

# LIN·MAR ASSOCIATES

*Land Use Engineers*

RFD 3, AUGUSTA, MAINE 04330, PHONE: 547-3750

August 23, 1976

Re: Proposed Sewage Disposal  
System for Leon B. Dumont  
Subdivision, Middle Road,  
Augusta, Maine  
(Job No. 7601-313/315).

To Whom It May Concern:

The attached "HHE-200 Forms" and "Applications for Variances to the Private Sewage Disposal Code" provide details concerning proposed new sewage disposal systems for Lots 1A and 2A of the subject Subdivision.

A site evaluation by Lin-Mar Associates on June 21, 1976 concluded that, due to a high seasonal water table, it is not possible to install sewage disposal systems on the subject lots in complete conformance with the Private Sewage Disposal Code. For the following reasons, variances to the Private Sewage Disposal Code are justified to allow the installation of private sewage disposal systems on the subject Lots 1A and 2A.

1. The (17) lot Leon B. Dumont Subdivision was designed in early 1973. Percolation tests were conducted at the Subdivision in June 1973, in the area of Lots 1A and 2A, and acceptable percolation rates were reported. Based on all data submitted, including the aforementioned percolation test reports, the City of Augusta Planning Board granted full approval to the (17) lot Subdivision on June 4, 1973.

2. To improve lot and site characteristics for subsurface sewage disposal, Mr. Dumont has agreed to the following Subdivision alterations.

a. Originally approved Lots 1, 2 and 3, each with 150' frontage, have been combined to create two lots (1A and 2A) each with 225' of frontage.

b. An underground storm drainage system will be constructed to divert an existing natural drainageway and to lower the water table on Lots 1A and 2A.

LIN-MAR ASSOCIATES

Leon B. Dumont Subdivision

Page 2

3. The proposed alterations in the site drainage characteristics will allow the installation of effective and adequate subsurface sewage disposal systems on both Lots 1A and 2A.

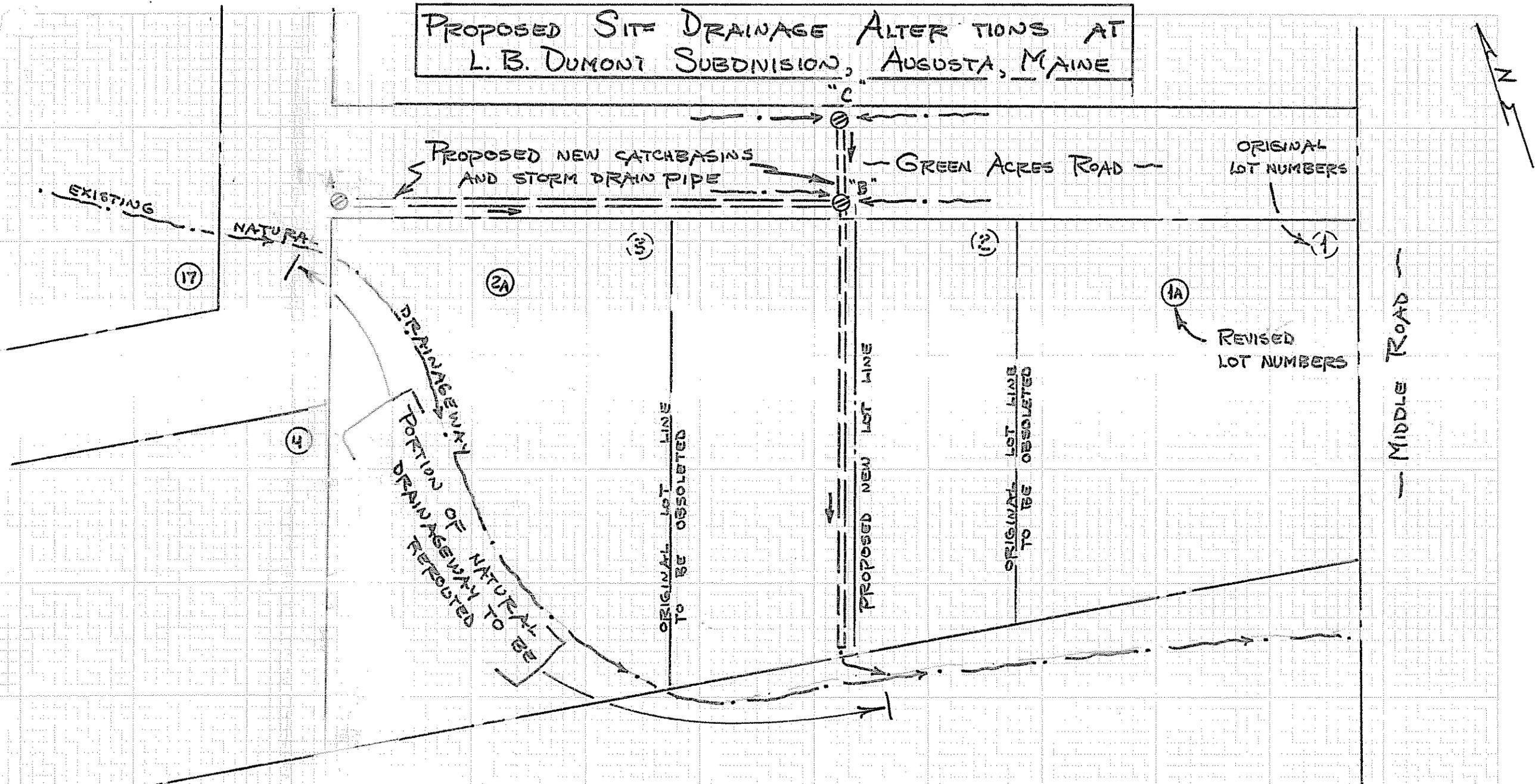
In addition to HHE-200 and Variance forms, attached hereto are copies of the aforementioned percolation tests and an illustration of the proposed site drainage alterations.

Sincerely,

*Paul R. Lindberg*  
Paul R. Lindberg, P.E.

PRL/gam

PROPOSED SITE DRAINAGE ALTERATIONS AT  
L. B. DUMONT SUBDIVISION, AUGUSTA, MAINE



PORTION OF THE LEON B. DUMONT SUBDIVISION  
MIDDLE ROAD, AUGUSTA, MAINE

BY: LIN. MAR ASSOCIATE  
FRL 8-19-76

(FINAL APPROVAL BY THE CITY OF AUGUSTA PLANNING BOARD  
GRANTED JUNE 4, 1973)  
SCALE: 1" = 50'

APPLICATION AND AGREEMENT

7601-313  
 Lot # 1A

TO WAIVE CERTAIN PROVISIONS OF THE PLUMBING CODE

I, Leon B. Dumont, hereby apply to the Maine State Department of Human Services for permission authorizing the responsible Plumbing Inspector to waive certain provisions of the Plumbing Code for an installation in connection with a dwelling or building at Middle Road, Augusta.  
 (owner) (street) (city or town)

This may include materials, methods, dimensions or conditions not specifically approved by the Plumbing Code. Please draw a brief sketch of the property's location on the back of this form so an inspector can find it. Include landmarks, route numbers and street names.

Section of Code to be waived.	Description of specific waiver.
1. Table 9.1	Allow a 20'x70' disposal bed on 12-D soils.
2.	
3.	

(If additional space is needed, attach a list)

In all other respects, the installation will comply with the Code. The installation will be made in accordance with the ATTACHED PLAN. A permit is to be issued by the Plumbing Inspector if he is in agreement. The undersigned stipulates that he is the owner and occupant of the building involved and that the building is not for sale in the foreseeable future. The installation will be made by: \_\_\_\_\_, License No. \_\_\_\_\_.

If any defects or inadequacies appear, I will promptly notify the State Department of Human Services and subsequently make such corrections as the Department shall find necessary

Owner's signature Leon B. Dumont

NOTE: A PLAN TO SCALE  
 MUST BE ATTACHED

Winter address 257 Northern Ave

Summer address \_\_\_\_\_

Telephone 38282 Date 8-30-76

THE FOLLOWING TO BE FILLED IN BY THE PLUMBING INSPECTOR

I am (Local), (Alternate) Plumbing Inspector for the town of \_\_\_\_\_.  
 I have examined the plans for the installation described above and I find the building to be in my jurisdiction.

I (do), (do not) recommend the issuance of a special permit for the installation as described above.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Return this form to the Division of Health Engineering, Department of Human Services Augusta, Maine. NO permit shall be issued for this waiver until the Local Plumbing Inspector receives notification from this office.

