call rec'd 7/25 9:00

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 10SHS
(207)287-5672 FAX (207)287-3165

PROPERTY LOCATION

>> CAUTION: PERMIT REQUIRED -- ATTACH IN SPACE BELOW <<

City, Town, Plantation	AUGUSTA
Street or Road	10 MOOSE CIRCLE LOT # 16
Subdivision, Lot #	

AUGUSTA 5129 TOWN COPY
Date Permit Issued: 7/25/03 $ 100.00 ☐ If Double Fee FEE Charged
Local Plumbing Inspector Signature L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI) BONENFANT, PAUL ■ Owner ☐ Applicant

Mailing Address of Owner/Applicant	92 OLD BELGRADE ROAD
	AUGUSTA, ME 04330
Daytime Tel. #	622-5013

Municipal Tax Map # 1A Lot # 16

OWNER OR APPLICANT STATEMENT
I state that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.
Signature of Owner/Applicant 7/25/03 Date

CAUTION: INSPECTION REQUIRED
I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application
Local Plumbing Inspector Signature (1st) Date Approved 8/8/03 (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION
- ■ 1. First Time System
- ☐ 2. Replacement System
  - Type replaced ____
  - Year Installed ____
- ☐ 3. Expanded System
  - ☐ a. Minor Expansion
  - ☐ b. Major Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES
- ■ 1. No Rule Variance
- ☐ 2. First Time System Variance
  - ☐ a. Local Plumbing Inspector approval
  - ☐ b. State & Local Plumbing Inspector approval
- ☐ 3. Replacement System Variance
  - ☐ a. Local Plumbing Inspector approval
  - ☐ b. State & Local Plumbing Inspector approval
- ☐ 4. Minimum Lot Size Variance
- ☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS
- ■ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify ____
- ☐ 4. Non-Engineered Treatment Tank (only)
- ☐ 5. Holding Tank, ____ gallons
- ☐ 6. Non-engineered Disposal Field (only)
- ☐ 7. Separated Laundry System
- ☐ 8. Complete Engineered System (2000 gpd or more)
- ☐ 9. Engineered Treatment Tank (only)
- ☐ 10. Engineered Disposal Field (only)
- ☐ 11. Pretreatment, specify: ____
- ☐ 12. Miscellaneous Components

SIZE OF PROPERTY
1.0 ☐ sq. ft. ■ acres

SHORELAND ZONING
☐ Yes ■ No

DISPOSAL SYSTEM TO SERVE:
- ■ 1. Single Family Dwelling Unit, No. of Bedrooms: 3
- ☐ 2. Multiple Family Dwelling Unit, No. of Units: ____
- ☐ 3. Other ____ (specify)

Current Use ☐ Seasonal ☐ Year Round ■ Undeveloped

TYPE OF WATER SUPPLY
■ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
- ■ 1. Concrete
  - ■ a. Regular
  - ☐ b. Low Profile (IF NEEDED)
- ☐ 2. Plastic
- ☐ 3. Other ____

CAPACITY 1000 GAL.

DISPOSAL FIELD TYPE & SIZE
- ■ 1. Stone Bed ☐ 2. Stone Trench
- ☐ 3. Proprietary Device
  - ☐ a. cluster array ☐ c. Linear
  - ☐ b. regular load ☐ d. H-20 load
- ☐ 4. Other ____

SIZE 1100 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
1. ■ No 3. ☐ Maybe
2. ☐ Yes>>Specify one below:
   - ☐ a. multi-compartment tank
   - ☐ b. ___ tanks in series
   - ☐ c. Increase in tank capacity
   - ☐ d. Filter on Tank Outlet

DESIGN FLOW
270 gallons per day
BASED ON:
- ■ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS -for other facilities-
- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
3 / C / 1
at Observation Hole # TP-1
Depth 16 "
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
1. ☐ Small - 2.0 sq. ft./gpd
2. ☐ Medium - 2.6 sq. ft./gpd
3. ■ Medium-Large - 3.3 sq. ft./gpd
4. ☐ Large - 4.1 sq. ft./gpd
5. ☐ Extra-Large - 5.0 sq. ft./gpd

EFFLUENT/EJECTOR PUMP
1. ■ Not Required
2. ☐ May Be Required
3. ☐ Required>> Specify only for engineered or experimental systems
   DOSE ____ gallons

SITE EVALUATOR'S STATEMENT

I certify that on 7/17/03 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

William P Brown	188	7/18/2003
Site Evaluator Signature	SE#	Date
WILLIAM P BROWN	293-2110	
Site Evaluator Name Printed	Telephone Number	E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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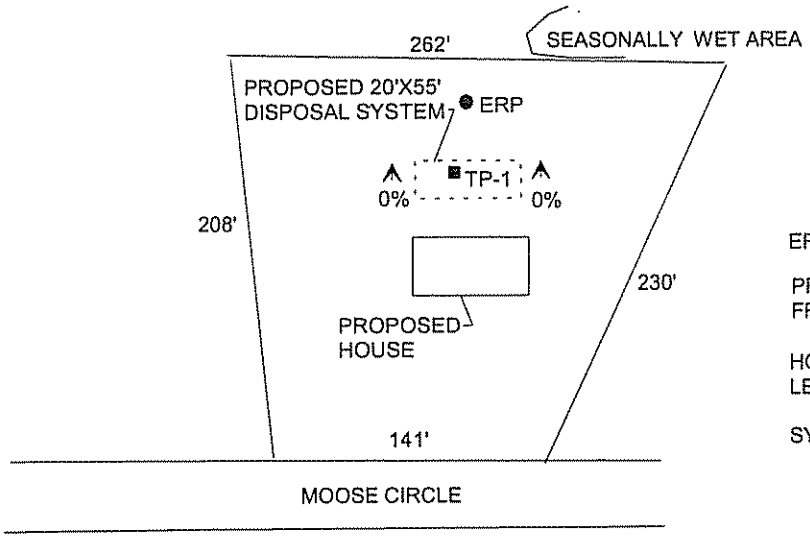
Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX 207 287-4165

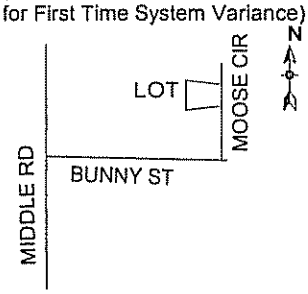
Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	MOOSE CIRCLE	PAUL BONENFANT

SITE PLAN

Scale 1" = 100 Ft.



SITE LOCATION PLAN
(Attach map from Maine Atlas for First Time System Variance)



ERP TO TP-1 = 33'

PROPOSED WELL TO BE AT LEAST 100 FEET FROM SEPTIC SYSTEM

HOUSE ON FULL FONDATION TO BE AT LEAST 20 FT FROM SYSTEM

SYSTEM IS 50 FEET FROM MINOR WATER COURSE

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

Observation Hole # TP-1 ■ Test Pit ☐ Boring

0 " Depth of organic horizon above mineral soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistancy	Color	Mottling
FINE SANDY LOAM	FRIABLE	DARK BRN	
		YELLOW BROWN	NONE
MEDIUM SAND	FIRM	OLIVE BRN	COMMON

Soil Classification		Slope	Limiting Factor	
3 Profile	C Condition	0 % Percent	16 " Depth	■ Groundwater ☐ Restrictive Layer ☐ Bedrock

Observation Hole # _____ ☐ Test Pit ☐ Boring

_____ " Depth of organic horizon above mineral soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistancy	Color	Mottling

Soil Classification		Slope	Limiting Factor	
Profile	Condition	% Percent	" Depth	☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

WILLIAM P BROWN *William P Brown* 188 7/18/2003
Site Evaluator Signature SE # Date

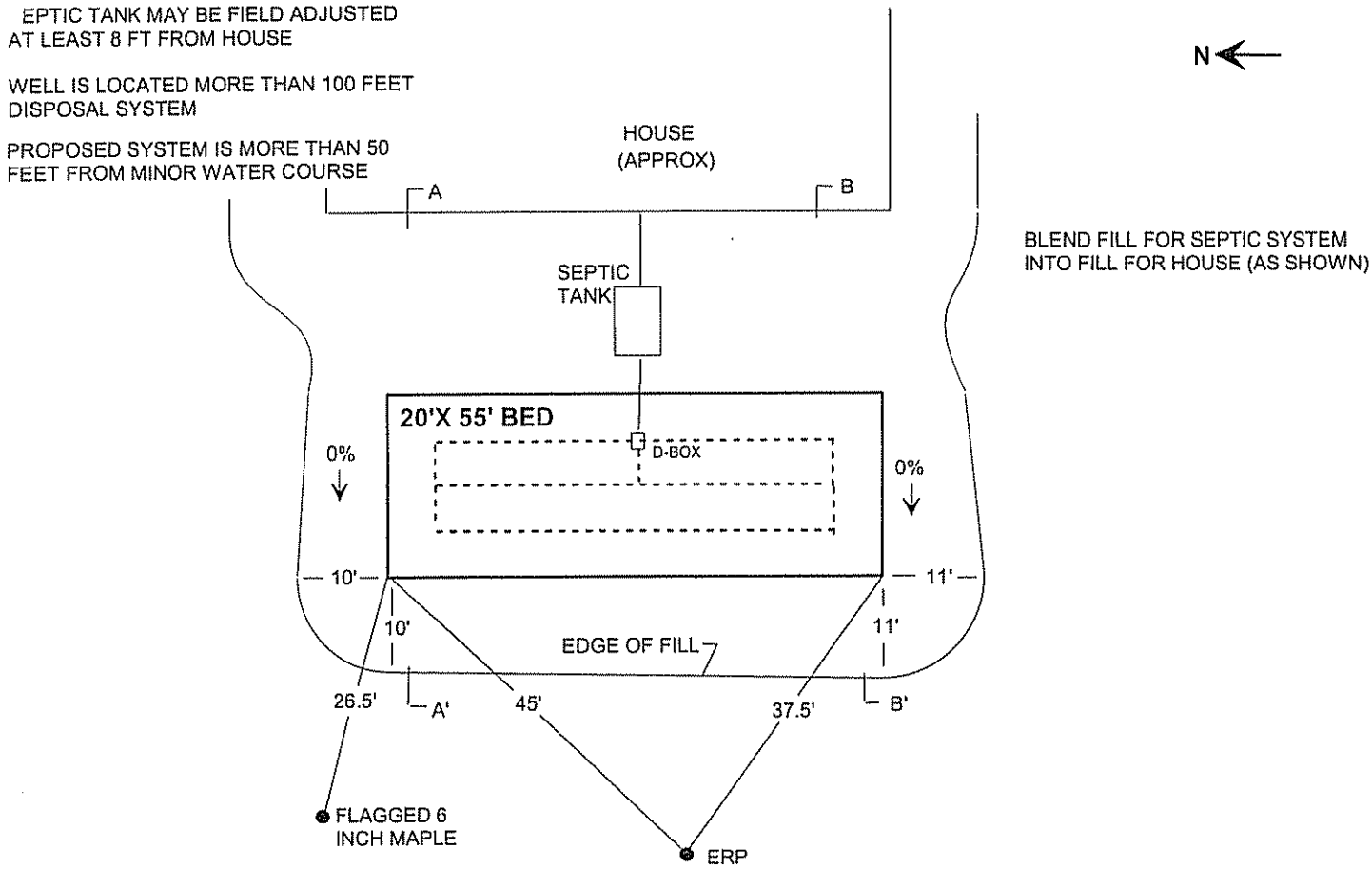
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	MOOSE CIRCLE LOT 16	PAUL BONENFANT

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" 20' Ft.

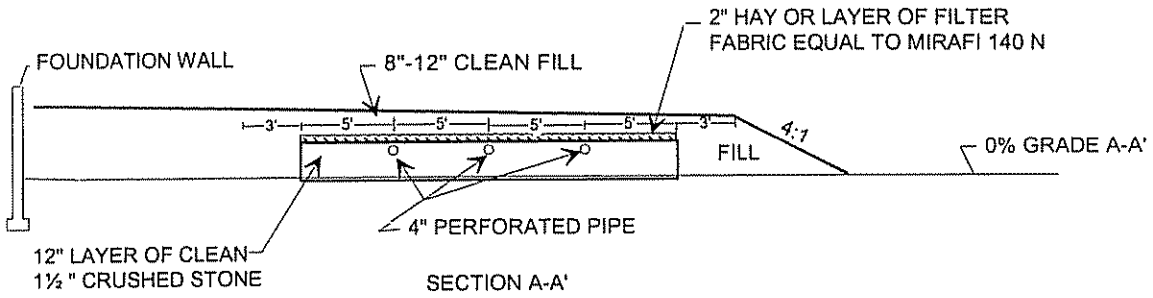


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	22-24 "	Finish Grade Elevation	VARIES	Location and Description
Depth of Fill (Downslope)	22-24 "	Top of Distribution Pipe or Proprietary device	-46"	FLAGGED NAIL IN 7 INCH OAK TREE, 3 FEET ABOVE GROUND
		Bottom of Disposal Area	-57"	Reference Elevation is 00"

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 10 Ft.



REMOVE STUMPS AND VEGETATION IN DISPOSAL AREA
SCARIFY ENTIRE FILL AREA
MIX 4 INCHES OF FILL MATERIAL THOROUGHLY WITH EXISTING SOIL TO FORM
A TRANSITION ZONE (ACCORDING TO CHAPTER 8, PLUMBING CODE)
ALL FILL SHALL BE GRAVELLY COARSE SAND
CROWN FINISH GRADE FROM CENTER AT 3%
OR SLOPE ALL ONE-WAY FROM FOUNDATION (AS SHOWN)
LOAM, SEED, MULCH DISTURBED AREAS

WILLIAM P BROWN *William P Brown* 188 7/18/2003
Site Evaluator Signature SE # Date