

PROPERTY LOCATED AT: 135 Main Street, Lisbon Falls, ME 04252

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 Seller and any Buyer. Seller authorizes the disclosure of the information in this statement to real estate licensees and to prospective buyers of this property. The Seller agrees to provide prompt notice of any changes in the information and this form will be appropriately changed with an amendment date. Inspections are highly recommended.

DO NOT LEAVE ANY QUESTIONS BLANK. STRIKE, WRITE N/A OR UNKNOWN IF NEEDED.

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 (if any): N/A Yes No Unknown
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: 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? N/A Yes No
What steps were taken to remedy the problem? N/A

IF PRIVATE: (Strike Section if Not Applicable):

INSTALLATION: Location: BACK OF HOME
Installed by: UNKNOWN
Date of Installation: UNKNOWN

USE: Number of persons currently using system: _____
Does system supply water for more than one household? Yes No Unknown

Comments: NONE

Source of Section I information: TOWN, SELLER

Buyer Initials _____ Page 1 of 7 Seller Initials SH

SECTION II – WASTE WATER DISPOSAL

TYPE OF SYSTEM: Public Private Quasi-Public _____ Unknown

~~IF PUBLIC OR QUASI-PUBLIC (Strike Section if Not Applicable):~~

~~Have you had the sewer line inspected? Yes No~~

~~If Yes, what results: _____~~

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

~~What steps were taken to remedy the problem? _____~~

IF PRIVATE (Strike Section if Not Applicable):

Tank: Septic Tank Holding Tank Cesspool Other: _____

Tank Size: 500 Gallon 1000 Gallon Unknown Other: UNKNOWN

Tank Type: Concrete Metal Unknown Other: UNKNOWN

Location: BACK OF HOME OR Unknown

Date installed: UNKNOWN Date last pumped: UNKNOWN Name of pumping company: UNKNOWN

Have you experienced any malfunctions? Yes No

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

Date of last servicing of tank: UNKNOWN Name of company servicing tank: UNKNOWN

Leach Field: YES Yes No Unknown

If Yes, Location: BACK OF HOME

Date of installation of leach field: UNKNOWN Installed by: UNKNOWN

Date of last servicing of leach field: UNKNOWN Company servicing leach field: UNKNOWN

Have you experienced any malfunctions? Yes No

If Yes, give the date and describe the problem and what steps were taken to remedy: N/A

Do you have records of the design indicating the # of bedrooms the system was designed for? Yes No

If Yes, are they available? Yes No

Is System located in a Shoreland Zone? Yes No Unknown

Comments: NONE

Source of Section II information: SELLER

Buyer Initials _____

Seller Initials SBF

SECTION III – HEATING SYSTEM(S)/HEATING SOURCE(S)

Heating System(s) or Source(s)	SYSTEM 1	SYSTEM 2	SYSTEM 3	SYSTEM 4
TYPE(S) of System	<u>FHA</u>	<u>WOODSTOVE</u>		
Age of system(s) or source(s)	<u>2020</u>	<u>2018</u>		
TYPE(S) of Fuel	<u>OIL</u>	<u>WOOD</u>		
Annual consumption per system or source (i.e., gallons, kilowatt hours, cords)	<u>200 GALLONS</u>	<u>1-1.5 CORDS</u>		
Name of company that services system(s) or source(s)	<u>UNKNOWN</u>	<u>UNKNOWN</u>		
Date of most recent service call	<u>2020</u>	<u>2018</u>		
Malfunctions per system(s) or source(s) within past 2 years	<u>NO</u>	<u>NO</u>		
Other pertinent information	<u>NO</u>	<u>NO</u>		

- Are there fuel supply lines? Yes No Unknown
- Are any buried? Yes No Unknown
- Are all sleeved? Yes No Unknown
- Chimney(s): Yes No
- If Yes, are they lined: Yes No Unknown
- Is more than one heat source vented through one flue? Yes No Unknown
- Had a chimney fire: Yes No Unknown
- Has chimney(s) been inspected? Yes No Unknown
- If Yes, date: _____
- Date chimney(s) last cleaned: _____
- Direct/Power Vent(s): Yes No Unknown
- Has vent(s) been inspected? Yes No Unknown
- If Yes, date: _____

