M/L100 921840

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	BURNS ROAD

PROPERTY OWNERS NAME

Last: First:

Applicant Name:	C. D. C. INC.
Mailing Address of Owner/Applicant (If Different)	BURNS ROAD AUGUSTA MAINE

AUGUSTA Caution: Permit Required 3032 TOWN COPY

Date Permit Issued: 8 3 94 $ 60.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 850

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.

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 8/26/94 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
2.2 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
DRILLED WELL TO BE PLACED AT LEAST 100' FROM BED

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.)
2 BEDROOMS
MODERATE FLOW

DESIGN FLOW: 240 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
7	C

DEPTH TO LIMITING FACTOR: 24

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

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 792 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On August 1, 1994 (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.

TLAYER ENGINEERING COMPANY
Michaeline Mulvey — Site Evaluator Signature
220 — SE#
1 August 1994 — Date

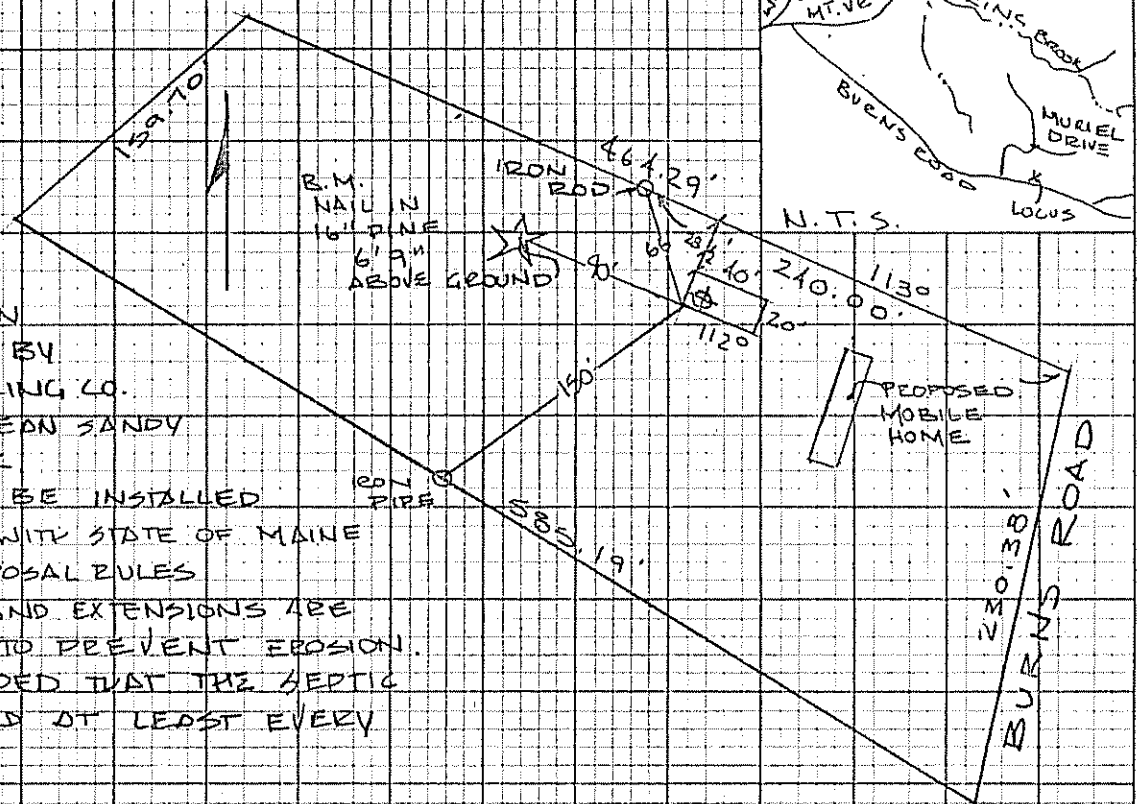
(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

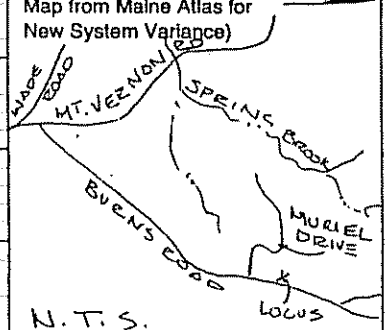
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	BURNS ROAD	C.D.C., INC

SITE PLAN Scale 1" = 100 Ft.



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



NOTES:
1 BOUNDARIES SHOWN ARE PER SURVEY BY THAYER ENGINEERING CO.
2 FILL SHALL BE CLEAN SANDY LOAM OR COARSER
3 THIS SYSTEM IS TO BE INSTALLED IN ACCORDANCE WITH STATE OF MAINE SUBSURFACE DISPOSAL RULES
4 THE LEACHFIELD AND EXTENSIONS ARE TO BE SEEDED TO PREVENT EROSION. IT IS RECOMMENDED THAT THE SEPTIC TANK BE PUMPED AT LEAST EVERY FOUR YEARS.

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

Observation Hole _____ ☒ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0–6	SANDY LOAM		LIGHT BROWN	
6–10			ALBIC	
10–15	LOAMY SAND		YELLOW	
15–20			BROWN	
20–30	SAND			PROM.
30–40				
40–50	SILTY LOAM	FIRM		

Soil Profile	Classification Condition	Slope %	Limiting Factor	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
7	C	2	24"	

Observation Hole _____ ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0–6				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

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

THAYER ENGINEERING CO.

Michaeline Mulvey — Site Evaluator Signature

220 — SE#

1 August 1994 — Date

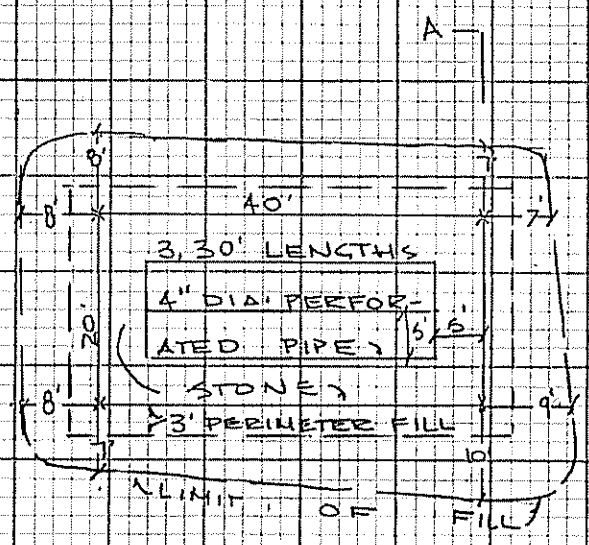
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	BURNS ROAD	C.D.C. INC

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



SEE NOTES PAGE 2

FILL REQUIREMENTS

Depth of Fill (Upslope) 12"
Depth of Fill (Downslope) 18"

CONSTRUCTION ELEVATIONS

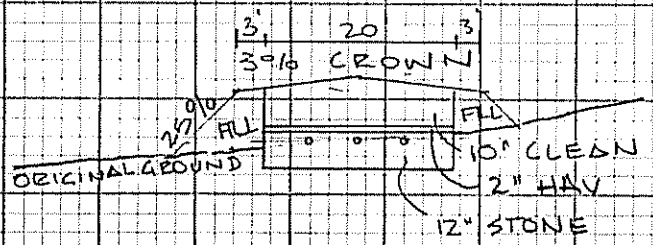
Reference Elevation is 0'0"
Bottom of Disposal Area -3'2"
Top of Distribution Lines or Chambers -2'3"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL IN 16" PINE
SEE PAGE 2

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 20 Ft.



SECTION A-A

THAYER ENGINEERING CO.

Michaeline Mulvey
Site Evaluator Signature

220
SE#

1 August 1994
Date

HHE-200 Rev.1/84