

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Depart. Health & Human Services  
Div of Environmental Health, 11 SHS  
(207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION		>> Caution: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	Augusta	Town/City _____	Permit # _____
Street or Road	791 Churchill Road	Date Permit Issued ___/___/___	Fee: \$ _____ Double Fee Charged <input type="checkbox"/>
Subdivision, Lot #			L.P.I. # _____

OWNER/APPLICANT INFORMATION		Local Plumbing Inspector Signature _____
Name (last, first, MI)	Lord, Tim & Jen <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	The Subsurface Wastewater Disposal System <b>shall not</b> be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.
Mailing Address of Owner/Applicant	Augusta, ME 04330	
Daytime Tel. #	(207) 441-5794	
		Municipal Tax Map # <u>3</u> Lot # <u>22</u>

Owner/Applicant Statement	Caution: Inspections Required
I state and acknowledge that the information submitted is correct to the best of my knowledge, that I have read and agree with the conditions on the back of this form, and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.	I have inspected the installation authorized above and on back of this form and found it to be in compliance with the Subsurface Wastewater Disposal Rules and local ordinances.
Signature of Owner/Applicant _____ Date _____	Local Plumbing Inspector Signature _____ (1 <sup>st</sup> ) Date Approved _____
	(2 <sup>nd</sup> ) Date Approved _____

PERMIT INFORMATION		
<b>TYPE OF APPLICATION</b> 1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> 1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 5. <input type="checkbox"/> Minimum Lot Size Variance 6. <input type="checkbox"/> Seasonal Conversion Variance	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 1. <input type="checkbox"/> Complete non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-engineered Disposal Area 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input checked="" type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (+2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input checked="" type="checkbox"/> Pre-treatment, specify: <u>outlet filter on tank</u> 12. <input type="checkbox"/> Miscellaneous components
<b>SIZE OF PROPERTY</b> <input type="checkbox"/> sq. ft. 20 <input checked="" type="checkbox"/> acres	<b>DISPOSAL SYSTEM TO SERVE:</b> 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ Specify Current Use <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> <input checked="" type="checkbox"/> Proposed 1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON CROSS-SECTIONAL VIEW)			
<b>TREATMENT TANK</b> <input type="checkbox"/> proposed 1. <input checked="" type="checkbox"/> Concrete <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY: <b>1000</b> Gallons	<b>DISPOSAL AREA TYPE/SIZE</b> 1. <input checked="" type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input type="checkbox"/> Proprietary Device <input type="checkbox"/> Cluster array <input type="checkbox"/> Linear <input type="checkbox"/> Regular load <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE: <u>891</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> 1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> Multi-compartment tank <input type="checkbox"/> _____ Tanks in series <input type="checkbox"/> Increase in tank capacity <input type="checkbox"/> Filter on tank outlet	<b>DESIGN FLOW</b> 270 gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities  3. <input type="checkbox"/> Section 4G (meter readings)
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE <u>3</u> / <u>D</u> CONDITION <u>D</u> at Observation Hole # <u>TP 1</u> Depth: <u>14"</u> OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> 1. <input type="checkbox"/> Medium 2.6 sq. ft./gpd. 2. <input checked="" type="checkbox"/> Medium Large 3.3 sq. ft./gpd 3. <input type="checkbox"/> Large 4.1 sq. ft./gpd. 4. <input type="checkbox"/> Extra-Large 5.0 sq. ft./gpd.	<b>EFFLUENT/EJECTOR PUMP</b> 1. <input type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered systems Dose _____ Gallons	LATITUDE AND LONGITUDE at center of disposal area Lat. N <u>44</u> d <u>22</u> m <u>02.91</u> s Lon. W <u>69</u> d <u>42</u> m <u>17.94</u> s If g.p.s., state margin of error:

SITE EVALUATOR COMMENTS
System-20' by 45' stone bed replacing a previously permitted and installed 20' by 45' stone bed for a 3 bedroom dwelling
SITE EVALUATOR STATEMENT

I Certify that on November 9, 2012 (date) I completed a site evaluation on this project and state that the data reported is accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241) as interpreted by me.

Kenneth P. Coffin  
 Kenneth P. Coffin, an agent of E.S. Coffin Engineering & Surveying, Inc.  
 E.S. Coffin Engineering & Surveying, Inc.  
 432 Cony Road P.O. Box 4687  
 Augusta, Maine 04330-1687

**SE #331**  
 Licensed Site Evaluator  
 (207) 623-9475 or 1-800-244-9475

November 09, 2012  
 Date  
 kcoffin@coffineng.com

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator  
 See back of this form for conditions of permit

## ATTACHMENT FOR HHE-200 FORM

1. The OWNER/APPLICANT, by signing the front of this form, agrees to provide payment for services rendered as quoted and billed by COFFIN ENGINEERING & SURVEYING (CE&S). Payment on all billings are due within 30 days of billing date, otherwise a late charge of 1.5% per month (18% per year), simple interest, will be added to the total amount. In the event that any portion, or all of the final billing, remains unpaid for a period of 60 days, the OWNER/APPLICANT shall pay all costs of collection, including attorney's fees, court costs, CE&S's cost to collect bill. PLEASE NOTE THAT THE PERSON SIGNING THIS FORM UNDERSTANDS THAT THE OWNER/APPLICANT IS RESPONSIBLE FOR PAYMENT OF SERVICES AND SHOULD CONTACT CE&S IF HE/SHE HAS NOT RECEIVED A BILL.
2. All construction shall conform with Title 22 MRSA, §42, 10-144A CMR 241 "Maine-Subsurface Waste Water Disposal Rules," and all other pertinent sections. The OWNER/APPLICANT is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits. The OWNER/APPLICANT shall carefully examine all documents submitted by CE&S and promptly notify CE&S upon becoming aware of any defects. The OWNER/APPLICANT agrees to limit the liability of the site evaluator and/or CE&S to the amount of the total fee paid to CE&S and to a limit of five years from the date of this form. Visits to the site will be for information purposes only. CE&S will not be responsible for any site inspection duties.
3. This disposal system form shall not be transferable and becomes invalid if the authorized work has not commenced within two years after the issue date of the disposal system.
4. The OWNER/APPLICANT shall accurately describe the intended uses (present and future) for the system to the site evaluator. By signing the front of this form, the OWNER/APPLICANT agrees that the uses shown on said form is what was described to the site evaluator. Any change from the intended use described on this form requires a new design. Applicability of design must be reevaluated when location of structures are substantially different from those shown on the site plan or when other structures, additions, or appurtenances (i.e. swimming pools, garbage disposals) are considered.
5. The LPI shall inform the owner and designer of any local ordinance exceeding the Rules (Chapter 241) prior to issuing a permit, so that the application may be properly amended to conform to such ordinances.
6. The most recent revision of the Maine State Plumbing Code is hereby made a part of this HHE-200 Form and shall be consulted by the disposal system installer for further construction details, material specifications, cautions, and other related details pertinent to the installation of this disposal system.
7. This HHE-200 form is intended to represent facts pertinent to the Plumbing Code only. The owner/applicant must check local, state, and federal regulations before considering this an approvable site. All information shown on this form relating to property lines, structures, and subsurface structures (such as, but not limited to water lines, septic tanks, cess pools, cellar drains, utility lines, wells, leach fields, etc.) are noted, shown, or left off as not affecting the system based on information provided by the owner/applicant or his agent. The OWNER/APPLICANT acknowledges and understands that CE&S's submissions may represent imperfect data and may contain errors, omissions, conflicts, inconsistencies, code violations, and improper use of materials. Such deficiencies will be corrected when identified. The OWNER/APPLICANT agrees to carefully study and compare the submissions and report at once in writing to CE&S any deficiencies discovered. The OWNER/APPLICANT further agrees to require each contractor and/or subcontractor to likewise study the submissions and report at once any deficiencies discovered. It is the responsibility of the owner/applicant or his agent to confirm, BEFORE CONSTRUCTION BEGINS, the above and/or any other features which may affect (or be adversely affected by) the installation of this system.
8. When a gravity system is proposed, BEFORE CONSTRUCTION BEGINS, the disposal system installer and building contractor shall review the relative elevation of all points given in the this HHE-200 Form and the elevation of the existing or proposed building drain and septic tank openings for compatibility to the minimum code pitch requirements. Any questions that arise should be directed to the local plumbing inspector or designer. When a pump system is installed, provisions shall be made to keep the tank and lift station outlets above the high water table.
9. The Septic System Owner's Manual written by the designer is made a part of this HHE-200 Form and shall be consulted by the owner/applicant and disposal system installer for other facts pertinent to the installation and operation of this disposal system.
10. The OWNER/APPLICANT bears the responsibility to show the location of property lines, subsurface structures (such as, but not limited to water lines, septic tanks, cess pools, cellar drains, utility lines), and wells to the Site Evaluator. Actual property lines must be confirmed by a boundary survey. By signing the front of this form, the OWNER/APPLICANT agrees that the property lines and wells on the accompanying plan(s) are shown correctly and any discrepancy found in the future is the responsibility of the OWNER/APPLICANT.
11. The actual water flow or number of bedrooms shall not exceed the design criteria indicated on this HHE-200 Form without a re-evaluation of the system.
12. CE&S is not responsible for the actions of others, who affect the ultimate cost of the PROJECT; by vandalism, marker removal, changes in scope of work, approval agencies, redesign of septic system, etc. (OWNER/APPLICANT to be notified of any cost increase).
13. The laws of Maine will apply concerning the interpretation and performance of this AGREEMENT. If an item in this AGREEMENT is found to be in violation of any prevailing laws, it will not void the entire AGREEMENT. This AGREEMENT is superior and over-rides any Standard Subcontract Agreement signed by the parties involved in this AGREEMENT for this PROJECT when referenced in said Standard Subcontract Agreement.
14. CE&S is responsible for the actions of its' employees only. Insurance is provided for: vehicles, general liability, errors and omissions, and workman's comp. All other entities on the site are responsible for their own safety, work product, actions, conduct, etc.
15. CE&S is not responsible for any actual, alleged, or threatened, pollutant damage in regard to the services performed. Pollutants are defined as any environmentally threatening contaminants commonly regulated in this state.
16. In the event that the OWNER/APPLICANT hires subcontractors, workers, orders material, etc., and governs, directly or indirectly, the overall operation on the work site; then the OWNER/APPLICANT is deemed to be acting as his own general contractor, having the greater responsibility for the work site.
17. Other than the procedure of collections described above in (1), should the parties of this AGREEMENT have differences involving either the work site, or the PROJECT, that cannot be resolved between them; then the procedures of Alternate Dispute Resolution will be the only method of resolving those differences.



Town, City, Plantation  
 Augusta

Street, Road, Subdivision  
 791 Churchill Road

Owner's Name  
 Tim & Jen Lord

**SITE PLAN**

Scale: 1" = \_\_\_ feet

**TEXTURE TERMS**

- Sand
- Loomy sand
- Sandy loam
- Loam
- Silt loam
- Silty clay loam
- Silty clay
- Bedrock

**TEXTURE**

**ABUNDANCE**  
 Very-38-80%  
 Extremely-81-90%

**MODIFIER TERMS**

- VF-very fine
- F-fine
- M-medium
- C-course
- ROCK**
- Gravelly-0.1-3"
- Cobbly-3-10"
- Stony->10"

**MOTTLING**

- CONTRAST**  
 Faint  
 Distinct  
 Prominent

**ABUNDANCE**  
 None  
 Few-<2%  
 Common-2-20%  
 Many->20%

**CONSISTENCE**

- TERMS**  
 Loose  
 Friable  
 Firm  
 Very Firm  
 Cemented

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole TP 1  Test Pit  Boring  
2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL (INCHES)	Texture	Consistency	Color	Mottling
0	gravely fine sandy loam	Friable	Dk Brown	None
10			Brown Dk Yel Br Lt Olive Br	
20	very fine sandy loam	Firm	Olive	Common Distinct
30				
40				
50				

Soil Classification <u>3</u> <u>D</u> Profile Condition	Slope <u>1</u> %	Limiting Factor <u>14</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Observation Hole TP 2  Test Pit  Boring  
2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL (INCHES)	Texture	Consistency	Color	Mottling
0	gravely fine sandy loam	Friable	Dk Brown	None
10			Dk Yel Br Yel Brown Lt Olive Br	
20	very fine sandy loam	Firm	Olive	Common Distinct
30				
40				
50				

Soil Classification <u>3</u> <u>D</u> Profile Condition	Slope <u>2</u> %	Limiting Factor <u>14</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 11/09/12

HHE-200

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering

Town, City, Plantation  
**Augusta**

Street, Road, Subdivision  
**791 Churchill Road**

Owner's Name  
**Tim & Jen Lord**

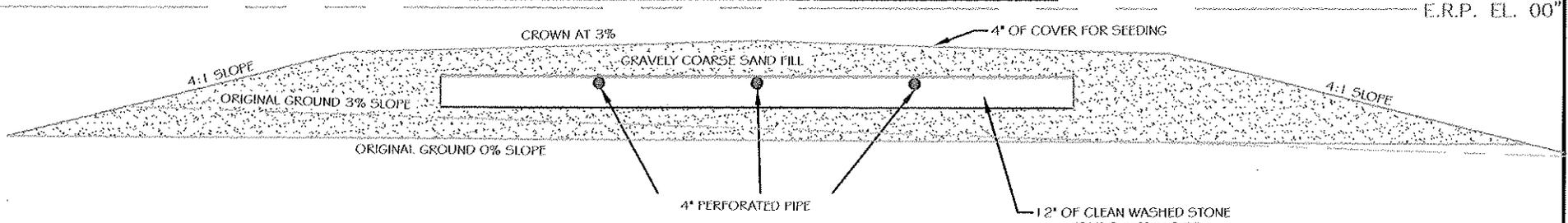
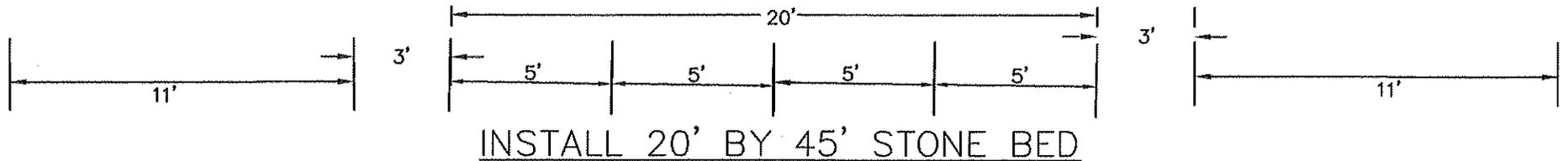
**FILL REQUIREMENTS**  
Depth of Fill (Upslope) 26-34"  
Depth of Fill (Downslope) 34-35"

**CONSTRUCTION ELEVATIONS**  
Reference Elevation is 00"  
Bottom of Disposal Area -38"  
Top of distribution lines -27"

**ELEV. REF. PT:**  
50d Spike in twin 5" Oak Tree  
22" above ground

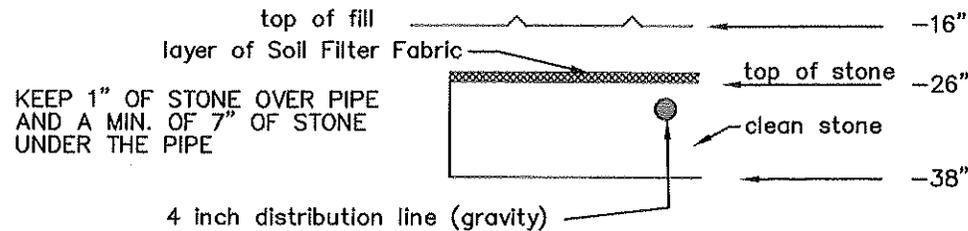
**DISPOSAL AREA CROSS SECTION**

**SCALE:**  
Vertical: 1 inch = 5 feet  
Horizontal: 1 inch = 5 feet



DISPOSAL FIELD SHOULD ONLY BE INSTALLED  
ACCORDING TO THE MAINE SUBSURFACE  
WASTE WATER DISPOSAL RULES.

E.R.P.  
elev.



**STONE BED DETAIL (no scale)**

- DISPOSAL FIELD CONSTRUCTION TECHNIQUES**
1. VEGETATION SHALL BE CUT AND REMOVED FROM THE AREA WHERE BACKFILL MATERIAL IS TO BE PLACED.
  2. THE AREA UNDER THE DISPOSAL FIELD AND BACKFILL EXTENSIONS SHALL BE ROTO-TILLED WITH GRAVELY COARSE SAND FILL TO A DEPTH OF 6-8 INCHES TO FORM A TRANSITIONAL HORIZON.
  3. FILL LARGE HOLES THAT ARE LEFT AS A RESULT OF STUMP OR STONE REMOVAL WITH GRAVELY COARSE SAND FILL.
  4. SURFACE WATER MUST BE DIVERTED AWAY FROM THE DISPOSAL FIELD.

Site Evaluator's Signature *Karen P. Coffin*

SE # 331

Date: 11/09/12

HHE-200

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Maine Dept. of Health & Human Services  
Division of Environmental Health

(207) 287-5338  
(207) 287-3165 (fax)

