

PERMIT # 002564 TOWN OF Portland BUILDING PERMIT APPLICATION MAP # _____ LOT# _____

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

Owner: Joseph McDonough - 773-5713

Address: 77 Birchwood Drive, Portland, ME 04102

LOCATION OF CONSTRUCTION 10A-B-19 Eastern Ave., Long Island, ME.

CONTRACTOR: Frank Piffath SUBCONTRACTORSX 839-6573

ADDRESS: 25 Elm St., Gorham, ME 04038

Est. Construction Cost: \$104,000.00 Type of Use: Single Family

Past Use: new house

Building Dimensions 10A W 35' S F. 1,960 # Stories: _____ Lot Size: A acres

Is Proposed Use: S.F. Seasonal _____ Condominium _____ Apartment _____

Conversion - Explain To construct single family.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Of Dwelling Units _____ # Of New Dwelling Units _____

Foundation:

1. Type of Soil: _____
2. Set Backs - Front _____ Re- _____ 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 _____ Span(s) _____
5. Bracing: Yes _____ No _____
6. Corner Posts Size _____
7. Insulation Type _____ Size _____
8. Sheathing Type _____ Size _____
9. Siding Type _____ Weather Exposure _____
10. Masonry Materials _____
11. Metal Materials _____

Interior Walls:

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

For Official Use Only

Date August 28, 1989 Subdivision: Yes / No _____
 Name _____
 Inside Fire Limits _____ Lot _____
 Bldg Code _____ Block _____
 Time Limit _____ Permit Expiration: _____
 Estimated Cost \$104,000.00 Ownership: _____ Public _____ Private _____
 Value/Structure _____
 Fee \$500.00

Ceiling:

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

Roof:

1. Truss or Rafter Size _____ Span _____
2. Sheathing Type _____ Size _____
3. Roof Covering Type _____
4. Other _____

Chimneys:

Type: _____ Number of Fire Places _____

Heating:

Type of Heat: _____

Electrical:

Service Entrance Size: _____ Smoke Detector Required Yes _____ No _____

Plumbing:

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

Swimming Pools:

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

Zoning:

District _____ 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 _____ Subdivision _____
 Shore and Floodplain Mgmt. _____ Special Exception _____
 Other (Explain) _____

Date Approved: OK W.P. Piffath 9-8-89

Permit Received By Joyce M. Rinaldi

Signature of Applicant Joseph McDonough Date Aug 28, 1989

Signature of CEO _____ Date _____

Inspection Dates _____

17 Arthur Addate

PLOT PLAN



FEES (Breakdown From Front)

Base Fee \$ 590.00 _____

Subdivision Fee \$ _____

Site Plan Review Fee \$ _____

Other Fees \$ _____

(Explain) _____

Lot Fee \$ _____

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

COMMENTS *9-29-99 - For my parts OK - Sub structure OK. etc.*

Signature of Applicant *Joseph M. Pomyk* Date *Aug 28, 1999*

BUILDING PERMIT REPORT

ADDRESS: 104-B-19 Eastern Ave - Long Island DATE: 9/8/89

REASON FOR PERMIT: to construct single family dwelling

BUILDING OWNER: Joseph McDonough

CONTRACTOR: FRANK PIFFATH

PERMIT APPLICANT: owner

APPROVED: XXX with conditions DENIED: _____

CONDITION OF APPROVAL OR DENIAL. (condition # 1, 2, 6, 7, 9)

- * 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 (0.53m²). 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 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).

over

#7 continued

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.

8.) 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 (102 mm) above the garage floor. The door opening protectives shall be 1 3/4-inch solid core wood doors or approved equivalent.

* 9.) A guardrail system located near the open side of deck or elevated walking surfaces shall be constructed. Guards in buildings of Use Group R-3 shall be not less than 36 inches in height. Open guards shall have intermediate rails, balusters or other construction such that a sphere with a diameter of 6 inches cannot pass through any opening.

10.) Section 25-135 of the Municipal Code for the City of Portland states: "No person or utility shall be granted a permit to excavate or open any street or sidewalk from the time of November 15 of each year to April 15 of the following year.

11.) The builder of a facility to which Section 4594-C of the Maine State Human Rights Act, Title 5 M.R.S.A. refers, shall obtain a certification from a design professional that the plans of the facility meet the standards of construction required by this section. Prior to commencing construction of the facility, the builder shall submit the certification to the Division of Inspection Services.

Sincerely,

P. Samuel Hoffses

P. Samuel Hoffses
Chief of Inspection Services

/el
11/16/88

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form

Joseph McDonouth - 773-5713

August 28, 1989

Applicant

Date

77 Birchwood Drive, Portland, ME 04102

104-B-10 Eastern Ave., Long Island, ME

Mailing Address

Address of Proposed Site

Single Family

104-B-10

Proposed Use of Site

Site Identifier(s) from Assessors Maps

4 acres / 1,950 S.F.

1R-1

Acreage of Site / Ground Floor Coverage

Zoning of Proposed Site

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

Proposed Number of Floors 1 1/2

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

Total Floor Area 2,365 S.F.

Planning Board Action Required: () Yes () No

Other Comments: _____

Date Dept. Review Due: _____

PUBLIC WORKS DEPARTMENT REVIEW

(Date Received) _____

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

REASONS: _____

(Attach Separate Sheet if Necessary)

Stephen K. Harris 9/8/89
 SIGNATURE OF REVIEWING STAFF/DATE

PUBLIC WORKS DEPARTMENT COPY

CITY OF PORTLAND, MAINE

SITE PLAN REVIEW

Processing Form.

Applicant <u>Joseph McDorouth - 773-5713</u>	Date <u>August 28, 1989</u>
Mailing Address <u>77 Birchwood Drive, Portland, ME 04102</u>	Address of Proposed Site <u>104-B-10 Eastern Ave., Long Island, ME</u>
<u>Single Family</u>	<u>104-B-10</u>
Proposed Use of Site <u>4 acres / 1,960 S.F.</u>	Site Identifier(s) from Assessors Maps <u>IR-1</u>
Acreage of Site / Ground Floor Coverage	Zoning of Proposed Site
Site Location Review (NEP) Required: () Yes () No	Proposed Number of Floors <u>1 1/2</u>
Board of Appeals Action Required: () Yes () No	Total Floor Area <u>2,365 S.F.</u>
Planning Board Action Required: () Yes () No	

Other Comments: _____

Permit 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 COVER 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
COMPLIES																	
COMPLIES CONDITIONALLY																	CONDITIONS SPECIFIED BELOW
DOES NOT COMPLY																	REASONS SPECIFIED BELOW

REASONS: OK WRT 9-7-89

SIGNATURE OF REVIEWING STAFF/DATE

BUILDING DEPARTMENT—ORIGINAL

Applicant: Joe McDonough

Date: 8-28-89

Address:

Assessors No.: 104-B-19

CHECK LIST AGAINST ZONING ORDINANCE

Date - 8-28-89

Zone Location - IR-1

Interior or corner lot -

Use - single

Sewage Disposal - approved

Rear Yards - OK 30'

Side Yards - 25' + OK

Front Yards - OK 30'

Projections - OK

Height - 1 1/2 story

Lot Area - 4+ acres

Building Area - 84x50 OK

Area per Family - single

Width of Lot - 160' + OK

Lot Frontage - 160' + OK

Off-street parking - OK

Loading Rays - N/A

Site Plan -

Shoreland Zoning -

Flood Plains -



CITY OF PORTLAND, MAINE
Department of Building Inspection

Certificate of Occupancy

LOCATION Eastern Ave.: Long Island 104-B-19

Issued to Joseph McDonough

Date of Issue 3/17/90

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. 87/2564 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 dwellings

Limiting Conditions:

This certificate supersedes
certificate issued

approved:

8-7-90 *William A. ...*
(Date) (Inspector)

William A. ...
Inspector of B. ...

Notice: This certificate identifies lawful use of building or premises and is not to be removed from owner's files when property changes hands. Copy will be furnished to owner or lessee for one dollar.



APPLICATION FOR PERMIT
 DEPARTMENT OF BUILDING INSPECTIONS SERVICES
 ELECTRICAL INSTALLATIONS

Date 2/12/90, 19
 Receipt and Permit number 01094

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: Long Island - 104-B-019 Eastern Ave.

OWNER'S NAME: Joseph E. McDougough ADDRESS: same

	FEES
OUTLETS:	
Receptacles _____ Switches _____ Plugmold _____ ft. TOTAL <u>31-60</u>	<u>5.00</u>
FIXTURES: (number of)	
Incandescent <u>36</u> Fluorescent _____ (not strip) TOTAL <u>36</u>	<u>5.60</u>
Strip Fluorescent _____ ft.	
SERVICES:	
Overhead _____ Underground <input checked="" type="checkbox"/> Temporary _____ TOTAL amperes <u>200</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) <u>4</u>	<u>4.00</u>
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 _____ <u>1</u> _____	
Wall Ovens _____ _____ Dishwashers _____ <u>1</u> _____	
Dryers _____ <u>1</u> _____ Compactors _____ _____	
Fans _____ _____ Others (denote) _____ _____	
TOTAL <u>5</u>	<u>7.50</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 <input checked="" type="checkbox"/> _____	<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>27.60</u>

INSPECTION:
 Will be ready on _____, 19____; or Will Call
 CONTRACTOR'S NAME: Seacoast Electric
 ADDRESS: Fore St ; Portland, ME
 TEL: 774-6179
 MASTER LICENSE NO.: #03088 SIGNATURE OF CONTRACTOR: [Signature]
 LIMITED LICENSE NO.: _____

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

10 11-8-19

Eastern Ave LLC

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

PLUMBING APPLICATION

PROPERTY ADDRESS

Town Or Plantation: Portland Me.

Street Subdivision Lot #: 104-B-19 Long Island

PROPERTY OWNERS NAME

Last: Mr. Donough First: Joseph

Applicant Name: Black Eulce

Mailing Address of Owner/Applicant (If Different): 21 Adelbert St. Portland

PORTLAND 3771 TOWN COPY

Date Permitted: 11-19-90 \$ 27 FEE Double Fee Charged

Joseph Donough
Local Plumbing Inspector 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.

Black Eulce
Signature of Owner/Applicant Date: 11/19

Caution: Inspection Required

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

DP 11-16-1990
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"/> NEW 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 type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>10,2,2,2,7</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
OR HOOK-UP to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District HOOK-UP to an existing subsurface wastewater disposal system	1	Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	2	Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.	1	Clothes Washer
PIPING RELOCATION, of sanitary lines, drains, and piping without new fixtures		Crease/Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
Number of Hook-Ups & Relocations		Other: _____	1	Water Heater
\$ Hook Up & Relocation Fee		Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
			8	Fixtures (Subtotal) Column 2
			9	Total Fixtures
			\$	Fixture Fee
			\$	Hook-Up & Relocation Fee
			\$	Permit Fee (Total)

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

PERMIT # 002564

TOWN OF Portland

BUILDING PERMIT APPLICATION

MAP #

LOT#

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

Owner: Joseph McDonough - 773-5713

Address: 77 Birchwood Drive, Portland, ME 04102

LOCATION OF CONSTRUCTION 104-B-19 Eastern Ave., Long Island, ME

CONTRACTOR: Frank Piffath ~~SUBCONTRACTORS~~ 839-6573

ADDRESS: 25 Elm St., Gorham, ME 04038

Est. Construction Cost: \$104,000.00 Type of Use: Single Family

Part Use: new house

Building Dimensions 1.64 W 35' Sq. Ft. 1,950 # Stories: 1 Lot Size: 4 acres

Is Proposed Use: S.F. Seasonal Condominium Apartment

Conversion - Explain To construct single family.

