Gagne, Samuel

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

Full Conversion

This Application Is For: (X) New System ( ) Expanded System ( ) Conversion Permit ( ) Experimental System ( ) Replacement Of Entire System ( ) Disposal Area Only

Application For Subsurface Wastewater Disposal Permit

This Is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Town	Street, Road, Etc. / If On Water Body, Give Name	Plumbing Permit No.	Date Of Plumbing Permit
Augusta	Gagne St.	~~4-11-80~~ 23011 EP	4-11-80

Owner Of Property	Tel. No.	Name Of Applicant / Owner's Agent	Tel. No.
Samuel Gagne			

Street	Town	State	Zip Code
Middle Rd. RFD3	Augusta	Maine	

Owner's Signature	Date	Applicants Signature	Date
X	4-11-80	X Carol Jarvis	4-11-80

Size Of Lot	Is Lot Zoned?	Type Of Zoning	Subdivision Name	Lot No.
20,600 (X) Sq. Feet ( ) Acres	( ) Yes (X) No		Samuel Gagne	14

The Water Supply For This Property Is: ( ) Dug Well, depth ____; ( ) Drilled Well, depth ____; ( ) Spring, depth ____

Surface water ( ) Body ( ) Course—( ) with disinfection, ( ) without disinfection. Public Utility, name ____

SITE INVESTIGATION — Show Location Of Pits on Site Plan on Page 2

	Soil Profile No. 1 (X) Boring	Soil Profile No. ( ) Pit ( ) Boring	Soil Profile No. ( ) Pit ( ) Boring	Soil Profile No. ( ) Pit ( ) Boring
Organic Strata	Removed			
1st Strata	Red Brown Loamy Sand 18 inches			
2nd Strata	Interbedded fine Sand - Med. Sand 30 inches			
3rd Strata	inches			
4th Strata	inches			
Total Depth of Observation Hole Inches	48			
Max. Seasonal Water Table Mottling	33 inches	( ) None Evident	( ) None Evident	( ) None Evident
Impervious Layer Clay, Etc.	(X) None Evident	( ) None Evident	( ) None Evident	( ) None Evident
Bedrock	(X) None Evident	( ) None Evident	( ) None Evident	( ) None Evident
Type of Bedrock				
Surface Slope	0-2 %	%	%	%
Soil Group	5			
Soil Condition	C			
Per Table 9-1 Code II				

On 4/25/79 (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: Alan W Richards

Date Signed: 4/27/79

Site Evaluator License Number: 51

DISPOSAL SYSTEM PROPOSED — Show Location of System and Details on Disposal Plan on Page 2

SYSTEM:
- ( ) Combined System
- ( ) Separated System
- If separated system—type of human waste disposal system to be used:
- ( ) Sealed Vault Privy
- ( ) Open Pit Privy
- ( ) Compost Toilet
- ( ) Chemical Toilet
- ( ) Incinerator Toilet

TREATMENT TANK
- ( ) Aerobic Tank
- (X) Septic Tank
- (X) Concrete
- ( ) Fiberglass
- ( ) Metal

Size in Gallons: 1000 Gal.

Number of Bedrooms: 3 or less

SUBSURFACE ABSORPTION AREA/TYPE
- (X) Bed System — No. of Beds 1 — Length 34 ft — Width 20 ft
- ( ) Chamber System Number ____
- ( ) Type A ( ) Single File
- ( ) Type B ( ) Cluster
- ( ) Special System Length ____ ft — Width ____ ft
- ( ) Laundry System — Type A ____ — No. of Chambers: Type B ____

Name and type of establishment if other than private home

SIZE
- ( ) Small
- (X) Medium
- ( ) Med.-Large
- ( ) Large
- ( ) Extra-Large

Design Flow: 264 GPD

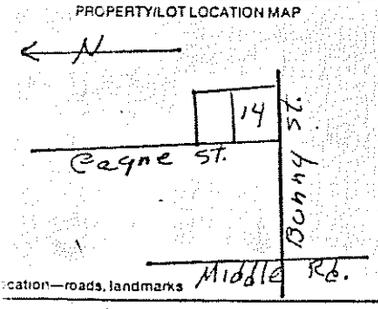
SITE MODIFICATION

Fill will be: 15 in. uphill 22± in. downhill

DETAILS Pump depends on Tank elevation.
- ( ) A Distribution Box is required
- Pumping is—( ) required ( ) is not required
- The dose will be ____ Gallons

DISTANCES
- (X) Yes ( ) 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.
- (X) Yes ( ) 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.

