

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services  
Division of Environmental Health, 11 SHS  
(207) 287-5070 FAX (207) 287-3165

**PROPERTY LOCATION**

City, Town, or Plantation: **AUGUSTA**

Street or Road: **168 WADE ROAD**

Subdivision, Lot #:

**OWNER/APPLICANT INFORMATION**

Name (Last, First, MI): **FORTIN, JIM**  Owner  Applicant

Mailing Address of Owner/Applicant: **168 WADE ROAD  
AUGUSTA, ME 04330**

Daytime Tel. #: **(207) 623-4154**

AUGUSTA PERMIT #7240  
Date Permit Issued: **6/8/16**  
*May R. Fuller*

TOWN COPY  
\$ **250.00** fee  
LPI # **850**

Municipal Tax Map # **5** Lot # **157**

**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.

*James S. Sacks* **6-8-16**  
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 Application.

\_\_\_\_\_  
Local Plumbing Inspector Signature

\_\_\_\_\_  
(1st) Date Approved

\_\_\_\_\_  
(2nd) Date Approved

## PERMIT INFORMATION

**TYPE OF APPLICATION**

1. First Time System  
 2. Replacement System  
Type Replaced: \_\_\_\_\_  
Year Installed: \_\_\_\_\_

3. Expanded System  
 a. <25% Expansion  
 b. >25% Expansion

4. Experimental System  
 5. Seasonal Conversion

**SIZE OF PROPERTY**

**3**  sq. ft.  acres

**SHORELAND ZONING**

Yes  No

**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 Variance

**DISPOSAL SYSTEM TO SERVE**

1. Single Family Dwelling Unit, No. of Bedrooms: \_\_\_\_\_  
 2. Multiple Family Dwelling Unit, No. of Units: \_\_\_\_\_  
 3. Other **Machine Shop Bathroom**  
(specify)

Current Use  Seasonal  Year Round  Undeveloped

**DISPOSAL SYSTEM COMPONENTS**

1. Complete Non-Engineered System  
 2. Primitive System (greywater & 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)  
 9. Engineered Treatment Tank (only)  
 10. Engineered Disposal Field (only)  
 11. Pretreatment, specify: \_\_\_\_\_  
 12. Miscellaneous Components

**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

**SOIL DATA & DESIGN CLASS**

PROFILE **2** / CONDITION **C**  
at Observation Hole # **TP**  
Depth **26"**  
of most limiting Soil Factor

**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 **240**  sq. ft.  lin. ft.

**DISPOSAL FIELD SIZING**

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

**GARBAGE DISPOSAL UNIT**

1. No  2. Yes  3. Maybe  
If Yes or Maybe, Specify one below.

a. Multicompartment Tank  
 b. Tanks in Series  
 c. Increase in Tank Capacity  
 d. Filter on Tank Outlet

**EFFLUENT/EJECTOR PUMP**

1. Not Required  
 2. May Be Required  
 3. Required  
Specify only for engineered systems

DOSE \_\_\_\_\_ gallons

**DESIGN FLOW**

**72** gallons per day  
BASED ON:

1. Table 501.1 (dwelling units)  
 2. Table 501.2 (other facilities)  
SHOW CALCULATIONS for other facilities

**3 EMPLOYEES, EACH 24 GPD**

3. Section 503.0 (meter readings)  
ATTACH WATER METER DATA

**LATITUDE AND LONGITUDE**  
at center of disposal area  
Lat. **44** d **21** m **6.0** s  
Lon. **69** d **49** m **40.8** s  
if g.p.s. state margin of error: \_\_\_\_\_

## SITE EVALUATOR'S STATEMENT

I certify that on **3/19/2016** (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)

*Richard A. Green*  
Site Evaluator Signature

**RICHARD A. GREEN**  
Site Evaluator Name Printed

**195**  
SE#

**(207)685-8141**  
Telephone Number

**03/22/2016**  
Date

**richard.a.green@roadrunner.com**  
E-mail Address

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
Division of Health Engineering, 10 SHS  
(207) 287-5672 FAX (207)287-3165

Town, City, Plantation: **AUGUSTA** Street, Road, Subdivision: **168 WADE ROAD** Owner or Applicant Name: **FORTIN, JIM**

SITE PLAN

Scale 1" = 50 Ft.

SITE LOCATION MAP

APPROXIMATE PROPERTY LINE

● DRILLED WELL (TO BE SHARED)

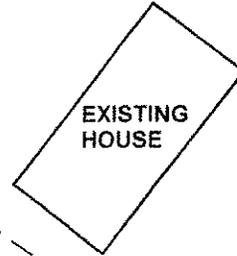
APPROXIMATE PROPERTY LINE



ELEVATION REFERENCE POINT - NAIL IN WHITE PINE



PROPOSED MACHINE SHOP



EXISTING HOUSE

GRAVEL DRIVEWAY

71'  
55'  
47' 60'

NEW 12' X 20' STONE BED DISPOSAL AREA

PIN APPROXIMATE PROPERTY LINE

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

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

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

0	Texture	Consistency	Color	Mottling
6	LOAMY SAND	FRIABLE	BROWN	
10				
15				
20	FINE SAND		YELLOWISH BROWN	
30				COMMON
40			GRAY	
50				

0	Texture	Consistency	Color	Mottling
6				
10				
15				
20				
30				
40				
50				

Soil Classification: 2 C Slope: 3 % Limiting Factor: 26 "  Ground Water  Restrictive Layer  Bedrock

Soil Classification: \_\_\_\_\_ Slope: \_\_\_\_\_ % Limiting Factor: \_\_\_\_\_ "  Ground Water  Restrictive Layer  Bedrock

*Richard A. Green*  
Site Evaluator Signature

195  
SE #

03/22/2016  
Date

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 Division of Environmental Health  
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation

**AUGUSTA**

Street, Road, Subdivision

**168 WADE ROAD**

Owner or Applicant Name

**FORTIN, JIM**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

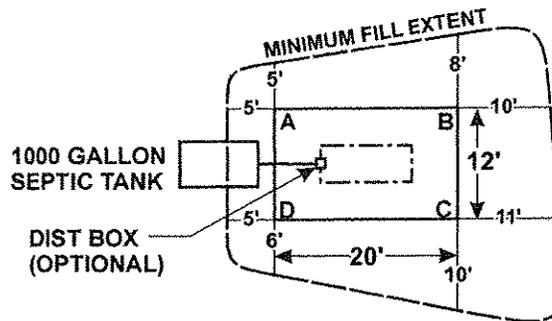
Scale: 1" = 20 ft.

