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

Street or Road: West RIVER RD.

Subdivision, Lot #:

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

AUGUSTA 4221 TOWN COPY

Date Permit Issued: 7 9 99

$ 100 FEE ☐ If Double Fee Charged

L.P.I. # 350

Local Plumbing Inspector Signature

OWNER/APPLICANT INFORMATION

Name (last, first, MI): DEARBORN, SHIRLEY A. (Owner / Applicant)

Mailing Address of ☑ Owner ☐ Applicant: RR#3 W. RIVER RD. AUGUSTA, ME. 04330

Daytime Tel. #:

Municipal Tax Map # 2 Lot # 104

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 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.

Local Plumbing Inspector Signature — (1st) Date Approved — (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
   ☐ 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

2± ☐ sq. ft. ☑ acres

SHORELAND ZONING

☐ Yes ☑ No

DISPOSAL SYSTEM TO SERVE

1. ☑ Single Family Dwelling Unit, No. of Bedrooms: 2
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 750 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 600 ☑ 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

180 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 3 CONDITION C DESIGN 1

at Observation Hole # 1

Depth 36 Elevation 24

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 7/7/99 (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).

Site Evaluator Signature — SE # 256 — Date 7/8/99

Site Evaluator Name Printed: JOHN PHILBRICK — Telephone # 547-3732

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

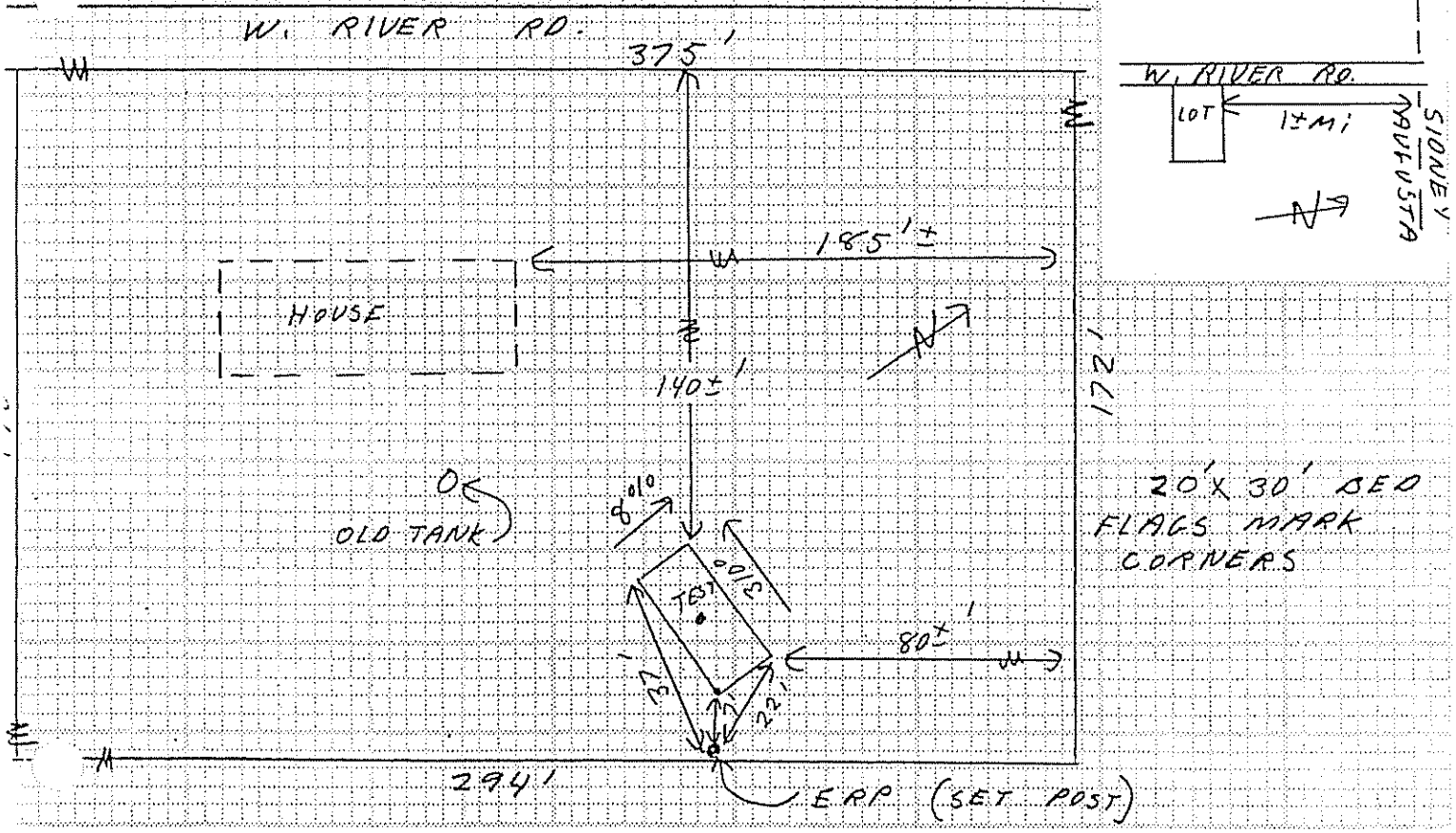
07089021

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
AUGUSTA	W. RIVER RD.	SHIRLEY A. DEARBORN

SITE PLAN

Scale: 1" = 50 ft. or as shown

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



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

Observation Hole 1 ☑ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0	SANDY	FRIABLE	DARK BR.	NONE
6	LOAM		YELLOW BR.	
10				
15				
20				
30		FIRM	GRAY	COMMON DISTINCT
40				
50				

Depth Below Mineral Surface

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	8 %	24"	☑ Ground Water ☑ Restr. Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Depth Below Mineral Surface

Soil Classification	Slope	Limiting Factor	
Profile / Condition	%		☐ Ground Water ☐ Restr. Layer ☐ Bedrock

Site Evaluator Signature

256
SE#

7/8/99
Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

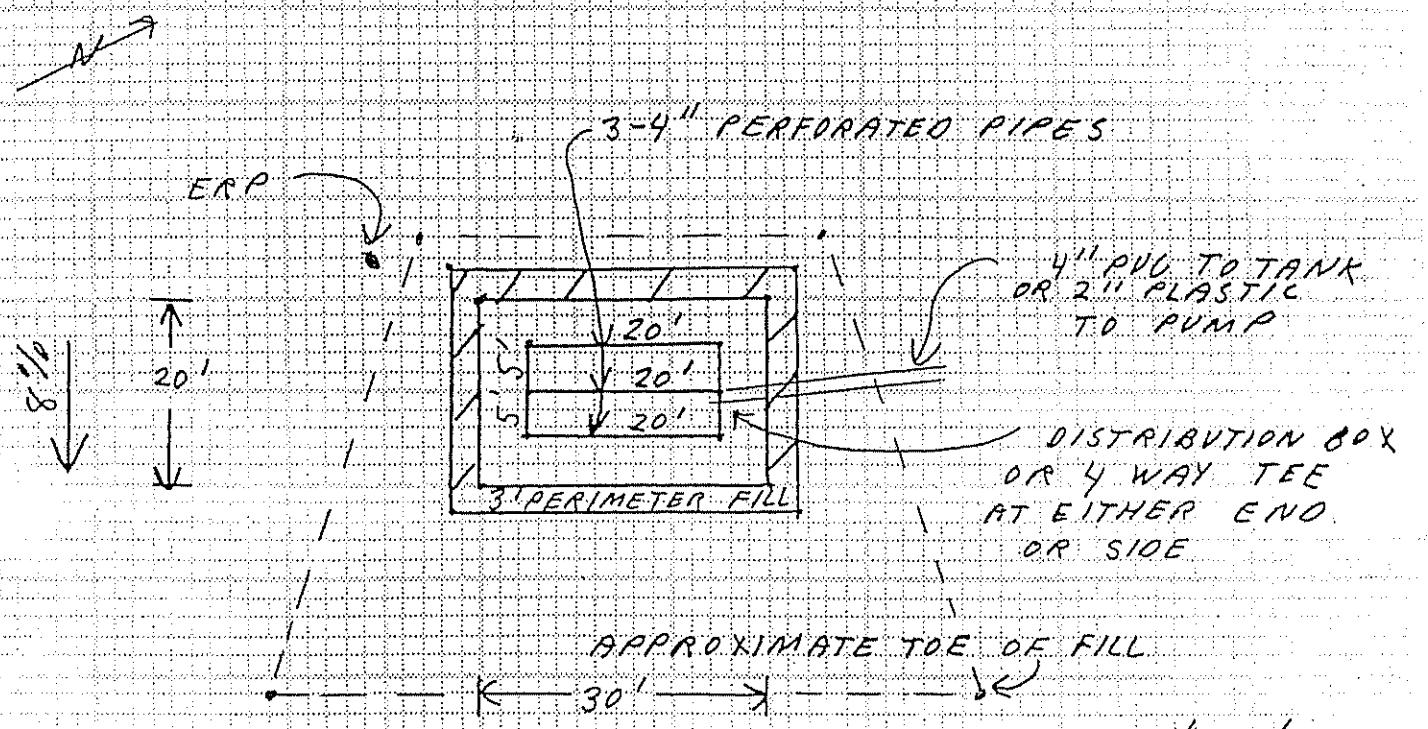
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

08116004

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
AUGUSTA	W. RIVER RD.	SHIRLEY A. DEARBORN

SUBSURFACE WASTEWATER DISPOSAL PLAN

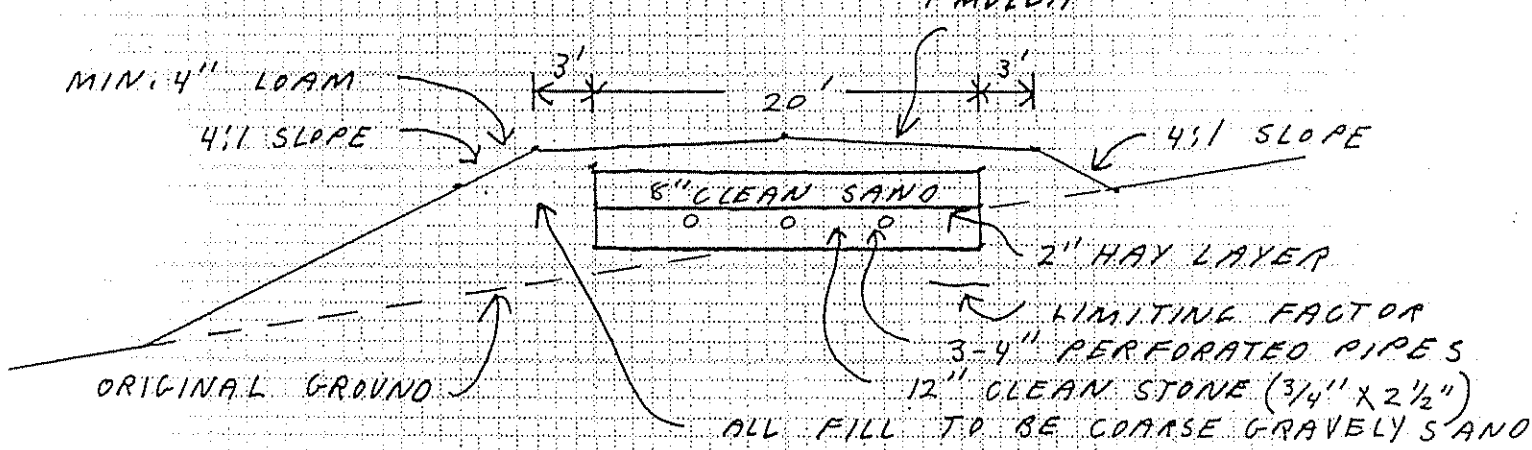
Scale: 1" = 20 Ft. or as shown



FILL REQUIREMENTS		CONSTRUCTION ELEVATION		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	12"	Reference Elevation is	0"	ERP IS TOP OF SET
Depth of Fill (Downslope)	31"	Bottom of Disposal Area	-58"	POST, 7' S/E OF SYSTEM,
		Top of Distribution Lines or Chambers	-47"	37" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

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



Site Evaluator Signature

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