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

MAINE DEPARTMENT OF HUMAN SERVICES  
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT (For systems disposing of less than 2000 gallons per day) This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit. Page 1 of 3

Town: **Augusta** Street, Road, etc.: **Middle Road** Permit No.: \_\_\_\_\_ Date: \_\_\_\_\_  
If on water body, give name: \_\_\_\_\_

Owner of property: **Leon B. Dumont** Owner's address: **257 North Ave., Augusta, Maine** Size of lot: **38,475±** Sq. feet / Acres:  /

Name & type of establishment if other than private home: \_\_\_\_\_ gpd Is lot Zoned?  Yes  No Type of Zoning:  Shoreland  Resource Protection

Name of applicant (same as above): \_\_\_\_\_ If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:  
 Deed restriction re. private sewage disposal  
 Copy of the subdivision's soils report  
 Soils report from a State Agency **(1A)**

Applicant's address: \_\_\_\_\_ Tel. No.: **622-2564**  
Town: \_\_\_\_\_ zip code: **04330** Subdivision name: **Leon B. Dumont Development** Lot No.: **Lot #1 & 1/2 Lot #2**

Applicant's signature: *Leon B. Dumont* Date: \_\_\_\_\_  
Owner's signature: *Leon B. Dumont* Date: \_\_\_\_\_

This application is for:  New System  Expanded System  Replacement System  Replacement of  Treatment Tank Only  Disposal Area Only

The water supply for this property is:  Dug well, depth \_\_\_\_\_, lining \_\_\_\_\_;  Drilled well, depth \_\_\_\_\_, lining \_\_\_\_\_; Spring   
depth \_\_\_\_\_, lining \_\_\_\_\_; Surface water  Body,  Course— with disinfection,  without disinfection.  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. 1	Soil Profile No.	Soil Profile No. 2	Soil Profile No.	Soil Profile No.
Organic strata: <b>None</b>	Organic strata: _____	Organic strata: <b>None</b>	Organic strata: _____	Organic strata: _____
Inches: _____	Inches: _____	Inches: _____	Inches: _____	Inches: _____
1st strata: <b>Brn lfs with Olive sicl 0-16 (fill)</b>	1st strata: _____	1st strata: <b>Brown lfs with Olive sicl 0-26 (fill)</b>	1st strata: _____	1st strata: _____
Inches: _____	Inches: _____	Inches: _____	Inches: _____	Inches: _____
2nd strata: <b>Olive sicl (fill) 16-51</b>	2nd strata: _____	2nd strata: <b>Brown fsl 26-32</b>	2nd strata: _____	2nd strata: _____
Inches: _____	Inches: _____	Inches: _____	Inches: _____	Inches: _____
3rd strata: <b>Brn fsl 51-56</b>	3rd strata: _____	3rd strata: <b>Blue Gray fsl 32-41</b>	3rd strata: _____	3rd strata: _____
Inches: _____	Inches: _____	Inches: _____	Inches: _____	Inches: _____
Total Depth of observation hole Inches: <b>56</b>	Total Depth of observation hole Inches: _____	Total Depth of observation hole Inches: <b>41</b>	Total Depth of observation hole Inches: _____	Total Depth of observation hole Inches: _____
Max. Ground water table—mottling: <b>Throughout Fill</b>	Max. Ground water table—mottling: _____	Max. Ground water table—mottling: <b>Throughout Fill</b>	Max. Ground water table—mottling: _____	Max. Ground water table—mottling: _____
Impervious layer, clay, etc.: <b>0</b>	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: <b>0</b>	Impervious layer, clay, etc.: _____	Impervious layer, clay, etc.: _____
Bedrock: <b>None Evident</b>	Bedrock: _____	Bedrock: <b>None Evident</b>	Bedrock: _____	Bedrock: _____
Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____
Surface slope: <b>0 %</b>	Surface slope: _____ %	Surface slope: <b>0 %</b>	Surface slope: _____ %	Surface slope: _____ %
Soil Group & Condition per Table 9-1 of the Code, II: <b>12-D</b>	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: <b>12-D</b>	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: _____

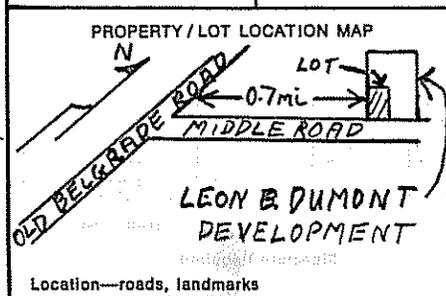
On **6-21-76** (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: *Paul R. Lindberg PE* License No. **IV/A**  
Date signed: **8-3-76**

