

## Single Family AGENT SYNOPSIS



MLS#: 940979 Status: Current  
431 Atlantic Highway, Northport, ME 04849

Kickout: No  
List Price: \$ 485,000  
Original Price: \$ 485,000  
List Date: 07/08/09

Directions: From Belfast Rte One South towards Camden 1/2 mile past Northport Diner on right.

## Neigh'd/Assoc:

## Assoc. Fee /Mo:

Style: Cape  
Foundation Sz +/-:  
Source of Square Footage: Seller, Appraisal  
Year Built +/-: 1797  
Surveyed: No  
Flood Zone: No  
WtrFrt: No  
Color:  
Seasonal: No  
Water Body:  
Amt Wtr Frntge +/-:  
General/Land Information  
#Rooms: 10 #Bedrooms: 4 #Baths: F = 3 3/4 = 0 1/2 = 0  
SqFt Fin. Above Grade +/-: 3,104 SqFt Fin. Below Grade +/-: 0 SqFt Finished Total +/-: 3,104  
Lot Size (Ac +/-): 41.500  
Zone: Res  
Road Frontage +/-: 582  
WF Shared +/-:  
WF Owned +/-:

## Interior Information

	KT	DN	LR	FR	MBR	2BR	3BR	4BR	5BR	OT
Level:	1	1	1	1	1	2	2	2	2	2
Size:										
Cathedral Cell:	No									
Skylight:	No									
Fireplace:				1						
Wood Stove:	No									
Wood Stove HU:	No									
Appliances:	Dishwasher, Dryer, Range-Gas, Refrigerator, Washer									

## Remarks

Reportedly the oldest home in Northport, 4 or 5 bedroom Antique Cape redone to reflect it's period charm. Stream, Pond, 2 seasonal Cottages with their own well and septic and other out buildings all on 41.5 acres between Camden and Belfast. Broker Owned.

## Property Features - NOTE: Check Detail Reports for complete list of Features.

Site: Level, Open, Pasture/Field, Well Landscaped, Wooded	Construction: Post & Beam
Driveway: Paved	Basement Info: Dirt, Full, Unfinished, Bulkhead
Parking:	Foundation Mbrls: Fieldstone
Location: Near Shopping, Rural	Exterior: Clapboard, Wood Siding
Uses: Commercial, Residential	Roof: Shingle
Restrictions: No Restrictions	Heat System: Baseboard, Hot Water, Multi-Zones
Rec. Water:	Heat Fuel: Oil
Roads: Paved, Public	Water Heater: Electric
Transportation:	Cooling: No Cooling
Electric: 110 Volts, 220 Volts	Equipment:
Gas: Bottled	Floors: Fully Carpeted, Vinyl, Wood
Sewer: Private, Septic Existing On Site	Veh. Storage: 3 Cars, Auto Door Opener, Detached, Storage Above
Water: Well Existing On Site	Amenities: 1ST Floor Bedroom, Attic, Laundry-1st Floor, Master Bedroom w/Bath, Out Building
	Access, Amenities:

## Tax/Deed/Community Information

Book/Page/Partial: 1481/199/No	Map/Block/Lot: R6/60	Tax Amount/Yr: \$ 2,117 / (2009)
Tax Reduction: Yes	School: SAD 34	

## Off Market Information

Expiration Date: 12/08/09

## Listing Contact Information

List Office: Really of Maine 1264	Email: marchas@acadia.net	Office: 207-338-6800
List Agent: Charles Hunter 001300	CoL Agt Ph:	LAgt Ph: 207-338-6800 Ext.:15
CoList Agt:		LAgt Cell: 207-462-5285
CoList Email:		CoL Cell:
Show Intr: Call Listing Broker, Listing Agent Must Accompany, Notice Required, Sign On Property	SAF/BAF/TBF:	1 2.50% / 2.500%
Virtual Tour:		

Internal Rmks  
Contingency:

Information Printed by: Charles Hunter 001300 CH

Printed: 07/08/09



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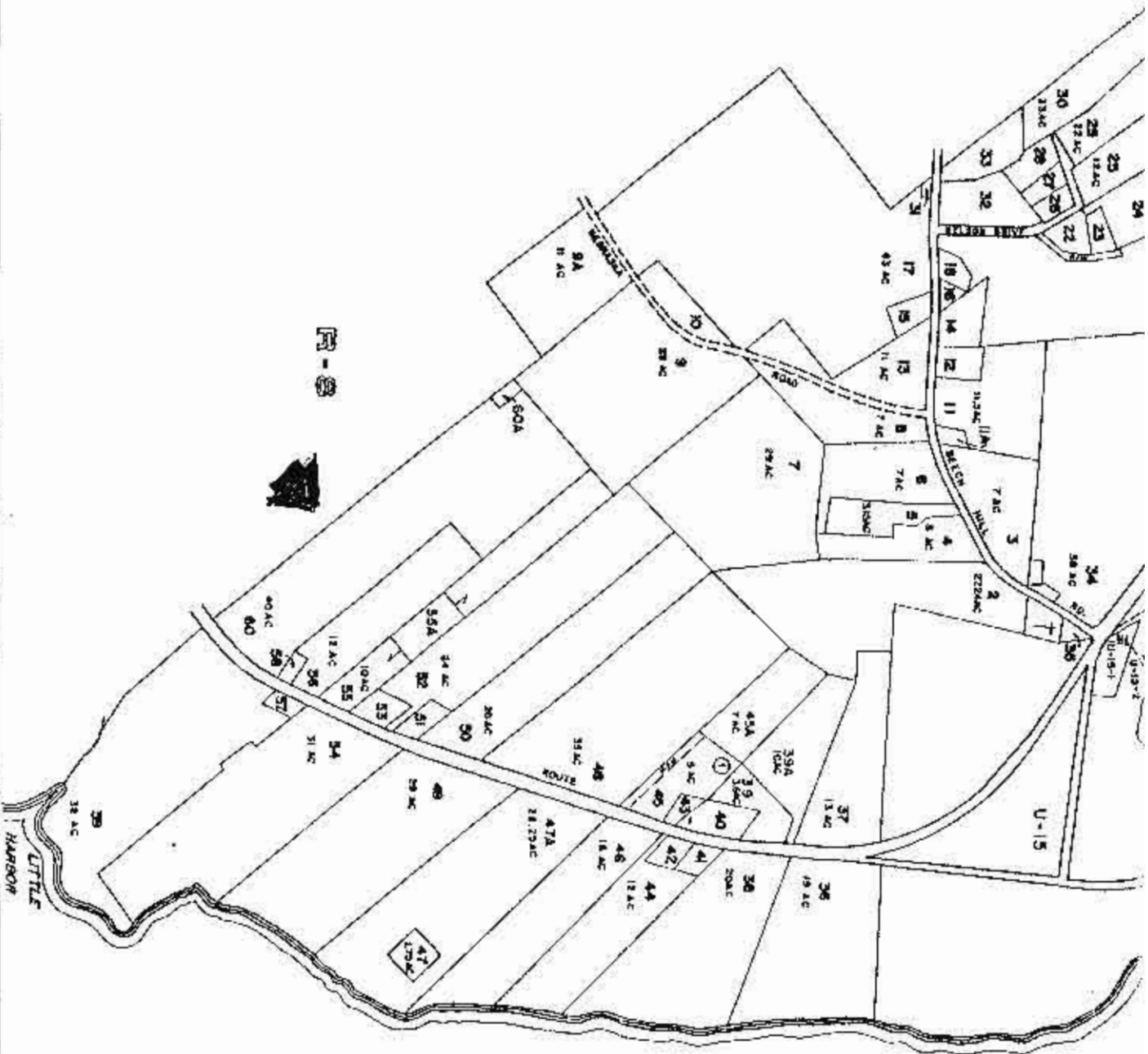
LEGEND  
 1. LOT AREA  
 2. DISTANCE  
 3. DIRECTION

1/2  
 1/4  
 1/8

# NORTHPORT

MAINE

PROPERTY MAP



PENOBSCOT BAY

SCALE IN FEET  
 0 500 1000

NO. PARCELS: 20,43,18

R-6

## **RED GABLES: PENDLETON--CARVER HOMESTEAD, NORTHPORT, MAINE**

431 Atlantic Highway (old Route One) is a traditional Maine Cape on almost 42 acres, originally owned by pioneer farmers and innkeepers as a coach stop and later a boarding house for islanders overnighting on the mainland. It was returned to a private residence before WWII and held in the family until the present owners bought it.

