

**APPLICATION FOR BUILDING PERMIT**  
Town of Machias, Maine

Cabin 1

Building Permit request for:  
 New Construction       Expansion / Alteration  
 Moving of Building       Reconstruction / Replacement  
 Conversion to another or different use

Date application received at Town Office: 11/18/22 Fee Paid \$ 30.00  
 Recipients Initials: JCF

Name of Applicant: Chris Meroff  
 (or Agent)  
 Address of Applicant: 415 Kennebec RD, Machias ME 04654

Address of Building(s): 415 Kennebec RD, Machias ME 04654  
 Telephone: 707-263-3668  
 Map 003 Lot 023

Proposed Use: (Describe briefly use of structure such as nature of business or residence, single or multi-family)  
Single family Hotel Room

Indicate what other structures are located on the same lot and the uses:  
House, 2 goat barns, one big barn, and a chicken building

(Refer to Town of Machias Building Permit Ordinance 01/26/1989 in answering all applicable sections below.)

1.  Yes  No      A waiver or variance is requested. (Attach separate sheet stating the request and reasons why you believe they should be allowed.)
2.  Yes  No      A copy of the applicable town tax map showing lot location is attached.
3.  Yes  No      The property is connected to the Machias Water Co. supply or can be connected. If the property is not, or cannot be connected to the Machias Water Co. supply, water will be provided by:  
      Well     Spring     Other \_\_\_\_\_
4.  Yes  No      The property is connected to Town of Machias sewer system or can be connected. Attach a copy of the Sewer Entrance Permit and include the location of the connection on the site plan if the project is to be connected to the Town of Machias sewer system.
5.  Yes  No      A soil test has been conducted for installation of a septic system for sewage disposal.  
 (Attach a copy of test document and diagram of the recommended septic location.)
6.  Yes  No      A site plan showing all items listed in section 4A(3) of Machias Building Permit Ordinance is attached. The site plan should reflect the dimensions of the lot on which construction is to be undertaken specifically to include the road frontage measurement. The plan should also include setback distances for the proposed construction from each boundary and from the public road or private access road.
7.  Yes  No      A copy of the deed, lease, purchase and sales agreement, or other evidence of ownership or control of the real estate is attached.
8.  Yes  No      Will surface water drainage adversely affect any neighboring properties?
9.  Yes  No      Will lighting reflect beyond lot lines or cause annoyance to neighboring properties?
10.  Yes  No      Lot has a minimum of at least 100 feet of frontage on a town road or deeded private way.
11.  Yes  No      The building lot is at least 15,000 square feet in size or larger.
12.  Yes  No      The building setback will be at least 35 feet from the front of the lot.
13.  Yes  No      Side and rear distances from the lot lines are at least 15 feet to proposed building.
14.  Yes  No      The proposed structure will be no more than 50 feet above ground level, including chimneys, stacks or other protrusions that are part of the structure.
15.  Yes  No      There will be safe vehicular entrance and exit to public or private roads that border the lot. (Indicate vehicle driveway on site plan.)
16.  Yes  No      Will the proposed activity involve the installation or change of use of a driveway providing access to a state highway? If so, an entrance permit from the Department of Transportation must be obtained prior to any issuance of permits and attached to this application.
17. There will be \_\_\_\_\_ off street parking spaces as shown in site plan.

18. Commercial, industrial, and residential structures are required to comply with certain federal and/or state minimum standards and regulations. By initialing the items set forth below, the applicant is acknowledging awareness of, and compliance with, any applicable federal and state regulations and has attached copies of all approved permits that may be required. Indicate below which items apply to this building permit application and certify compliance by initialing the appropriate below:

Water Supply	_____	Water Pollution	_____	Flood Hazard Development Permit	_____
Air Pollution	_____	Soil Erosion	_____	Maine DOT Entrance Permit	_____
Shoreland Zoning	_____	Surface Drainage	_____	Sewer Connection Permit	_____
Sewage Pollution	_____	Noise Level	_____	Natural Resources Protection Act Permit	_____
Other	_____				

19. Estimated cost of proposed building or structure(s): \$ 30,000

20. Name, address and telephone number of contractor or builder: 4 Shore LLC 748 Jacksonique RD, East Machias ME, 04670 707-263-3668

21. I have read and understand the Town of Machias Building Permit Ordinance and hereby make application for a permit based on the information contained above and request the Planning Board to act on this application at its next scheduled monthly meeting.

Signature of Applicant: \_\_\_\_\_

NOTE: Although not required, it is recommended that the applicant, or a duly appointed representative attend the meeting at which the application for a Building Permit is to be considered.

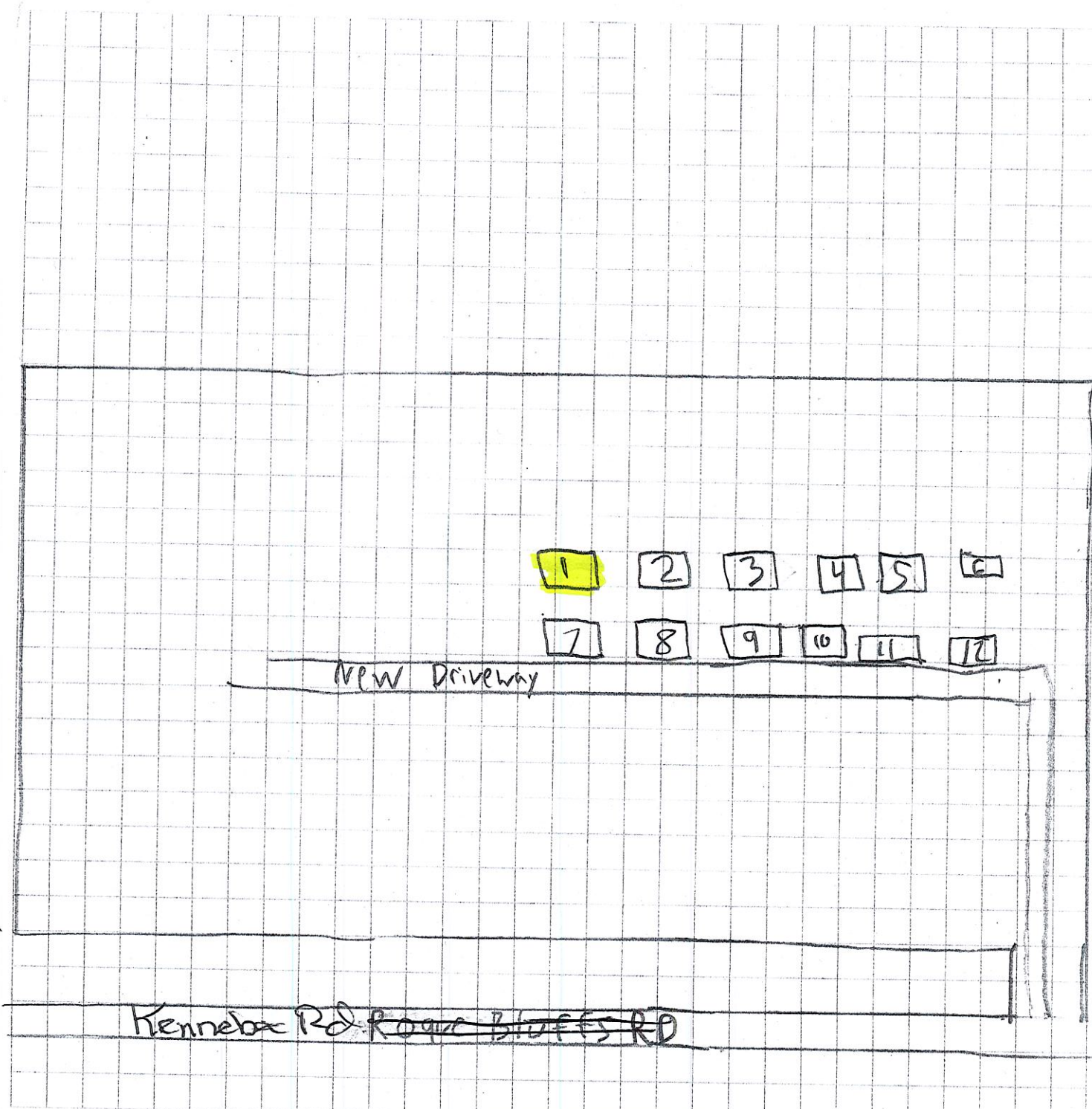
For Planning Board use:  
 Building Permit:     Approved     Denied    By the Planning Board on (Date): \_\_\_\_\_  
 Authorized Planning Board Signature: \_\_\_\_\_



- Cabin size is not to scale.

