

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

<b>PROPERTY ADDRESS</b>		PORTLAND PERMIT # 2,242-1 TOWN COPY \$ 4.00 FEE L.P.I. # 1123 <i>Amos J. Goodwin</i> Local Plumbing Inspector Signature
Town Or Plantation	PORTLAND LONG ISLAND	
Street	HARBOR GRACE ST.	
Subdivision Lot #	TAX MAP 100 BLOCK C PORTION LOT 2,3	
<b>PROPERTY OWNERS NAME</b>		
Last	FIRST	
NICKERSON	EDWARD	
<b>Applicant Name:</b>		
EDWARD NICKERSON		
<b>Mailing Address of Owner/Applicant (if Different)</b>		
138 SUMMER STREET LISBON FALLS, MAINE 04252		

**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.

*Edward Nickerson* 4/6/87 Date  
*AA* Local Plumbing Inspector Signature MAR 30 1988 Date Approved

**PERMIT INFORMATION**

<b>THIS APPLICATION IS FOR:</b> 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"/> SEPTIC SYSTEM JUN 17 1987	<b>THIS APPLICATION REQUIRES:</b> 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	<b>INSTALLATION IS COMPLETE SYSTEM</b> 1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM 2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet) 3. <input type="checkbox"/> ENGINEERED (+2000 gpd) <b>INDIVIDUALLY INSTALLED COMPONENTS:</b> 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
<b>IF REPLACEMENT SYSTEM:</b> YEAR FAILING SYSTEM INSTALLED _____ THE FAILING SYSTEM IS 1. <input type="checkbox"/> BED 3. <input type="checkbox"/> TRENCH 2. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____	<b>DISPOSAL SYSTEM TO SERVE:</b> 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 _____	<b>TYPE OF WATER SUPPLY</b> DRILLED WELL
<b>SIZE OF PROPERTY</b> 2.3 Acres	<b>ZONING</b> I F.-1	

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<b>TREATMENT TANK</b> 1. <input checked="" type="checkbox"/> SEPTIC <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> AEROBIC SIZE 1000 GALS	<b>WATER CONSERVATION</b> 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 _____	<b>PUMPING</b> 1. <input checked="" type="checkbox"/> NOT REQUIRED 2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION) 3. <input type="checkbox"/> REQUIRED DOSE _____ GALS	<b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b> 2 BEDROOM CONSERVATIVE 300 LOW VOLUME TOILET - 30
<b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b> PROFILE 4   CONDITION A III DEPTH TO LIMITING FACTOR 3	<b>SIZE RATINGS USED FOR DESIGN PURPOSES</b> 1. <input type="checkbox"/> SMALL 2. <input checked="" type="checkbox"/> MEDIUM 3. <input type="checkbox"/> MEDIUM LARGE 4. <input type="checkbox"/> LARGE 5. <input type="checkbox"/> EXTRALARGE	<b>DISPOSAL AREA TYPE/SIZE</b> 1. <input checked="" type="checkbox"/> BED 700 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 _____	<b>DESIGN FLOW</b> 270 (GALLONS/DAY)

**SITE EVALUATOR STATEMENT**  SITE EVALUATION WAIVED BY LOCAL OPTION

On July 21, 1986 (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* 0003/4814 11/8/86  
 Site Evaluator or Professional Engineer's Signature SEP/PEP Date

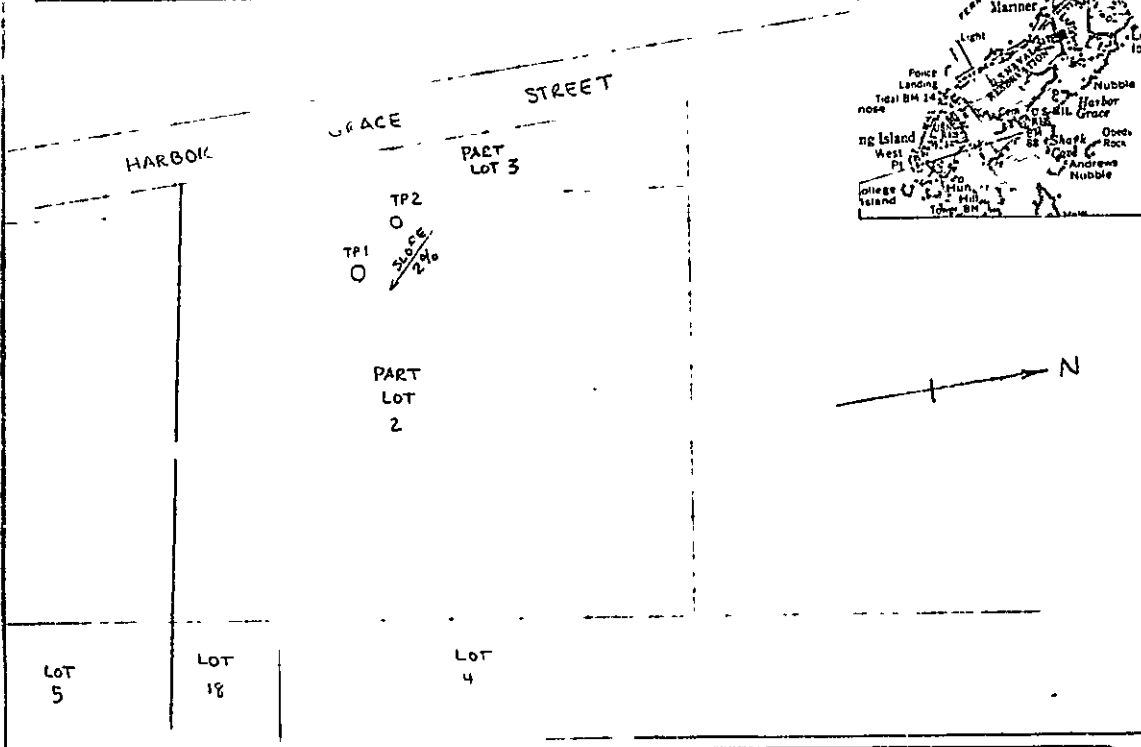
\* Local Plumbing Inspector's Signature if a Local Site Evaluation Waiver under a Local Option

Page 1 of 3  
 HHE-200 Rev 1/83

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering

Town, City, Plantation <b>PORTLAND LONG ISLAND HARBOR</b>		Street, Road, Subdivision <b>GRACE ST 100-C-PT 2,3</b>		Owners Name <b>EDWARD NICKERSON</b>	
SITE PLAN				SITE LOCATION PLAN (Attach)	
Scale 1" = <u>100</u> Ft.					



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
0 SANDY TOAM		DARK BROWN	
6 SILTY SAND	LOOSE	RED BROWN	NONE
10 MEDIUM SAND		TAN	
15 SILTY SAND	MODERATELY FRIABLE	RED BROWN	COMMON
20 CLAYEY GRAVEL	FRIABLE	GRAY	FEW
30			
40			
50			
Soil Profile <u>4</u>	Classification <u>A III</u> <small>Common</small>	Slope <u>2</u> %	Limiting Factor <u>18</u>
<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Rooted Layer <input type="checkbox"/> Bedrock			
Texture	Consistency	Color	Mottling
0 SILTY GRAVEL FILL	LOOSE	RED BROWN	
6			
10		BLACK	
15		GRAY BROWN	NONE
20			
25	LOOSE	GRAY	
30		RED BROWN	COMMON
35			
40	FRIABLE	GRAY	FEW
45			
50			
Soil Profile <u>4</u>	Classification <u>A III</u> <small>Common</small>	Slope <u>2</u> %	Limiting Factor <u>27</u>
<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Rooted Layer <input type="checkbox"/> Bedrock			

*William B. Jordan* 0003/4814 11/0/86  
 Site Evaluator or Professional Engineer's Signature      Date  
 SEN / PEA      Page 2 of 3  
 IHC-200 Rev. 4/83

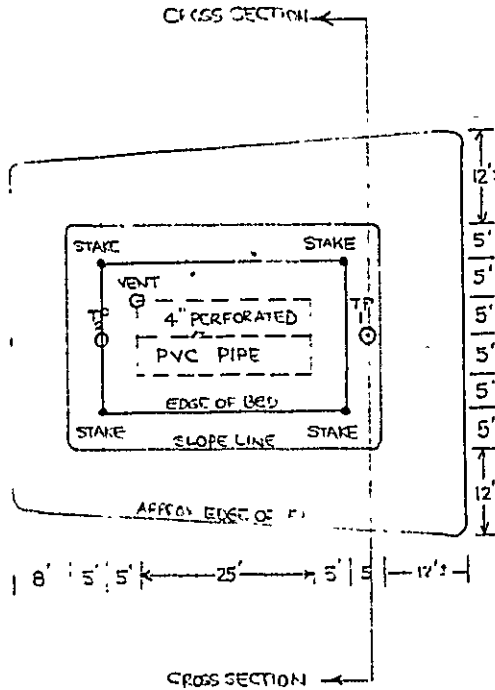
# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation: **PORTLAND LONG ISLAND** Street, Road, Subdivision: **HARBOR GRACE ST. 100-C-PT 2,3** Owners Name: **EDWARD NICKERSON**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

