

DUPLICATE — To be retained by the Plumbing Inspector

MAINE DEPARTMENT OF HEALTH AND WELFARE APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT		(For systems disposing of less than 2000 gallons per day)	This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit.		Page 1 of 2
Town <i>Augusta</i>	Street, Road, etc. <i>Cross Hill Rd</i>		Permit No. <i>16251</i>	Date <i>7/16/75</i>	
Owner of property <i>Norman Moore</i>		Owner's address		Size of lot <i>1/4 ACR PLUS</i>	<input type="checkbox"/> Sq. feet <input type="checkbox"/> Acres
Name & type of establishment if other than private home <i>Private Home</i>		Is lot Zoned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Type of Zoning <i>NA</i> <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Resource Protection	
Name of applicant Owner's agent <i>Edward S. Coffin</i>		If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: <input type="checkbox"/> Deed restriction re. private sewage disposal <input type="checkbox"/> Copy of the subdivision's soils report <input type="checkbox"/> Soils report from a State Agency			
Applicant's address Street, Box, etc. <i>RFD #2 Cony Rd</i>		Tel. No. <i>623-7475</i>			
Town <i>Augusta</i>	Maine <i>ME</i>		Subdivision name <i>NA</i>		Lot No.
Applicant's signature <i>Edward S. Coffin</i>		Date <i>July 16, 1975</i>			
Owner's signature		Date			

This application is for: New System Expanded System Replacement System Replacement of Treatment Tank Only Disposal Area Only

The water supply for this property is: Dug well, depth _____, lining _____; Drilled well, depth _____, lining _____; Spring depth _____, lining _____; 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. 1		Soil Profile No. 2		Soil Profile No. 3		Soil Profile No.		Soil Profile No.	
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<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	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>	<i>dark brown to sandy loam</i>
1st strata	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>	<i>med. brown to sandy loam</i>
2nd strata	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>	<i>Copper brown to sandy loam</i>
3rd strata	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>	<i>olive gray to loamy sand</i>
Total Depth of observation hole	Inches <i>46"</i>	Inches <i>28"</i>	Inches <i>25"</i>	Inches						
Max. Ground water table—mottling	<input type="checkbox"/> None Evident <i>very faint mottling</i> Inches <i>24"</i>	<input type="checkbox"/> None Evident <i>very faint mottling</i> Inches <i>26"</i>	<input type="checkbox"/> None Evident <i>very faint mottling</i> Inches <i>21"</i>	<input type="checkbox"/> None Evident Inches						
Impervious layer, clay, etc.	<input type="checkbox"/> None Evident <i>weakly developed</i> Inches <i>20"</i>	<input type="checkbox"/> None Evident <i>weakly developed</i> Inches <i>21"</i>	<input type="checkbox"/> None Evident <i>weakly developed</i> Inches <i>21"</i>	<input type="checkbox"/> None Evident Inches						
Bedrock	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident	<input checked="" type="checkbox"/> None Evident
Type of Bedrock										
Surface slope	<i>2%</i>	<i>2%</i>	<i>2%</i>	%	%	%	%	%	%	%
Soil Group & Condition per Table 9-1 of the Code, II	<i>B-3</i>	<i>B-3</i>	<i>B-3</i>							

On *7/16/75* (date), a site investigation for this project was completed. I supervised 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 and Registration/Certification Number
Edward S. Coffin 1630

Date signed _____

Soil Scientist
 Geologist
 Soil Engineer
 Other, must show current letter of certification to LPI

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

SYSTEM: <input type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe _____ See Chapter 9 of the Code, II.	TREATMENT TANK: <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Manufacturer— Size in gallons <input type="checkbox"/> Aerobic Tank Manufacturer— Model No. Size in gallons	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION Fill is— <input checked="" type="checkbox"/> required, <input type="checkbox"/> not required Fill will be <i>24</i> inches deep
		Type <input type="checkbox"/> Trench System: Total trench length _____ <input type="checkbox"/> Bed System Length <i>75</i> Width <i>20</i> <input type="checkbox"/> Chamber System <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type F <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____ <input type="checkbox"/> Non-discharge System Bed-Length _____ Width _____ Holding Tank Size _____ Gal. Manufacturer _____ <input type="checkbox"/> Alarm device provided, type _____	SIZE <input type="checkbox"/> Very Small <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Medium Large <input checked="" type="checkbox"/> Large <input type="checkbox"/> Extra Large	DETAILS <input type="checkbox"/> A Distribution Box is required Pumping is— <input type="checkbox"/> required, <input type="checkbox"/> is not required. The Dose will be _____ gallons

PROPERTY/LOT LOCATION MAP

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 4.3, 4.4, 4.6, 8.7, _____

Miscellaneous _____ See Section _____

Acceptance: Application for permit is approved with condition specified, comply with Section _____ without condition.

Signed LPI _____ Date _____

Location—roads, landmarks *R. 103, R. 25m, Bottom Well, etc.*

HHE-200 7/74

MAINE DEPARTMENT OF HEALTH AND WELFARE

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

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

Town <i>Augusta</i>	Street, Road, etc. If on water body, give name <i>Crown Hill Rd</i>	Owner of property <i>Mason</i>
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Site Plan

Scale 1" = 100 Ft. or

Private Sewage Disposal Plan

Scale 1" = 20' or

Subsurface Absorption Area Cross-section

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

Septic Tank

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:

Applicant:

July 14, 1974
Edward L. Coffey