The present owners have made numerous loving and careful improvements to keep the feeling of a traditional period home, comfortable and spacious, with modernized electric and hot water systems, double glazed windows, new siding and roof. There is a newer three-car garage and workshop, a hot topped yard and driveway, a small glass greenhouse, tool shed and well house for a water pump used to irrigate large vegetable gardens and semi dwarf fruit trees. A little stream with waterfalls runs into a small trout pond and out to the sea at Little Harbor.

Two updated motel cabins at the top of a large meadow behind the house are rented seasonally all summer (see virtual tour), with room for several more by updating the modern septic system and pump house. The cabins are reached by a well groomed gravel road which runs up from the hot topped driveway. Renters - and their pets - enjoy the abundant wildlife. Eagles and osprey fly overhead, song birds return each year to raise families; wild turkeys, foxes and an occasional muskrat or beaver may be seen.

The property has 552 feet of frontage onto the main coastal road, with easy access to Belfast, Camden and points inland. Mature trees and the home's very thick walls (and double glazing) reduce daytime commuting traffic noises, leaving only enjoyment of the smell of the nearby ocean and later, the incredible nighttime display of stars. The road is easily accessible in winter months, as it is plowed hourly from early morning.

An ideal location for a B and B! Great setup for more cabins, as a campground ...and your imagination...

### **Details of house**

- Plenty of closet space
- Two 1000 gallon septic tanks, pumped out 2008
- Large earthen cellar under all but the den; excellent drainage and cool in winter
- Four zones of hot water heating (supplemental electric baseboard heat in back of house above den)
- Fast-recovery hot water system
- Gas powered log fireplace in den
- Gardens well maintained. Professionally landscaped front patio and entrance
- Outbuildings
- 2 wells, 1 dug, 2 drilled

## SELLER'S PROPERTY DISCLOSURE

Under Maine Law, certain information must be made available to buyers prior to or during preparation of an offer. This statement has been prepared to assist prospective buyers in evaluating this property. This disclosure is not a warranty of the condition of the property and is not part of any contract between the Seller and any buyer. The Seller authorizes the Listing Broker in this transaction to disclose the information in this statement to other real estate licensees and to prospective buyers of this property. The Seller agrees to notify the Listing Broker promptly of any changes in the information and this form will be appropriately changed with an amendment date. Inspections are highly recommended.

**NOTE: DO NOT LEAVE ANY QUESTIONS BLANK. WRITE N/A (NOT APPLICABLE) OR UNKNOWN IF NEEDED.**

PROPERTY LOCATED AT: 431 Atlantic Hwy, Northport, ME 04849

### SECTION I. WATER SUPPLY

TYPE OF SYSTEM: ☐ Public ☒ Private ☐ Seasonal ☐ Unknown  
☒ Drilled ☐ Dug ☐ Other

MALFUNCTIONS: Are you aware of or have you experienced any malfunctions with the (public/private/other) water system?

Pump: ☐ Yes ☒ No ☐ N/A

Quantity: ☐ Yes ☒ No ☐ Unknown

Quality: ☐ Yes ☐ No ☐ Unknown

If YES to any question, please explain in the comment section below or with attachment.

WATER TEST: Have you had the water tested? ☒ Yes ☐ No

If YES: Date of most recent test: 2004 Are test results available? ☐ Yes ☒ No

To your knowledge, have any test results ever been reported as unsatisfactory or satisfactory with notation? ☐ Yes ☒ No

If YES, are test results available? ☐ Yes ☒ No

What steps were taken to remedy the problem?

• IF PRIVATE:

INSTALLATION: Location: Front of house

Installed BY: UNK

DATE of Installation: UNK

What is the source of your information: Seller

USE: Number of Persons currently using system? 2

Does system supply water for more than one household? ☐ Yes ☒ No ☐ Unknown

COMMENTS:

### SECTION II. WASTE WATER DISPOSAL

TYPE OF SYSTEM: ☐ Public ☒ Private ☐ Quasi-Public ☐ Unknown

• IF PUBLIC OR QUASI-PUBLIC:

Have you experienced any problems such as line or other malfunctions? ☐ Yes ☒ No

What steps were taken to remedy the problem?

• IF PRIVATE:

TANK: ☒ Septic Tank ☐ Holding Tank ☐ Cesspool ☐ Other:

Tank Size: ☐ 500 Gal. ☒ 1000 Gal. ☐ Unknown ☐ Other:

Tank Type: ☒ Concrete ☐ Metal ☐ Unknown ☐ Other:

Location: North Side of house OR ☐ Unknown Date of Installation: Unk

Date of Last Servicing: 2007

Name of Company Servicing Tank: Interstate

Date Last Pumped: 2006

Have you experienced any malfunctions? ☐ Yes ☒ No

If yes, give the date and describe the problem: N/A

LEACH FIELD: ☒ Yes ☐ No ☐ Unknown

If YES: Location: Front Yard

Date of Installation of leach field: 2007

Installed By: James Hanson

Date of Last Servicing: 2007

Name of Service Company: James Hanson

Have you experienced any malfunctions? ☐ Yes ☒ No

If yes, give the date and describe the problem & what steps were taken to remedy:

Does Seller have records of the septic system design indicating the number of bedrooms the system was designed for? ☒ Yes ☐ No

If YES, is it available? Yes

SOURCE OF INFORMATION: Seller

COMMENTS: New Septic System installed in back of property for cottages

IS SYSTEM LOCATED IN A SHORELAND ZONE? ☐ Yes ☒ No ☐ Unknown

Is System located in a Coastal Shoreland Zone? ☐ Yes ☒ No ☐ Unknown

8/2008

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Buyer(s) Initials

Seller(s) Initials

CH MH

## SECTION III. HEATING SYSTEM(S)/SOURCE(S)

Heating System(s)/Source(s)	SYSTEM 1	SYSTEM 2	SYSTEM 3	SYSTEM 4
TYPE(S)	HotWaterBaseboard	Electric		
Age of system(s)/source(s)	2004			
Name of company that services system(s)/source(s)	Maritime Energy			
Date of most recent service call	2009			
Annual consumption per system/ source (i.e., gallons, kilowatt hours, cord(s))	1130 gals oil			
Malfunction per system(s)/ source(s) within past 2 years	None			
Other pertinent information		Upstairs Bedroom		

Buried Oil Supply Line: ☐ Yes ☒ No ☐ UnknownSleeved: ☒ Yes ☐ NoChimney(s) Lined: ☐ Yes ☐ No ☒ Unknown

Age: Unk

Last Cleaned: unk

Is more than one heat source vented through one flue? ☐ Yes ☒ No ☐ UnknownHad a chimney fire: ☐ Yes ☒ No ☐ UnknownHas chimney been inspected? ☐ Yes ☐ No ☒ Unknown; If Yes, when: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

## SECTION IV. HAZARDOUS MATERIAL

The licensee is disclosing that the Seller is making representations contained herein.

## A. UNDERGROUND STORAGE TANKS - Current or previously existing:

Are there now, or have there ever been, any underground storage tanks on your property?