### NOTES:

1. INSTALL ACCORDING TO LATEST VERSION OF SUBSURFACE WASTEWATER DISPOSAL RULES.
2. LOCATE 1000 GALLON SEPTIC TANK, AND PUMP IF NEEDED, AT LEAST 8' FROM BUILDING, AT ELEVATION TO ALLOW GRAVITY FLOW IF POSSIBLE.
3. FILL SHALL BE COARSE SAND TO GRAVELLY COARSE SAND MEETING THE REQUIREMENTS OF SECTION 11 OF THE SUBSURFACE WASTEWATER DISPOSAL RULES.
4. GRADE TO DIVERT RUNOFF AROUND DISPOSAL AREA.

### ORIGINAL GROUND ELEVATIONS AT CORNERS

- A -45"
- B -55"
- C -58"
- D -48"



ERP - NAIL ○  
 IN PINE

### BACKFILL REQUIREMENTS

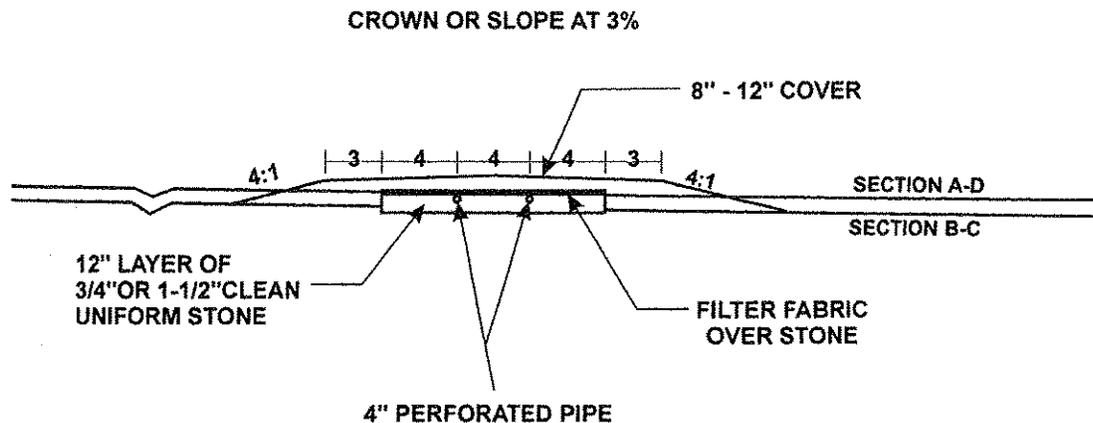
### CONSTRUCTION ELEVATIONS

### ELEVATION REFERENCE POINT

Depth of Backfill (upslope)	10-13 "	Finished Grade Elevation	-35 to -39 "	Location & Description	Nail in White Pine 75" Above Ground
Depth of Backfill (downslope)	20-22 "	Top of Distribution Pipe or Proprietary Device	-48 "	Reference Elevation is 0.0" or:	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-59 "		

### DISPOSAL FIELD CROSS SECTION

Scales  
 Vertical: 1" = 10 ft.  
 Horizontal: 1" = 10 ft.



REMOVE ORGANIC LAYER AND SCARIFY SOIL UNDER ENTIRE FILL AREA  
 MIX 4-6" SANDY FILL WITH UPPER SOIL LAYER TO CREATE TRANSITION HORIZON

*Richard A. Green*  
 Site Evaluator Signature

195  
 SE#

03/24/2016  
 Date

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 HHE-200 Rev. 10/02

**Green Environmental**  
**19 Pine Needle Alley**  
**Wayne, ME 04284**  
**(207)685-8141**

March 24, 2016

Jim Fortin  
168 Wade Road  
Augusta, ME 04330

Subject: Revised Site Evaluation and Septic System Design, 168 Wade Road, Augusta, Maine

Dear Jim:

Attached is the septic system plan for your property at 168 Wade Road in Augusta. The Maine Subsurface Wastewater Disposal Rules have been referenced on the plan and contain detailed specifications for the construction of the system.

The system was designed for a machine shop with three employees and the location is staked out on the site. The Elevation Reference Point is a nail set in a white pine tree at the location shown on the plans. It is important that this tree and nail not be cut or altered.

A 1000 gallon septic tank will be needed and should be located at least eight feet from the building. It may be possible for wastewater to flow by gravity from the house to the leachfield as long as the plumbing and septic tank are installed at a high enough elevation.

The plans contain sufficient information for a contractor to estimate the cost of construction and build the system. Before beginning construction a permit from the city must be obtained. Please bring the original and two copies of the HHE 200 to the City of Augusta's Local Plumbing Inspector for a permit sticker. The city will retain two copies and return one to you.

The property lines shown are approximate and should be verified before starting work.

If you have any questions, please feel free to contact me at (207) 725-4078.

Sincerely,



Richard A. Green  
Licensed Site Evaluator #195