**LIN - MAR ASSOCIATES**  
RFD 3  
AUGUSTA, MAINE 04330

**PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED** Show location of \_\_\_\_\_ and sample form \_\_\_\_\_

<b>SYSTEM:</b> <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.	<b>TREATMENT TANK:</b> <input checked="" type="checkbox"/> Septic Tank <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons: <b>1000</b> <input type="checkbox"/> Aerobic Tank Manufacturer: _____ Model No.: _____ Size in gallons: _____	<b>SUBSURFACE ABSORPTION AREA</b> Type: <input type="checkbox"/> Trench System: Total trench length _____ <input checked="" type="checkbox"/> Bed System: Length <b>70'</b> Width <b>20'</b> <input type="checkbox"/> Chamber System: Number _____ <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type B <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System: Length _____ Width _____ at base <input type="checkbox"/> Special System: Length _____ Width _____ <b>WAIVER</b> <input checked="" type="checkbox"/> Required <input type="checkbox"/> Not Required	<b>SITE MODIFICATION</b> <b>{SEE PAGE 3}</b> Fill will be: <b>35 min. uphill; 45± in. downhill</b> <b>DETAILS</b> <input checked="" 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 <b>DISTANCES</b> <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.
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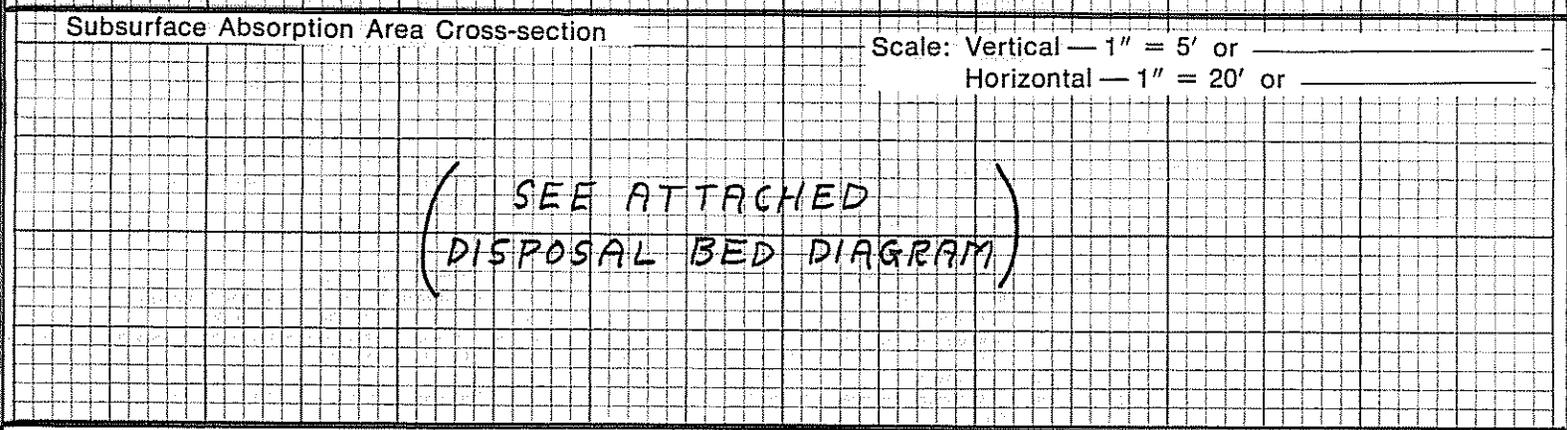
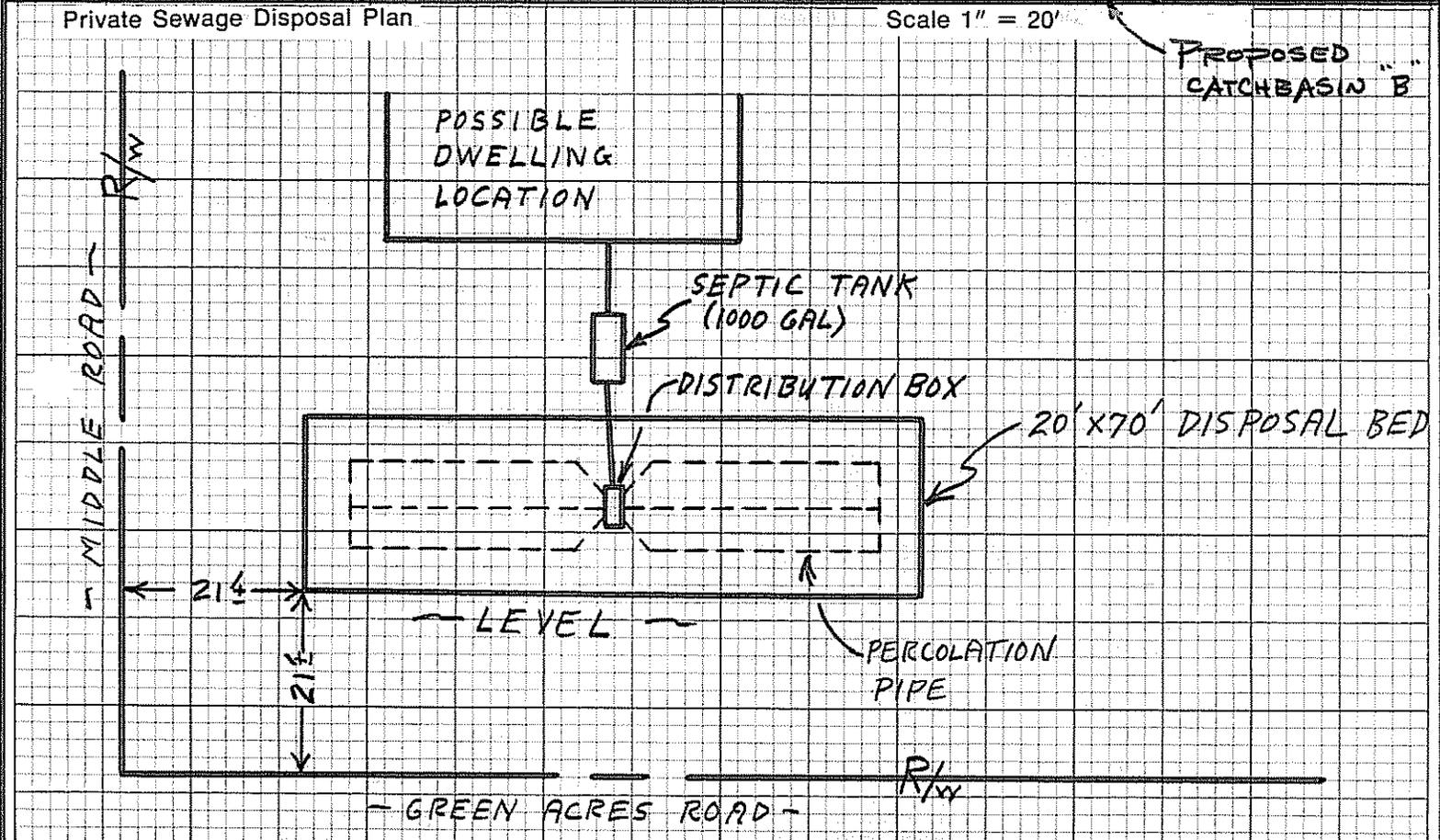
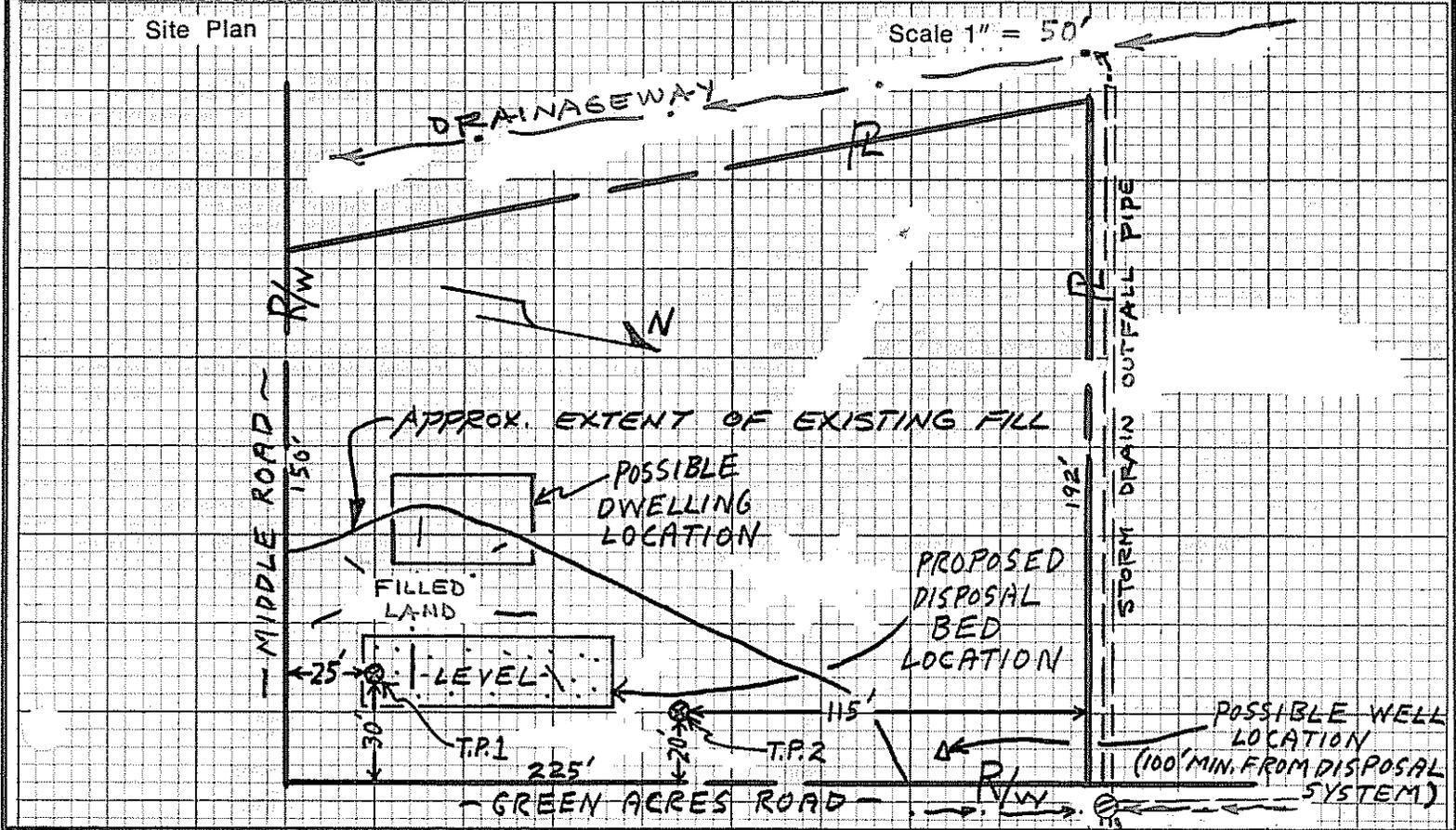


**FOR THE USE OF LPI ONLY**

Denial: Application is denied for following reasons; portions of the Code II are cited.  
 Form is incomplete (\_\_\_\_\_ pg.) as to  General Info,  Site Investigation,  System Proposed,  Site Plan,  Disposal System Plan,  Cross-Section,  Statement. See Section 2.3.  
 Site Investigation indicates site is  totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10.  Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1.  
 System Proposed does not conform to Code; See Sections 9.  
 Site Investigation indicates site modifications are necessary; See Sections  4.3,  4.4,  4.6,  8.7.  
 Miscellaneous \_\_\_\_\_ See Section \_\_\_\_\_  
 Acceptance: Application for permit is approved  with condition specified, comply with Section \_\_\_\_\_  
 without condition.  
 Signed LPI: \_\_\_\_\_ Date: \_\_\_\_\_ HHE - 200. 5/76