Town, City, Plantation

**Augusta**

Street, Road, Subdivision

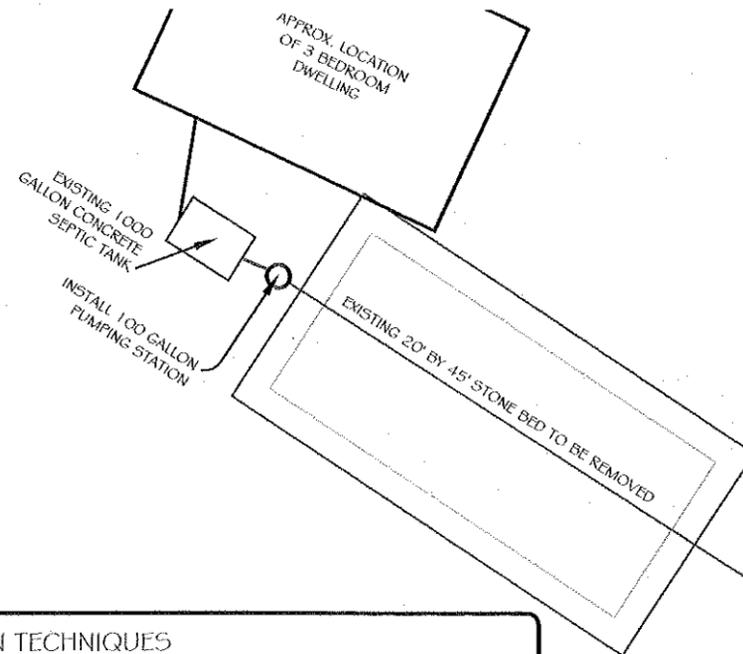
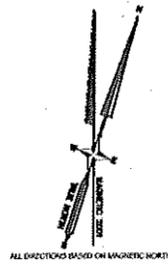
**791 Churchill Road**

Owner's Name

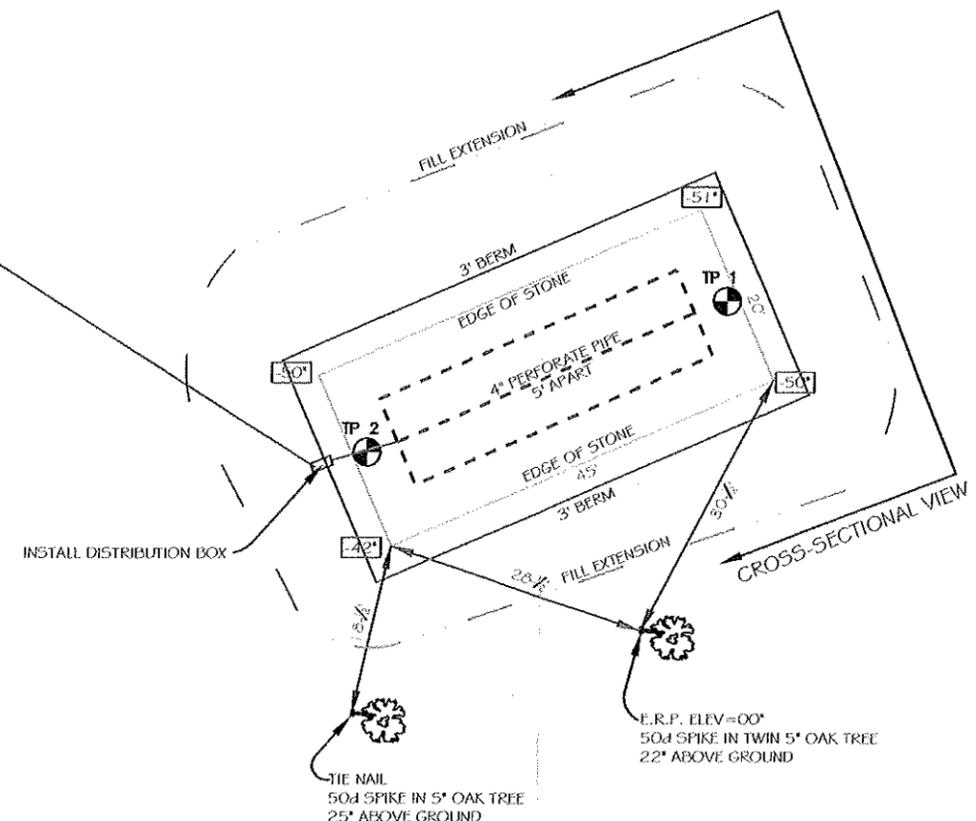
**Tim & Jen Lord**

**SUBSURFACE WASTEWATER DISPOSAL PLAN**

SCALE: 1" = 20'



INSTALL 2" PRESSURE LINE



**DISPOSAL FIELD CONSTRUCTION TECHNIQUES**

1. Vegetation shall be cut and removed from the area where backfill material is to be placed. Organic duff and old fill material from under the disposal area and fill extension should be removed.
2. The area under the disposal field and backfill extensions shall be roto-tilled with gravelly coarse sand fill to a depth of 6-8 inches to form a Transitional Horizon. Do not use wheeled equipment on the scarified soil surface until after 12 inches of fill is in place.
3. Fill large holes that are left as a result of stump or stone removal with gravelly coarse sand fill.
4. Surface water (from roofs or upland) must be diverted away from the disposal field.
5. Septic tank(s), grease trap, pumping station, and lines may be relocated to accommodate site conditions as long as setbacks and intent of design are met.
6. All construction shall conform with Title 22 MRSA, Section 42, 10-144A-CMR 241 "Maine Subsurface Waste Water Disposal Rules" and other pertinent sections.
7. The owner/contractor shall carefully observe the vertical distance between the E.R.P. and the bottom of the leach field and notify the Site Evaluator promptly if separation distance appears to be at odds with the original ground.
8. The owner/applicant is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits.
9. Access openings for septic tanks serving single-family dwelling units may be buried, although water tight risers to within 6" of finish grade are required. The riser opening must be at least 18" in diameter over the tank cover. Outlet baffles that utilize an effluent filter must have a riser of at least 18" in diameter extended to finish grade.
10. Installation of a garbage (grinder) disposal is not recommended. If one is installed, an additional 1000 gallon septic tank or a septic tank filter should be connected in series to the proposed septic tank.
11. The septic tank should be pumped at least once every three years.
12. The general minimum setback between a well and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.

ELEVATION REFERENCE POINT

DESCRIPTION:  
50d spike in Twin 5" Oak Trees  
(22' above ground)  
ELEVATION: 00'

SHEET TITLE: PLAN VIEW

PROJECT: TIM & JEN LORD

LOCATION: 791 CHURCHILL RD.

TOWN: AUGUSTA

COUNTY: KENNEBEC

STATE: MAINE

DATE: NOVEMBER 9, 2012

SCALE: 1" = 20'

DATE: NOVEMBER 9, 2012



PROJ. NO. 2012-264

Site Evaluator's Signature

*Kane P. Coffin*

SE # 331

Date: 11/09/12

HHE-200

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

**PROPERTY LOCATION**

City, Town, or Plantation: Augusta

Street or Road: Church Hill Rd

Subdivision, Lot #: 1-11-61

**OWNER/APPLICANT INFORMATION**

Name (last, first, MI): Lord, Timothy  Owner  Applicant

Mailing Address of Owner/Applicant: 3 Lord Lane

Daytime Tel. #: 441-5794

**>> CAUTION: LPI APPROVAL REQUIRED <<**

AUGUSTA Date Permit Issued: 11/15/11 PERMIT # 0625 TOWN COPY 15.00

Local Plumbing Inspector Signature: [Signature] L.P.I. # 1850

FEE Charged: \$2150.00  Double Fee

The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map # 3 Lot # 22

**OWNER OR APPLICANT STATEMENT**

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant: [Signature] Date: 11/15/11

**CAUTION: INSPECTION REQUIRED**

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

Local Plumbing Inspector Signature: [Signature] (1st) date approved: 9/28/12

(2nd) date approved: 10/11/12

**PERMIT INFORMATION**

<p><b>TYPE OF APPLICATION</b></p> <p><input checked="" type="checkbox"/> 1. First Time System</p> <p><input type="checkbox"/> 2. Replacement System</p> <p>Type replaced: _____</p> <p>Year installed: _____</p> <p><input type="checkbox"/> 3. Expanded System</p> <p><input type="checkbox"/> a. &lt;25% Expansion</p> <p><input type="checkbox"/> b. &gt;25% Expansion</p> <p><input type="checkbox"/> 4. Experimental System</p> <p><input type="checkbox"/> 5. Seasonal Conversion</p>	<p><b>THIS APPLICATION REQUIRES</b></p> <p><input checked="" type="checkbox"/> 1. No Rule Variance</p> <p><input type="checkbox"/> 2. First Time System Variance</p> <p><input type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State &amp; Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 3. Replacement System Variance</p> <p><input type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State &amp; Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 4. Minimum Lot Size Variance</p> <p><input type="checkbox"/> 5. Seasonal Conversion Permit</p>	<p><b>DISPOSAL SYSTEM COMPONENTS</b></p> <p><input checked="" type="checkbox"/> 1. Complete Non-engineered System</p> <p><input type="checkbox"/> 2. Primitive System (graywater &amp; alt. toilet)</p> <p><input type="checkbox"/> 3. Alternative Toilet, specify: _____</p> <p><input type="checkbox"/> 4. Non-engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 5. Holding Tank, _____ gallons</p> <p><input type="checkbox"/> 6. Non-engineered Disposal Field (only)</p> <p><input type="checkbox"/> 7. Separated Laundry System</p> <p><input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more)</p> <p><input type="checkbox"/> 9. Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 10. Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 11. Pre-treatment, specify: _____</p> <p><input type="checkbox"/> 12. Miscellaneous Components</p>
<p><b>SIZE OF PROPERTY</b></p> <p><u>20</u> <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES</p>	<p><b>DISPOSAL SYSTEM TO SERVE</b></p> <p><input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u></p> <p><input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____</p> <p><input type="checkbox"/> 3. Other: <u>Tobe</u> (specify)</p> <p>Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><input checked="" type="checkbox"/> 1. Drilled-Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private</p> <p><input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other</p>
<p><b>SHORELAND ZONING</b></p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b></p>	

<p><b>TREATMENT TANK</b></p> <p><input checked="" type="checkbox"/> 1. Concrete</p> <p><input checked="" type="checkbox"/> a. Regular</p> <p><input type="checkbox"/> b. Low Profile</p> <p><input type="checkbox"/> 2. Plastic</p> <p><input type="checkbox"/> 3. Other: _____</p> <p>CAPACITY: <u>1000</u> GAL.</p>	<p><b>DISPOSAL FIELD TYPE &amp; SIZE</b></p> <p><input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench</p> <p><input type="checkbox"/> 3. Proprietary Device</p> <p><input type="checkbox"/> a. cluster aray <input type="checkbox"/> c. Linear</p> <p><input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load</p> <p><input type="checkbox"/> 4. Other: _____</p> <p>SIZE: <u>700</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.</p>	<p><b>GARBAGE DISPOSAL UNIT</b></p> <p><input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe</p> <p>If Yes or Maybe, specify one below:</p> <p><input type="checkbox"/> a. multi-compartment tank</p> <p><input type="checkbox"/> b. _____ tanks in series</p> <p><input type="checkbox"/> c. increase in tank capacity</p> <p><input type="checkbox"/> d. Filter on Tank Outlet</p>	<p><b>DESIGN FLOW</b></p> <p><u>270</u> gallons per day</p> <p>BASED ON:</p> <p><input type="checkbox"/> 1. Table 4A (dwelling unit(s))</p> <p><input type="checkbox"/> 2. Table 4C (other facilities)</p> <p>SHOW CALCULATIONS for other facilities</p> <p><u>3 bedrooms @ 90 gpd/ea</u></p> <p><input type="checkbox"/> 3. Section 4G (meter readings)</p> <p>ATTACH WATER METER DATA</p>
<p><b>SOIL DATA &amp; DESIGN CLASS</b></p> <p>PROFILE: <u>31C</u> CONDITION: <u>TP-1</u></p> <p>at Observation Hole # <u>TP-1</u></p> <p>Depth <u>17</u> "</p> <p>of Most Limiting Soil Factor</p>	<p><b>DISPOSAL FIELD SIZING</b></p> <p><input type="checkbox"/> 1. Medium--2.6 sq. ft. / gpd</p> <p><input checked="" type="checkbox"/> 2. Medium--Large 3.3 sq. ft. / gpd</p> <p><input type="checkbox"/> 3. Large--4.1 sq. ft. / gpd</p> <p><input type="checkbox"/> 4. Extra Large--5.0 sq. ft. / gpd</p>	<p><b>EFFLUENTJECTOR PUMP</b></p> <p><input checked="" type="checkbox"/> 1. Not Required</p> <p><input type="checkbox"/> 2. May Be Required</p> <p><input type="checkbox"/> 3. Required</p> <p>Specify only for engineered systems:</p> <p>DOSE: _____ gallons</p>	<p><b>LATITUDE AND LONGITUDE</b></p> <p>at center of disposal area</p> <p>Lat. <u>44</u> d <u>26</u> m <u>08</u> s</p> <p>Lon. <u>69</u> d <u>42</u> m <u>37</u> s</p> <p>If g.p.s, state margin of error:</p>

**SITE EVALUATOR STATEMENT**

I certify that on 11/9/11 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature: [Signature] SE # 046 Date: 11/10/11

Site Evaluator Name Printed: Albert E. Hodsdon Telephone Number: 873-5164 E-mail Address: \_\_\_\_\_

PF 11/15/11

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services  
Div of Environmental Health, 11 SHS  
(207) 287-5872 Fax: (207) 287-4172

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; CAUTION: LPI APPROVAL REQUIRED &lt;&lt;</b>	
City, Town, or Plantation	Augusta	T I AUGUSTA Date Permit Issued: 11/15/11 Local Plumbing Inspector Signature: <i>James R. Yalkin</i> L.P.I. # 1850	PERMIT # 15.00 6825 TOWN COPY \$21510.90 <input type="checkbox"/> Double Fee <input checked="" type="checkbox"/> FEE Charged
Street or Road	Church Hill Rd		
Subdivision, Lot #	1-11-61		
<b>OWNER/APPLICANT INFORMATION</b>		<b>The subsurface wastewater disposal system shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.</b>  Municipal Tax Map # <u>3</u> Lot # <u>22</u>	
Name (last, first, MI)	Lord, Timothy <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant		
Mailing Address of Owner/Applicant	3 Lord Lane Vassalboro, Me 04989		
Daytime Tel. #	441-5794		
<b>OWNER OR APPLICANT STATEMENT</b>		<b>CAUTION: INSPECTION REQUIRED</b>	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit. Signature of Owner or Applicant: _____ Date: 11/16/11		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. Local Plumbing Inspector Signature: _____ (1st) date approved: _____ _____ (2nd) date approved: _____	

PERMIT INFORMATION		
<b>TYPE OF APPLICATION</b> <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type replaced: _____ Year installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. >25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<b>DISPOSAL SYSTEM COMPONENTS</b> <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components
<b>SIZE OF PROPERTY</b> 20 <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	<b>DISPOSAL SYSTEM TO SERVE</b> <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) <u>Tobe</u> Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
<b>TREATMENT TANK</b> <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000</u> GAL.	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>900</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet	<b>DESIGN FLOW</b> <u>270</u> gallons per day BASED ON: <input type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities <u>3 bedrooms @ 90 gpd/ea</u> <input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION <u>31C</u> at Observation Hole # <u>TP1</u> Depth <u>17"</u> of Most Limiting Soil Factor	<b>DISPOSAL FIELD SIZING</b> <input type="checkbox"/> 1. Medium--2.6 sq. ft. / gpd <input checked="" type="checkbox"/> 2. Medium--Large 3.3 sq. ft. / gpd <input type="checkbox"/> 3. Large--4.1 sq. ft. / gpd <input type="checkbox"/> 4. Extra Large--5.0 sq. ft. / gpd	<b>EFFLUENT/EJECTOR PUMP</b> <input checked="" type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	<b>LATITUDE AND LONGITUDE</b> at center of disposal area Lat. <u>44</u> d <u>22</u> m <u>08</u> s Lon. <u>69</u> d <u>42</u> m <u>39</u> s if g.p.s., state margin of error: _____

SITE EVALUATOR STATEMENT		
I certify that on <u>11/9/11</u> (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).		
<u>Albert E. Hodsdon</u> Site Evaluator Signature	<u>046</u> SE #	<u>11/10/11</u> Date
<u>Albert E. Hodsdon</u> Site Evaluator Name Printed	<u>873-5164</u> Telephone Number	_____ E-mail Address

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
 Division of Health Engineering  
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

Augusta

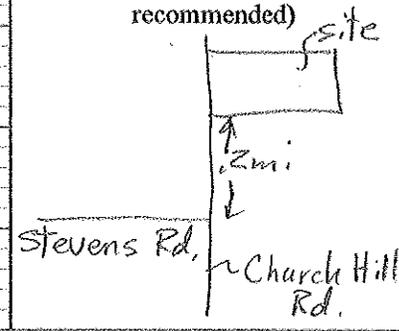
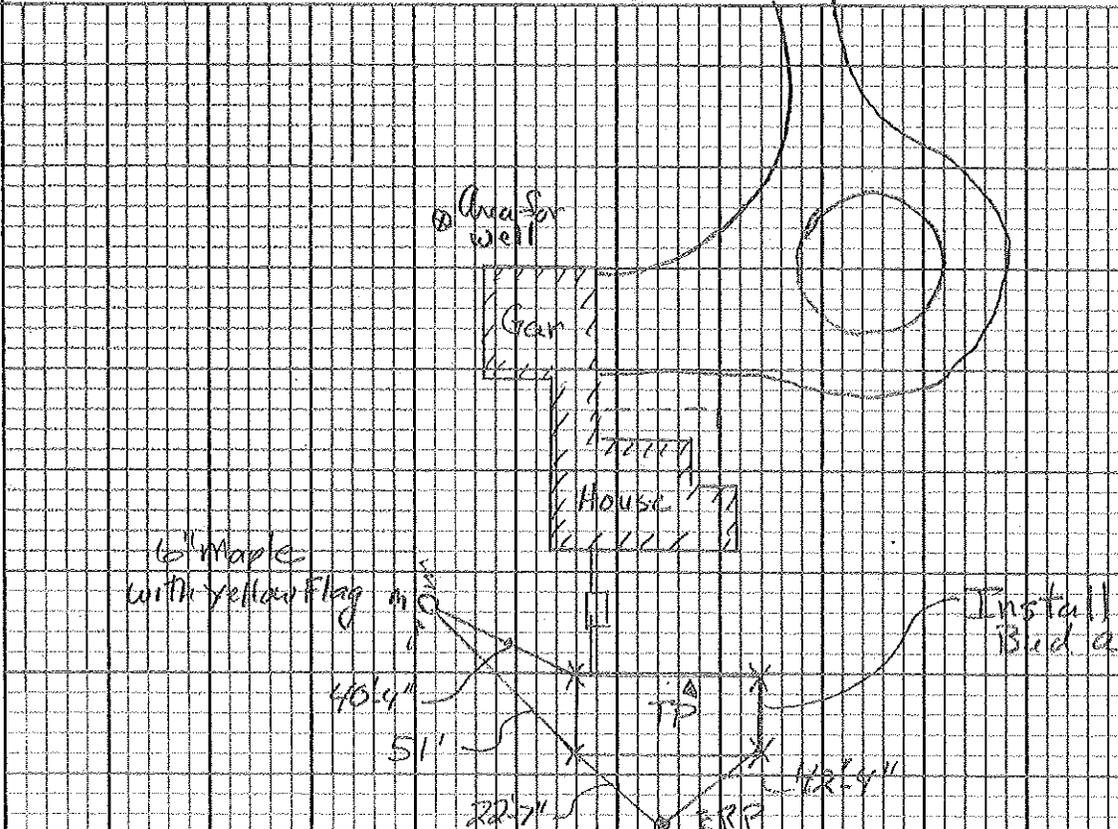
Church Hill Rd.

Timothy Lord

SITE PLAN

Scale 1" = 50 ft. or as shown

SITE LOCATION PLAN  
 (map from Maine Atlas recommended)



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

Observation Hole TP  Test Pit  Boring  
 ± " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	Sandy loam	loose	DK Br Red Br	
10			Yellow Br	
20		firm	gray Br	17" faint
30	stones			
40	ledge @ 4'+			
50				

Observation Hole \_\_\_\_\_  Test Pit  Boring  
 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification <u>3 C</u> Profile Condition	Slope <u>02</u> %	Limiting Factor <u>17</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
--	----------------------	--------------------------------	--

Soil Classification _____ Profile Condition	Slope ____ %	Limiting Factor ____ "	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
---	-----------------	---------------------------	---

Allan E. Hodson  
 Site Evaluator Signature

046  
 SE #

11/10/11  
 Date

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Health & Human Services  
 Division of Environmental Health  
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation

Augusta

Street, Road, Subdivision

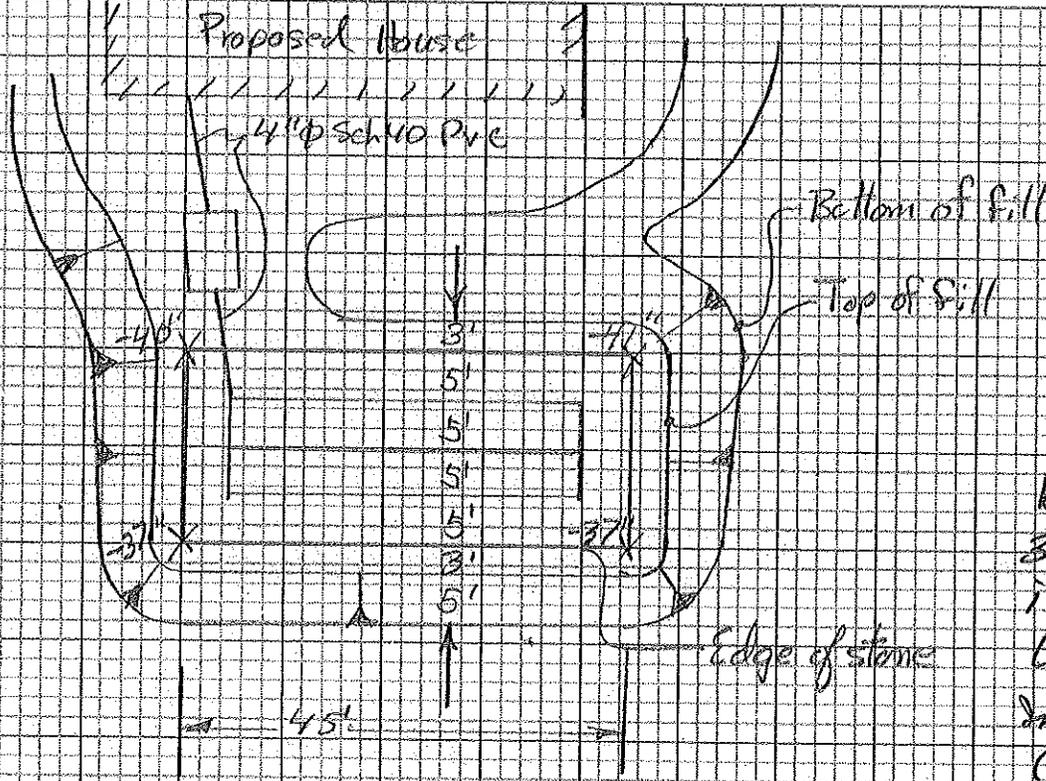
Church Hill Rd.

Owner's Name

Timothy Lord

**SUBSURFACE WASTEWATER DISPOSAL PLAN**

SCALE: 1" = 20 FT.



Install 20' x 45' stone bed as staked with  
 3' row of 4" φ perf. pipe  
 in a continuous grid  
 loam, seed & mulch  
 install according to  
 Code

**FILL REQUIREMENTS**

**CONSTRUCTION ELEVATIONS**

**ELEVATION REFERENCE POINT**

Depth of Fill (Upslope) 19"  
 Depth of Fill (Downslope) 24"  
 Finished Grade Elevation  
 Top of Distribution Pipe or Proprietary Device  
 Bottom of Disposal Area

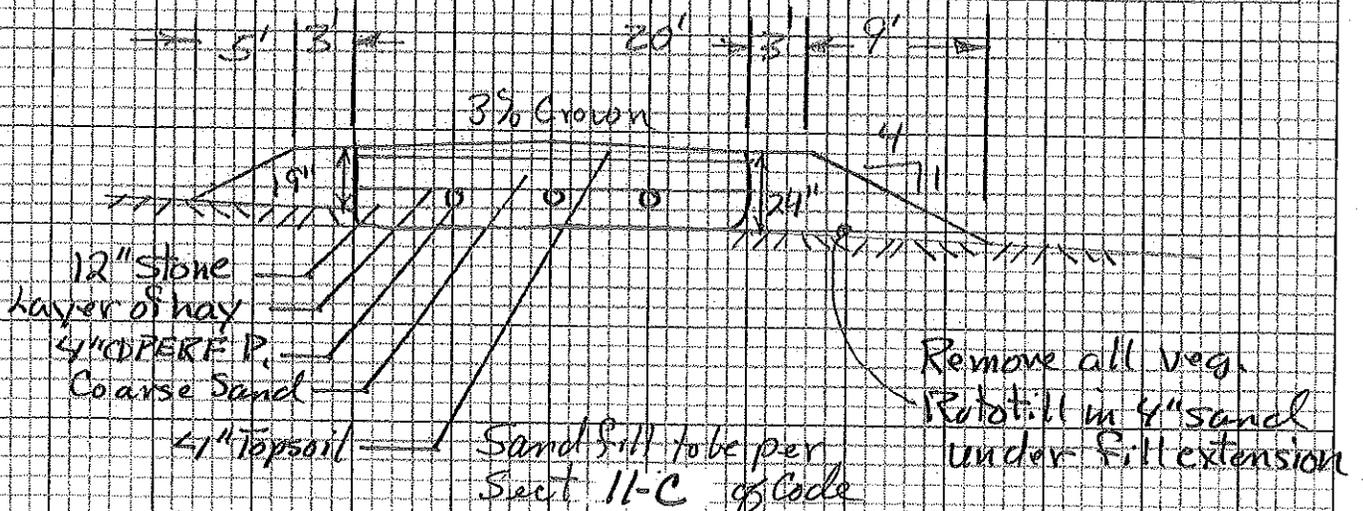
-18"  
 -30"  
 -42"

Location & Description: Nardin 7"  
 Maple 37" High  
 Reference Elevation: 0"

**DISPOSAL AREA CROSS SECTION**

Scale

Horizontal 1" = 10 ft.  
 Vertical 1" = 5 ft.



Albert G. Hedden

046

11/10/11

## TAKING CARE OF YOUR SYSTEM

Your on-site wastewater treatment system represents a significant investment, which you will want to protect. With proper operation and regular maintenance, your system will function better and last longer.

Do not wait until your system shows signs of failure to have your septic tank pumped out. Waiting can mean complete clogging and an expensive repair bill. Call a septic system pumper to inspect your system AT LEAST ONCE EVERY THREE YEARS and pump as needed. Periodic pumping of the septic tank is far less costly than repair or replacement of the entire system.

While your tank is being pumped, ask the operator to examine the inlet and outlet baffles or tees in the septic tank. If either is broken, have repairs done immediately. The inlet should also be checked to see if wastewater is continuously flowing into the tank from previously undetected plumbing leaks. The outlet baffle is more important than the inlet baffle. Its loss will allow untreated material to go directly to the absorption area; failure of the system is the common result.

### SOME "DO'S" AND "DON'TS"

#### Some DO's:

- Do conserve water to reduce the amount of wastewater that must be treated and disposed.
- Do only discharge biodegradable wastes into system.
- Do keep your septic tank cover accessible for tank inspections and pumping. Many persons install a concrete riser (or manhole) over the tank, if it is buried six inches or deeper, to provide easy access for inspection and pumping. Don't cover the septic tank or drainfield with asphalt or concrete.
- Do have your septic tank pumped regularly and checked for leaks and cracks. Tanks should be pumped at least once every three (3) to seven (7) years. Keep a schedule and record of past and future inspections and pumping (use the chart on the back cover).
- Do be sure that water from the roof, gutters, and foundation drains do not flow over or into the system.
- Do call a septic professional when you have problems.
- Do compost your garbage or put it in the trash rather than into the septic system.
- Do restrict use of a garbage grinder/disposal. Waste from garbage grinders will fill your septic tank more rapidly, requiring more frequent pumping, but will also float and increase the scum blanket thickness.

#### Some DON'Ts:

- Don't flush cigarette butts, cotton swabs, cat box litter, sanitary napkins, tampons, disposable diapers, condoms and other non-biodegradable products into your system.
- Don't poison your system by dumping solvents, oils, paints, thinners, disinfectants, pesticides or poisons down the drain which will kill bacteria that help purify sewage and can contaminate groundwater.
- Don't dig into your drainfield or build anything over it.
- Don't plant anything over your drainfield except grass.
- Don't drive over your drainfield or compact the soil in any way.
- Don't empty large quantities of water from items such as hot tubs, or whirlpools, particularly if they are chlorinated.
- Don't put in a separate pipe to carry wash waters to a side ditch or the woods. The *gray water* contains germs that can spread disease.
- Don't wait for signs of failure.
- Don't attempt to repair a failing system yourself. Hire an experienced septic system contractor. A repair permit may be needed from your local health department.

### SOME OTHER SYSTEM MANAGEMENT AND MAINTENANCE TIPS

- Water conservation will extend the life of your system.
- Drainfields do not have unlimited capacity. Drainfields are usually designed for a limited gallonage capacity per bedroom per day. Overloads can occur seasonally or daily.
- Save money. Commercial septic tank additives are not necessary. The bacteria needed for partially decomposing the tank solids are naturally present in sewage. Even if you use additives, you will still need to pump the solids out of the tank.
- When working with septic systems, do so carefully and safely. Sewage contains germs that can cause diseases. Never enter a septic tank. Toxic and explosive gases in the tank present a hazard. Old tanks can collapse. Electric controls present a shock and spark hazard. Secure the septic tank lid so children cannot open it.
- State laws require you to get a permit before repairing a failing system. It is important the system is repaired as soon as possible to minimize the health risk to your family and community.

### SIGNS OF POSSIBLE SEPTIC SYSTEM PROBLEMS

- Sewage backing up into toilets, tubs or sinks.
- Slowly draining fixtures, particularly after it has rained.
- The smell of raw sewage accompanied by extremely soggy soil over the drainfield.
- Sewage discharged over the ground or in nearby ditches or woods. This is defined as failure in most codes.
- Water test results indicating the presence of biological contamination or organic chemical contamination in the groundwater under the system.