SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Lot #2 Eight Rod Road

PROPERTY OWNERS NAME

Last: Rivard First: David

Applicant Name:	same
Mailing Address of Owner/Applicant (If Different)	R.F.D. #3 Box 968

0104 AUGUSTA *** 11020 ***

Date Permit Issued: 9/16/83

Robert B St Pierre
Local Plumbing Inspector Signature

$ 40 FEE ☐ If Double Charged

L.P.I. # 1617

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.

David J. Rivard — Signature of Owner/Applicant — Date: 9/10/83

Caution: Inspection Required

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

Robert B St Pierre — Local Plumbing Inspector Signature — Date Approved: 11/22/83

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 1974

THE FAILING SYSTEM IS:

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

DISPOSAL SYSTEM TO SERVE:

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

SIZE OF PROPERTY	ZONING	TYPE OF WATER SUPPLY
20,000 sq.'	NO	Drilled Well

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.)

DESIGN FLOW: 270 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
5	C

DEPTH TO LIMITING FACTOR: 28

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 351 Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

(☐ SITE EVALUATION WAIVED BY LOCAL OPTION)

On Sept. 10, 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#
9-10-83 — Date

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

City

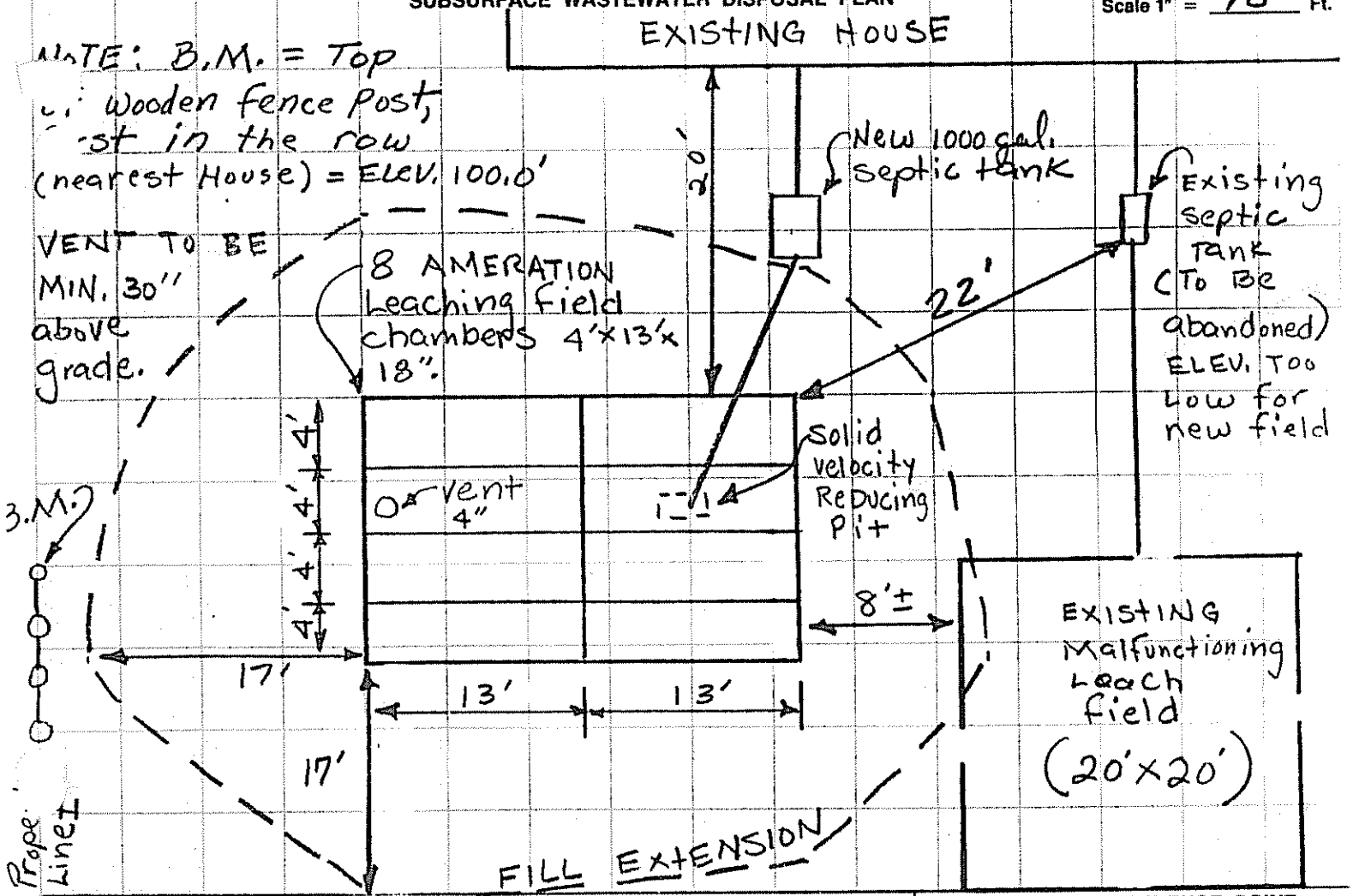
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 8 ROD ROAD
Owners Name: DAVID RIVARD

SUBSURFACE WASTEWATER DISPOSAL PLAN

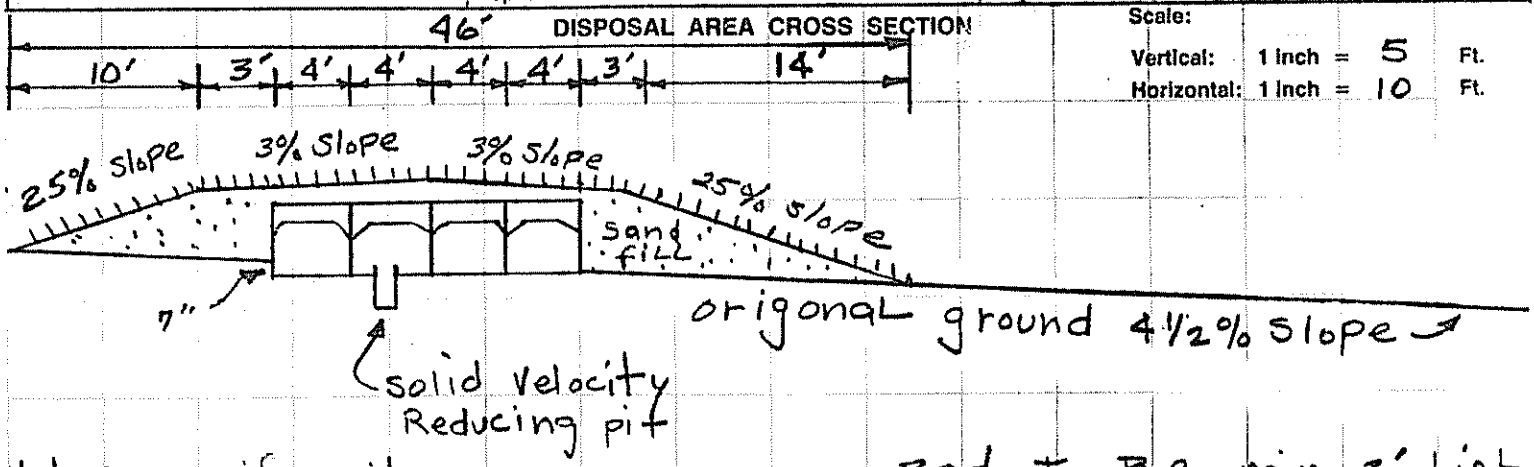
Scale 1" = 10 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	17"	Reference Elevation is	100.0'	TOP of wooden Fence Post at end of fence nearest House
Depth of Fill (Downslope)	36"	Bottom of Disposal Area	98.2'	
		Top of Distribution Lines or Chambers	99.9'	

DISPOSAL AREA CROSS SECTION

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



Note: Scarify soil in area of chambers and fill.

Install to manufacturers specifications.

Bed To Be min. 2' high. seed Bed and fill area after construction to prevent erosion.