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

Town <b>Augusta</b>	Street, Road, etc. <b>Middle Road</b> If on water body, give name	Owner of property <b>Leon B. Dumont</b>
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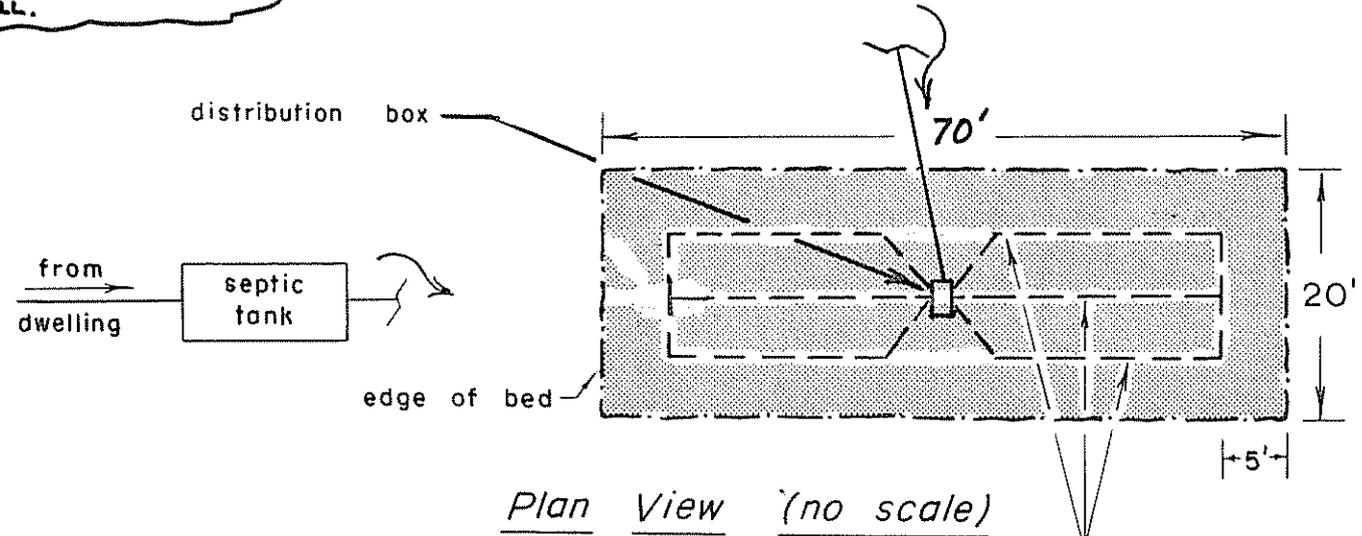
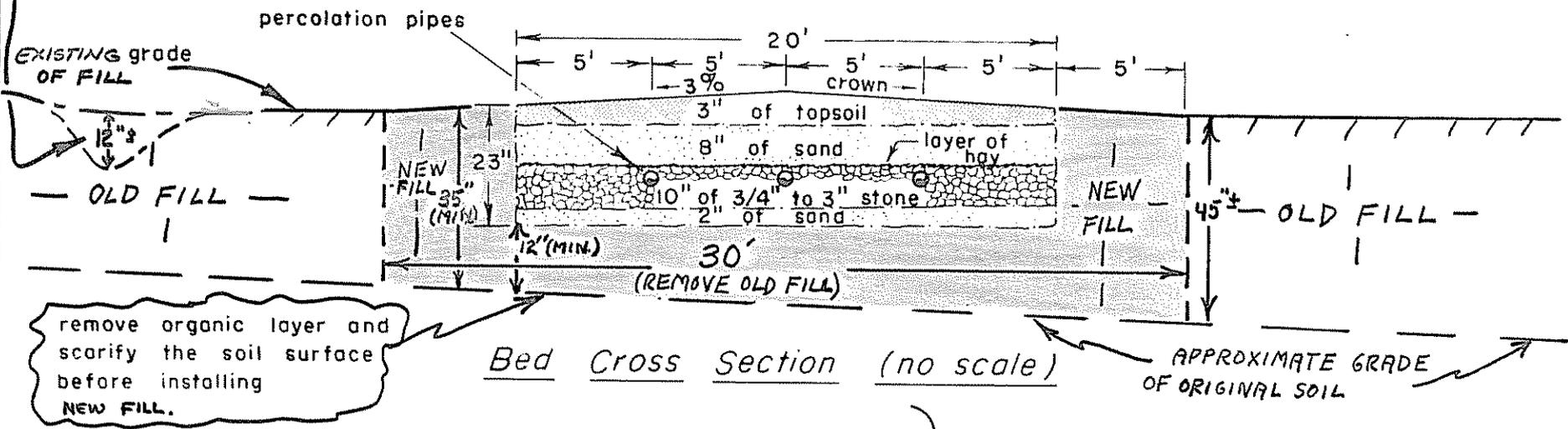
Statement: (no permit may be issued unless signed)  
I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason 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.

Date: \_\_\_\_\_  
Applicant: *Leon B. Dumont*  
Owner: *Leon B. Dumont*

Signature Required  
HHE - 200 5/76

SURFACE WATER DIVERSION DITCH AT ROADSIDE

# SEWAGE DISPOSAL BED DETAILS



**\* NOTES:**

- 1.) 35 (MIN) inches of fill is required at uphill side of bed. (ABOVE ORIGINAL GRADE)
- 2.) Texture of NEW FILL SHALL BE SANDY LOAM.
- 3.) Refer to Sections 8.7 and 9.7 of the Maine State Plumbing Code, Part II for further details regarding installation procedures.

APPLICATION AND AGREEMENT

7601-315

LOT # 2A

TO WAIVE CERTAIN PROVISIONS OF THE PLUMBING CODE

I, Leon B. Dumont, hereby apply to the Maine State Department of Human Services for permission authorizing the responsible Plumbing Inspector to waive certain provisions of the Plumbing Code for an installation in connection with a dwelling or building at Green Acres Road, Augusta.

This may include materials, methods, dimensions or conditions not specifically approved by the Plumbing Code. Please draw a brief sketch of the property's location on the back of this form so an inspector can find it. Include landmarks, route numbers and street names.

Table with 2 columns: Section of Code to be waived, Description of specific waiver. Row 1: Table 9.1, Allow a 20'x70' disposal bed over sandy loam soils with a high seasonal water table less than 15" from top of mineral soil.

In all other respects, the installation will comply with the Code. The installation will be made in accordance with the ATTACHED PLAN. A permit is to be issued by the Plumbing Inspector if he is in agreement. The undersigned stipulates that he is the owner and occupant of the building involved and that the building is not for sale in the foreseeable future. The installation will be made by: License No.

If any defects or inadequacies appear, I will promptly notify the State Department of Human Services and subsequently make such corrections as the Department shall find necessary

Owner's signature Leon B. Dumont

NOTE: A PLAN TO SCALE MUST BE ATTACHED Winter address 257 Northern Ave Summer address Augusta Telephone 38282 Date 8-30-76

THE FOLLOWING TO BE FILLED IN BY THE PLUMBING INSPECTOR

I am (Local), (Alternate) Plumbing Inspector for the town of I have examined the plans for the installation described above and I find the building to be in my jurisdiction.

I (do), (do not) recommend the issuance of a special permit for the installation as described above.

Signed Date

Return this form to the Division of Health Engineering, Department of Human Services Augusta, Maine. NO permit shall be issued for this waiver until the Local Plumbing Inspector receives notification from this office.

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

MAINE DEPARTMENT OF HUMAN SERVICES  
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

(For systems disposing of less than 2000 gallons per day)

This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit.

Page 1 of 3

Town: **Augusta** Street, Road, etc.: **Green Acres Road** Permit No. \_\_\_\_\_ Date \_\_\_\_\_

Owner of property: **Leon B. Dumont** Owner's address: **257 North Ave., Augusta, Maine** Size of lot: **48,040±**  Sq. feet  Acres

Name & type of establishment: \_\_\_\_\_ gpd Is lot Zoned?  Yes  No Type of Zoning:  Shoreland  Resource Protection

Name of applicant: **(same as above)** If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:  
 Deed restriction re. private sewage disposal  
 Copy of the subdivision's soils report  
 Soils report from a State Agency **(2A)**

Applicant's address: \_\_\_\_\_ Tel. No. **622-2564** Subdivision name: **Leon B. Dumont Development** Lot No. **Lot #3 & 1/2 Lot #2**

Town: \_\_\_\_\_ zip code: **04330** Date: \_\_\_\_\_

Applicant's signature: *Leon B. Dumont* Date: \_\_\_\_\_

Owner's signature: *Leon B. Dumont* Date: \_\_\_\_\_

This application is for:  New System  Expanded System  Replacement System  Replacement of  Treatment Tank Only  Disposal Area Only

