



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

Date Sept 14, 1990  
 Receipt and Permit number 01596

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: 101-G-22 Fern Ave. Long Island Maine  
 OWNER'S NAME: Steven R. Whitney ADDRESS: Same FEES

OUTLETS:	Receptacles _____	Switches _____	Plugmold _____	ft. TOTAL <u>2</u>	.....	<u>3.00</u>
FIXTURES: (number of)	Incandescent _____	Flourescent _____	(not strip) TOTAL _____	.....		
	Strip Flourescent _____	ft. ....	.....			
SERVICES:	Overhead <input checked="" type="checkbox"/> _____	Underground _____	Temporary _____	TOTAL amperes <u>100</u>	.....	<u>3.00</u>
METERS: (number of)	<u>1</u> .....					<u>.50</u>
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 _____	Compactors _____				
	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 _____					
				INSTALLATION FEE DUE:		
				DOUBLE FEE DUE:		
				TOTAL AMOUNT DUE:		<u>6.50</u>

INSPECTION: Will be ready on NOW, 1990; or Will Call \_\_\_\_\_  
 CONTRACTOR'S NAME: Seacoast Elec. Co.  
 ADDRESS: 58 Fore St., Portland, Maine 04101  
 TEL.: 774-6179  
 MASTER LICENSE NO.: 03088 SIGNATURE OF CONTRACTOR: Harry C. Poplee  
 LIMITED LICENSE NO. \_\_\_\_\_

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



**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

Processing Farm

Applicant: Steven Whitney 766-2772

Date: Aug 31, 1989

Address: Box 100, Portland 04050

Address of Proposed Site: 101-G-22 Fern Avenue, Long Island

Mailing Address: single family

101-G-22

Proposed Use of Site: 650 sq ft

Site Identifier(s) from Assessors Maps: TR-1

Acres 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: 1,050 sq ft

Planning Board Action Required: ( ) Yes ( ) No

Other Comments: \*\* REVISED SITE PLAN \*\*

Date Dept. Review Due:

**PUBLIC WORKS DEPARTMENT REVIEW**

(Date Received)

	TRAFFIC CALCULATION	ACCESS	CURB CUTS	ROAD WIDTH	PARKING	SIGNALIZATION	TURNING MOVEMENTS	LIGHTING	CONFLICT WITH CITY CONSTRUCTION PROJECT	DRAINAGE	SOIL TYPES	SEWERS	CURBING	SIDEWALKS	OTHER
APPROVED															
APPROVED CONDITIONALLY															
DISAPPROVED															

CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(Attach Separate Sheet If Necessary)

*[Signature]* 9/5/89  
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

Applicant: Tom + Debra Johnson Date: 9-18-89  
Address: 101-G-22 Fern Ave. Long Island  
Assessors No.:

CHECK LIST AGAINST ZONING ORDINANCE

Date - 9-18-89  
Zone Location - I R 1  
Interior or corner lot  
Use - single  
Sewage Disposal - septic  
Rear Yards - 30' + OK  
Side Yards - 20' + OK  
Front Yards - 30' +  
Projections - front steps  
height - 1 story  
Lot Area - 281,383 #  
Building Area - as per plan  
Area per Family - single  
Width of Lot - 325 feet  
Lot Frontage - same  
Off-street Parking - 2 cars  
Loading Bays - N/A

Site Plan -

Shoreland Zoning -

Flood Plains -

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

**PROPERTY ADDRESS**

Town or Plantation: PORTLAND, LONG ISLAND

Street: PORTLAND ASSESSORS PLAN 101

Subdivision Lot #: BLOCK G, LOT 22

**PROPERTY OWNERS NAME**

Last: NORTHLAND First: INC.

**Applicant Name:** THOMAS JOHNSON

City Address of Applicant (if different): LONG ISLAND, ME 04050

PORTLAND PERMIT # 3,426 APPLICANT COPY

Date Permit Issued: 7/29/87 Fee: 11.00

Local Plumbing Inspector Signature: [Signature] LPI # 111012

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

**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 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:**

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

**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
- Requires both State and Local Plumbing Inspector Approval

**INSTALLATION IS COMPLETS 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

**IF REPLACEMENT SYSTEM:**  
YEAR FAILING SYSTEM INSTALLED: \_\_\_\_\_  
THE FAILING SYSTEM IS:  
1  BED 2  CHAMBER 3  TRENCH 4  OTHER: \_\_\_\_\_

**DISPOSAL SYSTEM TO SERVE:**

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER: \_\_\_\_\_ SPECIFY: \_\_\_\_\_

**SIZE OF PROPERTY:** 281,383 ± sq ft **IR-1 & IR-2**

**TYPE OF WATER SUPPLY:** To Be Determined

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

**TREATMENT TANK**

- SEPTIC.  Regular  Low Profile
- AEROBIC

SIZE: \_\_\_\_\_ GALS.

**WATER CONSERVATION**

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

SPECIFY: \_\_\_\_\_

**PUMPING NOT DETERMINED**

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDING ON TREATMENT TANK CAPACITY AND ELEVATION)
- REQUIRED

DOSE: \_\_\_\_\_ GALS.

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

4 BEDROOM - CONSERVATIVE

-10% Low Volume TOILET

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**

PROFILE	CONDITION
<u>7</u>	<u>C</u>

DEPTH TO LIMITING FACTOR: 15'

**SIZE RATINGS USED FOR DESIGN PURPOSES**

- SMALL
- MEDIUM
- MEDIUM LARGE
- LARGE
- EXTRALARGE

**DISPOSAL AREA TYPE/SIZE**

- BED NOT DETERMINED Sq Ft
- CHAMBER \_\_\_\_\_ Sq Ft
- TRENCH \_\_\_\_\_ Linear Ft
- OTHER: \_\_\_\_\_

DESIGN FLOW: \_\_\_\_\_ (GALLONS/DAY)

**SITE EVALUATOR STATEMENT**

On 7/23/87 (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.

Signature: William B. Goodwin License # 0003/4814 Date: 7/29/87

Local Plumbing Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Page # of 2

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town/City, Plantation

PORTLAND, LONG ISLAND

Portland Assets, Street, Road, Subdivision  
PLAN 101

BLOCK G, Lot 22

Department of Human Services  
Division of Health Engineering

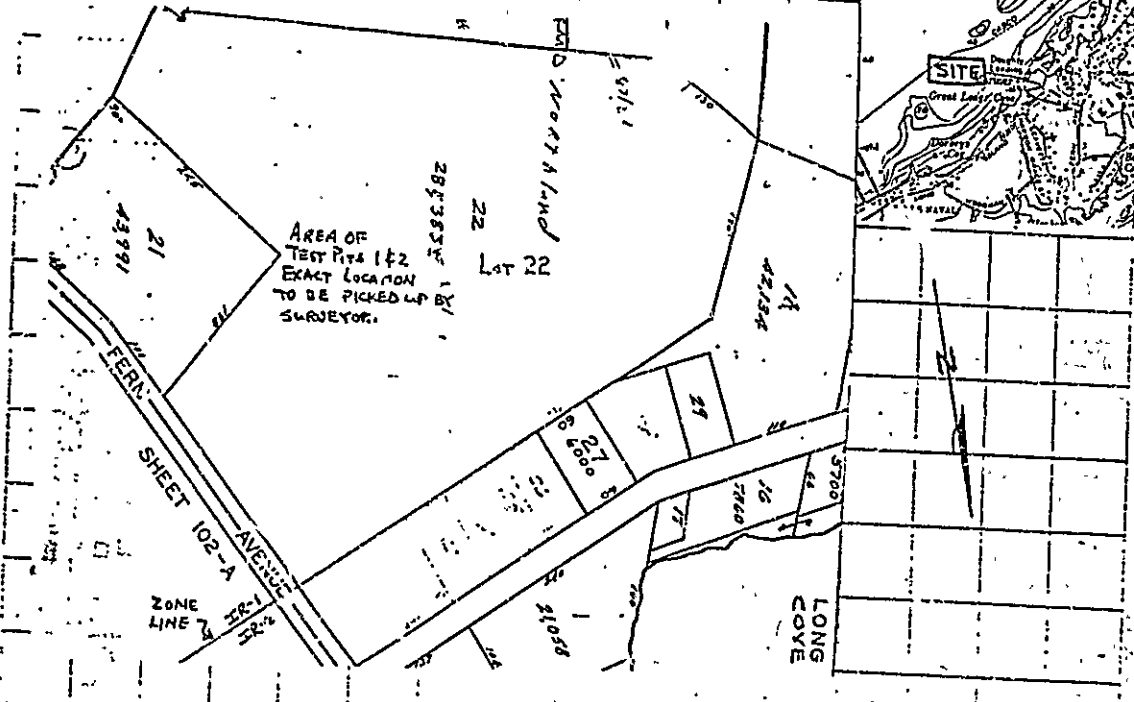
Owners Name

THOMAS JOHNSON

SITE PLAN

APPROX. Scale 1" = 150' PL

SITE LOCATION PLAN (Attach)



## SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP1

Test Pit  Boring

2" FOREST FEAT.

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
	0-4	SANDY LOAM	LOOSE	DARK BROWN
4-10	SANDY LOAM	MOD. FRIABLE	MED. BROWN	NONE
10-13				FEW
13-30	CLAY	FRIABLE	GRAY	
30-50				

ON 6/10	Soil Classification <u>7</u>	Slope <u>3</u>	Limiting Factor <u>15</u>	<input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Manganese Layer <input type="checkbox"/> Barriers
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Observation Hole TP2

Test Pit  Boring

2" FOREST FEAT.

Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
	0-4		LOOSE	DARK BROWN
4-10	SANDY LOAM	MOD. FRIABLE	MED. BROWN	NONE
10-13				FEW
13-30	CLAY	FRIABLE	GRAY	
30-50				

ON 4/27	Soil Classification	Slope <u>3</u>	Limiting Factor <u>18</u>	<input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Manganese Layer <input type="checkbox"/> Barriers
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Site Evaluator or Professional Engineer Signature: William B. Johnston Date: 9/29/87

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

<b>PROPERTY ADDRESS</b>	
Town Or Plantation	PORTLAND LONG ISLAND
Street	FERN AVENUE
Subdivision Lot #	TAX MAP 101 BLOCK G LOT 22
<b>PROPERTY OWNERS NAME</b>	
JOHNSON THOMAS & DEBRA	
Last:	First:
Applicant Name: STEVEN WHITNEY	
Mailing Address of Owner/Applicant (If Different): LONG ISLAND MAINE 04050	

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

Local Plumbing Inspector Signature \_\_\_\_\_ Date Approved \_\_\_\_\_

<p><b>THIS APPLICATION IS FOR:</b></p> <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> NEW SYSTEM</li> <li>2. <input type="checkbox"/> REPLACEMENT SYSTEM</li> <li>3. <input type="checkbox"/> EXPANDED SYSTEM</li> <li>4. <input type="checkbox"/> SEASONAL CONVERSION</li> <li>5. <input type="checkbox"/> EXPERIMENTAL SYSTEM</li> </ol>	<p><b>PERMIT INFORMATION</b></p> <p><b>THIS APPLICATION REQUIRES:</b></p> <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED</li> <li>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</li> <li>3. <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</li> <li>4. <input type="checkbox"/> Requires only Local Plumbing Inspector Approval</li> <li>5. <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>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</li> <li>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternatives Toilet)</li> <li>3. <input type="checkbox"/> ENGINEERED (+2000 gpd)</li> </ol> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <ol style="list-style-type: none"> <li>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</li> <li>5. <input type="checkbox"/> HOLDING TANK</li> <li>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</li> <li>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</li> <li>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</li> <li>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> </ol> <p><b>TYPE OF WATER SUPPLY</b> DRILLED WELL</p>
<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>1. <input type="checkbox"/> BED</li> <li>2. <input type="checkbox"/> CHAMBER</li> <li>3. <input type="checkbox"/> TRENCH</li> <li>4. <input type="checkbox"/> OTHER _____</li> </ol>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</li> <li>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</li> <li>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</li> <li>4. <input type="checkbox"/> OTHER _____ SPECIFY _____</li> </ol>	
<p><b>SIZE OF PROPERTY</b> 6.46 ACRES</p> <p><b>ZONING</b> IR1 &amp; IR2</p>		

