Lettre, Donald

Original to be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

Application Is For: ○ New System ○ Expanded System ○ Conversion Permit ○ Experimental System ○ Replacement Of Entire System ● Disposal Area Only

Application For Subsurface Wastewater Disposal Permit

This Is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Augusta	Street, Road, Etc. / If On Water Body, Give Name	Plumbing Permit No. 2300 2 EC	Date Of Plumbing Permit 10/23/79
Name Of Property: Donald Lettre	Tel. No.	Name Of Applicant Owner's Agent	Tel. No.
Eight Rod Road		Street	
Augusta	State: Maine	Zip Code: 04330	Town / State / Zip Code
Owner's Signature	Date: 10-23-79	Applicants Signature	Date
Lot: 67061 ● Sq. Feet ○ Acres	Is Lot Zoned? ○ Yes ● No	Type Of Zoning	Subdivision Name / Lot No.

Water Supply For This Property Is: ○ Dug Well, depth ____ ; ● Drilled Well, depth ____ ; ○ Spring, depth ____ ;

Surface water ○ Body ○ Course — ○ with disinfection, ○ without disinfection. Public Utility, name ____

SITE INVESTIGATION

Show Location Of Pits on Site Plan on Page 2

Soil Profile No. ☒ Pit ☐ Boring	Soil Profile No. ☐ Pit ☐ Boring	Soil Profile No. ☐ Pit ☐ Boring	Soil Profile No. ☐ Pit ☐ Boring
Organic Strata 2"	Organic Strata	Organic Strata	Organic Strata
1st Strata Dark Brown Loamy Sand Inches 20" SM	1st Strata Inches	1st Strata Inches	1st Strata Inches
2nd Strata Brown Silty Sand Inches 37" SM	2nd Strata Inches	2nd Strata Inches	2nd Strata Inches
3rd Strata Inches	3rd Strata Inches	3rd Strata Inches	3rd Strata Inches
4th Strata Inches	4th Strata Inches	4th Strata Inches	4th Strata Inches
Total Depth of Observation Hole Inches 59	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches
Max. Seasonal Water Table Mottling ● None Evident Inches	Max. Seasonal Water Table Mottling ○ None Evident Inches	Max. Seasonal Water Table Mottling ○ None Evident Inches	Max. Seasonal Water Table Mottling ○ None Evident Inches
Impervious Layer Clay, Etc. ● None Evident Inches	Impervious Layer Clay, Etc. ○ None Evident Inches	Impervious Layer Clay, Etc. ○ None Evident Inches	Impervious Layer Clay, Etc. ○ None Evident Inches
Bedrock Inches ○ None Evident Type of Bedrock	Bedrock Inches ○ None Evident Type of Bedrock	Bedrock Inches ○ None Evident Type of Bedrock	Bedrock Inches ○ None Evident Type of Bedrock
Surface Slope 0± %	Surface Slope %	Surface Slope %	Surface Slope %
Soil Group: 6 / Soil Condition: B / Per Table 9-1 Code II	Soil Group / Soil Condition / Per Table 9-1 Code II	Soil Group / Soil Condition / Per Table 9-1 Code II	Soil Group / Soil Condition / Per Table 9-1 Code II

7-25-79 (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: Gerald C Rowe

Date Signed: 7-25-79

Site Evaluator License Number: 79

DISPOSAL SYSTEM PROPOSED

Show Location of System and Details on Disposal Plan on Page 2

SYSTEM:

- Combined System
- Separated System
- If separated system — type of human waste disposal system to be used:
- Sealed Vault Privy
- Open Pit Privy
- Compost Toilet
- Chemical Toilet
- Incinerator Toilet

TREATMENT TANK

- ○ Aerobic Tank
- ● Septic Tank
  - ● Concrete
  - ○ Fiberglass
  - ○ Metal

Size in Gallons: Existing Gal.

