SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Division of Health Engineering, 10 SH
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA
Street or Road	290 GROSS HILL ROAD
Subdivision, Lot #	

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

AUGUSTA PERMIT # 5842 TOWN COPY

Date Permit Issued 8/2/06 $ 100.00 ☐ If Double Fee Charged FEE

Local Plumbing Inspector Signature L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI) ROZELL, BRIAN ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 299 HUNTS MEADOW ROAD, WHITEFIELD, ME. 04353

Daytime Tel. # 549-0919

Municipal Tax Map # 4 Lot # 11A

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 7/24/06 Date

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 (1st) date approved 8/2/06 (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

☒ 1. First Time System
☐ 2. Replacement System
Type replaced: _____
Year installed: _____
☐ 3. Expanded System
☐ a. Minor Expansion
☐ b. Major Expansion
☐ 4. Experimental System
☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES

☒ 1. No Rule Variance
☐ 2. First Time System Variance
☐ a. Local Plumbing Inspector Approval
☐ b. State & Local Plumbing Inspector Approval
☐ 3. Replacement System Variance
☐ a. Local Plumbing Inspector Approval
☐ b. State & Local Plumbing Inspector Approval
☐ 4. Minimum Lot Size Variance
☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

☒ 1. Complete Non-engineered System
☐ 2. Primitive System (graywater & alt. toilet)
☐ 3. Alternative Toilet, specify: _____
☐ 4. Non-engineered Treatment Tank (only)
☐ 5. Holding Tank, _____ gallons
☐ 6. Non-engineered Disposal Field (only)
☐ 7. Separated Laundry System
☐ 8. Complete Engineered System (2000 gpd or more)
☐ 9. Engineered Treatment Tank (only)
☐ 10. Engineered Disposal Field (only)
☐ 11. Pre-treatment, specify: _____
☐ 12. Miscellaneous Components

SIZE OF PROPERTY

4.29 ☐ SQ. FT. ☒ ACRES

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE

☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 3
☐ 2. Multiple Family Dwelling, No. of Units: _____
☐ 3. Other: _____ (specify)

Current Use ☐ Seasonal ☐ Year Round ☒ Undeveloped

TYPE OF WATER SUPPLY

☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private
☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

☒ 1. Concrete
☒ a. Regular
☐ b. Low Profile
☐ 2. Plastic
☐ 3. Other: _____
CAPACITY: 1000 GAL.

DISPOSAL FIELD TYPE & SIZE

☒ 1. Stone Bed ☐ 2. Stone Trench
☐ 3. Proprietary Device
☐ a. cluster array ☐ c. Linear
☐ b. regular load ☐ d. H-20 load
☐ 4. Other: _____
SIZE: 900 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

☒ 1. No ☐ 2. Yes ☐ 3. Maybe
If Yes or Maybe, specify one below:
☐ a. multi-compartment tank
☐ b. ___ tanks in series
☐ c. increase in tank capacity
☐ d. Filter on Tank Outlet

DESIGN FLOW

270 gallons per day
BASED ON:
☒ 1. Table 501.1 (dwelling unit(s))
☐ 2. Table 501.2 (other facilities)
SHOW CALCULATIONS for other facilite
☐ 3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	C	7

at Observation Hole # 1
Depth 18"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

☐ 1. Small—2.0 sq. ft. / gpd
☐ 2. Medium—2.6 sq. ft. / gpd
☒ 3. Medium—Large 3.3 sq. ft / gpd
☐ 4. Large—4.1 sq. ft. / gpd
☐ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

☒ 1. Not Required
☐ 2. May Be Required
☐ 3. Required
Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 21 m 10 s
Lon. 69 d 40 m 20 s
if g.p.s, state margin of error: ±20'

SITE EVALUATOR STATEMENT

I certify that on 7/12/06 (date) I completed a site evaluation on this property and state that the data reported are accurate an that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

John Brochu	194	7/13/06
Site Evaluator Signature	SE #	Date
JOHN BROCHU	968-3434	johnb@pivot.net
Site Evaluator Name Printed	Telephone Number	E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

HHE-200 Rev. 4/05

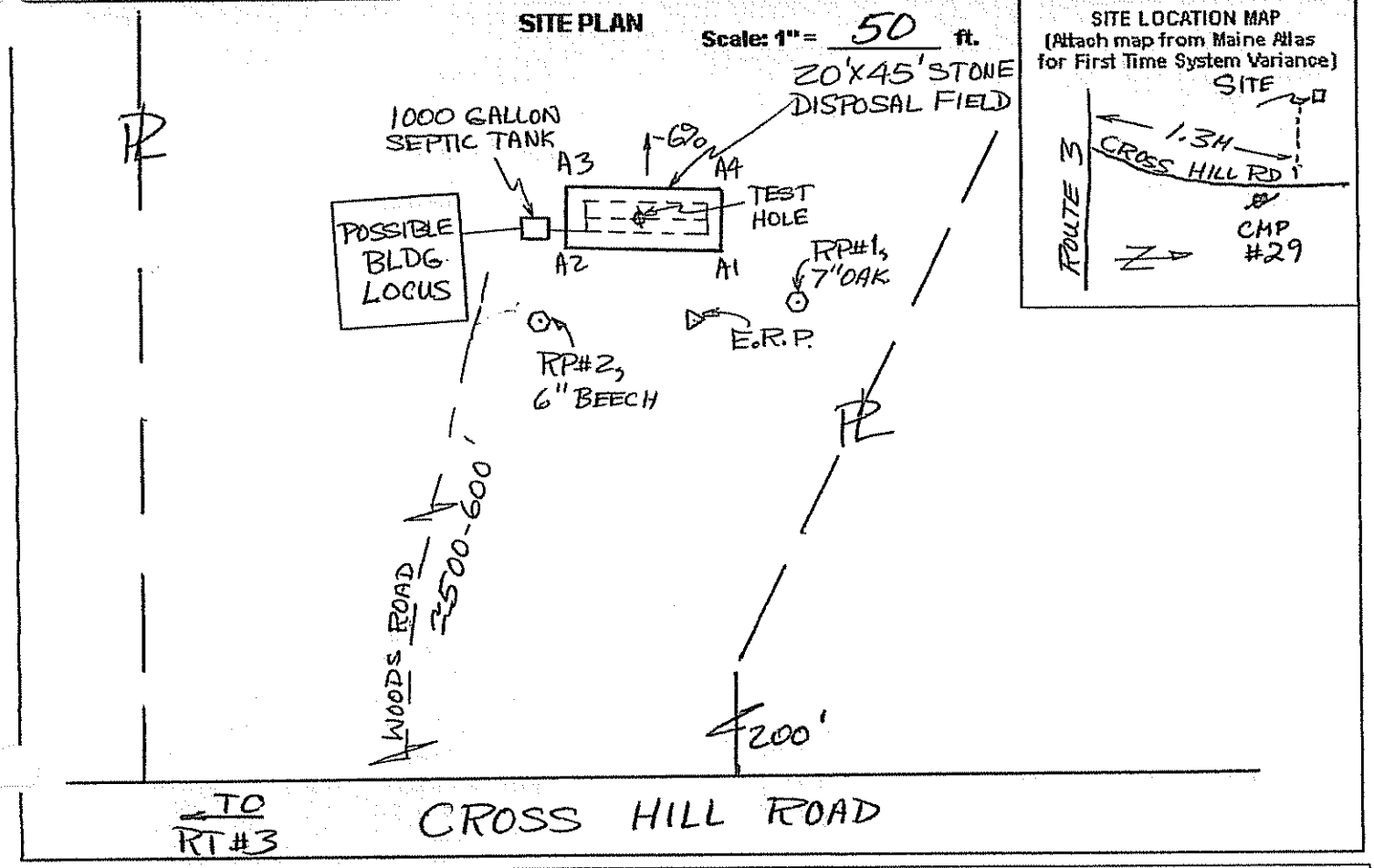
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	290 CROSS HILL ROAD	BRIAN ROZELL

SITE PLAN

Scale: 1" = 50 ft.



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

Observation Hole # 1 ☒ Test Pit ☐ Boring

3" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	STONEY		DK BROWN	
6	SANDY		ORANGE BROWN	NONE
12	LOAM	FRIABLE		
18			OLIVE BROWN	
24	COBBLY			
30	SANDY SILTY		OLIVE	COMMON
36	LOAM	FIRM		
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	C	-6½	18"	☒ Groundwater ☐ 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				
12				
18				
24				
30				
36				
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
				☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

John Brochu — Site Evaluator Signature

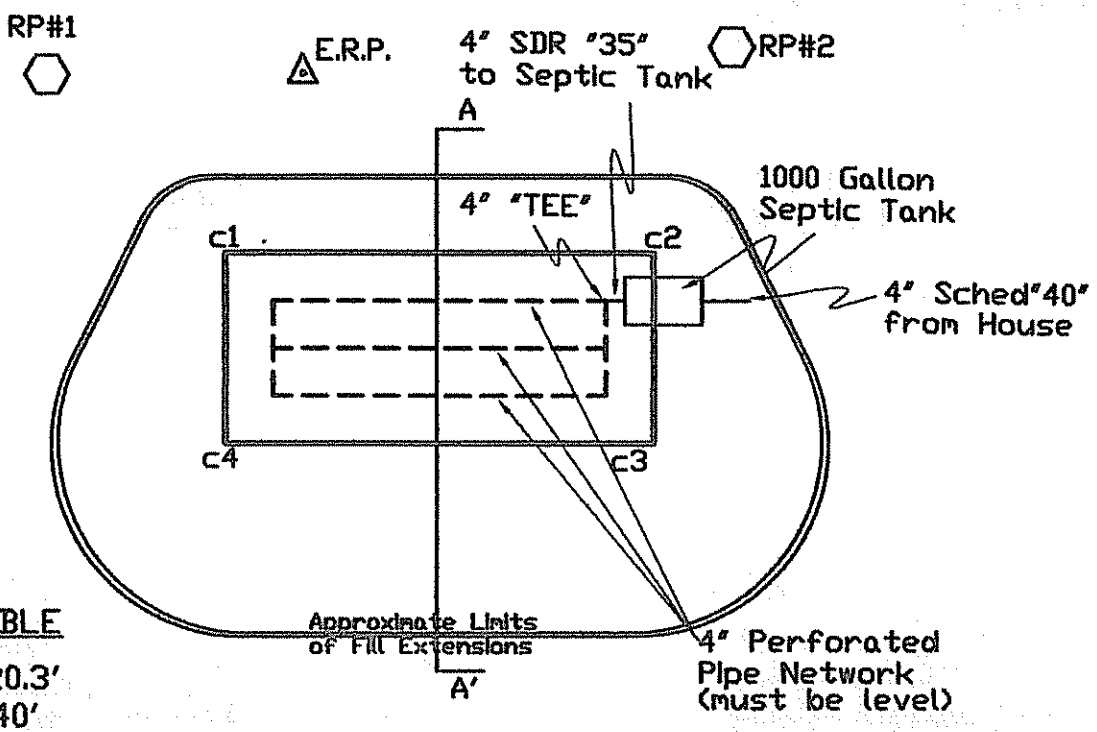
194 — SE #

7/14/06 — Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION		Department of Human Services Division of Health Engineering (207) 287-5672 Fax: (207) 287-3165
Town, City, Plantation AUGUSTA	Street, Road, Subdivision CROSS HILL ROAD	Owner's Name BRIAN ROZELL

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



DISTANCE TABLE

ERP-c1 = 20.3'
ERP-c2 = 40'
RP#1-c1 = 26.3'
RP#2-c2 = 23.1'

20' x 45' STONE BED

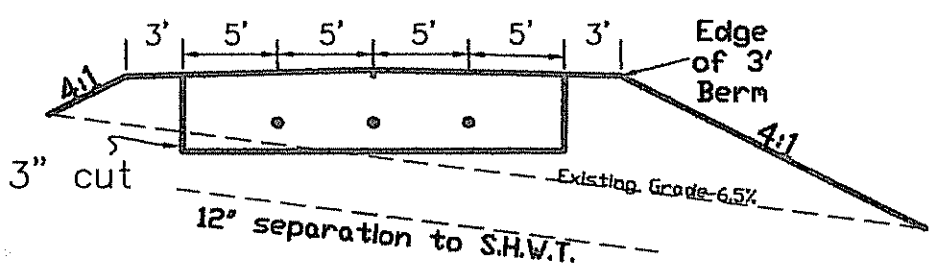
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT Location & Description:
Depth of Fill (Upslope)	18"	Finished Grade Elevation	-42"	Nail 27" above ground on
		Top of Distribution Pipe or Proprietary Device	-55"	7" Beech tree.
Depth of Fill (Downslope)	33"	Bottom of Disposal Area	-66"	Reference Elevation: 0.0"

DISPOSAL AREA CROSS SECTION

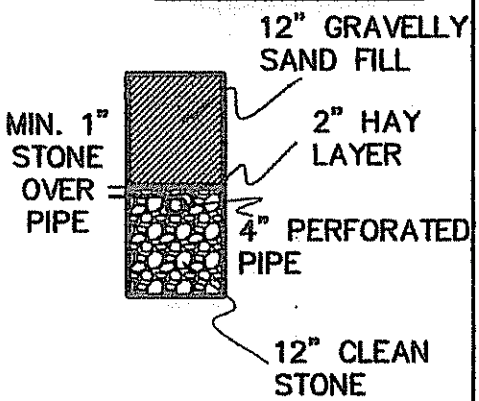
*Scarify surface before placing fill
*Fill To be Gravelly sand
*Loam & seed to prevent erosion
*Slope Surface @ 3%

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

A — A'



DETAIL—NO SCALE



John Blochlin	194	7/14/2006	Page 3 of 3
Site Evaluator Signature	SE #	Date	HHE-200 Rev. 8/01