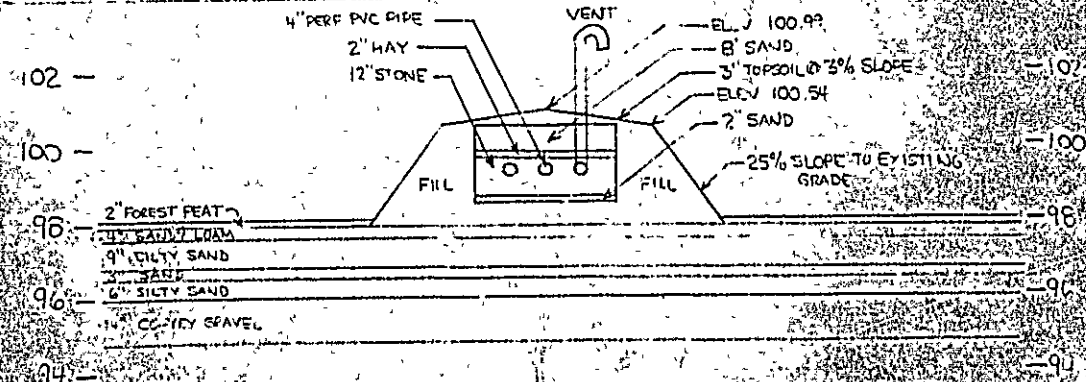
Scale 1" = 20 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	25'	Reference Elevation is	100.00	
Depth of Fill (Downslope)	35'	Bottom of Disposal Area	98.91	
		Top of Distribution Lines or Chambers	99.62	

### DISPOSAL AREA CROSS SECTION

Scale:  
Vertical: 1 inch = 4 ft  
Horizontal: 1 inch = 20 ft



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

0003/4814  
SE # / PE #

11/8/86  
Date

Page 3 of 3  
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**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

Processing Form

Applicant: Edward Nickerson Date: April 6, 1987  
 Mailing Address: 138 Summer St., Lisbon Falls, ME 04252 Address of Proposed Site: 100-C-Pt. 2, 3 Harbor Grace Street, Long Island  
 Proposed Use of Site: Single Family - cottage for summer Site Identifier(s) from Assessors Maps: same as above  
 Acreage of Site: 115,520 sq. ft. Ground Floor Coverage: 864 sq. ft. Zoning of Proposed Site: TR-1

Site Location Review (DEP) Required: ( ) Yes (  ) No Proposed Number of Floors: 1  
 Board of Appeals Action Required: ( ) Yes (  ) No Total Floor Area: 864 sq. ft.  
 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

COMPLIES

COMPLIES  
CONDITIONALLY

DOES NOT  
COMPLY

DATE	ZONE LOCATION	INTERIOR OR CORNER LOT	40 FT. SETBACK AREA (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	OFF-STREET PARKING	LOADING BAYS

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

*O.K. McSpencer* Apr. 28 1987

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

**Processing Form**

Applicant Edward Nickerson Date April 6, 1987

Mailing Address 138 Summer St., Lisbon Falls, ME 04252 Address of Proposed Site 100-C-Pt. 2, 3 Harbor Grace Street, Long Island

Proposed Use of Site Single Family - cottage for summer Site Identifier(s) from Assessors Maps same as above

Acreage of Site 115.520 sq. ft. Ground Floor Coverage 864 sq. ft. Zoning of Proposed Site IR-1

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

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

Planning Board Action Required: ( ) Yes (  ) No

Other Comments: \_\_\_\_\_

Date Dept. Review Due: \_\_\_\_\_

Proposed Number of Units 1

Total Floor Area \_\_\_\_\_ ft.

**RECEIVED**  
APR 10 1987  
DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

**PUBLIC WORKS DEPARTMENT REVIEW**

(Date Received)

	Traffic Circulation	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER	CONDITIONS SPECIFIED BELOW
APPROVED	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
APPROVED CONDITIONALLY																
DISAPPROVED																REASONS SPECIFIED BELOW

REASONS:

(Attach Separate Sheet if Necessary)

*Robert J. Ray* 4/9/87  
SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

453

PERMIT #..... **BUILDING PERMIT APPLICATION** **Portland** 4-5-87 (Previous permit #.....)

**APPLICANT FILL OUT I - VIII AND DETAILS OF WORK ON REVERSE**

Please Insert N/A (not applicable) for any item not pertaining to your request

**I. GENERAL INFORMATION**

Location/address of construction 100-C-Pl 2, 3 Harbor Grace St., Long Island, ME  
 Owner Edward Nickerson - 138 Summer St., Lisbon Falls, ME 04252 353-9635 - Home  
 Address Edward Nickerson - owner 865-4761, Ext. 2419

Contractor's name owner Tel. \_\_\_\_\_  
 Address \_\_\_\_\_

Subcontractors: \_\_\_\_\_

MAY 1, 1987  
 City Of Portland

**II. NEW SUBDIVISION OR EXISTING**  
**LOT REFERENCE**  
 Name \_\_\_\_\_  
 Lot \_\_\_\_\_  
 Blk \_\_\_\_\_  
 3' & pg# Reg./deeds \_\_\_\_\_  
 Date recorded \_\_\_\_\_

**III. PROPOSED USE:** CODE \_\_\_\_\_ If other \* explain \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 101 - Single Family

**IV. PAST USE:** \_\_\_\_\_

**V. OWNERSHIP:** \_\_\_\_\_ PUBLIC (federal/State/local government) \_\_\_\_\_ PRIVATE (individual/corp/nonprofit) \_\_\_\_\_

**VI. DESCRIPTION OF WORK:** To construct single family, no garage. SITE PLAN REVIEW.  
 Cottage for summer use only.

**VII. BUILDING DIMENSIONS:** length 36' width 24' square footage 864 height 24' #stories 1

**VIII. EST. CONSTRUCTION COST:** 120,000.00 **IX. GR. SQ. FT. OF LAND:** 15,504 **BUILDING:** 864

<b>X. RESIDENTIAL BUILDINGS ONLY:</b>			<b>XI. RESIDENTIAL UNITS:</b>	
1 BDRM	2 BDRMS	3 BDRMS	NEW DWELLINGS	EXISTING DWELLINGS
NEW DWELLING UNITS WITH:				
EXISTING DWELLING UNITS WITH:				
			<b>NET RESIDENTIAL UNITS:</b>	

**XII. SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** 5/1/87

DO NOT WRITE BELOW THIS LINE

<b>XIII. ZONING:</b> DISTRICT _____ STREET FRONTAGE _____ SETBACKS: front _____ back _____ side _____ side _____ ZONING BOARD APPROVAL: no <input type="checkbox"/> yes <input type="checkbox"/> (date) _____ PLANNING BOARD APPROVAL: no <input type="checkbox"/> yes <input type="checkbox"/> (date) _____	<b>XIV. OFFICE USE:</b> TAX MAP # <u>100</u> LOT # <u>C-20-1</u> VALUE/STRUCTURE _____ PERMIT EXPIRATION _____
--	--

**XV. CONDITIONAL USE:** variance \_\_\_\_\_ site plan \_\_\_\_\_ subdivision \_\_\_\_\_ shore and floodplain mgmt \_\_\_\_\_  
 special exception \_\_\_\_\_ other \_\_\_\_\_ (explain) \_\_\_\_\_

**XVI. SIGNATURE OF FIELD INSPECTOR (CEO):** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**XVII. FEES:**

base fee.....	
subdivision fee.....	
site plan review fee.....	50.00
other fees.....	
late fee.....	120.00
<b>TOTAL</b> .....	

**XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS:**

1. WATER SUPPLY <input type="checkbox"/> public <input checked="" type="checkbox"/> private	8. CHIMNEY * flues * fireplaces material
2. SEWER <input type="checkbox"/> public <input checked="" type="checkbox"/> private, type	9. FRAMING: floor joists
3. HEAT type fuel	size max. on centers
4. FOUNDATION type thickness footing	ceiling joists
5. ROOF type covering load	rafters
6. PLUMBING * tubs * showers * lavatories * laundry tubs * flushes * other	studs
SPRINKLER SYSTEM? <input type="checkbox"/> yes <input type="checkbox"/> no	wall studs
7. ELECTRICAL service entrance size * smoke detectors	10. If 1-story building w/ masonry walls: wall thickness height
NUMBER OF OFF-STREET PARKING SPACES: enclosed outdoors	11. BEDROOM WINDOWS height width sill height egress window? <input type="checkbox"/> yes <input type="checkbox"/> no

**PLOT PLAN/DETAILS OF WORK ON REVERSE**

White - Municipal Office  
 Green - Applicant  
 Yellow - CEO  
 Pink - Tax Assessor  
 Gold - GPCOG

# PLUMBING APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 289-3326

## PROPERTY ADDRESS

Town or Plan: Long Island, ME

Street / Subdivision Lot #: Harbor Grove Street

## PROPERTY OWNERS NAME

Last: Nickerson First: Edward

Applicant Name: Edward Nickerson

Mailing Address of Owner/Applicant (if Different): 130 Summit St. Ashm Falls, ME 04252

PORTLAND PERMIT # 2,772 TOWN COPY

Date: 03 01 88 \$ 18 FEE Due to Fee Charge

*Annelle M. G. [Signature]* L.P.I. # \_\_\_\_\_

### 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.

Edward Nickerson 3/1/88  
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.

