Called 9/28 2:23

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	AUGUSTA
Street or Road	317 OLD BELGRADE RD.
Subdivision, Lot #	

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

AUGUSTA PERMIT # 5880 TOWN COPY

Date Permit Issued: 9/28/06 $ 175.00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. #

OWNER/APPLICANT INFORMATION

Name (last, first, MI): PHILBROOK, DAVID + BONNIE ■ Owner ☐ Applicant

Mailing Address of Owner/Applicant:

Daytime Tel. #: 622-3694

Municipal Tax Map # 1 Lot # 2C

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.

Brenda J. Philbrook 9/28/06
Signature of Owner or Applicant Date

CAUTION: INSPECTION REQUIRED

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

Local Plumbing Inspector Signature (1st) date approved 8/3/07 (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☐ 1. First Time System
- ☐ 2. Replacement System
  - Type replaced: ____
  - Year installed: ____
- ■ 3. Expanded System
  - ■ a. Minor Expansion
  - ☐ b. Major Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES

- ■ 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

DISPOSAL SYSTEM COMPONENTS

- ☐ 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

SIZE OF PROPERTY

± 5.3 ☐ SQ. FT. ■ ACRES

SHORELAND ZONING

☐ Yes ■ No

DISPOSAL SYSTEM TO SERVE

- ☐ 1. Single Family Dwelling Unit, No. of Bedrooms: ____
- ☐ 2. Multiple Family Dwelling, No. of Units: ____
- ■ 3. Other: 1 BEDROOM APT. (specify)

Current Use ☐ Seasonal ■ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY

☐ 1. Drilled Well ■ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ■ 1. Concrete
  - ■ a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: ____

CAPACITY: 1,000 GAL.

DISPOSAL FIELD TYPE & SIZE

- ■ 1. Stone Bed ☐ 2. Stone Trench
- ☐ 3. Proprietary Device
  - ☐ a. cluster array ☐ c. Linear
  - ☐ b. regular load ☐ d. H-20 load
- ☐ 4. Other: ____

SIZE: 500 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

■ 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

DESIGN FLOW

120 gallons per day

BASED ON:

- ■ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS for other facilites

- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
B	C	1

at Observation Hole # JK 1

Depth 2 "

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- ☐ 1. Small—2.0 sq. ft. / gpd
- ☐ 2. Medium—2.6 sq. ft. / gpd
- ☐ 3. Medium—Large 3.3 sq. f.t / gpd
- ■ 4. Large—4.1 sq. ft. / gpd
- ☐ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ■ 1. Not Required
- ☐ 2. May Be Required
- ☐ 3. Required

Specify only for engineered systems:

DOSE: ____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 44 d 21 m 54 s

Lon. 069 d 47 m 11 s

if g.p.s, state margin of error: ±30'

SITE EVALUATOR STATEMENT

I certify that on 9/6/06 (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
	255	9/13/06

Site Evaluator Name Printed	Telephone Number	E-mail Address
JOSHUA KATZ	725.6301	KATZTHAL@GWI.NET

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

HHE-200 Rev. 4/05

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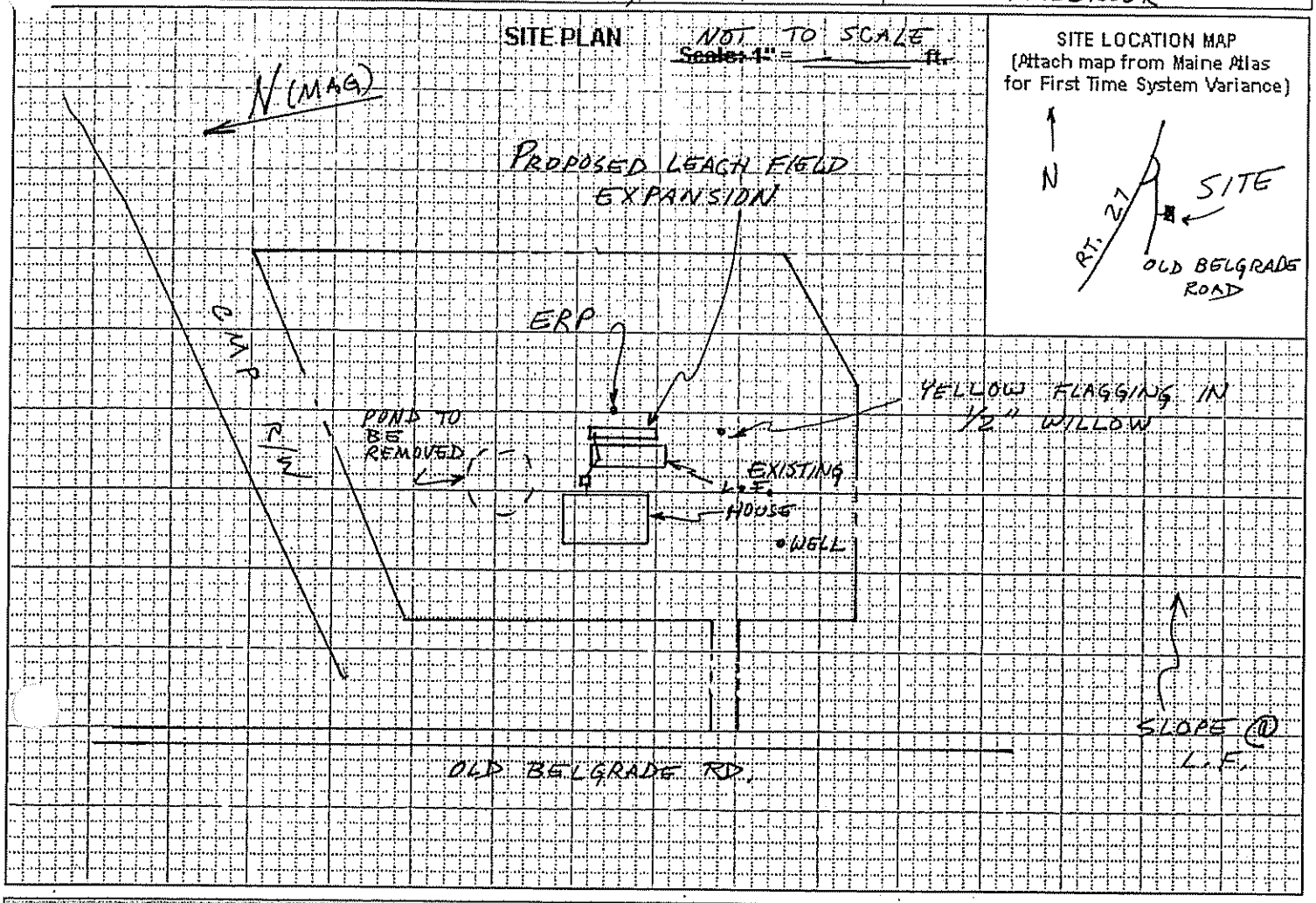
Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	OLD BELGRADE RD.	D+B PHILBROOK