<b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b>			
<p><b>TREATMENT TANK</b></p> <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</li> <li>2. <input type="checkbox"/> AEROBIC</li> </ol> <p>SIZE: 1000 GALS.</p>	<p><b>WATER CONSERVATION</b></p> <ol style="list-style-type: none"> <li>1. <input type="checkbox"/> NONE</li> <li>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</li> <li>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> <li>4. <input type="checkbox"/> ALTERNATIVE TOILET</li> </ol> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <ol style="list-style-type: none"> <li>1. <input type="checkbox"/> NOT REQUIRED</li> <li>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)</li> <li>3. <input checked="" type="checkbox"/> REQUIRED</li> </ol> <p>DOSE: 15 GALS</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p>3 BEDROOM CONSERVATIVE 450</p>
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <p>PROFILE: 7   CONDITION: C</p> <p>DEPTH TO LIMITING FACTOR: 15"</p>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <ol style="list-style-type: none"> <li>1. <input type="checkbox"/> SMALL</li> <li>2. <input type="checkbox"/> MEDIUM</li> <li>3. <input checked="" type="checkbox"/> MEDIUM-LARGE</li> <li>4. <input type="checkbox"/> LARGE</li> <li>5. <input type="checkbox"/> EXTRALARGE</li> </ol>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <ol style="list-style-type: none"> <li>1. <input type="checkbox"/> BED _____ Sq. Ft.</li> <li>2. <input checked="" type="checkbox"/> CHAMBER 700 Sq. Ft. <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> H 20</li> <li>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</li> <li>4. <input type="checkbox"/> OTHER: _____</li> </ol>	<p><b>LOW VOLUME TOILET 45</b></p> <p>DESIGN FLOW: 405 (GALLONS/DAY)</p>

**SITE EVALUATOR STATEMENT** \* USED 28 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On JUNE 20 27, 1987 (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. Cochran*  
Site Evaluator Professional Engineer's Signature

0003/4814 SE # 1 PE #  
8/24/89 Date

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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

PORTLAND LONG ISLAND FERN AVE

Street, Road, Subdivision

101-6-22

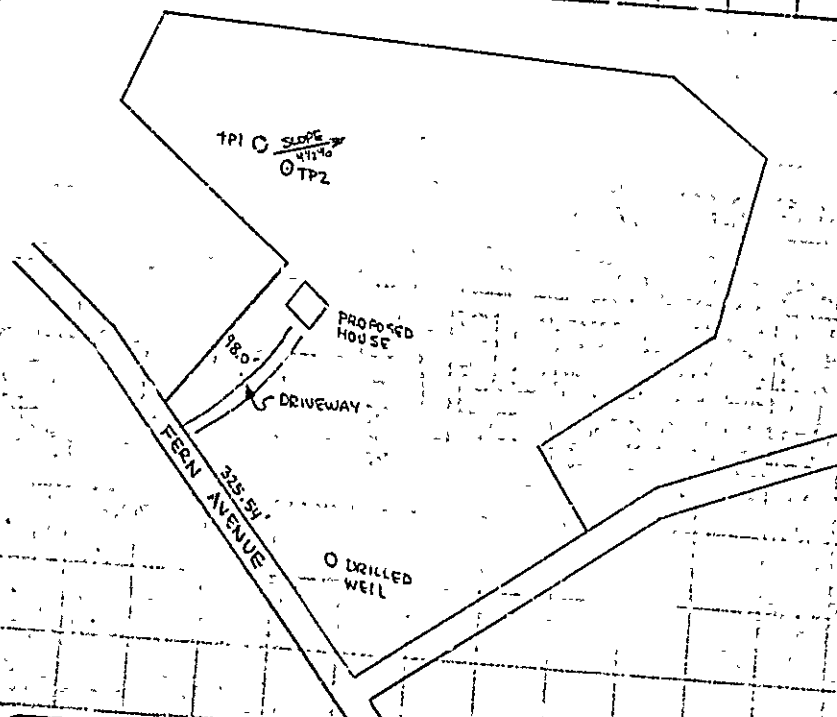
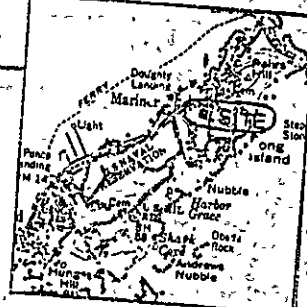
Department of Human Services  
Division of Health Engineering

Owners Name

THOMAS & DEBRA JOHNSON

SITE PLAN

Scale 1" = 150' FL.



## SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole 1  FOREST FEAT.  Test Pit  Boring

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture		Consistency		Color		Mottling	
	Top	Bottom	Top	Bottom	Top	Bottom	Top	Bottom
0-4	SANDY	LOAM	MODERATELY	FRAGILE	MEDIUM	BROWN	NONE	
4-15							FEW	
15-20	CLAY		FRAGILE		GRAY		NONE	
20-30								
30-40								
40-50								

Soil 7 Classification C Slope 4% Limiting Factor 15  
 Ground Water  Rootzone Layer  Bedrock

Observation Hole 2  FOREST FEAT.  Test Pit  Boring

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture		Consistency		Color		Mottling	
	Top	Bottom	Top	Bottom	Top	Bottom	Top	Bottom
0-4	SANDY	LOAM	MODERATELY	FRAGILE	MEDIUM	BROWN	NONE	
4-15							FEW	
15-20								
20-30	CLAY		FRAGILE		GRAY		NONE	
30-40								
40-50								

Soil 7 Classification C Slope 10% Limiting Factor 10  
 Ground Water  Rootzone Layer  Bedrock

*Thomas B. Johnson*  
 Site Evaluator or Professional Engineer's Signature

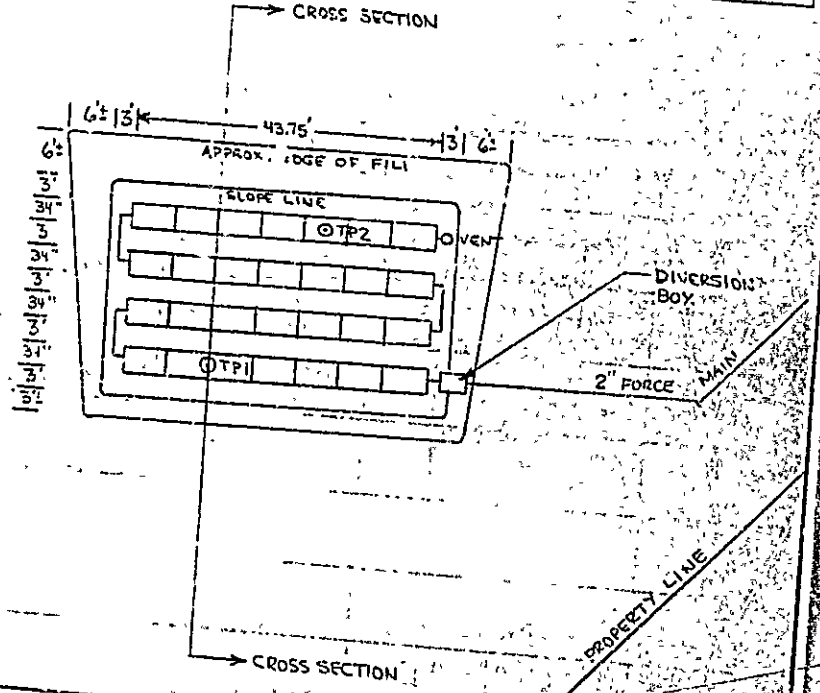
0003/4814  
 SEP 1989

8/24/89  
 Date

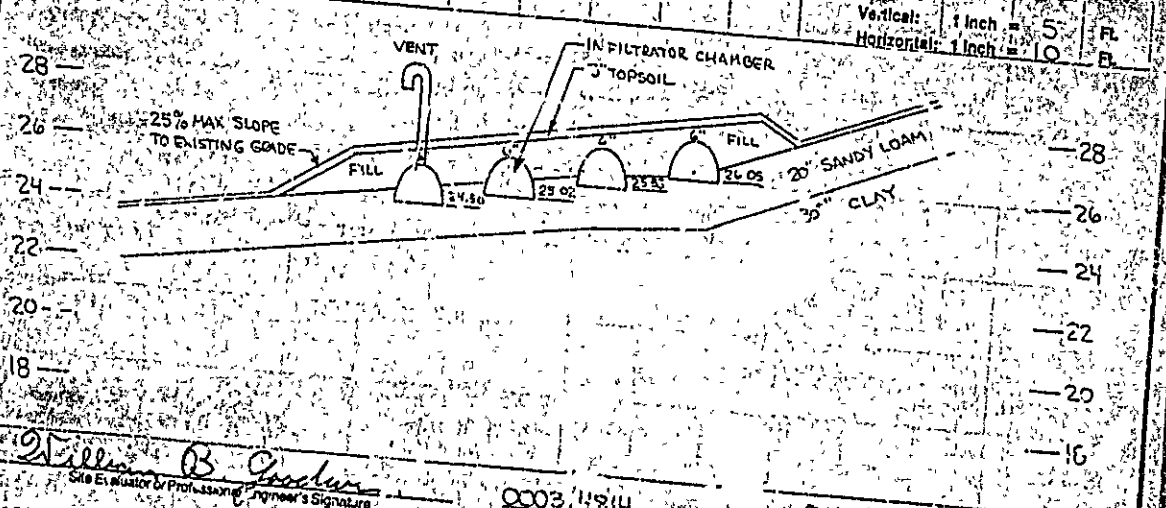


# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation <b>PORTLAND LONG ISLAND</b>	Street, Road, Subdivision <b>FERN AVE 101-6-22</b>	Department of Human Services Division of Health Engineering
SUBSURFACE WASTEWATER DISPOSAL PLAN		Owners Name <b>THOMAS &amp; DEBRA JOHNSON</b>
		Scale 1" = <b>20</b> Ft.



<b>MILL REQUIREMENTS</b>	<b>CONSTRUCTION ELEVATIONS</b>	<b>ELEVATION REFERENCE POINT LOCATION &amp; DESCRIPTION</b>
Depth of Fill (Upslope) <b>17"</b>	Reference Elevation at Bottom of Disposal Area <b>25.47</b>	PK NAIL IN 10" CIRC
Depth of Fill (Downslope) <b>18"</b>	Top of Distribution Lines or Chambers " " "	16' FROM TP2



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

0003/18/14  
S2 #1 PE #

8/24/09  
DMS



# APPLICATION FOR AMENDMENT TO PERMIT

Amendment No. 1  
Portland, Maine, 8/29/90

**PERMIT ISSUED**  
**SEP 7 1990**  
**City Of Portland**

To the INSPECTOR OF BUILDINGS, PORTLAND, MAINE

The undersigned hereby applies for amendment to Permit No. 89/2595 pertaining to the building or structure comprised in the original application in accordance with the Laws of the State of Maine, the Building Code and Zoning Ordinance of the City of Portland, plans and specifications, if any, submitted herewith, and the following specifications:

Location 101-G-G-22 Fern Ave; Long Island Within Fire Limits? \_\_\_\_\_ Dist. No. \_\_\_\_\_  
Owner's name and address Steven Whitney; Box 94 a- Long Island, ME Telephone 04050  
Lessee's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
Contractor's name and address \_\_\_\_\_ Telephone \_\_\_\_\_  
Architect \_\_\_\_\_ Plans filed \_\_\_\_\_ No. of sheets \_\_\_\_\_  
Proposed use of building 1-family dwelling No. families \_\_\_\_\_  
Last use \_\_\_\_\_ No. families \_\_\_\_\_  
Increased cost of work \$45,000. Additional fee \$245.

### Description of Proposed Work

Increased cost of work.

*paid 9.6.90*

### Details of New Work

Is any plumbing involved in this work? \_\_\_\_\_ Is any electrical work involved in this work? \_\_\_\_\_  
Height average grade to top of plate \_\_\_\_\_ Height average grade to highest point of roof \_\_\_\_\_  
Size, front \_\_\_\_\_ depth \_\_\_\_\_ No. stories \_\_\_\_\_ solid or filled land? \_\_\_\_\_ earth or rock? \_\_\_\_\_  
Material of foundation \_\_\_\_\_ Thickness, top \_\_\_\_\_ bottom \_\_\_\_\_ cellar \_\_\_\_\_  
Material of underpinning \_\_\_\_\_ Height \_\_\_\_\_ Thickness \_\_\_\_\_  
Kind of roof \_\_\_\_\_ Rise per foot \_\_\_\_\_ Roof covering \_\_\_\_\_  
No. of chimneys \_\_\_\_\_ Material of chimneys \_\_\_\_\_ Lining \_\_\_\_\_  
Framing lumber -- Kind \_\_\_\_\_ Dressed or full size? \_\_\_\_\_  
Corner posts \_\_\_\_\_ Sills \_\_\_\_\_ Girt or ledger board? \_\_\_\_\_ Size \_\_\_\_\_  
Girders \_\_\_\_\_ Size \_\_\_\_\_ Columns under girders \_\_\_\_\_ Size \_\_\_\_\_ Max. on centers \_\_\_\_\_  
Studs (outside walls and carrying partitions) 2x4 16" O.C. Bridging in every floor and flat roof span over 8 feet.  
Joists and rafters: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
On centers: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_  
Maximum span: 1st floor \_\_\_\_\_, 2nd \_\_\_\_\_, 3rd \_\_\_\_\_, roof \_\_\_\_\_

Approved \_\_\_\_\_

Signature of Owner *Steven Whitney*

Approved \_\_\_\_\_

Inspector of Buildings

INSPECTION COPY -- WHITE  
APPLICANT'S COPY -- YELLOW

FILE COPY -- PINK  
ASSESSOR'S COPY -- GOLDEN

[7] *Mr. Adonato*

CITY OF PORTLAND, MAINE  
Department of Building Inspection



# Certificate of Occupancy

LOCATION Fern Ave. - Long Island 101-G-22

Date of Issue 5/4/93

Issued to Debra A. & Thomas G. Johnsons

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. 89/2595, 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 dwelling

Limiting Conditions:

1. First floor only
2. Finish interior trim

This certificate supersedes  
certificate issued.

Approved

5/4/93  
(Date)

Inspector

*[Signature]*  
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 lease for one dollar.

PERMIT # 000505 TOWN OF Portland BUILDING PERMIT APPLICATION

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

MAP # \_\_\_\_\_ LOT# \_\_\_\_\_

Owner: Dalia A. & Thomas G. Johnson *Steve Whitney*

Address: PO Box 100, Portland 04050

LOCATION OF CONSTRUCTION: 101-G-22 Fern Avenue, Long Island

CONTRACTOR: Steven Whitney SUBCONTRACTORS: 766-2772

ADDRESS: Home - Call when ready - 766-2557

Est. Construction Cost: \$16,000 Type of Use: single family

Past Use: \_\_\_\_\_  
 Building Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ Sq Ft \_\_\_\_\_ # Stories \_\_\_\_\_ Lot Size \_\_\_\_\_  
 Is Proposed Use: \_\_\_\_\_ Seasonal \_\_\_\_\_ Condominium \_\_\_\_\_ Apartment \_\_\_\_\_  
 Conversion - Explain: MINOR MINOR SITE PLAN and to construct new

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE 1 site plans, 1 construction plan  
 Residential Buildings Only: \_\_\_\_\_  
 # Of Dwelling Units: \_\_\_\_\_ # Of New Dwelling Units: \_\_\_\_\_ and 200 form submitted.

Foundation:  
 1. Type of Soil: \_\_\_\_\_  
 2. Set Backs - Front \_\_\_\_\_ Rear \_\_\_\_\_ Side(s) \_\_\_\_\_  
 3. Footings Size: \_\_\_\_\_  
 4. Foundation Size: \_\_\_\_\_  
 5. Other: \_\_\_\_\_

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

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

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

For Official Use Only

Date: Aug 31, 1989

Inside Fire Limits \_\_\_\_\_  
 Bldg Code \_\_\_\_\_  
 Time Limit \_\_\_\_\_  
 Estimated Cost: \$10,000  
 Value/Structure \_\_\_\_\_  
 Fee: \$70.00 - building fee

Subdivision: Yes \_\_\_\_\_ No \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Permit Expiration: \_\_\_\_\_  
 Ownership: \_\_\_\_\_ Public: \_\_\_\_\_

**PERMIT ISSUED**  
SEP 10 1989

Ceiling:  
 1. Ceiling Joists Size: \_\_\_\_\_  
 2. Ceiling Strapping Size \_\_\_\_\_ Spacing \_\_\_\_\_  
 3. Type Ceiling: \_\_\_\_\_  
 4. Insulation Type \_\_\_\_\_ Size \_\_\_\_\_  
 5. Ceiling Height: \_\_\_\_\_

Roof:  
 1. Truss or Rafter Size \_\_\_\_\_ Span \_\_\_\_\_  
 2. Sheathing Type \_\_\_\_\_ Size \_\_\_\_\_  
 3. Roof Covering Type \_\_\_\_\_  
 4. Other: \_\_\_\_\_

Chimney: \_\_\_\_\_  
 Type: \_\_\_\_\_ Number of Fire Places \_\_\_\_\_

Heating: \_\_\_\_\_  
 Type of Heat: \_\_\_\_\_

Electrical:  
 Service Entrance Size: \_\_\_\_\_ Smoke Detector Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Plumbing:  
 1. Approval of soil test if required: \_\_\_\_\_  
 2. No. of Tubs or Showers: 2 \_\_\_\_\_  
 3. No. of Sinks: 2 \_\_\_\_\_  
 4. No. of Lavatories: 2 \_\_\_\_\_  
 5. No. of Other Fixtures: 2 \_\_\_\_\_

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

Zoning:  
 District: T-1 Street Frontage Req: \_\_\_\_\_ Provided \_\_\_\_\_  
 Required Setbacks: Front \_\_\_\_\_ Back \_\_\_\_\_ Side \_\_\_\_\_  
 Review Required: \_\_\_\_\_  
 Zoning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Planning Board Approval: Yes \_\_\_\_\_ No \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditional Use: \_\_\_\_\_ Variance \_\_\_\_\_ Site Plan \_\_\_\_\_  
 Shore and Floodplain Mgmt: \_\_\_\_\_ Special Exception \_\_\_\_\_  
 Other: \_\_\_\_\_ (Explain) \_\_\_\_\_  
 Date Approved: 9/10/89

Permit Received By: Nancy Grossman  
 Signature of Applicant: Steve Whitney Date: Aug 31 1989  
 Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**PERMIT ISSUED**  
**WITH LETTER**

White Tax Assessor \_\_\_\_\_ Yellow: GPCOG \_\_\_\_\_ White Tag - CEO \_\_\_\_\_ Copyright GPCOG 1987.

PLOT PLAN

Aug 4, 1993

CGO.

conditions - finish trim interior  
② 1st floor only.



A. Rowe

FEES (Breakdown From Front)

Base Fee \$ 25.00  
Subdivision Fee \$ \_\_\_\_\_  
Site Plan Review Fee \$ 50.00 - minor, minor  
Other Fees \$ 45.00  
(Explain) \_\_\_\_\_  
Late Fee \$ \_\_\_\_\_

Type

Inspection Record

Date

Type	Inspection Record	Date
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____
_____	_____	____/____/____

COMMENTS 9-29-89. Fo. supports OK. AQ sub - structure OK

Signature of Applicant *[Signature]* signed as agent for owner Date Aug 31 1989



CITY OF PORTLAND, MAINE

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

DEPARTMENT OF PLANNING & URBAN DEVELOPMENT

September 18, 1989

P. SAMUEL HOFFSES, CHIEF  
INSPECTION SERVICES DIVISION

Debra and Thomas Johnson  
P.O. Box 100  
Portland, Maine 04050

Re: 101-G-22 Fern Avenue, Long Island, Maine

Dear Mr. and Mrs. Johnson:

Your application to construct a single family dwelling has been reviewed and a permit is herewith issued subject to the following requirements:

No certificate of occupancy will be issued until all requirements of this letter are met.

Site Plan Review Requirements

Public Works	Approved	S. Harris
Inspection Services	Approved	W. Giroux

Building Code Requirements

Please read and implement items 1, 6, 7 and 9 of the attached Building Permit Report.

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

Sincerely,

  
P. Samuel Hoffses  
Chief of Inspection Services

cc: S. Harris, Public Works  
P. Njehoff, Public Works  
W. Giroux, Zoning

**CITY OF PORTLAND, MAINE**  
ZONING BOARD OF APPEALS



MERRILL S. SELTZER  
Chairman

JOHN C. KNOX  
Secretary

PETER F. MORELLI  
THOMAS F. JEWELL  
DAVID L. SILVERNAIL  
MICHAEL E. WESTORT  
CHRISTOPHER DINAN

Lot 101-G-22  
Fern Avenue  
Long Island

May 12, 1989

Mr. Steven Whitney  
Box 100  
Long Island, Maine 04050

Dear Mr. Whitney:

This is in reference to your application for a building permit for a 20 foot by 20 foot fish shed on the property owned by Debra and Thomas G. Johnson on Fern Avenue, Long Island.

We have a plot plan, but we can not identify the proposed fish shed or its location with setbacks which are required by the Zoning Ordinance from the plan which you submitted.

We must know the precise location in order to determine whether it is proposed to be within the shoreland zone. We must also receive some statement to the effect that the proposed building will not become a residence or dwelling. This should be initiated by the owner of the proposed fish shed.

Sincerely,  
*Warren J. Turner*  
Warren J. Turner  
Administrative Assistant

*OK new*

cc: P. Samuel Hoffses, Chief, Inspections Services  
Arthur Addato, Code Enforcement Officer  
William D. Giroux, Zoning Enforcement Officer

**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

**Processing Form**

Applicant Steven Whitney 766-2772  
 Mailing Address Box 100, Portland 04050  
 Proposed Use of Site single family  
 Acreage of Site / Ground Floor Coverage 6 / 650 sq ft

Date Aug 31, 1989  
 Address of Proposed Site 101-G-22 Fern Avenue, Long Island  
 Site Identifier(s) from Assessors Maps 101-G-22  
 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  
 Proposed Number of Floors 2  
 Total Floor Area 1,050 sq ft

Other Comments: **\*\* REVISED SITE PLAN \*\***

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 ARE. (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: OK WRTN 9-18-89

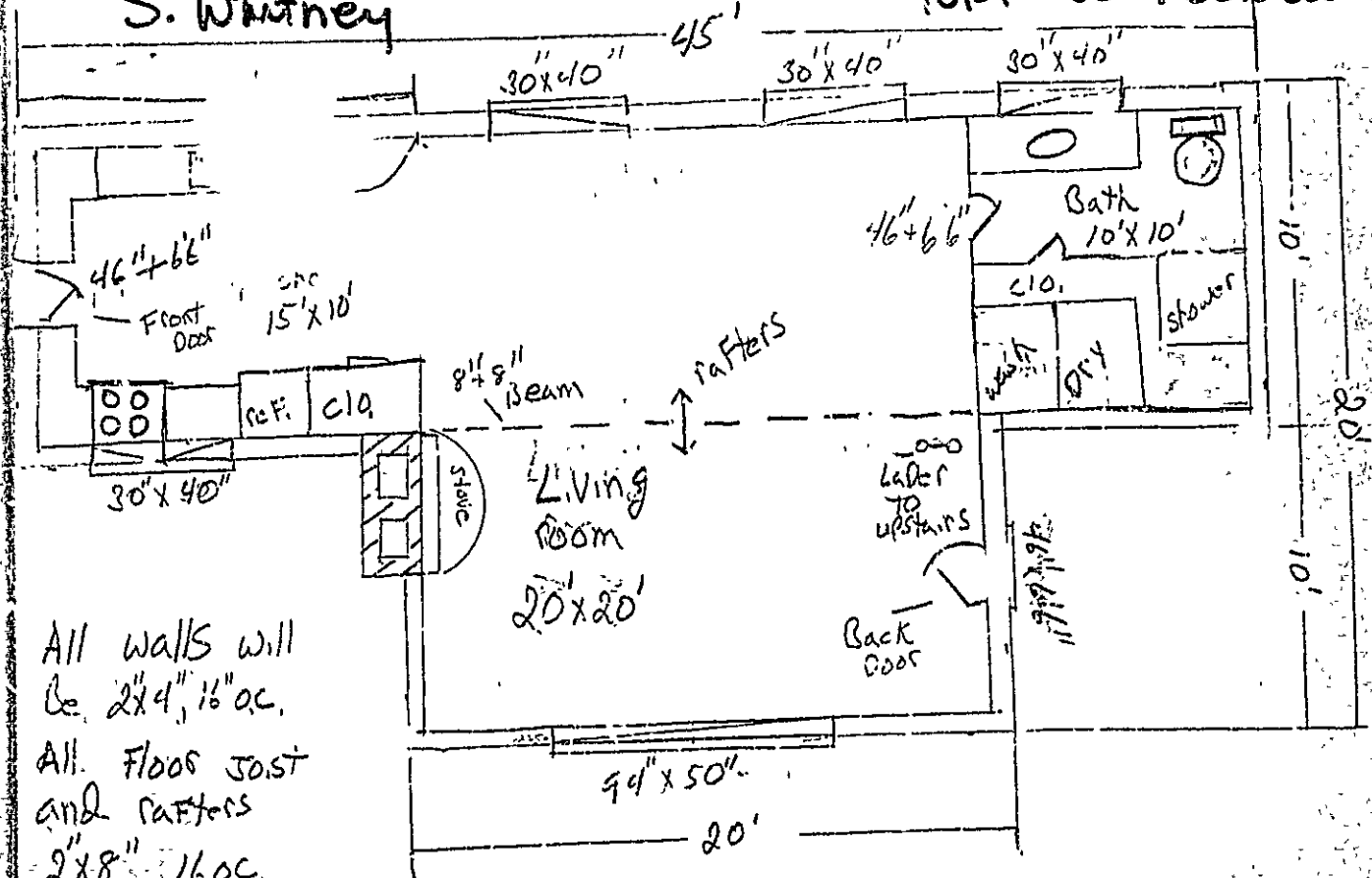
SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL



S. Whitney

101-G-22 Fern Ave. Ltd



All walls will be 2"x4", 16" o.c.

All floor joist and rafters 2"x8", 16" o.c.

The 2nd Floor Floor will have an 8"x8" support beam diagonal to rafters

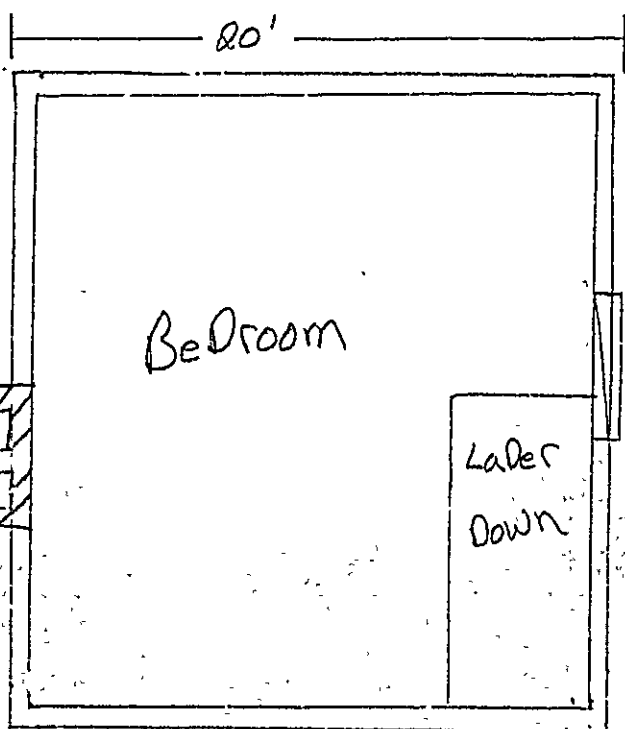
1ST FOOT

RECEIVED

AUG 31 1989

DEPT. OF BUILDING INSPECTIONS  
CITY OF PORTLAND

101-G-22 Fern Ave Ltd



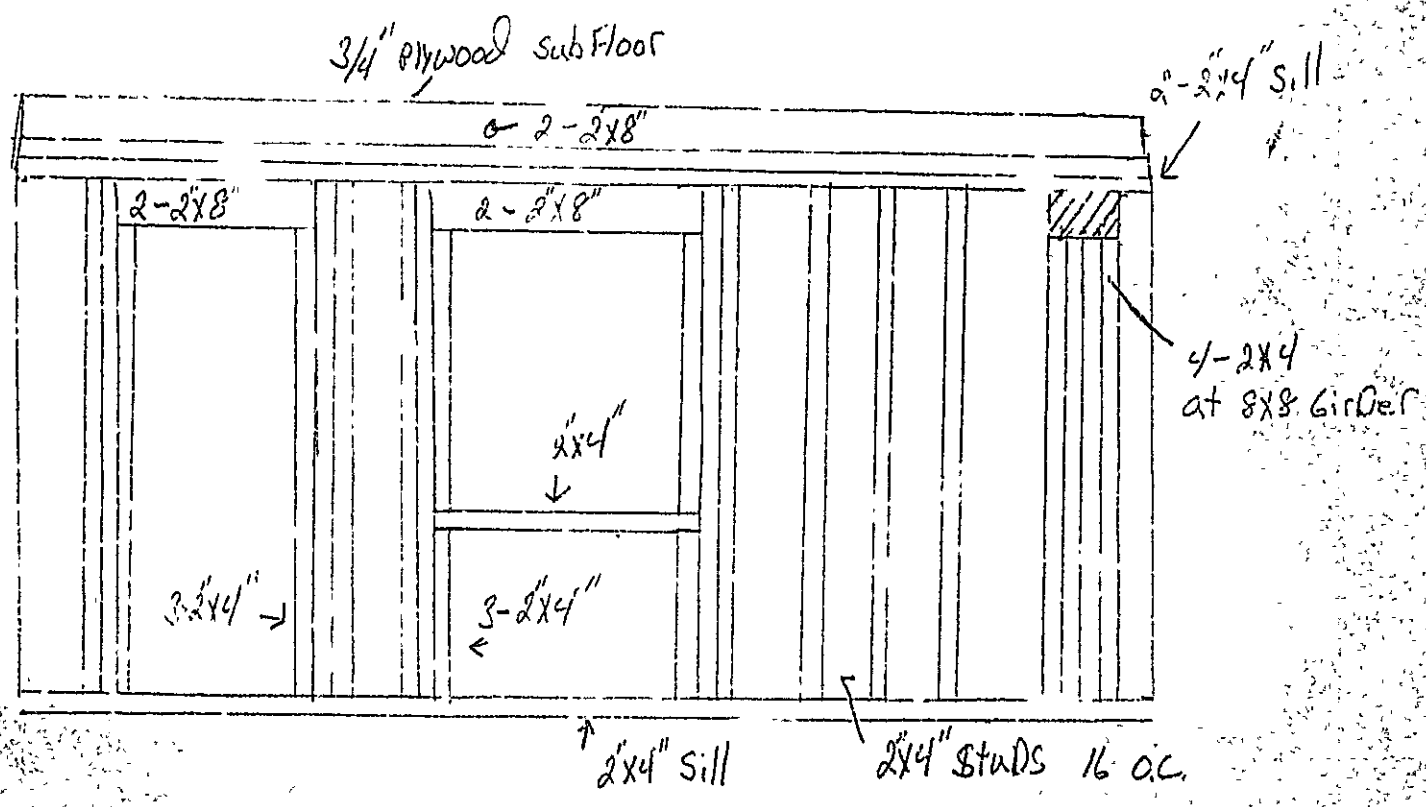
Bedroom

20'

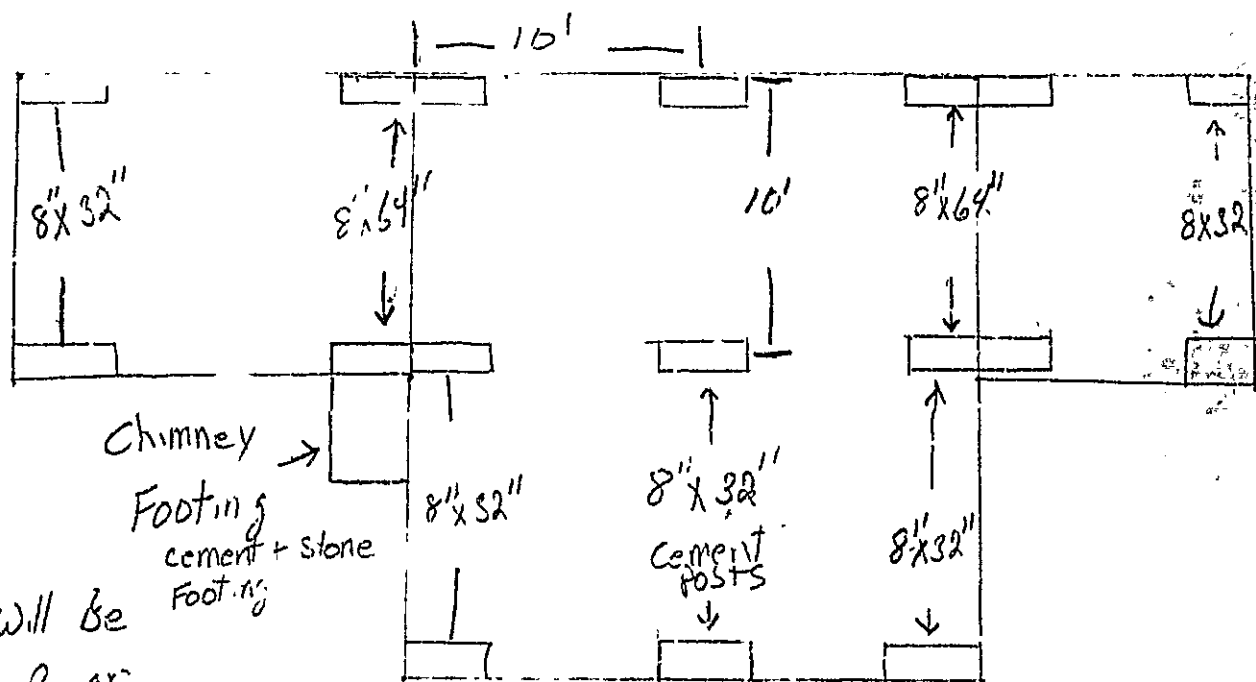
Ladder  
Down

30' x 10'

2ND FLOOR



walls



Post will be  
42" Deep or  
to the Lodge  
and be Bolted  
to the Floor Joists  
All Footings will  
be 10' Feet apart a/c.

Four Postion Plan

BUILDING PERMIT REPORT

101-G-22 Fern Ave. L.I. DATE: 18/SEPT/89  
FOR PERMIT: Single Family Dwelling

BUILDING OWNER: Debrai Thomas Johnson

CONTRACTOR: "

PERMIT APPLICANT: "

APPROVED: \*1\*6\*7\*9 DENIED:

CONDITION OF APPROVAL ~~OR PERMIT~~:

- 1.) Before concrete for foundation is placed, approvals from Public Works and Inspection Services must be obtained.
- 2.) Precaution must be taken to protect concrete from freezing.
- 3.) All vertical openings shall be enclosed with construction having a fire rating of at least one(1) hour, including fire doors with self-closers.
- 4.) 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.
- 5.) 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.
- \*6.) 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).
- \*7.) In addition to any automatic fire alarm system required by Sections 1018.3.5, a minimum of one single station smoke detector shall be installed in each guest room, suite of 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).

**CITY OF PORTLAND, MAINE**

**SITE PLAN REVIEW**

**Processing Form**

Applicant Steven Whitney ~~XABXZXX~~ 766-2274

Date May 18, 1989

Box 100, Portland 04050

XB Lot #22, Fern Avenue, Long Island

Mailing Address single family

Address of Proposed Site 101-G-22

Proposed Use of Site 6

Site Identifier(s) from Assessors Maps TR-1

Acreage of Site / Ground Floor Coverage 400 sq ft

Zoning of Proposed Site TR-1

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

Proposed Number of Floors 2

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

Total Floor Area 800 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 \_\_\_\_\_

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CONDITIONS SPECIFIED BELOW

REASONS SPECIFIED BELOW

REASONS:

OK WJA 9-18-89

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL