

MAINE DEPARTMENT OF HUMAN SERVICES APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT		This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit.		Page 1 of 2
Town <u>Augusta</u>	Street, Road, etc. <u>Old Belgrade Rd</u> If on water body, give name	Plumbing Permit No. <u>7068EP</u>	Date of Plumbing Permit <u>11-8-77</u>	
Owner of property <u>Charlie Gow</u>		Size of lot <u>3 ±</u>	<input type="checkbox"/> Sq. feet <input checked="" type="checkbox"/> Acres	
Name & type of establishment if other than private home		Is lot Zoned? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of Zoning <input type="checkbox"/> Shoreland <input type="checkbox"/> Resource Protection	
Name of applicant Owner's agent <u>Charlie Gow</u>		If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="checkbox"/> Deed restriction re. private sewage disposal <input type="checkbox"/> Copy of the subdivision's soils report <input type="checkbox"/> Soils report from a State Agency		
Applicant's address Street, Box, etc. <u>RFD #3</u>	Tel. No. <u>622-7976</u>			
Town <u>Augusta</u>	Zip Code <u>04330</u>	Subdivision name <u>N/A</u>	Lot No. <u>N/A</u>	
Applicant's signature <u>Charlie K. Gow</u>	Date <u>11-8-77</u>			
This application is for: <input type="checkbox"/> New System <input type="checkbox"/> Expanded System <input type="checkbox"/> Replacement System <input checked="" type="checkbox"/> Replacement of <input type="checkbox"/> Treatment Tank Only <input type="checkbox"/> Disposal Area Only				
The water supply for this property is: <input checked="" type="checkbox"/> Dug well, depth _____, lining _____; <input type="checkbox"/> Drilled well, depth _____, lining _____; <input type="checkbox"/> Spring <input type="checkbox"/> depth _____, lining _____; Surface water <input type="checkbox"/> Body, <input type="checkbox"/> Course— <input type="checkbox"/> with disinfection, <input type="checkbox"/> without disinfection. <input type="checkbox"/> Public Utility, name _____				

SITE INVESTIGATION					
Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II.					
	Soil Profile No. <u>1</u>	Soil Profile No. <u>2</u>	Soil Profile No.	Soil Profile No.	Soil Profile No.
	<input checked="" type="checkbox"/> Pit <input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring
Thickness of each soil strata encountered	Organic strata Inches <u>0</u>	Organic strata Inches <u>0</u>	Organic strata Inches	Organic strata Inches	Organic strata Inches
	1st strata <u>BROWN SANDY LOAM</u> Inches <u>14.5 M</u>	1st strata <u>BROWN SANDY LOAM</u> Inches <u>2.0 CM</u>	1st strata Inches	1st strata Inches	1st strata Inches
	2nd strata <u>OLIVE SANDY LOAM</u> Inches <u>12.5 M</u>	2nd strata <u>OLIVE SANDY LOAM</u> Inches <u>36.5 M</u>	2nd strata Inches	2nd strata Inches	2nd strata Inches
	3rd strata Inches	3rd strata Inches	3rd strata Inches	3rd strata Inches	3rd strata Inches
Depth from bottom of organic horizon to:	Total Depth of observation hole Inches <u>26</u>	Total Depth of observation hole Inches <u>50</u>	Total Depth of observation hole Inches	Total Depth of observation hole Inches	Total Depth of observation hole Inches
	Max. Ground water table—mottling <u>14</u> Inches <input type="checkbox"/> None Evident	Max. Ground water table—mottling <u>18</u> Inches <input type="checkbox"/> None Evident	Max. Ground water table—mottling Inches <input type="checkbox"/> None Evident	Max. Ground water table—mottling Inches <input type="checkbox"/> None Evident	Max. Ground water table—mottling Inches <input type="checkbox"/> None Evident
	Impervious layer, clay, etc. <input checked="" type="checkbox"/> None Evident Inches	Impervious layer, clay, etc. <input checked="" type="checkbox"/> None Evident Inches	Impervious layer, clay, etc. <input type="checkbox"/> None Evident Inches	Impervious layer, clay, etc. <input type="checkbox"/> None Evident Inches	Impervious layer, clay, etc. <input type="checkbox"/> None Evident Inches
	Bedrock <input checked="" type="checkbox"/> None Evident Inches Type of Bedrock	Bedrock <input checked="" type="checkbox"/> None Evident Inches Type of Bedrock	Bedrock <input type="checkbox"/> None Evident Inches Type of Bedrock	Bedrock <input type="checkbox"/> None Evident Inches Type of Bedrock	Bedrock <input type="checkbox"/> None Evident Inches Type of Bedrock
Surface slope <u>5</u> %	Surface slope <u>5</u> %	Surface slope %	Surface slope %	Surface slope %	
Soil Group & Condition per Table 9-1 of the Code, II <u>5-C</u>	Soil Group & Condition per Table 9-1 of the Code, II <u>5C</u>	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	

On 11-7-77 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature Richard P. Baker Health Engineering License No. 79

Date signed 11-7-77

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED					
Show location of system and details on sketches on page 2, and refer to completed sample form					
SYSTEM: <input checked="" type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe See Chapter 9 of the Code, II.	TREATMENT TANK: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons <u>EXISTING</u> <input type="checkbox"/> Aerobic Tank Manufacturer— Model No. Size in gallons	SUBSURFACE ABSORPTION AREA			
		Type <input type="checkbox"/> Trench System: Total trench length <u>N/A</u> <input type="checkbox"/> Bed System Length <u>40</u> Width <u>20</u> <input type="checkbox"/> Chamber System Number <input type="checkbox"/> Type <u>N/A</u> <input type="checkbox"/> Single File <input type="checkbox"/> Type <u>N/A</u> <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length Width <u>N/A</u> at base <input type="checkbox"/> Special System Length Width <u>N/A</u> <u>WAIVER</u> <input checked="" type="checkbox"/> Required <input type="checkbox"/> Not Required		SIZE <input type="checkbox"/> Very Small <input type="checkbox"/> Small <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Medium Large <input type="checkbox"/> Large <input type="checkbox"/> Extra Large	
		SITE MODIFICATION Fill will be: <u>1</u> in. uphill; <u>2.5</u> in. downhill DETAILS <input type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> is not required. The Dose will be _____ gallons		DISTANCES <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.	

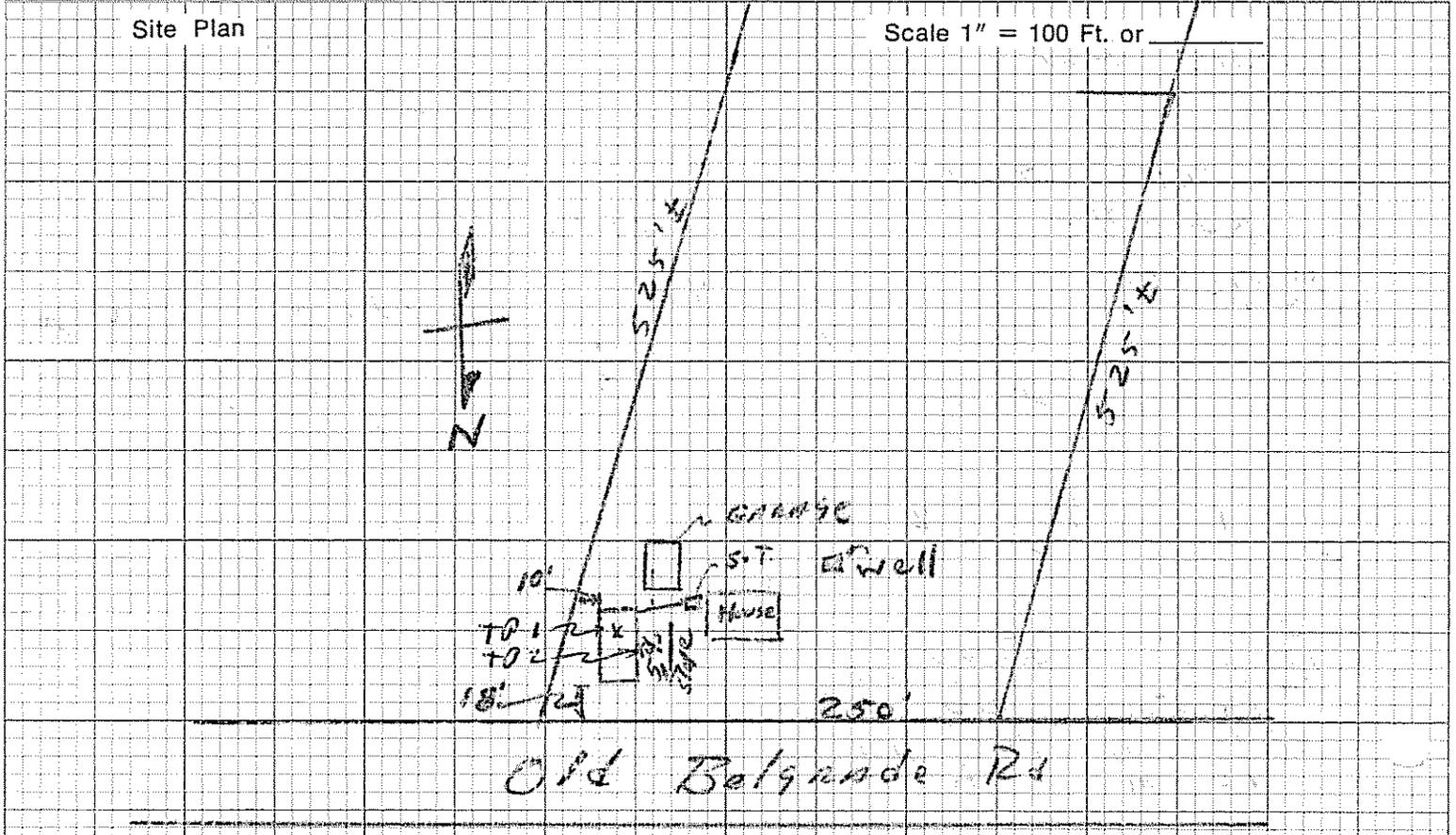
PROPERTY / LOT LOCATION MAP Location—roads, landmarks	FOR THE USE OF LPI ONLY <input type="checkbox"/> Denial: Application is denied for following reasons; portions of the Code II are cited. Form is incomplete (____ pg.) as to <input type="checkbox"/> General info, <input type="checkbox"/> Site Investigation, <input type="checkbox"/> System Proposed, <input type="checkbox"/> Site Plan, <input type="checkbox"/> Disposal System Plan, <input type="checkbox"/> Cross-Section, <input type="checkbox"/> Statement. See Section 2.3. <input type="checkbox"/> Site Investigation indicates site is <input type="checkbox"/> totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10. <input type="checkbox"/> Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1. <input type="checkbox"/> System Proposed does not conform to Code; See Sections 9. <input type="checkbox"/> Site Investigation indicates site modifications are necessary; See Sections <input type="checkbox"/> 4.3, <input type="checkbox"/> 4.4, <input type="checkbox"/> 4.5, <input type="checkbox"/> 8.7. <input type="checkbox"/> Miscellaneous _____ See Section _____ <input checked="" type="checkbox"/> Acceptance: Application for permit is approved <input checked="" type="checkbox"/> with condition specified, comply with Section <u>4.3 & 4.7</u> <input type="checkbox"/> without condition.
	Signed LPI <u>Richard P. Baker</u> Date <u>11-8-77</u> HHE-200 1/77

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Town Augusta	Street, Road, etc. Old Belgarde Rd If on water body, give name.	Owner of property Charlie Crow
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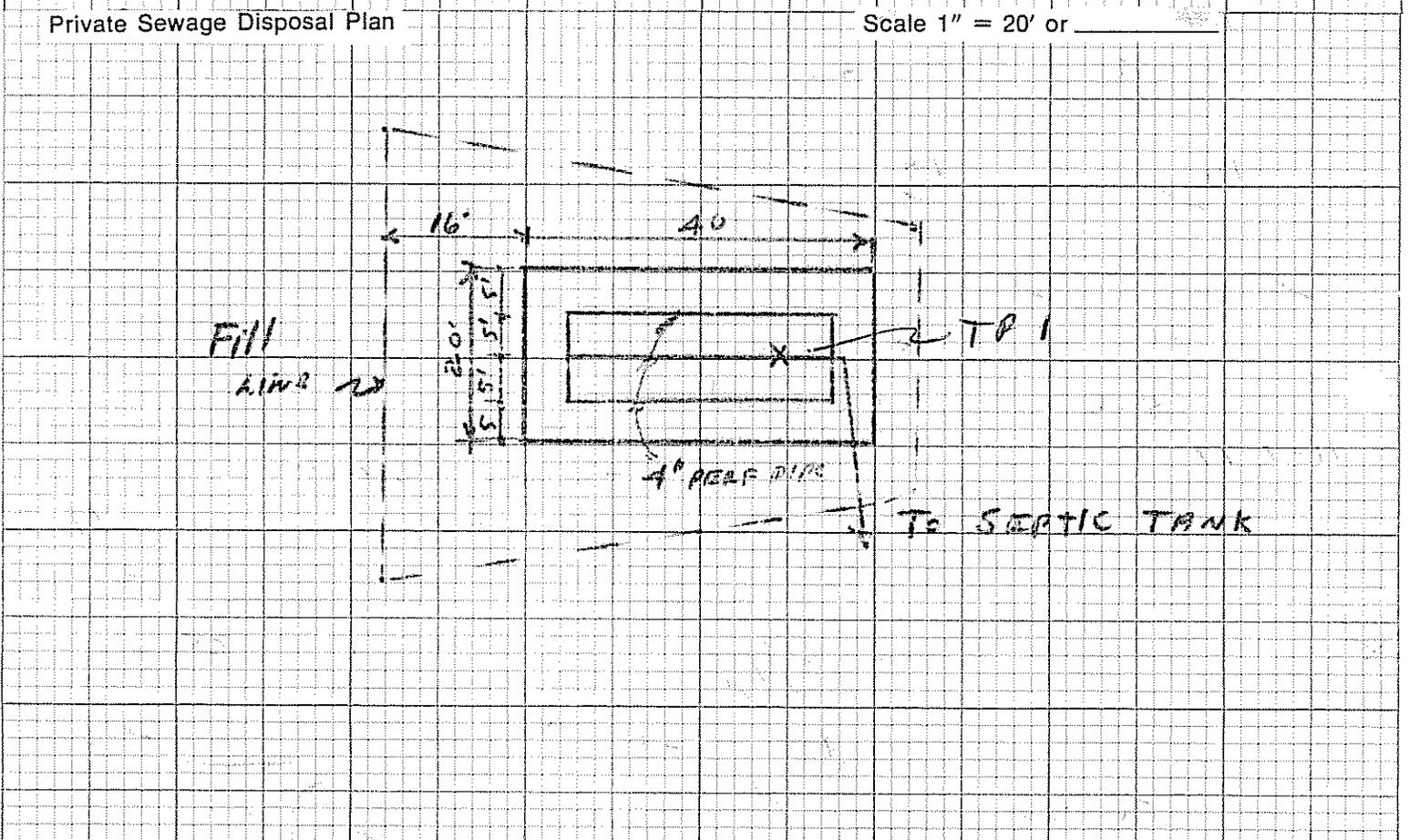
Site Plan

