SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation	
Street or Road	157 Lone Indian Trail + Birch Canoe Trail
Subdivision, Lot #	Lot B13 Waterfront Promenade

>> Caution: Permit Required – Attach In Space Below <<

AUGUSTA
Date Permit Issued 12-12-04
Local Plumbing Inspector Signature
5208 TOWN COPY
$ 100.00 FEE ☐ If Double Fee Charged
L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Kerr Lee (Owner / Applicant)
Mailing Address of ☒ Owner ☐ Applicant	RR 4, Box 7910
	Pittston, ME 04345
Daytime Tel. #	(207) 582-0513

Municipal Tax Map # 4A Lot # 100-136

Owner or Applicant Statement

I state 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 12/11/03

Caution: Inspections 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 3/9/04 — (2nd) Date Approved 3/11/04

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☒ First Time System
2. ☐ Replacement System
Type Replaced: ____
Year Installed: ____
☐ Expanded System
a. ☐ One-time exempted
b. ☐ Non-exempted
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 Approval

DISPOSAL SYSTEM COMPONENT(S)
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
1.7 ± ☐ 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

Proposed 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 1,000 gallons

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 1,000 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
1. ☒ No 3. ☐ Maybe
2. ☐ Yes >> Specify one below:
a. ☐ Multi-compartment Tank
b. ☐ Tanks in Series
c. ☐ Increase in Tank Capacity
d. ☐ Filter on Tank Outlet

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

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
3 / C / /
at Observation Hole # 1
Depth 20" Elevation -62"
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

PUMPING
1. ☐ Not Required
2. ☐ May Be Required
3. ☒ Required >> Specify only for engineered or experimental systems:
DOSE: Min. 50 gallons

SITE EVALUATOR STATEMENT

I certify that on 9/25/02 (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).

Kenneth G. Stratton — Site Evaluator Signature
157 — SE #
9/25/02 — Date
Kenneth G. Stratton — Site Evaluator Name Printed
(207) 377-6068 — Telephone #

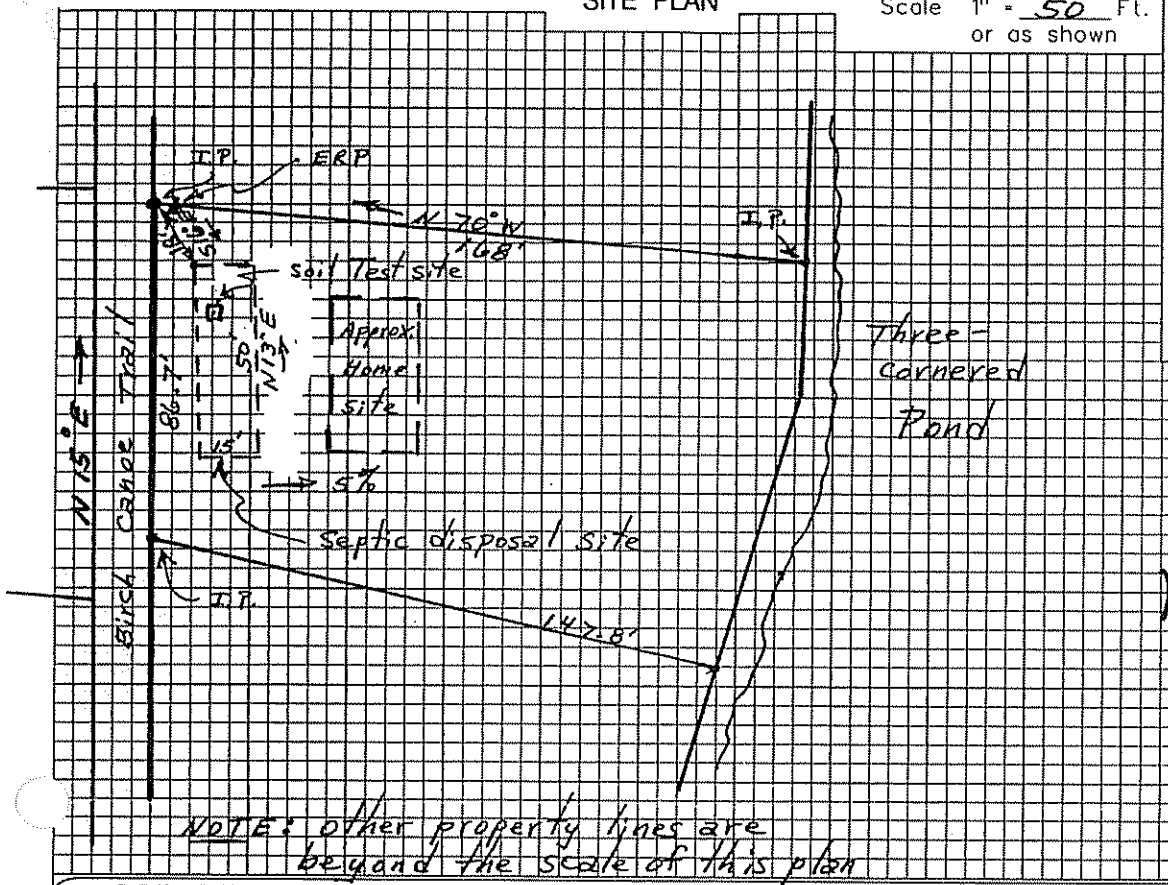
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: Augusta
Lot B13
Street, Road Subdivision: Lone Indian Trail
Owner's Name: Lee Kerr

SITE PLAN

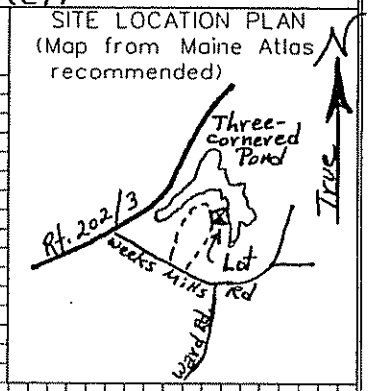
Scale 1" = 50 Ft. or as shown



NOTE: other property lines are beyond the scale of this plan

SITE LOCATION PLAN

(Map from Maine Atlas recommended)



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

Observation Hole _____ ☐ Test Pit ☒ Boring
3 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	Fine Sandy Loam	Friable	Grey	None
			Red-brown	
10			Yellow-brown	
20		Firm	Light olive	Few + distinct
30				
40				
50				

Soil Classification		Slope	Limiting Factor	
3 (Profile)	C (Condition)	5 %	20 "	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

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				
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Soil Classification		Slope	Limiting Factor	
Profile	Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

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157 — SE #
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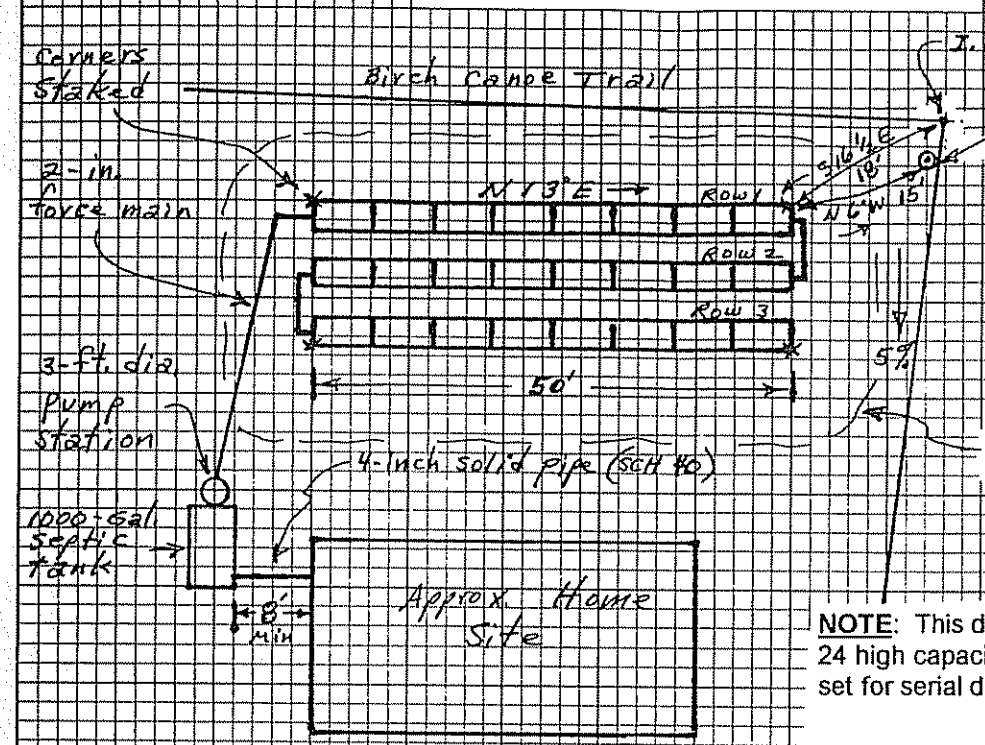
Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Lot B13 Lone Indian Trail	Lee Kerr

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



NOTE: This design requires installation of 24 high capacity Infiltrator units, or the equivalent, set for serial distribution.

NOTE: The well should be located a minimum of 100 feet from the septic system which includes the septic tank.

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	17"	Finished Grade Elevation	(See Attached)	Location & Description: Nail in utility pole located NW of system. Nail is 24" up on pole
Depth of Fill (Downslope)	18"	Top of Distribution Pipe or Proprietary Device		Reference Elevation: 0"
		Bottom of Disposal Area		

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 5'

(See Attached)

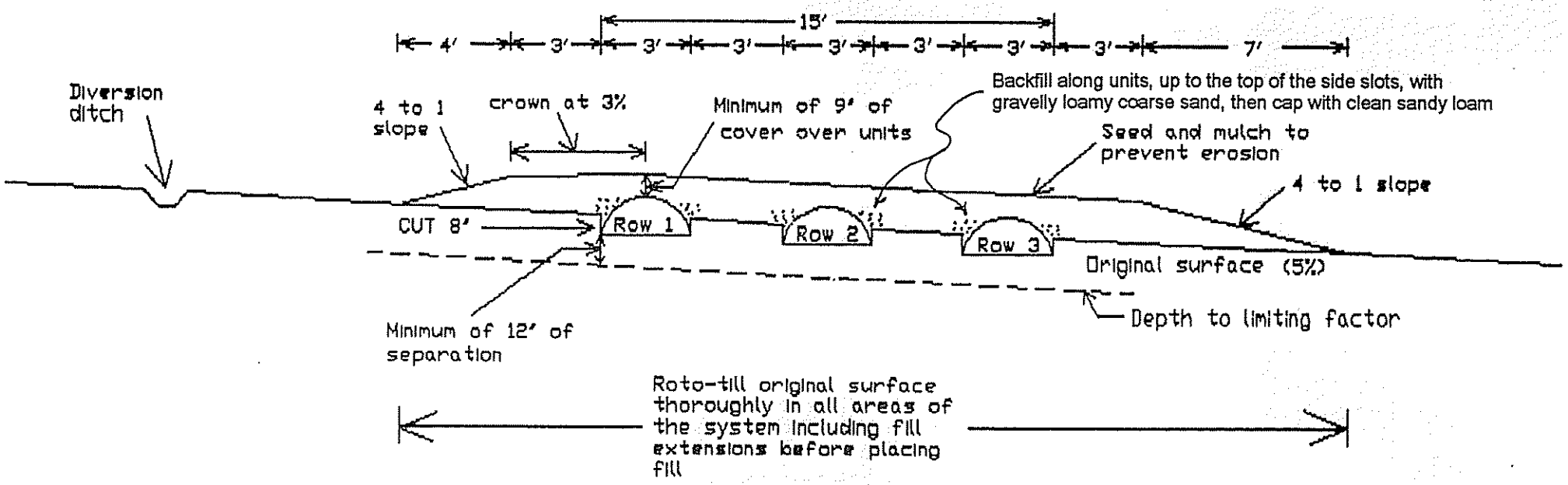
Kenneth G. Strattin — Site Evaluator Signature
157 — SE #
9/25/02 — Date

ATTACHMENT TO FORM HHE-200

Reference elevation = 0'

ELEVATION NOTES

	Top of Infiltrators	Bottom of Infiltrators	Final Grade:
ROW 1	-34"	-50"	-25"
ROW 2	-37"	-53"	-28"
ROW 3	-41"	-57"	-32"



SCALE:

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

Kenneth G. Stratton DATE: 9/25/02

Kenneth G. Stratton SE #157