623-4369

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA

t or Road: 14 SUNRISE CIRCLE

Subdivision, Lot #:

>> Caution: Permit Required -- Attach In Space Below <<

AUGUSTA 4408 TOWN CODE
Date Permit Issued 5 22 00
$ 100 ☐ If Double Fee Charged
FEE
Mary R. Fuller
Local Plumbing Inspector Signature
L.P.I. # 1850

OWNER/APPLICANT INFORMATION

Name (last, first, MI): BAKER DEXTER (Owner / Applicant)

Mailing Address of ☒ Owner ☐ Applicant: RR#1 BOX 268, AUGUSTA, MAINE 04330

Daytime Tel. #:

Municipal Tax Map # 2 Lot # 6

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.

Dexter M Baker 5-15-2000
Signature of Owner or Applicant — Date

Caution: Inspections Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Mary R. Fuller — 5/23/00 (1st) Date Approved
Local Plumbing Inspector Signature — (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☐ First Time System
2. ☒ Replacement System
Type Replaced: BED
Year Installed: ?
3. ☐ Expanded System
   a. ☐ One-time exempted
   b. ☐ Non-exempted
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 Approval

DISPOSAL SYSTEM COMPONENT(S)
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. ☐ Pre-treatment, specify:
12. ☐ Miscellaneous components

SIZE OF PROPERTY
± 1 AC. ☐ sq. ft. ☒ acres

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE
1. ☒ Single Family Dwelling Unit, No. of Bedrooms: 3
2. ☐ Multiple Family Dwelling, No. of Units:
3. ☐ Other: ____ SPECIFY

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
2. ☐ Plastic
3. ☐ Other:
CAPACITY 1000 gallons
EXISTING

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 800 ☒ 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
6 / B /
at Observation Hole #
Depth N/A " Elevation "
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

PUMPING
1. ☐ Not Required
2. ☒ May Be Required
3. ☐ Required >> Specify only for engineered or experimental systems:
DOSE: gallons

SITE EVALUATOR STATEMENT

I Certify that on 5/11/00 (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).

Vaughn L. Smith — Site Evaluator Signature
226 — SSE #
5/11/00 — Date
VAUGHN L. SMITH — Site Evaluator Name Printed
724-5635 — Telephone #

STATE OF MAINE VAUGHN L. SMITH #226 SITE EVALUATOR

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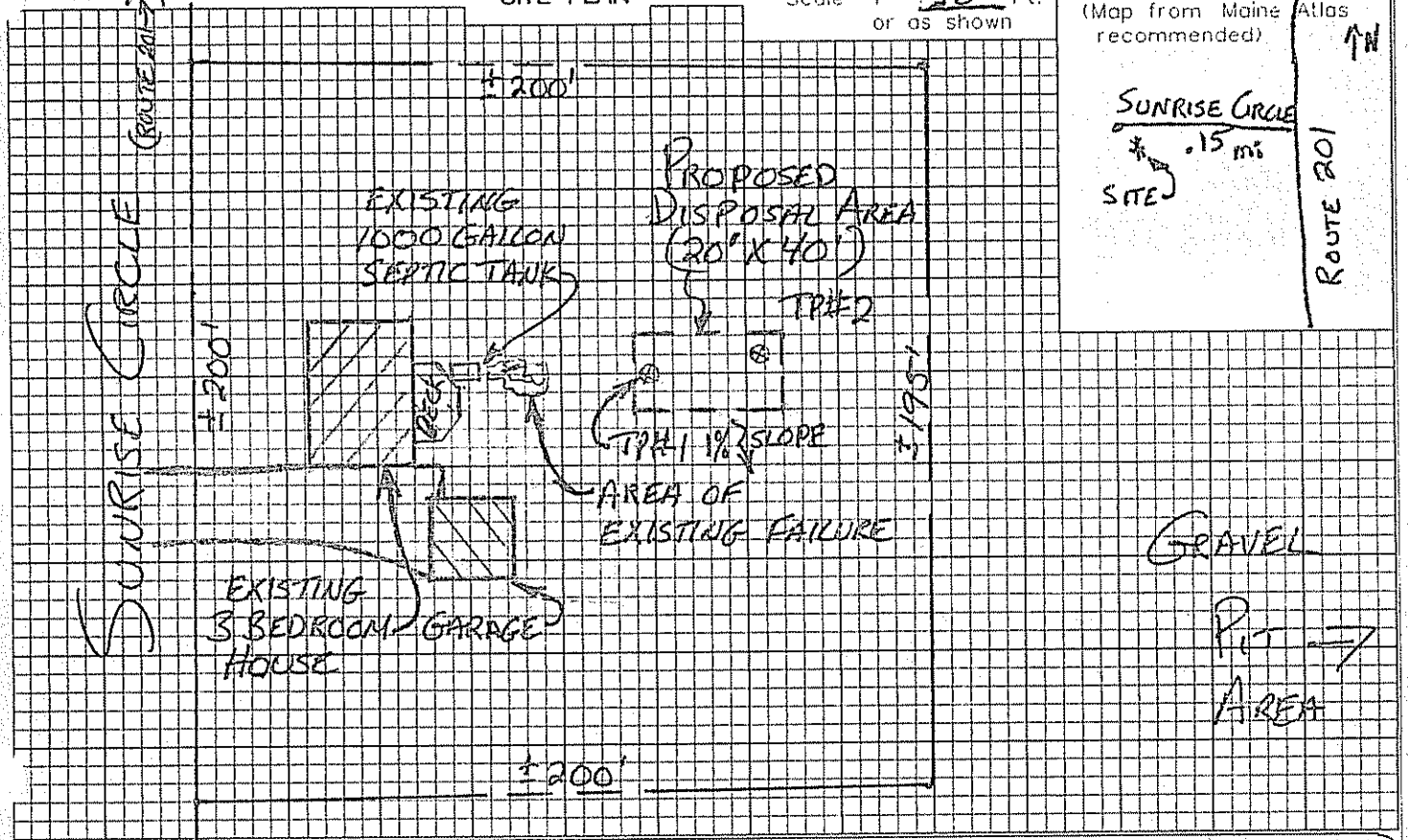
Town, City, Plantation: AUGUSTA
Street, Road Subdivision: 14 SUNRISE CIRCLE
Owner's Name: DEXTER BAKER

SITE PLAN

Scale 1" = 50 Ft. or as shown



SITE LOCATION PLAN

(Map from Maine Atlas recommended)

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

Observation Hole #1 ☒ Test Pit ☐ Boring

1" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	SANDY LOAM		PALE BROWN	
10	COARSE GRAVEL	LOOSE	LIGHT OLIVE BROWN	NONE
20	GRAVELLY SAND			
30				
40				
50				

Soil Classification: Profile	Condition	Slope	Limiting Factor	
6	B	1%	N/A	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 ☒ Test Pit ☐ Boring

1" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	LOAMY SAND			
10	COARSE GRAVEL	LOOSE	LIGHT OLIVE BROWN	NONE
20	GRAVELLY SAND		PALE OLIVE	
30				
40				

Soil Classification: Profile	Condition	Slope	Limiting Factor	
6	B	1%	N/A	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

STATE OF MAINE VAUGHN SMITH 226 LICENSED SITE EVALUATOR

Vaughn L. Smith
Site Evaluator Signature

SE 226

5/11/00
Date

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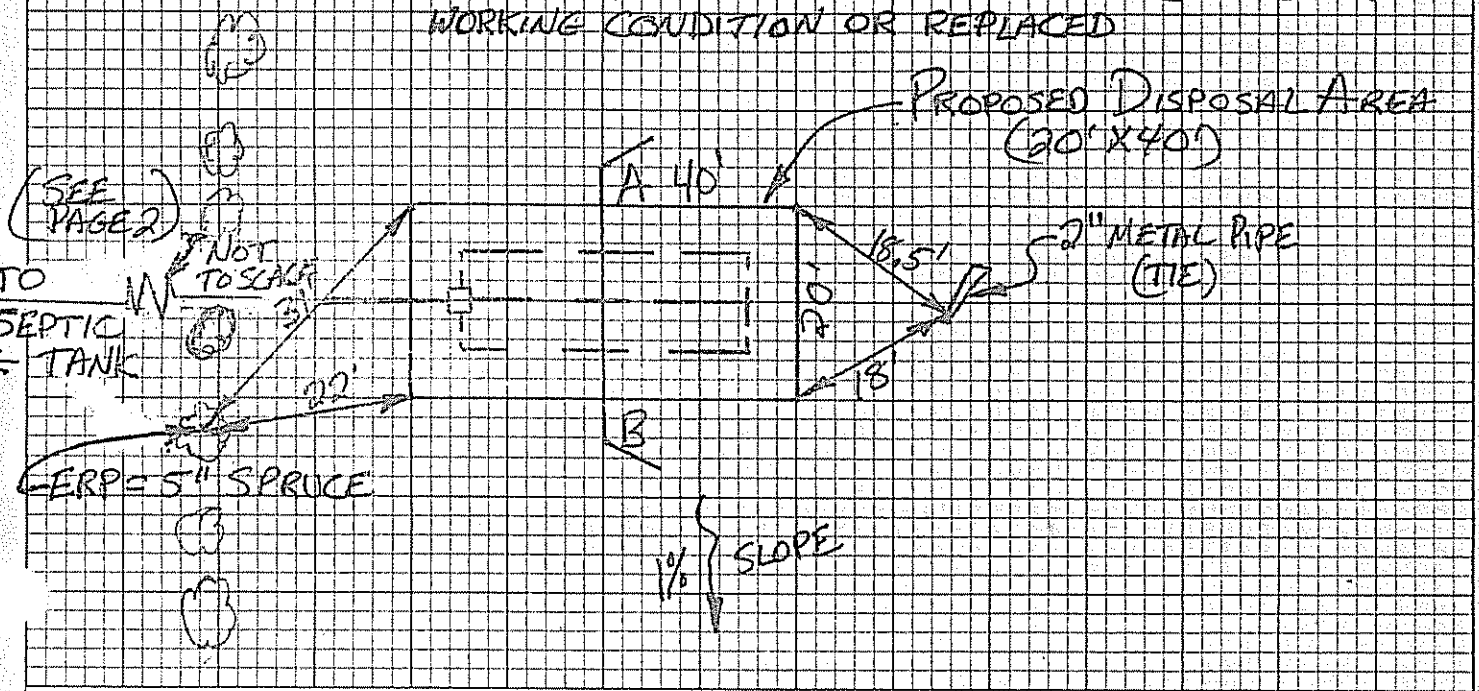
SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.

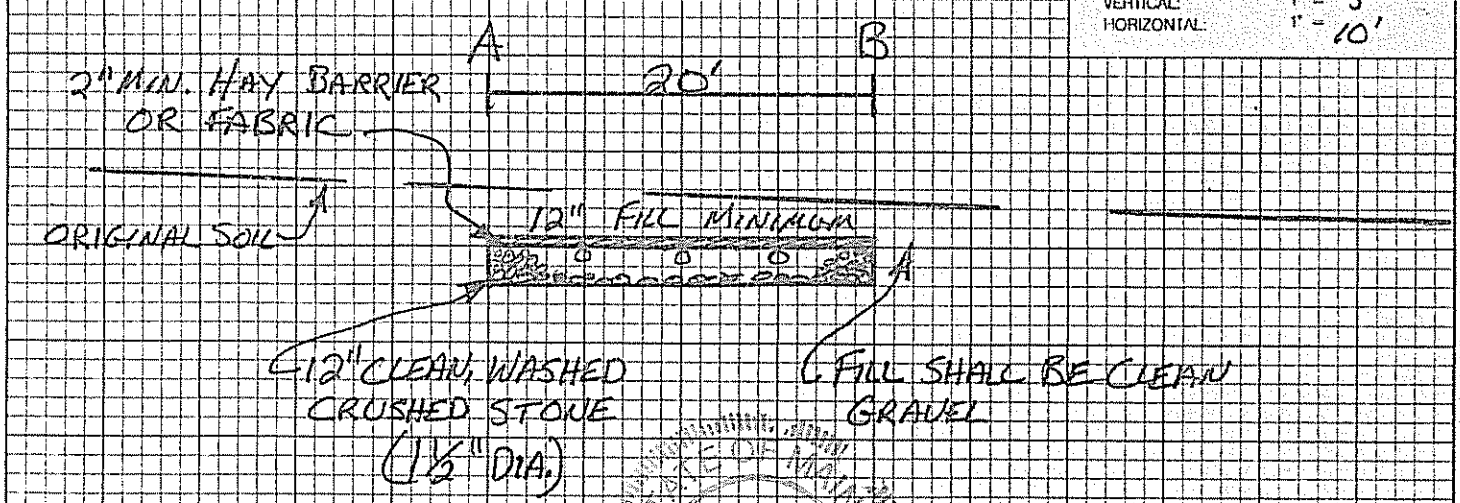
NOTES:
1. ALL TIES + ELEVATIONS SHALL BE CONFIRMED PRIOR TO CONSTRUCTION
2. SEPTIC TANK SHALL BE CHECKED TO BE IN GOOD WORKING CONDITION OR REPLACED



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	12"	Finished Grade Elevation	-64"	Location & Description	5" SPRUCE W/ NAIL 48" ABOVE GROUND
Depth of Fill (Downslope)	•	Top of Distribution Pipe or Proprietary Device	-76"		
		Bottom of Disposal Area	-88"	Reference Elevation	0"

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 10'



Vaughn L. Smith
Site Evaluator Signature

VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

5/11/00
Date