La pointe Development

DEPARTMENT OF HEALTH AND WELFARE — 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

AUGUSTA	Street, Road, etc. SUNRISE DRIVE If on water body, give name	Permit No.	Date 11/4/74

Owner of property: LA POINTE DEVELOPMENT CORP. Owners address: AUGUSTA, MAINE

Size of lot: 21740 (XX) sq. feet ( ) Acres

Name & type of establishment if other than private home

Is lot Zoned? ( ) Yes ( ) No — Type of Zoning ( ) residential ( ) Commercial ( ) Resource Protection

Name of applicant (owner's agent)

Applicant's address Street, Box, etc. — Tel. No.

Town — Maine

If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:
( ) Deed restriction re. private sewage disposal
( ) Copy of the subdivision's soils report
( ) Soils report from a State Agency

Applicant's signature — Date

Owner's signature — Date

Subdivision name: SUNRISE DRIVE — Lot No.: LOT 1

This application is for: (XX) 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 depth ____, lining ____, Surface water ( ) Body, ( ) Course - ( ) with disinfection, ( ) without disinfection.

SOIL 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. 1	Soil Profile No.	Soil Profile No.	Soil Profile No.	Soil Profile No.
	(XX) Pit ( ) Boring	( ) Pit ( ) Boring	( ) Pit ( ) Boring	( ) Pit ( ) Boring	( ) Pit ( ) Boring
Thickness and description of each soil strata encountered	Organic strata +1" Inches	Organic strata Inches	Organic strata Inches	Organic strata Inches	Organic strata Inches
	1st strata BROWN SILTY GRAVEL 24 Inches	1st strata Inches	1st strata Inches	1st strata Inches	1st strata Inches
	2nd strata SANDY GRAVEL 36+ Inches	2nd strata Inches	2nd strata Inches	2nd strata Inches	2nd strata Inches
	3rd strata Inches	3rd strata Inches	3rd strata Inches	3rd strata Inches	3rd strata Inches
Depth from surface of ground to:	Total depth of observation hole Inches 60	Total depth of observation hole Inches	Total depth of observation hole Inches	Total depth of observation hole Inches	Total depth of observation hole Inches
	Max. Ground water table - mottling (XX) None Evident Inches	Max. Ground water table - mottling ( ) None Evident Inches	Max. Ground water table - mottling ( ) None Evident Inches	Max. Ground water table - mottling ( ) None Evident Inches	Max. Ground water table - mottling ( ) None Evident Inches
	Impervious layer, clay, etc. (XX) None Evident Inches	Impervious layer, clay, etc. ( ) None Evident Inches	Impervious layer, clay, etc. ( ) None Evident Inches	Impervious layer, clay, etc. ( ) None Evident Inches	Impervious layer, clay, etc. ( ) None Evident Inches
	Bedrock (XX) None Evident Inches Type of Bedrock	Bedrock ( ) None Evident Inches Type of Bedrock	Bedrock ( ) None Evident Inches Type of Bedrock	Bedrock ( ) None Evident Inches Type of Bedrock	Bedrock ( ) None Evident Inches Type of Bedrock
	Surface slope 0-1 %	Surface slope %	Surface slope %	Surface slope %	Surface slope %
	Soil Group & Condition per Table 9-1 of the Code, II: 5-B	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 11/4/74 (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: Albert W. Richard

Date signed: 11/4/74 #37

( ) Soil Scientist (XX) 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:
(XX) COMBINED SYSTEM
( ) SEPARATED SYSTEM
If separated system - type of human waste disposal system to be used:
( ) Sealed Vault Privy
( ) Open Pit Privy
( ) Compost Toilet
( ) Incinerator Toilet
( ) Chemical Toilet
( ) Other, describe
See Chapter 9 of the Code, II.

TREATMENT TANK:
(XX) Septic Tank
(XX) Concrete
( ) Fiberglas
( ) Metal
Manufacturer -
Size in gallons: 1000
( ) Aerobic Tank
Manufacturer -
Model No.
Size in gallons

SUBSURFACE ABSORPTION AREA
Type:
( ) Trench System: Total trench length. ____
(XX) Bed System Length 20 Width 10
( ) Chamber System Number ( ) Type A ( ) Type F ( ) Single File ( ) Cluster
( ) Mound System. Length Width at base
( ) Special System Length Width
( ) Non-discharge System Bed-Length Width Holding Tank Size Gal. Manufacturer
( ) Alarm device provided, type.

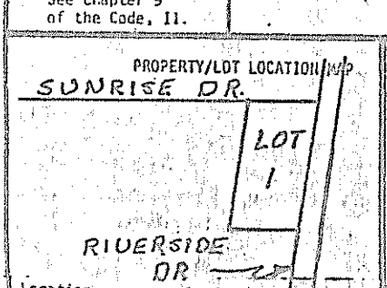
SIZE: ( ) Very Small (XX) Small ( ) Medium ( ) Medium Large ( ) Large ( ) Extra Large

SITE MODIFICATION
Fill is - ( ) required, (XX) not required
Fill will be ____ inches deep

DETAILS OPTIONAL
(XX) A Distribution Box is required
Pumping is - ( ) required, (XX) not required.
The Dose will be ____ gallons

DISTANCES
(XX) 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.
(XX) 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

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 2.2.
( ) 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: George L. Smith — Date: 12-5-74

PPI-209 7/74

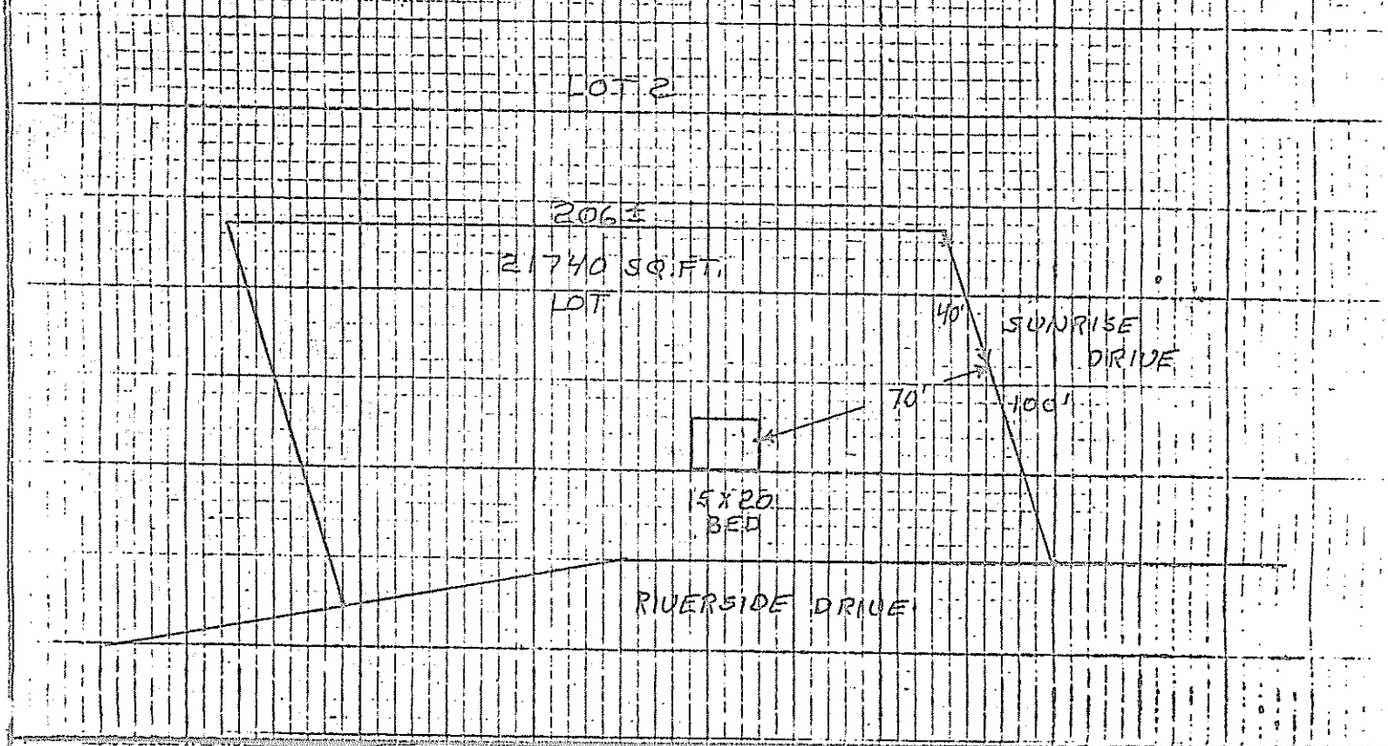
MAINE DEPARTMENT OF HEALTH AND WELFARE

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