☐ Yes ☐ No ☒ UnknownIF YES: Are tanks in current use? ☐ Yes ☐ No

IF NO above: How long have tank(s) been out of service? \_\_\_\_\_

What materials are, or were, stored in the tank(s)? \_\_\_\_\_

Age of tank(s): \_\_\_\_\_ Size of tank(s): \_\_\_\_\_

Location: \_\_\_\_\_

Have you experienced any problems such as leakage? \_\_\_\_\_

Are tanks registered with the Dept. of Environmental Protection? \_\_\_\_\_

☐ Yes ☐ No ☐ Unknown

If tanks are no longer in use, have tanks been abandoned according to D.E.P.? \_\_\_\_\_

☐ Yes ☐ No ☐ Unknown

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

## B. ASBESTOS - Current or previously existing:

• as insulation on the heating system pipes or duct work? \_\_\_\_\_

☐ Yes ☒ No ☐ Unknown• in the siding? ☐ Yes ☒ No ☐ Unknown

• in the roofing shingles? \_\_\_\_\_

☐ Yes ☒ No ☐ Unknown• in flooring tiles? ☐ Yes ☒ No ☐ Unknown

• other: \_\_\_\_\_

☐ Yes ☐ No ☐ Unknown

IF YES: Source of Information: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

## C. RADON/AIR - Current or previously existing:

Has the property been tested? \_\_\_\_\_

☐ Yes ☒ No ☐ Unknown

IF YES: Date: \_\_\_\_\_

By: \_\_\_\_\_

Results: \_\_\_\_\_ If applicable, What remedial steps were taken? \_\_\_\_\_

Has the property been tested since remedial steps? \_\_\_\_\_

☐ Yes ☐ No ☐ UnknownAre test results available? ☐ Yes ☐ No

Results &amp; Comments: \_\_\_\_\_

## D. RADON/WATER - Current or previously existing:

Has the property been tested? \_\_\_\_\_

☐ Yes ☐ No ☒ Unknown

IF YES: Date: \_\_\_\_\_

By: \_\_\_\_\_

Results: \_\_\_\_\_ If applicable, What remedial steps were taken? \_\_\_\_\_

Has the property been tested since remedial steps? \_\_\_\_\_

☐ Yes ☐ No ☐ UnknownAre test results available? ☐ Yes ☐ No

Results &amp; Comments: \_\_\_\_\_

## E. LEAD-BASED PAINT/PAIN T HAZARDS - Current or previously existing: (Note: Lead-based paint is most commonly found in homes constructed prior to 1978; See EPA Disclosure brochure/form and Maine Lead Warning for more information)

Is there now or has there ever been lead-based paint and/or lead-based paint hazards on the property?

☐ Yes ☐ No ☐ Unknown☒ Unknown but possible due to age

IF YES, describe location and the basis for the determination: \_\_\_\_\_

Do you know of any records or reports pertaining to such lead-based paint or lead-based paint hazards: \_\_\_\_\_

☐ Yes ☒ No

IF YES, describe: \_\_\_\_\_

Are you aware of any cracking, peeling or flaking paint? \_\_\_\_\_

☒ Yes ☐ No

COMMENTS: Exterior being painted

8/2008

Page 2 of 3 - SPD Buyer(s) Initials \_\_\_\_\_

Seller(s) Initials

DJB MSK



## F. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: ☐ Yes ☐ No ☒ Unknown

OTHER: \_\_\_\_\_

LAND FILL: ☐ Yes ☐ No ☒ UnknownRADIOACTIVE MATERIAL: ☐ Yes ☐ No ☒ Unknown

Buyers are encouraged to seek information from professionals regarding any specific issue or concern.

## SECTION V. GENERAL INFORMATION

Is the property subject to or have the benefit of any encroachments, easements, rights-of-way, leases, rights of first refusal, life estates, private road/homeowner associations or restrictive covenants? ☒ Yes ☐ No ☐ UnknownIF YES: Explain: Left hand side of property has a 1 rod ROW to rear of property.What is your source of information: Seller and deedAre there any tax exemption or reduction for this property for any reason including but not limited to: Tree Growth, Open Space and Farmland, Veteran's, Homestead Exemption, Blind, Working Waterfront? ☒ Yes ☐ No ☐ UnknownIF YES: Explain: Homestead• Leased Equipment (e.g., propane tank, hot water heater, satellite dish): Type: None• Year Built: 1797How long has Seller owned it: 15 years• Roof: Year Built - Structure: 1779Age - Shingles: 1996Moisture or leakage: None

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

• Foundation/Basement: Sump Pump: ☐ Yes ☒ No ☐ Unknown

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

Moisture or leakage since you owned the property: ☒ Yes ☐ No ☐ UnknownComments: Basement sits on ledgeKnowledge of prior moisture or leakage: ☒ Yes ☐ No ☐ UnknownComments: water seeps through• Mold: Has the property ever been tested for mold? ☐ Yes ☒ No ☐ UnknownIf YES, are test results available? ☐ Yes ☐ No• Electrical: ☐ Fuses ☒ Circuit Breaker ☐ Other: \_\_\_\_\_ ☐ Unknown• Has the property been surveyed? ☐ Yes ☒ No ☐ Unknown If YES, is the survey available? ☐ Yes ☐ No• Manufactured Housing: Mobile Home - ☐ Yes ☒ No Modular: ☐ Yes ☒ No• KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: Property is in great shape, all new windows and insulation installed 2007,

Seller shall be responsible and liable for any failure to provide known information regarding known material defects to the Buyer.

ATTACHMENTS EXPLAINING CURRENT PROBLEMS, PAST REPAIRS OR ADDITIONAL INFORMATION IN ANY SECTION IN DISCLOSURE: ☐ Yes ☒ No

## SECTION VI. ADDITIONAL INFORMATION

Property is Broker Owned.

As Sellers, we have provided the above information and represent that all information is correct. To the best of our knowledge, all systems and equipment, unless otherwise noted on this form, are in operational condition.

Neither Seller nor any Broker makes any representations as to the applicability of, or compliance with, any codes of any sort, whether state, municipal, federal or any other, including but not limited to fire, life safety, building, electrical or plumbing.

SELLER

Charles Hunter

SELLER

Margaret J Hunter

July 8, 2009

DATE

July 8, 2009

DATE

I/We have read and received a copy of this disclosure, the arsenic in wood fact sheet, the arsenic in water brochure, and understand that I/we should seek information from qualified professionals if I/we have questions or concerns.

BUYER

DATE

BUYER

DATE



## Residential Real Property Disclosure Statement

### MAINE WARNING: LEAD-BASED PAINT HAZARDS

Any residence built before 1978 may contain lead sufficient to poison children and sometimes adults. LEAD poisoning poses a particular risk if you are pregnant or may become pregnant. LEAD poisoning in young children may produce permanent neurological damage, including learning disabilities, a reduced intelligence quotient (IQ), impaired memory and behavioral problems such as attention deficit hyperactive disorder and a propensity for violence.

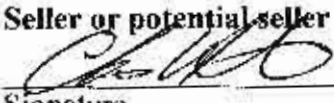
Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. The seller of any interest in real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.

The only way to know with certainty whether lead-based paint hazards are present on the property is to test the property for the presence of lead.

#### Acknowledgement of State Disclosure Statement.

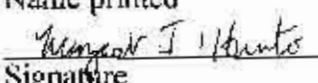
The signature below acknowledges that the seller or potential seller has disclosed to me information about lead-based paint hazards as required by 22 M.R.S.A. Section 1328. This acknowledgement does not constitute a waiver of any rights.

**Seller or potential seller**

  
Signature

7/8/09  
Date

**Charles Hunter**  
Name printed

  
Signature

7/8/09  
Date

**Margaret J Hunter**  
Name printed

**Purchaser or potential purchaser**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name printed

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Name printed

**Acknowledgement of federal disclosure of information  
on Lead-Based Paint and/or Lead-Based Paint Hazards**

**Lead Warning Statement**

*Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems, and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real property is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspections in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paint hazards is recommended prior to purchase.*

**Seller's Disclosure**

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) \_\_\_\_\_ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

\_\_\_\_\_  
\_\_\_\_\_  
(ii) ☒ Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the housing.

(b) Records and reports available to the seller (check (i) or (ii) below):

(i) \_\_\_\_\_ Seller has provided the purchaser with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

\_\_\_\_\_  
\_\_\_\_\_  
(ii) ☒ Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

  
NAT



**Purchaser's Acknowledgement (initial)**

(c) \_\_\_\_\_ Purchaser has received copies of all information listed above.


(d) \_\_\_\_\_ Purchaser has received the pamphlet *Protect Your Family from Lead in Your Home*

(e) Purchaser has (check (i) or (ii) below):

(i) \_\_\_\_\_ received a 10-day opportunity (or mutually agreed upon period) to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards; or


(ii) \_\_\_\_\_ waived the opportunity to conduct a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.

