Madore, Robert

Original to be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

This Application Is For: (●) New System ( ) Expanded System ( ) Conversion Permit ( ) Experimental System ( ) Replacement Of Entire System ( ) Disposal Area Only

An Application For Subsurface Wastewater Disposal Permit

This Is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Town	Street, Road, Etc. (If On Water Body, Give Name)	Plumbing Permit No.	Date Of Plumbing Permit
AUGUSTA	EDWARDS ST.	35243 EP	9/4/80

Owner Of Property	Tel No	Name Of Applicant Owner's Agent	Tel No
ROBERT R. MADORE	623-9283		

Street	Town	State	Zip Code
86 WASHINGTON ST.	AUGUSTA	MAINE	04330

Owner's Signature	Date	Applicants Signature	Date
Robert R. Madore	9-3-80		

Size Of Lot	Is Lot Zoned?	Type Of Zoning	Subdivision Name	Lot No
0.75 ( ) Sq. Feet (●) Acres	(●) Yes ( ) No	RESIDENTIAL		

The Water Supply For This Property Is: ( ) Dug Well, depth ..... ( ) Drilled Well, depth ..... ( ) Spring, depth .....

Surface water ( ) Body ( ) Course — ( ) with disinfection, ( ) without disinfection Public Utility, name .....

SITE INVESTIGATION

Show Location Of Pits on Site Plan on Page 2

	Soil Profile No. 1 (●) Pit ( ) Boring	Soil Profile No. ( ) Pit ( ) Boring	Soil Profile No. ( ) Pit ( ) Boring	Soil Profile No. ( ) Pit ( ) Boring
Organic Strata	0			
1st Strata	BROWN LOAM, 9 inches	5TH LT OLIVE BRN SILTY COARSE SAND, 6 inches		
2nd Strata	YELLOW BROWN FSL, 17 inches	6TH OLIVE BRN SANDY SILT, 6 inches		
3rd Strata	LT YELLOW BROWN MED SANDY LOAM, 6 inches			
4th Strata	LT YELLOW BROWN COARSE SAND, 6 inches			
Total Depth of Observation Hole Inches	50			
Max. Seasonal Water Table Mottling	45 inches	( ) None Evident	( ) None Evident	( ) None Evident
Impervious Layer Clay, Etc.	46 inches	( ) None Evident	( ) None Evident	( ) None Evident
Bedrock	(●) None Evident	( ) None Evident	( ) None Evident	( ) None Evident
Surface Slope	9 %	%	%	%
Soil Group	6			
Soil Condition	B			
	Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II

On 6-28-80 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: Nelson Peterson

Date Signed: 6-29-80

Site Evaluator License Number: 00147

DISPOSAL SYSTEM PROPOSED

Show Location of System and Details on Disposal Plan on Page 2

SYSTEM:
(●) Combined System
( ) Separated System
If separated system — type of human waste disposal system to be used
( ) Sealed Vault Privy
( ) Open Pit Privy
( ) Compost Toilet
( ) Chemical Toilet
( ) Incinerator Toilet

TREATMENT TANK
( ) Aerobic Tank
(●) Septic Tank
(●) Concrete
( ) Fiberglass
( ) Metal
Size in Gallons: 1000 Gal
Number of Bedrooms: 3

SUBSURFACE ABSORPTION AREA/TYPE
(●) Bed System No. of Beds 1
Length 30 ft Width 20 ft
( ) Chamber System Number .....
( ) Type A ( ) Single File
( ) Type B ( ) Cluster
( ) Special System Length ..... ft
Width ..... ft
( ) Laundry System Type A .....
No. of Chambers NA Type B .....
Name and type of establishment if other than private home
SMALL SYSTEM
NA
CONSERVATIVE DESIGN

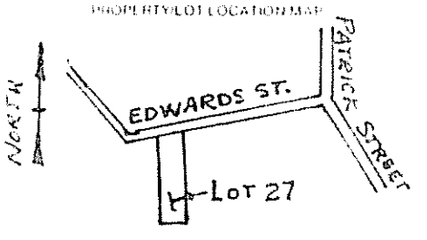
SIZE
(●) Small
( ) Medium
( ) Med.-Large
( ) Large
( ) Extra-Large
Design Flow 450 GPD

SITE MODIFICATION
Fill will be 0 in. uphill 24 in. downhill

DETAILS
( ) A Distribution Box is required
Pumping is — ( ) required (●) is not required
The dose will be ..... Gallons

DISTANCES
(●) Yes ( ) No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells, springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs.
(●) Yes ( ) No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.

PROPERTY/LOT LOCATION MAP



Location — roads, landmarks

WAIVER ( ) State Variance Required ( ) Replacement Variance Required (●) None Required

FOR THE USE OF LPI ONLY

( ) Denial: Application is denied for the following reasons; portions of the Code II are cited.
Form is incomplete (..... pg.) as to ( ) General info., ( ) Site Investigation, ( ) System Proposed, ( ) Site Plan, ( ) Disposal System Plan, ( ) Cross Section, ( ) Statement. See section 4.1
( ) Site investigation indicates site is ( ) unsuitable for disposal system ( ) Unsuitable for system proposed
( ) System Proposed does not conform to Code
( ) Site investigation indicates site modifications are necessary
(✓) Acceptance: Application for permit is approved ( ) with condition specified; comply with Section ..... ( ) without condition

Signature LPI: Richard P. Baker Date 9-3-80

HHE 200 1/78

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT

(For systems disposing of less than 2000 gallons per day)

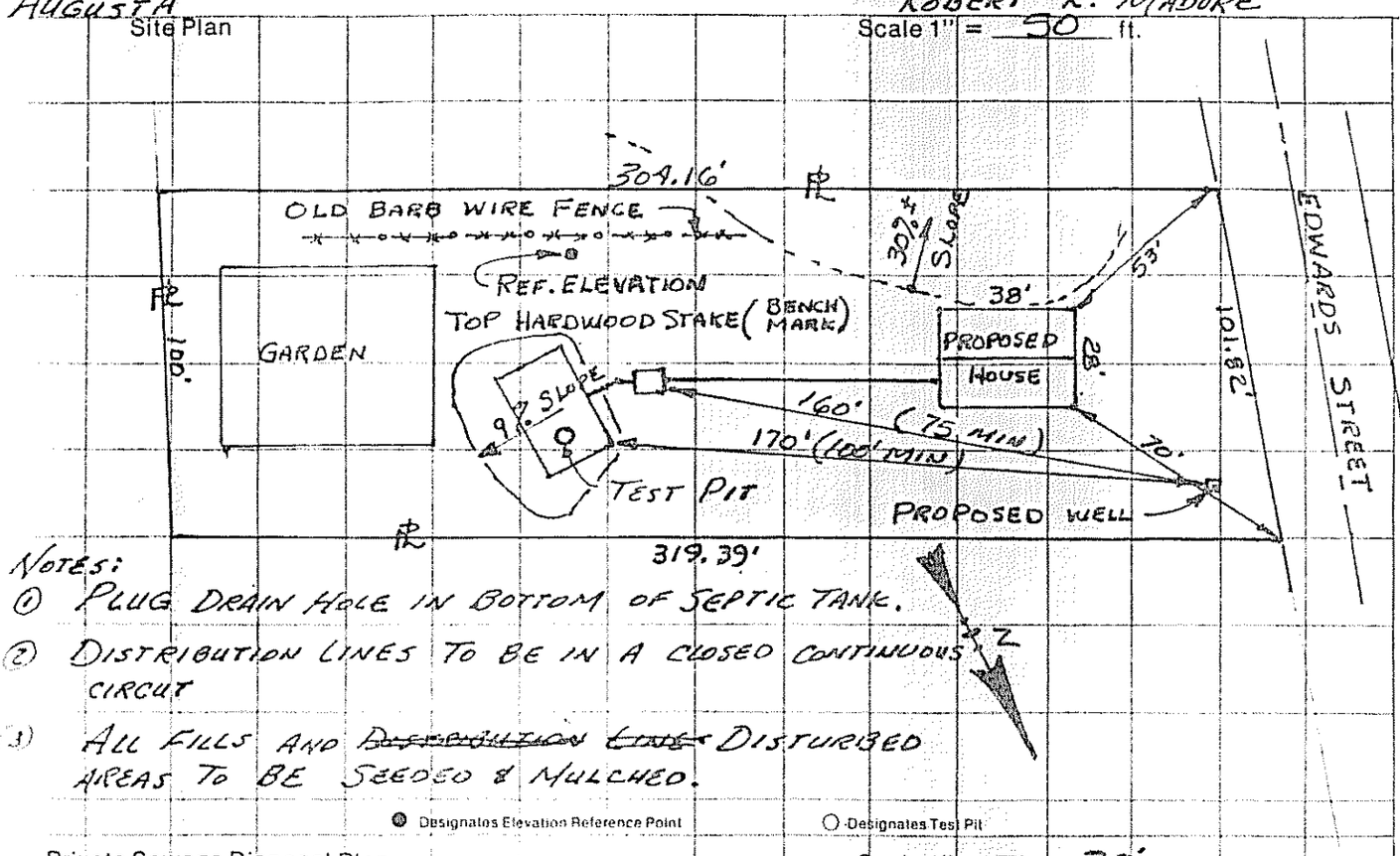
Town: AUGUSTA

Street, Road, etc: EDWARDS STREET

If on water body, give name

Owner of Property: ROBERT R. MADORE

Site Plan — Scale 1" = 30 ft.

