SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA
Street or Road	40 MOUNT VERNON ROAD
Subdivision, Lot #	

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

AUGUSTA PERMIT # 6451 TOWN COPY

Date Permit Issued: 6/10/10 $ 150.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1805

OWNER/APPLICANT INFORMATION

Name (last, first, MI): JACQUES, ANTHONY ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 49 PUSHARD LANE, CHELSEA, ME 04330

Daytime Tel. #: 458-1992

Municipal Tax Map # 5 Lot # 99

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 6-1-10 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 7/19/10 (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
2. ☒ Replacement System
   Type replaced: BED
   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 PUMP CHAMBER

SIZE OF PROPERTY

±4.6 ☐ 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

EXISTING
☒ 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.
EXISTING

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: 1200 ☒ 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 facilites
☐ 3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
8 DI / 3

at Observation Hole # 1
Depth 14"
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. f.t / 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 20 m 35 s
Lon. 69 d 49 m 15 s
if g.p.s, state margin of error: _____

SITE EVALUATOR STATEMENT

I certify that on 2/10/10 (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 — SE # 226 REVISED — Date 2/10/13 5/24/10

VAUGHN L. SMITH — 724-5635 — SOILTESTMAN@AOL.COM

Site Evaluator Name Printed — Telephone Number — E-mail Address

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

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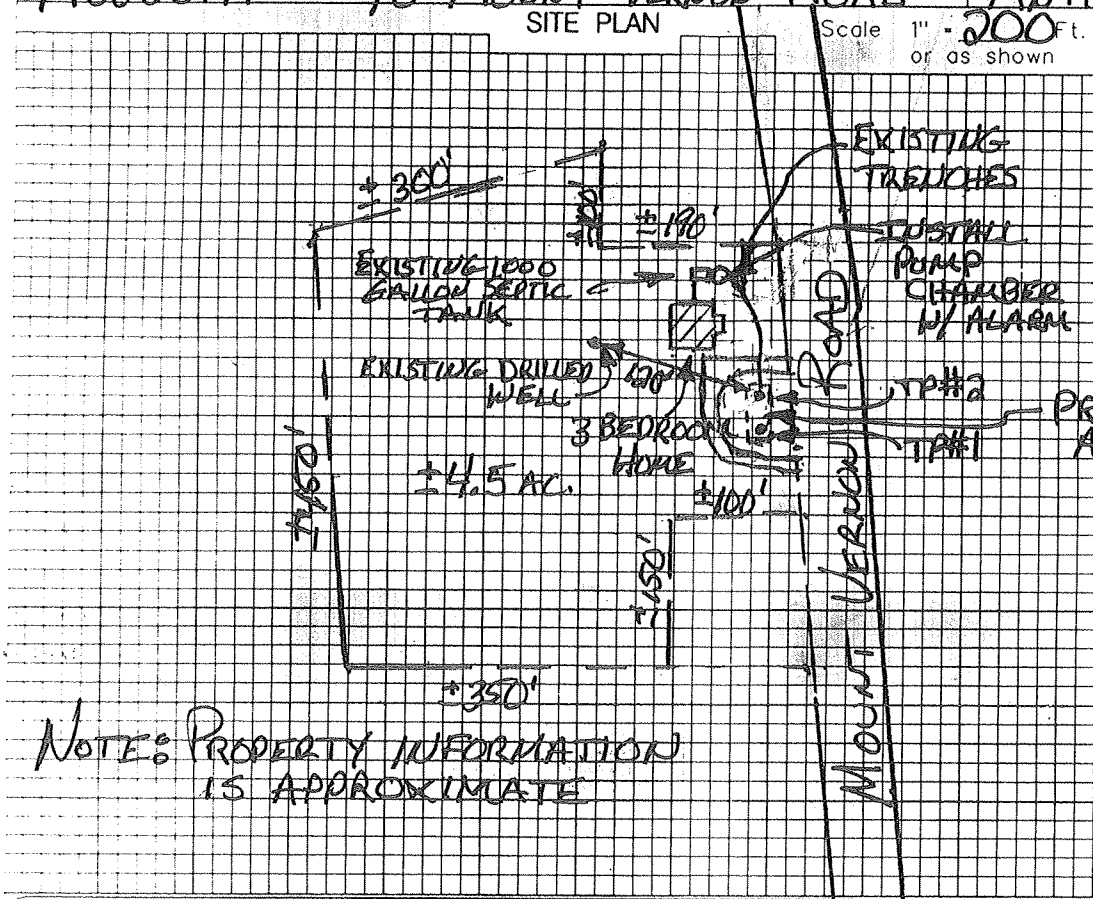
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

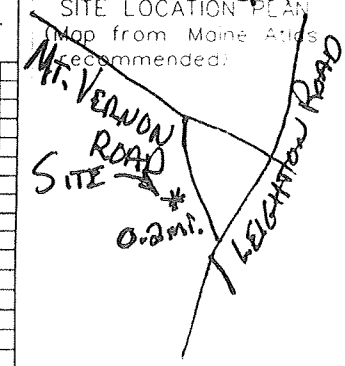
Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 40 MOUNT VERNON ROAD
Owner's Name: ANTHONY JACQUES

SITE PLAN

Scale 1" = 200 Ft. or as shown



SITE LOCATION PLAN (Map from Maine Atlas recommended)



NOTE: PROPERTY INFORMATION IS APPROXIMATE

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

Observation Hole #1 ☒ Test Pit ☐ Boring
1 Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM GRAVELLY SAND	FRIABLE	BROWN	NONE
FILL			
SILT LOAM	FIRM	OLIVE	FEW FAINT

Soil Classification: 7 (Profile) D (Condition) | Slope 2 % | Limiting Factor 12 | ☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 ☒ Test Pit ☐ Boring
1 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM	FRIABLE	BROWN	NONE
SILT LOAM	FIRM	OLIVE	FEW FAINT

DEPTH BELOW MINERAL SOIL SURFACE (inches): 0, 10, 20, 30, 40, 50

Soil Classification: 8 (Profile) D (Condition) | Slope 2 % | Limiting Factor 14 | ☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

STATE OF MAINE VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

Vaughn L. Smith
Site Evaluator Signature

226
SEC. 2/13/10
Date

REVISED 5/24/10 ACS

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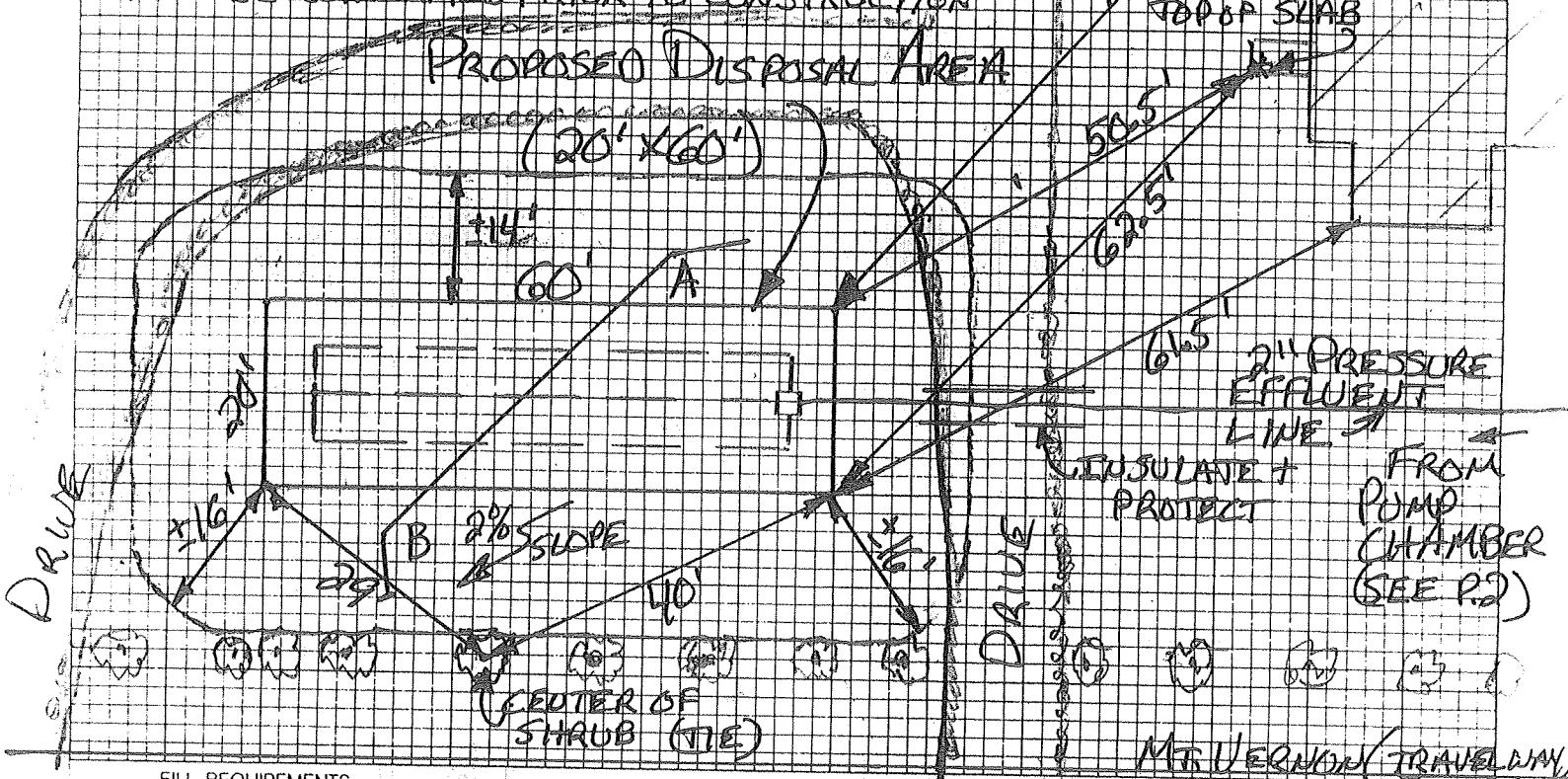
Owner's Name: ANTHONY JACQUES

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT

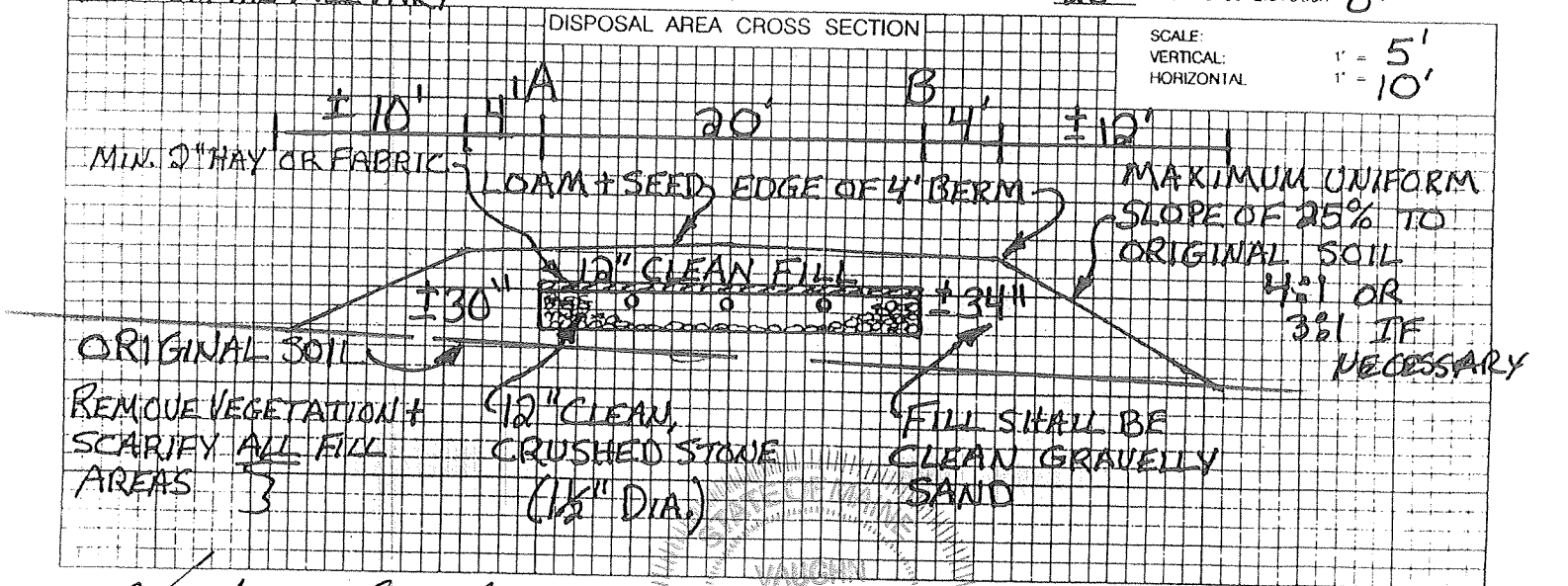
NOTE:
ALL TIES, ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	±30"	Finished Grade Elevation	+04"	Location & Description	TOP OF BULKHEAD SLAB
Depth of Fill (Downslope)	±34"	Top of Distribution Pipe or Proprietary Device	-08"	Reference Elevation	0"
FILL DEPTHS WILL VARY		Bottom of Disposal Area	-20"		

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 10'



Site Evaluator Signature

226
SE #

5/24/10
Date

REVISED