 70

INSPECTIONS. Service 200 Amp by [Signature]
Service called in By Contractor
Closing-in _____ by _____

PROGRESS INSPECTIONS: 1/5/86 _____
5/17/87 _____

DATE:	REMARKS:
<u>1/5/86</u>	<u>Final inspection ok but still have to</u>
<u>5/17/87</u>	<u>check ground fault outlets</u>

[Handwritten signature]
[Handwritten signature]

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health Services
Division of Health Engineering
(207) 289-3526

PROPERTY ADDRESS

Town or Plantation: **PORTLAND - LONG ISLAND**

Street: **BEACH AVE**

Subdiv/Lot #: **TAX MAP 96 BLOCK C LOT 31**

PROPERTY OWNERS NAME

Last: **KANNHEISER** First: **RONALD**

Applicant Name: **RONALD KANNHEISER**

Address: **3 WESCOTT ROAD**
STONEHAM MASSACHUSETTS

PORTLAND

Date Permit Issued: **9/25/84**

Permit # **715** APPLICANTS COPY

Local Plumbing Inspector Signature: *Ronald J. Goodwin*

Local Plumbing Inspector Signature: *AA*

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

Owner/Applicant Statement

I hereby state that the information furnished to the best of my knowledge is true and correct and that I am the owner of the property and am applying for a permit.

Ronald J. Kannheiser
Signature of Owner/Applicant

Caution: Inspection Required

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

Date Approved: **NOV 5 1984**

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

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

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
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INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+2000 GPD)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER _____ SPECIFY _____

TYPE OF WATER SUPPLY:
WELL

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

SIZE OF PROPERTY: **117,840 S.F.** **ZONING:** **R-3 RESIDENTIAL**

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: **750** GALS.

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, BATHING, EMPLOYEES, WATER RECORDS ETC.)

- 2 BEDROOM CONSERVATIVE - LOW VOLUME TOILET

DISPOSAL AREA TYPE & SIZE

1. **750** 54 Ft.
2. CHAMBER _____ 54 Ft.
- REGULAR H-20
- TRENCH _____ Unsur FL.
- OTHER: _____

DESIGN FLOW: **270** (GALLON/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: **G** CONDITION: **C**

DEPTH TO LIGHTING FACTOR: **38**

SEPARATIONS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM LARGE
- LARGE
- EXTRA LARGE

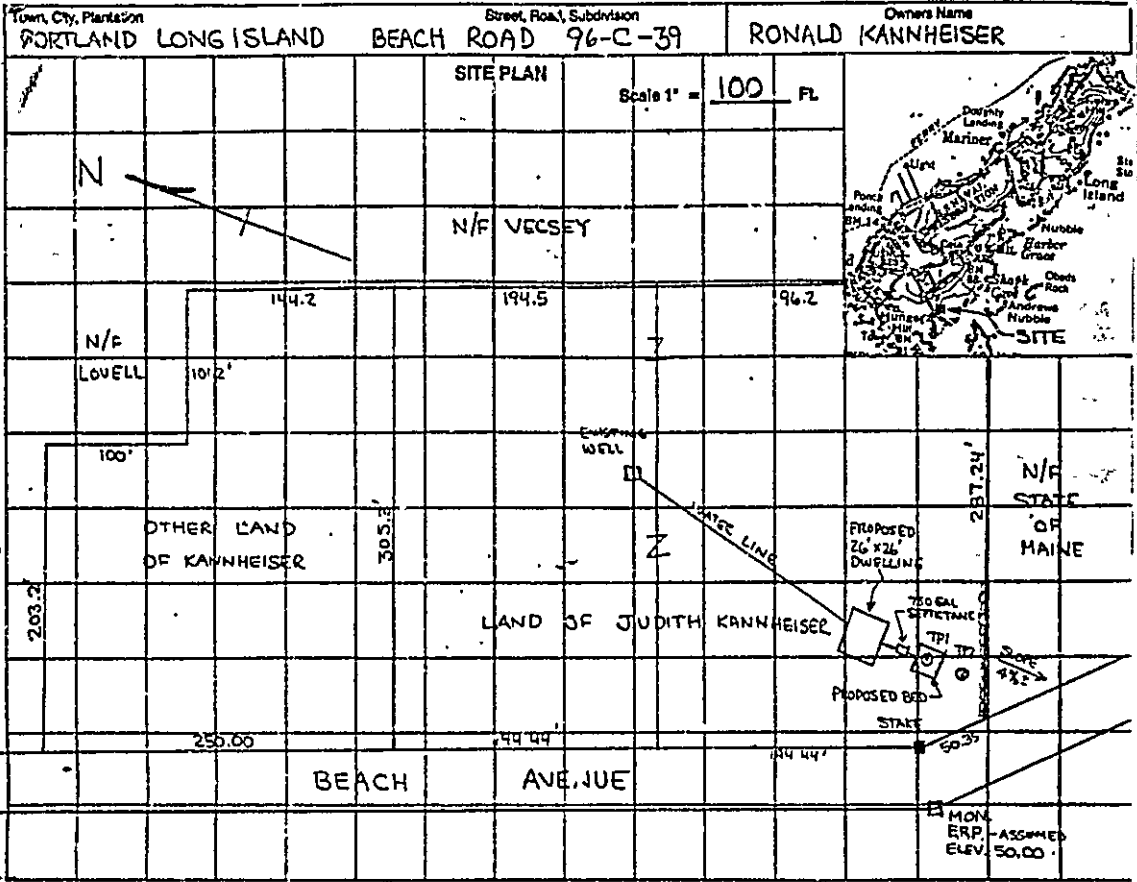
SITE EVALUATOR STATEMENT

On **September 23, 1984** (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.

William B. Goodwin
Site Evaluator or Professional Engineer's Signature

000319814 **9/26/84**
Local Plumbing Inspector Signature or Local Site Evaluator Signature under a Local Order

