

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION		>> Caution Permit Required -- Attach in Space Below <<	
City, Town, Plantation	Augusta		
Street or Road	10 Sunrise Circle		
Subdivision, Lot #			
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	Lavigne, Kenneth E.	<input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant	
Mailing Address of Owner/Applicant	10 Sunrise Circle Augusta, Maine 04330		
Daytime Tel. #	(207) 626-9326 <u>626-4641</u>	Municipal Tax Map # <u>2</u> Lot # <u>5</u>	
Owner or Applicant Statement		Caution: Inspection Required	
I state and acknowledge 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. <u>Kenneth E. Lavigne</u> <u>7/21/03</u> Signature of Owner or Applicant Date		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. <u>John P. Kelle</u> <u>9/17/03</u> Local Plumbing Inspector Signature (1st) Date Approved (2nd) Date Approved	

PERMIT INFORMATION		
TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced: <u>trench (?)</u> Year Installed: <u>1975 ±</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Approval	DISPOSAL SYSTEM COMPONENTS <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input checked="" type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components
SIZE OF PROPERTY <u>0.8 ±</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of bedrooms: <u>3</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular (existing) <input type="checkbox"/> b. Low profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. Cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE <u>750</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input checked="" type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW <u>270</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 502.2 (other facilities) SHOW CALCULATIONS -- for other facilities --
SOIL DATA & DESIGN CLASS PROFILE <u>5</u> / <u>B</u> / <u>2</u> at Observation Hole # <u>1</u> Depth <u>> 48</u> " Elevation <u>> -112</u> " OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Small -- 2.0 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium -- 2.6 sq. ft./gpd <input type="checkbox"/> 3. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 4. Large -- 4.1 sq. ft./gpd <input type="checkbox"/> 5. Extra-Large -- 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input checked="" type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	<input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WITH PERMIT DATA

SITE EVALUATOR STATEMENT		
I certify that on <u>5-3-03</u> (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).		
<u>William T. Noble</u> Site Evaluator Signature William T. Noble Site Evaluator Name Printed	<u>75</u> SE # <u>(207) 547-3252</u> Telephone #	<u>5-12-03</u> Date JUL 21 2003 RECEIVED STATE OF MAINE WILLIAM T. NOBLE #75 LICENSED SITE EVALUATOR