Scale 1" = 100 Ft. or _____



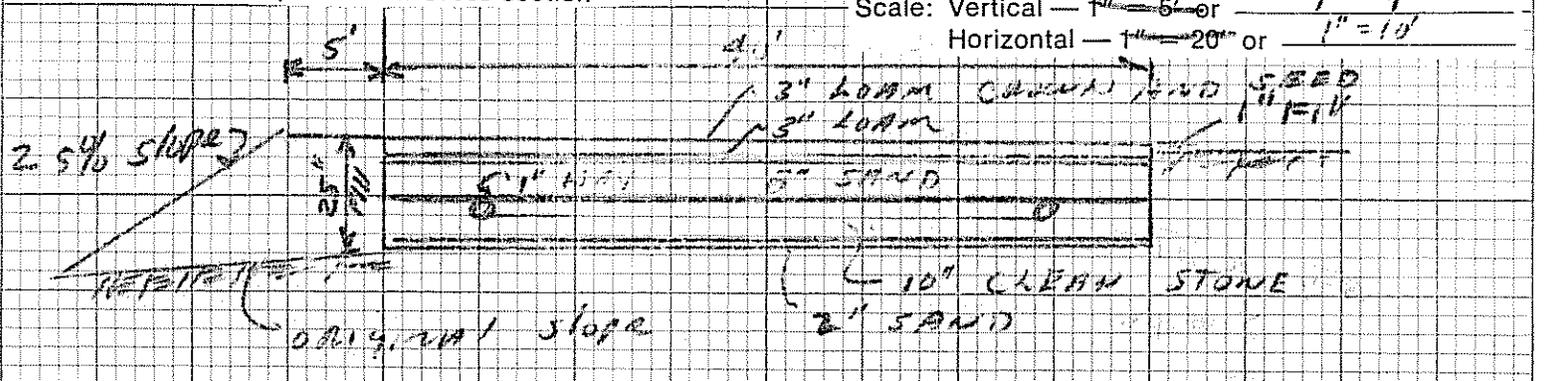
Private Sewage Disposal Plan

Scale 1" = 20' or _____



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or $\frac{1"}{5'}$
Horizontal — 1" = 20" or $\frac{1"}{20"}$



Statement: (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

HHE - 200 1/77

Signature Required

Date: **11-8-77**
Applicant: _____
Owner: **Charlie B. Crow**

LOCAL WAIVER FORM

ORIGINAL To be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

THE PURPOSE OF THIS AGREEMENT IS TO ASSIST INDIVIDUALS IN REPLACING EXISTING MALFUNCTIONING SEWAGE SYSTEMS OR CORRECTING EXISTING DIRECT OVERBOARD DISCHARGE SYSTEMS

To <u>Augusta</u>	Street, Road, etc. <u>Old Belgrade Road</u>	Plumbing Permit No. <u>7068EP</u>
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Owner of property <u>Charlie Gow</u>	Telephone No. <u>622-7976</u>
Owner's address Street, Box, etc. <u>RFD #3</u>	
Town <u>Augusta</u>	State <u>MAINE</u>
	Zip code <u>04330</u>

LOCAL WAIVER
FOR CORRECTING
EXISTING MALFUNCTIONING
OR OVERBOARD
DISCHARGE SYSTEMS

OWNER PROPOSES: to repair, expand, or replace an existing malfunctioning sewage disposal system, or replace an overboard discharge system which has been in existence since _____ and serves a seasonal or year-round single family dwelling on a 3A sq. ft. lot with category S-C soils (per table 9-1 Maine State Plumbing Code).

THE OWNER'S PROPOSAL MEETS THE CODE EXCEPT FOR SECTIONS NOTED BELOW

SECTION 4.3 SOILS

MOTTLING: To reduce the 15 inches below the organic layer requirement to 14 inches. (Nothing closer than 10 inches is to be allowed)

IMPERVIOUS LAYER: To reduce the 15 inches below the organic layer requirement to _____ inches. (Nothing closer than 10 inches is to be allowed)

SECTION 4.7 DISTANCES - DISPOSAL AREA FROM -

SURFACE WATER: Normal high water mark of any tidal water, swamp, bog, marsh, lake, pond, river, stream, or similar watercourse. To reduce the 100 foot requirements to _____ feet. (Nothing closer than 60 feet is to be allowed)

OWNER'S WELL: To reduce the 100 foot requirement to _____ feet. (Nothing closer than 75 feet is to be allowed, and no waiver is allowed on neighbor's well)

BUILDINGS: GARAGE To reduce the 20 foot requirement to 10 feet. (Nothing closer than 15 feet in the case of full basement and 10 feet in the case of slab construction is to be allowed)

PROPERTY LINE: To reduce the 10 foot requirement to _____ feet. (Nothing closer than 5 feet is to be allowed) This is applicable only if soil conditions are in category "B".

SECTION 4.7 DISTANCES - TREATMENT TANK FROM -

OWNER'S WELL: To reduce the 100 foot requirement to _____ feet. (Nothing closer than 50 feet is to be allowed) (No waiver allowed on distances to a neighbor's well)

SECTION 9.1

HOLDING TANK FOR SEASONAL DWELLINGS: Requesting permission to install a 1500 gallon holding tank. The tank is to be constructed in a manner specified in Section 7.6 with the associated alarms accompanied by flow reducing valves for shower and sinks, and low volume toilets.

