(Map 4A / lot 53+54)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

4A-53+54

AUGUSTA PERMIT # 1,402 TOWN COPY

Date Permit Issued 8/17/88 $ 40 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 883

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	THREE CORNERED POND FOX GLEN DEV. LOTS G32 B18

PROPERTY OWNERS NAME

Last: NED CORP First:

Applicant Name:	
Mailing Address of Owner/Applicant (if Different)	304 FELLSWAY WEST MEDFORD MA 02155

Owner/Applicant Statement

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

Signature of Owner/Applicant — Date

Caution: Inspection Required

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

Local Plumbing Inspector Signature — Date Approved 8-24-88

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# ____
9. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED ____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: ____

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
a. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER ____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)
INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK ____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

SIZE OF PROPERTY	ZONING
1.5± ACRES	SHORELAND

TYPE OF WATER SUPPLY
DRILLED WELL (PROPOSED)

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC
SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET
SPECIFY: ____

PUMPING
1. ☐ NOT REQUIRED
2. ☒ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED
DOSE: 60± GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3 BEDROOM SINGLE FAMILY DWELLING

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 17.

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 900 Sq. Ft.
2. ☐ CHAMBER ____ Sq. Ft.
☐ REGULAR ☐ H-20
3. ☐ TRENCH ____ Linear Ft.
4. ☐ OTHER: ____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 9/24/87 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Site Evaluator Signature — SE# 168 — Date 12/7/87

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

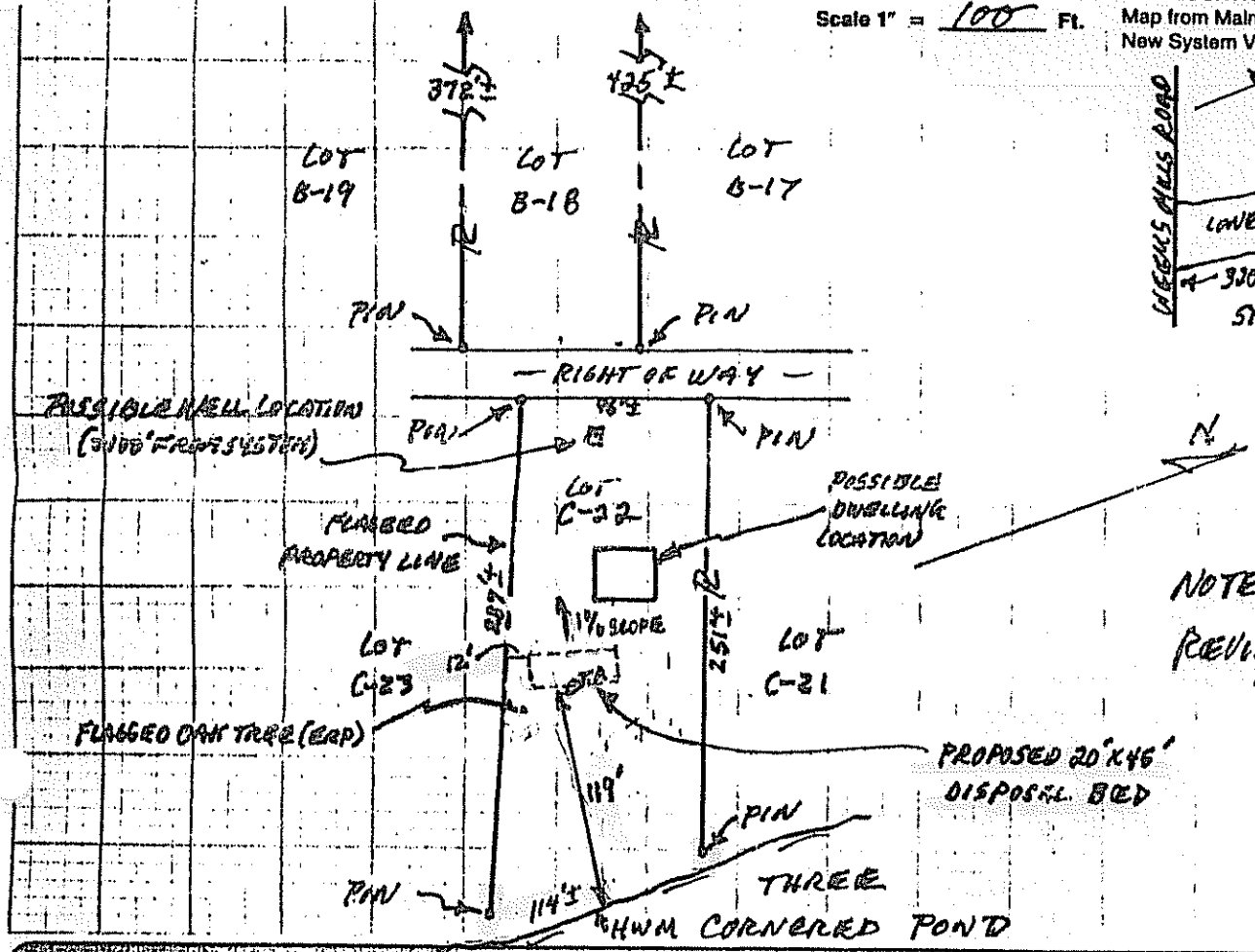
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: THREE CORNERED POND FOX GLEN DEV. LOTS C-22, B-18

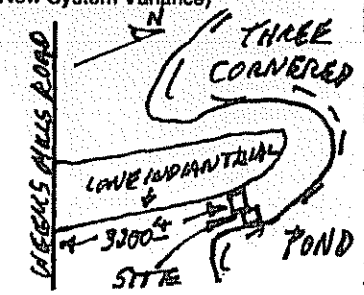
Owners Name: NED CORP

SITE PLAN

Scale 1" = 100 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



NOTE: PAGE TWO REVISED 8/16/88.

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

Observation Hole # C-22 ☒ Test Pit ☐ Boring

ONE " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
		BROWN	
SANDY		YELLOW	
	FRIABLE	BROWN	
LOAM			
		GRAY	COMMON
FINE			
SANDY	FIRM	BROWN	DISTINCT
LOAM			

Soil	Classification	Slope	Limiting Factor	
3 (Profile)	C (Condition)	1 %	17	☒ Ground Water ☐ 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

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature

168
SE #

12/7/87
Date 8/16/88

HHE-200 Rev. 1/84

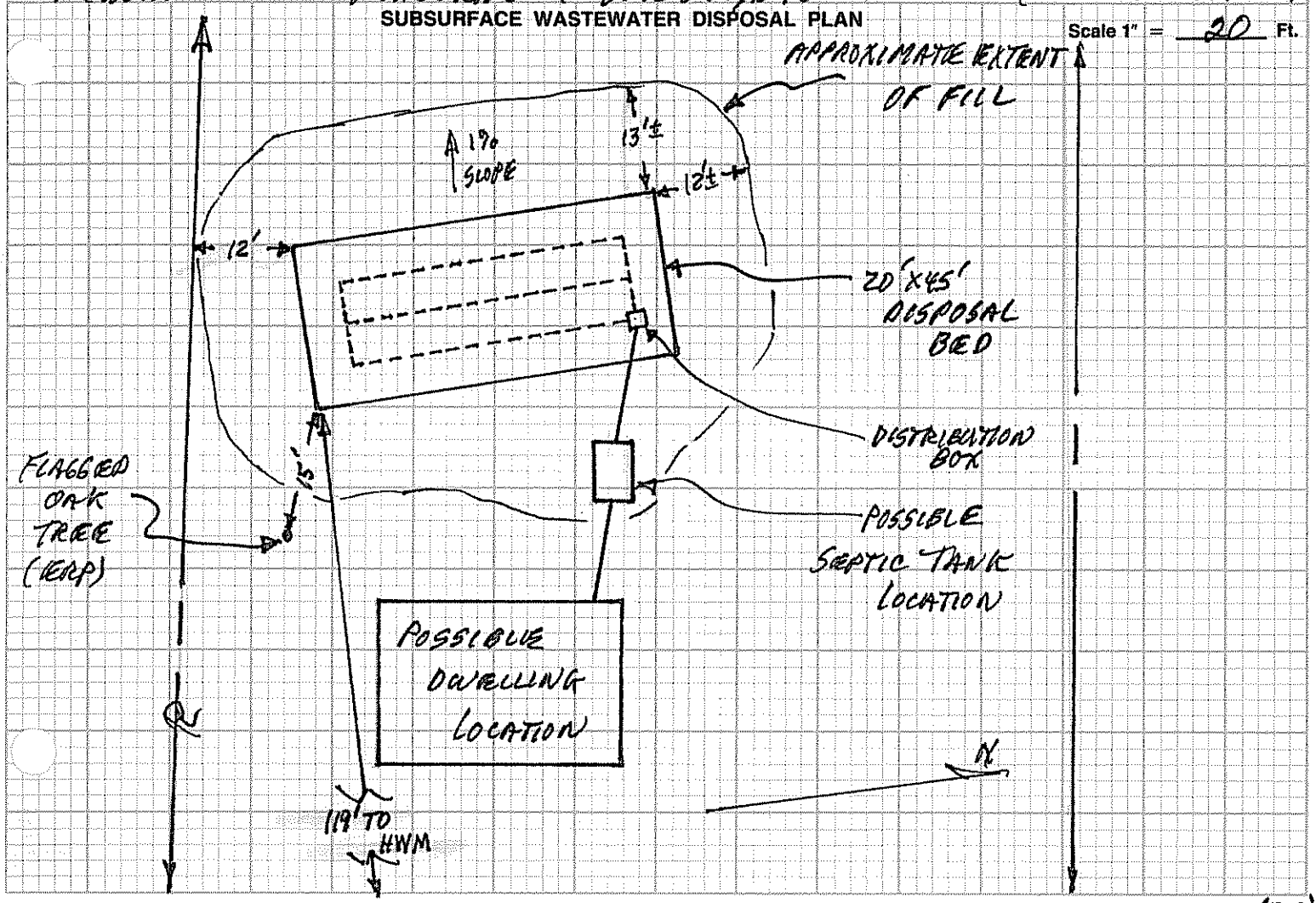
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	THREE CORNERED POND FOXGLEN DEV. LOTS 0-22, B-18	NED CORP. (PETER & THERESA ELLIN)

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT (ERP) LOCATION & DESCRIPTION
Depth of Fill (Upslope)	27"	Reference Elevation is	0	FLAGGED NAIL IN OAK TREE 48" ABOVE EXISTING GRADE AT TREE.
Depth of Fill (Downslope)	29±"	Bottom of Disposal Area	-56"	
		Top of Distribution Lines or Chambers	-45"	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = Ft.
Horizontal: 1 Inch = Ft.

(SEE ATTACHED BED DIAGRAM)

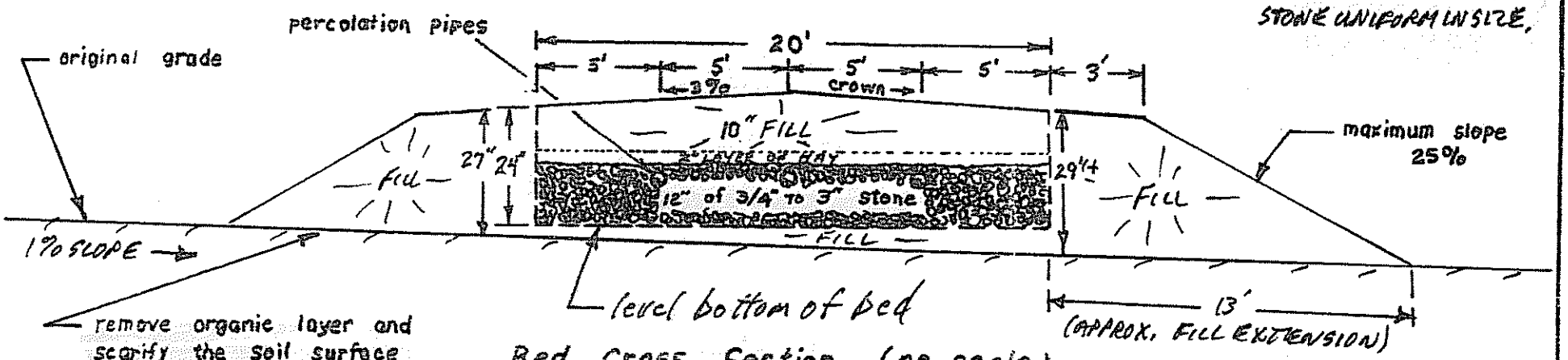
NOTE: LOCATION REVISED FROM PLAN OF 12/7/87.

Site Evaluator Signature	SE#	Date
[signature]	168	8/16/88

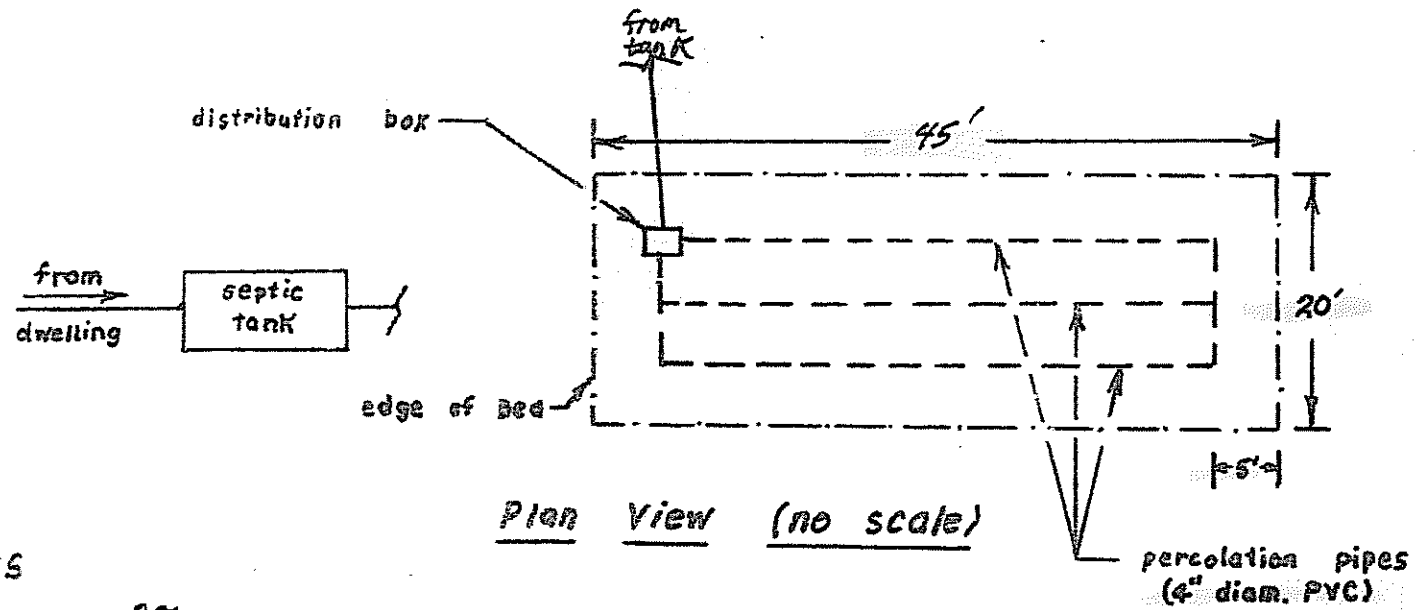
L[illegible]T+MULCH
[illegible] COVER.

SEWAGE DISPOSAL BED DETAILS

BED REQUIRES CLEAN STONE UNIFORM IN SIZE.



Bed Cross Section (no scale)



Plan View (no scale)

NOTES

1.) 27 inches of fill is required at uphill side of bed.
2.) Texture of fill shall be similar to original soil, sandy loam or coarser.
3.) Refer to the MAINE STATE PLUMBING CODE, PART II for further details regarding installation procedures.

FOR: FRED COPP (PETER+THERESA ELGIN)
DATE: 8/16/88
BY: JOHN W. LORD, JR. # 168

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Owners Name: NED CORP

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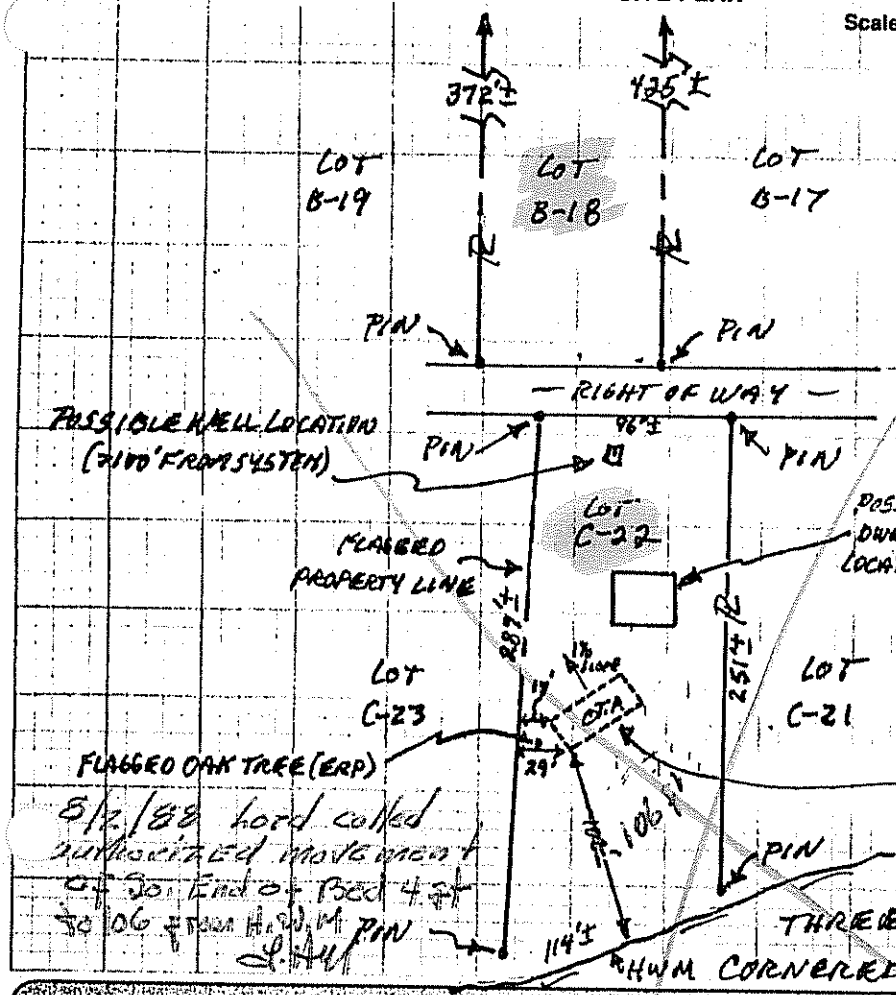
Scale 1" = 100 Ft.



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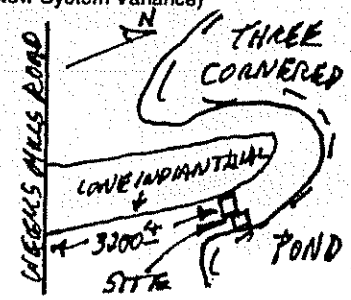

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole # C-22 ☒ Test Pit ☐ Boring

ONE " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	SANDY LOAM	FRIABLE	BROWN	
6–10			YELLOW BROWN	
10–15				
15–20			GRAY	COMMON
20–30	FINE SANDY LOAM	FIRM	BROWN	DISTINCT
30–40				
40–50				

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor	
3	e	1 %	17	☒ Ground Water ☐ 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				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor	
		%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature

168
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HHE-200 Rev. 1/84

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SUBSURFACE WASTEWATER DISPOSAL PLAN

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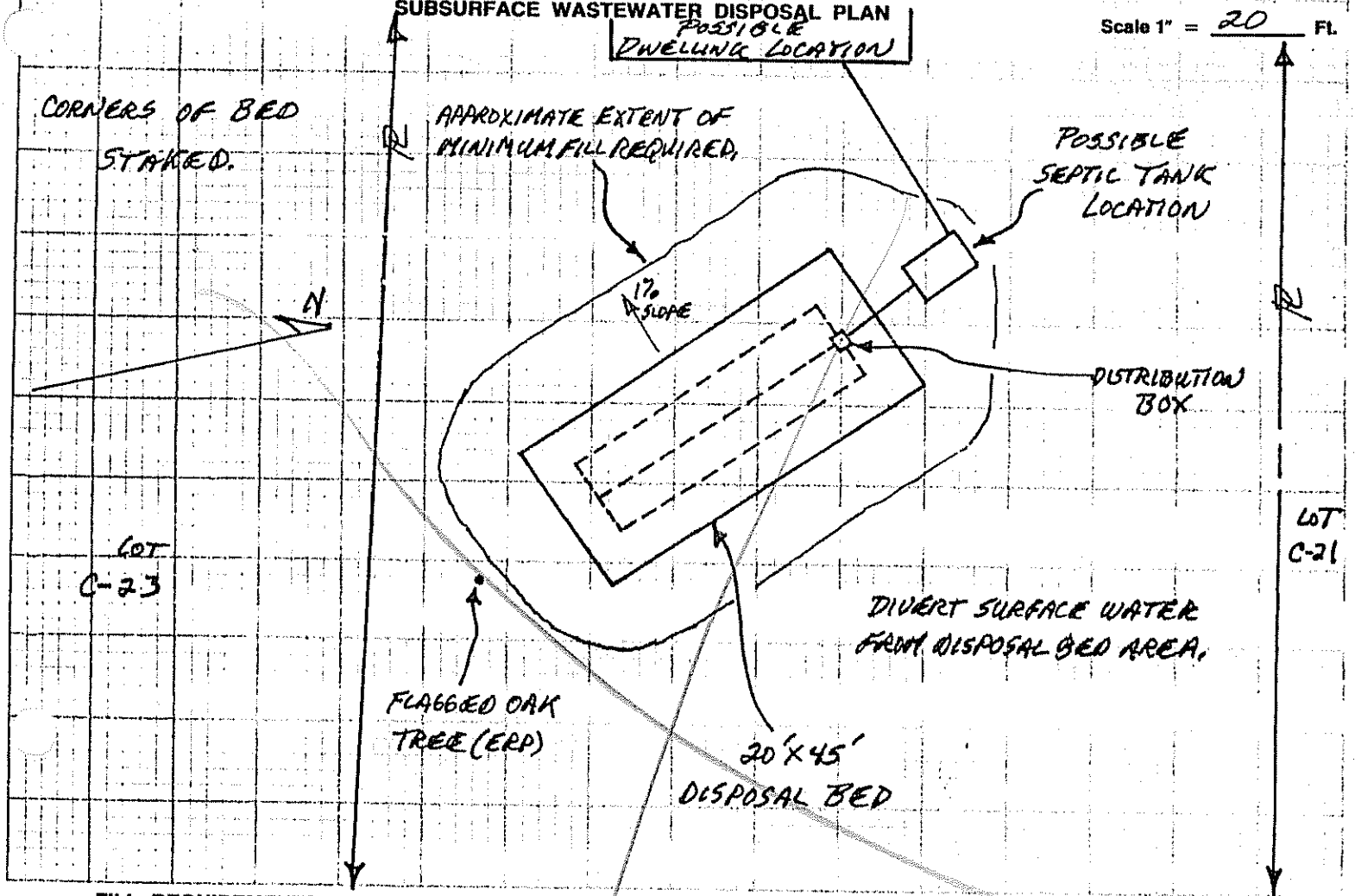


FILL REQUIREMENTS

Depth of Fill (Upslope)	19"
Depth of Fill (Downslope)	21±"

CONSTRUCTION ELEVATIONS

Reference Elevation is	0
Bottom of Disposal Area	-56"
Top of Distribution Lines ~~or Chambers~~	-45"

ELEVATION REFERENCE POINT (ERP) LOCATION & DESCRIPTION

FLAGGED NAIL IN OAK TREE 48" ABOVE EXISTING GRADE AT TREE.

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = Ft.

Horizontal: 1 Inch = Ft.

(SEE ATTACHED BED DIAGRAM)

Site Evaluator Signature

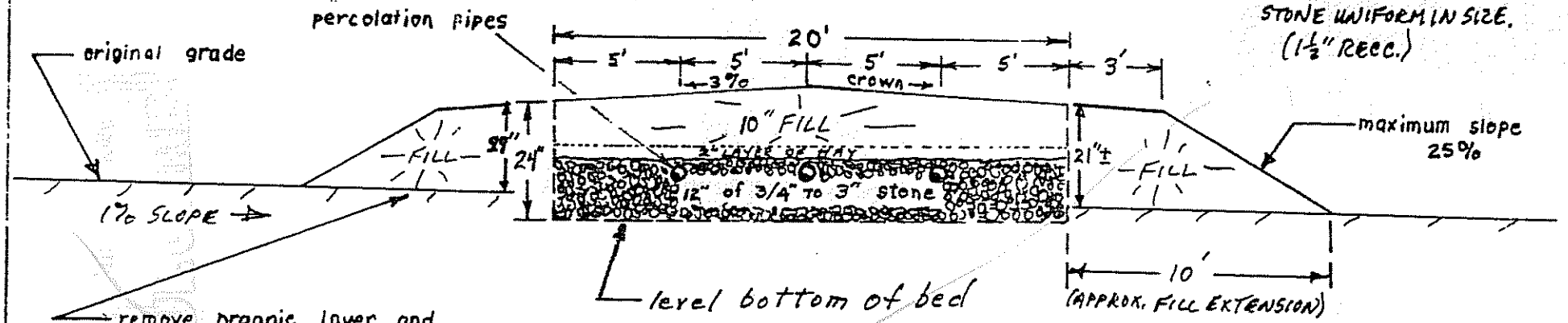
168
SE#

12/7/87
Date

HHE-200 Rev. 1/84

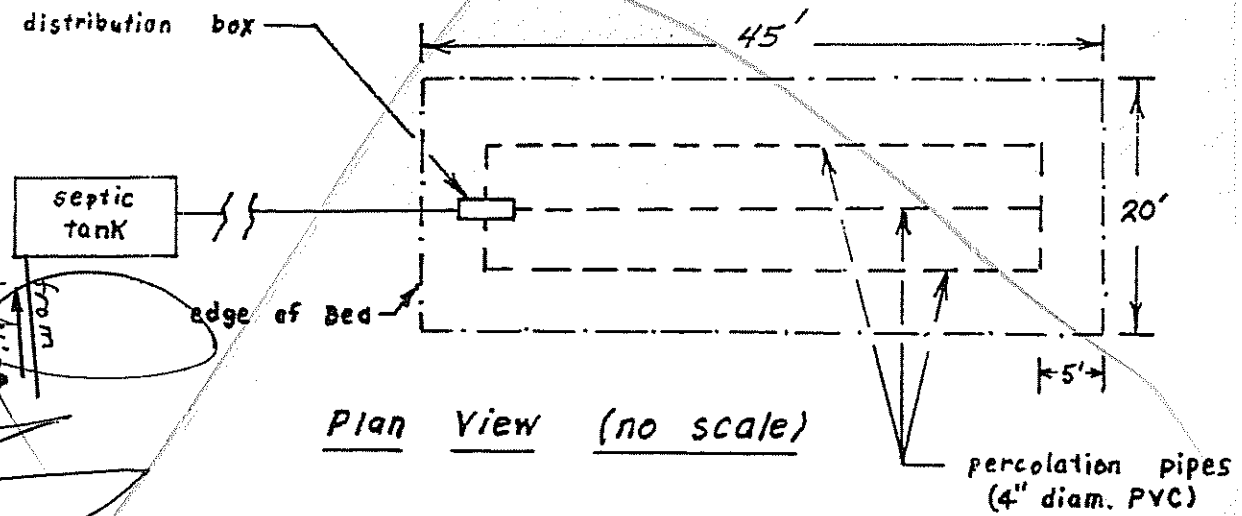
• SEWAGE DISPOSAL BED DETAILS •

BED REQUIRES CLEAN STONE UNIFORM IN SIZE. (1½" REEC.)



remove organic layer and scarify the soil surface before installing fill.

Bed Cross Section (no scale)



Plan View (no scale)

NOTES

1.) 19 inches of fill is required at uphill side of bed.
2.) Texture of fill shall be similar to original soil, sandy loam or coarser.
3.) Refer to the MAINE STATE PLUMBING CODE, PART II for further details regarding installation procedures.

FOR: NEO CORP

DATE: 12/7/87

BY: JOHN W. LORD, JR. # 168

C-22, B-18