PIF 11/28/16

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation	Augusta
Street or Road	20 Mt Vernon Road
Subdivision, Lot #	M5 L185R

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Michael Turner ☐ Owner ☐ Applicant
Mailing Address of Owner/Applicant	239 Bessey Ridge Road Albion, ME 04910
Daytime Tel. #	314-2026

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 — Date 11/21/16

>> CAUTION: LPI APPROVAL REQUIRED <<

AUGUSTA PERMIT #7307 TOWN COPY
Date Permit Issued: 11/22/16 $ 250.00 fee
15.00 late
LPI # 850

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

(1st) date approved

Local Plumbing Inspector Signature — (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

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
1 3/4 ± ☐ 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 Future

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
- ☑ 1. Concrete
  - ☐ a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: ____

CAPACITY: 1,000 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 4A (dwelling unit(s))
- ☐ 2. Table 4C(other facilities)
  SHOW CALCULATIONS for other facilites
- ☐ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION
3 / C
at Observation Hole # 1
Depth 18"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
- ☐ 1. Medium---2.6 sq. ft. / gpd
- ☐ 2. Medium---Large 3.3 sq. f.t / gpd
- ☑ 3. Large---4.1 sq. ft. / gpd
- ☐ 4. 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. 19 d 50 m ____ s
Lon. 44 d 21 m ____ s
if g.p.s, state margin of error: ____

SITE EVALUATOR STATEMENT

I certify that on Sept 20, 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).

Everett C Drake	86	9/22/16
Site Evaluator Signature	SE #	Date
Everett C. Drake	437-4461	
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 Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