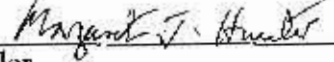
**Agent's Acknowledgement (initial)**

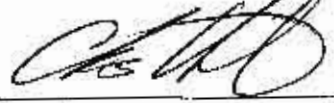
(f)  Agent has informed the seller of the seller's obligations under 42 U.S.C.4852d and is aware of his/her responsibility to ensure compliance.

**Certification of Accuracy**

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

 \_\_\_\_\_ 07/08/2009  
Seller Date  
Charles Hunter

 \_\_\_\_\_ 07/08/2009  
Seller Date  
Margaret J Hunter

\_\_\_\_\_  
Purchaser Date  
 \_\_\_\_\_ 07/08/2009  
Agent Date  
Charles Hunter

\_\_\_\_\_  
Purchaser Date  
\_\_\_\_\_  
Agent Date

This form is provided in connection with the PROPERTY LOCATED AT  
431 Atlantic Hwy, Northport, ME 04849

08991

## WARRANTY DEED

I, MALCOLM M. CARVER of Lincolnville, County of Waldo, State of Maine, for consideration paid, grant to CHARLES HUNTER and MARGARET J. HUNTER, both of Morrill, County of Waldo, State of Maine, whose mailing address is RRL, Box 1435, Morrill, Maine 04952, as Joint Tenants, with Warranty Covenants, a certain lot or parcel of land situated in NORTHPORT, County of Waldo, State of Maine, together with any building thereon, more particularly bounded and described in 1981 as follows, to wit:

"Beginning on the Northerly bound of the Atlantic Highway at the Southeast corner of the Orcutt place; thence North 22 1/2° West 166 rods more or less to a cedar post beside a large rock; thence North 67 1/2° East 54 rods to a cedar stake in stones; thence South 22 1/2° East 61 3/4 rods, more or less, to an iron pipe in a pile of stones at the Northeast corner of land of W. H. Sprague; thence South 67 1/2° West 20 rods to an iron pipe in a pile of stones at the Northwest corner of said Sprague; thence South 22 1/2° East 92 rods more or less along land of W. H. Sprague and Herbert Sprague to the Northerly bound of the Atlantic Highway; thence Westerly along Northerly bound of said Highway 35 1/4 rods more or less to the point of beginning. Said lot contains 42 acres, more or less.

The premises above described being all and the same as were conveyed by Sumner M. Pendleton et als to Stella Reba Carver by warranty deed dated June 3, 1943 and recorded in the Waldo County Registry of Deeds in Book 423, at Page 311. The Grantor herein acquired his title by devise of the Last Will and Testament of Stella Reba Carver, see Waldo County Probate Court, Docket No. 21538; also see Quit-claim Deed from Peter M. Pendleton, et al to Malcolm M. Carver, dated June 8, 1981 and recorded in the Waldo County Registry of Deeds.

EXCEPTING AND RESERVING from the foregoing so much of the same as was conveyed to Patricia Pendleton Uehara from the Grantor herein by deed dated June 8, 1981 and recorded in the Waldo County Registry of Deeds."

MEANING AND INTENDING to convey and hereby conveying the same premises described in a deed from Malcolm M. Carver to Malcolm M. Carver and Ruth K. Carver, dated September 28, 1981, recorded November 30, 1981 in the Waldo County Registry of Deeds in Book 794, Page 562. Malcolm M. Carver being the surviving joint tenant, Ruth K. Carver having been deceased since October 18, 1990.

WITNESS my hand and seal this

25<sup>th</sup> day of August, 1994.

Witness

Malcolm M. Carver

STATE OF MAINE  
COUNTY OF WALDO, SS.

August 25<sup>th</sup>, 1994

Then personally appeared the above-named Malcolm M. Carver and acknowledged the foregoing instrument to be his free act and deed.

Before me

*Edmund M. [Signature]*

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services  
Division of Health Engineering, 10 SHS  
(207) 287-5672 Fax: (207) 287-3165

## PROPERTY LOCATION

City, Town, or Plantation: NORTHPORT  
Street or Road: 431 ATLANTIC HWY  
Subdivision, Lot #:

NORTHPORT PERMIT # 1616 APPLICANTS COPY

Date Permit Issued: 7/24/07 9:15 ☐ FEE ☐ Double Fee Charged  
Local Plumbing Inspector Signature: [Signature] LPI # 16118

## OWNER/APPLICANT INFORMATION

Name (last, first, MI): HUNTER CHARLIE ☒ Owner ☐ Applicant  
Mailing Address of Owner/Applicant: 431 ATLANTIC HWY  
NORTHPORT, ME 04849  
Daytime Tel. #: 462-5285

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.

Municipal Tax Map # K6 Lot # 60

## OWNER OR APPLICANT STATEMENT

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

## CAUTION: INSPECTION REQUIRED

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

Signature of Owner or Applicant

Date

[Signature]  
Local Plumbing Inspector Signature

7/24/07  
1st date approved  
7/24/07  
2nd date approved

## PERMIT INFORMATION

<b>TYPE OF APPLICATION</b> <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced: <u>TRENCH</u> Year installed: <u>OLD</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> <input type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input checked="" type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<b>DISPOSAL SYSTEM COMPONENTS</b> <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input checked="" type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components
<b>SIZE OF PROPERTY</b> <u>42</u> <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	<b>DISPOSAL SYSTEM TO SERVE</b> <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>4</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

<b>TREATMENT TANK</b> <input type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000 GAL.</u> Ex.	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>1200</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. Increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet	<b>DESIGN FLOW</b> <u>360</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN <u>3 / A(II) / 1</u> at Observation Hole # <u>1</u> Depth <u>19</u> " of Most Limiting Soil Factor	<b>DISPOSAL FIELD SIZING</b> <input type="checkbox"/> 1. Small—2.0 sq. ft. / gpd <input type="checkbox"/> 2. Medium—2.6 sq. ft. / gpd <input checked="" type="checkbox"/> 3. Medium—Large 3.9 sq. ft. / gpd <input type="checkbox"/> 4. Large—4.1 sq. ft. / gpd <input type="checkbox"/> 5. Extra Large—5.0 sq. ft. / gpd	<b>EFFLUENT/EJECTOR PUMP</b> <input checked="" type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	<input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER METER DATA <b>LATITUDE AND LONGITUDE</b> at center of disposal area Lat. <u>44</u> d <u>19</u> m. <u>302</u> s Lon. <u>68</u> d <u>51</u> m. <u>86</u> s If g.p.s., state margin of error: <u>16</u>

## SITE EVALUATOR STATEMENT

I certify that on 6/30/07 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature

SE #

Date

Site Evaluator Name Printed

Telephone Number

E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

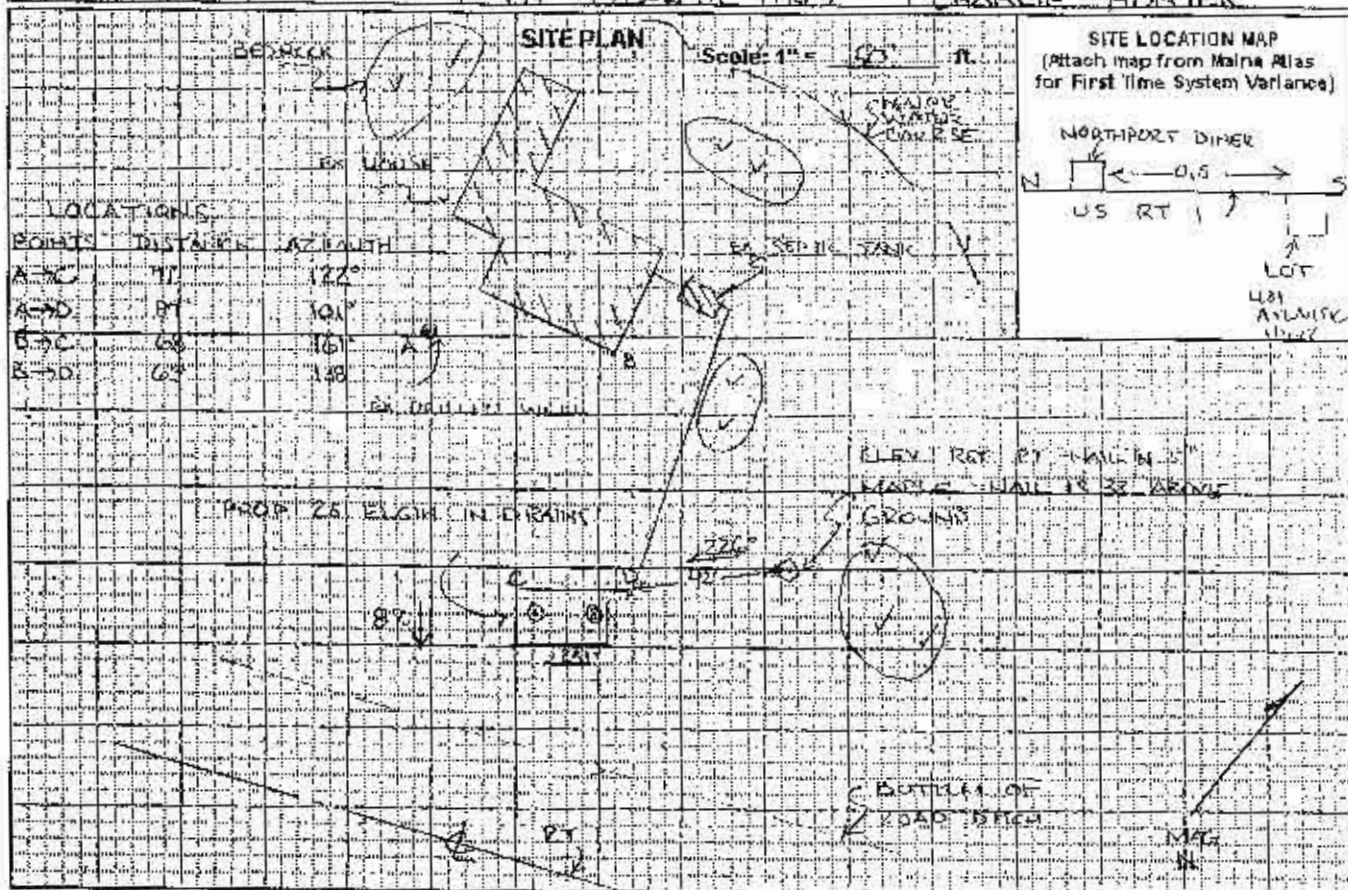
HHE-200 Rev. 4/05



Maine Department of Human Services  
Division of Health Engineering, Station 10  
(207) 287-5672 Fax: (207) 287-3165

Owner or Applicant Name

CHARLIE HUNTER



Observation Hole #	1	<input type="checkbox"/> Test Pit	<input type="checkbox"/> Boring
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Observation Hole #  Test Pit ☐ Boring ☐

Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0				
6			DARK BROWN	
12	FINE SANDY LOAM	FRIABLE		NONE
18			YELLOWISH BROWN	
24		FIRM	OLIVE	COMMON DISTINCT
30				
36				
42				
48				

Soil

3

Sandy

Classification

A(11)

Clayey

Slope

B

Basal

Limiting Factor

19

Depth

☒ Groundwater

☐ Restrictive Layer

☐ Bedrock

Date \_\_\_\_\_

## SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
Division of Health Engineering, Station 19  
(207) 287-6672 Fax: (207) 287-3165

Town, City, Plantation

NORTHPORT

Street, Road, Subdivision

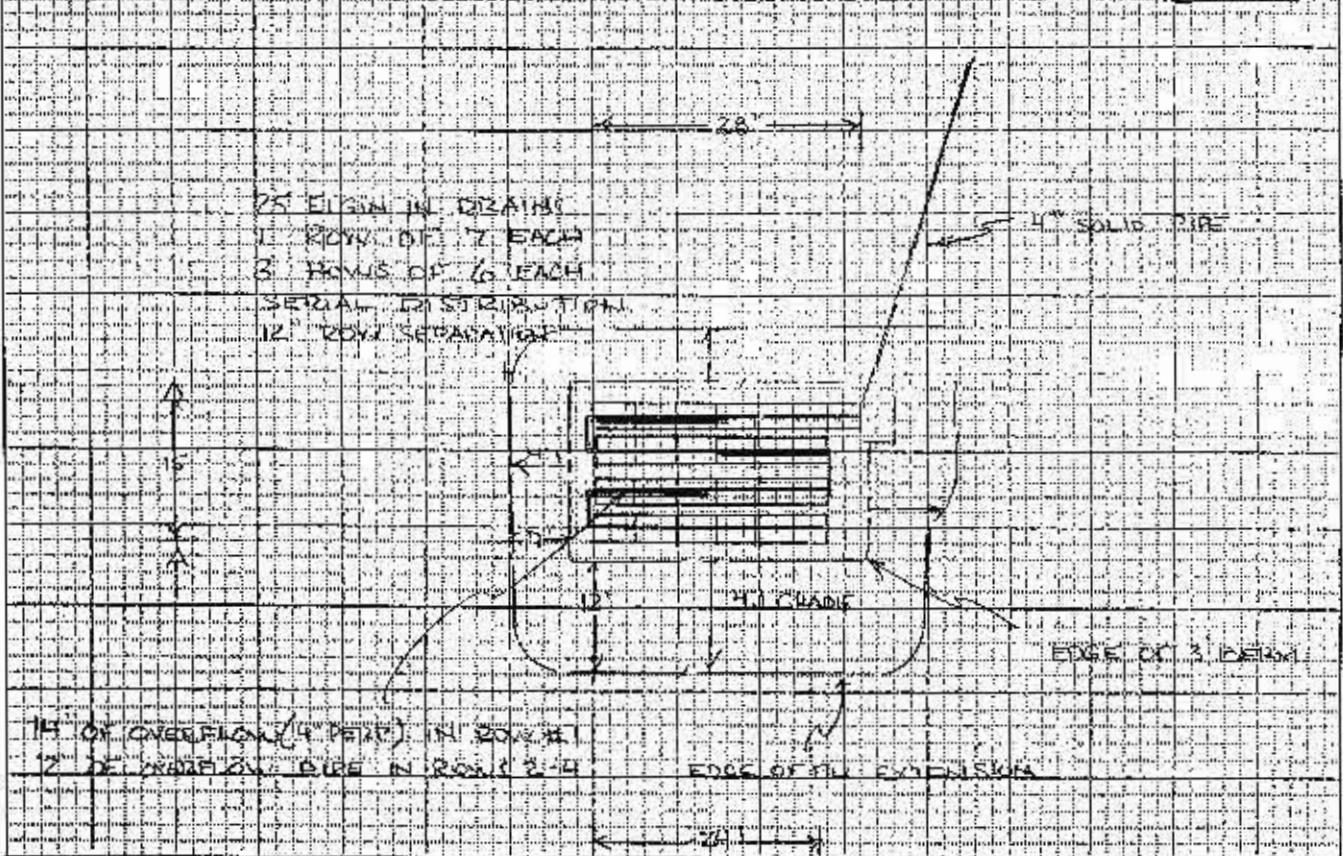
431 ATLANTIC HWY

Owner or Applicant Name

CHARLIE HUNTER

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft.



## BACKFILL REQUIREMENTS

Depth of Backfill (upslope)

18"

Depth of Backfill (downslope)

21"

DEPTHS AT CROSS-SECTION (shown below)

## CONSTRUCTION ELEVATIONS

Finished Grade Elevation SEE PG 4

Top of Distribution Pipe or Proprietary Device

Bottom of Disposal Field

## ELEVATION REFERENCE POINT

Location &amp; Description:

NAIL IN 5" MAPLE

Reference Elevation is: 0.0' or:

## DISPOSAL FIELD CROSS-SECTION

Scale:

Vertical: 1" = 1' ft.

Horizontal: 1" = 1' ft.

