Perkins, Daisy

Department of Human Services
Division of Health Engineering
(207) 289-3826

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

0156 AUGUSTA

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA, ME.
Street Subdivision Lot #	OLD OAKLAND RD.

PROPERTY OWNERS NAME

Last: Perkins First: Daisy

Applicant Name:	AUGUSTA Community ~~DEVELOPMENT~~
Mailing Address of Owner/Applicant (If Different)	1 Cony Augusta, ME.

Date Permit Issued: 12/7/83 $ 40 FEE

☐ Double Fee Charged

Rene B St Pierre
Local Plumbing Inspector Signature

L.P.I. # 16617

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER SIX MONTHS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Nancy B. Perkins 7-29-83
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 Rules.

Local Plumbing Inspector Signature — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☒ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
   ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   4. ☐ Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS

COMPLETE SYSTEM

1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED +30 yrs.

THE FAILING SYSTEM IS:

1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☒ OTHER: streight Pipe

DISPOSAL SYSTEM TO SERVE:

1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

SIZE OF PROPERTY	ZONING
9,100	NO

TYPE OF WATER SUPPLY

Augusta W.D.

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

1. ☒ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

4 Bedrooms

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
6	B (Fill)

DEPTH TO LIMITING FACTOR: >40

SIZE RATINGS USED FOR DESIGN PURPOSES

1. ☒ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 448 Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 600 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

(☐ SITE EVALUATION WAIVED BY LOCAL OPTION)

On July 28, 1983 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

David P. Roque — Site Evaluator or Professional Engineer's Signature

154 — SE# / PE#

7/30/83 — Date

Applicant

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

HHE - 200 Rev. 4/82

Town, City, Plantation: AUGUSTA, Maine

Street, Road, Subdivision: OLD OAKLAND RD.

Owners Name: Daisy PERKINS

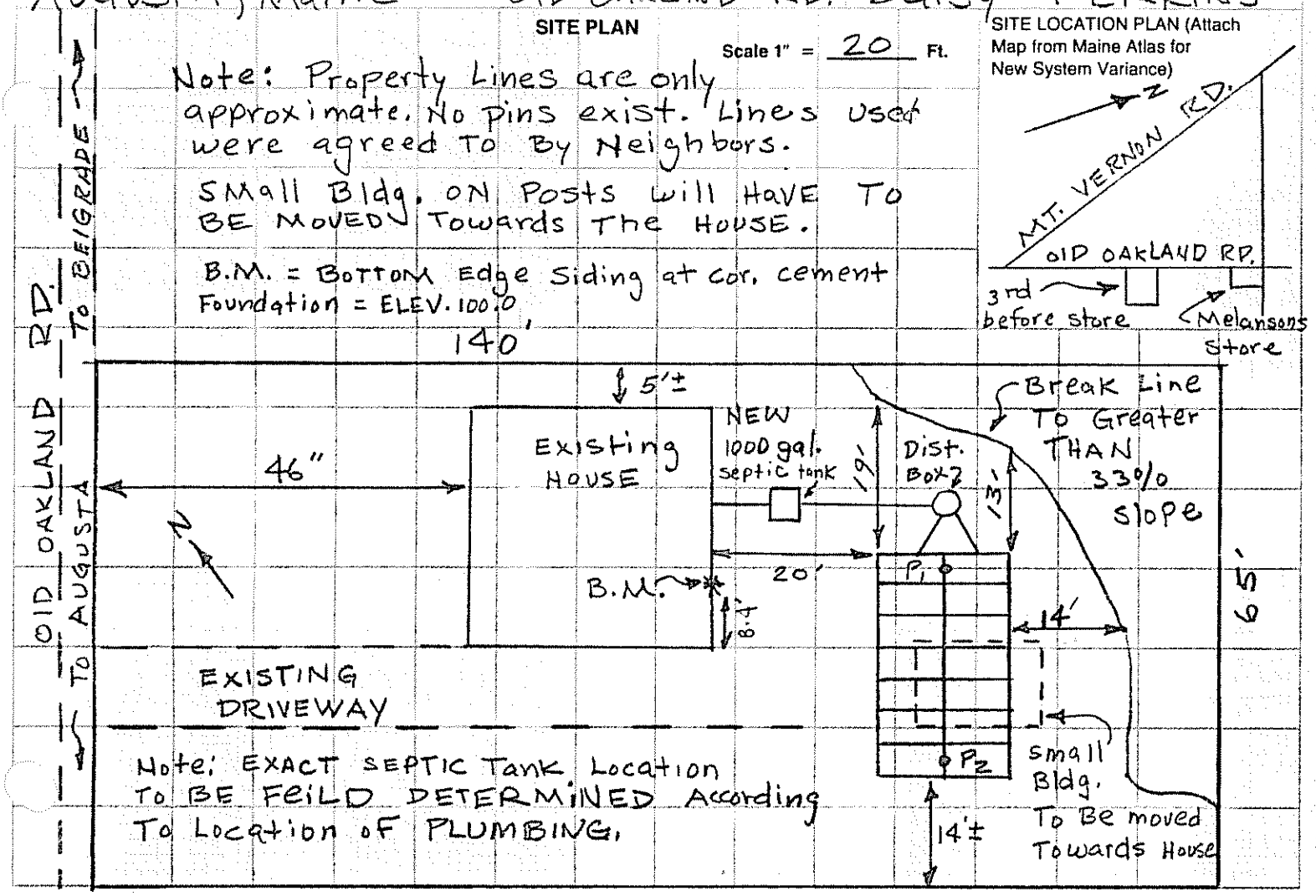
SITE PLAN

Scale 1" = 20 Ft.

Note: Property Lines are only approximate. No pins exist. Lines used were agreed To By Neighbors.

Small Bldg. ON Posts will HAVE To BE MOVED Towards The HOUSE.

B.M. = BOTTOM Edge Siding at cor. cement Foundation = ELEV. 100.0



Note: EXACT SEPTIC Tank Location TO BE FEILD DETERMINED According To Location of PLUMBING.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

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

Observation Hole P1 ☒ Test Pit ☐ Boring

1/2" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
Loamy Sand	Loose To Friable	Brown	Less THAN 2%
Loamy Gravel			
Sand			
FILL			

DEPTH BELOW MINERAL SOIL SURFACE (Inches): 0, 5, 10, 15, 20, 30, 40, 50

Soil Profile	Classification Condition	Slope	Limiting Factor	
6	B	4 %	N/A	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole P2 ☒ Test Pit ☐ Boring

1/2" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
Loamy Sand	Loose To Friable	Brown	Less than 2%
Sand		Grey Brown	
FILL			

DEPTH BELOW MINERAL SOIL SURFACE (Inches): 0, 5, 10, 15, 20, 30, 40, 50

Soil Profile	Classification Condition	Slope	Limiting Factor	
6	B	4 %	N/A	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

David P. Rocque — Site Evaluator or Professional Engineer's Signature

154 — SE# / PE#

7/30/83 — Date

HHE - 200 Rev. 4/83

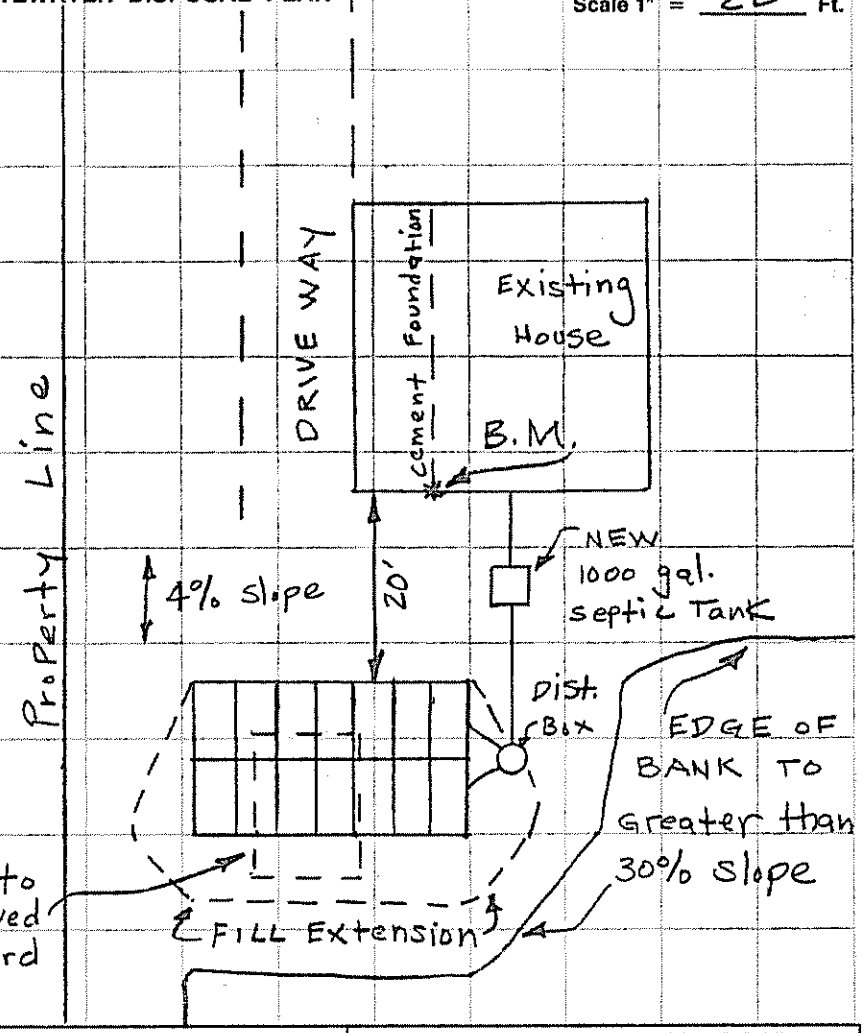
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION — Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	OLD OAKLAND RD.	Daisy PERKINS

SUBSURFACE WASTEWATER DISPOSAL PLAN — Scale 1" = 20 Ft.