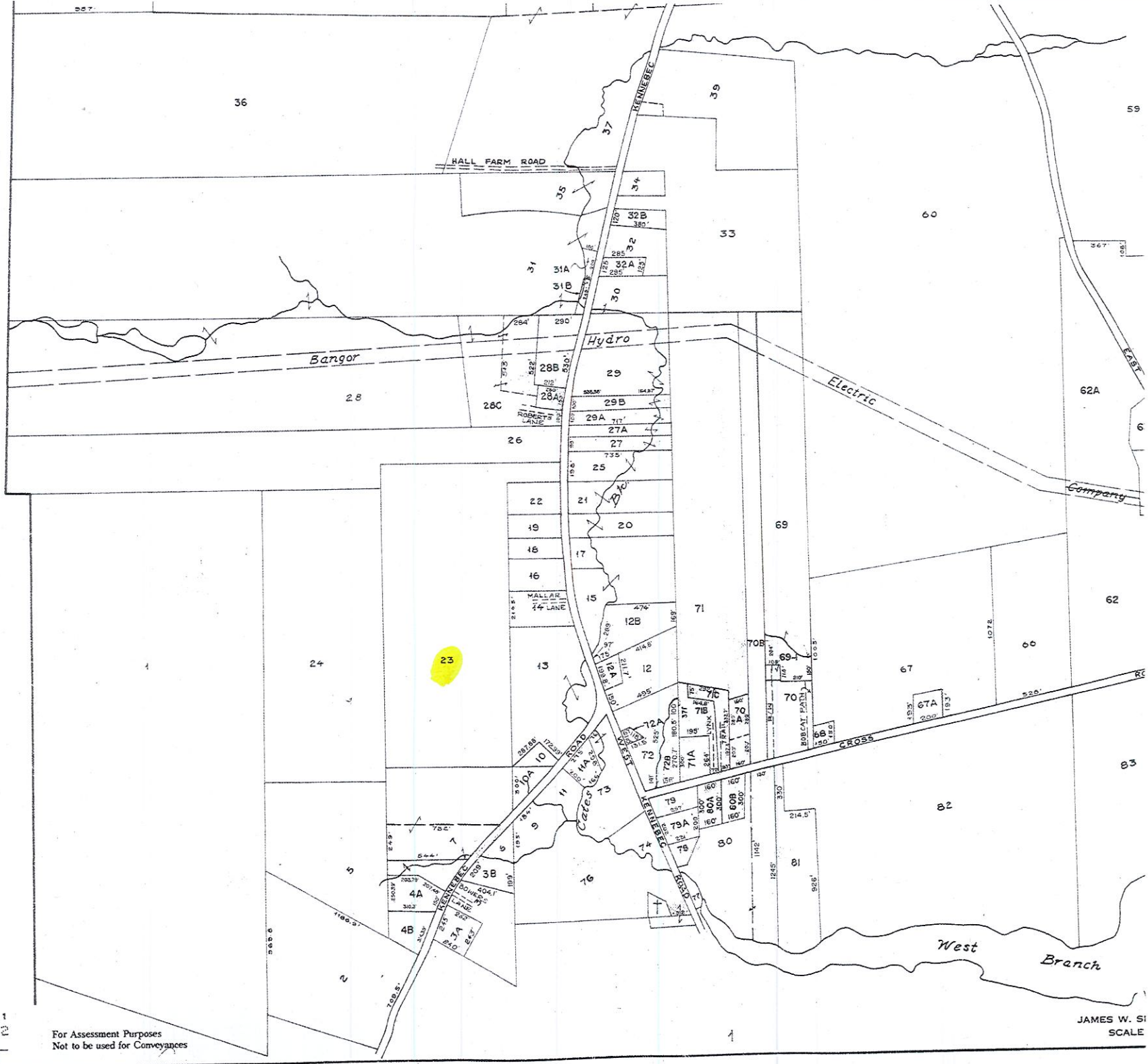
- 1 block = 70 Feet

- All cabins are 14 x 28 feet



Cabins not to scale on site plan

W H I T N E Y V I L L E



LEGEND

- PARCEL NUMBERS ..... 1
- ADJACENT MAPS ..... 2
- MATCH LINE ..... 3

For Assessment Purposes  
Not to be used for Conveyances

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; CAUTION: LPI APPROVAL REQUIRED &lt;&lt;</b>	
City, Town, or Plantation	Machias	Town/City	Permit # _____
Street or Road	415 Kennebec Road	Date Permit Issued ___/___/___	Fee: \$ _____ Double Fee Charged <input type="checkbox"/>
Subdivision, Lot #			L.P.I. # _____
<b>OWNER/APPLICANT INFORMATION</b>		Local Plumbing Inspector Signature _____	
Name (last, first, MI)	West Kennebec Farm <span style="float:right">X Owner Applicant</span>	The Subsurface Wastewater Disposal System <b>shall not</b> 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.	
Mailing Address of Owner/Applicant	180 West Kennebec Road Machias, Maine 04654		
Daytime Tel. #	(207)263-3668		
<b>OWNER OR APPLICANT STATEMENT</b>		<b>CAUTION: INSPECTION REQUIRED</b>	
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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. _____ (1st) date approved	
Signature of Owner or Applicant _____ Date _____		Local Plumbing Inspector Signature _____ (2nd) date approved _____	

PERMIT INFORMATION		
<b>TYPE OF APPLICATION</b>	<b>THIS APPLICATION REQUIRES</b>	<b>DISPOSAL SYSTEM COMPONENTS</b>
<input checked="" type="checkbox"/> 1. First Time System 2. Replacement System Type replaced: _____ Year installed: _____ <input type="checkbox"/> 3. Expanded System a. <25% Expansion b. >25% Expansion 4. Experimental System 5. Seasonal Conversion	<input checked="" type="checkbox"/> 1. No Rule Variance 2. First Time System Variance a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval 3. Replacement System Variance a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval 4. Minimum Lot Size Variance 5. Seasonal Conversion Permit	<input checked="" type="checkbox"/> 1. Complete Non-engineered System 2. Primitive System (graywater & alt. toilet) 3. Alternative Toilet, specify: _____ 4. Non-engineered Treatment Tank (only) 5. Holding Tank, _____ gallons 6. Non-engineered Disposal Field (only) 7. Separated Laundry System 8. Complete Engineered System (2000 gpd or more) 9. Engineered Treatment Tank (only) 10. Engineered Disposal Field (only) 11. Pre-treatment, specify: _____ 12. Miscellaneous Components