Page 1 of 2
HE-210 Nov. 83



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)																																																																																							
Observation Hole <u>1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		Observation Hole <u>2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring																																																																																					
2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil		2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil																																																																																					
Texture	Consistency	Color	Mottling																																																																																				
<table border="1"> <tr><td>0</td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td>LIGHT BROWN</td><td></td></tr> <tr><td>10</td><td></td><td>YELLOW BROWN</td><td></td></tr> <tr><td>15</td><td></td><td></td><td></td></tr> <tr><td>20</td><td>SANDY GRAVEL</td><td>YELLOW</td><td>NONE</td></tr> <tr><td>25</td><td></td><td></td><td></td></tr> <tr><td>30</td><td></td><td></td><td></td></tr> <tr><td>35</td><td>GRAVEL</td><td>YELLOW WITH RED MOTTLES</td><td>FEW</td></tr> <tr><td>40</td><td></td><td></td><td>COMMON</td></tr> <tr><td>45</td><td></td><td></td><td>FEW</td></tr> <tr><td>50</td><td></td><td></td><td>COMMON</td></tr> <tr><td>55</td><td></td><td></td><td>FEW</td></tr> <tr><td>60</td><td></td><td></td><td>COMMON</td></tr> <tr><td>65</td><td></td><td></td><td>FEW</td></tr> <tr><td>70</td><td></td><td></td><td>COMMON</td></tr> <tr><td>75</td><td></td><td></td><td>FEW</td></tr> <tr><td>80</td><td></td><td></td><td>COMMON</td></tr> <tr><td>85</td><td></td><td></td><td>FEW</td></tr> <tr><td>90</td><td></td><td></td><td>COMMON</td></tr> <tr><td>95</td><td></td><td></td><td>FEW</td></tr> <tr><td>100</td><td></td><td></td><td>COMMON</td></tr> </table>				0				5		LIGHT BROWN		10		YELLOW BROWN		15				20	SANDY GRAVEL	YELLOW	NONE	25				30				35	GRAVEL	YELLOW WITH RED MOTTLES	FEW	40			COMMON	45			FEW	50			COMMON	55			FEW	60			COMMON	65			FEW	70			COMMON	75			FEW	80			COMMON	85			FEW	90			COMMON	95			FEW	100			COMMON
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Limiting Factor <u>27</u>		<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock																																																																																					

William B. Goodwin 0003/4814 9/26/84
 Site Evaluator or Professional Engineer's Signature Date
 SLE/PEP Page 2 of 3 HNE-200 Rev. 4/83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

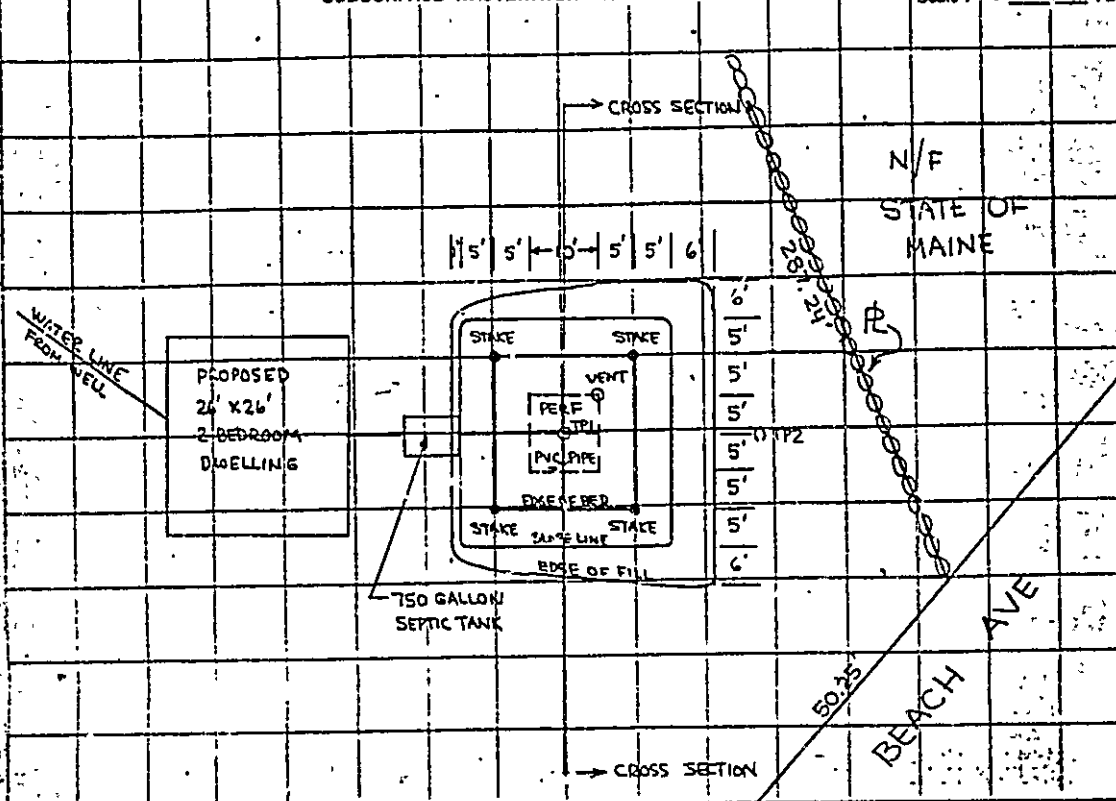
Town, City, Plantation
PORTLAND LONG ISLAND

Street, Road, Subdivision
BEACH ROAD 96-C-39

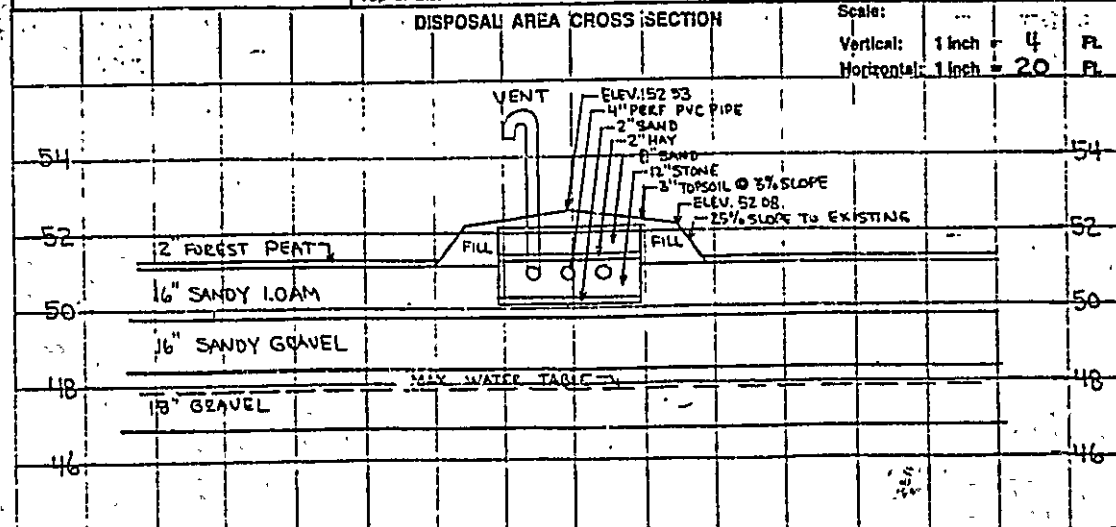
Owners Name
RONALD KANNHEISER

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' PL.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>17</u>	Reference Elevation is <u>50.00</u>	TOP OF GRANITE MONUMENT ON SOUTHWEST SIDE OF BEACH ROAD
Depth of Fill (Downslope) <u>17</u>	Bottom of Disposal Area <u>50.08</u>	
	Top of Distribution Lines or Chambers <u>51.16</u>	