*AD [Signature]* JUN 24 1988  
Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

### This Application is for

- 1.  NEW PLUMBING
- 2.  RELOCATED PLUMBING

### Type of Structure To Be Served:

- 1.  SINGLE FAMILY DWELLING
- 2.  MODULAR OR MOBILE HOME
- 3.  MULTIPLE FAMILY DWELLING
- 4.  OTHER - SPECIFY \_\_\_\_\_

### Plumbing To Be Installed By:

- 1.  MASTER PLUMBER
- 2.  OIL BURNERMAN
- 3.  MFG'D HOUSING DEALER/MECHANIC
- 4.  PUBLIC UTILITY EMPLOYEE
- 5.  PROPERTY OWNER

LICENSE # \_\_\_\_\_

Hook-Up & Piping Rel. in Maximum of 1 Hook-Up	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	<input checked="" type="checkbox"/>	Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR HOOK-UP: to an existing subsurface wastewater disposal system		Urinal	<input checked="" type="checkbox"/>	Sink
		Drinking Fountain		Wash Basin
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc		Clothes Washer
		Graase/Oil Separator		Dish Washer
Number of Hook-Ups & Relocations		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Hook-Up & Relocation Fee		Other: _____	<input checked="" type="checkbox"/>	Water Heater
	6	Fixtures (Subtotal) Column 2	4	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				Fixtures (Subtotal) Column 2
				Total Fixtures
				\$ 10. Fixture Fee
				\$ 6. Hook-Up & Relocation Fee
				\$ 16. Permit Fee (Total)

LAND USE: PORTLAND CODE

Sec. 14-526. Final site plan

(C) Contents - Minor development

(2) The proposed cottage is to be used as a summer camp by my family. As noted on the site plan, only one unit is being built. The total land area of the site is 115,520 sq ft. The total floor area of the proposed cottage is 864 sq ft. (24x36).

Applicant  
Ed Nickerson

*Ed Nickerson*

Year Round Address:  
138 Summer Street  
Lisbon Falls, Me. 04252  
Home Phone: 353-9635  
Work Phone: 865-4761 (ext. 2419)



# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

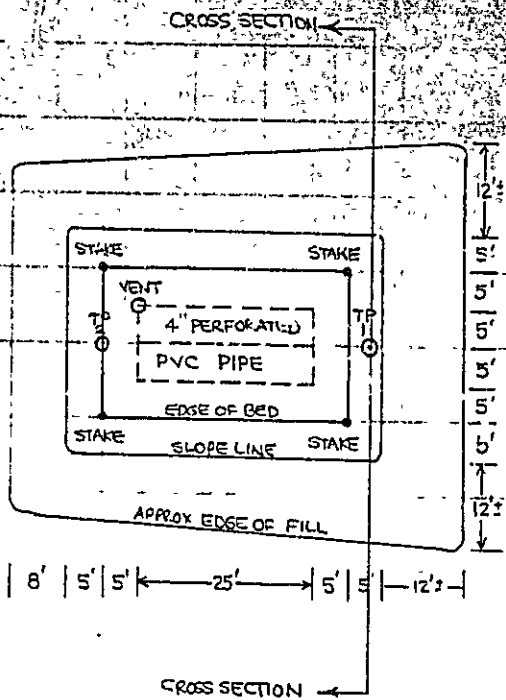
Town, City, Plantation

Street, Road, Subdivision  
PORTLAND, LONG ISLAND HARBOR GRACE ST., 100-C-PT 2, 3

Owners Name  
EDWARD NICKEKSON

## SUBSURFACE WASTEWATER DISPOSAL PLAN

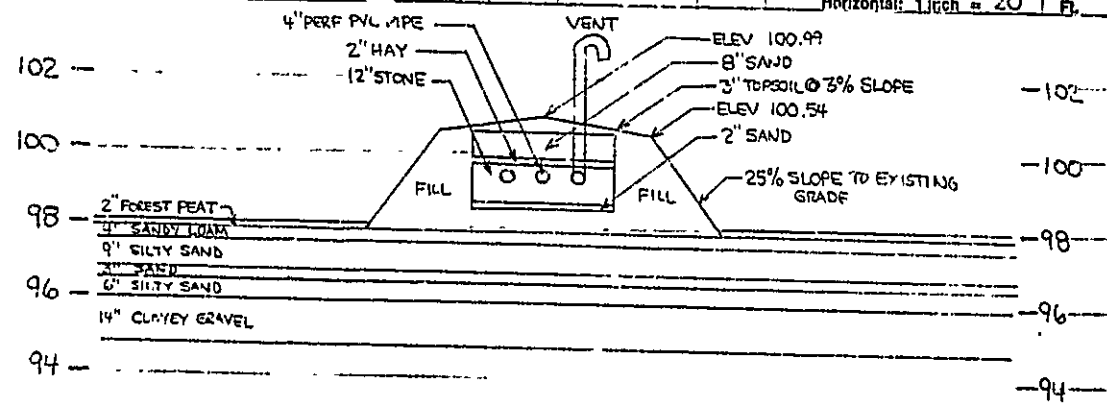
Scale 1" = 20' FL



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION PK NAIL IN
Depth of Fill (Upslope)	25'	Reference Elevation is	100.00	
Depth of Fill (Downslope)	35'	Bottom of Disposal Area	98.54	
		Top of Distribution Lines or Chambers	99.62	

### DISPOSAL AREA CROSS SECTION

Scale:  
Vertical: 1 inch = 4' FL  
Horizontal: 1 inch = 20' FL



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

0003/4814  
SE#7PE#

4/13/87  
Date

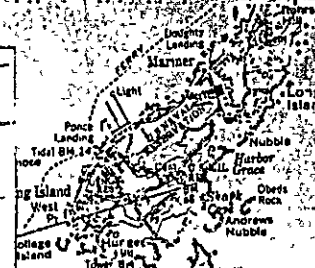
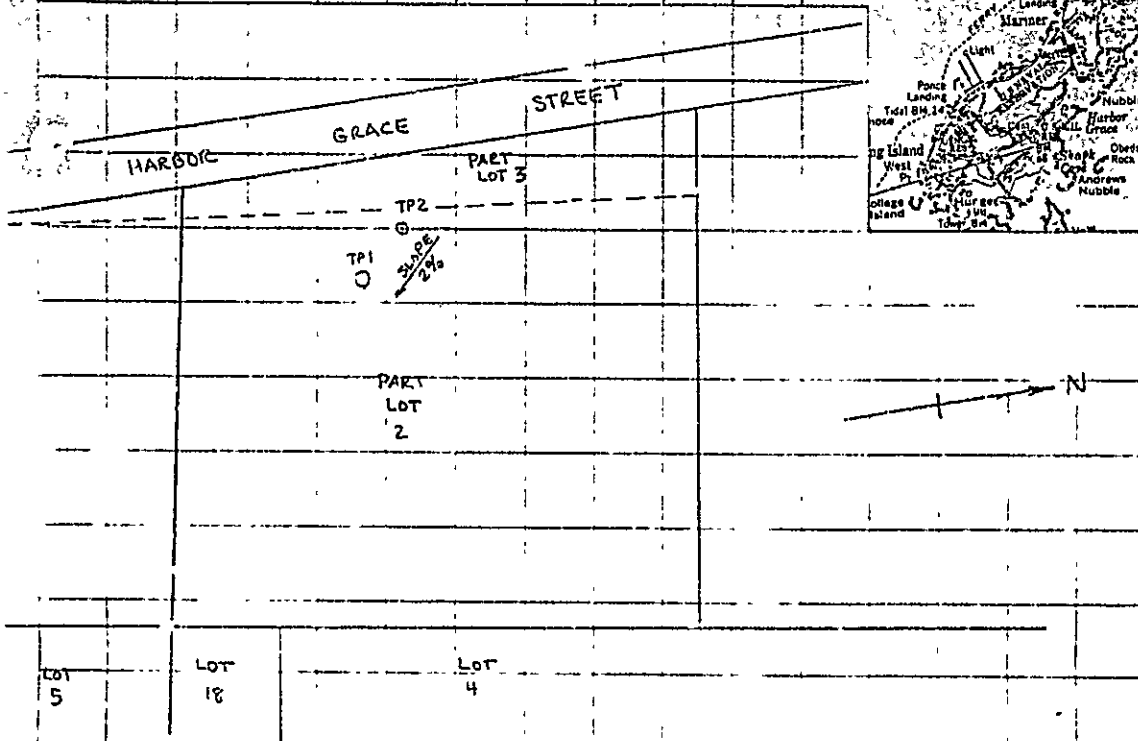
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HME 107 Rev 4/84

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation: **PORTLAND** Street, Road, Subdivision: **LONG ISLAND HARBOUR GRACE ST 100-C-PT 2,3** Owners Name: **EDWARD N. JACKERSON**