Comments: NONE

Source of Section III information: SELLER

SECTION IV – HAZARDOUS MATERIAL

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

- A. UNDERGROUND STORAGE TANKS** - Are there now, or have there ever been, any underground storage tanks on the property? Yes No Unknown
- If Yes, are tanks in current use? Yes No Unknown
- If no longer in use, how long have they been out of service? _____
- If tanks are no longer in use, have tanks been abandoned according to DEP? Yes No Unknown
- Are tanks registered with DEP? Yes No Unknown
- Age of tank(s): — Size of tank(s): —
- Location: N/A

Buyer Initials _____

Seller Initials (Signature)

PROPERTY LOCATED AT: 135 Main Street, Lisbon Falls, ME 04252

What materials are, or were, stored in the tank(s)? N/A

Have you experienced any problems such as leakage: Yes No Unknown

Comments: NONE

Source of information: SELLER

B. ASBESTOS — Is there now or has there been asbestos:

As insulation on the heating system pipes or duct work? Yes No Unknown

In the ceilings? 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

Comments: NONE

Source of information: SELLER

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 Unknown

Are test results available? Yes No

Results/Comments: NONE

Source of information: SELLER

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 Unknown

Are test results available? Yes No

Results/Comments: NONE

Source of information: SELLER

E. METHAMPHETAMINE - Current or previously existing:

Yes No Unknown

Comments: NONE

Source of information: SELLER

Buyer Initials _____

Seller Initials

PROPERTY LOCATED AT: 135 Main Street, Lisbon Falls, ME 04252

F. LEAD-BASED PAINT/PAINT HAZARDS — (Note: Lead-based paint is most commonly found in homes constructed prior to 1978)

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 basis for determination: _____

Do you know of any records/reports pertaining to such lead-based paint/lead-based paint hazards: Yes No

If Yes, describe: _____

Are you aware of any cracking, peeling or flaking paint? Yes No

Comments: NONE

Source of information: SELLER

G. OTHER HAZARDOUS MATERIALS - Current or previously existing:

TOXIC MATERIAL: Yes No Unknown

LAND FILL: Yes No Unknown

RADIOACTIVE MATERIAL: Yes No Unknown

Other: N/A

Source of information: SELLER

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 ways, trails, homeowner associations (including condominiums and PUD's) or restrictive covenants? Yes No Unknown

If Yes, explain: _____

Source of information: SELLER

Is access by means of a way owned and maintained by the State, a county, or a municipality over which the public has a right to pass? Yes No Unknown

If No, who is responsible for maintenance? N/A

Road Association Name (if known): N/A

Buyer Initials _____

Seller Initials SH

PROPERTY LOCATED AT: 135 Main Street, Lisbon Falls, ME 04252

Are there any tax exemptions or reductions 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 Unknown

If Yes, explain: HOMESTEAD

Is a Forest Management and Harvest Plan available?..... Yes No Unknown

Is house now covered by flood insurance policy (not a determination of flood zone) Yes No Unknown

Equipment leased or not owned (including but not limited to, propane tank, hot water heater, satellite dish, water filtration system, photovoltaics, wind turbines): Type: NONE

Year Principal Structure Built: 1940

What year did Seller acquire property? 2010

Roof: Year Shingles/Other Installed: UNKNOWN

Water, moisture or leakage: NONE

Comments: NONE

Foundation/Basement:

Is there a Sump Pump? Yes No Unknown

Water, moisture or leakage since you owned the property: Yes No Unknown

Prior water, moisture or leakage? Yes No Unknown

Comments: NONE

Mold: Has the property ever been tested for mold? Yes No Unknown

If Yes, are test results available? Yes No

Comments: NONE

Electrical: Fuses Circuit Breaker Other: _____ Unknown

Comments: NONE

Has all or a portion of the property been surveyed? Yes No Unknown

If Yes, is the survey available? Yes No Unknown

Manufactured Housing – Is the residence a:

