SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

M1 L88C

AUGUSTA PERMIT # 1,069 TOWN COPY

Date Permit Issued: 6/22/87 $ #40.00 FEE ☐ If Double Fee Charged

Gary R. Fuller L.P.I. # 850
Local Plumbing Inspector Signature

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	RFD #4 SANFORD ROAD

PROPERTY OWNERS NAME

Last: BRANDT First: LILY

Applicant Name:	SAME
Mailing Address of Owner/Applicant (If Different)	RFD #5 BOX 341 GARDINER, MAINE 04345

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.

Lily M. Brandt 6-17-87
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.

Gary R. Fuller 6-29-87
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 N/A
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: N/A
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY	ZONING
~ 0 ACRES	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: _____ GALS.

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

RECEIVED JUN 17 1987

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
5	B

DEPTH TO LIMITING FACTOR: >48

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

DISPOSAL AREA TYPE/SIZE
1. ☐ BED 700 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 5/19/87 (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.

Site Evaluator Signature 201 SE# 5/19/87 Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

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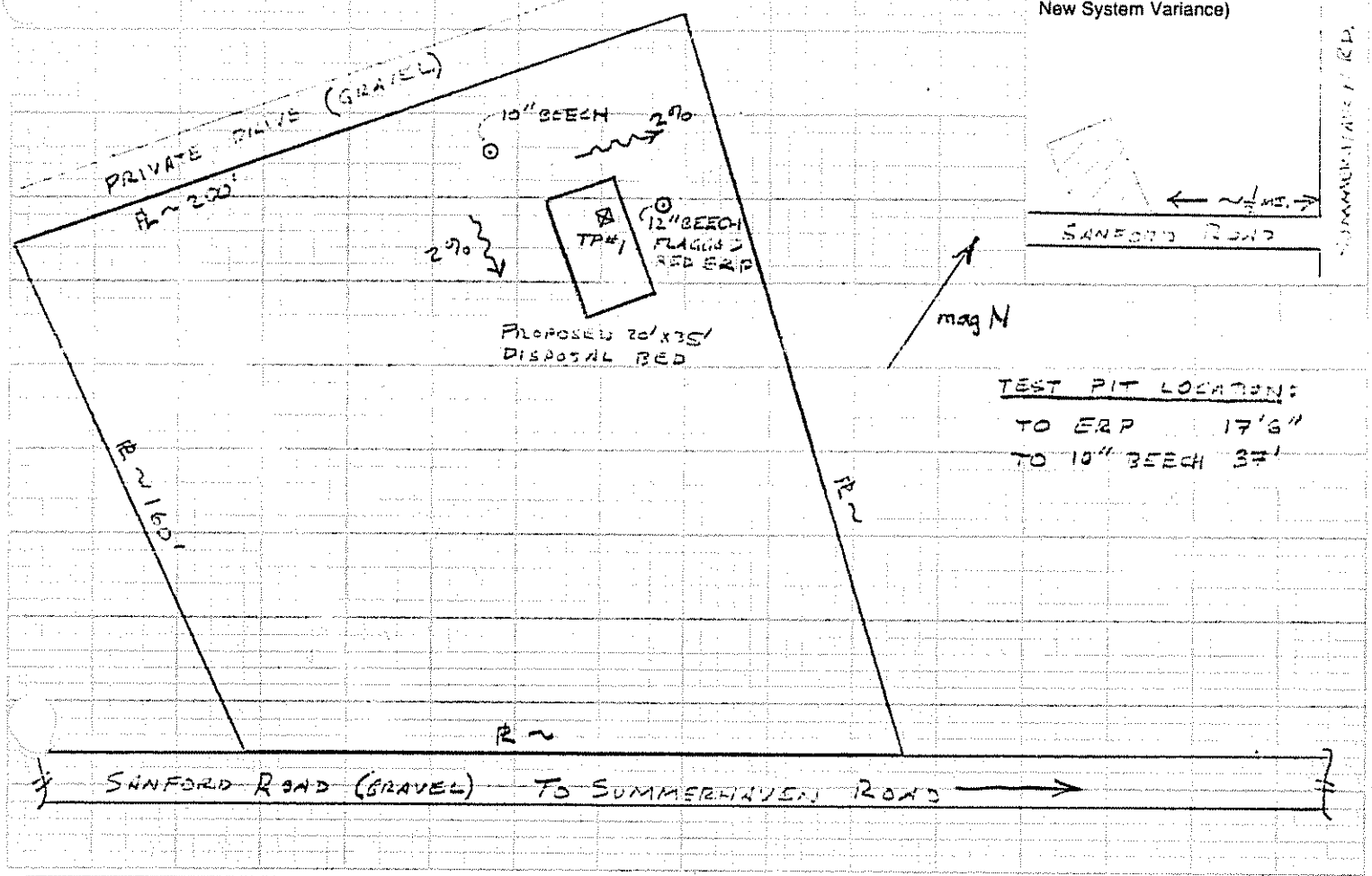
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	SANFORD ROAD	BRANDT, LILY

