TOWN

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS	
Town Or Plantation	AUGUSTA
Street Subdivision Lot #	1054 EIGHT ROD ROAD
PROPERTY OWNERS NAME	
Last: VEILLEUX First: MICHAEL	
Applicant Name:	SAME
Mailing Address of Owner/Applicant (If Different)	Box 1054 EIGHT ROD ROAD, AUGUSTA 04330

AUGUSTA Caution: Permit #1945 TOWN COPY
Subsurface Wastewater Disposal System
Date Permit Issued 8 20 90 $ 40.00 FEE ☐ If Double Fee Charged
Local Plumbing Inspector Signature L.P.I. # 850

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.

Lisa Ann Veilleux — Signature of Owner/Applicant — Date 8-13-90

Caution: Inspection Required

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

Local Plumbing Inspector Signature — Date Approved 10/5/90

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☒ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY	ZONING
1.02 AC	RURAL

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
a. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☒ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

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 _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
TO BE DRILLED

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC
SIZE: 1,000 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

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
8	C

DEPTH TO LIMITING FACTOR: 18

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☒ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 1125 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 7/31/90 (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.

Joshua [illegible] — Site Evaluator Signature — SE# 255 — Date 8/9/90

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

Monday babe

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA

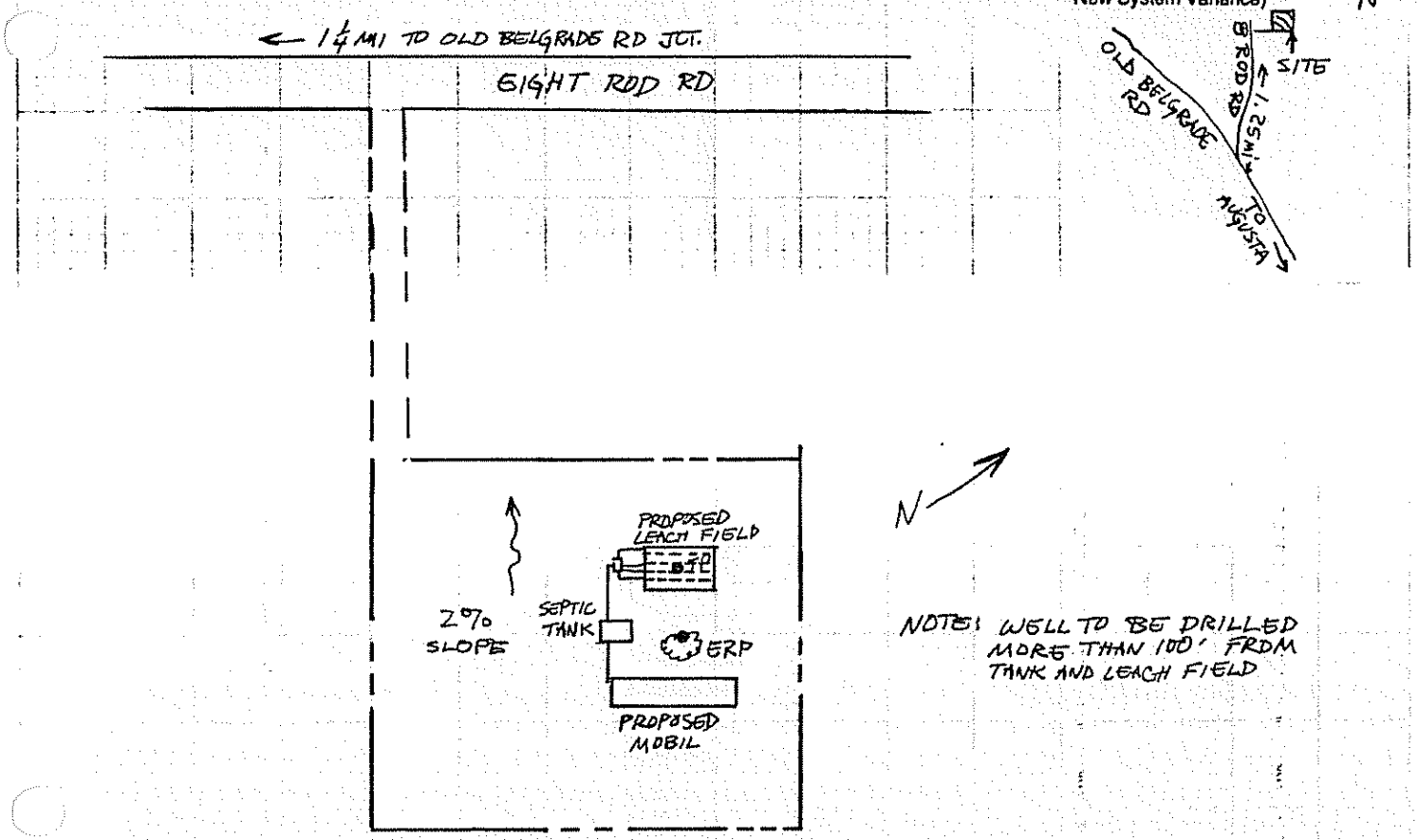
Street, Road, Subdivision: EIGHT ROD ROAD

Owners Name: MICHAEL VEILLEUX

SITE PLAN

Scale 1" = ±100 FL

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



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

Observation Hole TP 1 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	F. SANDY LOAM	LOOSE	M BRN	
6				
10	LOAMY SAND		LT REDDISH BROWN	
15				
20	F. SANDY SILT	FIRM	OLIVE	NONE
30				
40				
50		BOH		

Soil	Classification	Slope	Limiting Factor	
8 (Profile)	C (Condition)	2 %	18	☐ 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

Site Evaluator Signature

255
SE#

8/9/90
Date

HHE-200 Rev. 1/84

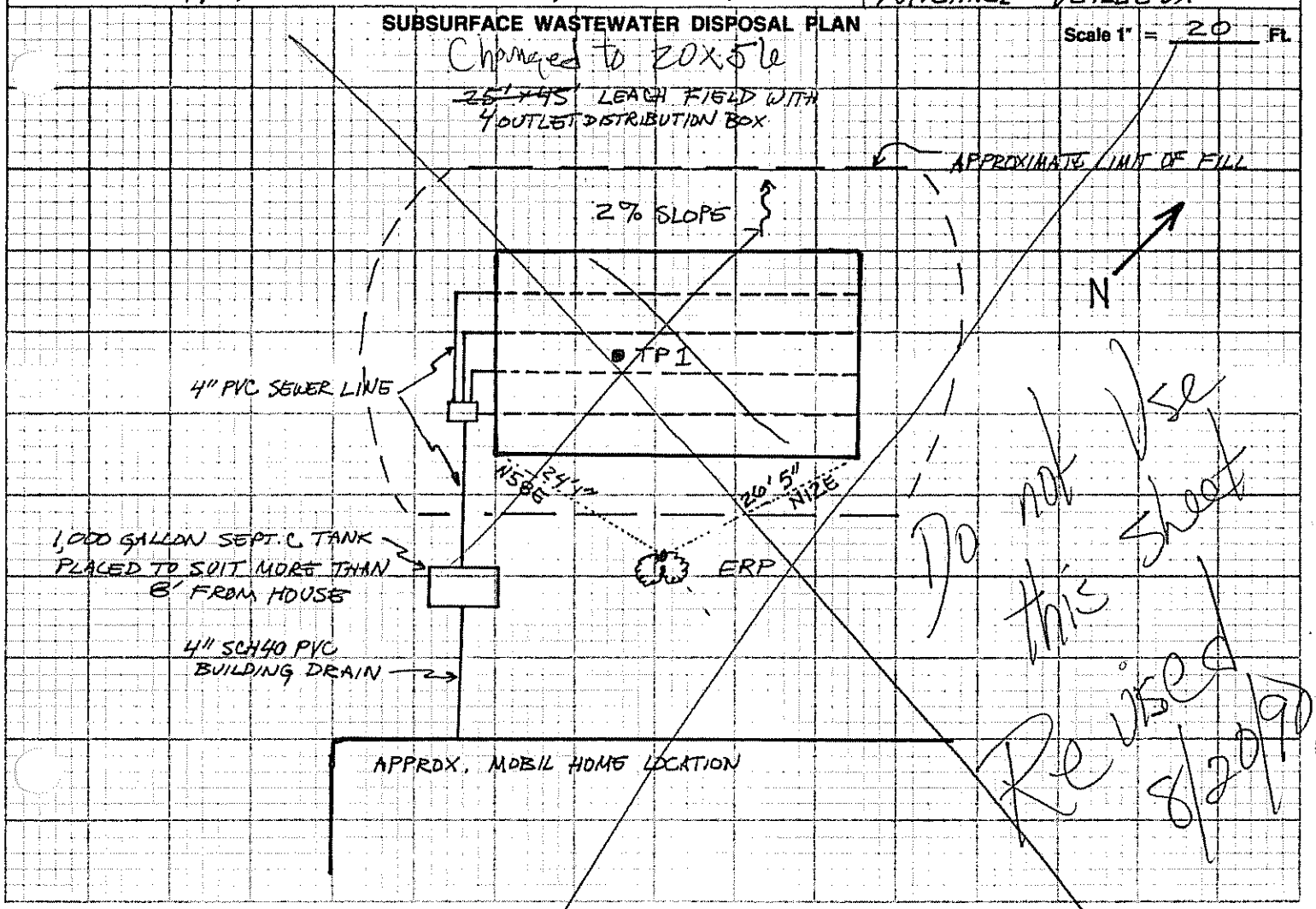
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	EIGHT ROD ROAD	MICHAEL VEILLEUX

