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	~~Blair Road~~ 43 Turkey Lane
Subdivision, Lot #	6-45D and 6-45A M6 L45D

OWNER/APPLICANT INFORMATION

Name (last, first, MI) DeHahn, Carrie	☑ Owner ☐ Applicant
Mailing Address of Owner/Applicant	2 Madeline Drive Brunswick, Maine 04011
Daytime Tel. #	207-729-1199

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.

Carrie DeHahn 5/24/13
Signature of Owner or Applicant Date

>> CAUTION: LPI APPROVAL REQUIRED <<

(115 sqft sur)

AUGUSTA PERMIT #6793 TOWN COPY
Date Permit Issued: 5 /23 /13 $ 265 fee

LPI # 1137

CAUTION: INSPECTION REQUIRED
I have inspected the installation authoirzed 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
91.00 ☐ 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 (not yet on site)

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

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

CAPACITY: 1000 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 # TP-1

Depth 24 "

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
- ☐ Not Required
- ☑ May Be Required
- ☐ Required

Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE
at center of disposal area

Lat. 69 d 43 m 55.16 s
Lon. 44 d 43 m 56.67 s
if g.p.s, state margin of error: _____

SITE EVALUATOR STATEMENT

I certify that on 4/18/2013 (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	386 SE #	4/22/2013 Date
Dale F. Knapp Site Evaluator Name Printed	207-729-1199 Telephone Number	dale.knapp@stantec.com E-mail Address

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

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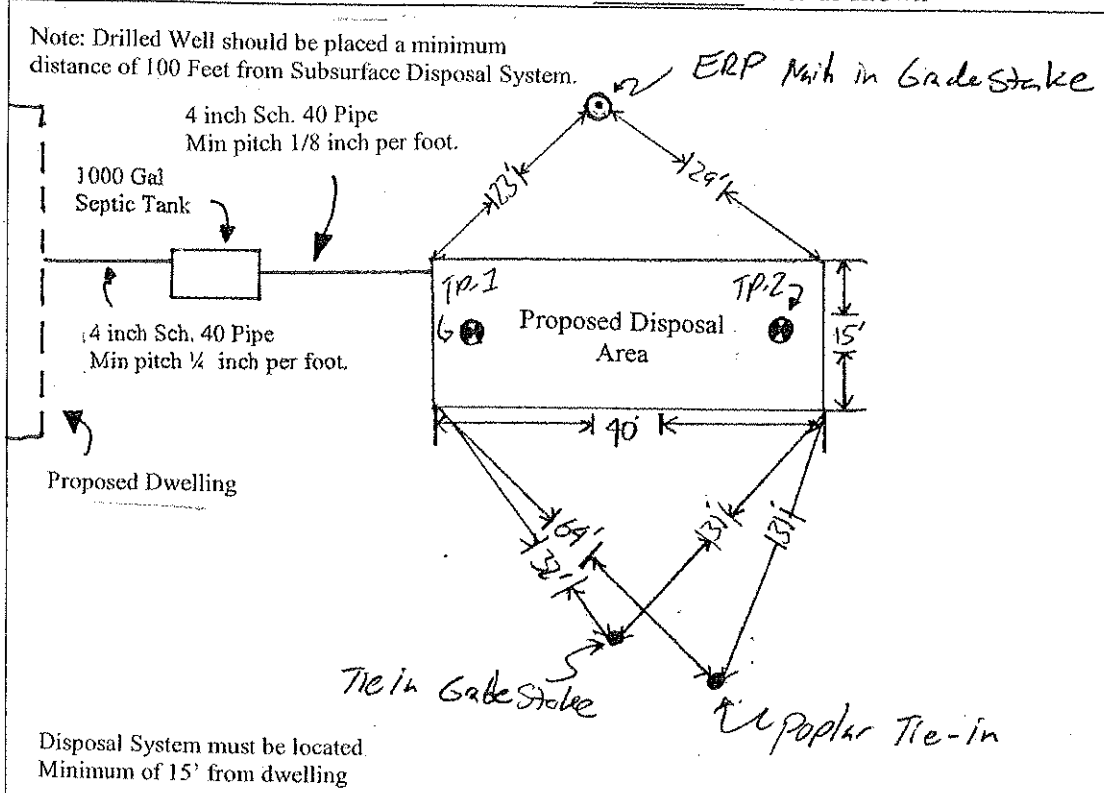
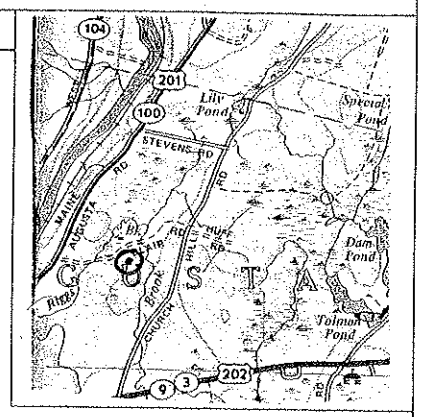
Maine Dept. Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Blair Road	Carrie DeHahn

SITE PLAN Scale 1" = 20 ft. or as shown





STATE OF MAINE
DALE F. KNAPP
LIC. #386
LICENSED SITE EVALUATOR

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	Loam	Friable	Lt. Brown	None Present
10	Loamy Sand		Reddish Brown	
20			Olive	
	X Test	X Pit	X Limit	X X X X
30				
40				
50				

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	15 %	24 "	[ ] Ground Water [X] Restrictive Layer [ ] Bedrock [ ] Pit Depth

Observation Hole 2 ☐ Test Pit ■ Boring

1 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	Loam	Friable	Lt. Brown	None Present
10	Loamy Sand		Reddish Brown	
20			Grayish Brown	
	X X Test	X Pit	X Limit	X X X X
30				
40				
50				

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	16 %	24 "	[ ] Ground Water [X] Restrictive Layer [ ] Bedrock [ ] Pit Depth

Site Evaluator Signature	SE #	Date
[signature]	386	4/22/2013

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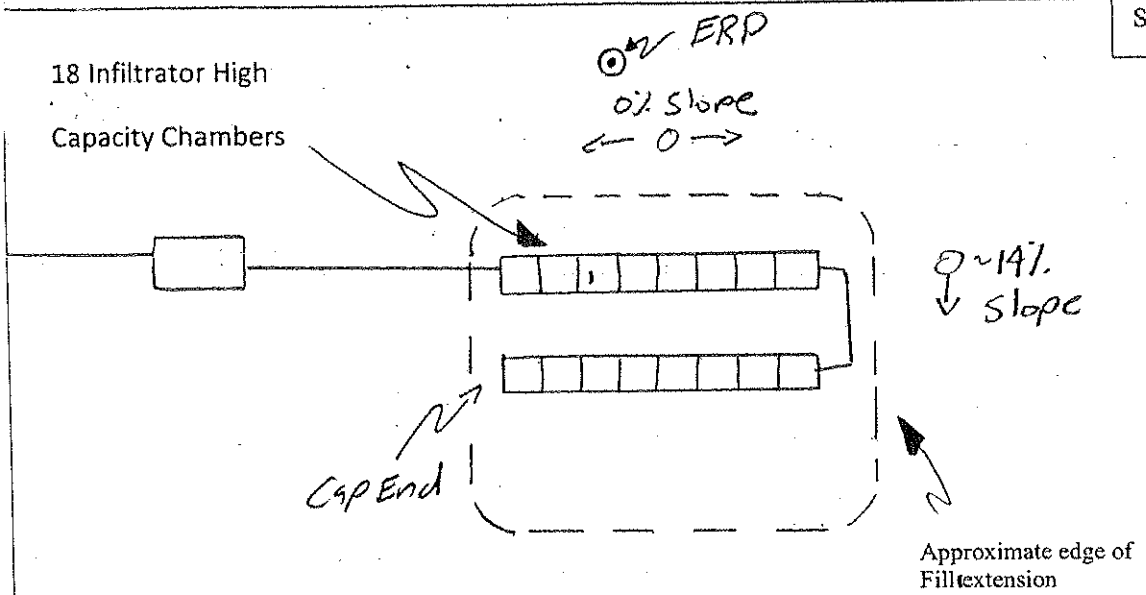
Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Blair Road	Carrie Deltahn

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	13"	Finished Grade Elevation Row 1 -63.5" Row 2 -73"	Location & Description: Flagged nail
		Top of Distribution Pipe or Proprietary Device R1 -72.5" R2 -82"	Stake @ 14" ABG
Depth of Fill (Downslope)	23"	Bottom of Disposal Area Row 1 -88.5" Row 2 -98"	Reference Elevation: 0.00

DISPOSAL AREA CROSS SECTION

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

(See Attachment to HHE-200)

Note: If during excavation bedrock is found to be located under the proposed disposal field please contact me at 729-1199 or 798-9636 so the design may be adjusted to meet code.

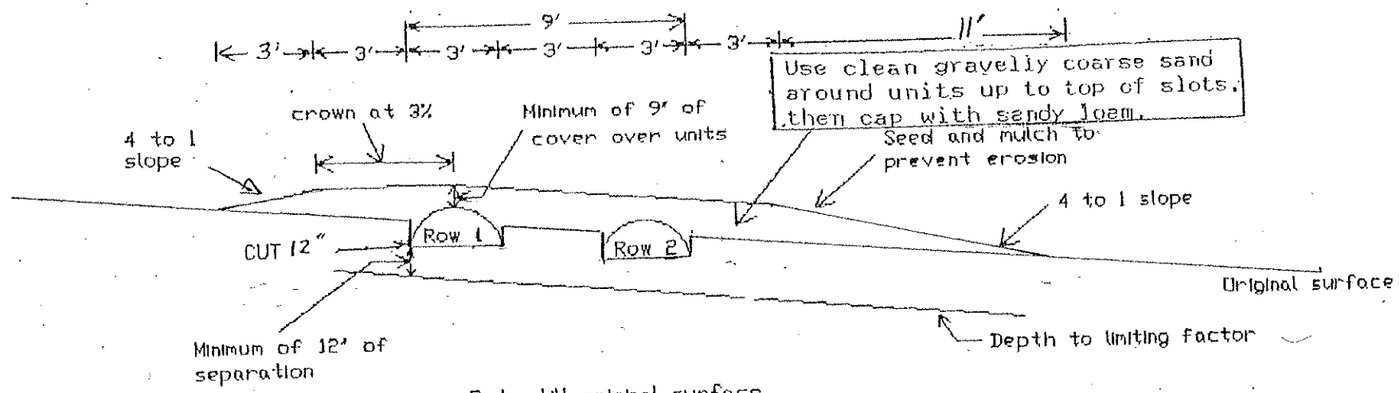
Site Evaluator Signature	SE #	Date
[signature]	386	09/22/2013

Augusta Blair Rd. Carrie Dethlen

ATTACHMENT TO FORM HHE-200

Reference elevation = 0'

ELEVATION NOTES	Top of Infiltrators	Bottom of Infiltrators
ROW 1	-72.5"	-88.5"
ROW 2	-82"	-98"



Roto-till original surface thoroughly in all areas of the system including fill extensions before placing fill.

Depth of Fill (Upslope) = 13"

Depth of Fill (Downslope) = 23"

SCALE:
Vertical: 1 inch = 5 feet
Horizontal: 1 inch = 5 feet

Dale Knapp LSE# 386 DATE: 09/22/2013