SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

M2 L/60

AUGUSTA PERMIT # 242 TOWN COPY

Date Permit Issued: 6 14 84 $ 40 FEE ☐ If Double Fee Charged

Robert St Pierre
Local Plumbing Inspector Signature

L.P.I. # 1617

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	EIGHT ROD ROAD

PROPERTY OWNERS NAME

Last: DOSTIE First: GABRIEL

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	RFD# 3 BOX 899 AUGUSTA, ME. 04330

Owner/Applicant Statement

I certify that the Information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Gabriel Dostie — Signature of Owner/Applicant — June 12-84 — Date

Caution: Inspection Required

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

Robert St Pierre — Local Plumbing Inspector Signature — 7/8/84 — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☒ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE
   Attach New System Variance Form
   ☐ REPLACEMENT SYSTEM VARIANCE
   Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   4. ☐ Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS

COMPLETE SYSTEM

1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS: N/A

1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

DISPOSAL SYSTEM TO SERVE:

1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

SIZE OF PROPERTY: 1± Ac.

ZONING: RES.

TYPE OF WATER SUPPLY

Drilled WELL Proposed

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☐ Regular ☒ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

1. ☐ NONE
2. ☒ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

243 GPD
3 BEDROOMS
(-10% FOR LOW VOL. FLUSH)

DESIGN FLOW: 243 GPD (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
I	A

DEPTH TO LIMITING FACTOR: 32

SIZE RATINGS USED FOR DESIGN PURPOSES

1. ☐ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☒ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. ☒ BED 1000 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
   ☐ OTHER: _____

SITE EVALUATOR STATEMENT

☐ SITE EVALUATION WAIVED BY LOCAL OPTION

On 4/30/84 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Paul C. Beers — Site Evaluator or Professional Engineer's Signature — 5/1/84 — Date

STATE OF MAINE — PAUL C. BEERS — LICENSE NO. 65 — SOIL EVALUATOR

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

City

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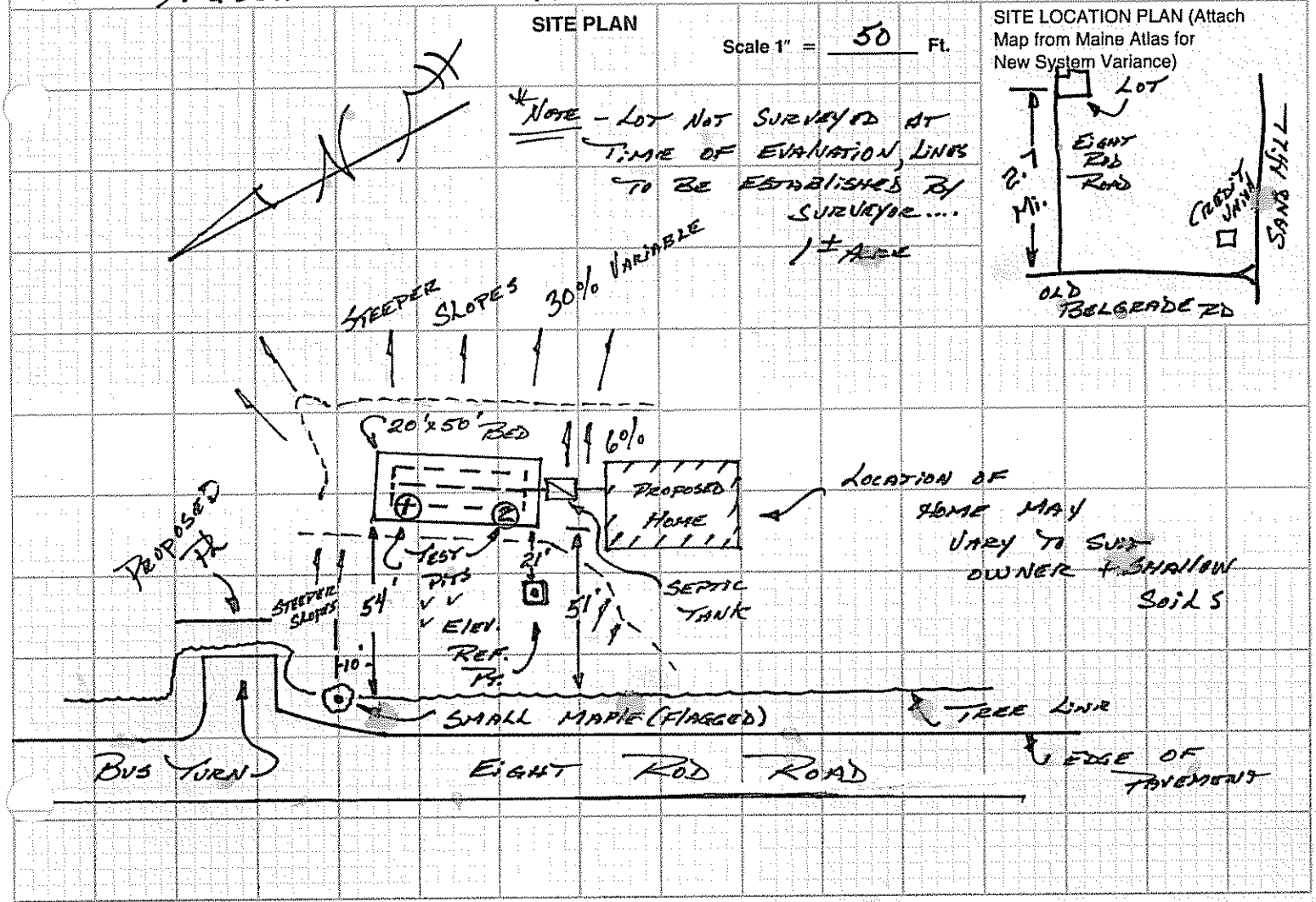
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	EIGHT ROD ROAD	GABRIEL DOSTIE

SITE PLAN

Scale 1" = 50 Ft.



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

2" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SILT LOAM	FRIABLE	DK. BROWN; REDDISH BROWN; OLIVE BROWN	FEW FAINT @ 22"
BEDROCK			

Soil Profile	Classification Condition	Slope	Limiting Factor	
1	C	6 %	22"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole (2) ☒ Test Pit ☐ Boring

2" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SILT LOAM	FRIABLE	DK. BROWN; REDDISH BROWN; OLIVE BROWN	N.E.
BEDROCK			

Soil Profile	Classification Condition	Slope	Limiting Factor	
1	A	6 %	32"	☐ Ground Water ☐ Restrictive Layer ☒ Bedrock

Paul C. Beers — Site Evaluator or Professional Engineer's Signature

#56 — SE# / PE#

5/1/84 — Date

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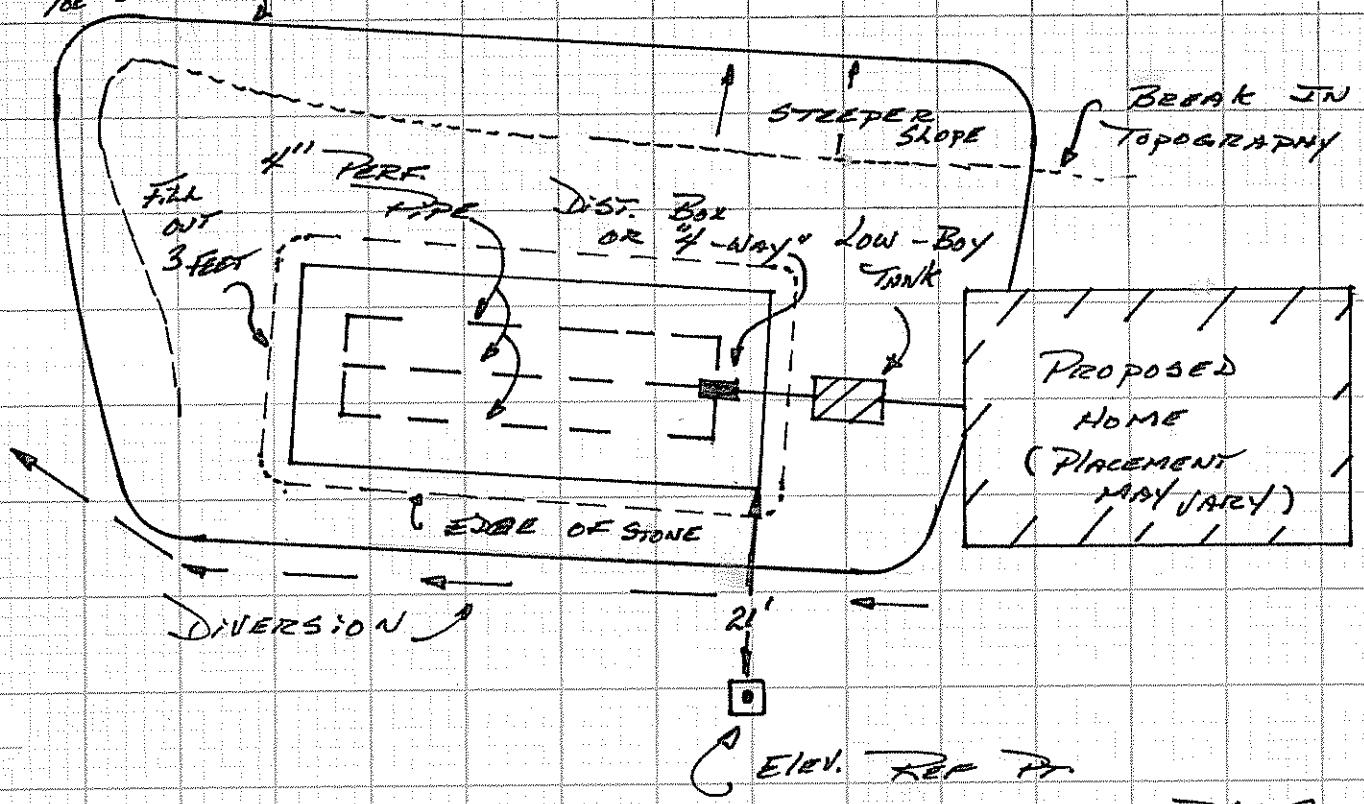
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

IMPORTANT NOTE: SLOPE IS VARIABLE IN SYSTEM AREA. DEPTHS OF FILL ON END OF BED AWAY FROM HOME WILL REQUIRE ADDITIONAL FILL THAN SHOWN ON X-SECT



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	18"	Reference Elevation is	60"	NAIL IN BASE OF PINE STUMP
Depth of Fill (Downslope) (VARIES)	32"	Bottom of Disposal Area	0"	
		Top of Distribution Lines or Chambers	11"	

DISPOSAL AREA CROSS SECTION

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

INSTALLATION NOTES:

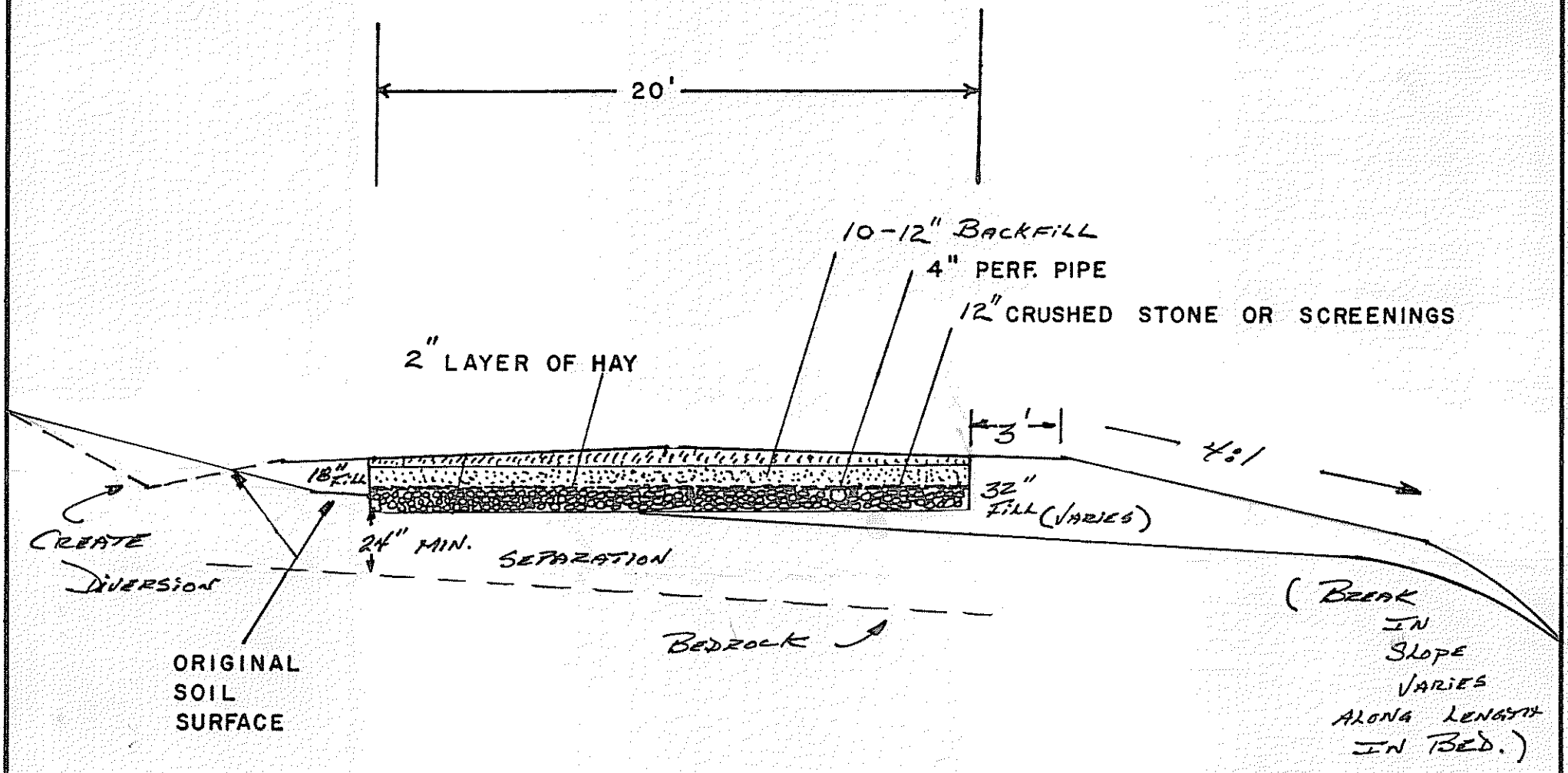
- REMOVE ORGANIC PAD BENEATH BED + FILL EXTENSIONS
- DIVERT SURFACE WATER AROUND DISPOSAL SYSTEM
- STABILIZE BED + FILL BY SEED + MULCH

{SEE ATTACHED SHEET FOR BED X-SECTION}

Paul A. Beers
Site Evaluator or Professional Engineer's Signature

#56
SE # / PE #

5/1/84
Date



% SLOPE 6% IN BED AREA

DIRECTION OF SLOPE →

PAUL A. BEERS SOILS CONSULTANT		
DATE 5/1/84	DRAWN BY Beers	APPROVED BY
SCALE 1" = 5'	REVISED	
CROSS SECTION = BED SYSTEM		
NAME GABRIEL DOSTIE		DRAWING NUMBER ATTACHMENT TO: HF 200
TOWN AUGUSTA		