

APPLICATION AND AGREEMENT

rec'd 7-25-77  
W. Lee Stone

TO WAIVE CERTAIN PROVISIONS OF THE PLUMBING CODE

I, W. LEE STONE, hereby apply to the Maine State Department  
(owner)  
of Human Services for permission authorizing the responsible Plumbing Inspector  
to waive certain provisions of the Plumbing Code for an installation in connection  
with a dwelling or building at CHURCH HILL RD, AUGUSTIA.  
(street) (city or town)

This may include materials, methods, dimensions or conditions not specifically  
approved by the Plumbing Code. Please draw a brief sketch of the property's  
location on the back of this form so an inspector can find it. Include landmarks,  
route numbers and street names.

Section of Code to be waived.	Description of specific waiver
1. T-9-1	INSTALL 20x70 BED ON 9-D SOIL
2. T-4-1	" " " 45' FROM DRILLED WELL
3.	(If additional space is needed, attach a list)

In all other respects, the installation will comply with the Code. The installa-  
tion will be made in accordance with the ATTACHED PLAN. A permit is to be issued  
by the Plumbing Inspector if he is in agreement. The undersigned stipulates that  
he is the owner and occupant of the building involved and that the building is  
not for sale in the foreseeable future. The installation will be made by:  
\_\_\_\_\_, License No. \_\_\_\_\_.

If any defects or inadequacies appear, I will promptly notify the State Department  
of Human Services and subsequently make such corrections as the Department shall  
find necessary

Owner's signature Mary A. Stone

NOTE: A PLAN TO SCALE  
MUST BE ATTACHED

Winter address Same as Summer FAIRLEE GRAHAM

Summer address RT 77 Aug. Me.

Telephone 722-2584 Date 7-19-77

THE FOLLOWING TO BE FILLED IN BY THE PLUMBING INSPECTOR

I am (Local), (~~Alternate~~) Plumbing Inspector for the town of AUGUSTIA.  
I have examined the plans for the installation described above and I find the building  
to be in my jurisdiction.

I (do), (~~do not~~) recommend the issuance of a special permit for the installation  
as described above.

PERMIT  
2/25/77  
PLM

Signed Richard P. Baker

Date 7-25-77

Return this form to the Division of Health Engineering, Department of Human Services,  
Augusta, Maine. NO permit shall be issued for this waiver until the Local Plumbing  
Inspector receives notification from this office.

Town Augusta Street, Road, etc. Church Hill Road Plumbing Permit No. 183 E.P. Date of Plumbing Permit 8-1-77  
 If on water body, give name

Owner of property M. Lee Stone, Church Hill Road, Augusta, Maine Owner's address Church Hill Road Size of lot 10+ Acres  Sq. feet  Zoned?  Yes  No Type of Zoning  Shoreland  Resource Protection

Name & type of establishment M. Lee Stone, Church Hill Road, Augusta, Maine If other than private home gpd  
 Name of applicant M. Lee Stone  
 Owner's agent Mary G. Stone  
 Applicant's address Church Hill Road Tel. No. 7-30-77  
 Street, Box, etc. Zip Code 04301

Applicant's signature Mary G. Stone Date 7-30-77  
 Owner's signature Mary G. Stone Date 7-30-77

This application is for:  New System  Expanded System  Replacement System  Treatment Tank Only  Disposal Area Only  
 The water supply for this property is:  Dug well, depth \_\_\_\_\_ lining \_\_\_\_\_  Drilled well, depth 30 ft. lining steel Spring   
 Surface water  Body  Course  with disinfection  without disinfection  Public Utility, name \_\_\_\_\_

**SITE INVESTIGATION** Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II.

Soil Profile No.	Soil Profile No.	Soil Profile No.	Soil Profile No.
1	2		
<input type="checkbox"/> Pit <input checked="" type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring	<input type="checkbox"/> Pit <input type="checkbox"/> Boring
Organic strata _____	Organic strata <u>SAND AS</u>	Organic strata _____	Organic strata _____
1st strata <u>Brown silt</u>	1st strata <u>#1</u>	1st strata _____	1st strata _____
11' loam			
2nd strata <u>Mottled 18+ clay/silt</u>	2nd strata _____	2nd strata _____	2nd strata _____
18+ clay/silt			
3rd strata <u>Olive grey 10+ clay silt</u>	3rd strata _____	3rd strata _____	3rd strata _____
10+ clay silt			

Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches	Total Depth of observation hole inches
42			
Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches
Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches
Bedrock _____ inches	Bedrock _____ inches	Bedrock _____ inches	Bedrock _____ inches
<input type="checkbox"/> None Evident	<input type="checkbox"/> None Evident	<input type="checkbox"/> None Evident	<input type="checkbox"/> None Evident
Type of Bedrock _____	Type of Bedrock _____	Type of Bedrock _____	Type of Bedrock _____
Surface slope <u>0-2</u> %	Surface slope _____ %	Surface slope _____ %	Surface slope _____ %
Soil Group & Condition per Table 9-1 of the Code, II <u>9-D</u>	Soil Group & Condition per Table 9-1 of the Code, II _____	Soil Group & Condition per Table 9-1 of the Code, II _____	Soil Group & Condition per Table 9-1 of the Code, II _____

On 7/7/1977 (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 Wm W. Peckham Health Engineering License No. 51  
 Date signed 7/9/1977

**PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED** Show location of system and details on sketches on page 2, and refer to completed sample form.