SEE ATTACHED CROSS-SECTION A-A



TOWN CITY PLANTATION

NORTHPORT

STREET, ROAD, SUBDIVISION

431 ATLANTIC HWY

OWNER'S NAME

CHARLIE HUNTER

SCALE:

VERT: 1"=5'

HORIZ: 1"=5'

## NOTES

1. FILL REQUIREMENTS VARY GREATLY BECAUSE OF BED LOCATION. CONTRACTOR SHALL FIELD CHECK ALL SLOPES BEFORE DETERMINING ACTUAL FILL REQUIREMENTS.
2. NOTES ON PAGE 14 OF 4 ARE HEREBY MADE PART OF THIS HEE-220 FORM.
3. THE FIRST 6" DIRECTLY BENEATH THE IN-DRAINS SHALL BE MEDIUM TO COARSE TEXTURED SAND, WITH AN EFFECTIVE SIZE OF 0.25 TO 2.0 MM, NO GREATER THAN 5% PASSING A #200 SIEVE, AND NO PARTICLES LARGER THAN 3/4" INCH OR MATERIALS MEETING THE ASTM C-33 SPECIFICATION. CONCRETE OR WASHED SAND IS A RELIABLE CHOICE. SUITABILITY OF BANK RUN SAND OR SITE DISPOSAL AREA SOIL MUST BE VERIFIED.
4. ROTOTILL ORIGINAL SURFACE THOROUGHLY IN ALL AREAS OF THE SYSTEM INCLUDING FILL EXTENSIONS BEFORE PLACING FILL. REMOVE ALL ORGANIC LAYER IN AREA OF SYSTEM.
5. ROWS SHOULD BE LEVEL WITH A TOLERANCE OF 1/100 FT.
6. SECTION SHOWN IS BASED ON AN AVERAGE EXISTING GROUND SLOPE OF 8%.

## FILL REQUIREMENTS AT SECTION:

DEPTH OF FILL (SLOPE) 18"

DEPTH OF FILL DOWNSLOPE 18"

## CONSTRUCTION ELEVATIONS:

E.R.P. REFERENCE ELEVATION IS 0"

ROW 1 2 3 4

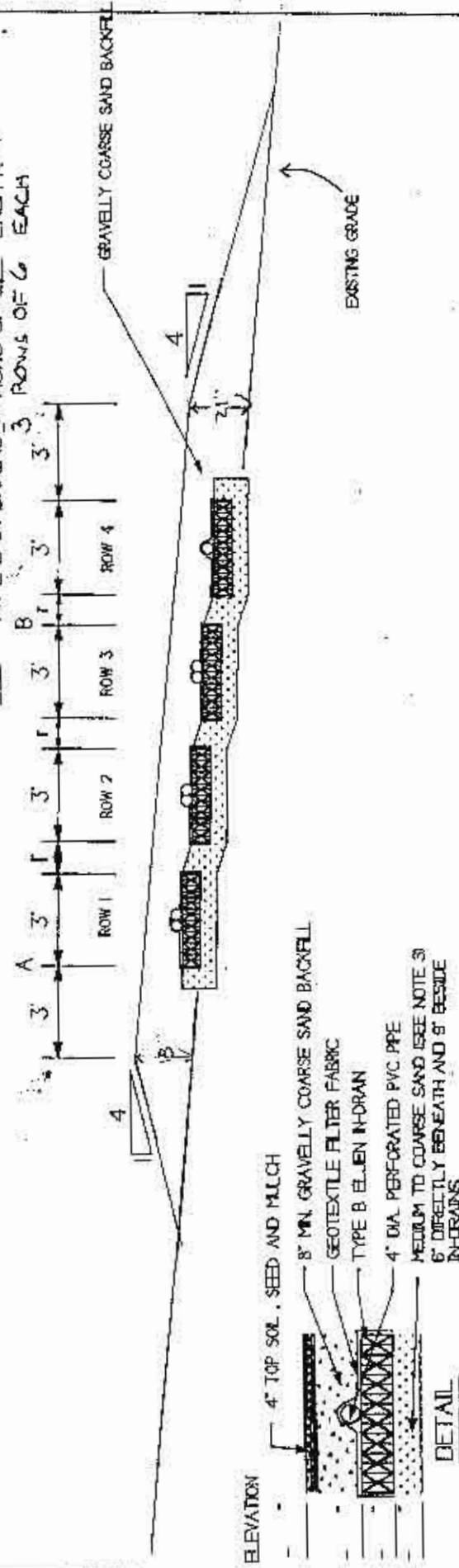
FINISH GRADE -34" -36" -42" -46"

TOP OF DISTRIBUTION PIPE -42" -46" -50" -54"

BOTTOM OF IN-DRAINS -53" -57" -61" -65"

25' - TYPE B IN-DRAINS 1 ROWS OF 7 EACH

3 ROWS OF 6 EACH



ELEVATION

4" TOP SOIL, SEED AND MULCH

8" MIN. GRAVELLY COARSE SAND BACKFILL

GEOTEXTILE FILTER FABRIC

TYPE B E-10 IN-DRAIN

4" DIA. PERFORATED PVC PIPE

MEDIUM TO COARSE SAND (SEE NOTE 3)

6" DIRECTLY BENEATH AND 9" BESIDE IN-DRAINS

DETAIL

N.T.S.

  
SITE EVALUATOR SIGNATURE

198

7/2/07

DATE

PAGE 4 OF 4

20187.GCD

## REPLACEMENT SYSTEM VARIANCE REQUEST

**THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST**

This form shall be attached to an application (HHE-200) for the proposed replacement system which requires a variance to the Rules. The LPI shall review the Replacement System Variance Request on HHE-200 and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 2006)
2. There will be no change in use of the structure except as authorized for one-time exempted expansions outside the shoreland zone of major waterbodies/courses.
3. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
4. The BOD5 plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

**GENERAL INFORMATION**Town of NORTHPORT

Permit No. \_\_\_\_\_

Date Permit Issued \_\_\_\_\_

Property Owner's Name: CHARLIE HUNTERTel. No.: 462 5285System's Location: 431 ATLANTIC HWY

Property Owner's Address: \_\_\_\_\_

(if different from above) \_\_\_\_\_

**SPECIFIC INSTRUCTIONS TO THE:  
LOCAL PLUMBING INSPECTOR (LPI):**

If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, then you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

**SITE EVALUATOR:**

If after completing the Application, you find that a variance for the proposed replacement system is needed, complete the Replacement Variance Request with your signature on reverse side of form.

**PROPERTY OWNER:**

If has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

**PROPERTY OWNER:**

I understand that the proposed system requires a variance to the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

SIGNATURE OF OWNER

DATE

**LOCAL PLUMBING INSPECTOR**

I, FRANK THERIO, the undersigned, have visited the above property and have determined to the best of my knowledge that it cannot be installed in compliance with the Rules. As a result of my review of the Replacement Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

☐ a. (I approve, ☐ disapprove) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant. --OR--

☐ b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (☐ recommend, ☐ do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, the reasons shall be stated in Comments Section below as to why the proposed replacement system is not being recommended.

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

LPI SIGNATURE

DATE

HHE-204 Rev 10/02

# FORMS

## Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPT'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
<b>SOILS</b>								
Soil Profile	Ground Water Table						to 7"	
Soil Condition	Restrictive Layer						to 7"	
from HHE-200	Bedrock						to 12"	
<b>SETBACK DISTANCES (In feet)</b>								
	Disposal Fields			Septic Tanks			Disposal Fields	Septic Tanks
From	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water supply wells	300 ft [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]		
Owner's wells	100 down to 60 ft	200 down to 100 ft	300 down to 150 ft	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	71'	
Neighbor's wells	100 down to 60 ft [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]		
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]		
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft		
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft		
Edge of fill extension -- Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]		
Slopes greater than 3:1	10 ft	18 ft	25 ft	N/A	N/A	N/A		
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		
Full basement [below grade foundation]	20 down to 10 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		
Property lines	10 down to 5 ft [c]	18 down to 9 ft [c]	20 down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 down to 10 ft [c]		
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft		
<b>OTHER</b>								
1. Fill extension Grade - to 3:1								
2.								
3.								

Footnotes: [a.] Single-family well setbacks may be reduced as prescribed in Section 701.2.

[b.] This distance may be reduced to 25 feet, if the septic or holding tank is tested in the plumbing inspector's presence and shown to be watertight or of monolithic construction.

[c.] Additional setbacks may be needed to prevent fill material extensions from encroaching onto abutting property.