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

154
SE.# / PE #

9-10-83
Date

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Department of Human Services
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Town, City, Plantation: AUGUSTA
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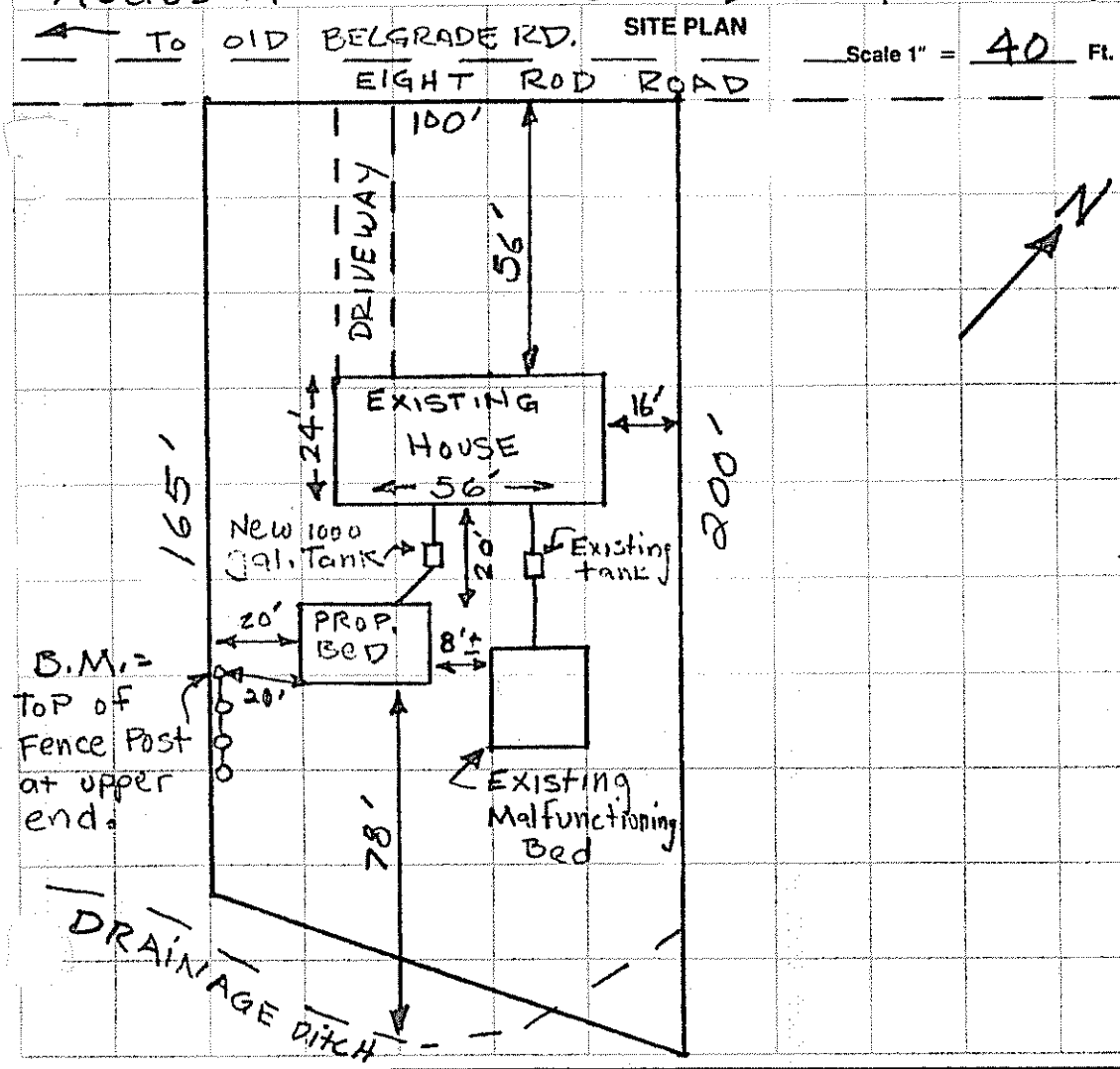
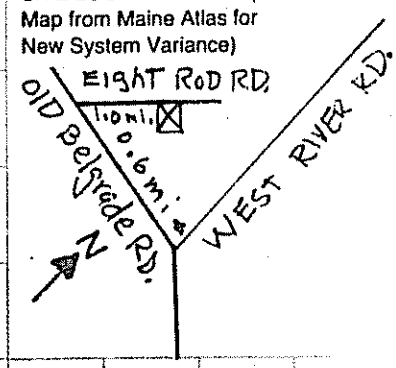
SITE PLAN — Scale 1" = 40 Ft.



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



Note: old 1000 gal. septic tank to be abandoned.

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

Observation Hole P1 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	Sandy Loam	Loose	Brown	Less than 2%
6–30	Sand			
30–50	Sandy Loam	V. Firm	Black and Grey	More than 2%

AM USING MEDIUM SOIL for DESIGN and 2' separation

Soil Profile	Classification Condition	Slope	Limiting Factor	
5	C	4½%	31	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole P2 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	Sandy Loam	Loose	Brown	Less than 2%
6–30	Sand			
30–50	Sandy Loam	V. Firm	Black and Grey	more than 2%

Sand is obviously fill material

Soil Profile	Classification Condition	Slope	Limiting Factor	
5	C	4½%	28	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

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

154 — SE# / PE#

9-10-83 — Date