Mobile Home Yes No Unknown

Modular Yes No Unknown

Known defects or hazardous materials caused by insect or animal infestation inside or on the residential structure
..... Yes No Unknown

Comments: NONE

KNOWN MATERIAL DEFECTS about Physical Condition and/or value of Property, including those that may have an adverse impact on health/safety: VARIOUS PORTIONS OF THE HOME & GARAGE NEED ATTENTION

Comments: NONE

Source of Section V information: SELLER

Buyer Initials _____

Seller Initials SMJ

PROPERTY LOCATED AT: 135 Main Street, Lisbon Falls, ME 04252

SECTION VI – ADDITIONAL INFORMATION

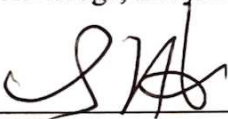
NONE

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

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

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.

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.



SELLER _____ DATE _____
Stanley Hibbard

SELLER _____ DATE _____

SELLER _____ DATE _____

SELLER _____ 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 _____

BUYER _____ DATE _____

BUYER _____ DATE _____





TOWN OF LISBON

300 Lisbon Street
Lisbon, ME 04250

Tel: (207) 353-3000 x 105

Fiscal Year: July 1, 2023 to June 30, 2024

THIS IS THE ONLY TAX BILL YOU WILL RECEIVE



HIBBARD, STANLEY
678 LISBON ST
LISBON FALLS ME 04252-1229

ACCOUNT: 005528 RE
NAME: HIBBARD, STANLEY

MILL RATE: \$21.10
BOOK PAGE: B8031P268

MAP/LOT: U03-019
LOCATION: 135 MAIN STREET
ACREAGE: 0.32

2024 REAL ESTATE TAX BILL

CURRENT BILLING INFORMATION

LAND VALUE	42,900
BUILDING VALUE	41,400
TOTAL: LAND & BLDG	84,300
TOTAL EXEMPTIONS	22,500
NET ASSESSMENT	61,800
TOTAL TAX	1,303.98
LESS PAID TO DATE	0.00
TOTAL DUE ->	1,303.98

FIRST HALF DUE: 651.99
SECOND HALF DUE: 651.99

TAXPAYER'S NOTICE

INTEREST AT 4% PER ANNUM CHARGED AFTER 9/15/2023 AND 3/15/2024.

As per state law, the ownership and taxable valuation of ALL real estate and personal property was determined as of April 1, 2023. If you have sold your real estate since April 1, 2023, it is your obligation to forward this bill to the current property owner.

A LIEN WILL BE PLACED ON ALL REAL ESTATE FOR WHICH TAXES REMAIN UNPAID AFTER EIGHT MONTHS AND NO LATER THAN ONE YEAR FROM THE DATE OF COMMITMENT.

INFORMATION

This bill is for the current tax year July 1, 2023 through June 30, 2024 only. Past due amounts are NOT included. To receive information regarding payments, interest, fees, or refunds please contact the Tax Office at (207) 353-3000, ext. 105.

Your tax bill has already been reduced 14.81% due to State Funds received for Essential Services and Programs for Education, Municipal Revenue Sharing, Homestead, BETE Exemption, and Veteran's Reimbursement. As of 06/30/2023 Lisbon's total bonded indebtedness is \$14,294,476.

CURRENT BILLING DISTRIBUTION

	RATE	PERCENTAGE	AMOUNT
COUNTY	0.89	4.23 %	\$ 55.16
MUNICIPAL	12.74	60.37 %	\$ 787.21
SCHOOL	7.47	35.40 %	\$ 461.61
TOTAL	\$21.10	100.00 %	\$ 1,303.98

REMITTANCE INSTRUCTIONS
Please make check or money order payable to
TOWN OF LISBON and mail to

TOWN OF LISBON
ATTN: TAX COLLECTOR
300 LISBON STREET
LISBON, ME 04250



TOWN OF LISBON, 300 LISBON STREET, LISBON, ME 04250

FISCAL YEAR 2024

ACCOUNT: 005528 RE
NAME: HIBBARD, STANLEY

MAP/LOT: U03-019
LOCATION: 135 MAIN STREET
ACREAGE: 0.32



INTEREST BEGINS ON 3/16/2024

DUE DATE AMOUNT DUE AMOUNT PAID

3/15/2024 651.99 _____

PLEASE REMIT THIS PORTION WITH YOUR SECOND PAYMENT

TOWN OF LISBON, 300 LISBON STREET, LISBON, ME 04250

FISCAL YEAR 2024

ACCOUNT: 005528 RE
NAME: HIBBARD, STANLEY

MAP/LOT: U03-019
LOCATION: 135 MAIN STREET
ACREAGE: 0.32



INTEREST BEGINS ON 9/16/2023

DUE DATE AMOUNT DUE AMOUNT PAID

9/15/2023 651.99 _____

PLEASE REMIT THIS PORTION WITH YOUR FIRST PAYMENT

LEAD PAINT DISCLOSURE/ADDENDUM

AGREEMENT BETWEEN Stanley Hibbard (hereinafter "Seller")
AND _____ (hereinafter "Buyer")
FOR PROPERTY LOCATED AT 135 Main Street, Lisbon Falls, ME 04252

Said contract is further subject to the following terms:

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 one below):

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

 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 one below):

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

 Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Buyer's Acknowledgment

- (c) Buyer has received copies of all information listed above.
(d) Buyer has received the pamphlet Protect Your Family from Lead in Your Home.
(e) Buyer has (check one below):
 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
 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 Acknowledgment

(f) Agent has informed the Seller of the Seller's obligations under 42 U.S.C. 4852(d) 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.

_____	Date	<u>Stanley Hibbard</u>	Date	<u>6/6/24</u>
Buyer		Seller Stanley Hibbard		
_____	Date	_____	Date	_____
Buyer		Seller		
_____	Date	_____	Date	_____
Buyer		Seller		
_____	Date	<u>Sam Prindle</u>	Date	<u>6/6/24</u>
Buyer		Seller		
_____	Date	<u>Sam Prindle</u>	Date	_____
Agent		Agent Sam Prindle		

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REALTOR®
Exp Realty, 353 Congress Street Portland ME, 04101
Sam Prindle

Produced with Lone Wolf Transactions (zipForm Edition) 717 N Harwood St, Suite 2200, Dallas, TX 75201 www.lw.com

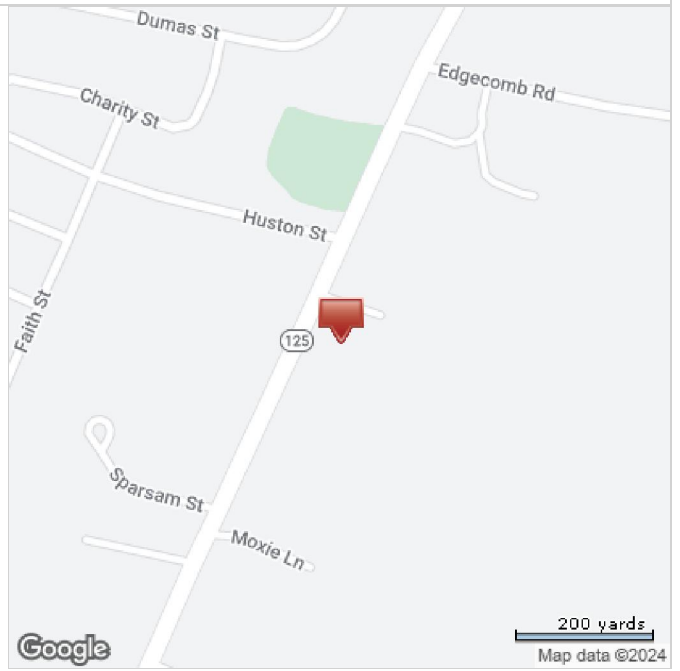
Phone: 2077400596

Fax: 9782250952



Stanley Hibbard

PROPERTY MAP



*Lot Dimensions are Estimated

N O T WARRANTY DEED N O T
A N A N

O F F I C I A L O F F I C I A L

KNOW ALL MEN BY THESE PRESENT: That Debra M. Rogers of 8 Booker Street Apt#2, Lisbon Falls, ME 04252, for consideration paid grant(s) to Stanley Hibbard, of 1181 Lewiston Road, New Gloucester ME 04260, with WARRANTY COVENANTS;

A certain lot or parcel of land with the buildings and improvements thereon situated in Lisbon, County of Androscoggin, and State of Maine and being bounded and described as follows:

Beginning at a point on the easterly line of Main Street at the southwesterly corner of land formerly of George A. Littlefield; then in an easterly direction two hundred thirty (230) feet to an iron set in the ground; then in a southerly direction sixty (60) feet to an iron set in the ground; then in a westerly direction two hundred thirty (230) feet to an iron set in the ground in said line of Main Street; then in a northerly direction along said line of Main Street sixty (60) feet to the point of beginning.

MAINE REAL ESTATE
TRANSFER TAX PAID

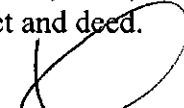
Reference is hereby made to a deed to Debra M. Rogers by virtue of a warranty deed from James M. Fernald to Debra M. Rogers and Martin E. Pfusched dated 09/18/1987 and recorded at the Androscoggin County Registry of Deeds in Book 2153, Page 9. Martin E. Pfusched died April 12, 1998, leaving Debra M. Rogers as surviving joint tenant.

Executed this 8th day of October, 2010.


Debra M. Rogers

State of Maine
County of Cumberland October 8, 2010

Then personally appeared before me on this 8th day of October, 2010, the said Debra M. Rogers and acknowledged the foregoing to be his/her/their voluntary act and deed.


Notary Public/Justice of the Peace
Commission expiration:



PHENIX TITLE SERVICES, LLC
5 MOULTON STREET, 6th FLOOR
PORTLAND, ME 04101

ANDROSCOGGIN COUNTY
TINA M CHOUINARD
REGISTER OF DEEDS

11/1007 5013-128-1000

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: LISBON 43-19
Street: 135 MAIN ST
Subdivision Lot #:

PROPERTY OWNERS NAME

Village Real Estate
Last: Fernald First: James
Applicant Name: Joe St. Louis
Mailing Address of Owner/Applicant (If Different):

LISBON PERMIT # 430 TOWN COPY
Date Permit Issued: 11/13/86 \$ 30.00 FEE
Local Plumbing Inspector Signature: [Signature] L.P.I. # 5277
If Double Fee Charged:

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: [Signature] Date: 11-13-86

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: 11/19/86

PERMIT INFORMATION

THIS APPLICATION IS FOR:

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

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requiring Local Plumbing Inspector Approval
- Requires 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: UNK

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER:

DISPOSAL SYSTEM TO SERVE:

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

SIZE OF PROPERTY: 1/4 ACRE
ZONING: -

TYPE OF WATER SUPPLY

Public

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

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

SPECIFY:

PUMPING

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

DOSE: 18 GALS.

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

2 BED ROOM HOUSE MODERATE FLOW

DESIGN FLOW: 240 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
4	C

DEPTH TO LIMITING FACTOR: 23

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

- BED 630 Sq. Ft.
- CHAMBER Sq. Ft.
 REGULAR H-20
- TRENCH Linear Ft.
- OTHER:

SITE EVALUATOR STATEMENT

SITE EVALUATION WAIVED BY LOCAL OPTION

On 6-2-86 (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.

RF3 astor
Site Evaluator Signature

38
SE#

6-7-86
Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

City, Plantation

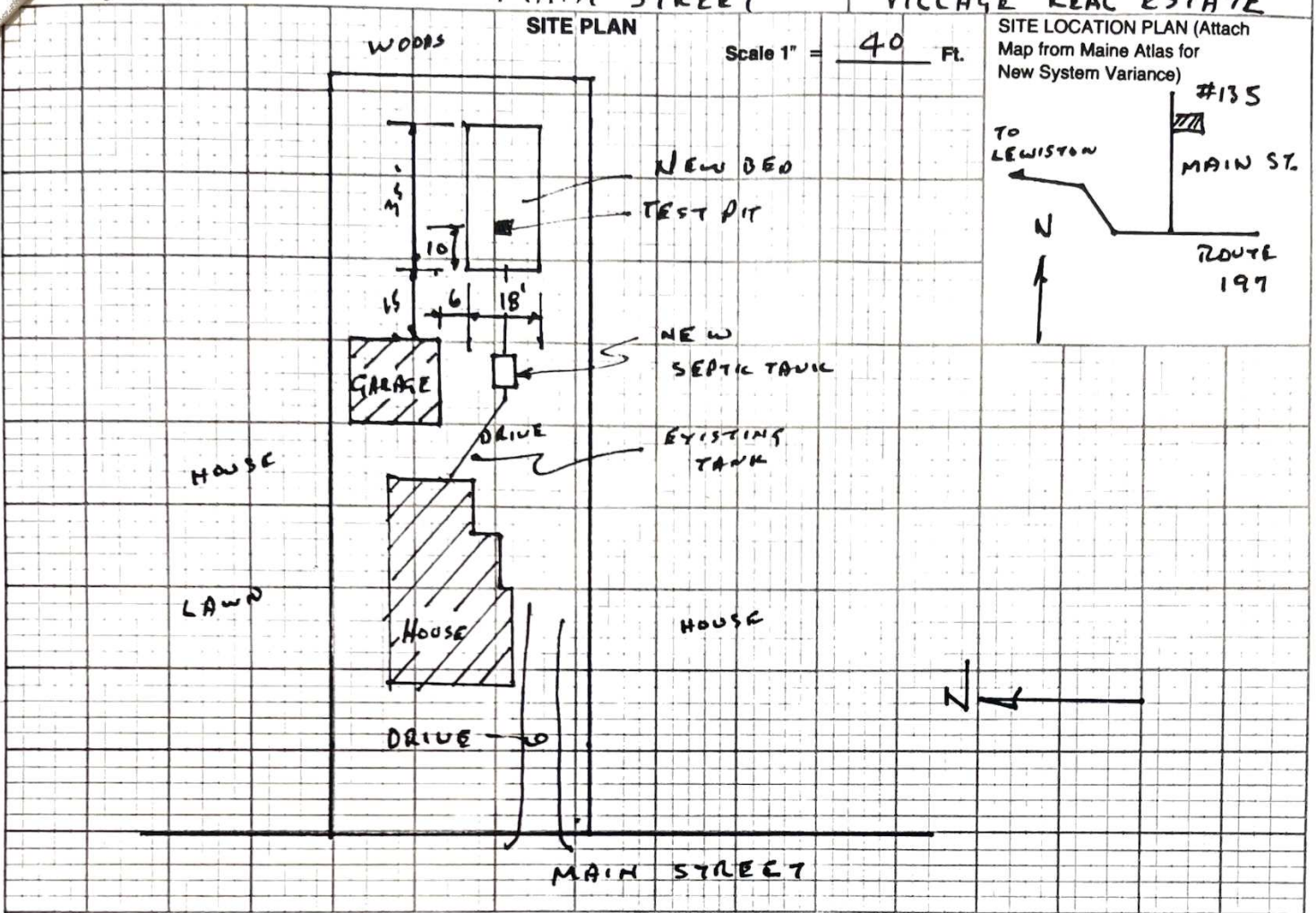
LISBON

Street, Road, Subdivision

MAIN STREET

Owners Name

VILLAGE REAL ESTATE



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

Observation Hole 1 Test Pit Boring

6 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	LOAMY SAND		BROWN	
6				
10		FRIABLE	YELLOWISH BROWN	
15	SAND			
20				MOTTLING
30	LOAMY SAND			
40				
50				

Soil Profile <u>A</u>	Classification <u>C</u>	Slope <u>4</u> %	Limiting Factor <u>23'</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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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				
10				
15				
20				
30				
40				
50				

Soil Profile _____	Classification _____	Slope _____ %	Limiting Factor _____	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
--------------------	----------------------	---------------	-----------------------	---

RFBester
Site Evaluator Signature

38

SE#

6-7-86

Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

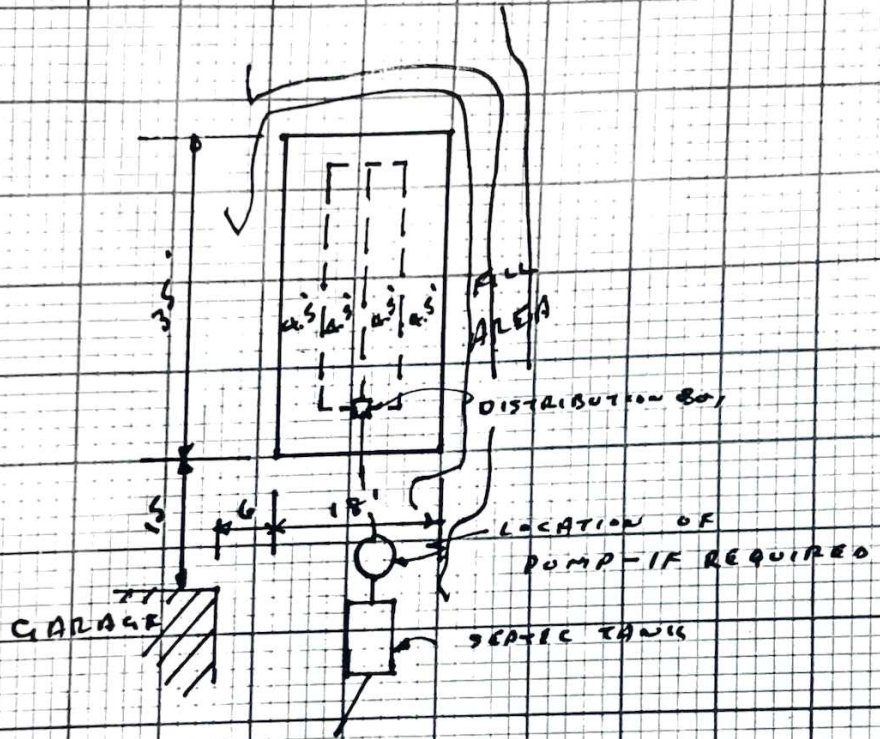
Orientation
LISBON

Street, Road, Subdivision
MAIN STREET

Owners Name
VILLAGE REAL ESTATE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



PIT IS 20" BELOW FINISH LINE

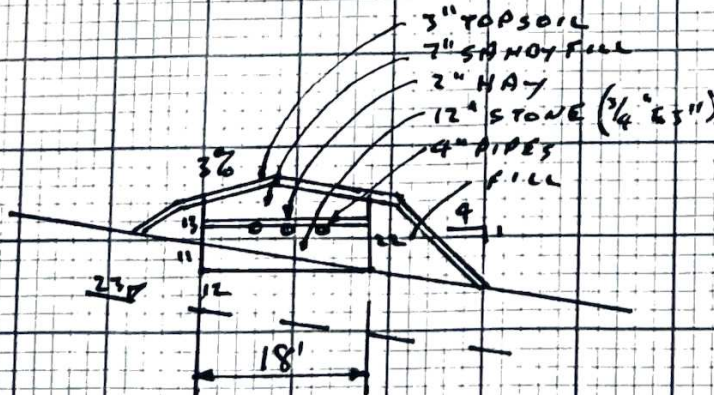
FILL REQUIREMENTS
Depth of Fill (Upslope) 13"
Depth of Fill (Downslope) 22"

CONSTRUCTION ELEVATIONS
Reference Elevation is 0"
Bottom of Disposal Area -27"
Top of Distribution Lines or Chambers -16"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
SHINGLE LINE ON HOUSE
ELEVATION 0"

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 20 Ft.



RF Baston
Site Evaluator Signature

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SE#

6-7-86

Date