William B. Goodwin
 Site Evaluator or Professional Engineer's Signature

0003/4614
 SE #1 PE #

9/26/84
 Date

Page 3 of 3
 HRE-200 Rev. 4/

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

PORTLAND LONG ISLAND

Street, Road, Subdivision

BEACH ROAD 96-C-39

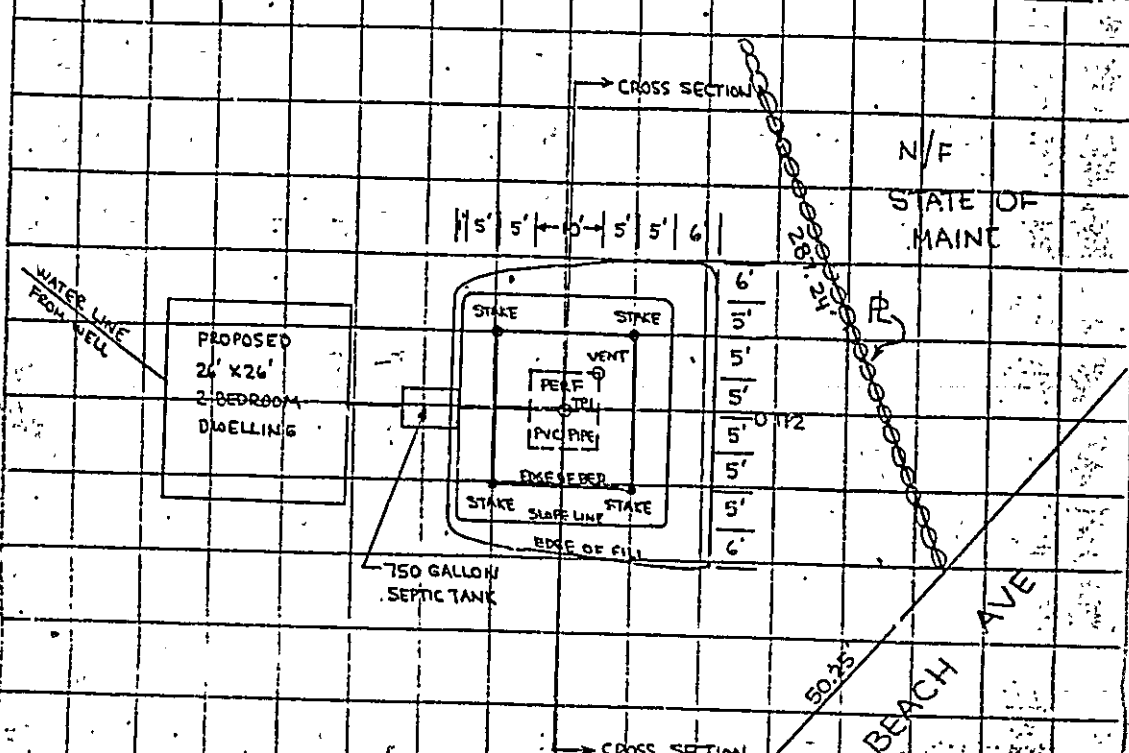
Division of Health Engineering

Owner's Name

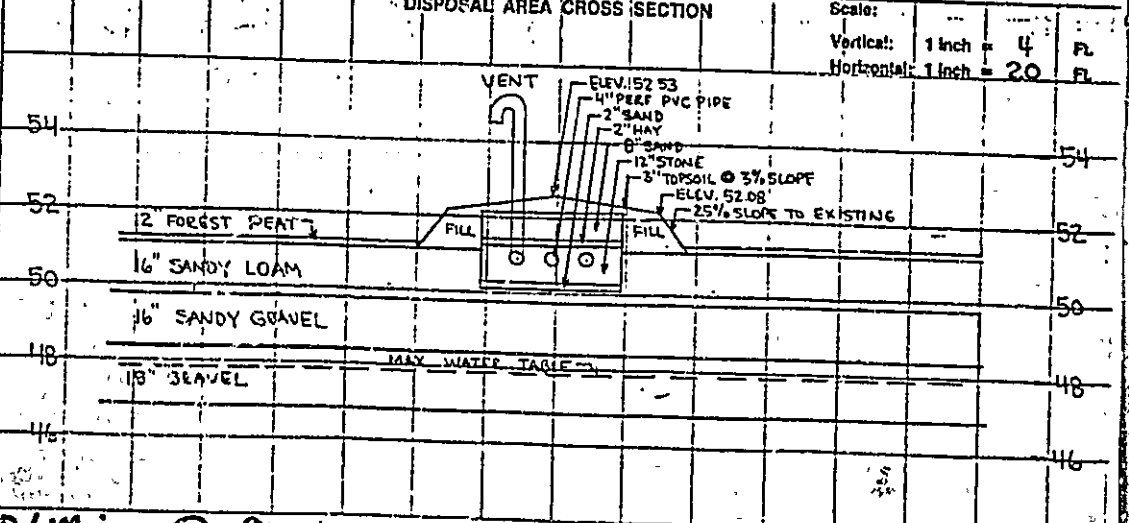
RONALD KANNHEISER

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' (1)



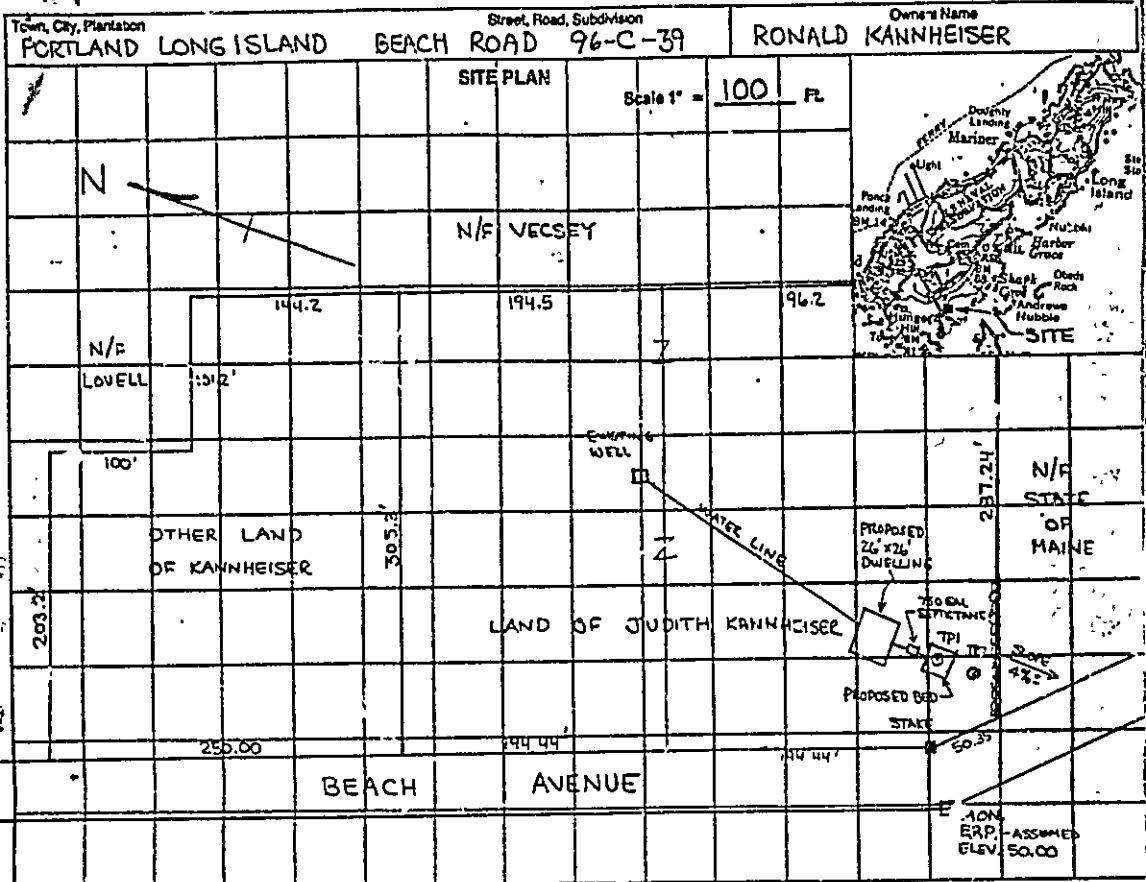
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	3'	Reference Elevation Is	50.00	TOP OF GRANITE MONUMENT ON SOUTHWEST SIDE OF BEACH ROAD	
Depth of Fill (Downslope)	17'	Bottom of Disposal Area	50.08		
		Top of Distribution Lines or Chambers	51.16		