<b>SIZE OF PROPERTY</b>	<b>DISPOSAL SYSTEM TO SERVE</b>	<b>TYPE OF WATER SUPPLY</b>
43 SQ. FT. ACRES	1. Single Family Dwelling Unit, No. of Bedrooms: _____ 2. Multiple Family Dwelling, No. of Units: _____ <input checked="" type="checkbox"/> 3. Other: 4 1 bed housekeeping cabins (specify) Current Use Seasonal Year Round <input checked="" type="checkbox"/> Undeveloped	future <input checked="" type="checkbox"/> 1. Drilled Well 2. Dug Well 3. Private 4. Public 5. Other
<b>SHORELAND ZONING</b>		
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
<b>TREATMENT TANK</b>	<b>DISPOSAL FIELD TYPE &amp; SIZE</b>	<b>GARBAGE DISPOSAL UNIT</b>	<b>DESIGN FLOW</b>
<input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular b. Low Profile 2. Plastic 3. Other: Two tanks @ CAPACITY: 1,000 GAL	1. Stone Bed 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device Presby Enviro-septic X a. cluster array b. regular load c. Linear 4. Other: _____ SIZE: 320 sq. ft. lin. ft. X	<input checked="" type="checkbox"/> 1. No 2. Yes 3. Maybe If Yes or Maybe, specify one below: a. multi-compartment tank b. _____ tanks in series c. increase in tank capacity d. Filter on Tank Outlet	400 gallons per day BASED ON: <input checked="" type="checkbox"/> Table 4A (dwelling unit(s)) <input type="checkbox"/> Table 4C (other facilities) SHOW CALCULATIONS for other facilities 50gpd per cabin + 50gpd per bec 100gpd x 4 cabins = 400gpd
<b>SOIL DATA &amp; DESIGN CLASS</b>	<b>DISPOSAL FIELD SIZING</b>	<b>EFFLUENT/EJECTOR PUMP</b>	<b>LATITUDE AND LONGITUDE</b>
PROFILE CONDITION 3 / C at Observation Hole # IP-1 Depth 16" of Most Limiting Soil Factor	1. Medium—2.6 sq. ft. / gpd <input checked="" type="checkbox"/> 2. Medium—Large 3.3 sq. ft. / gpd 3. Large—4.1 sq. ft. / gpd 4. Extra Large—5.0 sq. ft. / gpd	<input checked="" type="checkbox"/> 1. Not Required 2. May Be Required 3. Required Specify only for engineered systems: DOSE: _____ gallons	ATTACH WATER METER DATA at center of disposal area Lat. 44 d 40 m 24.23s Lon. 67 d 28 m 12.15s if g.p.s, state margin of error: 9'

SITE EVALUATOR STATEMENT		
certify that on <u>9/16/22</u> (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	SE00366 SE #	9/20/22 Date
Dana Altvater Site Evaluator Name Printed	(207)853-2462 Telephone Number	daltvater@myfairpoint.net E-mail Address

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

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

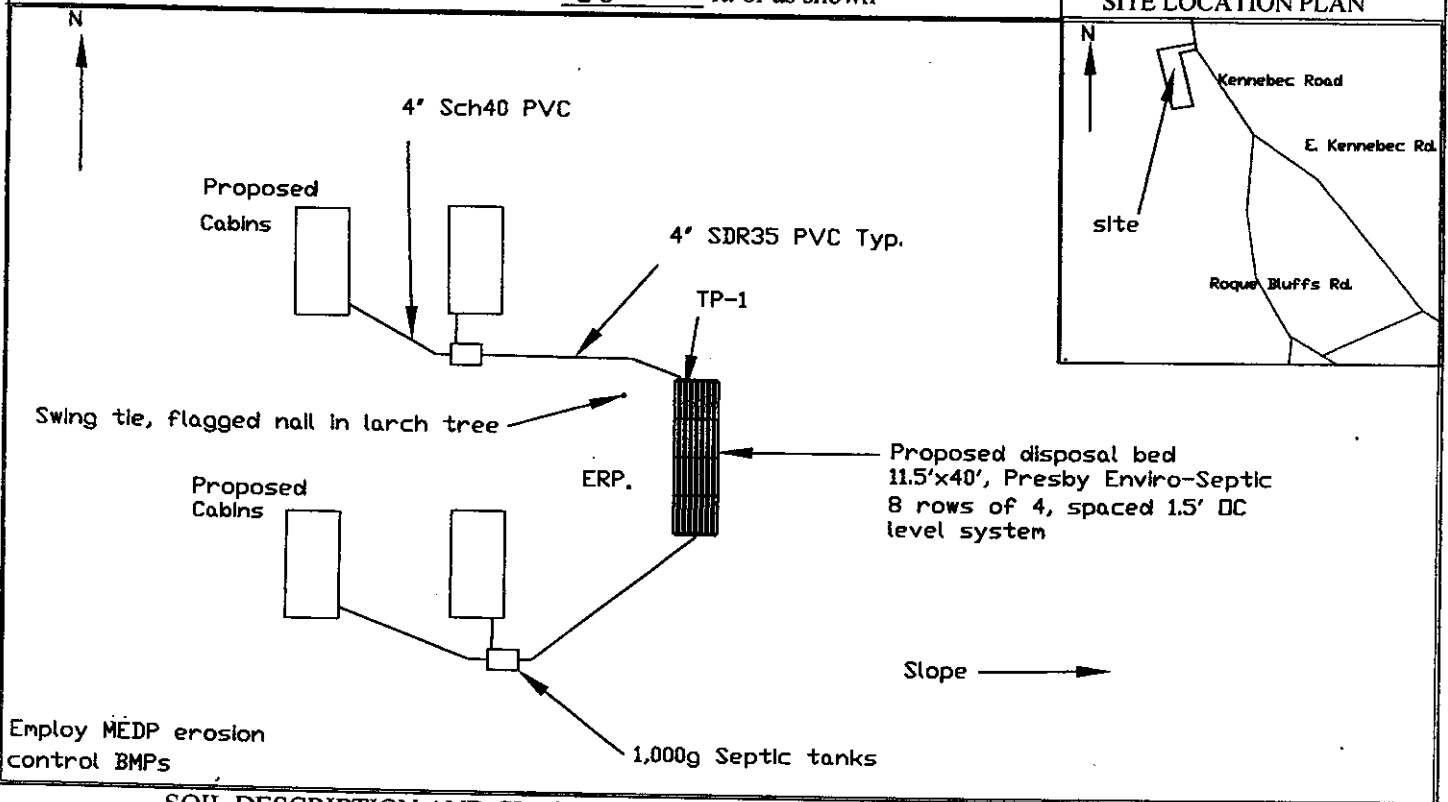
Town, City, Plantation  
 Machias

Street, Road, Subdivision  
 415 Kennebec Road

Owner's Name  
 West Kennebec Farm

**SITE PLAN** Scale 1" = 50 ft. or as shown

**SITE LOCATION PLAN**



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

Observation Hole TP-1  Test Pit  Boring  
 1 " Depth of Organic Horizon Above Mineral Soil

Observation Hole \_\_\_\_\_  Test Pit  Boring  
 \_\_\_\_\_ " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	Sandy Loam	Friable	Strong Brown	none