SITE PLAN Scale 1" = **100** Ft. SITE LOCATION PLAN (Attach)



LOT 5 LOT 18 LOT 4

## 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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SANDY TOBAC		DARK BROWN	
6	SILTY SAND	LOOSE	RED BROWN	NONE
10	MEDIUM SAND		TAN	
13	SILTY SAND	MODERATELY FRIABLE	RED BROWN	COMMON
20	CLAYEY GRAVEL	FRIABLE	GRAY	FEW
30				
40				
50				

Soil Profile: **4** Classification: **A III** Slope: **2** % Limiting Factor: **18**  
 Ground Water  Restrictive Layer  Base

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SILT / GRAVEL FILL	LOOSE	RED BROWN	
6	2" ORGANIC		BLACK	
10	LOAMY SAND		GRAY BROWN	NONE
15	SAND	LOOSE	GRAY	
20	SANDY GRAVEL		RED BROWN	COMMON
30	GRAVELLY CLAY	FRIABLE	GRAY	FEW
40				
50				

Soil Profile: **4** Classification: **I** Slope: **2** % Limiting Factor: **27**  
 Ground Water  Restrictive Layer  Base

*William B. Jovanovic* 2003/4814  
 Site Evaluator or Professional Engineer's Signature SE # 1 PE #

4/13/87  
 Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

**PROPERTY ADDRESS**

Town or Plantation: **PORTLAND LONG ISLAND**

Street: **HARPOUR GRACE ST**

Subdivision Lot #: **TAX MAP 1100 BLOCK C POND LOT 2,3**

**PROPERTY OWNERS NAME**

Last: **NICKERSON** First: **EDWARD**

Applicant Name: **EDWARD NICKERSON**

Mailing Address of Owner/Applicant (if different): **138 SUMMER STREET  
LISEON FALLS, MAINE 04**

**Caution: Permit Required**

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

**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 \_\_\_\_\_ Date \_\_\_\_\_

**Caution: Inspection Required**

I have inspected this 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><b>THIS APPLICATION IS FOR:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NEW SYSTEM</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM</li> <li><input type="checkbox"/> EXPANDED SYSTEM</li> <li><input type="checkbox"/> SEASONAL CONVERSION</li> <li><input type="checkbox"/> EXPERIMENTAL SYSTEM</li> </ol>	<p><b>THIS APPLICATION REQUIRES:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</li> <li><input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</li> <li><input type="checkbox"/> Requires only Local Plumbing Inspector Approval</li> <li><input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval</li> </ol>	<p><b>INSTALLATION IS COMPLETE SYSTEM</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NON ENGINEERED SYSTEM</li> <li><input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</li> <li><input type="checkbox"/> ENGINEERED (+200' gpcd)</li> </ol> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> TREATMENT TANK (ONLY)</li> <li><input type="checkbox"/> HOLDING TANK</li> <li><input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</li> <li><input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> </ol>
<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> <li><input type="checkbox"/> BED</li> <li><input type="checkbox"/> CHAMBER</li> <li><input type="checkbox"/> TRENCH</li> <li><input type="checkbox"/> OTHER _____</li> </ol>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</li> <li><input type="checkbox"/> MODULAR OR MOBILE HOME</li> <li><input type="checkbox"/> MULTIPLE FAMILY DWELLING</li> <li><input type="checkbox"/> OTHER _____ SPECIFY _____</li> </ol>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><b>DRILLED WELL</b></p>
<p>SIZE OF PROPERTY: <b>2.3 ACRES</b></p>	<p>ZONING: <b>IR-1</b></p>	

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p><b>TREATMENT TANK</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SEPTIC <input type="checkbox"/> Regular <input checked="" type="checkbox"/> Low Profile</li> <li><input type="checkbox"/> AEROBIC</li> </ol> <p>SIZE: <b>1000</b> GALS</p>	<p><b>WATER CONSERVATION</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NONE</li> <li><input checked="" type="checkbox"/> LOW VOLUME TOILET</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> <li><input type="checkbox"/> ALTERNATIVE TOILET</li> </ol> <p>SPECIFY: _____</p>	<p><b>FUMPING</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NOT REQUIRED</li> <li><input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)</li> <li><input type="checkbox"/> REQUIRED</li> </ol> <p>DOSE: _____ GALS</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p><b>2 BEDROOM</b></p> <p><b>CONSERVATIVE 300</b></p> <p><b>LOW VOLUME TOILET - 30</b></p> <p>DESIGN FLOW: <b>270</b> (GALLONS/DAY)</p>						
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PROFILE</td> <td>CONDITION</td> </tr> <tr> <td style="text-align: center;"><b>4</b></td> <td style="text-align: center;"><b>AIII</b></td> </tr> <tr> <td>DEPTH TO LIMITING FACTOR</td> <td style="text-align: center;"><b>18</b></td> </tr> </table>	PROFILE	CONDITION	<b>4</b>	<b>AIII</b>	DEPTH TO LIMITING FACTOR	<b>18</b>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> SMALL</li> <li><input checked="" type="checkbox"/> MEDIUM</li> <li><input type="checkbox"/> MEDIUM-LARGE</li> <li><input type="checkbox"/> LARGE</li> <li><input type="checkbox"/> EXTRA LARGE</li> </ol>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> BED <b>700</b> Sq Ft</li> <li><input type="checkbox"/> CHAMBER _____ Sq. Ft. <input type="checkbox"/> REGULAR <input type="checkbox"/> 11 20</li> <li><input type="checkbox"/> TRENCH _____ Linear Ft.</li> <li><input type="checkbox"/> OTHER _____</li> </ol>	
PROFILE	CONDITION								
<b>4</b>	<b>AIII</b>								
DEPTH TO LIMITING FACTOR	<b>18</b>								

**SITE EVALUATOR STATEMENT**

On July 21, 1986 (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.

SITE EVALUATION WANTED BY LOCAL OPTION

William B. Goodman **0003/4814** 1/13/87  
Site Evaluator or Professional Engineer's Signature SE# / PE# Date

\* Local Plumbing Inspector's Signature if a Local Site Evaluation Waiver under a Local Option

April 12, 1987

Ernie Hood in

Please check on this septic  
disposal system proposal

Don't they need soil test results?

Please return to

Warren T.

Warren he has a site or plan made  
but must submit a copy of same.  
when applying for Brady Bond



**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date March 1, 1988  
 Receipt and Permit number 22598

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: Harbor Grace Str., Long Island 100-C-2,3  
 OWNER'S NAME: Edward Nickerson ADDRESS: 138 Summer street

OUTLETS:	FEE
Receptacles <u>20</u> Switches <u>5</u> Plugmold _____ ft. TOTAL <u>25</u> .....	<u>3.00</u>
Incandescent <u>5</u> Fluorescent _____ (not strip) TOTAL <u>5</u> .....	<u>3.00</u>
Strip Fluorescent _____ ft. ....	_____
SERVICES:	
Overhead _____ Underground _____ Temporary _____ TOTAL amperes _____	_____
METERS: (number of) _____	_____
MOTORS: (number of)	
Fractional _____	_____
1 HP or over _____	_____
RESIDENTIAL HEATING:	
Oil or Gas (number of units) _____	_____
Electric (number of rooms) _____	_____
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> .....	<u>3.00</u>
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 <u>2</u> .....	<u>2.00</u>
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 _____	_____
INSTALLATION FEE DUE: _____	_____
FOR ADDITIONAL WORK NOT ON ORIGINAL PERMIT ..... DOUBLE FEE DUE: _____	_____
FOR REMOVAL OF A "STOP ORDER" (304-16.b) .....	_____
TOTAL AMOUNT DUE: _____	<u>11.00</u>

INSPECTION:  
 Will be ready on \_\_\_\_\_, 19\_\_; or Will Call X  
 CONTRACTOR'S NAME: Edward Nickerson - Homeowner  
 ADDRESS: 138 Summer Street Lisbon Falls  
 TEL: 353-9635

MASTER LICENSE NO.: \_\_\_\_\_ SIGNATURE OF CONTRACTOR:  
 LIMITED LICENSE NO.: \_\_\_\_\_ *Edward Nickerson*





# CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT  
INSPECTION SERVICES DIVISION

April 13, 1987

Mr. Edward Nickerson  
138 Summer Street  
Lisbon Falls, Maine 04252

Re: Lot 100-C-Pt: 2 & 3  
Harbor Grace St.  
Long Island, Maine

Dear Mr. Nickerson:

Site plan review of your proposed building on Harbor Grace Street, Long Island, Maine has been completed in the several City Departments. A copy of the soil test results has been received from Mr. William Goodwin.

It will now be necessary to file an application for a building permit based upon \$25.00 for the first thousand dollars and \$5.00 for each additional thousand of estimated cost of constructing the building.

We shall await your application for a building permit and the fee for same. Then your permit can be issued.

Sincerely,

Warren J. Turner  
Zoning Enforcement Inspector

cc: P. Samuel Hoffses, Chief, Inspection Services  
Arthur Addato, Code Enforcement Officer

**HILLSIDE LUMBER INC.**

761 County Road  
Westbrook, Maine 04092  
(207) 774-8356

January 30, 1987

Edward Nickerson  
138 Summer Street  
Lisbon, Maine 04252  
(207) 353-9635

Quotation for septic system  
prices include delivery to Long Island.

1000 gallon, low profile concrete tank delivered to site and set in place	\$1000.00
10 bales mulch hay	\$30.00
22 yards sand (2 truck loads)	\$1100.00
24 yards 3/4 crushed stone (2 truck loads)	\$1100.00
12 yards loam (2 truck loads)	\$550.00
<b>Total</b>	<b>\$3880.00</b>

No fill included in this quote, site preparation will  
determine if any fill is necessary and in what amount.



# HILLSIDE LUMBER INC.

761 County Road  
Westbrook, Maine 04092  
(207) 774-8336

January 30, 1987

Edward Nickerson  
138 Summer Street  
Lisbon, Maine 04252  
(207) 353-9635

Qty	Unit	Materials	Unit Price	Amount
8	ea	3222 Primed Wood Windows, Double Hung, Insulated Glass, w/ext. jams & screens (rough opening 3-2 1/4 x 4-5 5/8)	151.47	1211.81
2	ea	3216 Primed Wood Windows, Double Hung, Insulated Glass, w/ext. jams & screens (rough opening 3-2 1/4 x 3-5 5/8)	135.44	270.88
1	ea	Marvin™ 6068 Wood Terrace Door w/screen & lockset	725.39	725.39
1	ea	Steel Entrance Door w/ half-lite, 6 9/16 jamb & keylock	245.41	245.41
2	ea	VS-2 Velux Ventilating Skylights	375.00	750.00
2	ea	Flashing Kit for Velux Roof Windows VS-2	51.00	102.00
				<hr/> 3305.49

ALL PRICES INCLUDE DELIVERY TO SITE

1600	lf	1x10 #4 White Pine shiplap D3S, siding	.43	688.00
140	lf	1x8 #3 White Pine, trim	.60	84.00
48	lf	1x6 #3 White Pine, trim	.47	22.56
48	lf	1x5 #3 White Pine, trim	.38	18.24
3	pcs	3/8x4x8 AC plywood, soffits	17.00	51.00
2	bx	16d bright/common (50 lb)	22.76	45.52
2	bx	8d bright/common (50 lb)	22.86	45.72
1	bx	1 1/4" galv/roof (50 lb)	55.04	55.04
11	rls	9 1/4 x 16 kraft faced 4' batts, R-30 insulation	35.67	535.05
13	rls	6 x 23 foil faced R-19 insulation	27.37	355.81
24	rls	8 x 23 unfaced R-25 insulation	22.11	530.64
9	pcs	Cor-A-Vent ridge vent	12.01	108.09
2	pcs	Cor-A-Vent end caps	1.70	3.40
9	pcs	Alum. Vent-A-Strip, soffit vent, continuous #70	2.85	25.65
144	pcs	Prop-A-Vent II, 24"	1.12	161.28

Subtotal	9664.26
Tax Amount	483.21
Total	10147.47

NOT INCLUDED IN QUOTE

- Hardware
- Stairs
- Interior Trim
- Sheetrock
- Electrical
- Plumbing

# HILLSIDE LUMBER INC.

781 County Road  
Westbrook, Maine 04092  
(207) 774-8356

Edward Nickerson  
138 Summer Street  
Lisbon, Maine 04252  
(207) 353-9635

January 30, 1987

Qty	Unit	Materials	Unit Price	Amount
15	pcs	6x6x10' PT .60 CCA	30.00	450.00
18	pcs	2x12x16' PT .40 CCA, carrying timbers	25.09	451.62
56	pcs	2x10x14' KD Spruce, 1st floor joists 16" OC	14.00	784.00
5	pcs	2x10x16' KD Spruce, box ends	16.00	80.00
27	pcs	3/4x4x8 T&G OSB, Underlayment	15.40	415.80
60	pcs	2x6x8' KD Spruce, 1st floor ext. studs 24" OC	3.70	222.00
24	pcs	2x6x16' KD Spruce, plate and shoe stock	7.81	187.44
16	pcs	2x8x8' KD Spruce, headers	5.46	87.36
27	pcs	2x4x8' KD Spruce, int. center carrying wall .6" OC	2.00	54.00
6	pcs	2x4x16' KD Spruce, plate and shoe stock	5.55	33.30
38	pcs	2x10x14' KD Spruce, 2nd floor joists 24" OC	14.00	532.00
5	pcs	2x10x16' KD Spruce, box ends	16.00	80.00
1900	lf	2x6 KD Spruce T&G, flooring	58.4	1109.60
18	pcs	2x6x16' KD Spruce, studing gable ends	7.81	140.58
38	pcs	2x8x16' KD Spruce, rafters 24" OC	10.91	414.58
3	pcs	2x10x16' KD Spruce, ridge pole	16.00	48.00
19	pcs	2x6x10' KD Spruce, collar ties	4.56	86.64
36	pcs	5/8x4x8 CDX plywood, roof sheathing	15.62	562.32
144	pcs	5/8 plywood clips	.05	7.20
3	ris	15 lb felt paper	12.40	37.20
14	pcs	8"x10' aluma drip-edge	3.10	43.40
36	bd	235 lb Georgia Pacific asphalt roof shingle	11.62	418.32
1	rl	9x195 Tyvek house wrap vapor barrier	145.00	145.00
42	pcs	1/2x4x8 CDX plywood, wall sheathing	12.95	543.00

**HILLSIDE LUMBER INC.**

781 County Road  
Westbrook, Maine 04092  
(207) 774-8336

January 30, 1987

Edward Nickerson  
138 Summer Street  
Lisbon, Maine  
04252

Sir;

Enclosed please find the quotes you requested and a credit application. Our normal procedure is to guarantee the prices from 30 to 60 days depending on the time requirement of the job. I will be happy to update these prices for you at any time. I do not, however, anticipate any great fluctuations in these prices through the summer of '87.

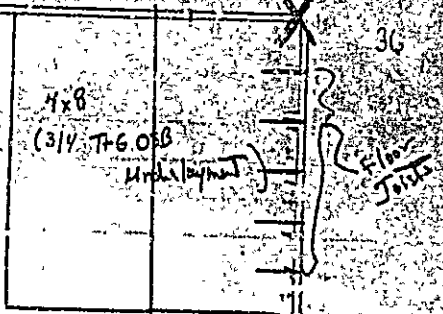
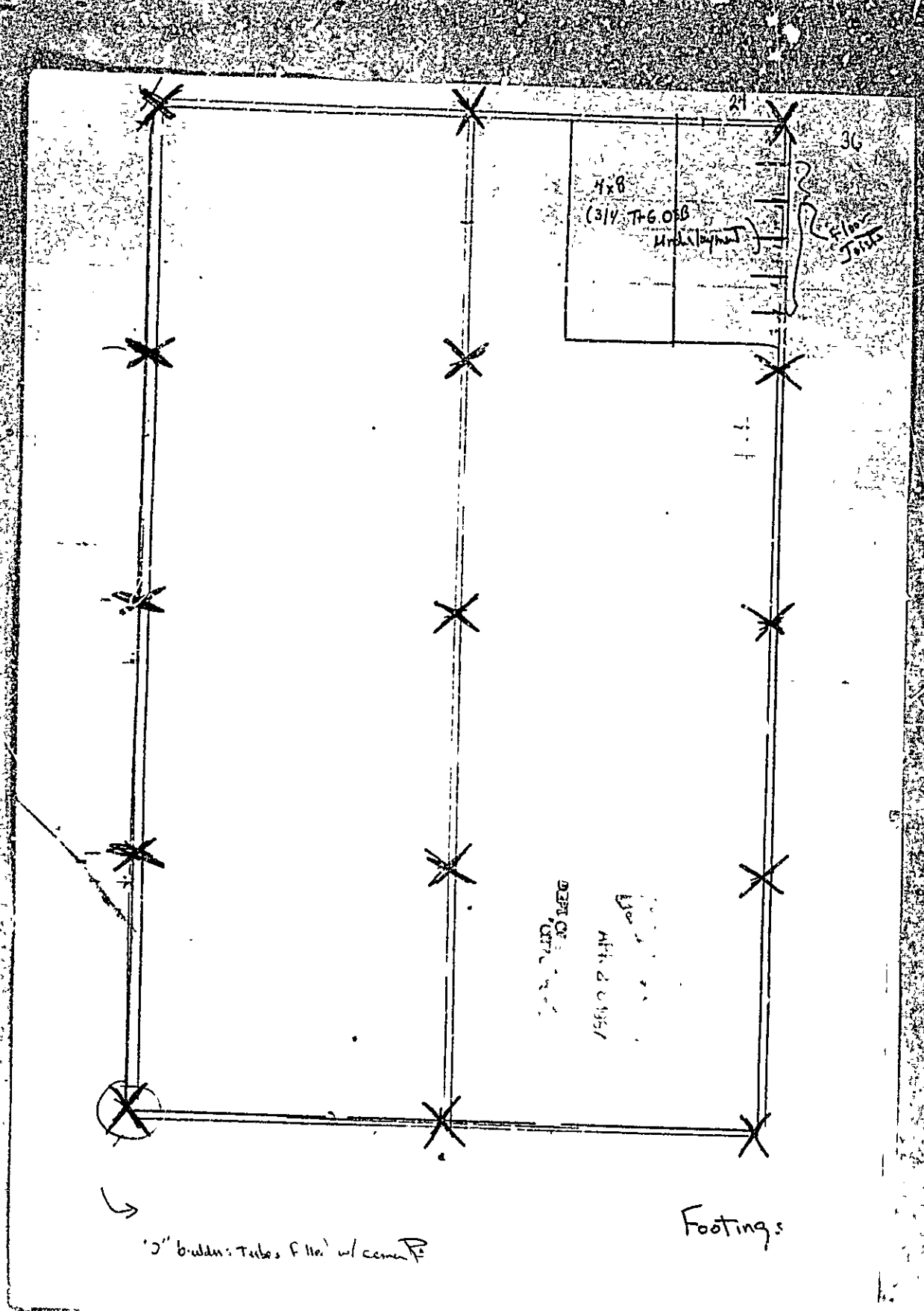
The credit application should be self explanatory. There are some questions which concern only business accounts and are not pertinent to yourself, please disregard them. You will be eligible for a 5% project discount which would be subtracted from your account on a monthly basis.

