

DUPLICATE — To be retained by the Plumbing Inspector

Soule, Neal

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. <i>Garage St</i> If on water body, give name		Permit No. <i>7059EP</i>	Date <i>9-23-77</i>	
Owner of property <i>Neal Soule</i>			Size of lot <i>45000 ±</i>	<input type="radio"/> Sq. feet <input type="radio"/> Acres	
Name & type of establishment if other than private home			is lot Zoned? <input type="radio"/> Yes <input type="radio"/> No	Type of Zoning <input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Resource Protection	
Name of applicant Owner's agent <i>Neal Soule</i>			If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="radio"/> Deed restriction re. private sewage disposal <input type="radio"/> Copy of the subdivision's soils report <input type="radio"/> Soils report from a State Agency		
Applicant's address Street, Box, etc. <i>61 Washington St</i>		Tel. No. <i>622-0635</i>	Subdivision name <i>Garage</i>		
Town <i>Augusta</i>	Maine <i>04330</i>		Lot No. <i>6</i>		
Applicant's signature <i>Neal Soule</i>		Date <i>9-23-77</i>	Date <i>9-23-77</i>		

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 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.	Soil Profile No.		Soil Profile No.		Soil Profile No.	
	<input 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	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata
Inches <i>0"</i>	Inches	Inches	Inches	Inches	Inches	Inches
1st strata <i>1st strata brown silty loam</i>	1st strata					
Inches <i>45 inches</i>	Inches	Inches	Inches	Inches	Inches	Inches
2nd strata <i>2nd strata olive silty loam</i>	2nd strata					
Inches <i>22"</i>	Inches	Inches	Inches	Inches	Inches	Inches
3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata	3rd strata
Inches	Inches	Inches	Inches	Inches	Inches	Inches
Total Depth of observation hole Inches <i>65</i>	Total Depth of observation hole Inches					
Max. Ground water table—mottling <i>very light mottling</i>	Max. Ground water table—mottling					
Inches <i>45</i>	Inches	Inches	Inches	Inches	Inches	Inches
Impervious layer, clay, etc. <i>45</i>	Impervious layer, clay, etc.					
Inches	Inches	Inches	Inches	Inches	Inches	Inches
Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>	Bedrock <i>None Evident</i>
Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock
Surface slope <i>0%</i>	Surface slope %					
Soil Group & Condition per Table 9-1 of the Code, II <i>8B</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	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 *9-31-77* (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 *Gerald C. Neale 2909*
Date signed *9-31-77*

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 sketches on page 2, and refer to completed sample form

SYSTEM: <input type="radio"/> COMBINED SYSTEM <input type="radio"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Incinerator Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Other, describe See Chapter 9 of the Code, II.	TREATMENT TANK: <input type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Manufacturer— Size in gallons <i>1000</i> <input type="radio"/> Aerobic Tank Manufacturer— Model No. Size in gallons	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION Fill is— <input type="radio"/> required, <input type="radio"/> not required Fill will be <i>2</i> inches deep
		Type <input type="radio"/> Trench System: Total trench length _____ <input type="radio"/> Bed System Length <i>70</i> Width <i>20</i> <input type="radio"/> Chamber System Number _____ <input type="radio"/> Type A <input type="radio"/> Single File <input type="radio"/> Type F <input type="radio"/> Cluster <input type="radio"/> Mound System Length _____ Width _____ at base <input type="radio"/> Special System Length _____ Width _____ <input type="radio"/> Non-discharge System Bed-Length _____ Width _____ Holding Tank Size _____ Gal. Manufacturer _____ <input type="radio"/> Alarm device provided, type _____	SIZE <input type="radio"/> Very Small <input type="radio"/> Small <input type="radio"/> Medium <input type="radio"/> Medium Large <input type="radio"/> Large <input type="radio"/> Extra Large	DETAILS <input type="radio"/> A Distribution Box is required Pumping is— <input type="radio"/> required, <input type="radio"/> is not required. The Dose will be _____ gallons

PROPERTY/LOT LOCATION MAP Location—roads, landmarks	FOR THE USE OF LPI ONLY <input type="radio"/> Denial: Application is denied for following reasons; portions of the Code II are cited. Form is incomplete (_____ pg.) as to <input type="radio"/> General info, <input type="radio"/> Site Investigation, <input type="radio"/> System Proposed, <input type="radio"/> Site Plan, <input type="radio"/> Disposal System Plan, <input type="radio"/> Cross-Section, <input type="radio"/> Statement. See Section 2.3. <input type="radio"/> Site Investigation indicates site is <input type="radio"/> totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10. <input type="radio"/> Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1. <input type="radio"/> System Proposed does not conform to Code; See Sections 9. <input type="radio"/> Site Investigation indicates site modifications are necessary; See Sections <input type="radio"/> 4.3, <input type="radio"/> 4.4, <input type="radio"/> 4.6, <input type="radio"/> 8.7. <input type="radio"/> Miscellaneous _____ See Section _____ <input type="radio"/> Acceptance: Application for permit is approved <input type="radio"/> with condition specified, comply with Section _____ <input type="radio"/> without condition.
	Signed LPI <i>Richard P. Baber</i> Date <i>9-23-77</i> HHE-200 7/74

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 APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
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Town <i>Augusta</i>	Street, Road, etc. <i>Green ST</i> If on water body, give name:	Owner of property <i>Michael Soule</i>
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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

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: _____
 Applicant: _____
 Owner: *Michael Soule*