PIF 8/21/15

# 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

>> CAUTION: LPI APPROVAL REQUIRED <<

| | |
|---|---|
| City, Town, or Plantation | AUGUSTA |
| Street or Road | 481 LEIGHTON ROAD |
| Subdivision, Lot # | |

AUGUSTA PERMIT #7104 TOWN COPY
Date Permit Issued: 8/12/15 $ 250.00 fee
15.00
LPI # 850

## OWNER/APPLICANT INFORMATION

| | |
|---|---|
| Name (last, first, MI) | CUSICK, STEVE ☒ Owner ☐ Applicant |
| Mailing Address of Owner/Applicant | 481 LEIGHTON ROAD AUGUSTA, ME 04330 |
| Daytime Tel. # | 629-5565 |

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: [signature] Date: 8-12-15

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
± 0.5 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

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

### TREATMENT TANK
☒ 1. Concrete
☒ a. Regular
b. Low Profile
2. Plastic
3. Other _____
CAPACITY: 1000 GAL.
INSTALL NEW

### 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: 20' x 45'
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 facilities
3. Section 4G (meter readings)
ATTACH WATER METER DATA

### SOIL DATA & DESIGN CLASS
PROFILE CONDITION
7 C
at Observation Hole # 1
Depth 15
of Most Limiting Soil Factor

### DISPOSAL FIELD SIZING
1. Medium---2.6 sq. ft. / gpd
☒ 2. Medium---Large 3.3 sq. ft. / 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. 40 d 29 m 45 s
Lon. 69 d 48 m 10 s
if g.p.s. state margin of error: _____

## SITE EVALUATOR STATEMENT

I certify that on 6/30/15 (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: [signature] SE # 226 Date: 7/13/15

Site Evaluator Name Printed: VAUGHN L. SMITH Telephone Number: 441-3887 E-mail Address: SOILTESTMAN@GMAIL.COM

STATE OF MAINE VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

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

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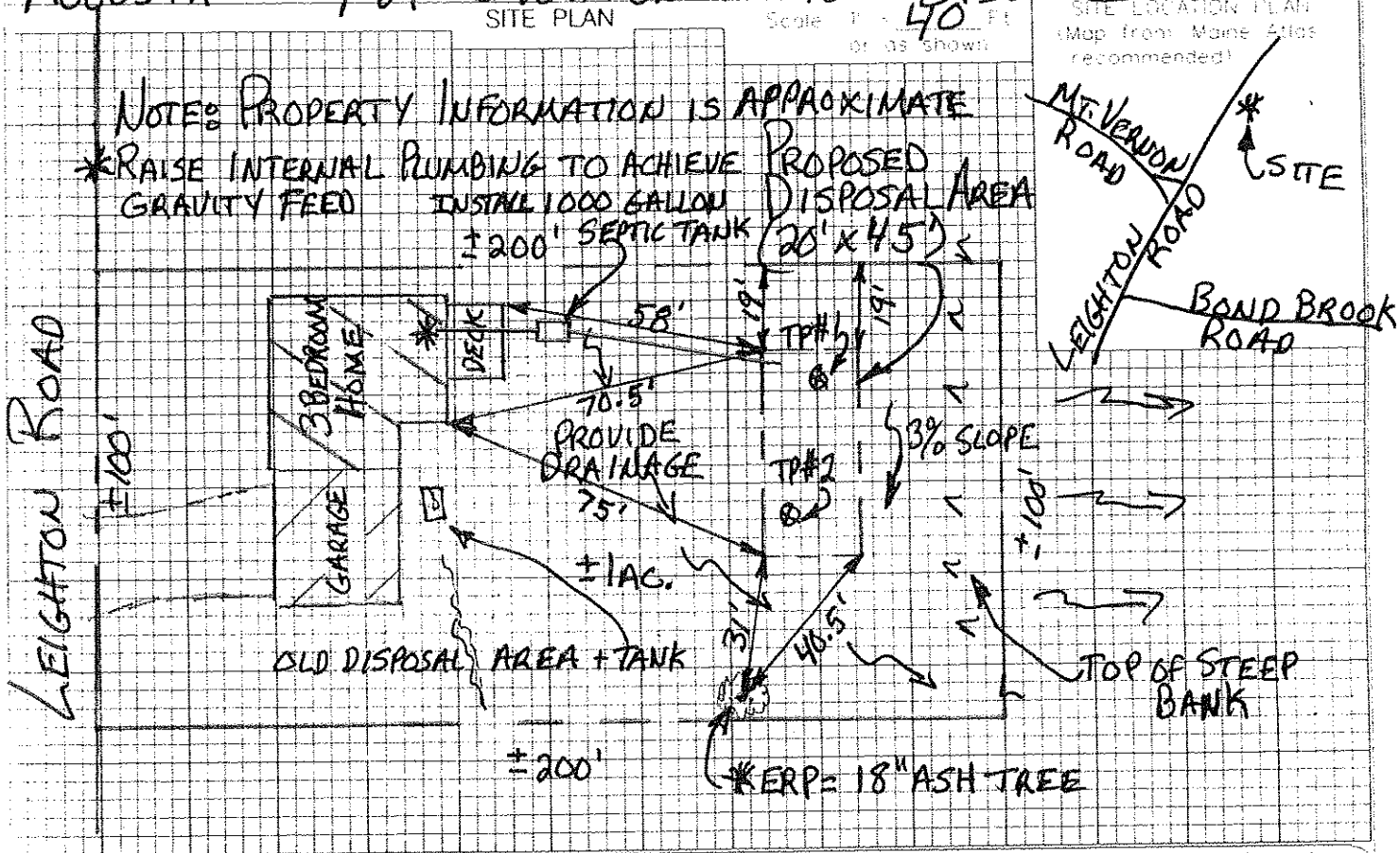
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 481 LEIGHTON ROAD
Owner's Name: STEVE CUSICK

SITE PLAN

Scale 1" = 40 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
1" Depth of Organic Horizon Above Mineral Soil

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–20 | SANDY LOAM | FRIABLE | BROWN | |
| 20–30 | LOAMY FINE SAND | | YELLOWISH BROWN | NONE |
| 30–40 | TO FINE SANDY LOAM | SOMEWHAT FIRM | OLIVE BROWN | FEW DISTINCT |

Soil Classification: 7 (Profile) C (Condition) | Slope: 3 | Limiting Factor: 15" | ☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

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

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–30 | LOAM | FRIABLE | BROWN | |
| 30–40 | LOAMY FINE SAND | | YELLOWISH BROWN | NONE |
| 40–50 | FINE SANDY LOAM | FIRM | LIGHT OLIVE BROWN | FEW DISTINCT |

Soil Classification: 7 (Profile) C (Condition) | Slope: 3 | Limiting Factor: 17" | ☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

STATE OF MAINE
VAUGHN L. SMITH
226
LICENSED
SITE EVALUATOR

Vaughn L. Smith
Site Evaluator Signature

226
Date: 7/13/15

Page 2 of 2
HHE-200 Rev. 2

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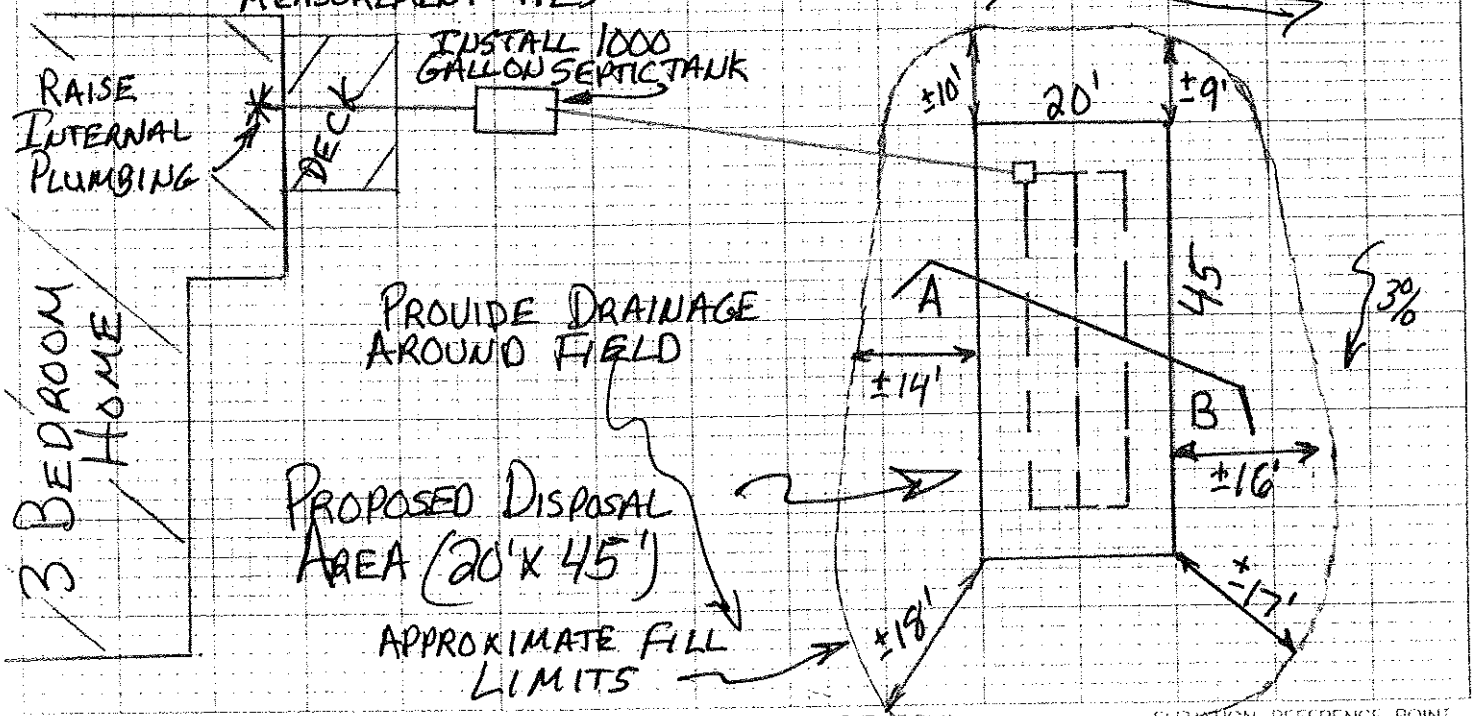
AUGUSTA 481 LEIGHTON ROAD — STEVE CUSICK

SUBSURFACE WASTEWATER DISPOSAL PLAN — SCALE 1" = 20 FT

NOTES:
) ALL TIES, ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION
) SEE P.2 FOR MORE INFORMATION + MEASUREMENT TIES




FILL REQUIREMENTS

| | |
|---|---|
| Depth of Fill (Upslope) | ±21" |
| Depth of Fill (Downslope) | ±32" |

FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

| | |
|---|---|
| Finished Grade Elevation | 21" |
| Top of Distribution Pipe or Proprietary Device | -33" |
| Bottom of Disposal Area | -45" |

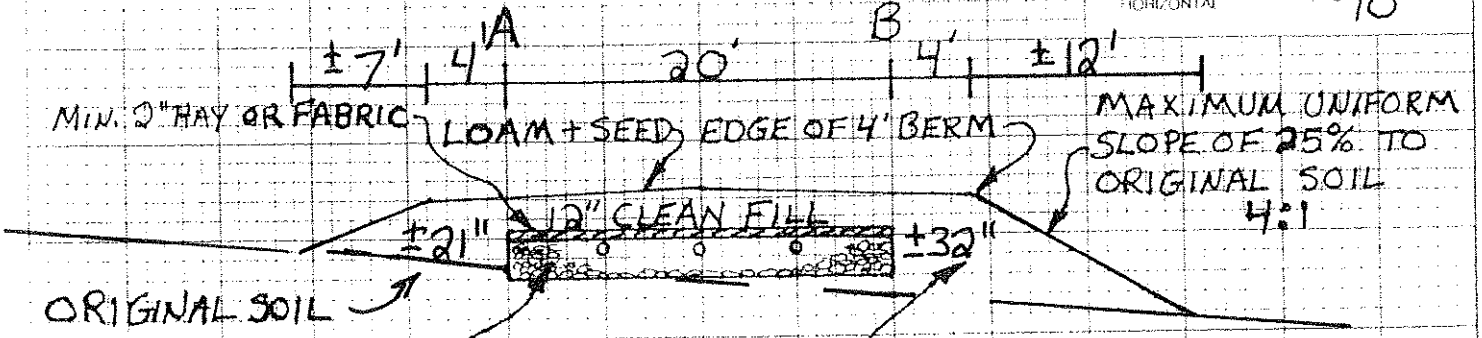
ELEVATION REFERENCE POINT

Description: 18" ASH TREE W/NAIL 53" ABOVE GROUND

Reference Elevation: 0"

DISPOSAL AREA CROSS SECTION

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




ORIGINAL SOIL

REMOVE VEGETATION + SCARIFY ALL FILL AREAS } GENTLY

*CREATE TRANSITION LAYER WHEN APPROPRIATE

12" CLEAN, CRUSHED STONE (1½" DIA.)

FILL SHALL BE CLEAN GRAVELLY SAND PER TABLE 11A OF CODE

STATE OF MAINE — VAUGHN L. SMITH 2226 — LICENSED SITE EVALUATOR

7/13/15