William B. Gaudin
Site Evaluator or Professional Engineer's Signature

0003/4814
SE # PE #

9/26/84
Date



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)				
Observation Hole <u>1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		Observation Hole <u>2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring		
2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil		2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil		
Texture	Consistency	Color	Mottling	
DEPTH BELOW MINERAL SOIL SURFACE (inches)				
0-6		LIGHT BROWN		
6-10		YELLOW BROWN		
10-20		YELLOW	NONE	
20-30	LOOSE	YELLOW		
30-40		YELLOW WITH RED MOTTLES	FEW COMMON	
40-50		YELLOW WITH RED MOTTLES	FEW COMMON	
50-60		YELLOW WITH RED MOTTLES	FEW COMMON	
60-70		YELLOW WITH RED MOTTLES	FEW COMMON	
70-80		YELLOW WITH RED MOTTLES	FEW COMMON	
80-90		YELLOW WITH RED MOTTLES	FEW COMMON	
90-100		YELLOW WITH RED MOTTLES	FEW COMMON	
100-110		YELLOW WITH RED MOTTLES	FEW COMMON	
110-120		YELLOW WITH RED MOTTLES	FEW COMMON	
120-130		YELLOW WITH RED MOTTLES	FEW COMMON	
130-140		YELLOW WITH RED MOTTLES	FEW COMMON	
140-150		YELLOW WITH RED MOTTLES	FEW COMMON	
150-160		YELLOW WITH RED MOTTLES	FEW COMMON	
160-170		YELLOW WITH RED MOTTLES	FEW COMMON	
170-180		YELLOW WITH RED MOTTLES	FEW COMMON	
180-190		YELLOW WITH RED MOTTLES	FEW COMMON	
190-200		YELLOW WITH RED MOTTLES	FEW COMMON	
200-210		YELLOW WITH RED MOTTLES	FEW COMMON	
210-220		YELLOW WITH RED MOTTLES	FEW COMMON	
220-230		YELLOW WITH RED MOTTLES	FEW COMMON	
230-240		YELLOW WITH RED MOTTLES	FEW COMMON	
240-250		YELLOW WITH RED MOTTLES	FEW COMMON	
250-260		YELLOW WITH RED MOTTLES	FEW COMMON	
260-270		YELLOW WITH RED MOTTLES	FEW COMMON	
270-280		YELLOW WITH RED MOTTLES	FEW COMMON	
280-290		YELLOW WITH RED MOTTLES	FEW COMMON	
290-300		YELLOW WITH RED MOTTLES	FEW COMMON	
300-310		YELLOW WITH RED MOTTLES	FEW COMMON	
310-320		YELLOW WITH RED MOTTLES	FEW COMMON	
320-330		YELLOW WITH RED MOTTLES	FEW COMMON	
330-340		YELLOW WITH RED MOTTLES	FEW COMMON	
340-350		YELLOW WITH RED MOTTLES	FEW COMMON	
350-360		YELLOW WITH RED MOTTLES	FEW COMMON	
360-370		YELLOW WITH RED MOTTLES	FEW COMMON	
370-380		YELLOW WITH RED MOTTLES	FEW COMMON	
380-390		YELLOW WITH RED MOTTLES	FEW COMMON	
390-400		YELLOW WITH RED MOTTLES	FEW COMMON	
400-410		YELLOW WITH RED MOTTLES	FEW COMMON	
410-420		YELLOW WITH RED MOTTLES	FEW COMMON	
420-430		YELLOW WITH RED MOTTLES	FEW COMMON	
430-440		YELLOW WITH RED MOTTLES	FEW COMMON	
440-450		YELLOW WITH RED MOTTLES	FEW COMMON	
450-460		YELLOW WITH RED MOTTLES	FEW COMMON	
460-470		YELLOW WITH RED MOTTLES	FEW COMMON	
470-480		YELLOW WITH RED MOTTLES	FEW COMMON	
480-490		YELLOW WITH RED MOTTLES	FEW COMMON	
490-500		YELLOW WITH RED MOTTLES	FEW COMMON	
500-510		YELLOW WITH RED MOTTLES	FEW COMMON	
510-520		YELLOW WITH RED MOTTLES	FEW COMMON	
520-530		YELLOW WITH RED MOTTLES	FEW COMMON	
530-540		YELLOW WITH RED MOTTLES	FEW COMMON	
540-550		YELLOW WITH RED MOTTLES	FEW COMMON	
550-560		YELLOW WITH RED MOTTLES	FEW COMMON	
560-570		YELLOW WITH RED MOTTLES	FEW COMMON	
570-580		YELLOW WITH RED MOTTLES	FEW COMMON	
580-590		YELLOW WITH RED MOTTLES	FEW COMMON	
590-600		YELLOW WITH RED MOTTLES	FEW COMMON	
600-610		YELLOW WITH RED MOTTLES	FEW COMMON	
610-620		YELLOW WITH RED MOTTLES	FEW COMMON	
620-630		YELLOW WITH RED MOTTLES	FEW COMMON	
630-640		YELLOW WITH RED MOTTLES	FEW COMMON	
640-650		YELLOW WITH RED MOTTLES	FEW COMMON	
650-660		YELLOW WITH RED MOTTLES	FEW COMMON	
660-670		YELLOW WITH RED MOTTLES	FEW COMMON	
670-680		YELLOW WITH RED MOTTLES	FEW COMMON	
680-690		YELLOW WITH RED MOTTLES	FEW COMMON	
690-700		YELLOW WITH RED MOTTLES	FEW COMMON	
700-710		YELLOW WITH RED MOTTLES	FEW COMMON	
710-720		YELLOW WITH RED MOTTLES	FEW COMMON	
720-730		YELLOW WITH RED MOTTLES	FEW COMMON	
730-740		YELLOW WITH RED MOTTLES	FEW COMMON	
740-750		YELLOW WITH RED MOTTLES	FEW COMMON	
750-760		YELLOW WITH RED MOTTLES	FEW COMMON	
760-770		YELLOW WITH RED MOTTLES	FEW COMMON	
770-780		YELLOW WITH RED MOTTLES	FEW COMMON	
780-790		YELLOW WITH RED MOTTLES	FEW COMMON	
790-800		YELLOW WITH RED MOTTLES	FEW COMMON	
800-810		YELLOW WITH RED MOTTLES	FEW COMMON	
810-820		YELLOW WITH RED MOTTLES	FEW COMMON	
820-830		YELLOW WITH RED MOTTLES	FEW COMMON	
830-840		YELLOW WITH RED MOTTLES	FEW COMMON	
840-850		YELLOW WITH RED MOTTLES	FEW COMMON	
850-860		YELLOW WITH RED MOTTLES	FEW COMMON	
860-870		YELLOW WITH RED MOTTLES	FEW COMMON	
870-880		YELLOW WITH RED MOTTLES	FEW COMMON	
880-890		YELLOW WITH RED MOTTLES	FEW COMMON	
890-900		YELLOW WITH RED MOTTLES	FEW COMMON	
900-910		YELLOW WITH RED MOTTLES	FEW COMMON	
910-920		YELLOW WITH RED MOTTLES	FEW COMMON	
920-930		YELLOW WITH RED MOTTLES	FEW COMMON	
930-940		YELLOW WITH RED MOTTLES	FEW COMMON	
940-950		YELLOW WITH RED MOTTLES	FEW COMMON	
950-960		YELLOW WITH RED MOTTLES	FEW COMMON	
960-970		YELLOW WITH RED MOTTLES	FEW COMMON	
970-980		YELLOW WITH RED MOTTLES	FEW COMMON	
980-990		YELLOW WITH RED MOTTLES	FEW COMMON	
990-1000		YELLOW WITH RED MOTTLES	FEW COMMON	
Soil	Classification	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Perched Layer <input type="checkbox"/> Buried
6	C	4%	38	
Soil	Classification	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Perched Layer <input type="checkbox"/> Buried
6	C	4%	27	