[d.] Additional setbacks may be required by local Shoreland zoning.

[e.] Natural Resource Protection Act requires a 25 feet setback, on slopes of less than 20%, from the edge of soil disturbance and 100 feet on slopes greater than 20%. See Chapter 15.

[f.] May not be any closer to neighbors well than the existing disposal field or septic tank unless written permission is granted by the neighbor. This setback may be reduced for single family houses with Department approval. See Section 702.3.

[g.] The fill extension shall reach the existing ground before the 3:1 slope or within 100 feet of the disposal field.

[h.] See Section 1402.10 for special procedures when these minimum setbacks cannot be achieved.

*Resdore*  
SITE EVALUATOR'S SIGNATURE

7/2/07  
DATE

### FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and ( ) does ( ) does not give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

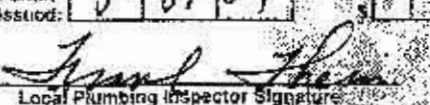

SIGNATURE OF THE DEPARTMENT

DATE




# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
Division of Health Engineering, Station 10  
(207) 287-3672 FAX (207) 287-4172

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; Caution: Permit Required – Attach in Space Below &lt;&lt;</b>	
City, Town, or Plantation	Northport	Date Permit Issued: 5/31/04	APPLICANTS FEE: \$1100 <small>LS If Double Fee Charged</small>
Street or Road	Atlantic Highway	 Local Plumbing Inspector Signature	
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>		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.	
Name (last, first, MI)	Hunter Charlie <small>(Owner)</small>		
Mailing Address of	431 Atlantic Highway		
<input type="checkbox"/> Owner <input type="checkbox"/> Applicant	Northport, ME. 04849		
Daytime Tel. #	207-338-5805	Municipal Tax Map #	RD Lot # 60
<b>Owner or Applicant Statement</b>		<b>Caution: Inspections Required</b>	
I state that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant:  Date: 5/31/04		Local Plumbing Inspector Signature: _____ (1st) Date Approved: _____ _____ (2nd) Date Approved: _____	

<b>PERMIT INFORMATION</b>	
<b>TYPE OF APPLICATION</b> 1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non-exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> 1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval
<b>SIZE OF PROPERTY</b> 41.5 ± <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	<b>DISPOSAL SYSTEM TO SERVE</b> 1. <input type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: _____ 2. <input checked="" type="checkbox"/> Multiple Family Dwelling, No. of Units: 2 3. <input type="checkbox"/> Other: _____ SPECIFY: _____
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 1. <input checked="" type="checkbox"/> Complete Non-engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd or more) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components
<b>proposed TYPE OF WATER SUPPLY</b> 1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____	

<b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b>			
<b>TREATMENT TANK</b> 1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY 1000 gallons	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> 1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input checked="" type="checkbox"/> Linear b. <input type="checkbox"/> Regular load d. <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE 24.0 <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> lin. ft. Enviroseptic Pipe	<b>GARBAGE DISPOSAL UNIT</b> 1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment Tank b. <input type="checkbox"/> Tanks in Series c. <input type="checkbox"/> Increase in Tank Capacity d. <input type="checkbox"/> Filter on Tank Outlet	<b>DESIGN FLOW</b> 360 gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS – for other facilities – Two Cottages 180 GPD X 2 = 360 GPD total
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN at Observation Hole # 2 Depth 20" Elevation -21" OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> 1. <input type="checkbox"/> Small – 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium – 2.6 sq. ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large – 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large – 4.1 sq. ft./gpd 5. <input type="checkbox"/> Extra Large – 5.0 sq. ft./gpd	<b>PUMPING</b> 1. <input checked="" type="checkbox"/> Not Required 2. <input type="checkbox"/> May Be Required 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems: DOSE: _____ gallons	3. <input type="checkbox"/> Section 503.D (meter readings) ATTACH WATER-METER DATA

<b>SITE EVALUATOR STATEMENT</b>			
I certify that on 8/18/04 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).			
 Site Evaluator Signature	S-321 SE #	8/22/04 Date	Page 1 of 3 HHE-200 Rev. 1/99
Dale Nealey Site Evaluator Name Printed	207-338-5201 Telephone #		

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation  
*Northport*

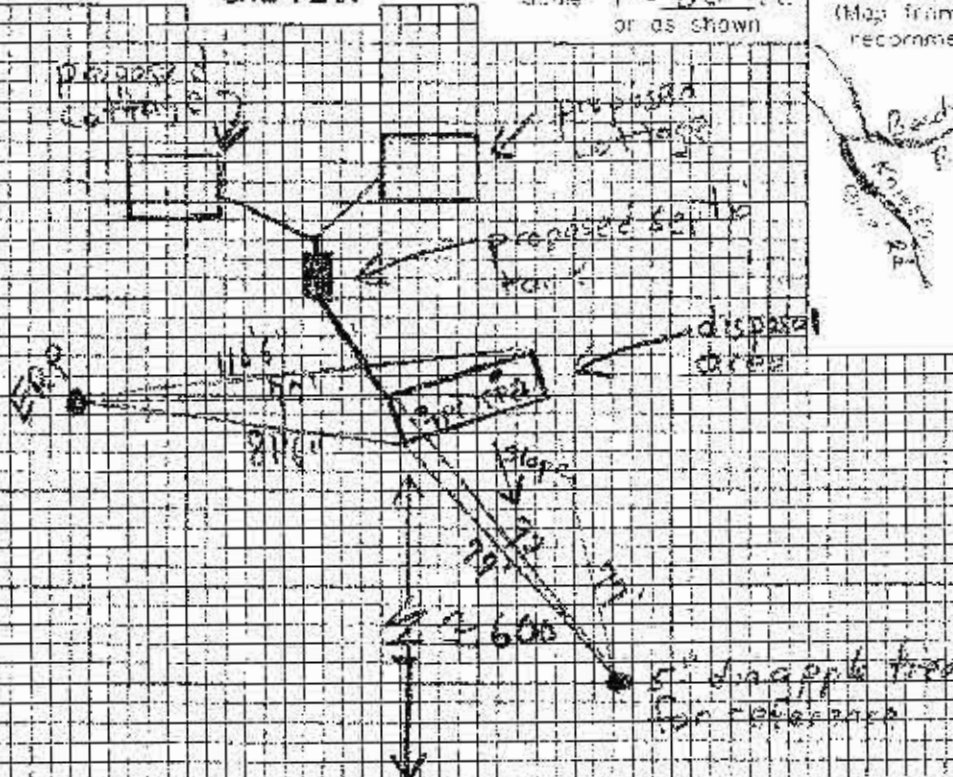
Street Road Subdivision  
*Atlantic Highway*

Owner's Name  
*Charlie Hunter*

## SITE PLAN

Scale 1" = 50 Ft.  
or as shown

SITE LOCATION PLAN  
(Map from Maine Atlas recommended)



*Atlantic Highway*

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

Observation Hole *#1* ☒ Test Pit ☐ Boring  
" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
Sandy loam		dark brown	
gravel	fractile	strong brown to yellowish brown	None
Silt loam	firm	yellowish brown	Common Distinct

Soil Classification <i>7</i> Profile	Slope <i>6</i> %	Limiting Factor <i>30"</i>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
--	------------------------	-------------------------------	--

Observation Hole *#2* ☒ Test Pit ☐ Boring  
" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
Sandy loam		dark brown	
gravel	fractile	yellowish brown	None
Sandy loam		dark yellowish brown	
Silt loam	firm	light brown	Common Distinct

Soil Classification <i>7</i> Profile	Slope <i>6</i> %	Limiting Factor <i>30"</i>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
--	------------------------	-------------------------------	--