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

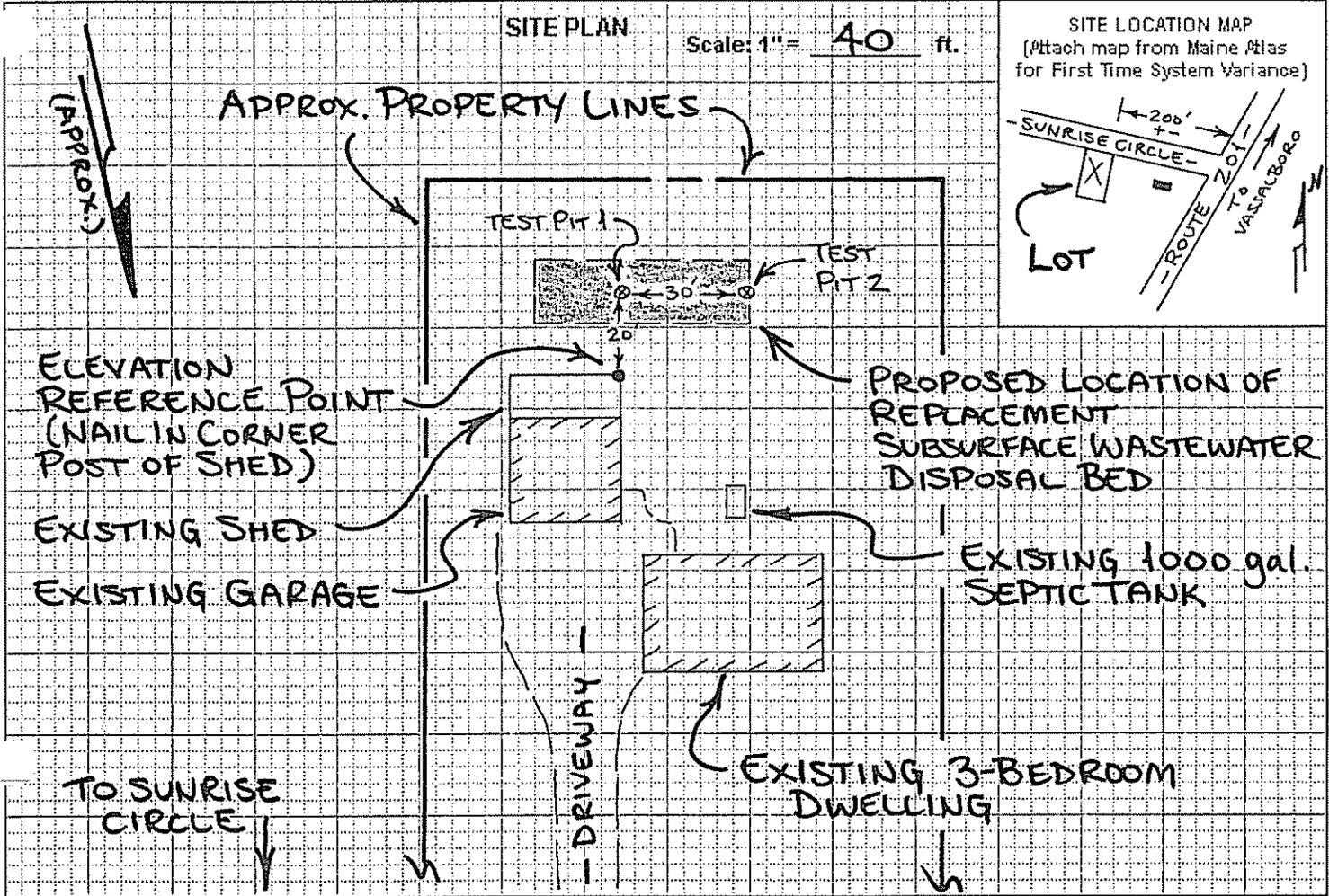
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
10 SUNRISE CIRCLE

Owner or Applicant Name
KENNETH E. LAYIGNE



SOIL PROFILE DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole # 1 Test Pit Boring

1/2 ± " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling	
0	STONY GRAVELLY SANDY LOAM	FRIABLE	DARK GRAYISH BROWN	
6	LOAMY FINE SAND	VERY FRIABLE	OLIVE BROWN	
12	LOAMY SAND TO SAND	LOOSE		
18				
24				
30				
36				
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	<input type="checkbox"/> Groundwater
<u>5</u>	<u>B</u>	<u>0 ±</u>	<u>NONE</u>	<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole # 2 Test Pit Boring

1/2 ± " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling	
0	STONY GRAVELLY SANDY LOAM	FRIABLE	DARK GRAYISH BROWN	
6	LOAMY SAND	VERY FRIABLE	OLIVE BROWN	
12	LOAMY SAND TO SAND	LOOSE		
18				
24				
30				
36				
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	<input type="checkbox"/> Groundwater
<u>5</u>	<u>B</u>	<u>0 ±</u>	<u>NONE</u>	<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

William J. Noble
 Site Evaluator Signature

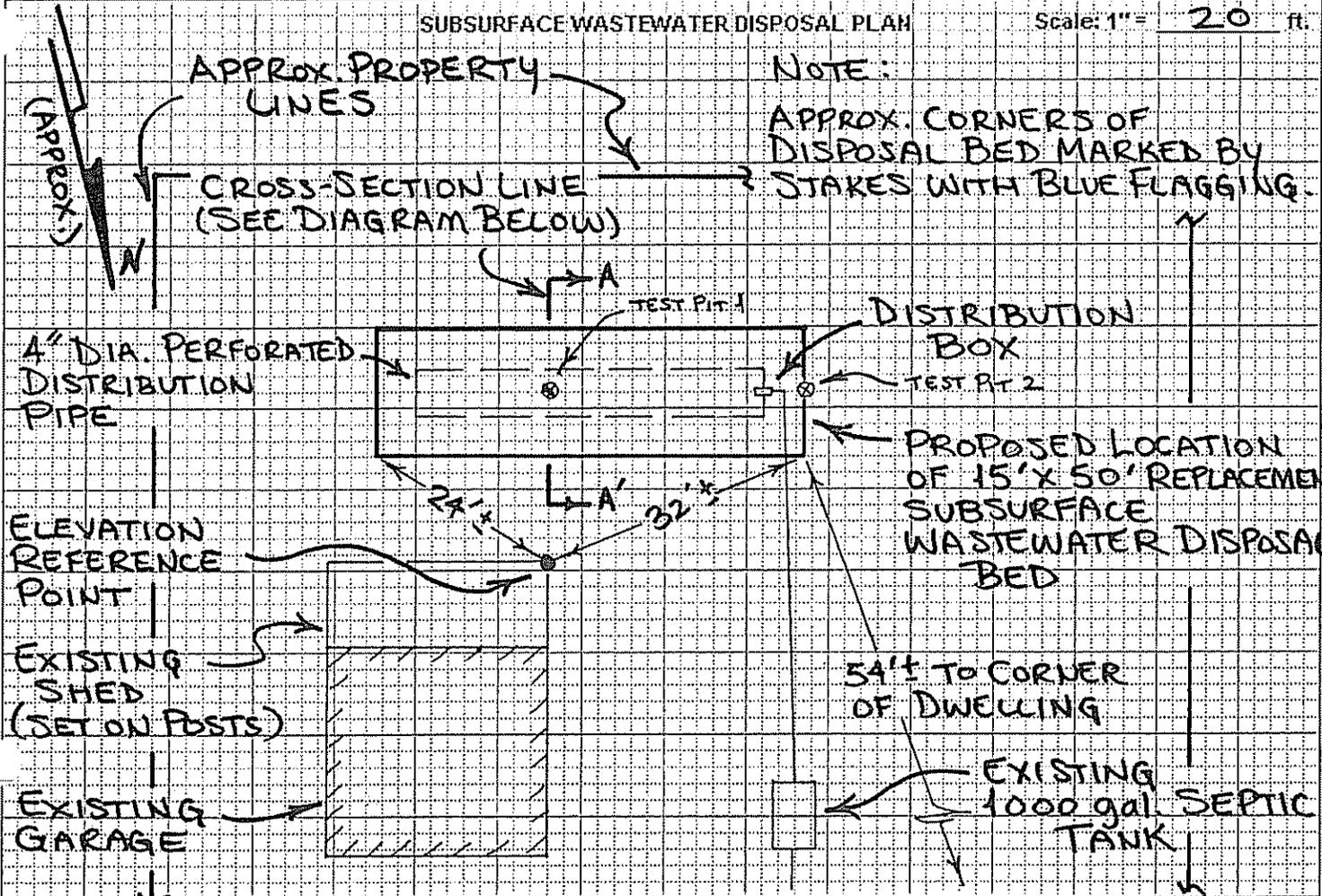
75
 SE #

5-12-03
 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

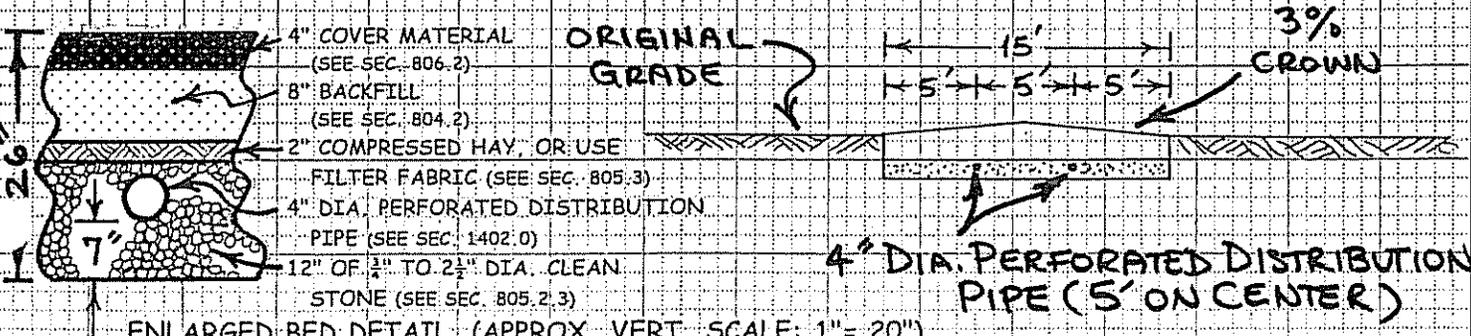
Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 FAX (207) 287-3165

Town, City, Plantation: **AUGUSTA** Street, Road, Subdivision: **10 SUNRISE CIRCLE** Owner or Applicant Name: **KENNETH E. LAVIGNE**



BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Backfill (upslope) <u>0</u> "	Finished Grade Elevation <u>-60</u> "	Location & Description: <u>NAIL WITH ORANGE FLAGGING IN CORNER POST OF SHED</u>
Depth of Backfill (downslope) <u>0</u> "	Top of Distribution Pipe or Proprietary Device <u>-79</u> "	Reference Elevation is: <u>0.0</u> " or: _____
DEPTHS AT CROSS-SECTION (shown below)	Bottom of Disposal Field <u>-90</u> "	

- NOTES:**
- FILL & BACKFILL EXTENSIONS TO BE COARSE SAND TO GRAVELLY COARSE SAND WITH 4 TO 8 % FINES, PER SEC. 804.2 OF THE RULES.
 - GRADE LAND AROUND DISPOSAL FIELD TO DIVERT ANY WATER AWAY FROM THE DISPOSAL AREA
 - REMOVE ORGANIC LAYER & RAKE OR HARROW THE SOIL SURFACE BEFORE INSTALLING BACKFILL.
 - BACKFILL DEPTHS MAY VARY FROM THOSE SHOWN DUE TO IRREGULARITIES IN SOIL SURFACE
 - DEPTH OF CUT & FILL TO BE _____ INCHES AT UPHILL SIDE OF DISPOSAL FIELD OR ROWS
 - MULCH & SEED FINAL GRADE PER SEC. 806.4 OF THE SSWD RULES (10-144A-CMR 241)



ENLARGED BED DETAIL (APPROX. VERT. SCALE: 1" = 20")

William G. Noble
 Site Evaluator Signature

75
 SE #

5-12-03
 Date



William T. Noble
Soil & Site Evaluations
2111 West River Road
Sidney, Maine 04330
Tel. (207) 547-3252

Licensed Site Evaluator
Certified Soil Scientist
Certified Geologist

18 September 2003
Job No. 03012

Jon Canty Construction
189 Indiana Road
West Gardiner, Maine 04345

Re: Amendment to Subsurface Wastewater Disposal System Design Plans (HHE-200 Form),
Lavigne Property, Sunrise Circle, Augusta.

Dear Mr. Canty,

On 9-17-03, at your request, I examined a test pit excavated within the footprint of a proposed replacement subsurface wastewater disposal field for the subject property, as shown in disposal system design plans prepared by me, dated 5-12-03.

The purpose of this investigation was to determine whether the disposal field as designed could be lowered to avoid pumping wastewater from the existing septic tank to the disposal field.

No limiting factors (*e.g. seasonal high water table, restrictive layer, or bedrock*) were observed in the sandy soil to a depth of approximately 6 feet below original grade. Therefore, construction elevations for the distribution pipe and stone can be lowered as much as 12" from that specified in the disposal system design plans. Revised elevations (in inches) are as follows:

- Finished grade elevation: -60 "
- Top of distribution pipe: -91 "
- Bottom of disposal field: -102 "

This letter should be attached to all copies of the 5-12-03 disposal system design plans, so that a complete record is maintained regarding the design and construction of this replacement subsurface wastewater disposal field.

If you have any questions or require additional assistance, please don't hesitate to contact me.

Sincerely,

William T. Noble, S.E. 75

pc: G. Soucy, LPI, City of Augusta
K. Lavigne