Concerning your question about a contractor for the septic system, I feel unqualified to address it adequately. I suggest that you contact the manager for our Peaks Island outlet, Mr. Frank Davis, who is an authority on the island trades and would gladly answer any question you may have. The telephone number for Hillside Lumber Peaks Island is (207) 766-2926/7.

If you have any further questions, please do not hesitate to contact myself

Thank you

  
W. R. Knight



NO LEG

1555/



5" brddn: Tubes f 11a' w/ corner F

Footings

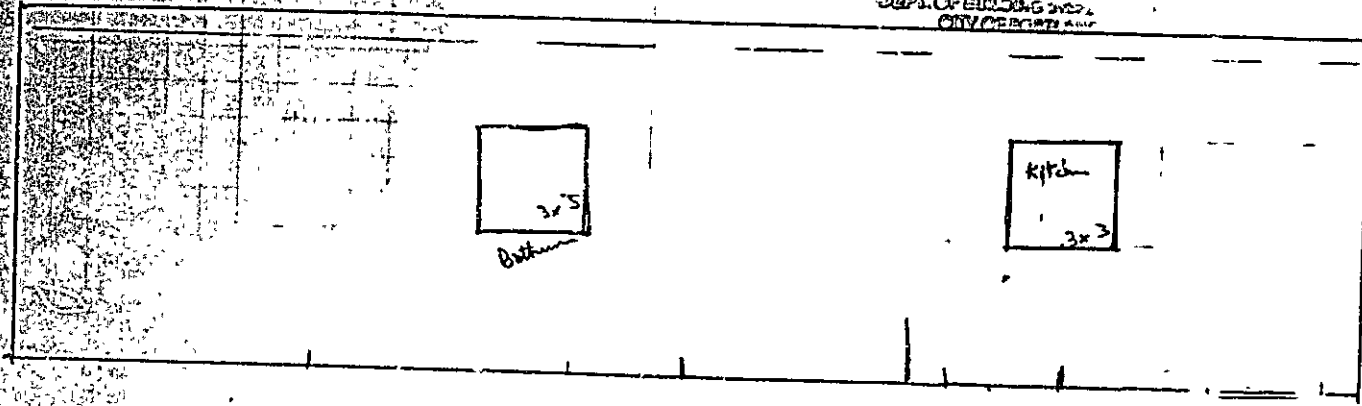
RECEIVED

Side 4

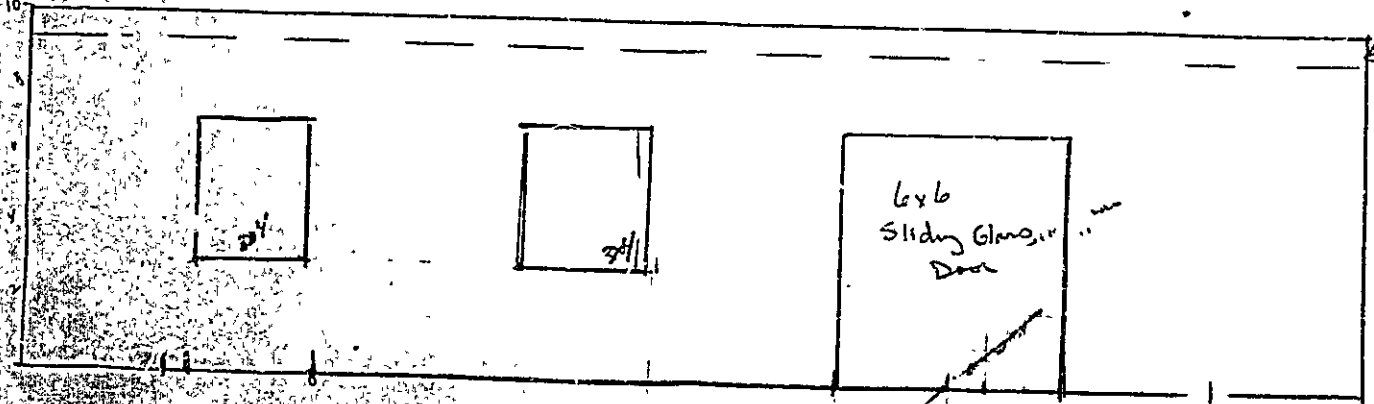
APR 28 1987

DEPT. OF BUILDING INSPECTION  
CITY OF BOSTON

Back



Side 2

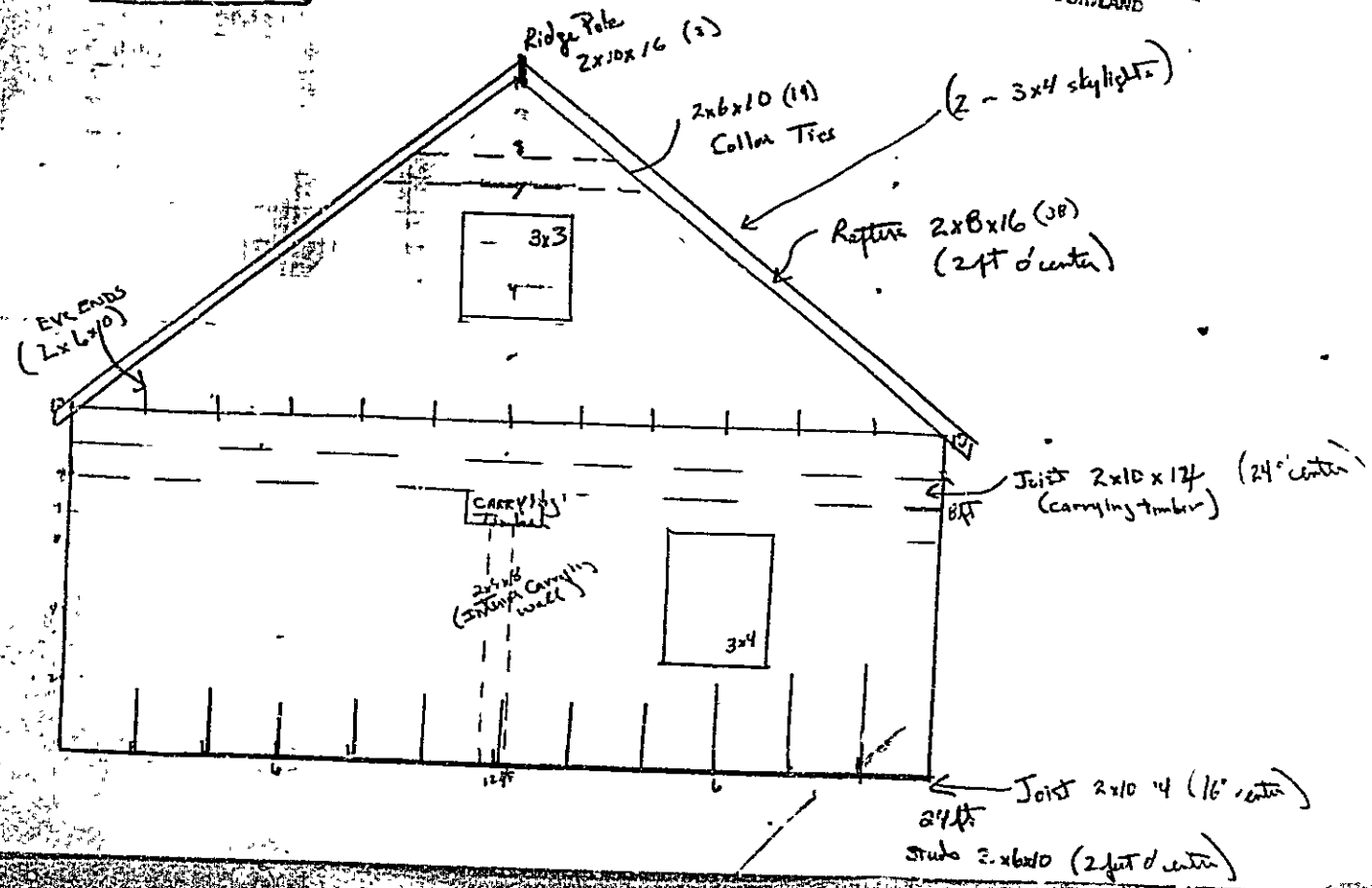
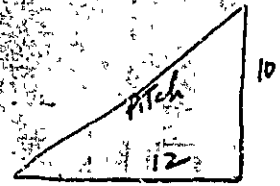


