

*Lemelin, Henry*

MAINE DEPARTMENT OF HEALTH AND WELFARE 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 2	
Town <i>Augusta</i>		Street, Road, etc. If on water body: <i>Augusta Rd</i>		Permit No. <i>48502 EP</i>		Date <i>10/28/81</i>	
Owner of property <i>Henry Lemelin, RFD #4</i>				Owner's address <i>Augusta</i>		Size of lot <i>25,000±</i> <input type="checkbox"/> Sq. feet <input type="checkbox"/> Acres	
Name & type of establishment if other than private home				Is lot Zoned? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Zoning <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Resource Protection	
Name of applicant Owner's agent <i>SAME AS ABOVE</i>				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.		Tel. No. <i>622-0027</i>		Subdivision name		Lot No.	
Town <i>Maine</i>		Date <i>10/28/81</i>		Date		Date	
This application is for: <input type="checkbox"/> New System <input type="checkbox"/> Expanded System <input type="checkbox"/> Replacement System <input type="checkbox"/> Replacement of <input type="checkbox"/> Treatment Tank Only <input type="checkbox"/> Disposal Area Only							
The water supply for this property is: <input 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.						
Thickness and Description of each strata encountered	Soil Profile No. <i>1</i>		Soil Profile No.		Soil Profile No.	
	<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
Organic strata <i>pass</i>		Organic strata		Organic strata		Organic strata
Inches <i>2-0</i>		Inches		Inches		Inches
1st strata <i>Brown sil</i>		1st strata		1st strata		1st strata
Inches <i>0-6</i>		Inches		Inches		Inches
2nd strata <i>olive Brown</i>		2nd strata		2nd strata		2nd strata
Inches <i>6-10</i>		Inches <i>(high strata)</i>		Inches		Inches
3rd strata <i>olive Gray sil</i>		3rd strata <i>Gray strata</i>		3rd strata <i>FS 65</i>		3rd strata
Inches <i>10-16</i>		Inches <i>16-60</i>		Inches		Inches
Total Depth of observation hole Inches <i>60</i>		Total Depth of observation hole Inches		Total Depth of observation hole Inches		Total Depth of observation hole Inches
Max. Ground water table—mottling <i>14</i> 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
Impervious layer, clay, etc. _____ Inches	<input type="checkbox"/> None Evident	Impervious layer, clay, etc. _____ Inches	<input type="checkbox"/> None Evident	Impervious layer, clay, etc. _____ Inches	<input type="checkbox"/> None Evident	Impervious layer, clay, etc. _____ Inches
Bedrock <input type="checkbox"/> None Evident		Bedrock <input type="checkbox"/> None Evident		Bedrock <input type="checkbox"/> None Evident		Bedrock <input type="checkbox"/> None Evident
Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock
Surface slope <i>0</i> %		Surface slope _____ %		Surface slope _____ %		Surface slope _____ %
Soil Group & Condition per Table 9-1 of the Code, II <i>8-C</i>		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

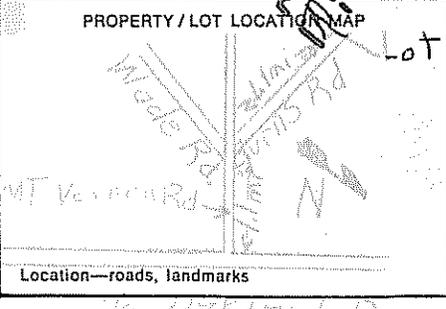
On *6/7/79* (date), a site investigation for this project was completed. I supervised this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature and Registration/Certification Number  
*Paul R. Lindberg*  
Date signed *10/28/81*

**PAUL R. LINDBERG**  
2852  
REGISTERED PROFESSIONAL ENGINEER  
STATE OF MAINE

Soil Scientist  
 Geologist  
 Soil Engineer  
 Other, must show current letter of certification to LPI

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED		
Show location of system and details on page _____, refer to completed sample form		
<b>SYSTEM:</b> <input 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 type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer— Size in gallons <i>1,000</i> <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 _____ Width <i>20'</i> <input type="checkbox"/> Chamber System Number _____ <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type F <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____ <input type="checkbox"/> Non-discharge System Bed-Length _____ Width _____ Holding Tank Size _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provided, type _____
		SIZE <input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Medium Large <input type="checkbox"/> Large <input type="checkbox"/> Extra Large
		DETAILS Fill is— <input type="checkbox"/> required, <input type="checkbox"/> not required Fill will be _____ inches deep <input type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input type="checkbox"/> is not required. The Dose will be _____ gallons
		DISTANCES <input 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 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 *Charles R. Gifford* Date \_\_\_\_\_ HHE-200 7/74

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

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

7501-305

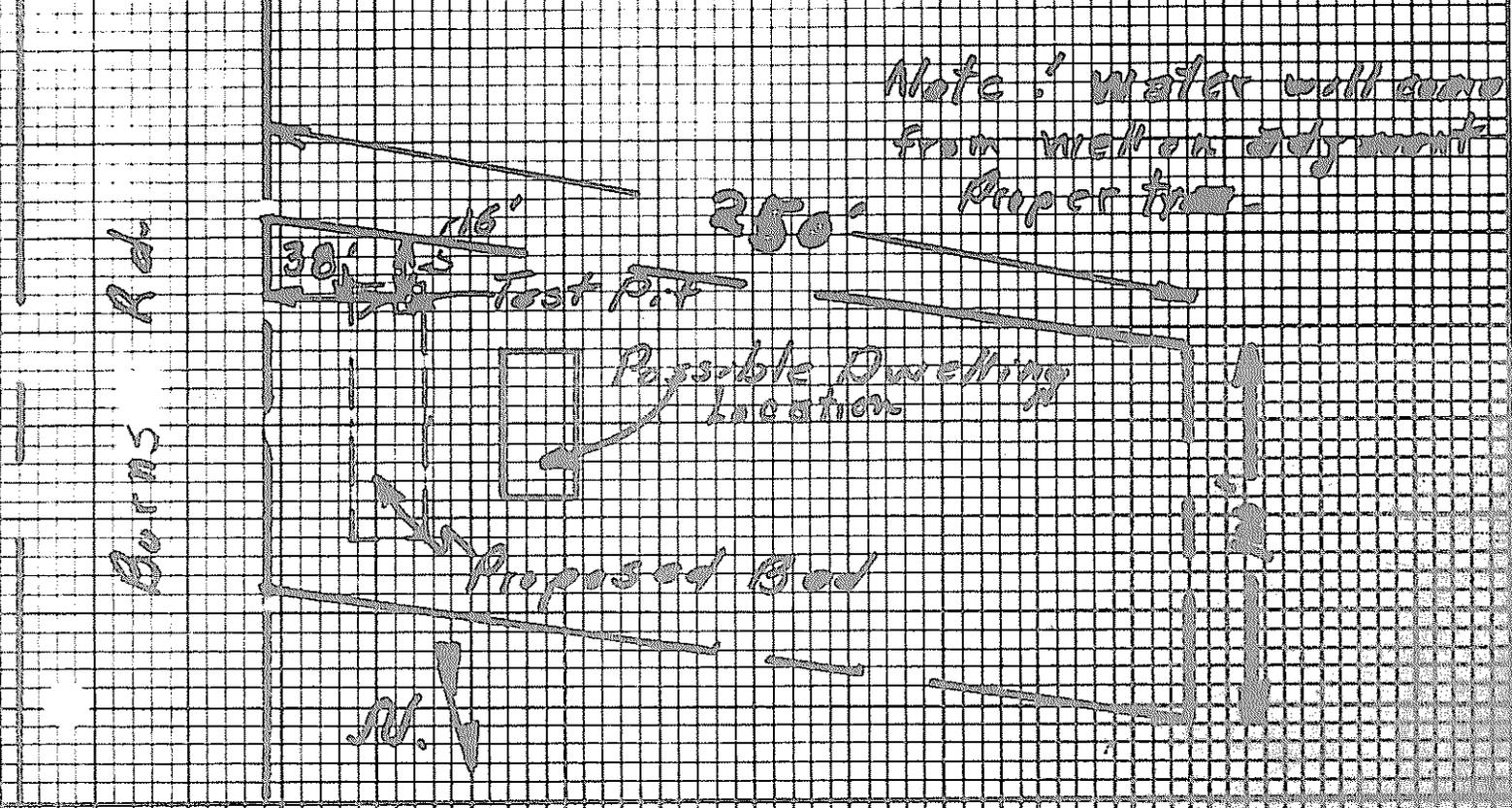
Augusta

Street, Road, etc. Burns Rd

Owner of Property Henry Lemelin Jr

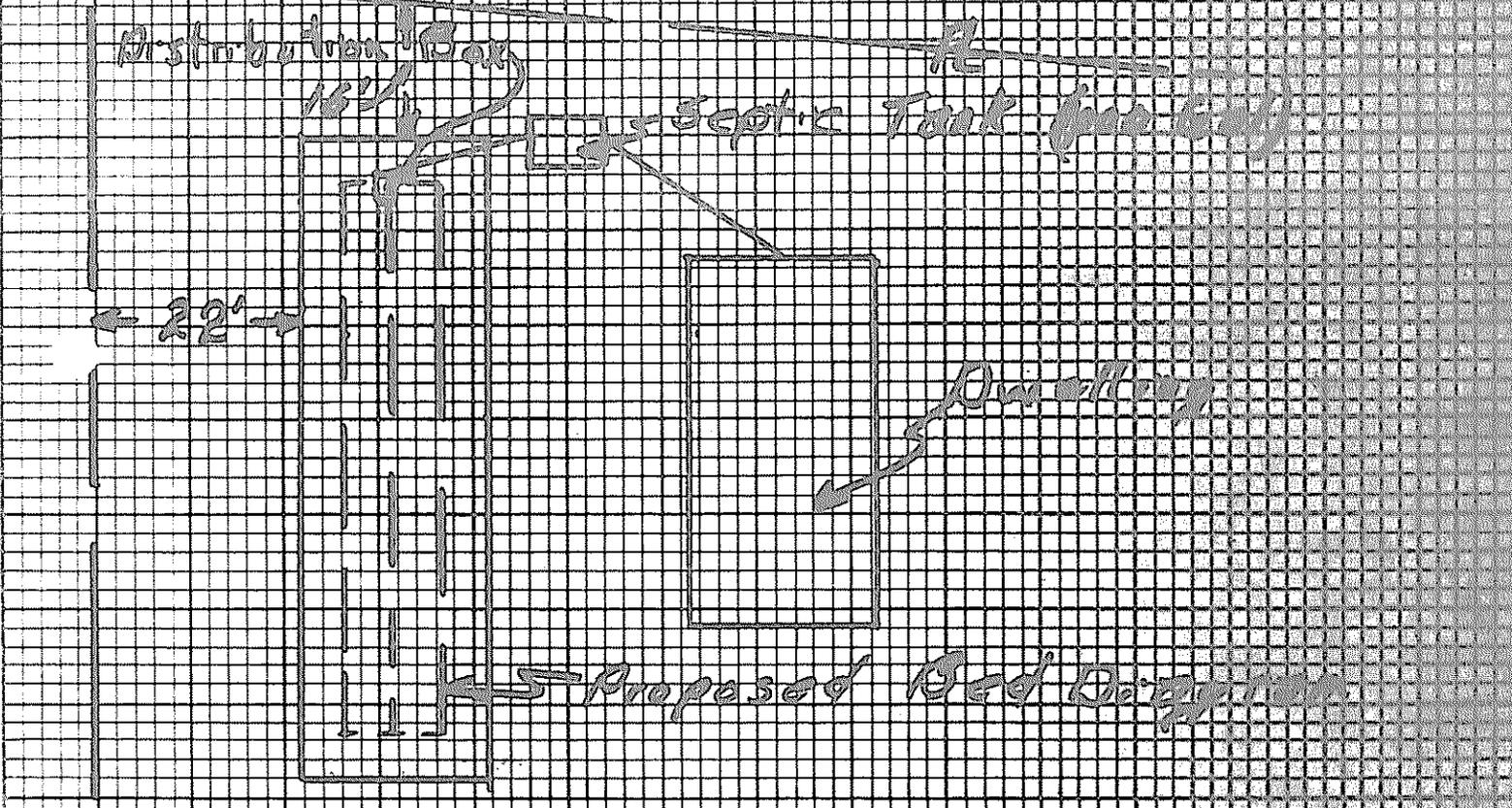
Site Plan

Scale 1" = 100 Ft. or



Private Sewage Disposal Plan

Scale 1" = 20' or



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or  
Horizontal — 1" = 20' or

NOTE! 100 FT. SPACING IS TO BE MAINTAINED BETWEEN THE SEPTIC TANK = DISPOSAL BED AND ANY PRIVATE WATER SURFACES.

(See Attached Bed Diagram)

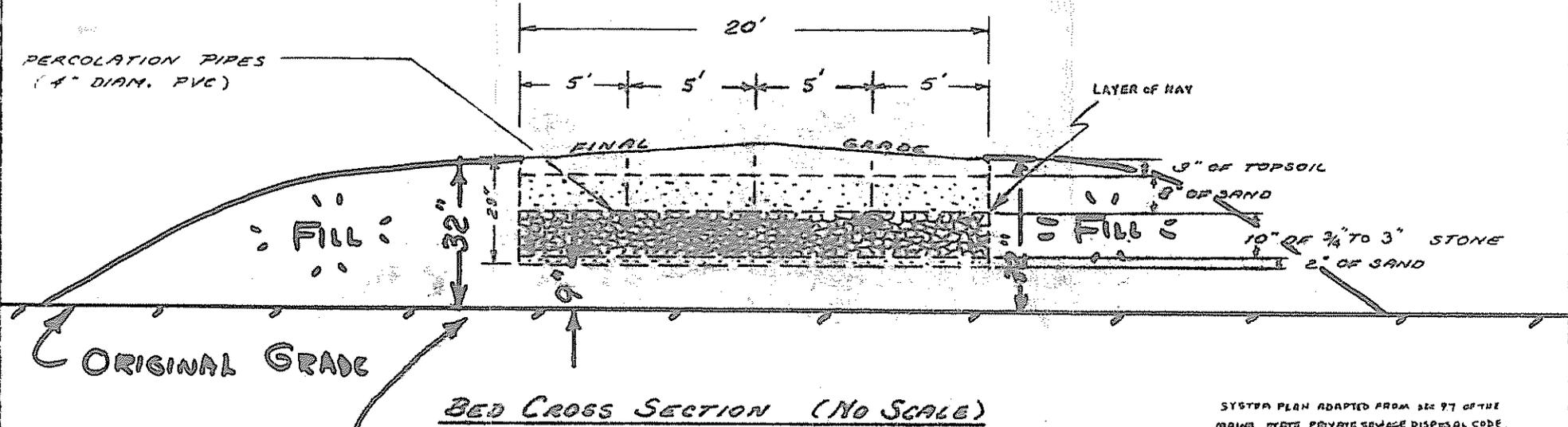
Statement (no permit may be issued unless signed)

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.

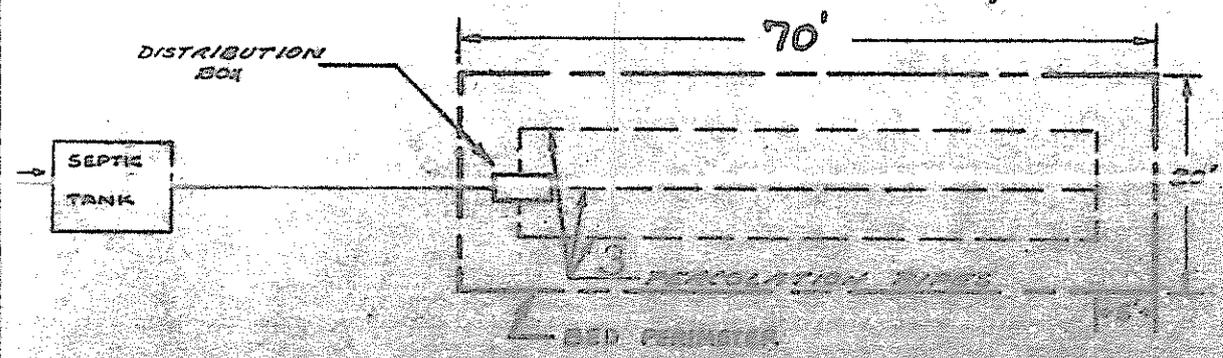
Signature Required

Date: 10-22-81  
Applicant: H & B Burns, Inc.  
Owner: Henry Lemelin

\* SEWAGE DISPOSAL BED DETAILS \*



SYSTEM PLAN ADAPTED FROM SEC 97 OF THE MAINE STATE PRIVATE SEWAGE DISPOSAL CODE.



32 INCHES OF FILL IS REQUIRED AND SHALL BE INSTALLED PER TABLE 8-2 OF THE PRIVATE SEWAGE DISPOSAL CODE. TEXTURE OF FILL SHALL BE FINE SANDY LOAM.

FOR: HENRY LEVELLIN  
 LOCATION: AUGUSTA, ON THE BURNS RD.

PKL 6-10-75