B.M. = Bottom edge of siding at back side of House at cor. of Concrete Foundation.

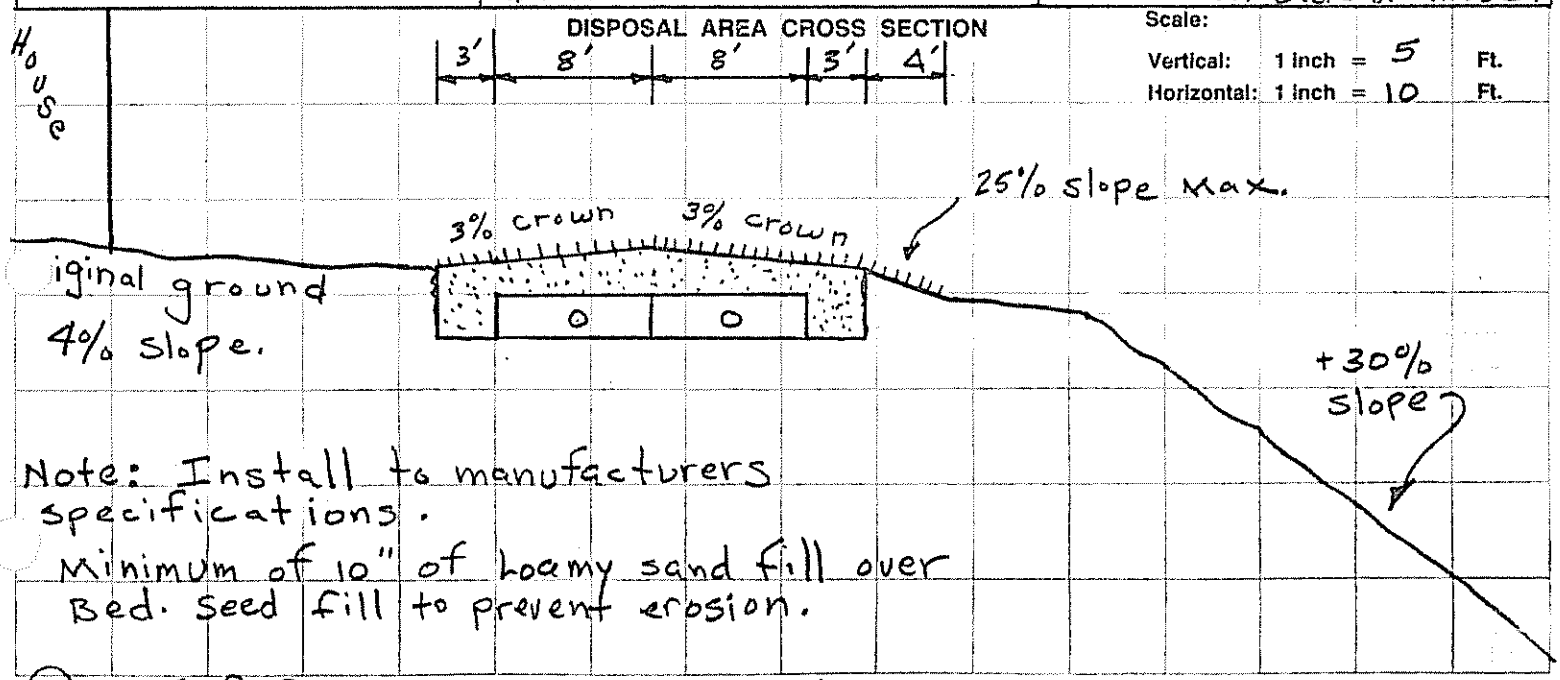
BED To Consist of 14 chambers 4'x8'x13". BED To BE 28' long by 16' wide. Part of the Bed will be where a small Bldg. now sets, which will have to be moved.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	0"	Reference Elevation is	100.0'	Bottom of siding at cor. of Conc. Fdn. on Back of House.
Depth of Fill (Downslope)	8"	Bottom of Disposal Area	94.4	
		Top of Distribution Lines or Chambers	95.5	

DISPOSAL AREA CROSS SECTION

Scale: Vertical: 1 inch = 5 Ft. Horizontal: 1 inch = 10 Ft.



Note: Install to manufacturers specifications.
Minimum of 10" of Loamy sand fill over Bed. Seed fill to prevent erosion.

David P. Roque — Site Evaluator or Professional Engineer's Signature

154 — SE # / PE #

7-30-83 — Date