M/ C 11

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Middle Rd

PROPERTY OWNERS NAME

Last: GIROUX First: GERTRUDE

Applicant Name:	Same
Mailing Address of Owner/Applicant (If Different)	4½ West Crescent St, Apt A Augusta 04330

Caution: Permit Required
This Subsurface Wastewater Disposal System shall not be installed or modified without the authorization of the Local Plumbing Inspector.

AUGUSTA 2197 TOWN COPY

Date Permit Issued: 6 28 91 $ 40.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # [illegible]

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.

Gertrude Giroux 6-27-91

Signature of Owner/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.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER _____

SIZE OF PROPERTY	ZONING
~1 ac+	Rural

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☐ Requiring Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
Proposed Drilled well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING
1. ☐ NOT REQUIRED
2. ☒ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: 60 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3 Bedroom minimum flow

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
7	C

DEPTH TO LIMITING FACTOR 28.

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 525 Sq. Ft. ☐ REGULAR ☐ H-20 Infilt
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 5/3/89 (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.

Hanson Bishton 201 5/3/91

Site Evaluator Signature SE# Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.) Hanson Bishton 547-3005

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

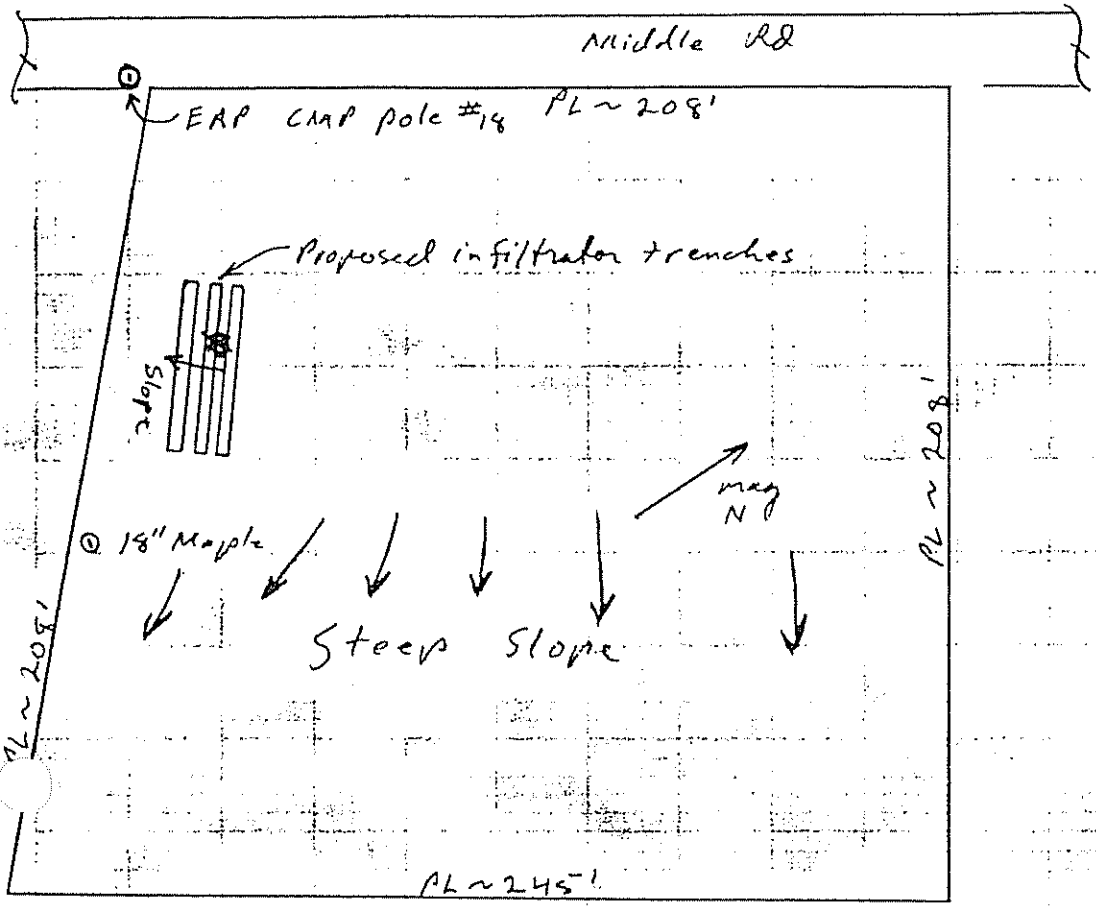
Town, City, Plantation: Augusta

Street, Road, Subdivision: Middle Rd

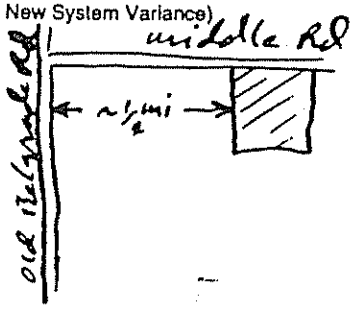
Owners Name: Craig Record

SITE PLAN

Scale 1" = 50 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



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

Observation Hole TP #1 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0–10	Sandy Loam		med Br	
10–15		Loose		
15–30	F. Sand		Yl. Br.	
30–50		Firm Layer	Ol Br	None

Soil	Classification	Slope	Limiting Factor	
7 (Profile)	C (Condition)	~12 %	27	☐ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0–50				

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Hanson Bigler
Site Evaluator Signature

201
SE#

5/8/88
Date

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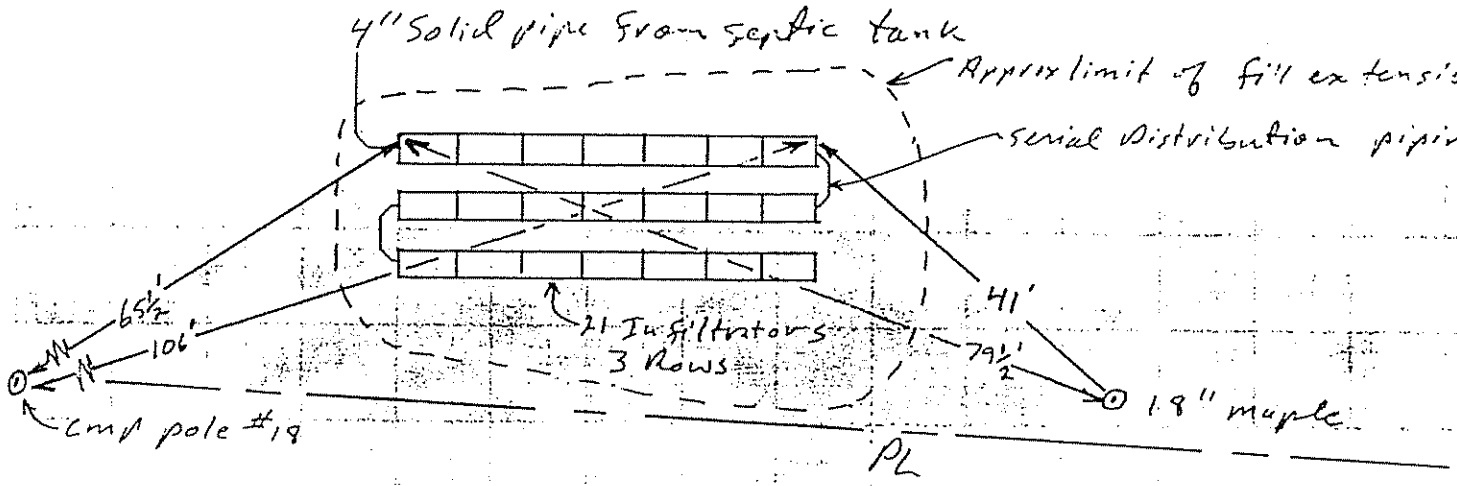
Department of Human Services
Division of Health Engineering

Town, City, Plantation: Augusta
Street, Road, Subdivision: Middle Rd
Owners Name: Craig Record

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

- All Construction to be in accordance w/ State plumbing Code



- Septic tank to be at least 8' from House and at least 100' from well
- Infiltrators to be at least 20' from House and at least 100' from well

FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope) (Varies) 18"	Reference Elevation is See	ERP is Red flagged nail in
Depth of Fill (Downslope) 18"	Bottom of Disposal Area Attached	Cmp pole #18 as shown
	Top of Distribution Lines or Chambers	

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = Ft.