10				
20		SW firm	Yellowish Brown	few
30		Compacted		
40				
50				

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification <u>3</u> <u>C</u> Profile Condition	Slope <u>7</u> %	Limiting Factor <u>16</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Soil Classification _____ Profile Condition	Slope _____%	Limiting Factor ____"	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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*Dana Attwood*

SE00366

9/20/22

Page 2 of 3  
 HHE-200 Rev. 8/01

Site Evaluator Signature

SE #

Date



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 Division of Health Engineering  
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation  
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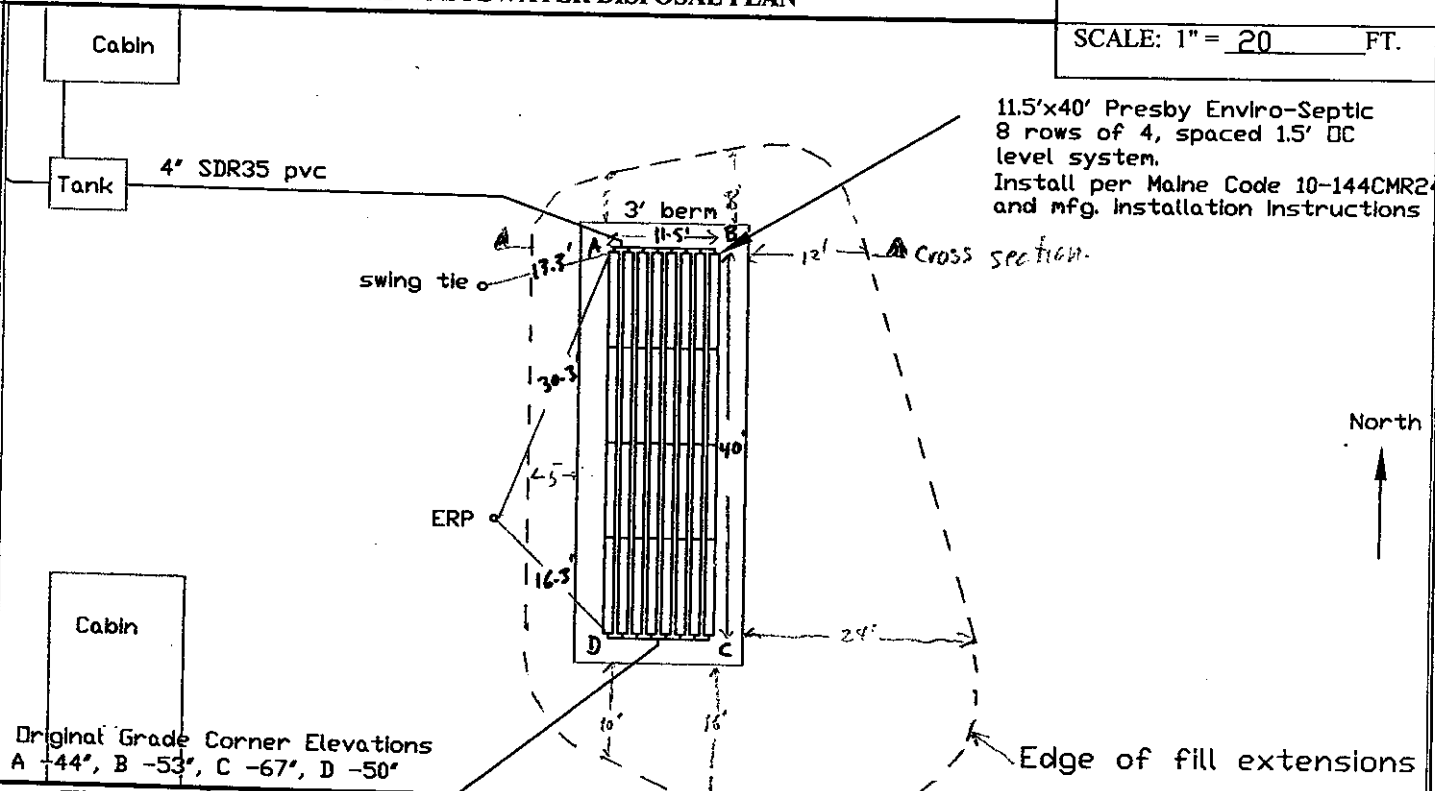
Street, Road, Subdivision  
 415 Kennebec Road

Owner's Name  
 West Kennebec Farm

**SUBSURFACE WASTEWATER DISPOSAL PLAN**

SCALE: 1" = 20 FT.

11.5'x40' Presby Enviro-Septic  
 8 rows of 4, spaced 1.5' OC  
 level system.  
 Install per Maine Code 10-144CMR241  
 and mfg. installation instructions



Original Grade Corner Elevations  
 A +44', B -53', C -67', D -50'

**FILL REQUIREMENTS**

**CONSTRUCTION ELEVATIONS**

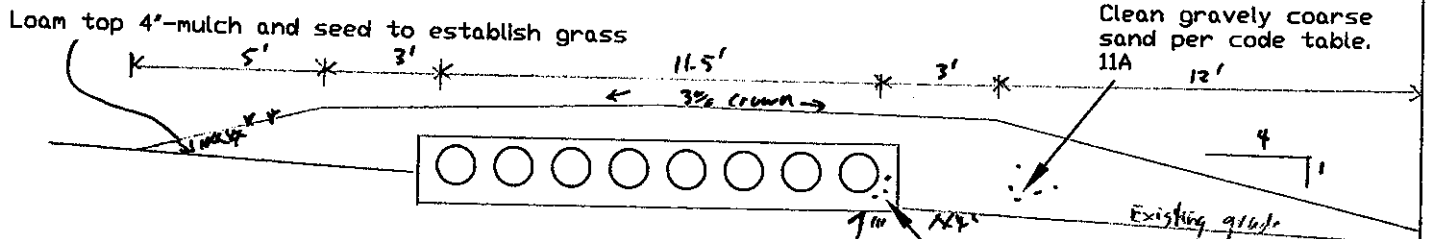
**ELEVATION REFERENCE POINT**

Depth of Fill (Upslope)	20'/26'	Finished Grade Elevation	-24'	Location & Description:	Flagged nail in 5" poplar tree, 30' up
Depth of Fill (Downslope)	28'/43'	Top of Disposal Area	-36'	Reference Elevation:	0.0'
		Bottom of Disposal Area	-48'		

**DISPOSAL AREA CROSS SECTION A-A**

Scale Vertical and Horizontal  
 1"=5'

11.5'x40' Presby Enviro-Septic



Remove organic layer & vegetation under bed and fill extensions and scarify area. Do not compact or smear this area. Then mix in 6" of code Backfill to create transitional horizon and bring to sub-grade prior to placing new disposal bed.

System sand per ASTM C-33 or washed concrete sand

*Diana Altman*

SE00366

9/20/22

Site Evaluator Signature

SE #

Date