RECEIVED

Side 3

APR 28 1987

DEPT OF BUILDING INSPECTIONS  
CITY OF PORTLAND



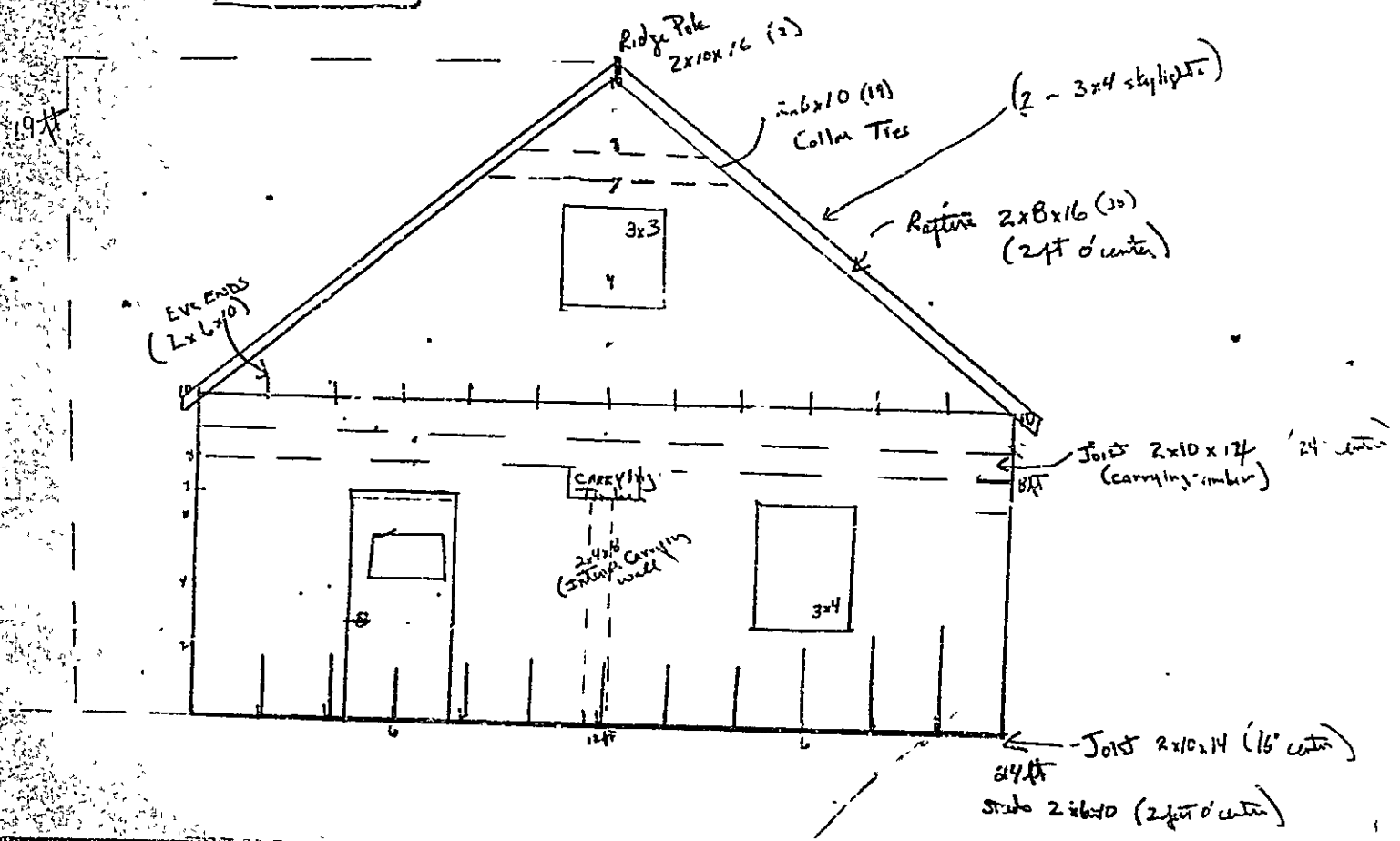
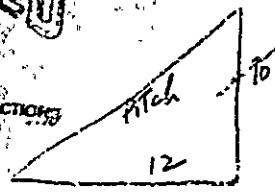
RECEIVED

APR 28 1987

DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

Size 24x36

SIDE 1







## CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT  
INSPECTION SERVICES DIVISION

April 22, 1987

RE: 100-C-Part 2 & 3  
Harbor Grace Street  
Long Island

Mr. Edward Nickerson  
138 Summer Street  
Lisbon Falls, Maine 04252

Dear Mr. Nickerson:

Your site plan review for a single family dwelling on Long Island in the IR-1 Zone has been completed. We now need a building plan for the proposed structure before we can issue a building permit. A fee of \$120.00 has been received based on an estimated cost of \$20,000, however, we do not have a copy of your building plans.

Sincerely,

Warren J. Turner  
Zoning Enforcement Inspector

/el

cc: P. Samuel Hoffses, Chief of Inspection Services  
Arthur Addato, Code Enforcement Officer

RECEIVED

APR 28 1987

DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

**L.L.Bean®**

Ed Nickerson

Warren -

Please find enclosed a copy of my  
building plans for the proposed structure  
and a bill of material from Helkide Lumber.

Sincerely,

Edward Nickerson

**RECEIVED**

APR 28 1987

DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND



## CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT  
INSPECTION SERVICES DIVISION

April 22, 1987

RE: 100-C Part 2, & 3  
Harbor Grace Street  
Long Island

Mr. Edward Nickerson  
138 Summer Street  
Lisbon Falls, Maine 04252

Dear Mr. Nickerson:

Your site plan review for a single family dwelling on Long Island in the IR-1 Zone has been completed. We now need a building plan for the proposed structure before we can issue a building permit. A fee of \$120.00 has been received based on an estimated cost of \$20,000, however, we do not have a copy of your building plans.

Sincerely,

Warren J. Turner  
Zoning Enforcement Inspector

/el

cc: P. Samuel Hoffses, Chief of Inspection Services  
Arthur Addato, Code Enforcement Officer

\*6.) In addition to any automatic fire alarm system required by Sections 1716.3.2 and 1716.3.3, a minimum of one single station smoke detector shall be installed in each guest room, suite, or sleeping area in buildings of Use Groups R-1 and I-1 and in dwelling units in the immediate vicinity of the bedrooms in buildings of Use Group R-2 or R-3. When actuated, the detector shall provide an alarm suitable to warn the occupants within the individual unit (see Section 1717.3.1).

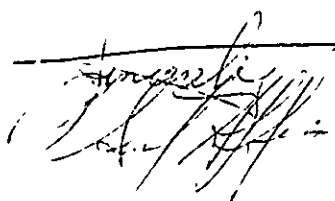
In buildings of Use Groups R-1 and R-2 which have basements, an additional smoke detector shall be installed in the basement. In buildings of Use Group R-3, smoke detectors shall be required on every story of the dwelling unit, including basements.

In dwelling units with split levels, a smoke detector installed on the upper level shall suffice for the adjacent lower level provided the lower level is less than one full story below the upper level. If there is an intervening door between the adjacent levels, a smoke detector shall be installed on both levels.

All detectors shall be installed in an approved location. Where more than one detector is required to be installed within an individual dwelling unit, the detectors shall be wired in such a manner that the actuation of one alarm will actuate all the alarms in the individual unit.

7.) 608.1 Attached garages: Private garages located beneath rooms in buildings of Use Groups R-1, R-2, R-3 or I-1 shall have walls, partitions, floors, and ceilings separating the garage space from the adjacent interior spaces constructed of not less than 1 hour fire-resistance rating. Attached private garages shall be completely separated from the adjacent interior spaces and the attic area by means of 1/2-inch gypsum board or equivalent applied to the garage side. The sills of all door openings between the garage and adjacent interior spaces shall be raised not less than 4 inches (102mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

608.1.1 Separation by breezeway: A garage separated by a breezeway not less than 10 feet (3048mm) in length from a building of Use Group R-3 may be of type 5B construction, but the junction of the garage and breezeway shall be firestopped to comply with the requirements of Section 1420.0.