SITE PLAN NOT TO SCALE ~~Scale: 1" = ____ ft.~~



SITE LOCATION MAP
(Attach map from Maine Atlas for First Time System Variance)

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

Observation Hole # JK1 ■ Test Pit ☐ Boring

0 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	F SAND FILL	LOOSE	LT BRN	
6–12				
12–18	SILTY F SAND		M BRN	
18–24				
24–30	SILT	FRIABLE	OLIVE/GRAY	COMMON DISTINCT
30–36	SILTY CLAY	FIRM		
36–48				

BOH

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth
8	C	4-8	23

■ Groundwater ■ Restrictive Layer ☐ Bedrock

Observation Hole # _____ ☐ Test Pit ☐ Boring

_____ " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6				
6–12				
12–18				
18–24				
24–30				
30–36				
36–42				
42–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth

☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature _____ SE # 255 Date 9/13/06

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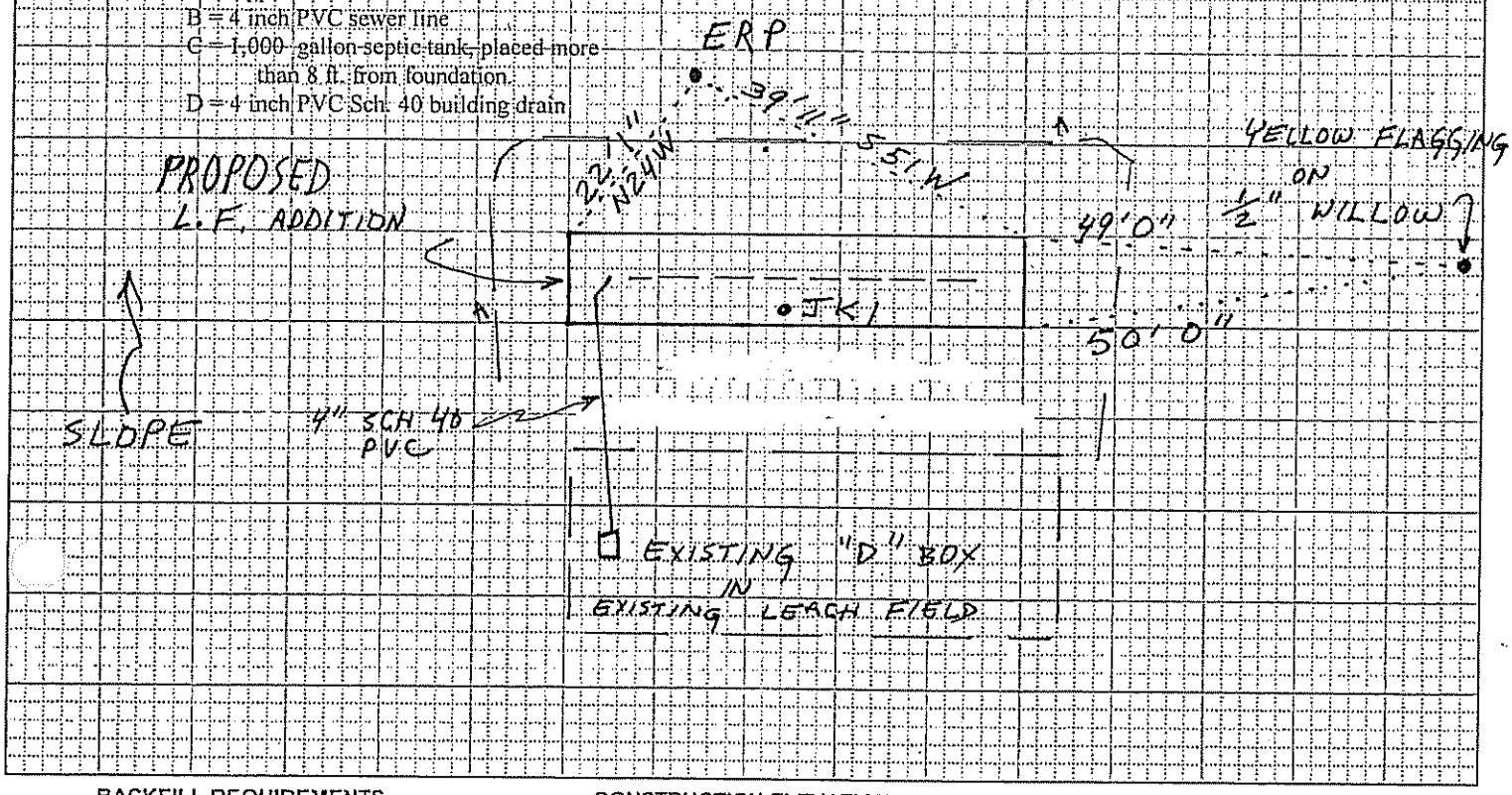
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft.