William B. Goodwin 0003/4814 9/25/84
 Evaluator or Professional Engineer's Signature SEP/PE# Date



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION

96-C-39 Beach Ave. Long Isl.

Issued to Ronald L Kannheiser

Date of Issue NOV. 6, 1986

This is to certify that the building, premises, or part thereof, at the above location, built—altered—changed as to use under Building Permit No 85-123, has had final inspection, has been found to conform substantially to requirements of Zoning Ordinance and Building Code of the City, and is hereby approved for occupancy or use, limited or otherwise, as indicated below.

PORTION OF BUILDING OR PREMISES

APPROVED OCCUPANCY

Limiting Conditions: **Entire**

**Cottage—single family
no garage**

This certificate supersedes
certificate issued

Approved:

11-5-86

(Date)

William Collette
Inspector

R. J. Allen
Inspector of Buildings

Notice! This certificate identifies lawful use of building or premises, and ought to be transferred from owner to owner when property changes hands. Copy will be furnished to owner or lessee for one dollar.

Applicant: *Ronald L. Kammbeiser* Date: *Feb. 21, 1985*
Address: *3 Wescott Rd, Stoneham, Mass.*
Assessors No.: *96-C-39 Beach ave. Long Island*

CHECK-LIST AGAINST ZONING ORDINANCE

Date -
Zone Location - *R-3*
Interior or corner lot -
Use - *single family seasonal dwelling*
Sewage Disposal - *septic disposal*
Rear Yards - *200'*
Side Yards - *75' + 8'* -
Front Yards - *72'*
Projections -
Height - *2 story*
Lot Area - *59,380[±]'*
Building Area - *676 sq. ft.*
Area per Family - *20,000[±]*
Width of Lot - *194.44'*
Lot Frontage - *194.44'*
Off-street Parking - *0, R,*
Loading Bays - *N/A.*
Site Plan -
Shoreland Zoning -
Flood Plains -

*subject to approval
of MHE 200 by the
Plumbing Inspector*

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	PORTLAND - LONG ISLAND
Street	BEACH AVE
Sub. Section/Lot #	TAY MAP 96 BLOCK C LOT 39
OWNER'S NAME	KANNHEISER JALD
Applicant Name:	HEISER
Mailing Address of Owner/Applicant (if Different)	317 ROAD MASSACHUSETTS

PORTLAND PERMIT # 715 APPLICATION # 40

Date Permit Issued: 09/25/84

Local Plumbing Inspector Signature: *William B. Goodwin*

L.P.I. # 12131

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

Owner's Statement

I certify that the information furnished herein is true to the best of my knowledge and understanding and I understand that any false information is reason for the Local Plumbing Inspector to deny a Permit.

Ronald A. Kannheiser
Signature of Owner/Applicant

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: _____ Date Approved: _____

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <p>1. <input checked="" type="checkbox"/> NEW SYSTEM</p> <p>2. <input type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> SEASONAL CONVERSION</p> <p>5. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p>THIS APPLICATION REQUIRES:</p> <p>1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p><input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>3. <input type="checkbox"/> Requires only Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval</p>	<p>INSTALLATION IS COMPLETE SYSTEM</p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+2700 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <p>1. <input checked="" type="checkbox"/> BED 3. <input type="checkbox"/> TRENCH</p> <p>2. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____</p>	<p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MULTIFAMILY HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER _____ SPECIFY _____</p>	<p>TYPE OF WATER SUPPLY WELL</p>
<p>SIZE OF PROPERTY 117,840 SF</p> <p>ZONING R-5 RESIDENTIAL</p>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: 750 GALS.</p>	<p>WATER CONSERVATION</p> <p>1. <input type="checkbox"/> NONE</p> <p>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY _____</p>	<p>PUMPING</p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAX. 5" REQUIRED (DEPTH OF TREATMENT TANK LOCATED AT ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED</p> <p>DOSE: _____ GALS</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p>- 2 BEDROOM CONSERVATIVE - LOW VOLUME TOILET</p> <p>DESIGN FLOW: 270 (GALLONS/DAY)</p>
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <p>PROFILE: 0 CONDITION: C</p> <p>DEPTH TO LIMITING FACTOR: 38</p>	<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <p>1. <input checked="" type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input type="checkbox"/> MEDIUM LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRALARGE</p>	<p>DISPOSAL AREA TYPE/SIZE</p> <p>1. <input checked="" type="checkbox"/> BED 400 Sq. Ft.</p> <p>2. <input type="checkbox"/> CHAMBER _____ Sq. Ft.</p> <p><input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	

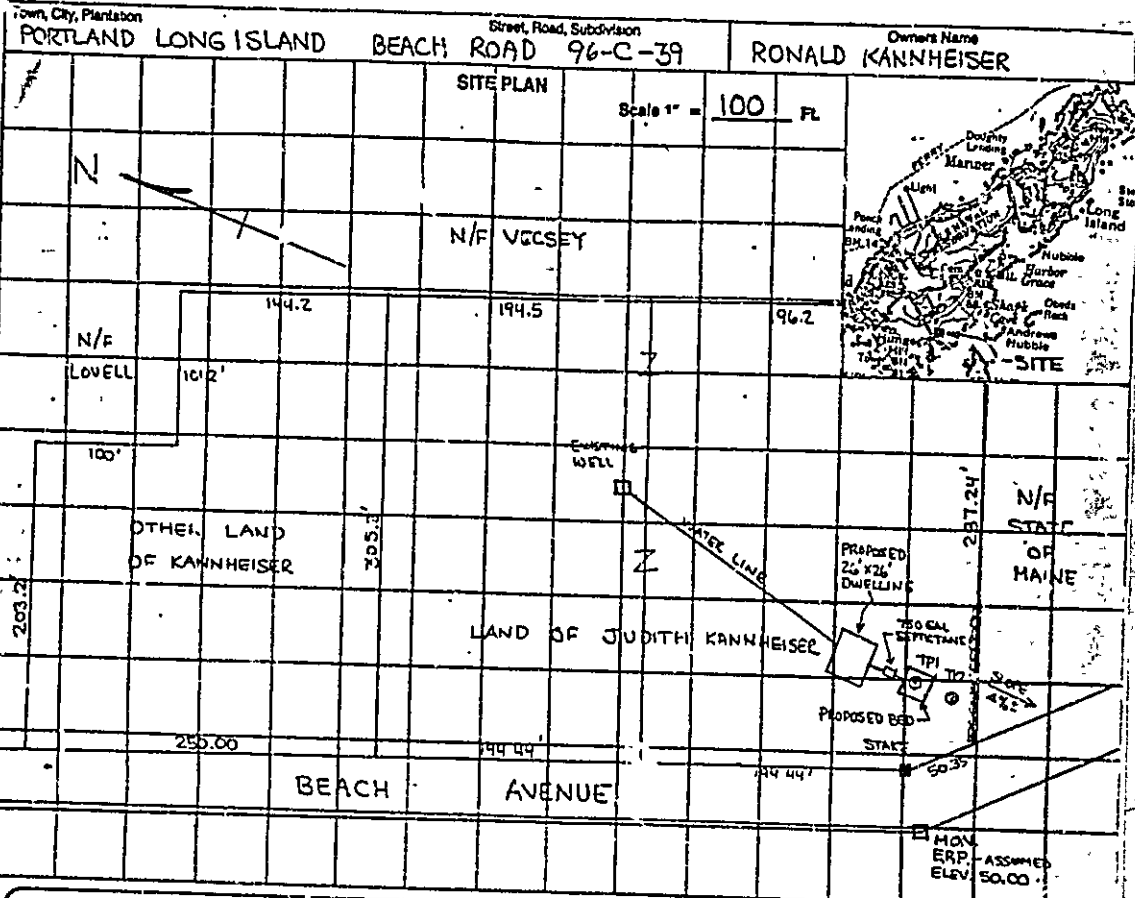
SITE EVALUATOR STATEMENT

SITE EVALUATION WAIVED BY LOCAL OPTION

On September 23, 1984 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system proposed is in accordance with the Subsurface Wastewater Disposal Rules.

William B. Goodwin 0003/4814 9/26/84
Site Evaluator or Professional Engineer's Signature SE# IPE# Date

Page 1 of 3
HHE-200 Rev. 4/83



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

Observation Hole 2 Test Pit Boring
 2" FOREST PEAT * Depth of Organic Horizon Above Mineral Soil

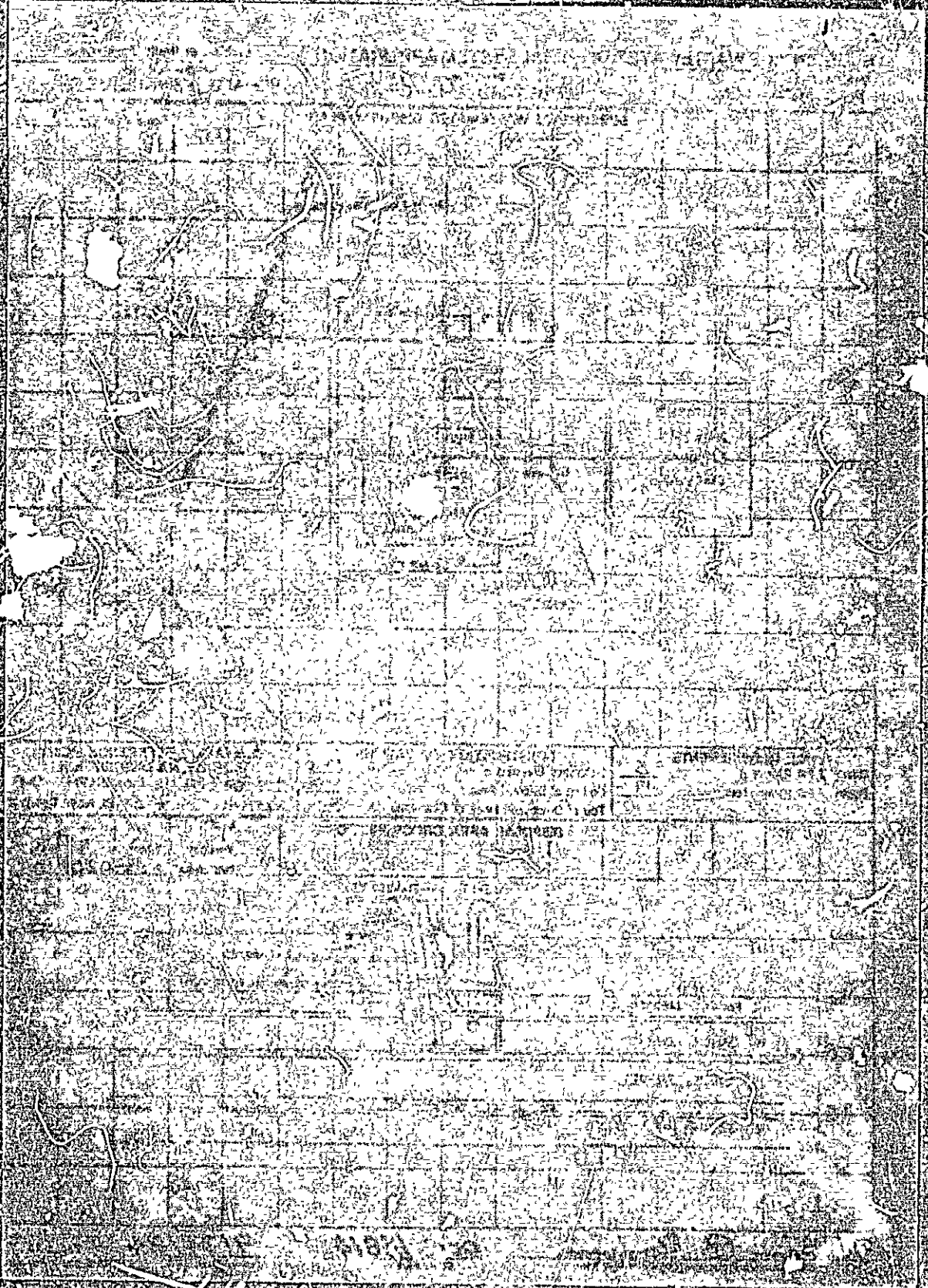
Texture	Consistency	Color	Mottling
SANDY LOAM		LIGHT BROWN	
		YELLOW BROWN	
SANDY GRAVEL	LOOSE	YELLOW	NONE
GRAVEL		YELLOW WITH RED MOTTLES	FEW COMMON FEW
			FEW