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



Do not Use this Sheet
Revised 8/2/91

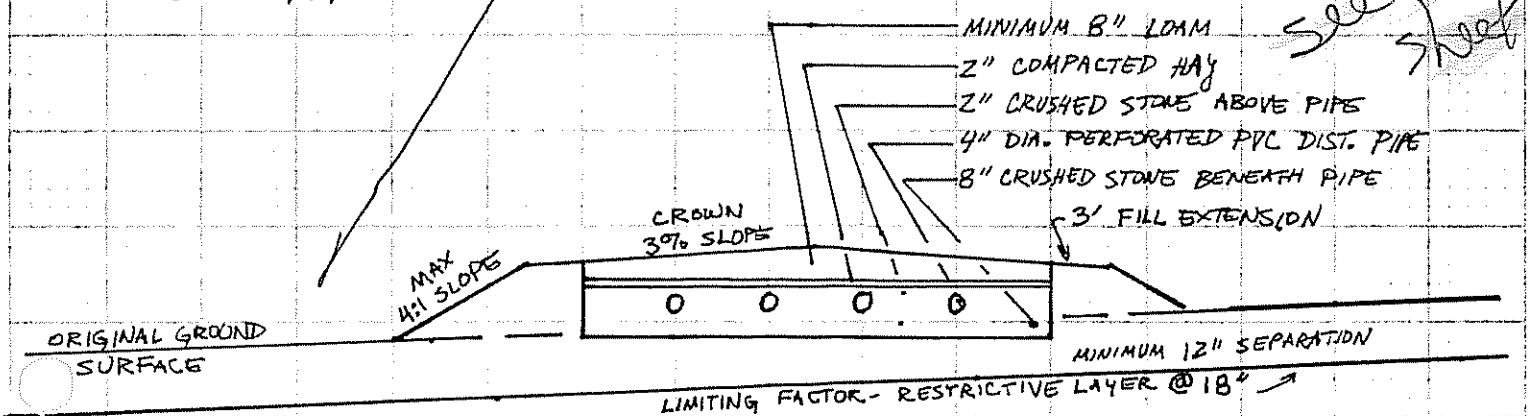
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	18"	Reference Elevation is	0.0	NAIL FLAGGED WHITE IN 6" DBH MAPLE 24" ABOVE GRND
Depth of Fill (Downslope)	23"	Bottom of Disposal Area	(-) 33.0	
		Top of Distribution Lines or Chambers	(-) 21.0	

NOTES
- RENDER VEGETATION + SCARIFY SOIL BENEATH ALL FILL AREAS
- USE CLEAN 3/4" TO 3" DIA CRUSHED STONE OR ROCK
- PLACE CLEAN SANDY LOAM FILL IN COMPACTED 8" LIFTS

DISPOSAL AREA CROSS SECTION

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

See next sheet



Joshua Kg
Site Evaluator Signature

255
SE#

Date

HHE-200 Rev. 1/84

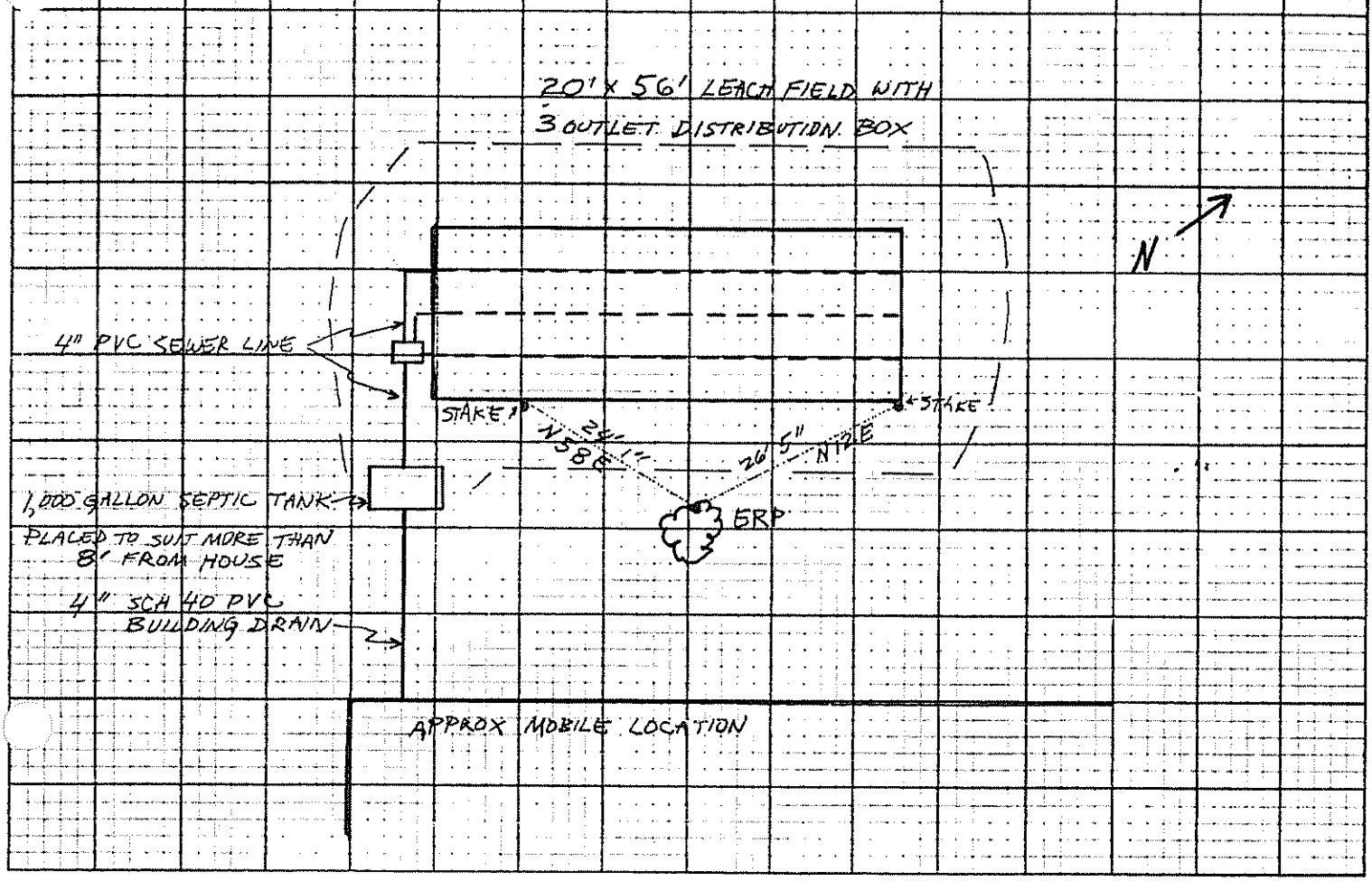
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	EIGHT ROD RD	MICHAEL VEILLEUX

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 18"
Depth of Fill (Downslope) 23"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0.0
Bottom of Disposal Area (-) 33.0
Top of Distribution Lines or Chambers (-) 21.0

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL FLAGGED WHITE
6" DBH MAPLE
24" ABOVE GROUND

NOTES -
- REMOVE VEGETATION + SCARIFY SOIL BENEATH ALL FILL AREAS
- USE CLEAN 3/4" TO 3" DIA. CRUSHED ROCK OR STONE
- PLACE CLEAN SANDY LOAM FILL IN COMPACTED 8" LIFTS

