

Dulac

MAINE DEPARTMENT OF HUMAN SERVICES APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT		This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit.		Page 1 of 2
Town <i>Augusta</i>	Street, Road, etc. <i>Eight Rod Road</i> If on water body, give name	Plumbing Permit No. <i>22153M</i>	Date of Plumbing Permit <i>5-5-77</i>	
Owner of property <i>Gil Dulac</i>		Owner's address <i>Eight Rod Road</i>		Size of lot <i>8±</i> <input type="radio"/> Sq. feet <input type="radio"/> Acres
Name & type of establishment if other than private home		Is lot Zoned? <input type="radio"/> Yes <input checked="" type="radio"/> No	Type of Zoning <input type="radio"/> Shoreland <input type="radio"/> Resource Protection	
Name of applicant Owner's agent <i>Gil Dulac</i>		If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="radio"/> Deed restriction for private sewage disposal <input type="radio"/> Copy of the subdivision's soils report <input type="radio"/> Soils report from a State Agency		
Applicant's address Street, Box, etc. <i>Eight Rod Road</i>		Tel. No. <i>632-7605</i>		Subdivision name <i>N/A</i>
Town <i>Augusta</i>	Zip Code <i>04330</i>	Date <i>5-5-77</i>		
Applicant's signature <i>X Dulac</i>		Date <i>5-5-77</i>		Lot No. <i>N/A</i>
This application is for: <input checked="" type="radio"/> New System <input type="radio"/> Expanded System <input type="radio"/> Replacement System <input type="radio"/> Treatment Tank Only <input type="radio"/> Disposal Area Only				
The water supply for this property is: <input checked="" type="radio"/> Bdg well, depth <i>Common</i> lining _____; <input type="radio"/> Drilled well, depth _____, lining _____; Spring <input type="radio"/> _____ depth _____, lining _____; Surface water <input type="radio"/> Body, <input type="radio"/> Course— <input type="radio"/> with disinfection, <input type="radio"/> without disinfection. <input type="radio"/> Public Utility, name _____				

SITE INVESTIGATION							
Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II.							
Thickness and Description of each soil	Soil Profile No. 1		Soil Profile No.		Soil Profile No.		
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	
Organic strata	Inches <i>1</i>	Organic strata	Inches	Organic strata	Inches	Organic strata	Inches
1st strata <i>Dark Brown 5" 20 L</i>	Inches <i>5 1/2</i>	1st strata	Inches	1st strata	Inches	1st strata	Inches
2nd strata <i>Light Brown 17" 5 M</i>	Inches <i>12 1/2</i>	2nd strata	Inches	2nd strata	Inches	2nd strata	Inches
3rd strata <i>Light Sand 20" 5 M</i>	Inches <i>0 1/2</i>	3rd strata	Inches	3rd strata	Inches	3rd strata	Inches
Total Depth of observation hole Inches <i>54</i>		Total Depth of observation hole Inches		Total Depth of observation hole Inches		Total Depth of observation hole Inches	
Max. Ground water table—mottling <i>27</i> Inches		Max. Ground water table—mottling _____ Inches		Max. Ground water table—mottling _____ Inches		Max. Ground water table—mottling _____ Inches	
Impervious layer, clay, etc. <i>40</i> Inches		Impervious layer, clay, etc. _____ Inches		Impervious layer, clay, etc. _____ Inches		Impervious layer, clay, etc. _____ Inches	
Bedrock <i>None Evident</i>		Bedrock <i>None Evident</i>		Bedrock <i>None Evident</i>		Bedrock <i>None Evident</i>	
Surface slope <i>10% 3%</i>		Surface slope _____ %		Surface slope _____ %		Surface slope _____ %	
Soil Group & Condition per Table 9-1 of the Code, II <i>7C</i>		Soil Group & Condition per Table 9-1 of the Code, II		Soil Group & Condition per Table 9-1 of the Code, II		Soil Group & Condition per Table 9-1 of the Code, II	

On *4-28-77* (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature *Richard P. Baker* Health Engineering License No. *79*

Date signed *4-29-77*

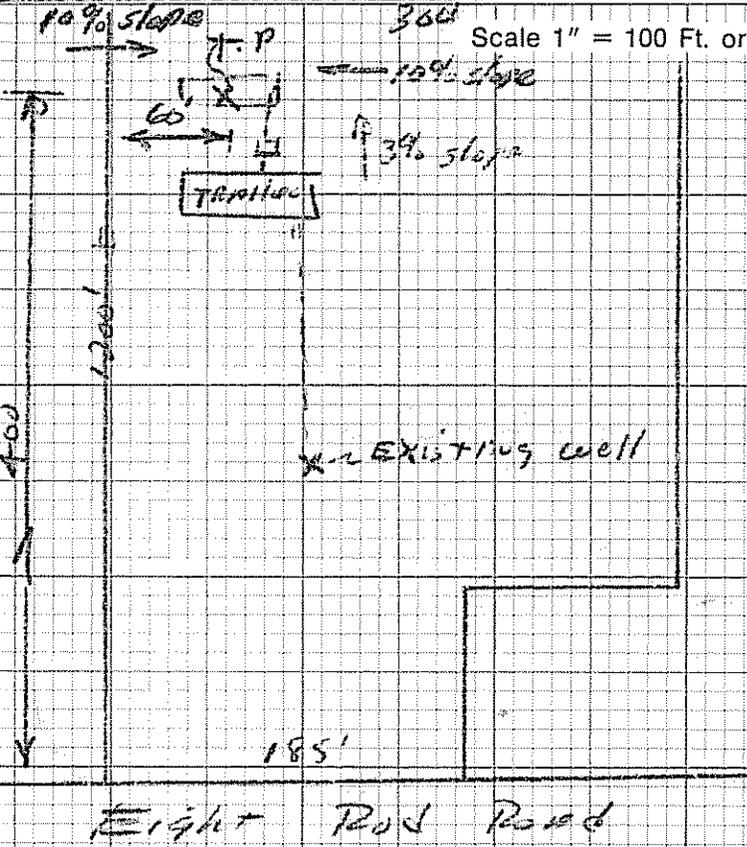
PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED			
Show location of system and details on sketches on page 2, and refer to completed sample form			
SYSTEM: <input checked="" type="radio"/> COMBINED SYSTEM <input type="radio"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Incinerator Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Other, describe _____ See Chapter 9 of the Code, II.	TREATMENT TANK: <input checked="" type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Size in gallons <i>1000</i> <input type="radio"/> Aerobic Tank Manufacturer— Model No. Size in gallons	SUBSURFACE ABSORPTION AREA	
		Type <input type="radio"/> Trench System; Total trench length <i>N/A</i> <input type="radio"/> Bed System Length <i>50</i> Width <i>20</i> <input type="radio"/> Chamber System Number _____ <input type="radio"/> Type A <input type="radio"/> Single File <input type="radio"/> Type B <input type="radio"/> Cluster <input type="radio"/> Mound System Length _____ Width <i>N/A</i> at base <input type="radio"/> Special System Length _____ Width <i>N/A</i> WAIVER <input type="radio"/> Required <input checked="" type="radio"/> Not Required	

PROPERTY/LOT LOCATION MAP Location—roads, landmarks	FOR THE USE OF LPI ONLY <input type="radio"/> Denial: Application is denied for following reasons; portions of the Code II are cited. Form is incomplete (_____ pg.) as to <input type="radio"/> General info, <input type="radio"/> Site Investigation, <input type="radio"/> System Proposed, <input type="radio"/> Site Plan, <input type="radio"/> Disposal System Plan, <input type="radio"/> Cross-Section, <input type="radio"/> Statement. See Section 2.3. <input type="radio"/> Site Investigation indicates site is <input type="radio"/> totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10. <input type="radio"/> Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1. <input type="radio"/> System Proposed does not conform to Code; See Sections 9. _____ <input type="radio"/> Site Investigation indicates site modifications are necessary; See Sections <input type="radio"/> 4.3, <input type="radio"/> 4.4, <input type="radio"/> 4.6, <input type="radio"/> 8.7, <input type="radio"/> _____ <input type="radio"/> Miscellaneous _____ See Section _____ <input checked="" type="radio"/> Acceptance: Application for permit is approved <input type="radio"/> with condition specified, comply with Section _____ <input type="radio"/> without condition.
	Signed LPI <i>Richard P. Baker</i> Date <i>5-5-77</i> HHE - 200 1/77

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

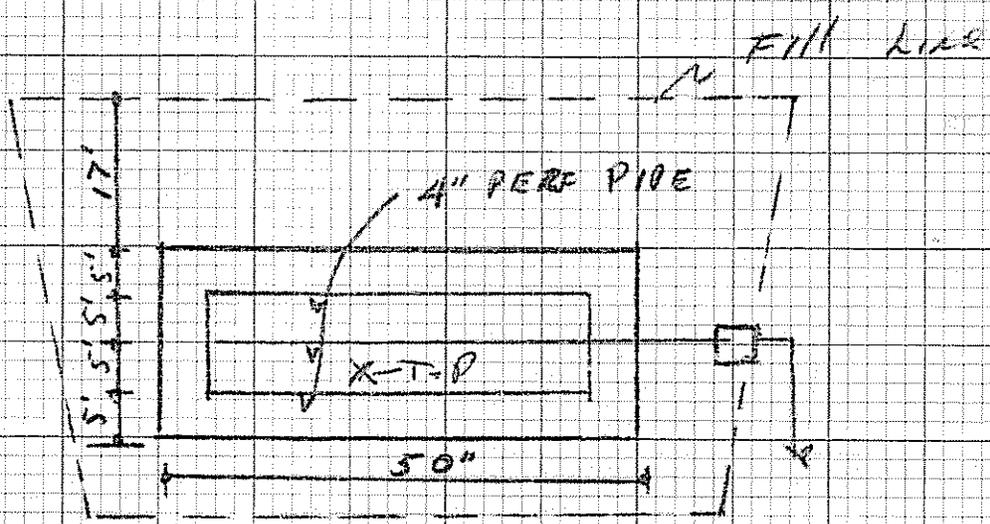
Town Augusta	Street, Road, etc. Eight Rod Road If on water body, give name	Owner of property Gil Dulac
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Site Plan



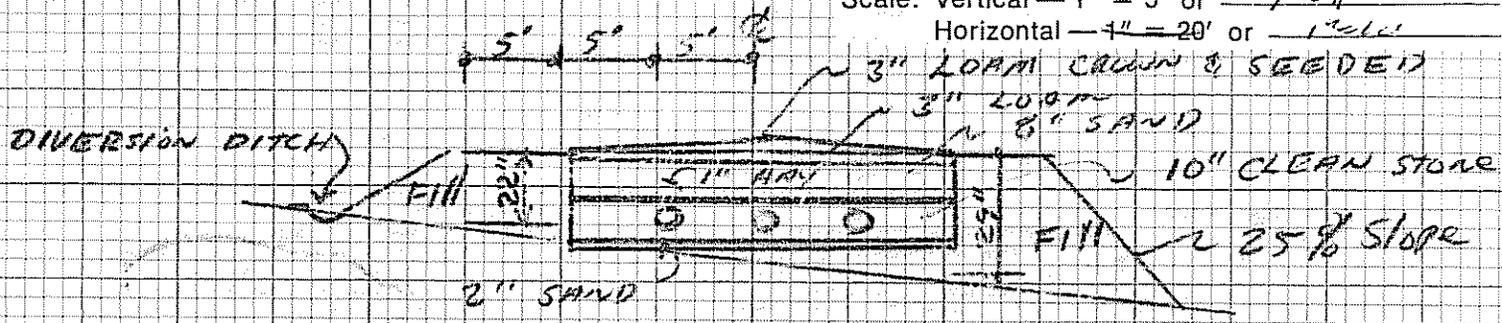
Private Sewage Disposal Plan

Scale 1" = 20' or _____



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or 1" = 4'
Horizontal — 1" = 20' or 1" = 10'



Statement: (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

HHE - 200 1/77

Signature Required

Date: 5-5-77

Applicant: _____

Owner: X Gil Dulac