Soil Classification: **C** Slope: **4%** Limiting Factor: **38**

Soil **6** Classification **C** Slope **4%** Limiting Factor **27**

William B. Goodwin 0003/4814 9/26/84
 Site Evaluator or Professional Engineer's Signature S.E./P.E. Date

Page 2 of 3
 HNE-200 Rev. 4/83



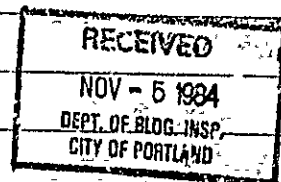
Dear Mrs. Rinaldi

This is my check for the site plan review. If there is anything else I can do to expedite my building permit please contact me

Thank you
Ronald A. Kammhiser
3 Westcott Rd.
Stoneham, Mass. 02180
1-617-438-5612

96-C-39

Beach Sub.
King Island



SUBSURFACE DISPOSAL SYSTEM APPLICATION

Town or Plantation	POB	ISLAND	PORTLAND	PERMIT #	715 APPLICANTS COPY
Street	BENH A.		Date Permit Issued	9/18/84	40
Subdivision Lot #	TAX MAP 96 BLOCK C LOT 39		Local Plumbing Inspector Signature	<i>Amold B. Goodwin</i>	L.P.I. # 12131
PROPERTY OWNERS NAME			FEE <input type="checkbox"/> Double Fee Charged		
KANNHEISER RONALD			THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.		
Applicant Name: RONALD KANNHEISER			Local Plumbing Inspector Signature		
Mailing Address of Owner/Applicant (if Different): 3 WESCOTT ROAD, STONEHAM MASSACHUSETTS			Date Approved		

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.
Ronald A. Kannheiser
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.
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION		
THIS APPLICATION IS FOR: 1. <input checked="" type="checkbox"/> NEW SYSTEM 2. <input type="checkbox"/> REPLACEMENT SYSTEM 3. <input type="checkbox"/> EXPANDED SYSTEM 4. <input type="checkbox"/> SEASONAL CONVERSION 5. <input type="checkbox"/> EXPERIMENTAL SYSTEM	THIS APPLICATION REQUIRES: 1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED 2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form 3. <input type="checkbox"/> Requires only Local Plumbing Inspector Approval 4. <input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval	INSTALLATION IS COMPLETE SYSTEM 1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM 2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet) 3. <input type="checkbox"/> ENGINEERED (> 2000 gpd) INDIVIDUALLY INSTALLED COMPONENTS: 4. <input type="checkbox"/> TREATMENT TANK (ONLY) 5. <input type="checkbox"/> HOLDING TANK 6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY) 7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY) 8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY) 9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM
IF REPLACEMENT SYSTEM: YEAR FAILING SYSTEM INSTALLED _____ THE FAILING SYSTEM IS: 1. <input checked="" type="checkbox"/> BED 2. <input type="checkbox"/> TRENCH 3. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____	DISPOSAL SYSTEM TO SERVE: 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER _____ SPECIFY _____	TYPE OF WATER SUPPLY WELL
SIZE OF PROPERTY 117,840 SF.	ZONING R-3 RESIDENTIAL	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK 1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> AEROBIC SIZE: 750 GALS	WATER CONSERVATION 1. <input type="checkbox"/> NONE 2. <input checked="" type="checkbox"/> LOW VOLUME TOILET 3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM 4. <input type="checkbox"/> ALTERNATIVE TOILET SPECIFY _____	PUMPING 1. <input checked="" type="checkbox"/> NOT REQUIRED 2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION) 3. <input type="checkbox"/> REQUIRED DOSE: _____ GALS	CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.) -2 BEDROOM CONSERVATIVE -LOW VOLUME TOILET DESIGN FLOW: 270 (GALLONS/DAY)
SOIL CONDITIONS USED FOR DESIGN PURPOSES PROFILE: 6 CONDITION: C DEPTH TO LIMITING FACTOR: 38	SIZE RATINGS USED FOR DESIGN PURPOSES 1. <input checked="" type="checkbox"/> SMALL 2. <input type="checkbox"/> MEDIUM 3. <input type="checkbox"/> MEDIUM LARGE 4. <input type="checkbox"/> LARGE 5. <input type="checkbox"/> EXTRALARGE	DISPOSAL AREA TYPE/SIZE 1. <input checked="" type="checkbox"/> BED 400 Sq. Ft. 2. <input type="checkbox"/> CHAMBER _____ Sq. Ft. <input type="checkbox"/> REGULAR <input type="checkbox"/> H-20 3. <input type="checkbox"/> TRENCH _____ Linear Ft. 4. <input type="checkbox"/> OTHER: _____	

SITE EVALUATOR STATEMENT SITE EVALUATION WANTED BY LOCAL OPTION

On September 23, 1984 (date) 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.

William B. Goodwin 0003/4814 9/26/84
 Site Evaluator or Professional Engineer's Signature GE# / PFE# Date

* Local Plumbing Inspectors Operate as a Local Site Evaluation Service under a Local Order



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

November 6, 1984

Mr. Ronald L. Kannheiser
3 Wescott Road
Stoneham, Mass. 02160

Re: 96-C-39 Beach Avenue, Long Island

Dear Mr. Kannheiser:

Received your letter and check for \$50.00 for Site Plan Review on above referenced property. I have applied this to your permit.

Unfortunately, Mr. Ward, our Zoning Enforcement Officer, cannot except the survey that was done by Mr. Lloyd Jones. for the Site Plan Review. He will need a new plan for Site Plan Review with the building and contours shown on the plan. Four copies of this plan will be needed for Fire Dept., Planning Dept., Public Works Dept. and Building Inspection Dept..