BUILDING PERMIT REPORT

DATE: 28 APR 1987

ADDRESS: 100-C - PT. 3 Harbor Place St, Long Island

REASON FOR PERMIT: Summer Cottage

BUILDING OWNER: Edward Nicholson

CONTRACTOR: 11

PERMIT APPLICANT 11

APPROVED: 5-6 DENIED

CONDITION OF APPROVAL OR DENIAL:

- 1.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.
- 2.) Each apartment shall have access to two(2) separate, remote and approved means of egress. A single exit is acceptable when it exits directly from the apartment to the building exterior with no communications to other apartment units.
- 3.) Each apartment shall be equipped with an approved single station smoke detector powered by the house current. The detector shall be located in an area which will provide protection for the sleeping areas.
- 4.) The boiler shall be protected by enclosing with one(1) hour fire rated construction including fire doors and ceiling, or by placing over the boiler, two(2) residential sprinkler heads supplied from the domestic water.
- \*5.) Every sleeping room below the fourth story in buildings of Use Groups R and I-1 shall have at least one operable window or exterior door approved for emergency egress or rescue. The units must be operable from the inside opening without the use of separate tools. Where windows are provided as a means of egress or rescue, they shall have a sill height not more than 44 inches (1118 mm) above the floor. All egress or rescue windows from sleeping rooms must have minimum net clear openings of 5.7 square feet (0.53m<sup>2</sup>). The minimum net clear opening height dimension shall be 24 inches (610 mm). The minimum net clear opening width dimension shall be 20 inches (508 mm).



## CITY OF PORTLAND

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT  
INSPECTION SERVICES DIVISION

April 28, 1987

Mr. Edward Nickerson  
138 Summer Street  
Lisbon Falls, ME 04252

Re: 100-C-Pt. 3 Harbor Grace Street, Long Island, ME

Dear Sir:

Your application to construct a single family dwelling (cottage for summer use only) has been reviewed and a building permit is herewith issued subject to the following requirements:

1. All lot lines and the lot shall be clearly marked before calling for a foundation inspection.
2. Please read and implement items 5 and 6 of the attached work sheet.

If you have any questions regarding these requirements, please do not hesitate to contact this office.

Sincerely,

P. Samuel Hoffses  
Chief of Inspection Services

/ksc

Applicant: Edward Nickerson Date: April 21, 1981  
Address: 100-074243  
Assessors No.: Harbor Grace St, Long Island, Maine

CHECK-LIST AGAINST ZONING ORDINANCE

Date - 138 Summer St,  
Zone Location - IR-1 Lisbon Falls  
Interior or corner lot - Maine  
Use - Single family, No garage  
Sewage Disposal - septic field  
Rear Yards - O.K.  
Side Yards - O.K.  
Front Yards - 40' 25' required  
Projections -  
Height - 1 story  
Lot Area - 11535 sq ft 2.65 Acres  
Building Area - 864 sq ft  
Area per Family - 60,000 #  
Width of Lot - 376'  
Lot Frontage - 376'  
Off-street Parking - O.K.  
Loading Bays -

K. W. Turner  
OK [Signature]

Site Plan -  
Shoreland Zoning -  
Flood Plains -

6-17-87 - ~~Good to go~~ <sup>87A</sup> ~~OK~~  
OK - ~~and~~ ~~structure~~ ~~in~~ ~~place~~ OK ~~all~~  
7-30-87 - All closed in OK ~~all~~ ~~Tr./Jack~~  
Bases, beams OK. ~~with~~ ~~OK~~ ~~all~~  
6-24-88 - OK for C/O. ~~all~~

4/8/8

~~...~~ ~~...~~ ~~...~~ ~~...~~ ~~...~~



0 453

PERMIT BUILDING PERMIT APPLICATION Portland 4-6-87 (Previous permit #)

APPLICANT: FILL OUT I - XVIII AND DETAILS OF WORK ON REVERSE

Please insert N/A (not applicable) for any item not pertaining to your request.

I. GENERAL INFORMATION
Location/address of construction: 100-C-PT-2, 3 Harbor Grace St., Long Island, ME
Owner: Edward Nickerson - 138 Summer St., Lisbon Falls, ME 04252
Address: Edward Nickerson - owner

Contractor's name: owner
Address:
Subcontractors: MAY 1 1987

City Of Portland

III - NEW SUBDIVISION OR EXISTING LOT REFERENCE
Name:
Lot:
Block:
Bk. & Pg. Reg./deeds:
Date recorded:

III. PROPOSED USE: CODE 101 If other explain: Single family
IV. PAST USE: vacant lot
V. OWNERSHIP: PRIVATE (individual/corp./nonprofit)

VI. DESCRIPTION OF WORK: To construct single family, no garage. SITE PLAN REVIEW. Cottage for summer use only.

VII. BUILDING DIMENSIONS: length 36' width 24' square footage 864 height 24' #stories 1

VIII. EST. CONSTRUCTION COST: 20,000.00
IX. 16R. SQ. FT. OF LAND 411.527 BUILDING 864

X. RESIDENTIAL BUILDINGS ONLY: 1 BDRM 2 BDRMS 3 BDRMS
XI. RESIDENTIAL UNITS: NEW DWELLINGS EXISTING DWELLINGS

XII. SIGNATURE OF APPLICANT: DATE: 4/25/87

DO NOT WRITE BELOW THIS LINE

XIII. ZONING: DISTRICT TR-1 STREET FRONTAGE
SETBACKS: front back side
ZONING BOARD APPROVAL: no yes (date)
PLANNING BOARD APPROVAL: no yes (date)

XIV. OFFICE USE: TAX MAP: LOT: VALUE/STRUCTURE: PERMIT EXPIRATION:

XV. CONDITIONAL USE: variance site plan subdivision special exception other (explain)

XVI. SIGNATURE OF FIELD INSPECTOR (CEO): DATE:

XVII. FEES: base fee subdivision fee site plan review fee 50.00 other fees late fee 120.00 TOTAL

XVIII. SPACE FOR FIGURING /ADDITIONAL COMMENTS: O.K. W. Turner April 25 1987

PERMIT ISSUED WITH LETTER

Table with 11 rows and 3 columns: 1. WATER SUPPLY, 2. SEWER, 3. HEAT, 4. FOUNDATION, 5. ROOF, 6. PLUMBING, 7. ELECTRICAL, 8. CHIMNEY, 9. FRAMING, 10. 1-story building w/ masonry walls, 11. BEDROOM WINDOWS

PLOT PLAN/DETAIL OF WORK ON REVERSE
White - Municipal Office
Green - Applicant
Yellow - CFO
Pink - Tax Assessor
Gold - GPCUG

NUMBER OF OFF-STREET PARKING SPACES: enclosed: 2 ADA REQUIRED

PERMIT ISSUED



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION Long Island

Issued to Edward Wakerson 100-C-2, 3

Date of Issue July 14, 1988

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. \_\_\_\_\_, 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

entire

APPROVED OCCUPANCY

single family

Limiting Conditions:

This certificate supersedes  
certificates issued

Approved:

7-14-88  
(Date)

Inspector

Inspector of Buildings

Note: 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.



CITY OF PORTLAND, MAINE  
Department of Building Inspection

# Certificate of Occupancy

LOCATION Long Island

Issued to Edward Nickerson 100-C-2, 3 Date of Issue July 14, 1956

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. \_\_\_\_\_, 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

entire

single family

Limiting Conditions:

This certificate supersedes  
certificate issued \_\_\_\_\_

Approved:

7-14-56 Edwin C. White  
(Date) Inspector

[Signature]  
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.

ELECTRICAL INSTALLATIONS

Permit Number 22-412

Location 100 West 5th St, St. Louis

Owner Edward W. Blackburn

Date of Permit 10/5/87

Final Inspection 10/5/87

By Inspector J. G. Jones

Permit Application Register Page No. 12

INSPECTIONS: Service 100 amp by Jones  
 Service called in 10/5/87  
 Closing-in \_\_\_\_\_ by \_\_\_\_\_

PROGRESS INSPECTIONS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

DATE	REMARKS

*10/5/87*

**APPLICATION FOR PERMIT**  
**DEPARTMENT OF BUILDING INSPECTIONS SERVICES**  
**ELECTRICAL INSTALLATIONS**

Date October 2, 1987  
 Receipt and Permit number 2247

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: Harbor De Grace Road - Long Island  
 OWNER'S NAME: Edward Nickerson ADDRESS: same

		FEES
OUTLETS:	Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL _____	
FIXTURES: (number of)	Incandescent _____ Fluorescent _____ (not strip) TOTAL _____	
	Strip Fluorescent _____ ft. _____	
SERVICES:	Overhead <input checked="" type="checkbox"/> Underground _____ Temporary _____ TOTAL amperes <u>100</u> ..	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) _____	
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 _____ Water Heaters _____	
	Cook Tops _____ Disposals _____	
	Wall Ovens _____ Dishwashers _____	
	Dryers _____ Connectors _____	
	Fans _____ Others (denote) _____	
	TOTAL _____	
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 \_\_\_\_\_  
 will \_\_\_\_\_

interior house wiring ~~shall~~ be done by owner TOTAL AMOUNT DUE. 5.00 min

INSPECTION  
 Will be ready on 11/17, 1987 or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: Seacoast Elec Co.  
 ADDRESS: 450 Commercial St  
 TEL: 774-6179  
 MASTER LICENSE NO X 03088 SIGNATURE OF CONTRACTOR  
 LIMITED LICENSE NO \_\_\_\_\_ *Ray C. [Signature]*

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