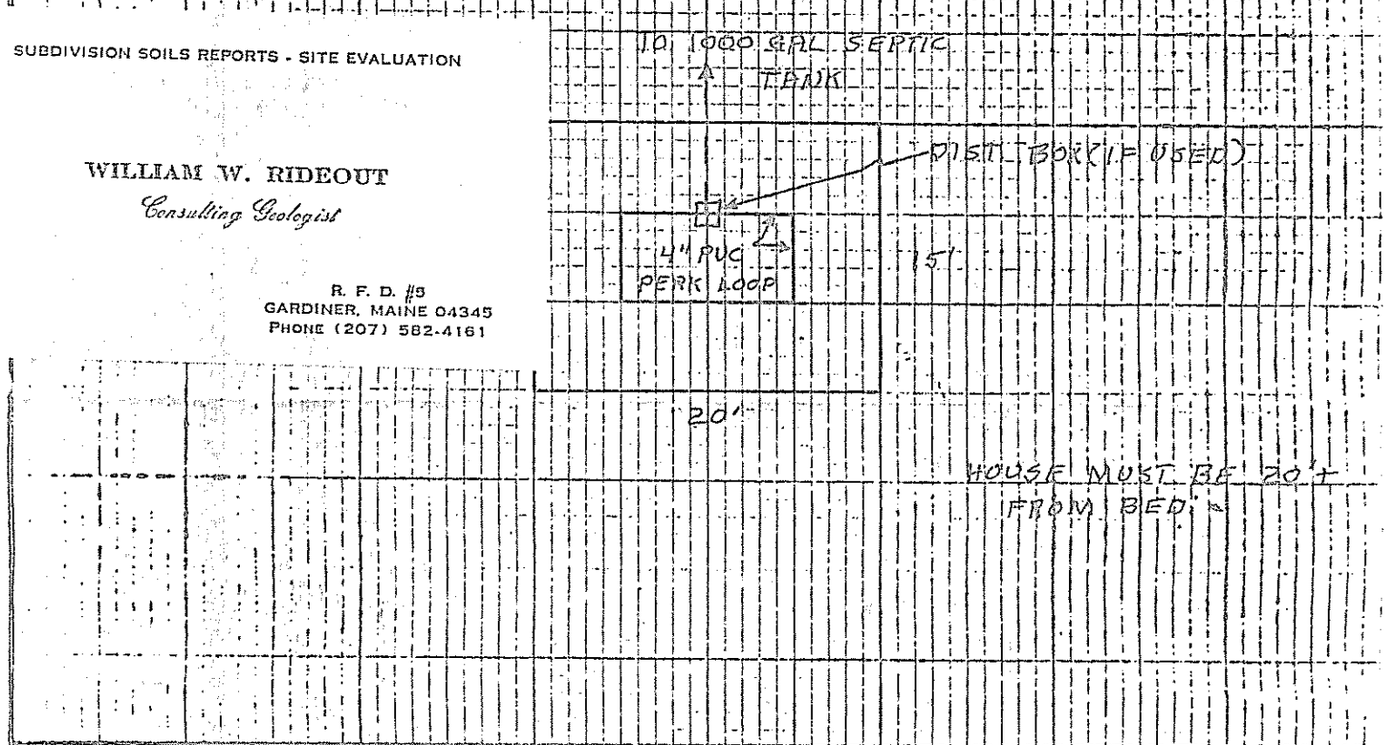
(For systems disposing of less than 2000 gallons per day)

AUGUSTA | Street, Road, etc. If on Water body, give name: SUNRISE DRIVE | Owner of property: LA POINTE DEVELOPMENT CORP.

Site Plan — Scale 1" = ~~100~~ Ft. or 1" = 50'



Private Sewage Disposal Plan — Scale 1" = ~~20'~~ or 1" = 10'



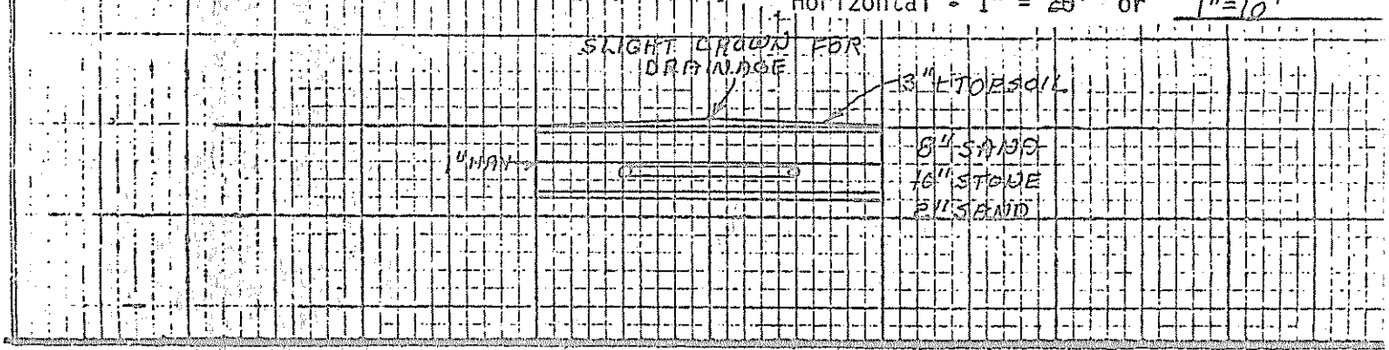
SUBDIVISION SOILS REPORTS - SITE EVALUATION

WILLIAM W. RIDEOUT

Consulting Geologist

R. F. D. #5
GARDINER, MAINE 04345
PHONE (207) 582-4161

Subsurface Absorption Area Cross-section — Scale: Vertical - 1" = 5' or Horizontal - 1" = ~~20'~~ or 1" = 10'



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

Signature Required HHE-200

Date:

Applicant:

Owner: