2.2 miles

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

New Dwelling ON RT

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

M2 L163

AUGUSTA PERMIT # 448 ✓ TOWN COPY

Date Permit Issued: 5/10/85 $ 40.00 FEE ☐ If Double Fee Charged

Randall D. Guy — Local Plumbing Inspector Signature — L.P.I. # 759

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Eight Rod Road

PROPERTY OWNERS NAME

Last: Figoli First: Bruce

Applicant Name:	P.O. Box 5204
Mailing Address of Owner/Applicant (If Different)	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.

Signature of Owner/Applicant — Date

Caution: Inspection Required

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

Randall D. Guy — Local Plumbing Inspector Signature — 5/15/85 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. ☐ Requiring Local Plumbing Inspector Approval
4. ☐ Requires 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	ZONING
35± A.	yes

TYPE OF WATER SUPPLY

exist spring on property

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.)

3- Bedroom or less.

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
7	C

DEPTH TO LIMITING FACTOR: 24

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

1. ☒ BED 900 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

20' X 45'

SITE EVALUATOR STATEMENT

(☐ SITE EVALUATION WAIVED BY LOCAL OPTION)

On April 10, 1984 (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.

Stephen E. Goodwin — Site Evaluator Signature — 65 SE# — 4/21/84 Date

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

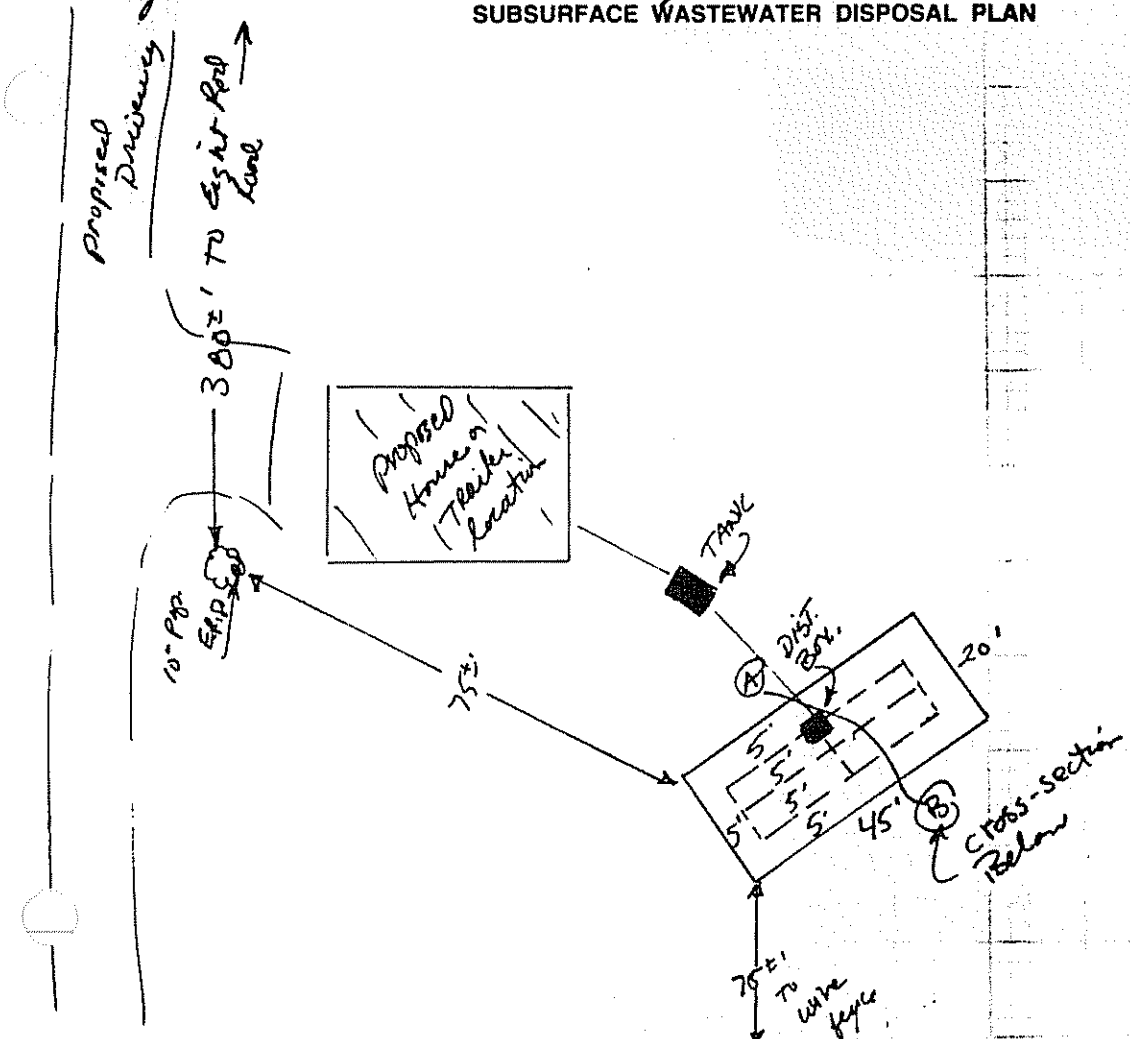
Town, City, Plantation: Augusta

Street, Road, Subdivision: Eight Rod Road

Owners Name: Bruce Fegoli

SUBSURFACE WASTEWATER DISPOSAL PLAN

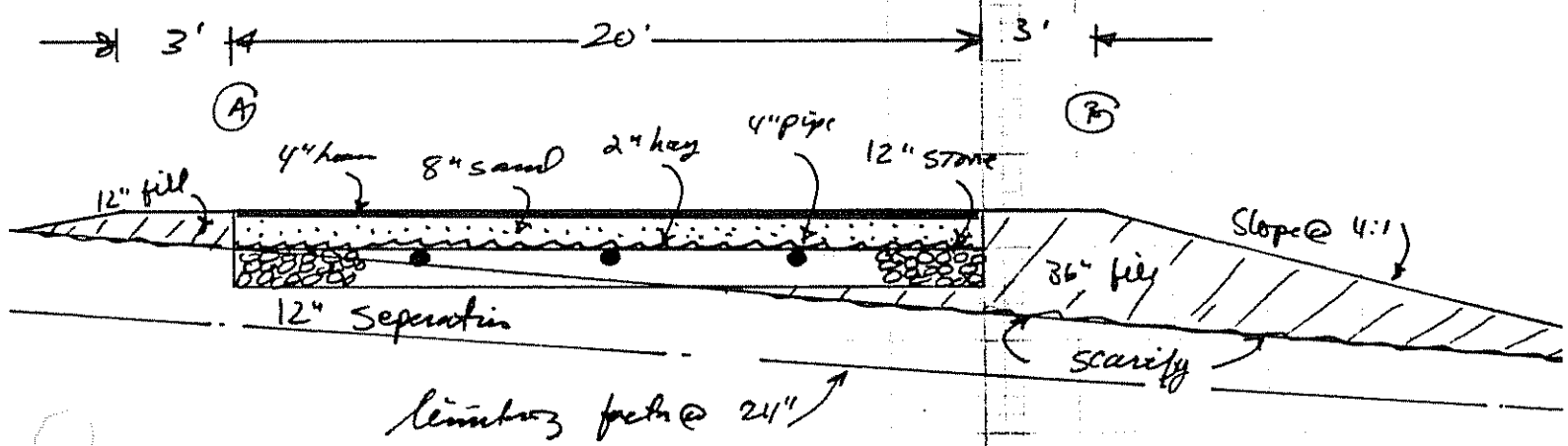
Scale 1" = 30 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	12"	Reference Elevation is	Marlin Tree	Marlin 10" Poplar Tree =
Depth of Fill (Downslope)	36"	Bottom of Disposal Area	48" Below	Finished grade 24" Below wall
		Top of Distribution Lines or Chambers	36" "	