COMPLETE ONLY IF THE NUMBER OF UNITS WILL CHANGE

Residential Buildings Only:

Old Dwelling Units # Of New Dwelling Units

Foundation:

- Type of Soil:
- Set Backs - Front Rear Side(s)
- Footings Size:
- Foundation Size:
- Other

Floor:

- Sills Size: Sills must be anchored.
- Girder Size:
- Lally Column Spacing: Size:
- Joists Size: Spacing 16" O.C
- Bracing Type: Size:
- Floor Sheathing Type: Size:
- Other Material:

Exterior Walls:

- Studding Size Spacing
- No. windows
- No. Doors
- Header Sizes Span(s)
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- Corner Posts Size
- Insulation Type Size
- Sheathing Type Size
- Siding Type Weather Exposure
- Masonry Materials
- Metal Materials

Interior Walls:

- Studding Size Spacing
- Header Size Span(s)
- Wall Covering Type
- Fire Wall if required
- Other Materials

White-Tax Assesor

Yellow-GPCOG

White Tag -CEO

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For Official Use Only

Date August 28, 1989

Subdivision Yes / No

Inside Fire Limits

Name

Bldg Code

Lot

Time Limit

Block

Estimated Cost \$104,000.00

Permit Expiration:

Value/Structure

Ownership:

Public

Fee \$590.00

Private

Ceiling:

- Ceiling Joists Size:
- Ceiling Strapping Size Spacing
- Type Ceilings:
- Insulation Type
- Ceiling Height:

PERMIT ISSUED

Roof:

- Truss or Rafter Size Span Size
- Sheathing Type
- Roof Covering Type
- Other

SEP 11 1989

City of Portland

Chimneys:

- Type: Number of Fire Places

Heating:

- Type of Heat:

Electrical:

- Service Entrance Size: Smoke Detector Required Yes No

Plumbing:

- Approval of soil test if required Yes No
- No. of Tubs or Showers
- No. of Flushes
- No. of Lavatories
- No. of Other Fixtures

Swimming Pools:

- Type: Square Footage
- Pool Size:
- Must conform to National Electrical Code and State Law.

Zoning:

- District Street Frontage Req. Provided
- Required Setbacks: Front Back Side Side

Review Required:

- Zoning Board Approval: Yes No Date:
- Planning Board Approval: Yes No Date:
- Conditional Use: Variance Site Plan Subdiv'ion
- Shore and Floodplain Mgmt Special Exception
- Other (Explain)
- Date Approved

Permit Received By Joyce M. Rinaldi

Signature of Applicant Joyce M. Rinaldi

Date Aug 28, 1989

Signature of CEO

Date

Inspection Dates

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: PORTLAND LONG ISLAND

Street: EASTERN AVENUE
Subdivision/Lot #: TAX MAP 104 BLOCK 2 LOTS 19

PROPERTY OWNERS NAME

Last: McDONOUGH First: JOSEPH

Applicant Name: JOSEPH McDONOUGH

Mailing Address of Owner/Applicant (if Different): 77 BIRCHWOOD DRIVE PORTLAND MAINE 04103

PORTLAND PERMIT # 3,450 TOWN COPY

Local Plumbing Inspector Signature: *[Signature]*

FEE: \$ 11,000.00 Double Fee Charged

L.P.I. # 110217

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: *Joseph McDonough* Date: 6-7-89

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: *[Signature]* Date Approved: JG 16 1990

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM *Application OK*

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 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

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED: -- --

THE FAILING SYSTEM IS:

- PFD
- CHAMBER
- TRENCH
- OTHER

DISPOSAL SYSTEM TO SERVE:

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

TYPE OF WATER SUPPLY

WELL

SIZE OF PROPERTY: 1/2 ACRES

ZONING: IR1

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC Regular Low Profile
- AEROBIC

SIZE: 1000 CALS.

