Rodrigue, Rene

Division of Health Engineering
Station No. 10
State House
Augusta, Maine 04333

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

HHE-200

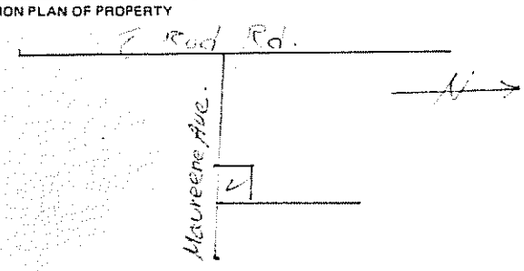
This Application Is For: (X) New System ( ) Replacement Of Entire System ( ) Expanded System ( ) Replacement Of Disposal Area Only ( ) Conversion Permit

Variance: (X) None Required ( ) New System Variance ( ) Replacement System Variance With: ( ) LPI Approval ( ) Dept. Review

PROPERTY LOCATION
Town, Plantation: Augusta
Street, Road: Maureene Ave.
Subdivision Name: Rodrigue
Lot No.: 4

PROPERTY OWNER or APPLICANT: Rony Rodrigue
Mailing Address: West River Rd
Street
Tel. No.
Augusta Town Maine State
Zip Code

LOCATION PLAN OF PROPERTY



Roads, Landmarks, Distances

TYPE OF STRUCTURE, DESIGN FLOW
(X) Single Family Dwelling Number of Bedrooms 3 Design Flow 300 GPD
1 bedr. 2 bedr.
Design Flow based on (X) Minimum (X) Moderate ( ) Conservative
( ) Reduction in Design Flow due to Water Conservation
If so, specify type (s) _____

( ) Other Establishment. Specify _____
Type of Facility
(Number of Employees, Seating Capacity, Building Size, etc.)
Design Flow _____ GPD
If greater than 2000 GPD, Specify Professional Engineer

PROPERTY INFORMATION
Area of Property 1/2 ( ) Sq. Ft. (X) Acres ( ) Zoned (X) Not Zoned
If zoned, type of zoning _____
Property on Water Body, If so, Name of Water Body _____
Water Supply is: ( ) Public Utility, ( ) Drilled Well _____ depth
( ) Dug Well _____ depth ( ) Well Point ( ) Spring ( ) Surface Water

SOIL PROFILE DESCRIPTION Location of Observation Holes shown on page 2

TEXTURAL DESCRIPTION OF EACH SOIL STRATS ENCOUNTERED

Observation Hole No. 1	Observation Hole No.	Observation Hole No.
( ) Test Pit (X) Boring	( ) Test Pit ( ) Boring	( ) Test Pit ( ) Boring
Organic Strata or (Existing Fill) Thickness 12"	Organic Strata or (Existing Fill) Thickness ___"	Organic Strata or (Existing Fill) Thickness ___"
1st Original Mineral Soil Strata Red Brown Sandy Loam Depth from 0" to 8" Thickness 8"	1st Original Mineral Soil Strata Depth from 0" to ___" Thickness ___"	1st Original Mineral Soil Strata Depth from 0" to ___" Thickness ___"
2nd Yellow Brown Sandy Loam Depth from 8" to 32" Thickness 24"	2nd Depth from ___" to ___" Thickness ___"	2nd Depth from ___" to ___" Thickness ___"
3rd Gray Brown Sandy Till Depth from 32" to 48" Thickness 16"	3rd Depth from ___" to ___" Thickness ___"	3rd Depth from ___" to ___" Thickness ___"
4th Depth from ___" to ___" Thickness ___"	4th Depth from ___" to ___" Thickness ___"	4th Depth from ___" to ___" Thickness ___"
Total Depth of Observation Hole 48"	Total Depth of Observation Hole ___"	Total Depth of Observation Hole ___"

Depth from top of ORIGINAL MINERAL SOIL

Maximum Seasonal High Ground ( ) None evident Water Table Depth 32 (Mottled)	Maximum Seasonal High Ground ( ) None Evident Water Table Depth ___"	Maximum Seasonal High Ground ( ) None evident Water Table Depth ___"
Depth to Restrictive Layer (X) None evident ___"	Depth to Restrictive Layer ( ) None evident ___"	Depth to Restrictive Layer ( ) None evident ___"
Depth to Bedrock (X) None evident ___"	Depth to Bedrock ( ) None evident ___"	Depth to Bedrock ( ) None evident ___"

PROFILE	CONDITION	SLOPE	PROFILE	CONDITION	SLOPE	PROFILE	CONDITION	SLOPE
4	C	8 %			%			%

DISPOSAL SYSTEM PROPOSED Location of system and Details on Proposed Plan on page 2

TYPE OF SYSTEM
(X) Combined System
( ) Separated System
If separated system, type of black waste disposal system to be used:
( ) Compost
( ) Pit Privy
( ) Sealed Vault Privy
( ) Other:
Specify: _____
( ) Separated Laundry System
( ) Primitive System
( ) Holding Tank

TREATMENT TANK
(X) Septic Tank
( ) Aerobic Tank
Size 1000 Gals.

DOSAGE
(X) Pumping is not required
( ) Pumping is required
The dose should be: _____ Gals.
Dosage chamber capacity shall be _____ gals.
( ) System should be vented

SUBSURFACE DISPOSAL AREA/TYPE
( ) Trench Disposal Area
Total linear feet of trench _____ ft.
Number of Trench lines _____ ft.
Length of each trench line _____ ft.
Depth of Stone _____ inches.
Reduction on trench length due to stone depth _____ %
(X) Bed Disposal Area
Total bed area 800 sq. ft.
Number of beds 1
Width 20 ft. Length 40 ft.
( ) Chamber Disposal Area
Total chamber area _____ sq. ft.
Number of clusters _____
Width _____ ft. Length _____ ft.
( ) H-20 required

SYSTEM SIZE RATING
( ) Small (X) Medium ( ) Medium Large ( ) Large ( ) Extra Large

DISPOSAL AREA ELEVATION
Depth of Upslope Fill required 0 inches.
Depth of Downslope Fill required 24" inches.
Reference Elevation Point established at 0 Elevation.
Disposal Area Bottom to be established at -80" Elevation.
Top of Distribution Lines or Top of Chambers -48" Elevation.

(X) Yes ( ) No: The proposed subsurface disposal 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.

(X) Yes ( ) No: The proposed subsurface disposal 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.

FOR USE BY SITE EVALUATOR VALID COPY ONLY WITH EMBOSSED SEAL
On 4/27/81 (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 above type and size of subsurface wastewater disposal system. I also recommend the proposed disposal system layout and location shown on page 2.
Signature of Site Evaluator [signature]
Date signed 4/29/81
Site Evaluator License Number 51

FOR USE BY OWNER/APPLICANT
I certify that all the information submitted to be true and correct to the best of my knowledge. I understand that any falsification of this application is reason to deny a permit to install a disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I also understand that no guarantee is intended or implied by reason of any advice or approval given.
Signature of Owner/Applicant [signature]
Date Signed

FOR USE BY LPI: ( ) This Application is approved. If conditions, specify
( ) This Application is Denied due to: ( ) System is not in accordance with Rules. ( ) Application is incomplete. ( ) Application is unclear. ( ) Development is in violation of other Regulations. Specify _____
Signature of LPI Richard P Baker
Date 6-2-81
PERMIT NO. 4 4 9 7 8 E
Date Issued 6/2/81

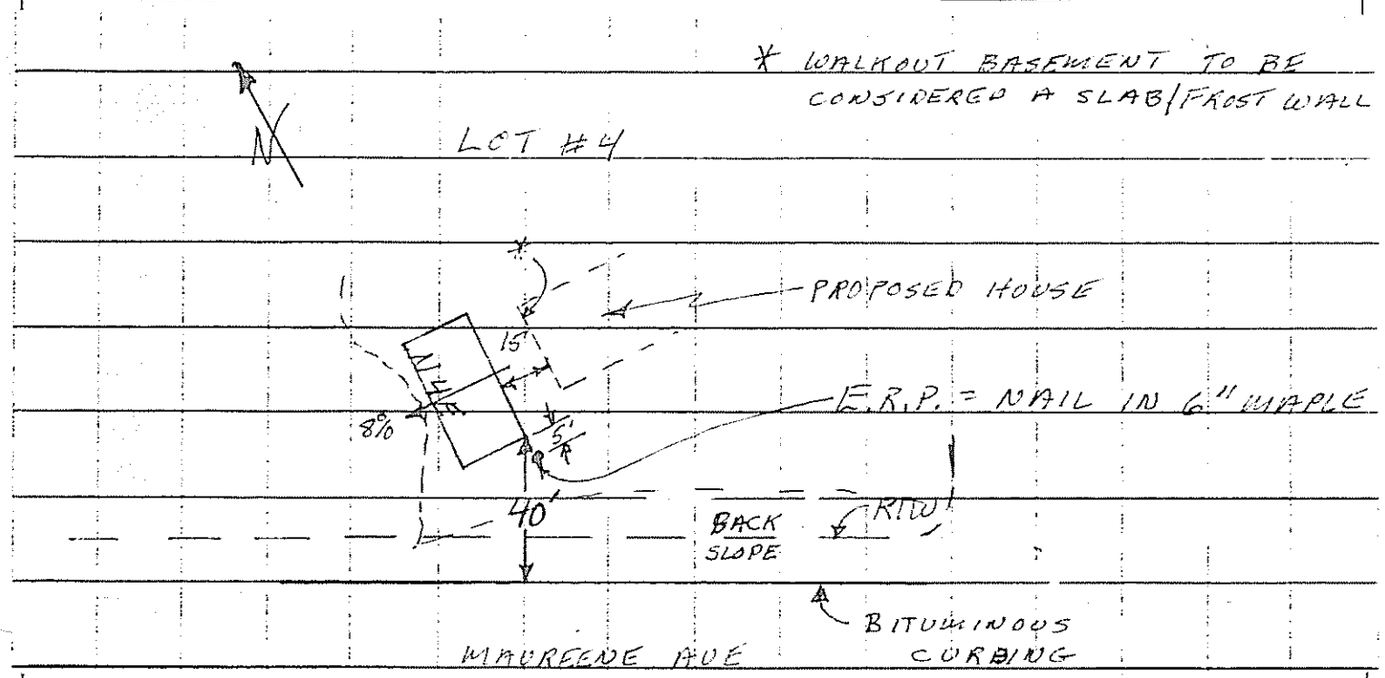
APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

PROPERTY LOCATION			
Augusta (Town, Plantation)	Maureene Ave. (Street, Road)	Rodrigue (Subdivision Name)	Lot No. 4

PROPERTY OWNER or APPLICANT	DISPOSAL AREA ELEVATION	
Reno Rodrigue	Depth of Upslope Fill required 4 inches.	Reference Elevation Point established at 0 Elevation.
	Depth of Downslope Fill required 24± inches.	Disposal Area Bottom to be established at -80 Elevation.
		Top of Distribution Lines or Top of Chambers -65 Elevation.

Site Plan

Scale 1" = 50' ft.

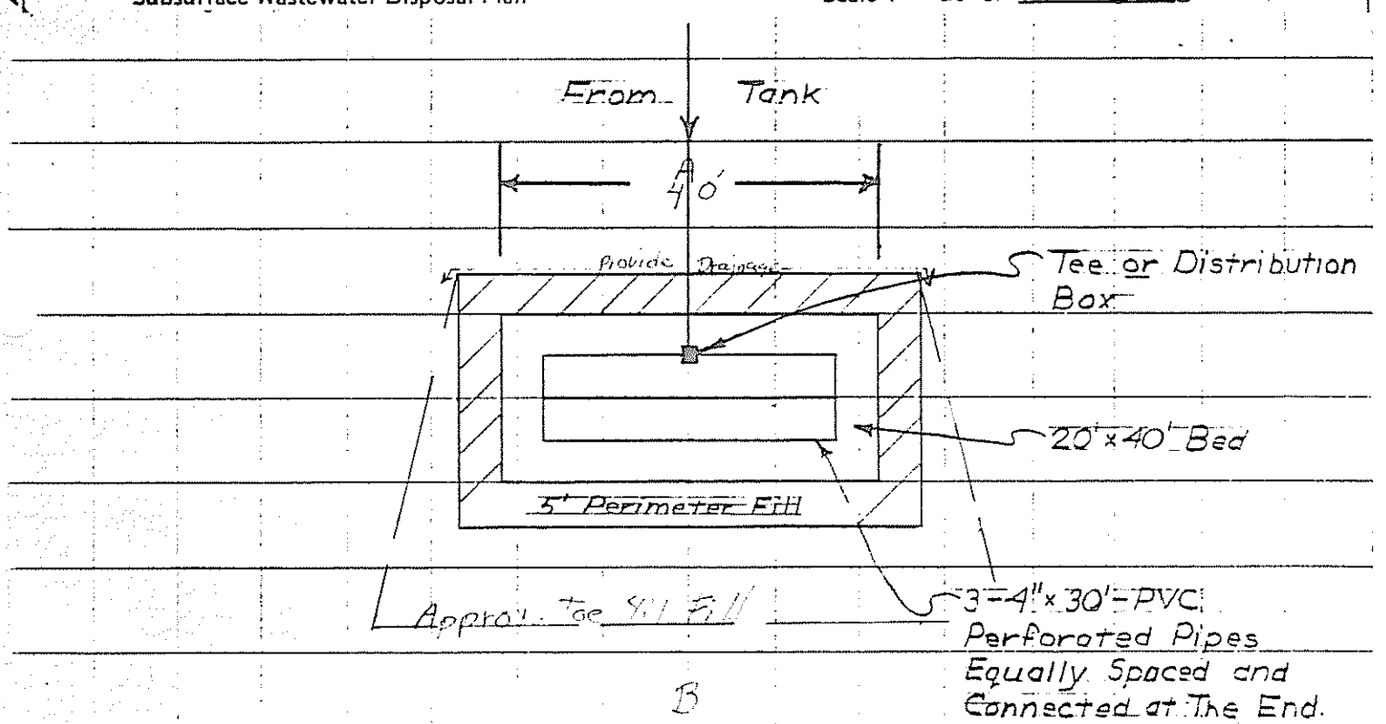


● Designates Elevation Reference Point (ERP)

○ Designates Observation Hole (TP or B)

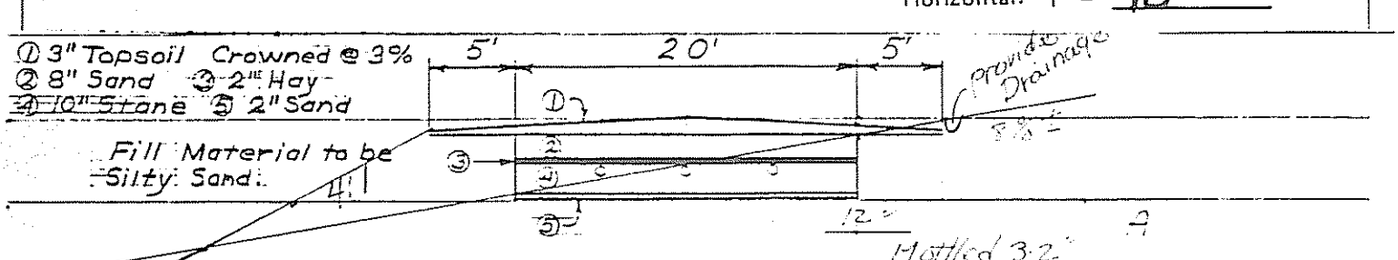
Subsurface Wastewater Disposal Plan

Scale 1" = 20' or AS SHOWN



Subsurface Wastewater Disposal Area Cross-section

Scale: Vertical: 1" = 5'
Horizontal: 1" = 10'



Remove Stumps, Boulders and or Sods and Scarify Surface Before Fill is Placed.

Site Evaluators Signature	Date	License Number
[signature]	7/29/81	51