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 Ft.
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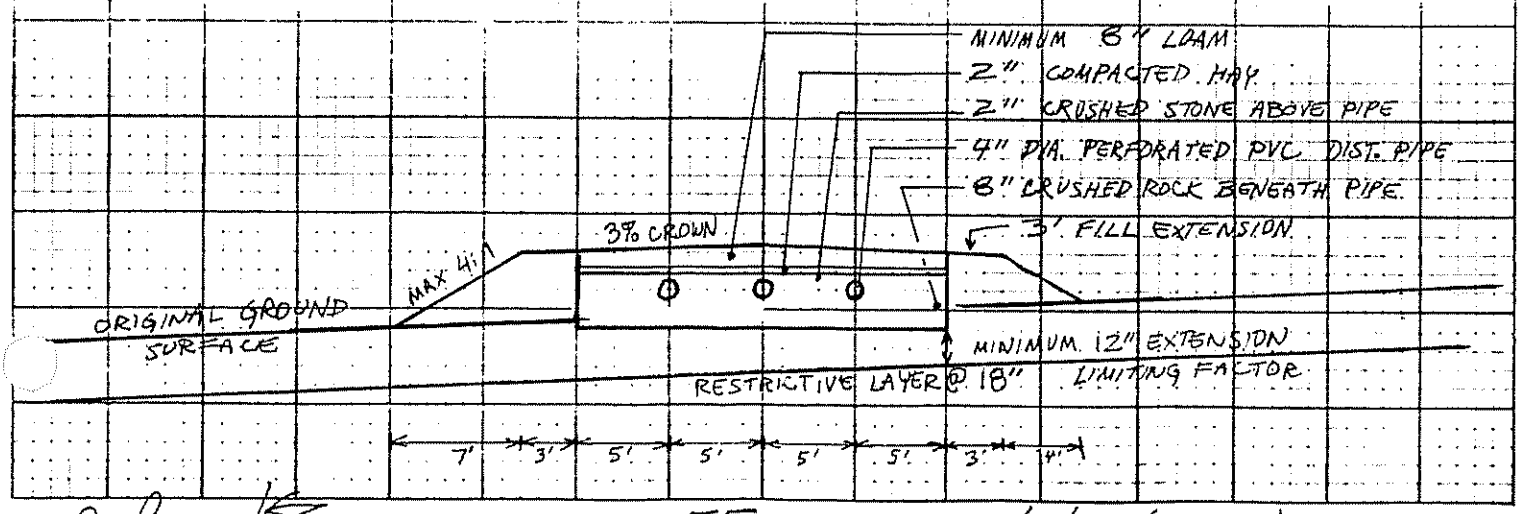

Joshua [illegible]
Site Evaluator Signature

255
SE#

8/16/90 (REVISION)
Date

HHE-200 Rev 1/84

RECEIVED
AUG 2 0 1990

LETTER OF TRANSMITTAL

Timson, Schepps & Peters, Inc.
☐ 103 Water Street, Suite 202
Hallowell, Maine 04347
(207) 623-0053

☐ 75 Pearl Street
Portland, Maine 04101
(207) 773-7073

DATE	CLIENT CODE:
8/16/90	SEVEILL

ATTENTION

RE: Michael Veilleux
Septic System Design

TO Gary Fuller
CODE ENFORCEMENT OFFICE
16 CONY ST. AUGUSTA, ME 04333

WE ARE SENDING YOU ☐ Attached ☐ Under separate cover via _____ the following items:

☐ Applications ☐ Prints ☒ Plans ☐ Report ☐ Specifications

☐ Copy of letter ☐ Memorandum ☐ _____

COPIES	DATE	NO.	DESCRIPTION
3	8/16/90		Revised page 3 of HHE-200 Showing 20 x 56' leach field

THESE ARE TRANSMITTED as checked below:

☐ For approval ☐ Approved as submitted ☐ Resubmit _____ copies for approval

☐ For your use ☐ Approved as noted ☐ Submit _____ copies for distribution

☒ As requested ☐ Returned for corrections ☐ Return _____ corrected prints

☐ For review and comment ☐ _____

REMARKS

Please do not hesitate to phone if I can be of further assistance.

REPLY

Josh Katz

JOSH KATZ SE #255

COPY TO _____ SIGNED: _____

If enclosures are not as noted, kindly notify us at once.