SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

City, Town, Plantation	AUGUSTA
Street or Road	~~97 Eight Rod Rd~~ LALIBERTY RD.
Subdivision, Lot #	S&V Heights

>> Caution: Permit Required – Attach In Space Below <<

AUGUSTA 4347 TOWN COPY
Date Permit Issued: 7/1/00 $ 100.1 FEE ☐ If Double Fee Charged
Gary R. Fuller — Local Plumbing Inspector Signature
L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI): LALIBERTY, NOEL (Owner / Applicant)

Mailing Address of ☑ Owner ☐ Applicant	RT #6, BOX 1200
	AUGUSTA, ME. 04330
Daytime Tel. #	

Municipal Tax Map # 6 Lot # 24A

Owner or Applicant Statement

I state 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.

Noel Laliberty — Signature of Owner or Applicant — Date 7-10-00

Caution: Inspections Required

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

Gary R. Fuller — Local Plumbing Inspector Signature — (1st) Date Approved 10/5/00 — (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☑ First Time System
2. ☐ Replacement System
   Type Replaced: ____
   Installed: ____
3. ☐ Expanded System
   a. ☐ Minor Expansion
   b. ☐ Major 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 Approval

DISPOSAL SYSTEM COMPONENT(S)
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
11± ☐ sq. ft. ☑ acres

SHORELAND ZONING
☐ Yes ☑ No

DISPOSAL SYSTEM TO SERVE
1. ☑ Single Family Dwelling Unit, No. of Bedrooms: 3 or
2. ☑ Multiple Family Dwelling, No. of Units: 3
3. ☐ Other: ____ (SPECIFY)

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 4000 gallons

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 4600 ☑ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
1. ☑ No 3. ☐ Maybe
2. ☐ Yes >> Specify one below:
   a. ☐ Multi-compartment Tank
   b. ☐ Tanks in Series
   c. ☐ Increase in Tank Capacity
   d. ☐ Filter on Tank Outlet

DESIGN FLOW
300 gallons per day
BASED ON:
1. ☑ Table 501.1 (dwelling unit(s)
2. ☐ Table 501.2 (other facilities)
SHOW CALCULATIONS – for other facilities –
3 BEDROOM OR 2 BEDROOM APT + 1 BEDROOM APT.
3. ☐ Section 503.0 (meter readings)
ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
9 | D | 3
at Observation Hole # 1
Depth 14" Elevation -72"
OF MOST LIMITING SOIL FACTOR

DISPOSAL FIELD SIZING
1. ☐ Small – 2.0 sq. ft./gpd
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

PUMPING
1. ☑ Not Required
2. ☐ May Be Required
3. ☐ Required >> Specify only for engineered or experimental systems:
DOSE: ____ gallons

SITE EVALUATOR STATEMENT

I certify that on 7/5/00 (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 — SE # 256 — Date 7/6/00

JOHN PHILBRICK 547-3732

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

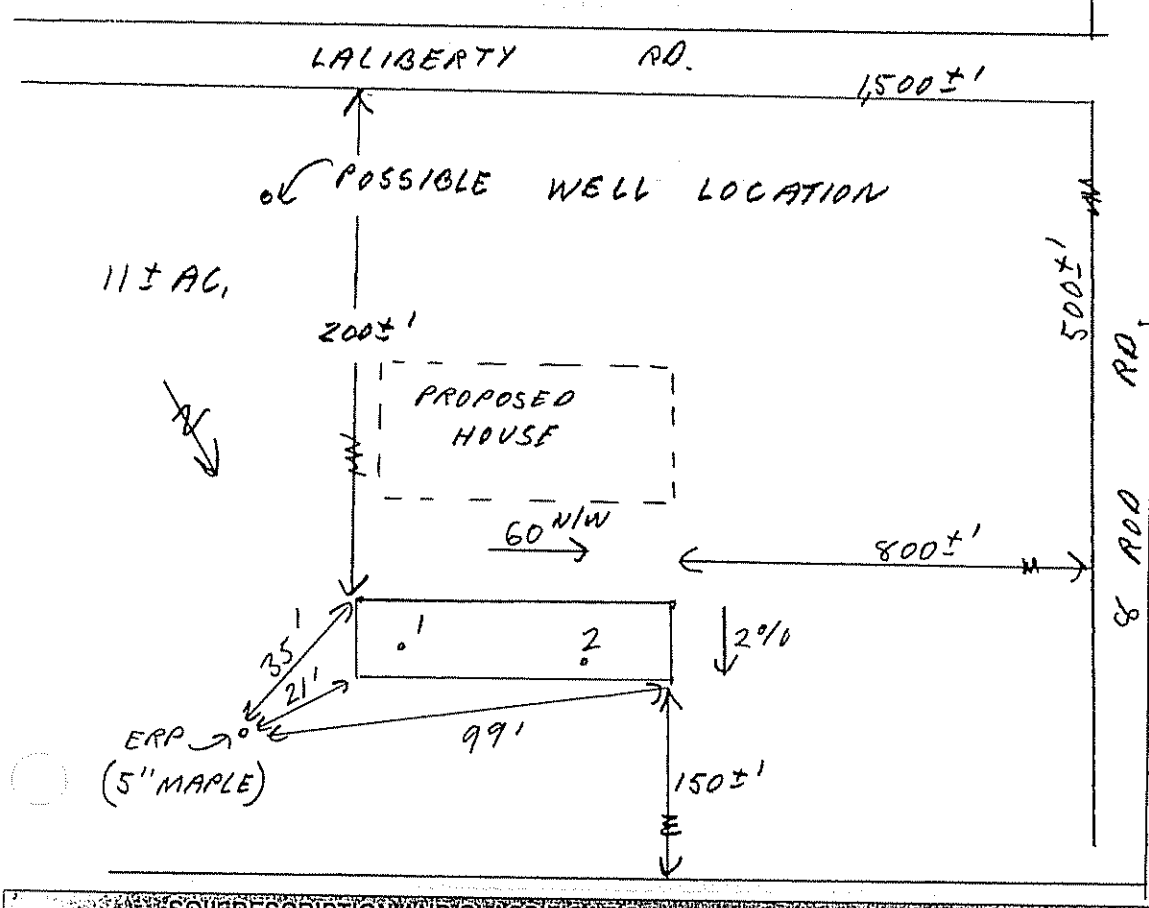
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: LALIBERTY RD. NOEL