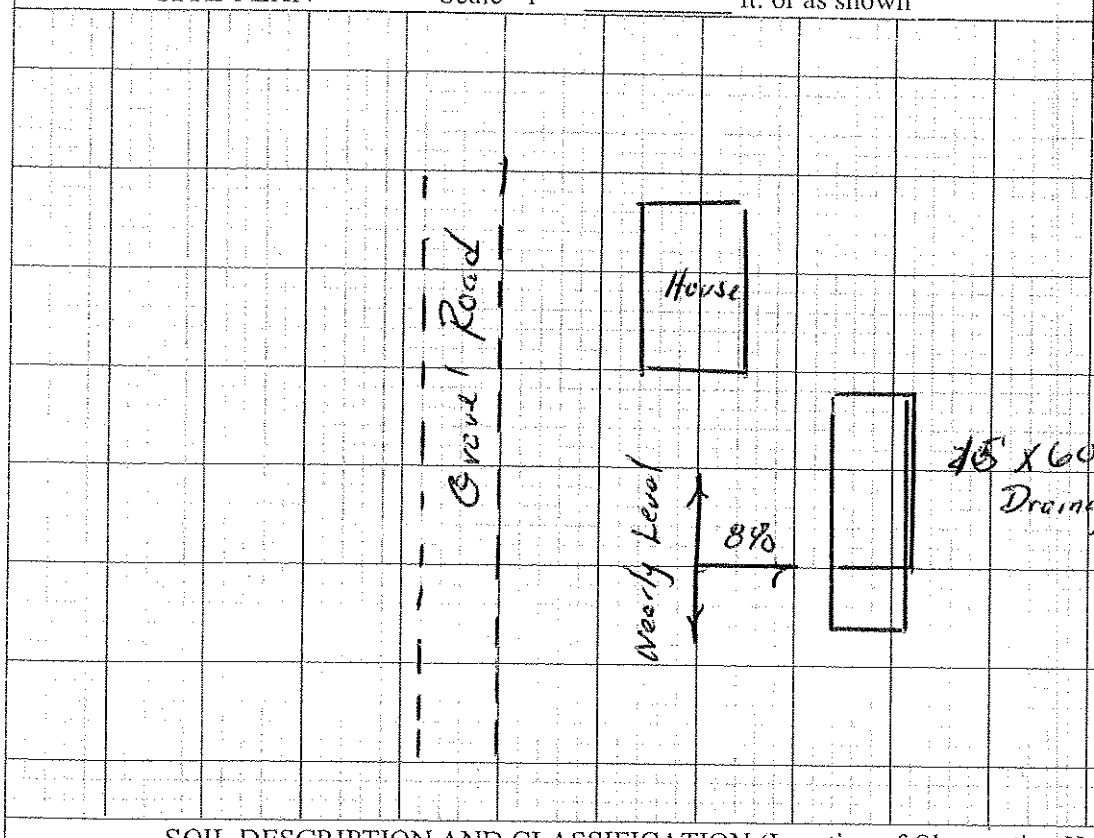
Town, City, Plantation: Augusta

Street, Road, Subdivision: MT Vernon Road

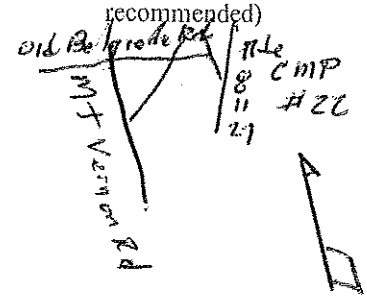
Owner's Name: Michael Turner

SITE PLAN

Scale 1" = _____ ft. or as shown



SITE LOCATION PLAN
(map from Maine Atlas recommended)



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

Observation Hole 1 ☒ Test Pit ☐ Boring

— " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	Loam	Loose	Dark Brown	
10–20	Sandy loam	Friable	Yellowish Brown	
20–50	Loamy Sand	Moist Dense P	Olive Brown	Few

Soil Classification	Slope	Limiting Factor	
3 (Profile) C (Condition)	8 %	18 "	[✓] 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
0–50				

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

Everett C Drake — Site Evaluator Signature

80 — SE #

9/22/16 — Date

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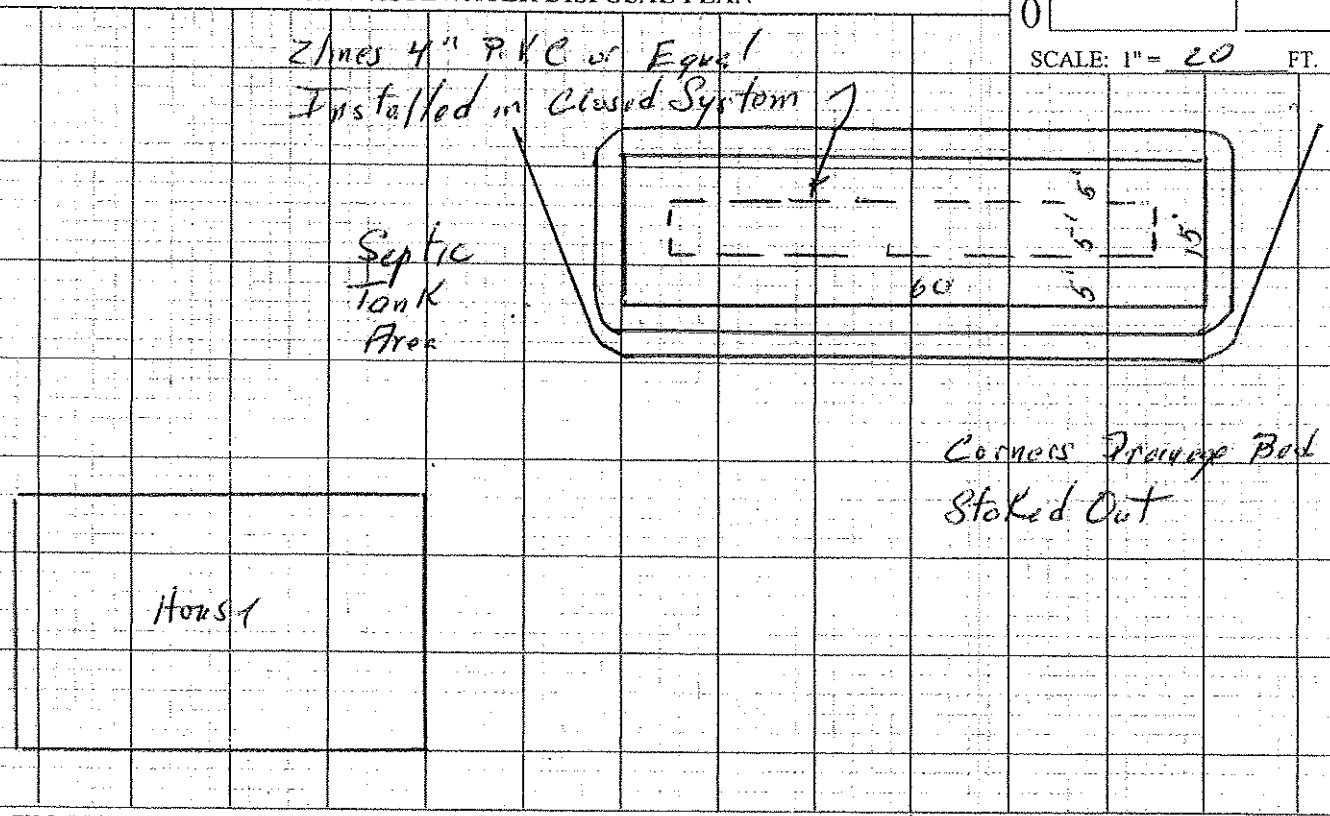
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Mt Vernon Road	Michael Turner

SUBSURFACE WASTEWATER DISPOSAL PLAN

0 [ ] ____

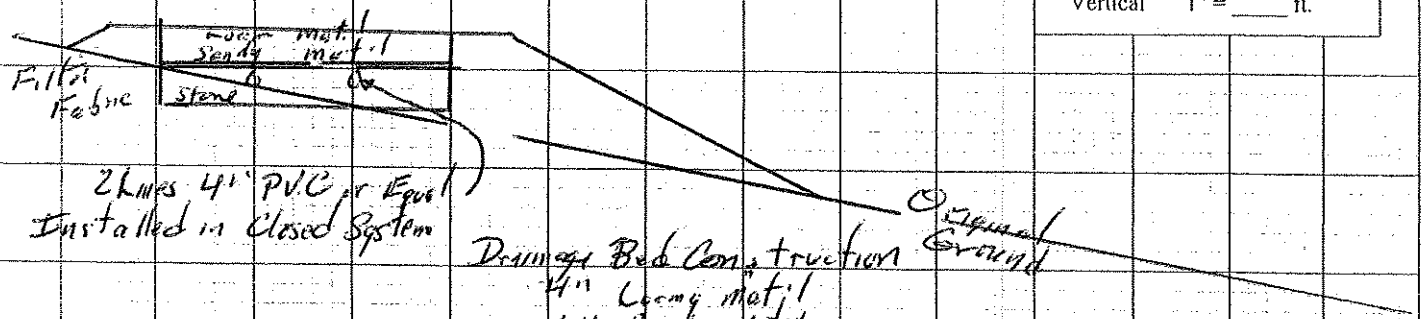
SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	12'	Finished Grade Elevation	101'6"	Location & Description:	Top Grade Stake
		Top of Distribution Pipe or Proprietary Device	100'5"		
Depth of Fill (Downslope)	20'	Bottom of Disposal Area	99'6"	Reference Elevation:	103.5

DISPOSAL AREA CROSS SECTION

Scale
Horizontal 1" = ____ ft.
Vertical 1" = ____ ft.



Drainage Bed Construction
4" Loamy mat'l
6" Sandy Mat'l
Filter Fabric or Hay
12" Stone (Between 3/4" to 2 1/2")

Everett C Drake	86	9/22/16
Site Evaluator Signature	SE #	Date