The water supply for this property is:  Dug well, depth \_\_\_\_\_, lining \_\_\_\_\_;  Drilled well, depth **7**, lining **?**;  Spring  \_\_\_\_\_

depth \_\_\_\_\_, lining \_\_\_\_\_; Surface water  Body,  Course— with disinfection,  without disinfection.  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. 1	Soil Profile No.	Soil Profile No. 2	Soil Profile No. 2 (cont)	Soil Profile No.
Organic strata: <b>None</b>	Organic strata: <b>None</b>	Organic strata: <b>None</b>	4th strata Olive sicl with banded gray brown vfls	
Inches: _____	Inches: _____	Inches: _____	Inches: <b>38-42</b>	Inches: _____
1st strata: <b>Olive sicl with banded tan vfls</b>	1st strata: _____	1st strata: <b>Gray brown mixture of vfls</b>	1st strata: _____	1st strata: _____
Inches: <b>0-24</b>	Inches: _____	Inches: <b>0-11 &amp; sicl (fill)</b>	Inches: _____	Inches: _____
Note: Land in area of test pit has been excavated.	2nd strata: _____	2nd strata: <b>Brown vfls</b>	2nd strata: _____	2nd strata: _____
	Inches: _____	Inches: <b>11-17</b>	Inches: _____	Inches: _____
	3rd strata: _____	3rd strata: <b>Gray Brown vfls</b>	3rd strata: _____	3rd strata: _____
Inches: _____	Inches: _____	Inches: <b>17-38</b>	Inches: _____	Inches: _____
Total Depth of observation hole Inches: <b>24</b>	Total Depth of observation hole Inches: _____	Total Depth of observation hole Inches: <b>42</b>	Total Depth of observation hole Inches: _____	Total Depth of observation hole Inches: _____
Max. Ground water table—mottling: <b>0</b> inches	Max. Ground water table—mottling: _____ inches	Max. Ground water table—mottling: <b>throughout Fill</b> inches	Max. Ground water table—mottling: _____ inches	Max. Ground water table—mottling: _____ inches
Impervious layer, clay, etc.: <b>2</b> inches	Impervious layer, clay, etc.: _____ inches	Impervious layer, clay, etc.: <b>0</b> inches	Impervious layer, clay, etc.: _____ inches	Impervious layer, clay, etc.: _____ inches
Bedrock: <b>None Evident</b>	Bedrock: _____	Bedrock: <b>None Evident</b>	Bedrock: _____	Bedrock: _____
Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____	Type of Bedrock: _____
Surface slope: <b>0</b> %	Surface slope: _____ %	Surface slope: <b>8</b> %	Surface slope: _____ %	Surface slope: _____ %
Soil Group & Condition per Table 9-1 of the Code, II: <b>8-D</b>	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: <b>8-D</b>	Soil Group & Condition per Table 9-1 of the Code, II: _____	Soil Group & Condition per Table 9-1 of the Code, II: _____

On **6-21-76** (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. **JWL**

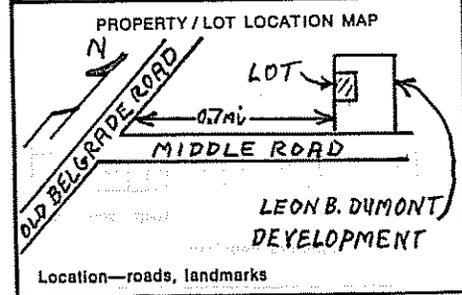
Signature: *Paul R. Lindberg P.E.* Health Engineering License No. **N/A**

Date signed: **8-19-76**

**LIN - MAR ASSOCIATES**  
RFD 3  
AUGUSTA, MAINE 04330

**PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED** Show location of \_\_\_\_\_

SYSTEM:	TREATMENT TANK:	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION
		Type	SIZE	
<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 _____	<input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons: <b>1000</b> <input type="checkbox"/> Aerobic Tank Manufacturer: _____ Model No. _____ Size in gallons: _____	<input type="checkbox"/> Trench System: Total trench length: _____ <input checked="" type="checkbox"/> Bod System Length <b>70'</b> Width <b>20'</b> <input type="checkbox"/> Chamber System Type A <input type="checkbox"/> Single File Type B <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____	<input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Medium Large <input checked="" type="checkbox"/> Large <input type="checkbox"/> Extra Large	Fill will be: <b>47" (MIN.)</b> <b>SEE PAGE 3</b> DETAILS <input checked="" 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.



FOR THE USE OF LPI ONLY

Denial: Application is denied for following reasons; portions of the Code II are cited.  
Form is incomplete (\_\_\_\_\_ pg.) as to  General Info,  Site Investigation,  System Proposed,  Site Plan,  Disposal System Plan,  Cross-Section,  Statement. See Section 2.3.

Site Investigation indicates site is  totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10.  Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1.

System Proposed does not conform to Code; See Sections 9.

Site Investigation indicates site modifications are necessary; See Sections  4.3,  4.4,  4.6,  8.7.

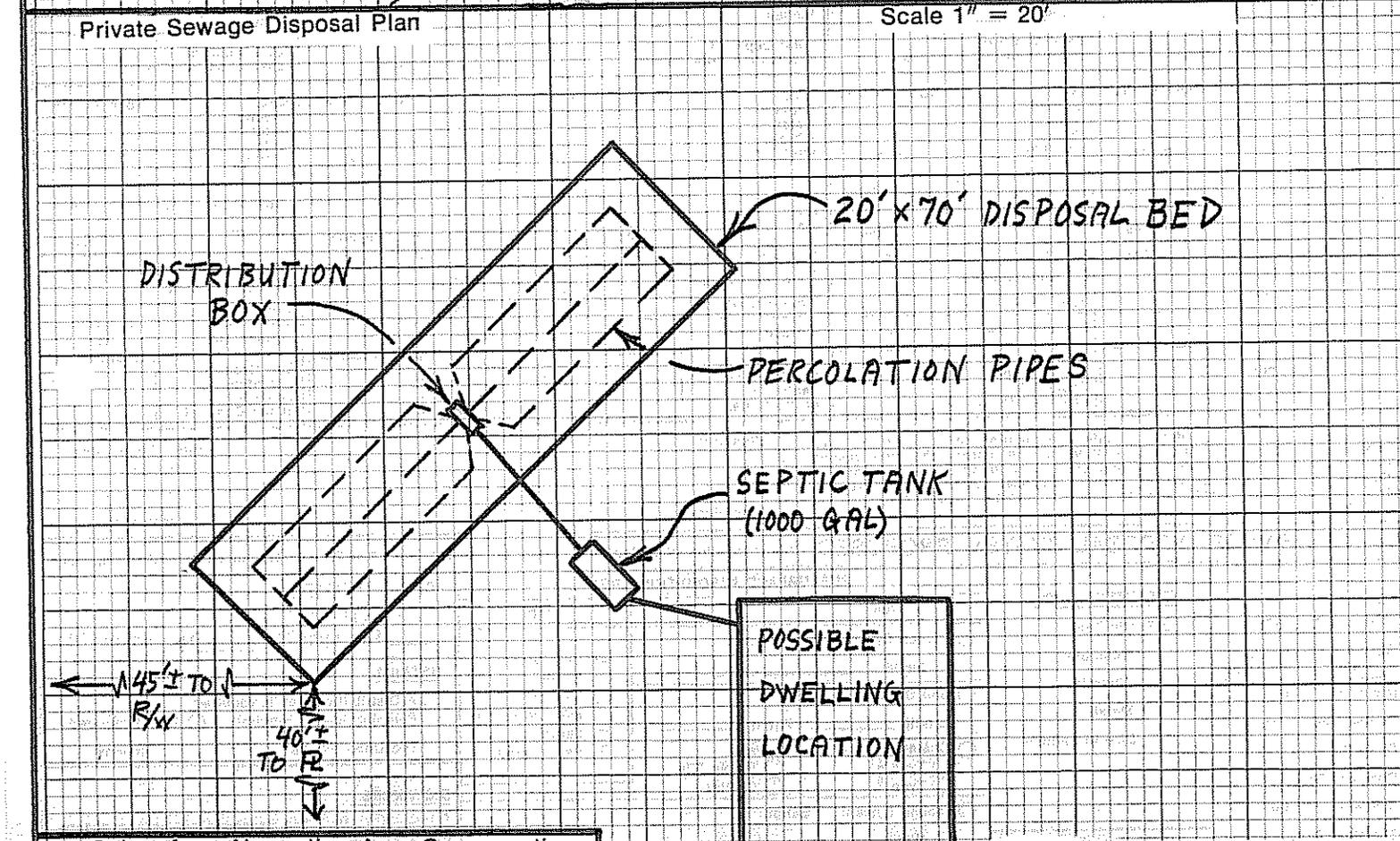
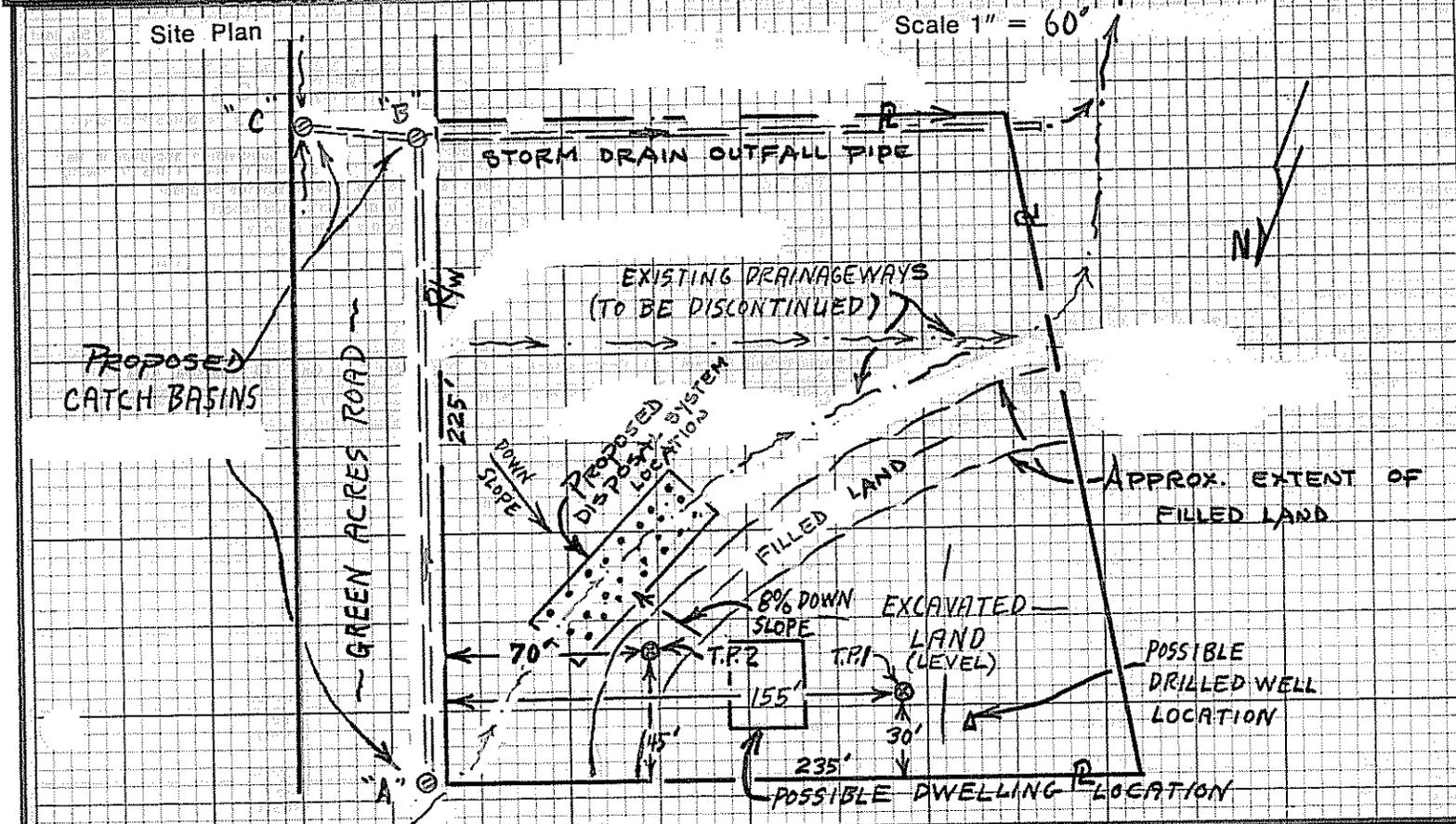
Miscellaneous \_\_\_\_\_ See Section \_\_\_\_\_