Owner's Name: LALIBERTY

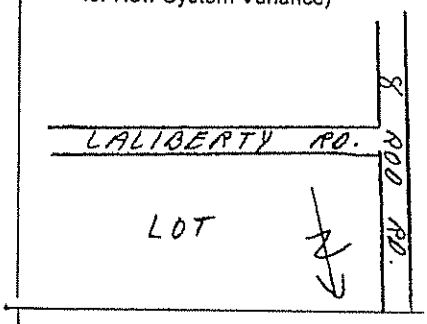
SITE PLAN

Scale: 1" = 50 Ft. or as shown



SITE LOCATION PLAN

(Attach Map from Maine Atlas for New System Variance)



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

Observation Hole 1 — ☑ Test Pit ☐ Boring

2± " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	SILTY LOAM	FRIABLE	DARK GR.	NONE
6–15	↓	↓	TAN	↓
15–20	SILTY CLAY	FIRM	GRAY	COMMON DISTINCT
20–50	↓	↓	↓	↓

Soil Profile	Classification Condition	Slope	Limiting Factor	
9	0	2 %	14"	☑ Ground Water ☑ Restrictive Layer ☐ Bedrock

Observation Hole 2 — ☑ Test Pit ☐ Boring

2± " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–50	SAME AS #1			

Soil Profile	Classification Condition	Slope	Limiting Factor	
9	0	2 %	14"	☑ Ground Water ☑ Restrictive Layer ☐ Bedrock

Site Evaluator Signature: [signature]

SE #: 256

Date: 7/6/00

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

06129015

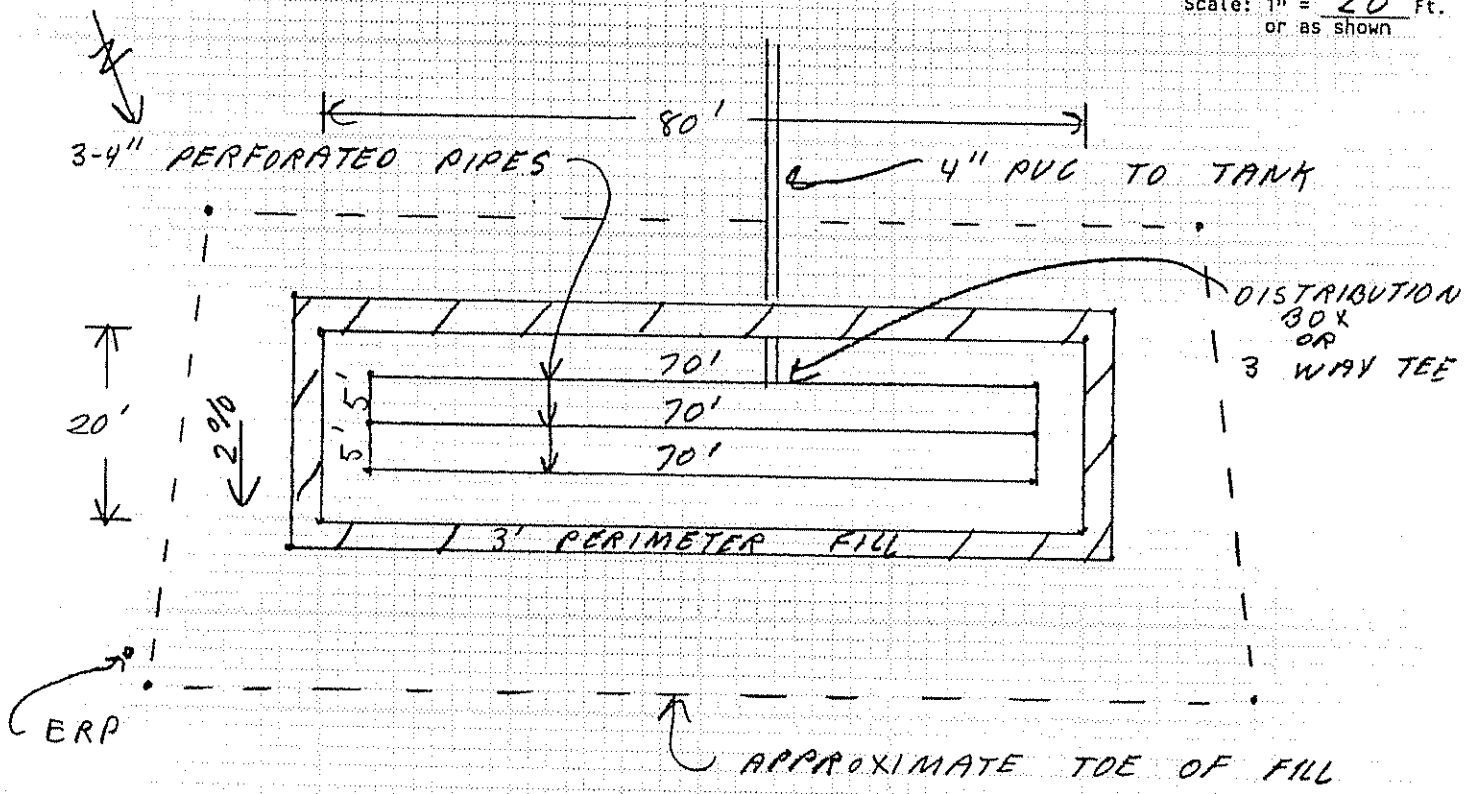
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: LALIBERTY RD.

Owner's Name: NOEL LALIBERTY

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 Ft. or as shown



20'x80' BED
FLAGS MARK CORNERS

FILL REQUIREMENTS

Depth of Fill (Upslope)

Depth of Fill (Downslope)

CONSTRUCTION ELEVATION

29" Reference Elevation is

34" Bottom of Disposal Area

Top of Distribution Lines or Chambers

ELEVATION REFERENCE POINT

0"

-54"

-43"

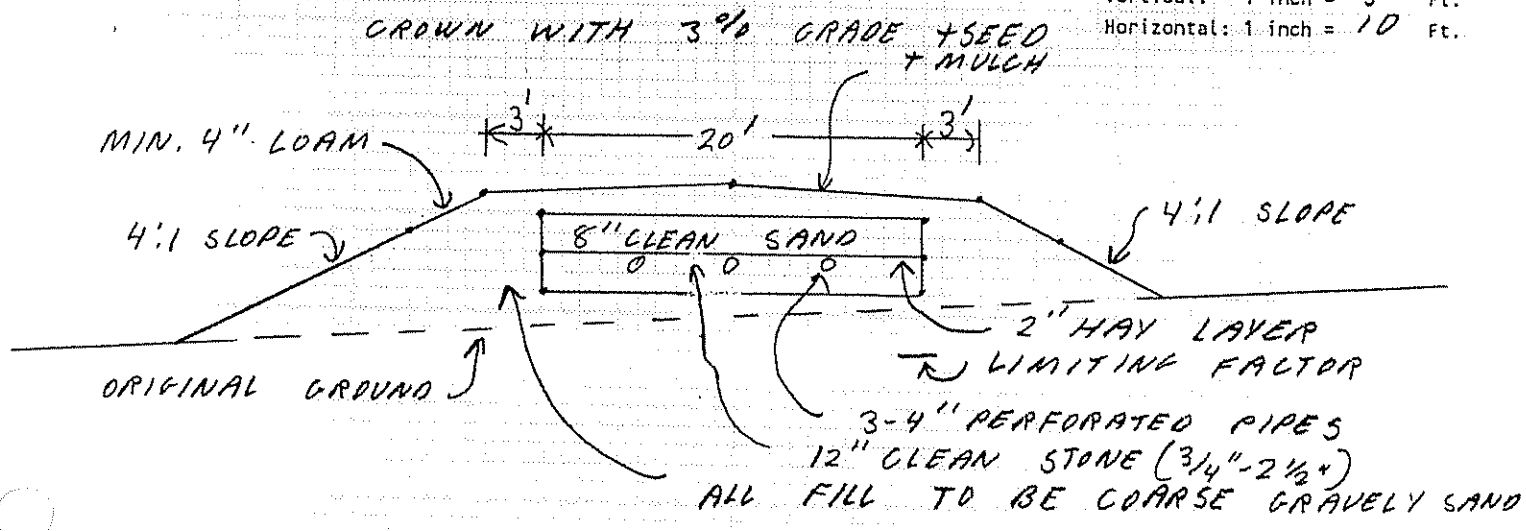
ERP IS IN 5" MAPLE 21' N/E OF SYSTEM, 60" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.

Horizontal: 1 inch = 10 Ft.



Site Evaluator Signature

256
SE#

7/6/06
Date

Approved for use as HHE 200 by Division of Health Engineering 9/87