**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  
 Incinerator Toilet  
 Chemical Toilet  
 Other, describe \_\_\_\_\_

**TREATMENT TANK:**  Septic Tank  Concrete  Fiberglass  Metal  
 Size in gallons 1000

Aerobic Tank  
 Manufacturer—\_\_\_\_\_  
 Model No. \_\_\_\_\_  
 Size in gallons \_\_\_\_\_

**SUBSURFACE ABSORPTION AREA**

Type	Length	Width	Number	Cluster	SIZE
<input type="checkbox"/> Trench System: Total trench length _____					<input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> Extra Large
<input checked="" type="checkbox"/> Bad System	<u>70</u>	<u>20</u>			
<input type="checkbox"/> Chamber System					
<input type="checkbox"/> Type A					
<input type="checkbox"/> Type B					
<input type="checkbox"/> Mound System					
Width _____					
Special System _____					
Width _____					
<b>WAIVER</b>					
<input checked="" type="checkbox"/> Required					
<input type="checkbox"/> Not Required					

**DETAILS**  
 A Distribution Box is required  
 Pumping is 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.

**FOR THE USE OF LPI ONLY**

Denial: Application is denied for 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 2.3.  
 Site investigation indicates site is totally unsuitable for disposal system. Sections 4.5 and 9.5, Table 9-1 Group 9 and 10.  Unsuitable for system proposed. Sections 4.3, 4.6, 9.5, Table 9-1.  
 System Proposed does not conform to Code. See Sections 9.  
 Site investigation indicates site modifications are necessary. See Sections 9, 4.3, 4.4, 4.6, 4.7, 4.8, 4.9, 4.10, 4.11, 4.12, 4.13, 4.14, 4.15, 4.16, 4.17, 4.18, 4.19, 4.20, 4.21, 4.22, 4.23, 4.24, 4.25, 4.26, 4.27, 4.28, 4.29, 4.30, 4.31, 4.32, 4.33, 4.34, 4.35, 4.36, 4.37, 4.38, 4.39, 4.40, 4.41, 4.42, 4.43, 4.44, 4.45, 4.46, 4.47, 4.48, 4.49, 4.50, 4.51, 4.52, 4.53, 4.54, 4.55, 4.56, 4.57, 4.58, 4.59, 4.60, 4.61, 4.62, 4.63, 4.64, 4.65, 4.66, 4.67, 4.68, 4.69, 4.70, 4.71, 4.72, 4.73, 4.74, 4.75, 4.76, 4.77, 4.78, 4.79, 4.80, 4.81, 4.82, 4.83, 4.84, 4.85, 4.86, 4.87, 4.88, 4.89, 4.90, 4.91, 4.92, 4.93, 4.94, 4.95, 4.96, 4.97, 4.98, 4.99, 5.00.

PROPERTY/LOT LOCATION MAP  
MT.  
3  
3/4 M. ✓  
CHURCH HILL ROAD

Location—roads, landmarks

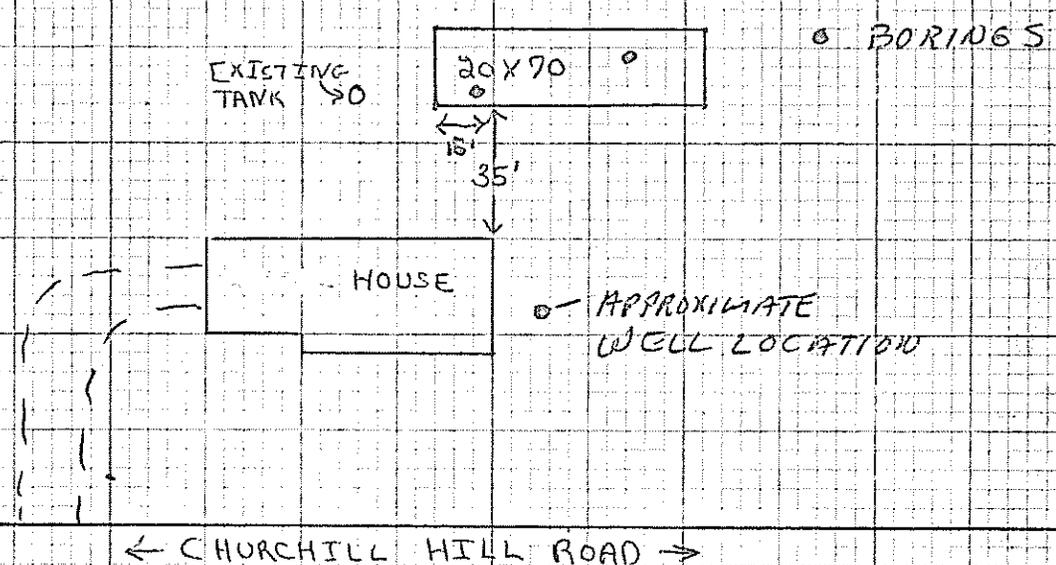
Acceptance: Application for permit is approved  without condition  with condition specified, comply with Section SEE WAIVER  
 Signed LPI Richard R. Baker Date 8-1-77 HHE-200 1/77

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT  
(For systems disposing of less than 2000 gallons per day)

Town <b>Augusta</b>	Street, Road, etc <b>Church Hill Road</b> <small>If on water body, give name</small>	Owner of property <b>M. Lee Stone</b>
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Site Plan

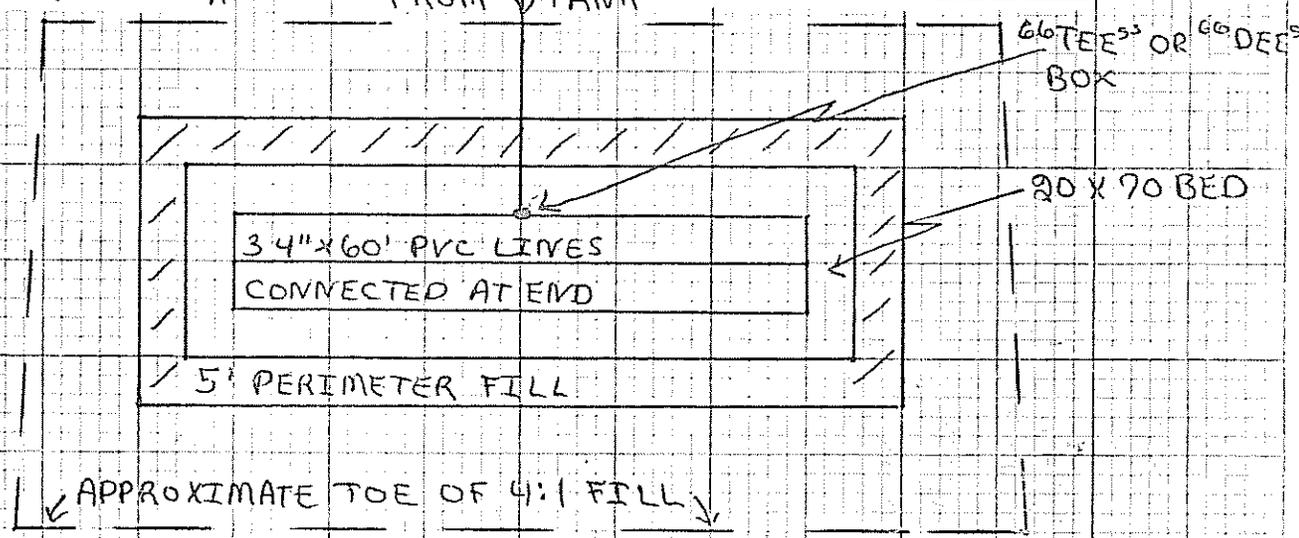
Scale 1" = 10 Ft. or 1" = 50'



Private Sewage Disposal Plan A

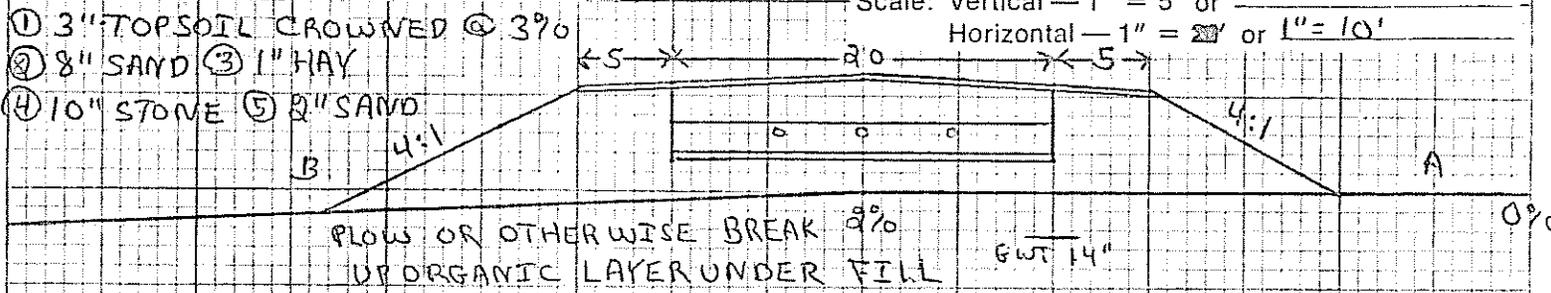
FROM TANK

Scale 1" = 20' or



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or  
Horizontal — 1" = 20' or 1" = 10'



Statement: (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 agent.

Signature Required  
Date: *7-29-77*  
Applicant: *Jewell Pearl*  
Owner: *Mary O. Stone*