Acceptance: Application for permit is approved  with condition specified, comply with Section \_\_\_\_\_  without condition.

Signed LPI: \_\_\_\_\_ Date: \_\_\_\_\_ HHE-200 5/76

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

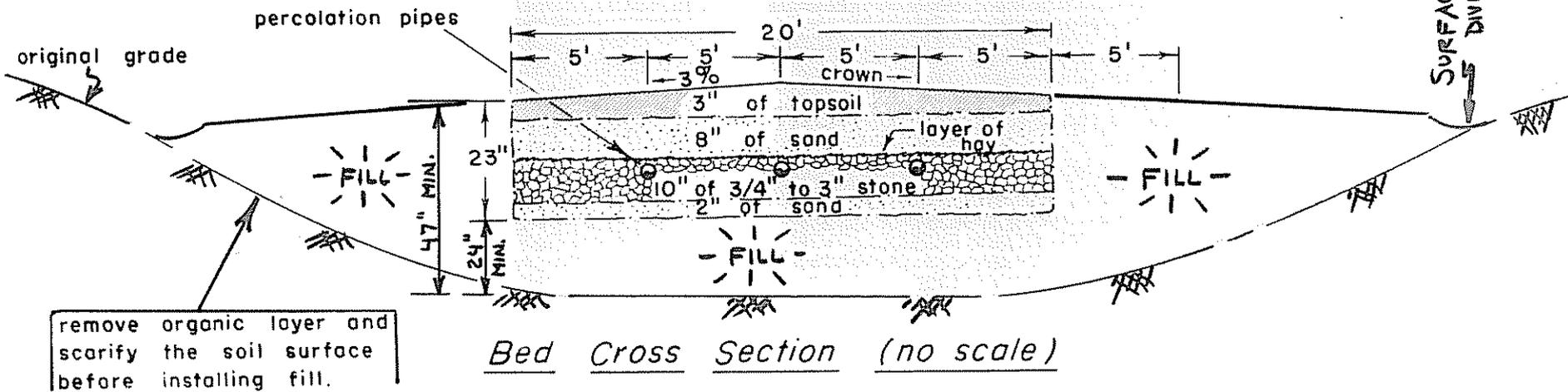
Town <b>Augusta</b>	Street, Road, etc. <b>Green Acres Road</b> If on water body, give name	Owner of property <b>Leon B. Dumont</b>
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Subsurface Absorption Area Cross-section

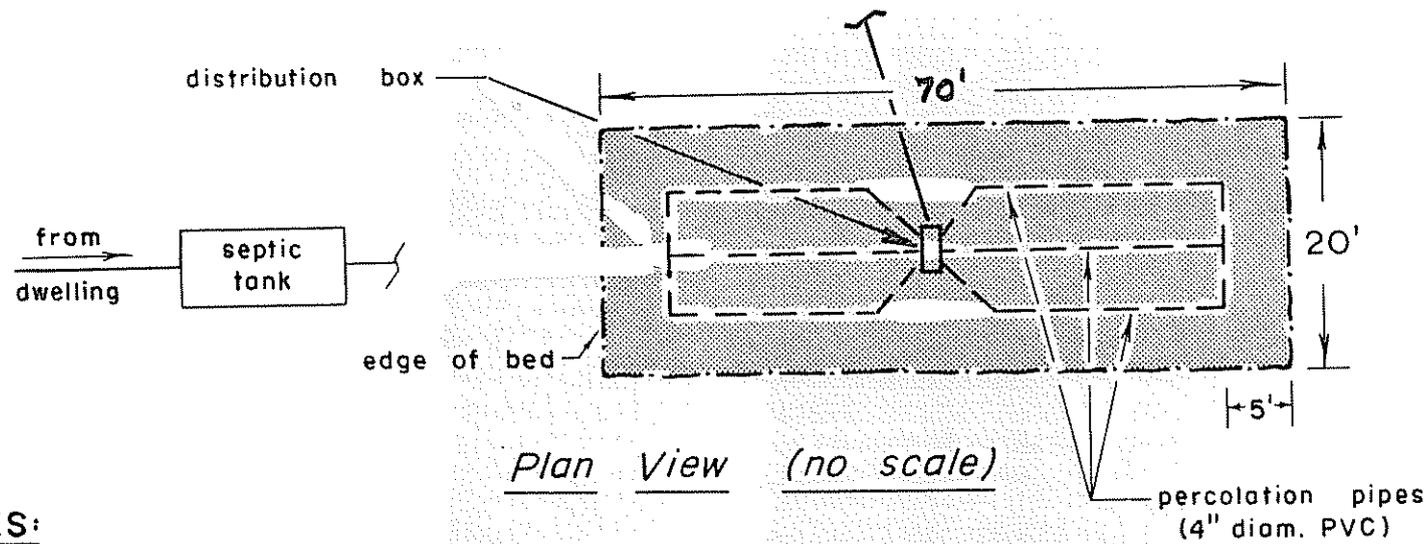
(SEE ATTACHED DISPOSAL SYSTEM DIAGRAM)

# • SEWAGE DISPOSAL BED DETAILS •



remove organic layer and scarify the soil surface before installing fill.

Bed Cross Section (no scale)



Plan View (no scale)

**\* NOTES:**

- 1.) 47 inches of fill is required.
- 2.) Texture of fill shall be SANDY LOAM.
- 3.) Refer to Sections 8.7 and 9.7 of the Maine State Plumbing Code, Part II for further details regarding installation procedures.

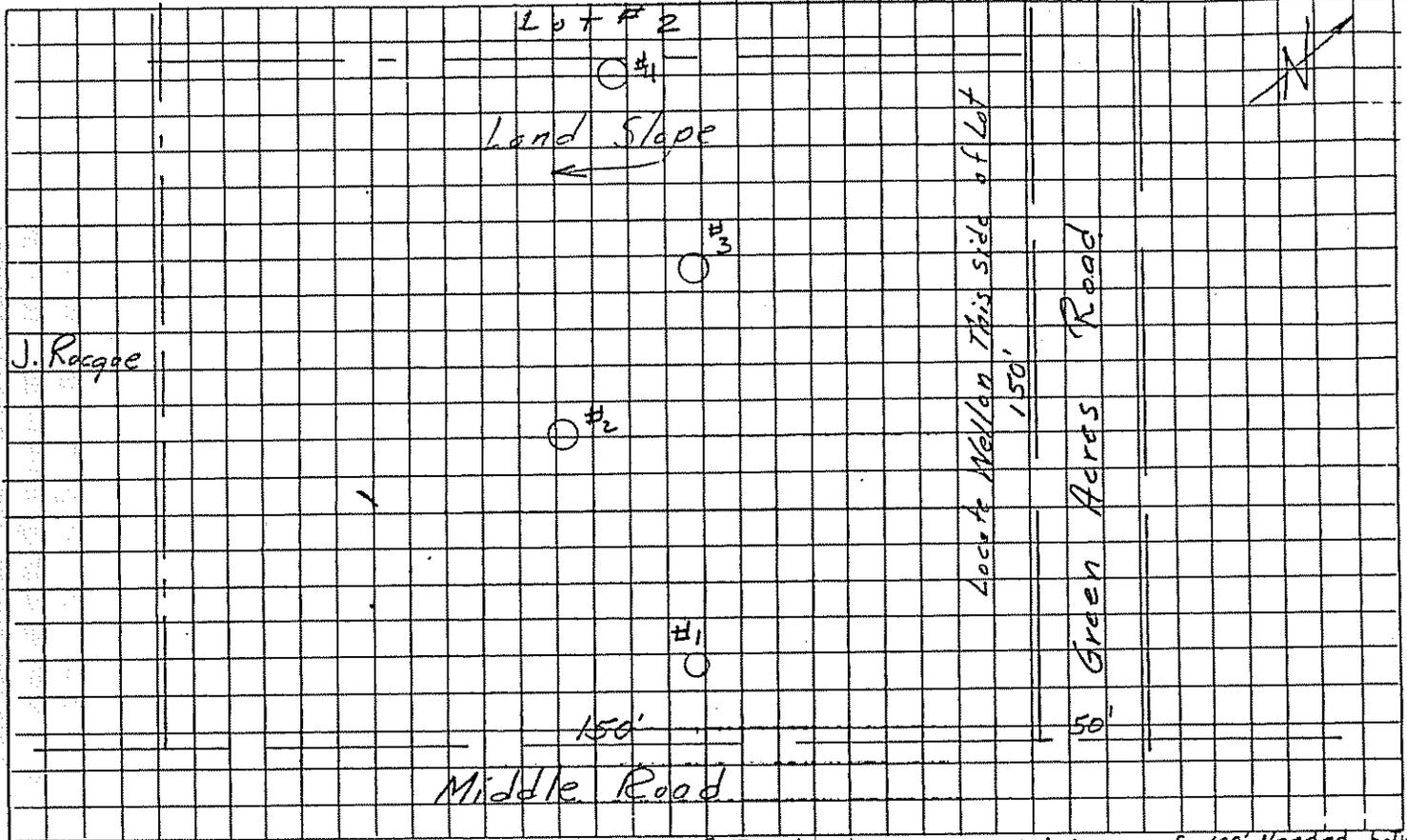
For: LEON B. DUMONT  
 Job No. 7601-315  
 By: PRL  
 Date: 8-19-76

LIN-MAR ASSOCIATES

**SUBMIT THE FOLLOWING COMPLETED FORM TO YOUR LOCAL PLUMBING INSPECTOR**

DATE <u>June 4, 1973</u> NUMBER OF BEDROOMS _____ SIZE OF SEPTIC TANK <u>1000 Gal.</u> TYPE OF SOIL <u>Fine Sandy Loam</u>	OWNER _____ STREET _____ CITY _____ TEL. NUMBER _____
Test Performed by <u>Walter B. Borek PE 1576</u> Local Plumbing Inspector's Signature	LOCATION OF PROPOSED INSTALLATION STREET <u>Green Acres Road</u> CITY <u>Augusta</u> TEL. NUMBER _____

SKETCH: LOCATION OF BUILDING DISPOSAL SYSTEM, TERRAIN FEATURES, PERCOLATION HOLES, WATER SUPPLIES, ETC.



5+ Depth to Water Table  
5+ Depth to Bedrock  
4-7' Depth to Clay or other impervious strata

Max. Length of Trenches Not to Exceed 100'  
 10' Clearance between Trenches

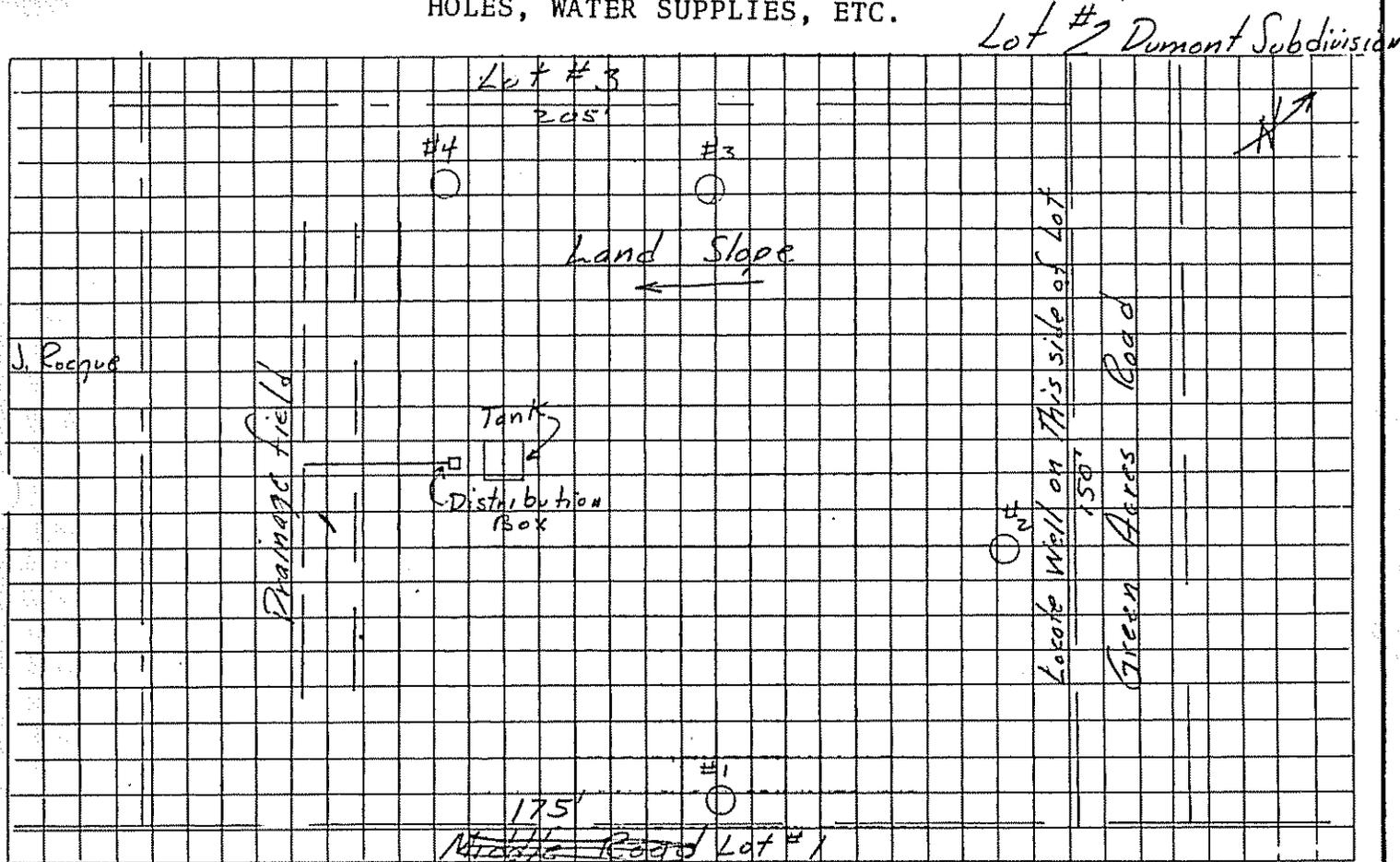
REMARKS: Minimum of 100' Needed between Well and Drainage field  
 Min. of 175' of Trenches for 2 bedrooms  
 Min. of 275' of Trenches for 3 bedrooms  
 Min. of 300' of Trenches for 4 bedrooms

HOLE	HOLE DEPTH	TIME		DEPTH OF WATER SURFACE		ELAPSED TIME	TOTAL DROP OF WATER	PERCOL. RATE MINUTES/INCH
		START	FINISH	START	FINISH			
#1	36 in.	1:28	2:11	18 in.	26 in.	43 min.	8 in.	5.3 min/in
#2	36 in.	1:32	4:52	18 1/2 in.	22 1/2 in.	200 min.	4 in.	50 min/in
#3	36 in.	1:34	4:53	18 in.	22 in.	199 min.	4 in.	50 min/in
#4	36 in.	1:36	4:56	16 in.	20 in.	200 min.	4 in.	50 min/in
AVERAGE RATE								38.8 min/in

**SUBMIT THE FOLLOWING COMPLETED FORM TO YOUR LOCAL PLUMBING INSPECTOR**

DATE <u>June 4, 1973</u> NUMBER OF BEDROOMS <u>      </u> SIZE OF SEPTIC TANK <u>1000 Gal.</u> TYPE OF SOIL <u>Fine Sandy Loam</u>	OWNER <u>                    </u> STREET <u>                    </u> CITY <u>                    </u> MAINE TEL. NUMBER <u>                    </u>
Test Performed by <u>Walter B. Lundy PE 1576</u> Local Plumbing Inspector's Signature	LOCATION OF PROPOSED INSTALLATION STREET <u>                    </u> CITY <u>                    </u> MAINE TEL. NUMBER <u>                    </u>

SKETCH: LOCATION OF BUILDING DISPOSAL SYSTEM, TERRAIN FEATURES, PERCOLATION HOLES, WATER SUPPLIES, ETC.



5'4" Depth to Water Table  
 5'4" Depth to Bedrock  
 1'27" Depth to Clay or other impervious strata

Max. Length of Trenches Not To Exceed 100'  
 10' Clearance between Trenches

REMARKS

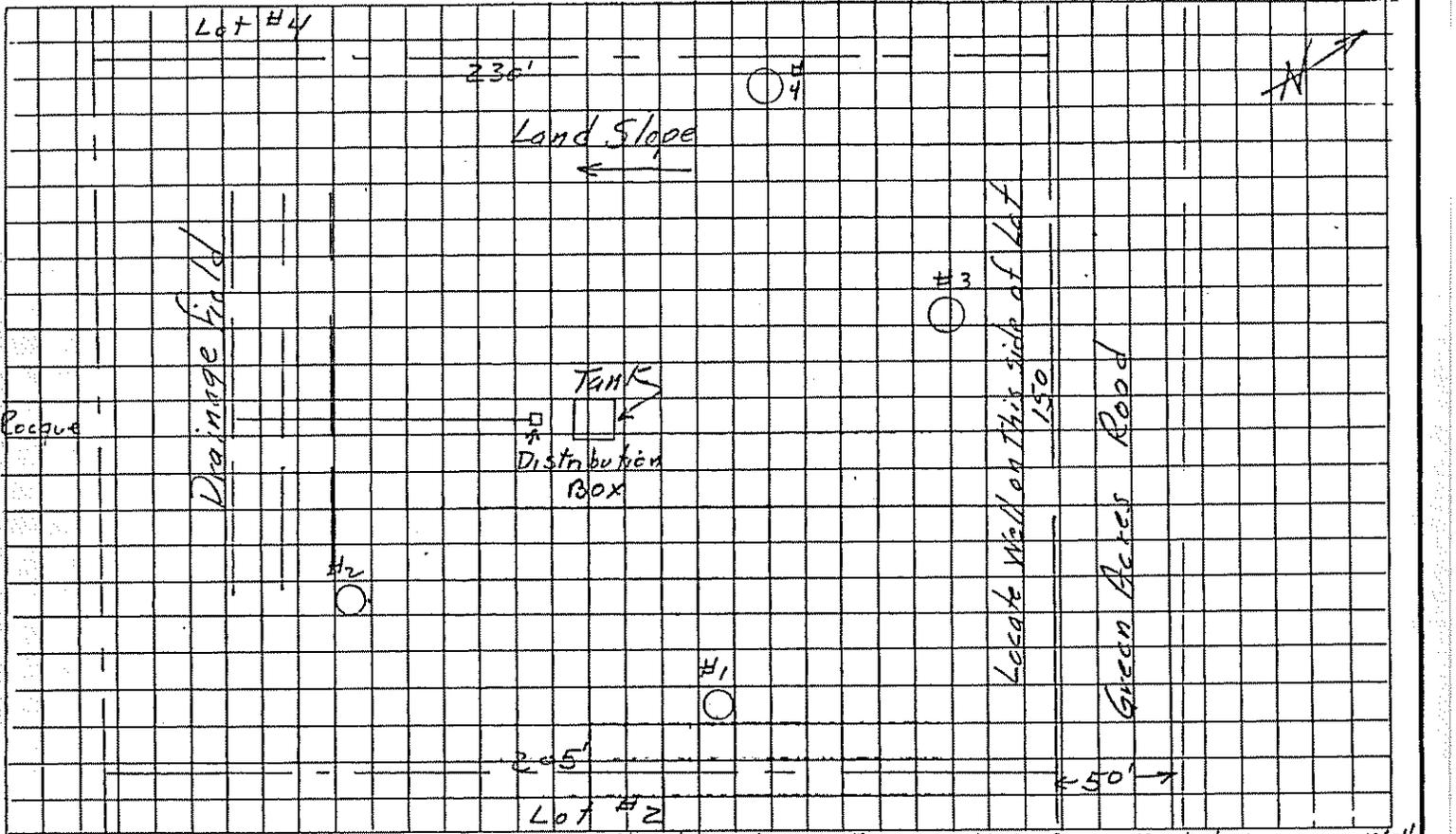
- Min. of 100' needed between Well and Drainage Field
- Min. of 190' of Trenches for 2 bedrooms
- Min of 285' of Trenches for 3 bedrooms
- Min of 385' of Trenches for 4 Bedrooms

HOLE	HOLE DEPTH	TIME		DEPTH OF WATER SURFACE		ELAPSED TIME	TOTAL DROP OF WATER	PERCOL. RATE	
		START	FINISH	START	FINISH			MINUTES/INCH	
#1	36 in.	1:36	4:36	16 in.	20 in.	200 min.	4 in.	50	min/in
#2	36 in.	1:38	4:17	14 in.	18 in.	159 min.	4 in.	39.8	min/in
#3	36 in.	2:02	4:38	16 in.	20 in.	156 min.	4 in.	39.0	min/in
#4	36 in.	2:07	4:56	16 in.	20 in.	169 min.	4 in.	42.0	min/in
AVERAGE RATE								42.8	min/in

**SUBMIT THE FOLLOWING COMPLETED FORM TO YOUR LOCAL PLUMBING INSPECTOR**

DATE <u>June 4, 1973</u> NUMBER OF BEDROOMS _____ SIZE OF SEPTIC TANK <u>1000 Gal.</u> TYPE OF SOIL <u>Fine Sandy Loam</u>	OWNER _____ STREET _____ CITY _____ MAINE TEL. NUMBER _____
Test Performed by <u>Walter B. [Signature]</u> PE #1576 Local Plumbing Inspector's Signature	LOCATION OF PROPOSED INSTALLATION STREET _____ CITY _____ MAINE TEL. NUMBER _____

SKETCH: LOCATION OF BUILDING DISPOSAL SYSTEM, TERRAIN FEATURES, PERCOLATION HOLES, WATER SUPPLIES, ETC.



<u>5'4</u> Depth to Water Table	<u>5'4</u> Depth to Bedrock	<u>4'7</u> Depth to Clay or other impervious strata
Max. Length of Trenches Not to exceed 100' 10' Clearance Needed between Trenches		
REMARKS: Min. of 100' Needed between Well and Drainage Field Min. of 175' of Trenches for 2 bedrooms Min. of 260' of Trenches for 3 bedrooms Min. of 350' of Trenches for 4 bedrooms		

HOLE	HOLE DEPTH	TIME		DEPTH OF WATER SURFACE		ELAPSED TIME	TOTAL DROP OF WATER	PERCOL. RATE	
		START	FINISH	START	FINISH			MINUTES/INCH	
#1	36 in.	2:02	4:38	16 in.	20 in.	158 min.	4 in.	39.0	min/in
#2	36 in.	2:07	4:56	16 in.	20 in.	169 min.	4 in.	42.0	min/in
#3	36 in.	1:59	4:35	18 in.	22 in.	156 min.	4 in.	39.0	min/in
#4	36 in.	2:53	4:15	18 in.	26 in.	82 min.	8 in.	10.2	min/in
<b>AVERAGE RATE</b>								32.5	min/in