If you have any questions in regard to this requirement, please do not hesitate to call, Mr. Malcolm Ward, City Hall, 775-5451, Ext. 347. The best time to reach him would be between the hours of 8:15 to 11:00 a.m. or 1:15 to 5:00 p.m.

Sincerely,

Mrs. Joyce M. Rinaldi

Mrs. Joyce M. Rinaldi
Secretary



CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
INSPECTION SERVICES DIVISION

February 22, 1985

Mr. Ronald L. Kannheiser
3 Wescott Rd.
Stoneham, MA 02180

Re: 96-C-39 Beach Ave., Long Island, Maine

Dear Sir:

Your application to construct a 26' x 26' cottage has been reviewed and a building permit is herewith issued subject to the following requirements.

Site Plan Review Requirements

Inspection Services	Approved	2/4/85 W.J. Turner
Public Works	Approved	2/12/85 Robert Roy
Planning Division	Approved	2/12/85 B. Barhydt

Building Code Requirements

See attached Sections 809.4 and 1716.3.4 of the building code.

If you have any questions on these requirements, please call this office.

Sincerely,

P. Samuel Hoffses
Chief of Inspection Services

APPLICATION FOR PERMIT

PERMIT ISSUED

B.O.C.A. USE GROUP

B.O.C.A. TYPE OF CONSTRUCTION 0, 123

FEB 25 1985

ZONING LOCATION ... R-3 ... PORTLAND, MAINE Oct. 25, 1984

CITY OF PORTLAND

To the CHIEF OF BUILDING & INSPECTION SERVICES, PORTLAND, MAINE

The undersigned hereby applies for 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 Ordinance of the City of Portland with plans and specifications, if any, submitted herewith and the following specifications:

- LOCATION 96-C-39 Beach Avenue, Long Island Fire District #1 [] #2 []
1. Owner's name and address Ronald L. Kanaheiser, 3 Wescott Rd., Stoneham, MA 02180 Telephone 617-4385612
2. Lessee's name and address Telephone
3. Contractor's name and address owner Telephone

Proposed use of building cottage No. of sheets
Last use vacant lot No. families 1
Material No. stories Heat Style of roof Roofing
Other buildings on same lot no
Estimated contractual cost \$ 23,000.00

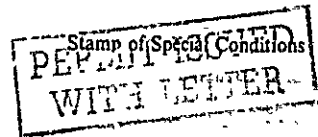
FIELD INSPECTOR - Mr. @ 775-5451

Appeal Fees \$
Site plan fee 50.00
Base fee 11-5-84
Late Fee
TOTAL \$ 125.00

To construct 26' x 26' cottage, as per plans.

2-story building - no garage

end permit to # 1 02180



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 Is any electrical work involved in this work? ... yes
Is connection to be made to public sewer? ... NO If not, what is proposed for sewage? ... septic system
Has septic tank notice been sent? ... yes Form notice sent? ... yes
Height average grade to top of plate 18' Height average grade to highest point of roof 25'
Size, front 26' depth 26' No. stories 2 solid or filled land? solid earth or rock? both
Material of foundation concrete, sonotube thickness, top 9" bottom cellar no
Kind of roof pitch hip roof Rise per foot 6/12 Roof covering asphalt shingle
No. of chimneys 1 metalbestos Material of chimneys of lining asbestos Kind of heat fuel wood
Framing Lumber - Kind spruce Dressed or full size? dressed Corner posts 6x6 pressure treated
Size Girder 4x6 Columns under girders no 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 2x6 2nd 2x8 3rd roof 2x6
On centers: 1st floor 15" 2nd 16" 3rd roof 16"
Maximum span: 1st floor 6' 2nd 3rd roof 12'

IF A GARAGE

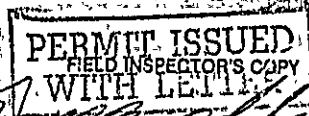
No. cars now accommodated on same lot to be accommodated number commercial cars to be accommodated
Will automobile repairing be done other than minor repairs to cars habitually stored in the proposed building?

APPROVALS BY: DATE MISCELLANEOUS
BUILDING INSPECTION - PLAN EXAMINER Will work require disturbing of any tree on a public street? NO
ZONING: O.K. M.D.T.
BUILDING CODE: 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
Fire Dept.
Health Dept. OK
Others:

Signature of Applicant Ronald L. Kanaheiser Phone # 438-5612

Type Name of above Ronald L. Kanaheiser [] [] [] []

Other and Address



APPLICANT'S COPY OFFICE FILE COPY

NOTES

6-7-85 - Some tubes set
 OK. Checked, leaders, joints,
 guides, supports @ R
 WIP/OK All
 7-23-85 - NP - FR ea
 12-9-85 - Checked All
 8-1-86 - Rock work
 in progress. OK. Ready
 for final run. All
 11-5-86 - OK. Done
 Cal @ All

Permit No. 85/12.3
 Location 96 E-39 (Black line)
 Owner 16-05-84
 Date of permit 9-25-85
 Approved
 Dwelling *collage*
 Garage
 Alteration

~~Blank lined area with diagonal scribbles~~

PLUMBING APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3820

PROPERTY ADDRESS

Town Or Plantation: Kennebunk, ME
Street: BEREA AVE.
Subdivision Lot #: 96-C39

PROPERTY OWNERS NAME

Last: KUNNHEISER First: RONALD

Applicant Name: Ronald Kunnheiser

Mailing Address of Owner/Applicant (If Different):

PORTLAND PE # 1,729 TOWN COPY

Date Permit Issued: 5/21/86 FEE \$ 211 Double Fee Charged

Local Plumbing Inspector Signature: [Signature]

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.

Ronald Kunnheiser
Signature of Owner/Applicant Date: _____

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

AA NOV 5 - 1986
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for	Type Of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> RELOCATED PLUMBING	1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D. HOUSING DEALER/MECHANIC
	4. <input type="checkbox"/> OTHER - SPECIFY: _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input checked="" type="checkbox"/> PROPERTY OWNER
AUG 4 - 1986		LICENSE # 19,004

Number	Hook-Ups And Piping Relocation	Number	Column 2 Type Of Fixture	Number	Column 1 Type Of Fixture
	HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.		Hosebibb / Sillcock	1	Bathub (and Shower)
			For Drain		Shower (Separate)
			Urinal	1	Sink
				2	Wash Basin
				2	Water Closet (Toilet)
			framer, Filter, etc.		Clothes Washer
			tor		Dish Washer
					Garbage Disposal
					Laundry Tub
	Hook-Ups (Subtotal)		Other: _____	1	Water Heater
	Hook-Up Fee		Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
				7	Fixtures (Subtotal) Column 2
				21	Total Fixtures
				21	Permit Fee (Total)

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

Page 1 of 1
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