Horizontal: 1 Inch = Ft.

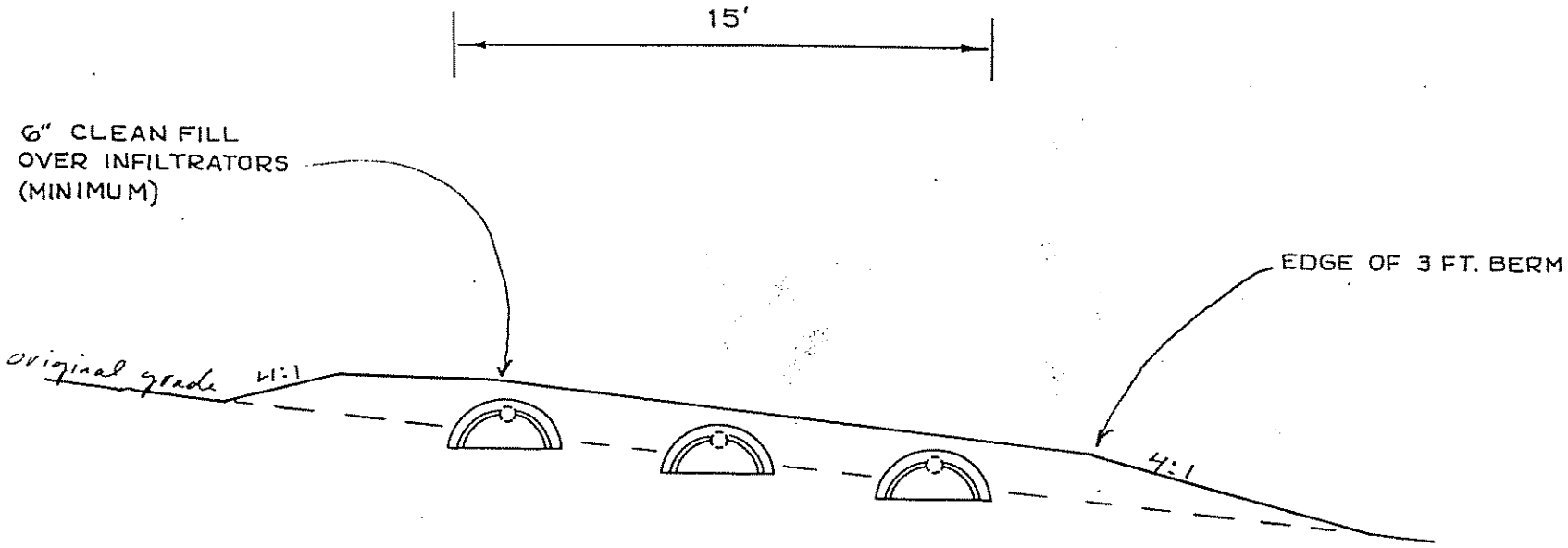
~ See Attached ~

Hanson Bryant
Site Evaluator Signature

201
SE#

5/8/88
Date

INFILTRATOR CROSS SECTION 11-12%



NOTES:

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER INFILTRATORS AND FILL EXTENSION AREAS.
2. BOTTOM OF INFILTRATORS TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM INFILTRATOR AREA.
4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

