SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4173

PROPERTY LOCATION

City, Town, Plantation: AUGUSTA

Street or Road: 712 West River Rd. ROUTE 104

Subdivision, Lot #:

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

AUGUSTA 5251 TOWN COPY

Date Permit Issued: 13 30 04 $ 100 00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature: Gary R. Fuller L.P.I. # 1850

OWNER/APPLICANT INFORMATION

Name (last, first, MI): QUIRION CONSTRUCT Owner

Mailing Address of ☒ Owner ☐ Applicant: RFD#3 Box 93, AUGUSTA, ME 04330

Daytime Tel. #: #621-2785

Municipal Tax Map # 2 Lot # 47

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.

Paul Quirion 3/25/04
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.

Gary R. Fuller
Local Plumbing Inspector Signature

(1st) Date Approved 8/24/06
(2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☒ First Time System
2. ☐ Replacement System
   Type Replaced: ____
   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: ± 45 ☐ sq. ft. ☒ acres

SHORELAND ZONING: ☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE
1. ☐ Single Family Dwelling Unit, No. of Bedrooms: ____
2. ☐ Multiple Family Dwelling, No. of Units: ____
3. ☒ Other: REPAIR FACILITY - EMPLOYEES (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 1500 gallons

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 1350 ☒ 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: 520 gallons per day
BASED ON:
1. Table 501.1 (dwelling unit(s)
2. ☒ Table 501.2 (other facilities)
SHOW CALCULATIONS – for other facilities –
26 EMPLOYEES
x20 GPD/EMPLOYEE
520 GPD WITH SHOWERS
3. ☐ Section 503.0 (meter readings)
ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
5 / C /
at Observation Hole # 1
Depth 18 " 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 4/3/02 (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 — SE #
4/15/02 — Date
VAUGHN L. SMITH — Site Evaluator Name Printed
724-5635 — Telephone #

10 CMR 241 (June 1, 2000)

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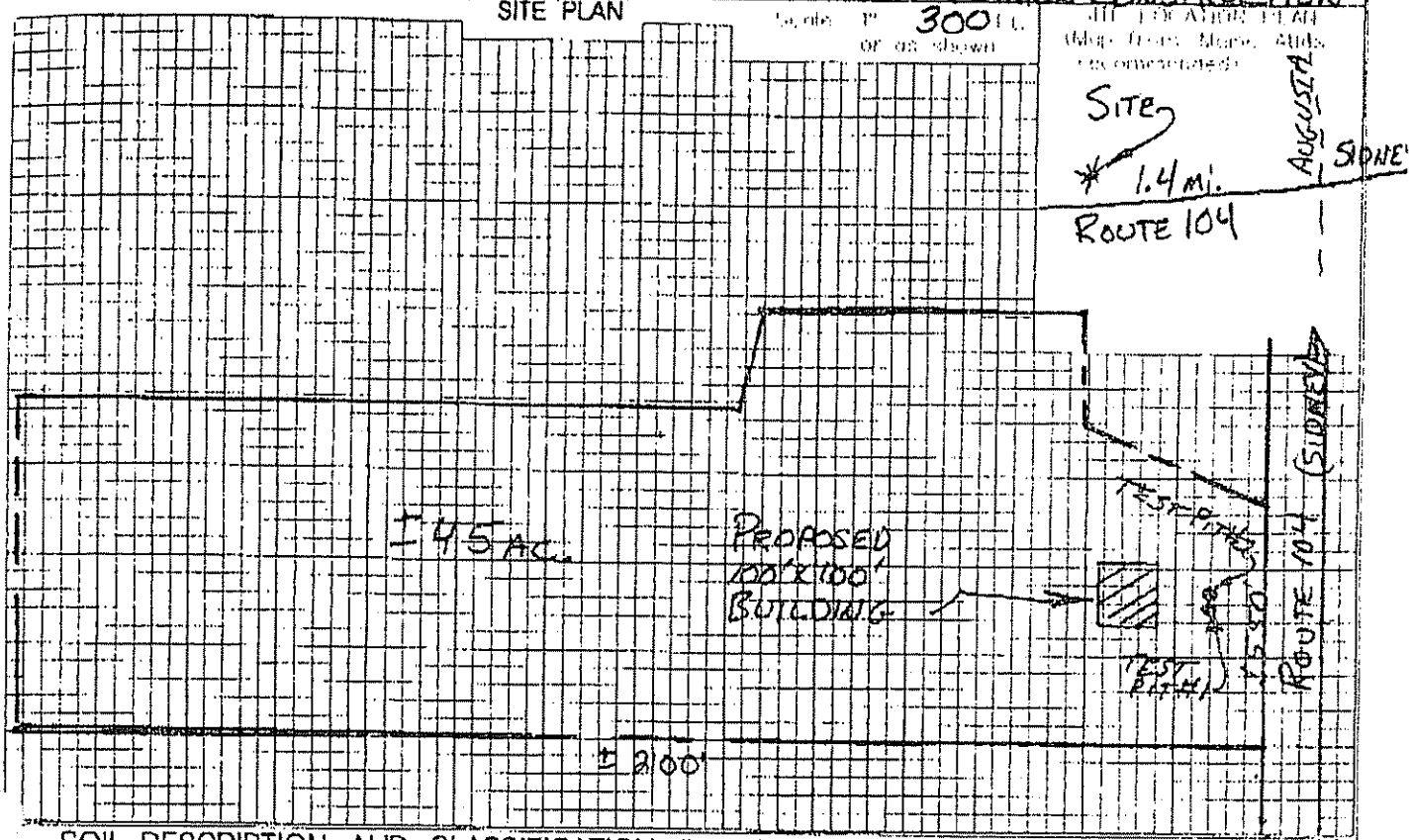
Town, City, Plantation: AUGUSTA | Street, Road, Subdivision: ROUTE 104 | Owner's Name: QUIRION CONSTRUCTION

SITE PLAN

Scale: 1" = 300 ft. or as shown



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
0–10	SANDY LOAM	FRIABLE	BROWNISH YELLOW	NONE
10–30	FINE SANE		LIGHT OLIVE BROWN	FEW FAINT
30–50				

Soil Classification: Profile 5, Condition C | Slope 2 | Limiting Factor 16" | ☒ 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
0–10	LOAMY FINE SAND	FRIABLE	BROWNISH YELLOW	NONE
10–30	FINE SAND		LIGHT OLIVE BROWN	FEW FAINT
30–50				

Soil Classification: Profile 5, Condition C | Slope 3 | Limiting Factor 19" | ☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Site Evaluator Signature: [signature] | SE #: 226 | Date: 4/15/02

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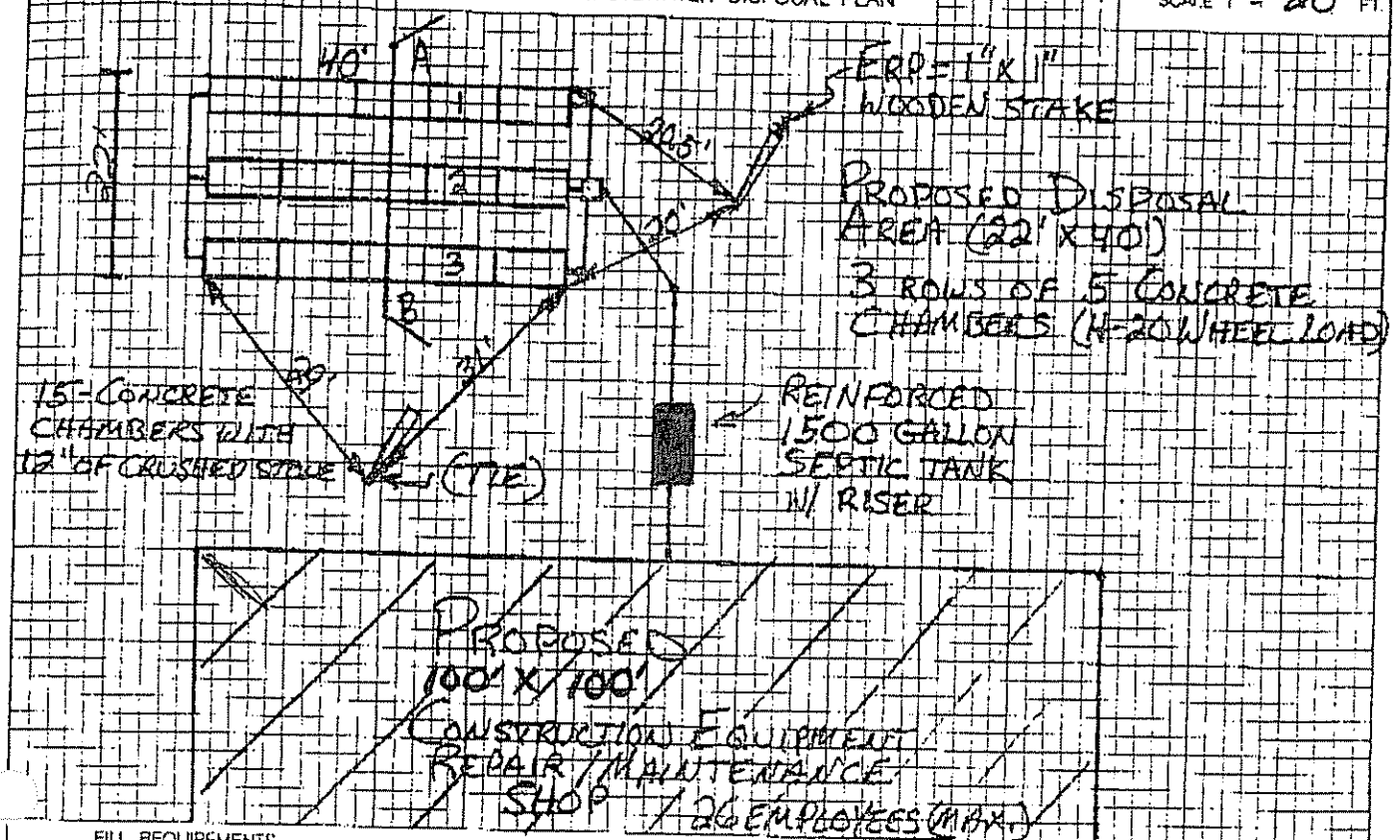
SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



FILL REQUIREMENTS

Depth of Fill (Upslope): 33"

Depth of Fill (Downslope): 44"

FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

Finished Grade Elevation: -14"

Top of Distribution Pipe or Proprietary Device: -26"

Bottom of Disposal Area: -38"

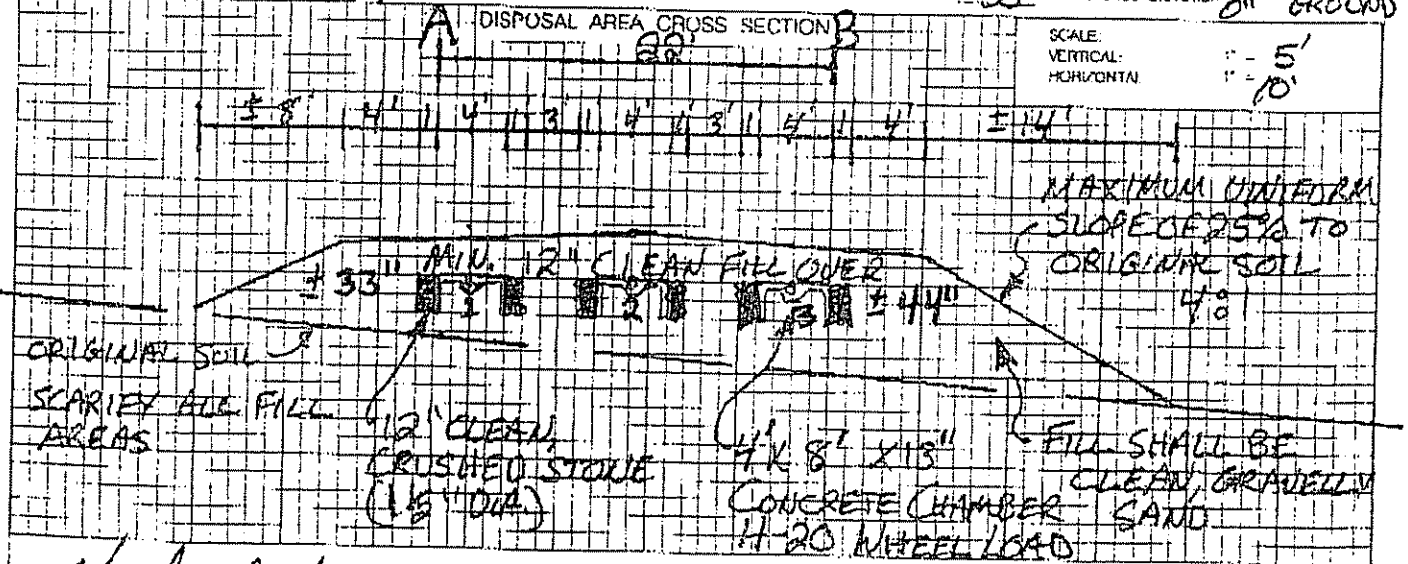
ELEVATION REFERENCE POINT

Location & Description: 1"x1" WOODEN STAKE W/NAIL 34" ABOVE GROUND

Reference Elevation: 0"

DISPOSAL AREA CROSS SECTION

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



Site Evaluator Signature: [signature]

SE #: 226

Date: 4/15/02