DISPOSAL AREA CROSS SECTION

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



Stephen E. Gordemin
Site Evaluator Signature

65
SE#

4/21/84
Date

HHE-200 Rev. 1/84

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: Augusta

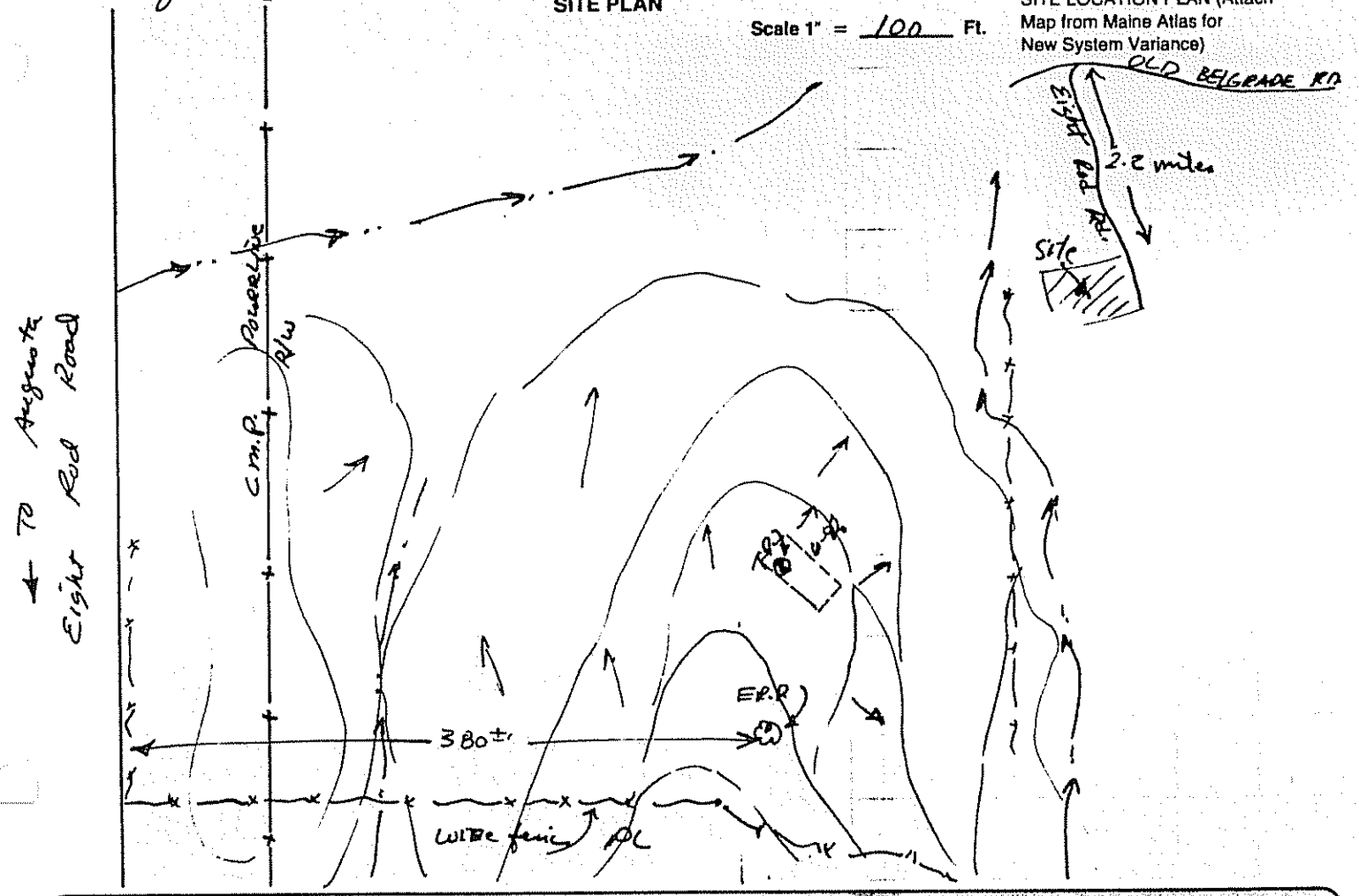
Street, Road, Subdivision: Eight Rod Road

Owners Name: Bruce Figoli

SITE PLAN

Scale 1" = 100 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 _____ ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	loam		Brown	
6				
10	Sand		Reddish	
15		friable	yellowish Brown	
20				mottling
30	silty clay	S.w. firm	olive gray	
40				
50				

Soil	Classification	Slope	Limiting Factor	
7 (Profile)	C (Condition)	6-8 %	24 "	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Stephen E. Goodwin
Site Evaluator Signature

65
SE#

4/21/84
Date

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