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: 15 GALS

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

5 BEDROOM CONSERVATIVE 750

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: 6 CONDITION: C

DEPTH TO LIMITING FACTOR: 20

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

- BED _____ Sq Ft
- CHAMBER 500* Sq Ft REGULAR H 20
- TRENCH _____ L ear Ft
- OTHER: _____

LOW VOLUME TOILET - 75

DESIGN FLOW: 675 (GALLONS/DAY)

SITE EVALUATOR STATEMENT * USED 20 INFILTRATOR CHAMBERS IN TRENCH CONFIGURATION SITE EVALUATION WAIVED BY LOCAL OPTION

On JUNE 5 1989 (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. Gardner* SE# / PE# 0003 / 4814 Date: 6/7/89

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

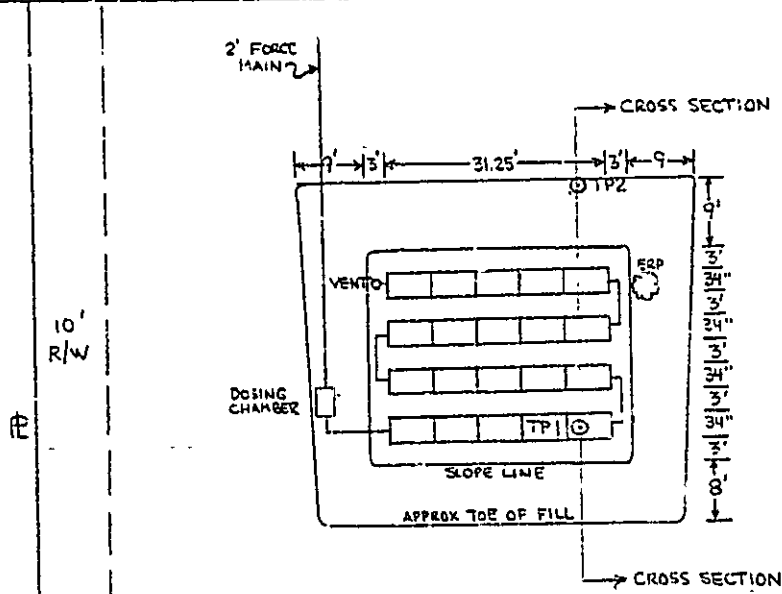
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation PORTLAND LONG ISLAND	Street, Road, Subdivision EASTERN AVE 104-3-11	Owners Name JOSEPH McDONOUGH
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SUBSURFACE WASTEWATER DISPOSAL PLAN

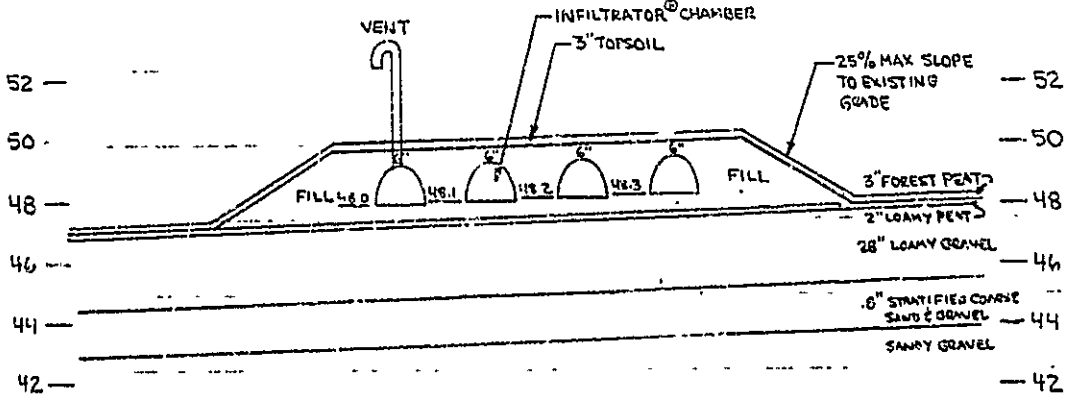
Scale 1" = 20' FL.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) <u>28</u>	Reference Elevation is <u>50.00</u>	PK NAIL IN CLUMP OF MAPLES
Depth of Fill (Downslope) <u>29</u>	Bottom of Disposal Area SEE X-SECTION	20' WESTERLY OF TP1
	Top of Distribution Lines or Chambers SEE X-SECTION	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 FL
Horizontal: 1 Inch = 10 FL



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

0003/4814
SE/PE #

6/7/89
Date

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