SITE PLAN

Scale 1" = 50 Ft.



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

Observation Hole TP #1 ☒ Test Pit ☐ Boring

1 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (Inches)	Texture	Consistency	Color	Mottling
0	LOAMY SAND	FRIABLE		
6	FINE AND MEDIUM SANDS	VERY FRIABLE	DARK ORANGE BROWN	
15			BROWN	NONE
20	MEDIUM AND COARSE SANDS	LOOSE	GRAYISH BROWN	
30				
40				

Soil	Classification	Slope	Limiting Factor
— Profile	— Condition	2 %	>+3' ☐ Ground Water ☐ 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				
10				
15				
20				
30				
40				
50				

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

Site Evaluator Signature

201
SE#

8/16/87
Date

HHE-200 Rev. 1/84

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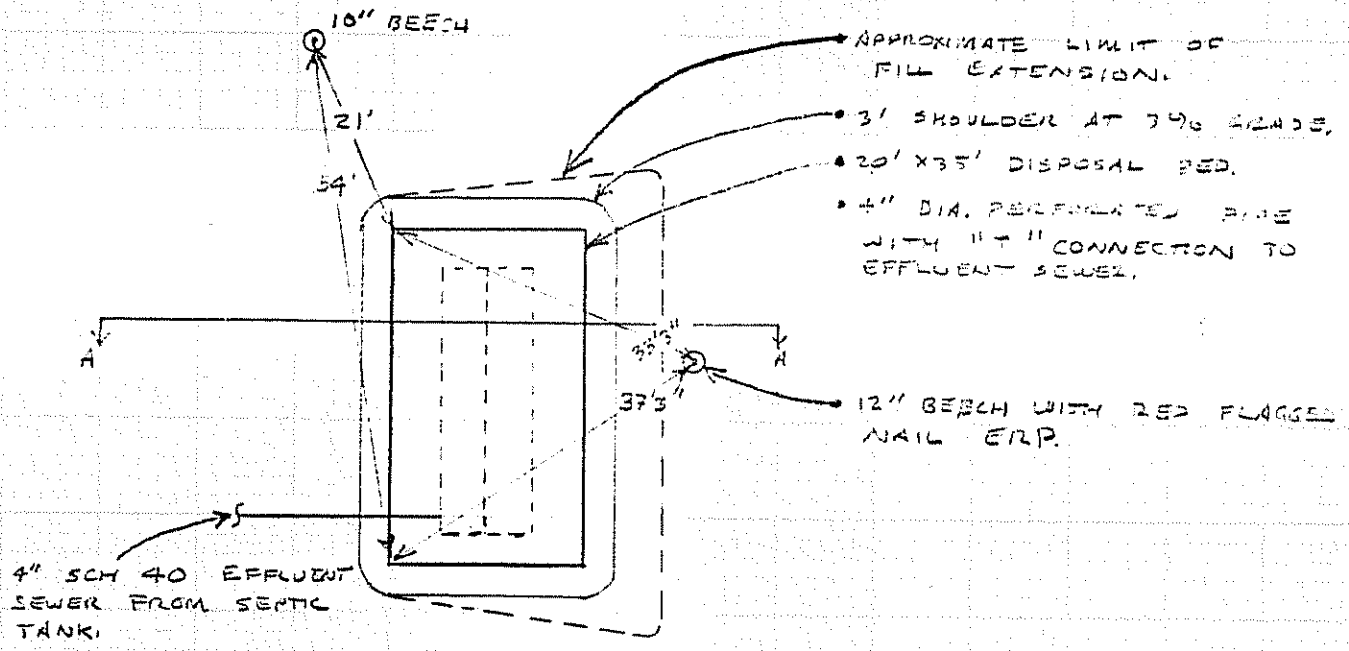
AUGUSTA	SANFORD ROAD	BRANDT, LILY

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

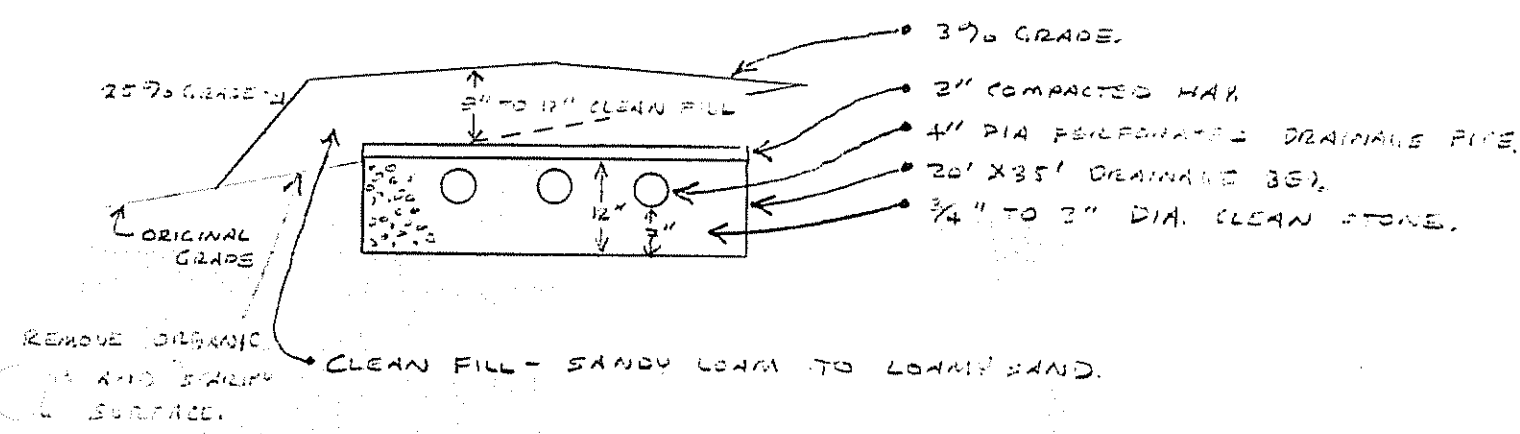
- ALL CONSTRUCTION TO BE IN ACCORDANCE WITH STATE PLUMBING CODE.
- SEPTIC TANK MUST BE MIN. 100' FROM ALL WELLS AND MIN. 5' FROM HOUSE.
- BED MUST BE MIN. 100' FROM ALL WELLS AND MIN. 75' FROM Freshwater
- FINAL GRADE TO DIRECT SURFACE WATER RUNNOFF AWAY FROM DISPOSAL BED AND TO PREVENT PONDING.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	0"	Reference Elevation is	0"	FLAGGED RED NAIL IN
Depth of Fill (Downslope)	5"	Bottom of Disposal Area	-70"	12" BEECH TREE
		Top of Distribution Lines or Chambers	-59"	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 2 Ft.
Horizontal: 1 inch = 10 Ft.



Site Evaluator Signature

201
SE#

4/16/87
Date