*Rick Nealey*  
Site Evaluator Signature

*S-321*  
SE

*8/23/04*  
Date



# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation  
**Northport**

Street, Road, Subdivision  
**Atlantic Highway**

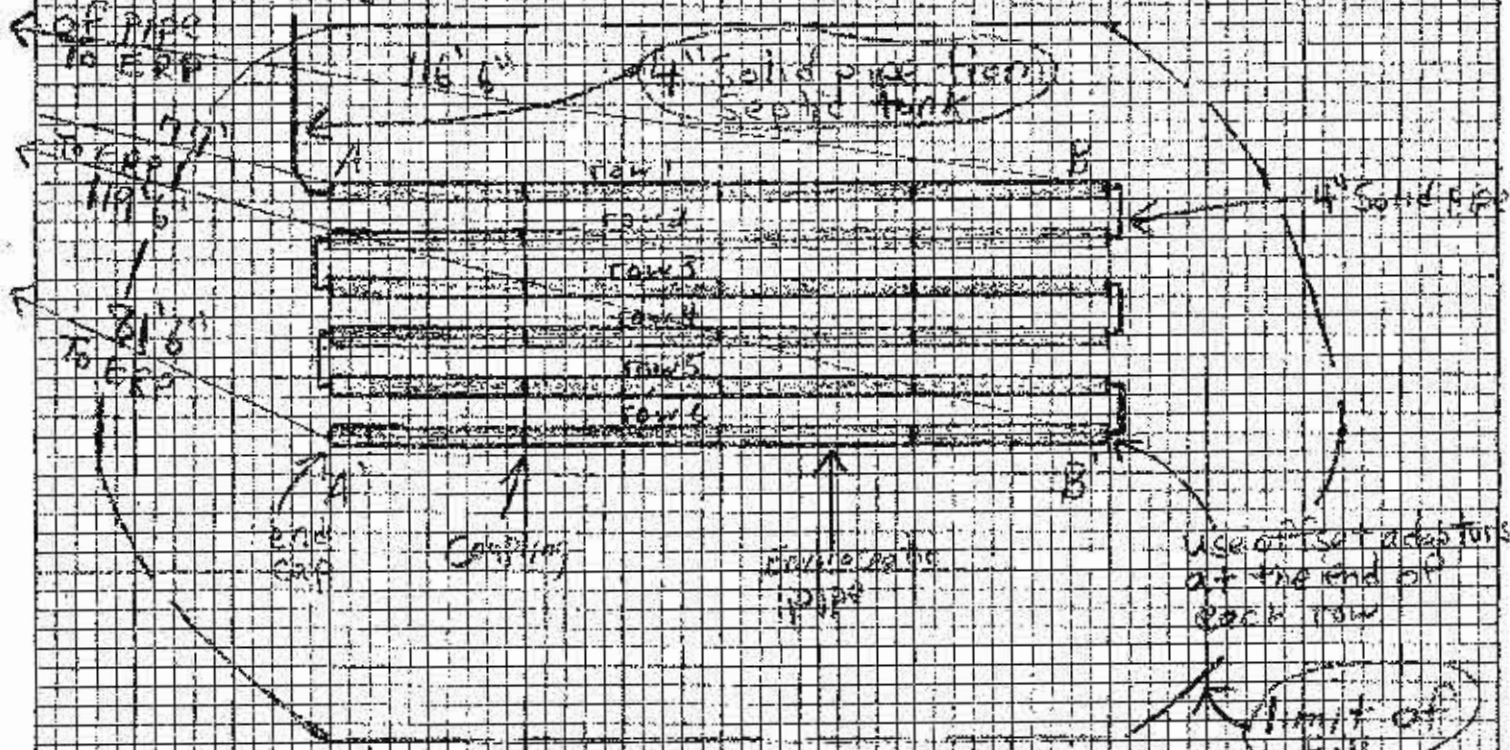
Owner's Name  
**Charlie Hunter**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 10' FT.

240' **Perforated Pipe (13'6" x 40')**

6 rows 40' long Each row spaced 2'6" apart from Center of pipe to Center



### FILL REQUIREMENTS

Depth of Fill (Upslope)  
Depth of Fill (Downslope)

A/B 34" / 24"  
A/B 34" / 24"

### CONSTRUCTION ELEVATIONS

Finished Grade Elevation  
Top of Distribution Pipe or Proprietary Device  
Bottom of Disposal Area

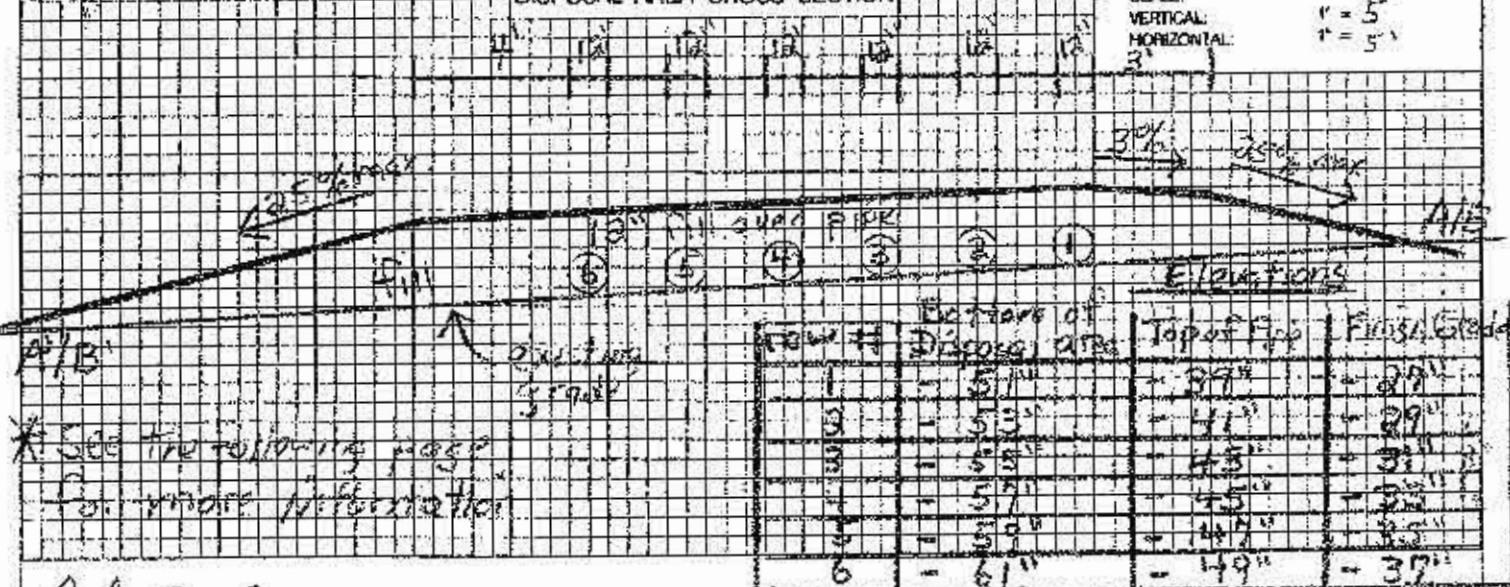
See below

### ELEVATION REFERENCE POINT

Location & Description  
+ tagging 40" up a 6" dia  
Reference Elevation 0" Cherry tree

### DISPOSAL AREA CROSS SECTION

SCALE:  
VERTICAL: 1" = 5'  
HORIZONTAL: 1" = 5'



\* See the following page for more information

**Wale T. Baker**  
Site Evaluator Signature

S-321  
SE

8/22/04  
Date

- \* Scarify existing soil surface under disposal area and fill extensions.
  - \* Stabilize the top of the disposal area and the fill extensions to prevent erosion.
  - \* Fill to be gravely coarse sand
  - \* A minimum of six inches of gravely coarse sand will be placed completely around the geo-flow, simple-septic, or enviro-septic pipe.
  - \* Septic tank to be at least 100 feet from wells and at least 8 feet from dwelling. The septic tank may be 75 feet from wells if the tank is checked for water tightness in the presence of the LPI.
  - \* Disposal area to be at least 100 feet from wells and at least 20 feet from dwelling with foundations. The disposal area will be at least 15 feet from dwellings with frost walls, slabs, or on posts.
- \* I designed the subsurface wastewater disposal system using the information the owner or their representative gave me. The property owner verifies that the measurements shown on this design are accurate, and that the disposal area is at least 100 feet from all wells, and is at least 10 feet from any property line. I \_\_\_\_\_ have read and agree with the above statements.

Signature of property owner \_\_\_\_\_

The local plumbing inspector should not grant permit without the property owners signature.