ORIGINAL GRADE

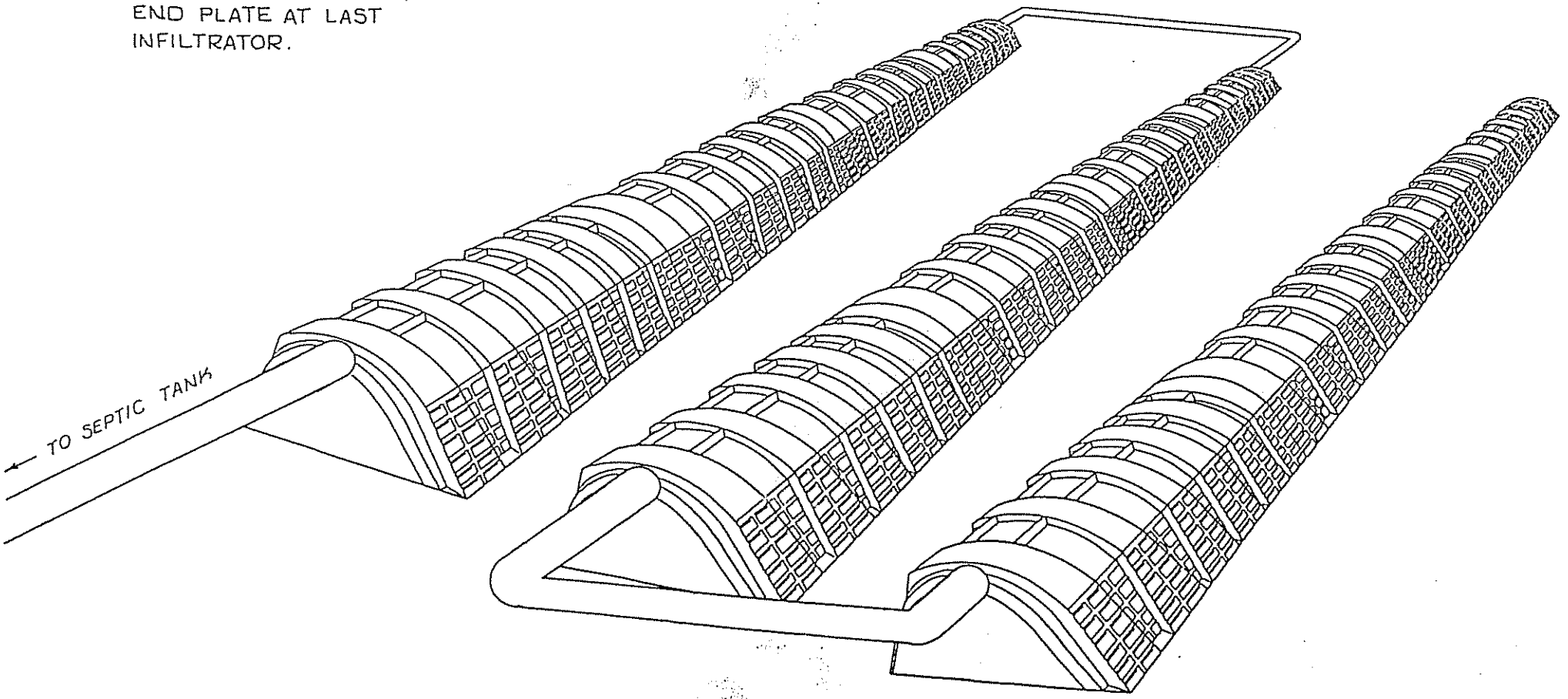
FILL UNDER INFILTRATORS TO BE NX TEXTURE.

FILL AROUND INFILTRATORS TO BE Sandy loam to Loamy Sand TEXTURE.

SITE EVALUATOR: Harrison Bispham			
OWNER: Craig Record		NUMBER OF INFILTRATORS: 21	PERCENT SLOPE: 12%
LOCATION: Middle Rd Augusta		ELEVATIONS: REFERENCE PT. 0'00"	BOTTOM TRENCH #1 -57"
DATE: 5/8/88	SCALE: 1 INCH = 5 FEET	BOTTOM TRENCH #2 -64"	BOTTOM TRENCH #3 -71"

NOTE:

NEED SPLASH PLATE AT BOTH ENDS OF TRENCH; END PLATE AT LAST INFILTRATOR.



Typical

INFILTRATOR TRENCH SYSTEM

SERIAL DISTRIBUTION