10' by 50' LEACHFIELD ADDITION

NOTE: All requirements of CH 12 / 14 CMR 241 shall be met

LEGEND
A = Approximate limit of fill
B = 4 inch PVC sewer line
C = 1,000 gallon septic tank, placed more than 8 ft. from foundation
D = 4 inch PVC Sch. 40 building drain

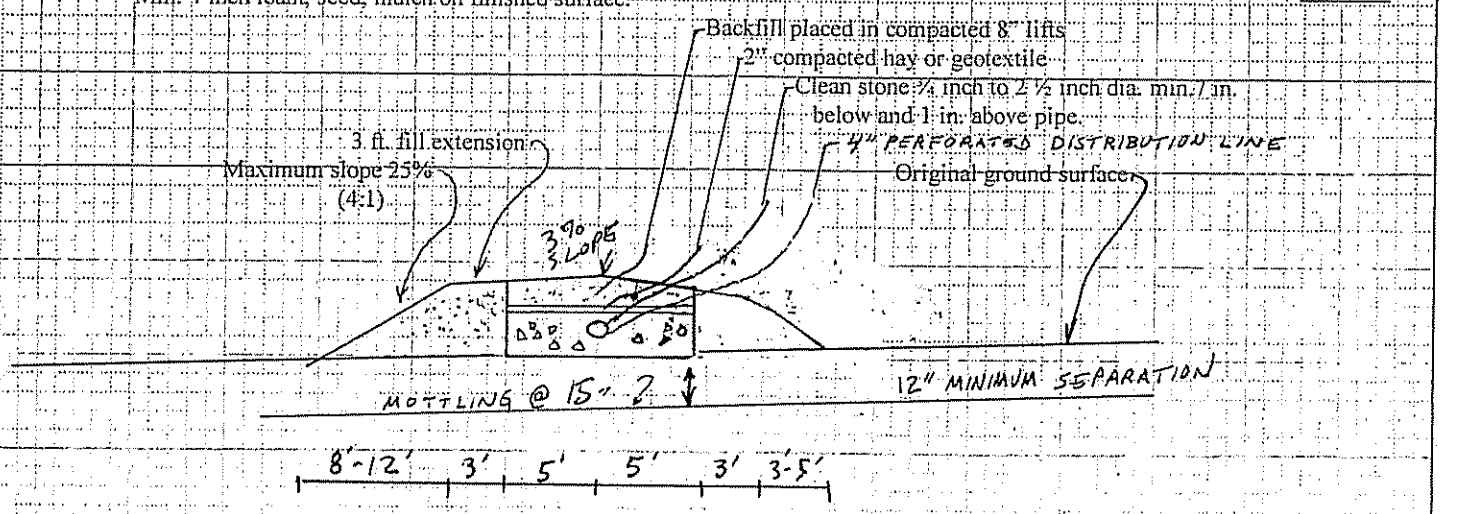


BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	±8"	Finished Grade Elevation	-20"	Location & Description: NAIL FLAGGED PINK - TOP OF STAKE - 50" ABV. GRD.
Depth of Backfill (downslope)	±28"	Top of Distribution Pipe or Proprietary Device	-32"	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-44"	Reference Elevation is: 0.0" or: _____

NOTES
- Backfill to be coarse sand to gravelly coarse sand
- Minimum of 8" backfill above hay or geotextile.
- Min. 4 inch loam, seed, mulch on finished surface.

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 5' ft.
Horizontal: 1" = 10' ft.



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