Number of Bedrooms: 3

SUBSURFACE ABSORPTION AREA/TYPE

○ Bed System — No. of Beds 1 — Length 44 ft — Width 20 ft

○ Chamber System Number ____

○ Type A ○ Type B — ○ Single File ○ Cluster

○ Special System Length ____ ft — Width ____ ft

○ Laundry System — No. of Chambers: — Type A ____ Type B ____

Name and type of establishment if other than private home

SIZE

- ● Small
- ○ Medium
- ● Med.-Large
- ○ Large
- ○ Extra-Large

Design Flow: 264 GPD

SITE MODIFICATION

Fill will be: IN NEW AREA only

12 in. uphill — 12 in. downhill

DETAILS

○ A Distribution Box is required

Pumping is — ○ required ● is not required

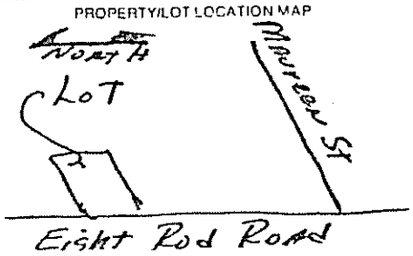
The dose will be ____ Gallons

DISTANCES

● Yes ○ No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs.

● Yes ○ No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.

PROPERTY/LOT LOCATION MAP



WAIVER ○ State Variance Required ○ Replacement Variance Required ● None Required

FOR THE USE OF LPI ONLY

○ Denial: Application is denied for the following reasons; portions of the Code II are cited.
Form is incomplete (____ pg) as to ○ General info., ○ Site Investigation, ○ System Proposed, ○ Site Plan, ○ Disposal System Plan, ○ Cross-Section, ○ Statement. See section 4.1

○ Site Investigation indicates site is ○ unsuitable for disposal system. ○ Unsuitable for system proposed

○ System Proposed does not conform to Code ____

○ Site Investigation indicates site modifications are necessary.

✓ Acceptance: Application for permit is approved ○ with condition specified, comply with Section ____ ✓ without condition.

Richard O. Baker 10-23-79

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

(For systems disposing of less than 2000 gallons per day)

Street, Road, etc. Eight Rod Road

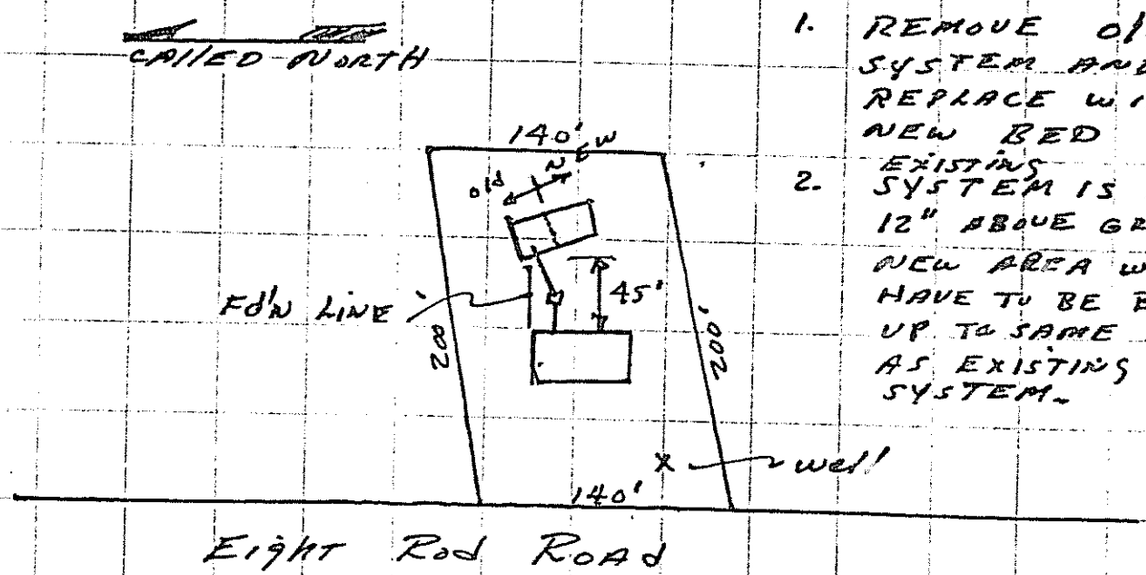
Owner of Property Donald LETTRE

If on water body, give name

Augusta

Site Plan

Scale 1" = _____ ft.



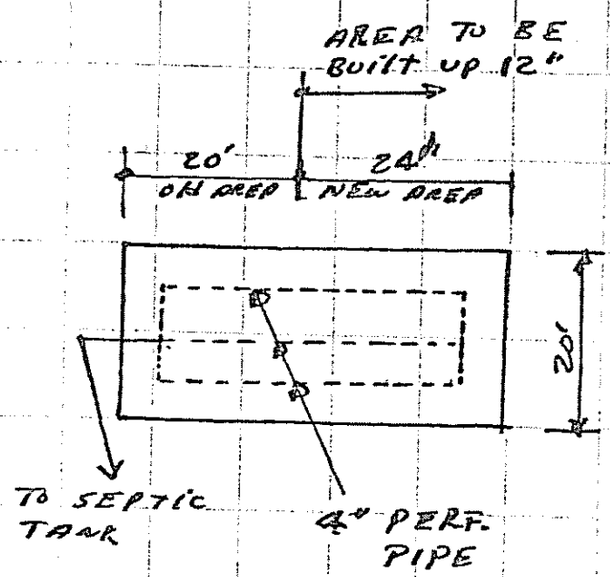
NOTE

1. REMOVE OLD SYSTEM AND REPLACE WITH A NEW BED EXISTING
2. SYSTEM IS APPRO 12" ABOVE GRADE. NEW AREA WILL HAVE TO BE BUILT UP TO SAME ELEV AS EXISTING SYSTEM.

● Designates Elevation Reference Point ○ Designates Test Pit

Private Sewage Disposal Plan

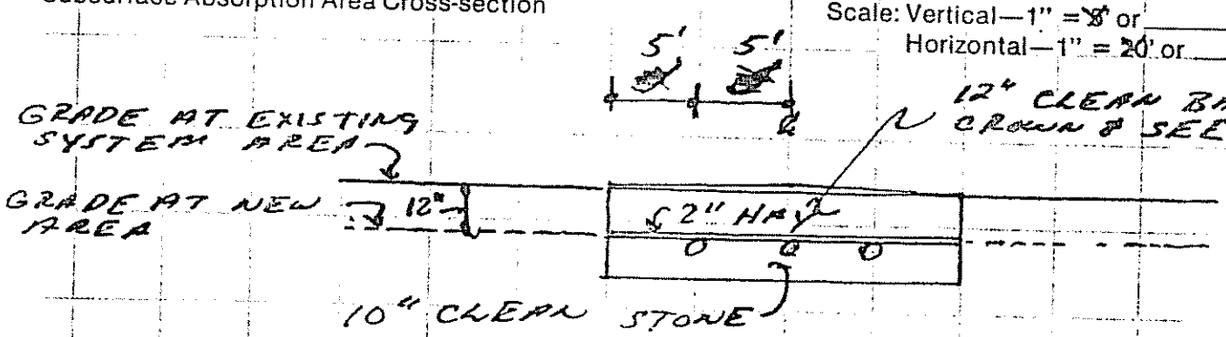
Scale 1" = 20' or _____



Subsurface Absorption Area Cross-section

Scale: Vertical—1" = ~~8'~~ or 4'

Horizontal—1" = ~~20'~~ or 10'



Site Evaluators Signature Gerald C Pauline Date 7-25-79 License Number 75

HHE-200

Signature Required

Date X 10-23-79

Applicant X

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 for all 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