PROPERTY/LOT LOCATION MAP



Location—roads, landmarks

WAIVER ( ) State Variance Required ( ) Replacement Variance Required (X) None Required

FOR THE USE OF LPI ONLY
- ( ) Denial: Application is denied for the 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 4.1
- ( ) Site Investigation indicates site is ( ) unsuitable for disposal system. ( ) Unsuitable for system proposed.
- ( ) System Proposed does not conform to Code. ____
- ( ) Site Investigation indicates site modifications are necessary.
- (X) Acceptance—Application for permit is approved ( ) with condition specified, comply with Section ____ (X) without condition.

Signed LPI: Richard G. Baker — Date 4-30-79

HHE 200 1/78

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

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

Town: Augusta

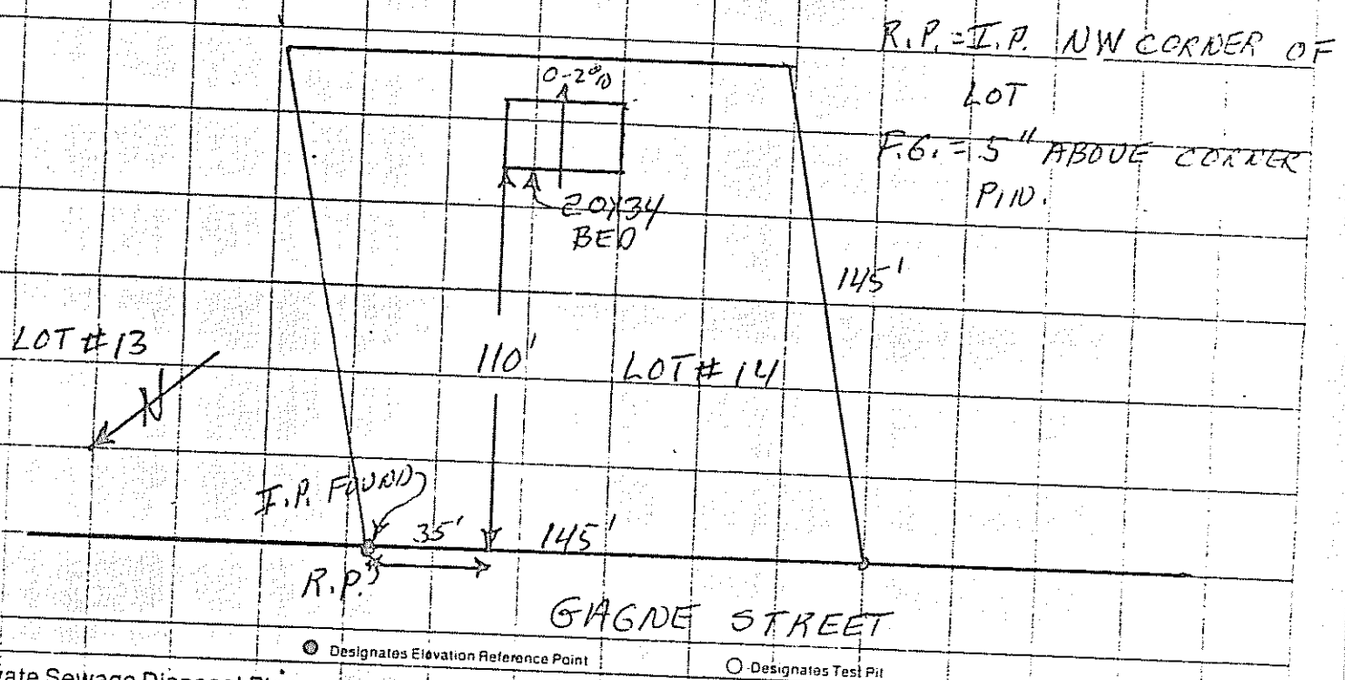
Street, Road, etc.: Gagne St

If on water body, give name:

Owner of Property: Samuel Gagne

Site Plan

Scale 1" = 50 ft.

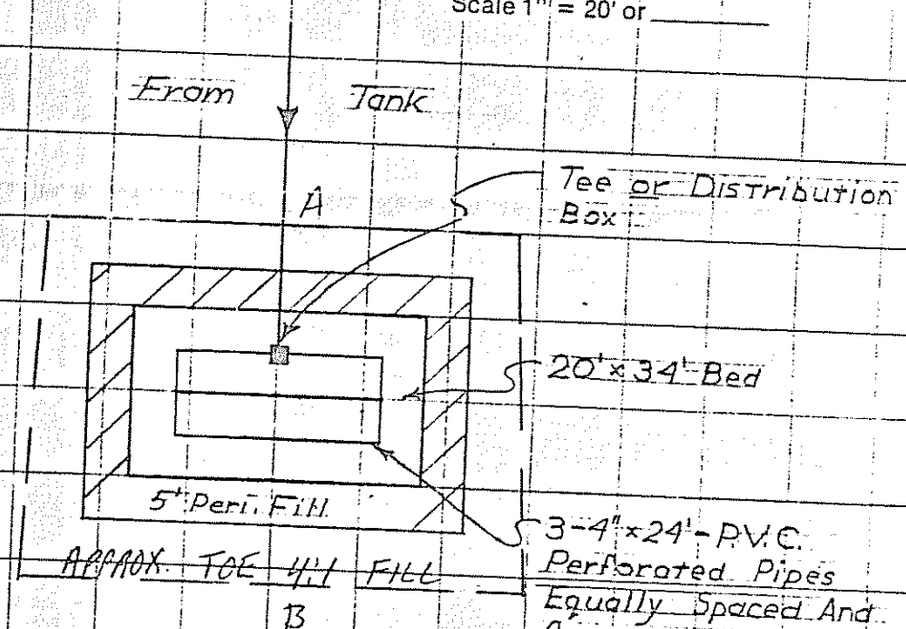


● Designates Elevation Reference Point

○ Designates Test Pit

Private Sewage Disposal Plan

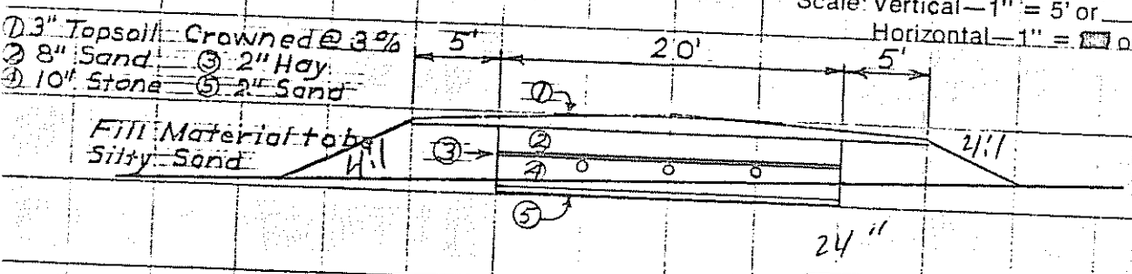
Scale 1" = 20' or _____



Subsurface Absorption Area Cross-section

Scale: Vertical—1" = 5' or _____

Horizontal—1" = [illegible] or 10'



Remove Stumps, Boulders, and or Sod and Scarify Surface Before Fill Is Placed.

Evaluators Signature: [signature] Date: 4/27/79 License Number: 51

Client: (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 fill 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

Signature Required

Date: 4-11-80

Applicant: _____

Owner: [signature]

HHE-200 1/78