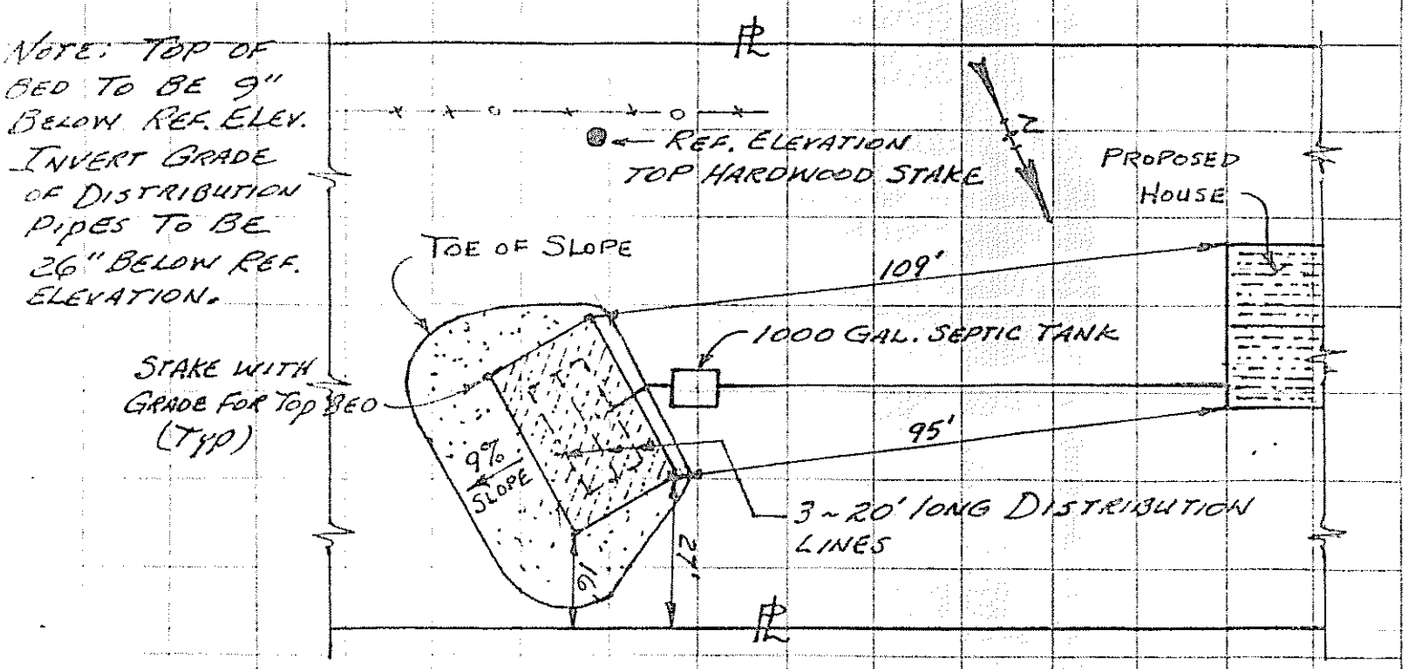


NOTES:

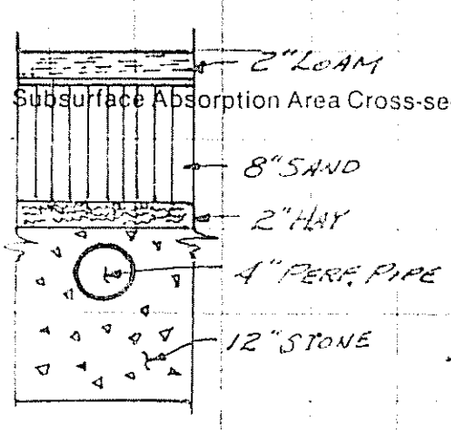
1. PLUG DRAIN HOLE IN BOTTOM OF SEPTIC TANK.
2. DISTRIBUTION LINES TO BE IN A CLOSED CONTINUOUS CIRCUIT
3. ALL FILLS AND ~~DISTRIBUTION LINE~~ DISTURBED AREAS TO BE SEEDED & MULCHED.

● Designates Elevation Reference Point ○ Designates Test Pit

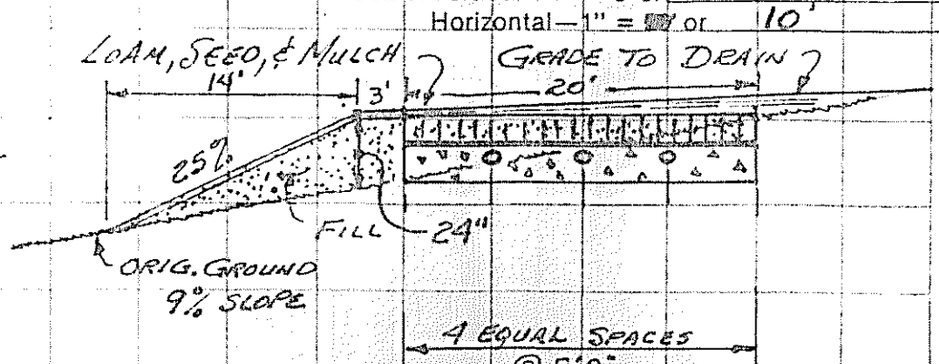
Private Sewage Disposal Plan — Scale 1" = or 30'



Subsurface Absorption Area Cross-section



Scale: Vertical—1" = 5' or
Horizontal—1" = or 10'



DETAILS

Site Evaluators Signature: Alan Peterson — Date: 7-3-80 — License Number: 00147

HHE-200

Applicant (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its

Signature Required

Date: 9/3/80

Applicant: Robert R. Madore

Owner: