m9 L37

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

Town or Location: AUGUSTA

Street Subdivision Lot #: LEIGHTON RD

AUGUSTA 3801 TOWN COPY

Date Permit Issued: 10/17/97

$ 160.00 FEE ☐ If Double Fee Charged

L.P.I. # 850

Local Plumbing Inspector Signature

PROPERTY OWNER'S NAME

Last: BLAIS First: REJEAN

Applicant's Name: SAME

Mailing Address of Owner: R-5 B-1690 AUGUSTA, ME 04330

Daytime Tel. #: 623-9164

Municipal Tax Map #: 19 Lot #: 37

Owner 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

Signature Date

Caution: Inspection Required

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

Local Plumbing Inspector Signature Date Approved 10/21/97

PERMIT INFORMATION

TYPE OF APPLICATION:

1. ☐ First Time System
2. ☒ Replacement System
   Type Replaced _____
   Year Installed _____
3. ☐ Expanded System
   ☐ a. one time exempted
   ☐ b. non exempted
4. ☐ Experimental System
   ☐ 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. ☒ Non-Engineered System
2. ☐ Primitive System(graywater & alt toilet)
3. ☐ Alternative Toilet _____
4. ☐ Non-Engineered Treatment Tank
5. ☐ Holding Tank _____ Gallons
6. ☐ Non-Engineered Disposal Area (only)
7. ☐ Separated Laundry System
8. ☐ Engineered System (>2000 gpd)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal Area (only)
11. ☐ Pretreatment

SIZE OF PROPERTY

38 Acr

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE:

1. ☐ Single Family Dwelling Unit
2. ☒ Multiple Family Dwelling: Number of Units 2
3. ☐ Other _____

TYPE OF WATER SUPPLY

AUGUSTA W.D.

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ Concrete
   ☒ a. Regular
   ☐ b. Low Profile
2. ☐ Plastic
3. ☐ Other _____

SIZE 1500 Gallons

DISPOSAL AREA TYPE / SIZE

1. ☒ Bed 1600 Sq. Ft.
2. ☐ Proprietary Device _____ Sq. Ft.
   ☐ Cluster ☐ Linear
   ☐ Regular ☐ H-20
3. ☐ Trench
4. ☐ Other _____

GARBAGE DISPOSAL UNIT

1. ☐ No
2. ☒ Yes
   ☐ Multi-compartment tank
   ☐ Tank in series
   ☐ Increase in tank capacity
   ☒ Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

4 BEDROOMS @ 98 G.P.D. EACH.

DESIGN FLOW: 390 (Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE: B DESIGN: C

DEPTH TO MOST LIMITING FACTOR 15"

DISPOSAL AREA SIZING

1. ☐ Small - 2.00
2. ☐ Medium - 2.60
3. ☐ Medium-Large - 3.30
4. ☒ Large - 4.10
5. ☐ Extra-Large - 5.20

PUMPING

1. ☐ Not required
2. ☒ May be required
3. ☐ Required

DOSE 90 Gallons

SITE EVALUATOR'S STATEMENT

On 10/16/97 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed sytem is in compliance with the Subsurface Wastewater Disposal Rules.

Site Evaluator Signature: William W. Rideout

SE #: 51

Date: 10/16/97

Site Evaluator Name Printed: WILLIAM W. RIDEOUT

Telephone: (207) 582-4161

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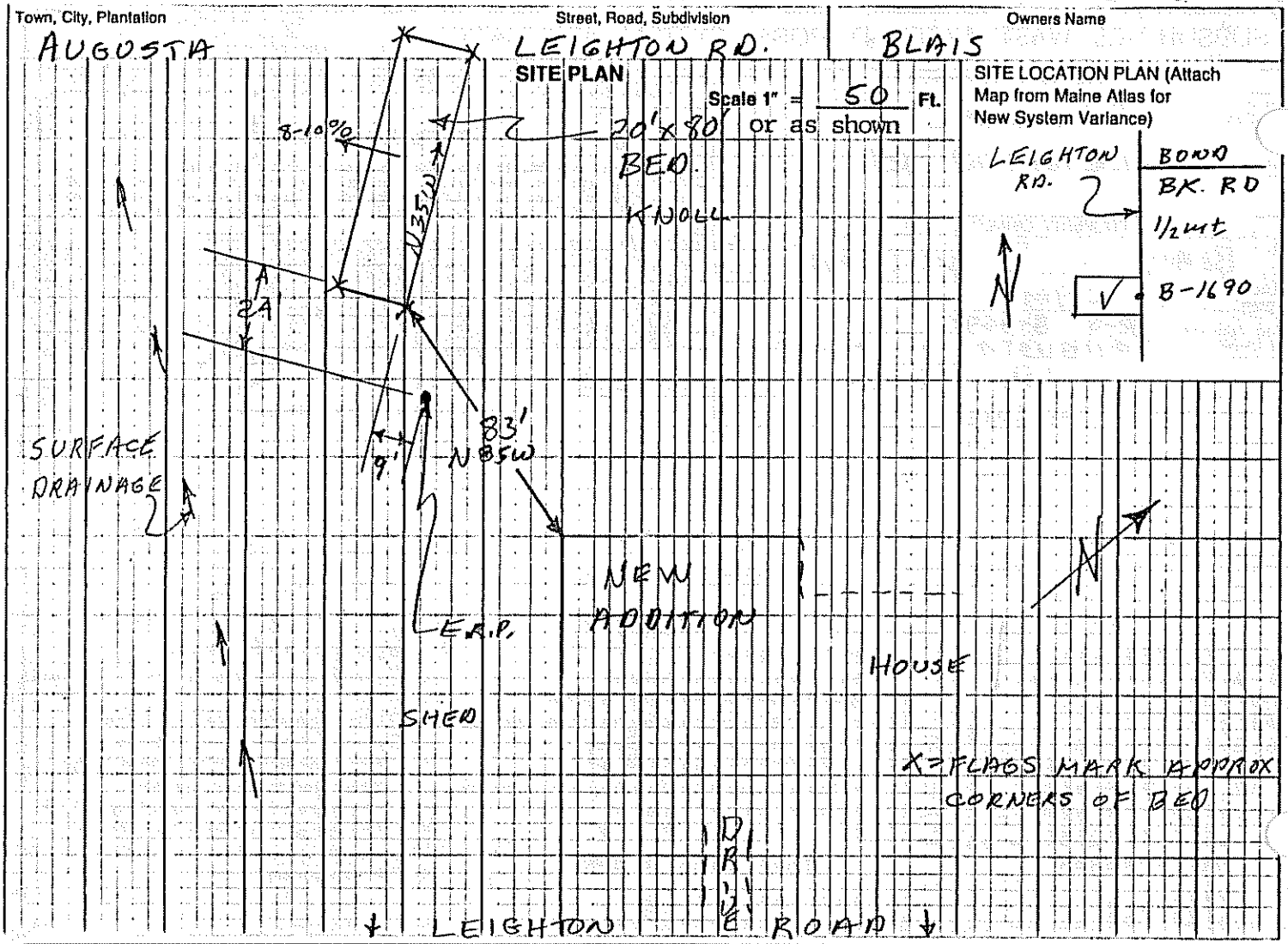
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	LEIGHTON RD.	BLAIS

SITE PLAN Scale 1" = 50 Ft.



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
0–6	L	FRIABLE	B	
6–15				15"
15–20	INTER	FIRM	G.B.	
20–30	F.S.			
30–40	Si			
40–50	+ Cl			

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor	
B	C	10 %	15"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6				
6–15				
15–20				
20–30				
30–40				
40–50				

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor	
		%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Wm W. Rideout
Site Evaluator Signature

#51
SE#

10/16/97
Date

HHE-200 Rev.1/84

Department of Human Services
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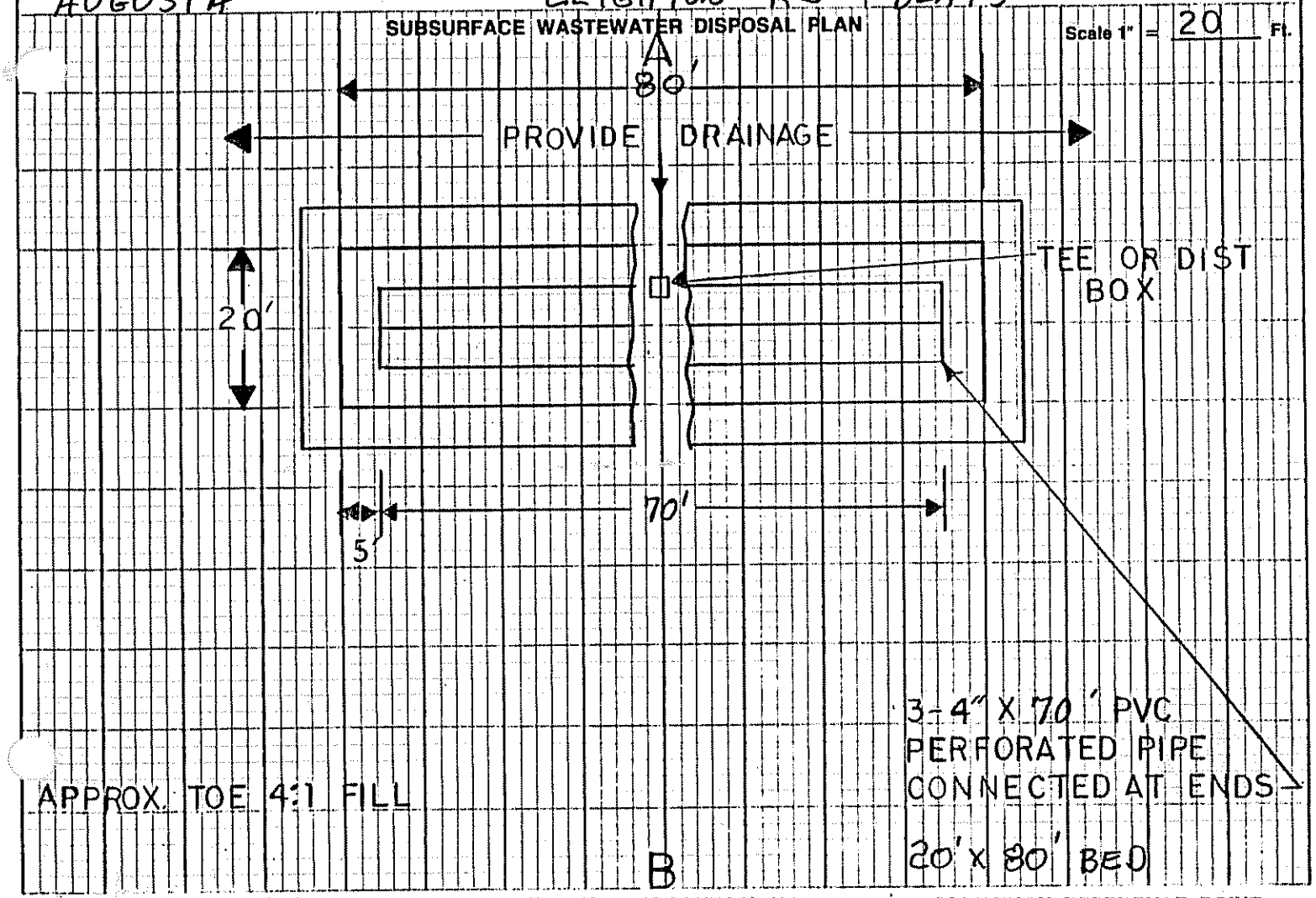
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 21"
Depth of Fill (Downslope) 48"

CONSTRUCTION ELEVATIONS

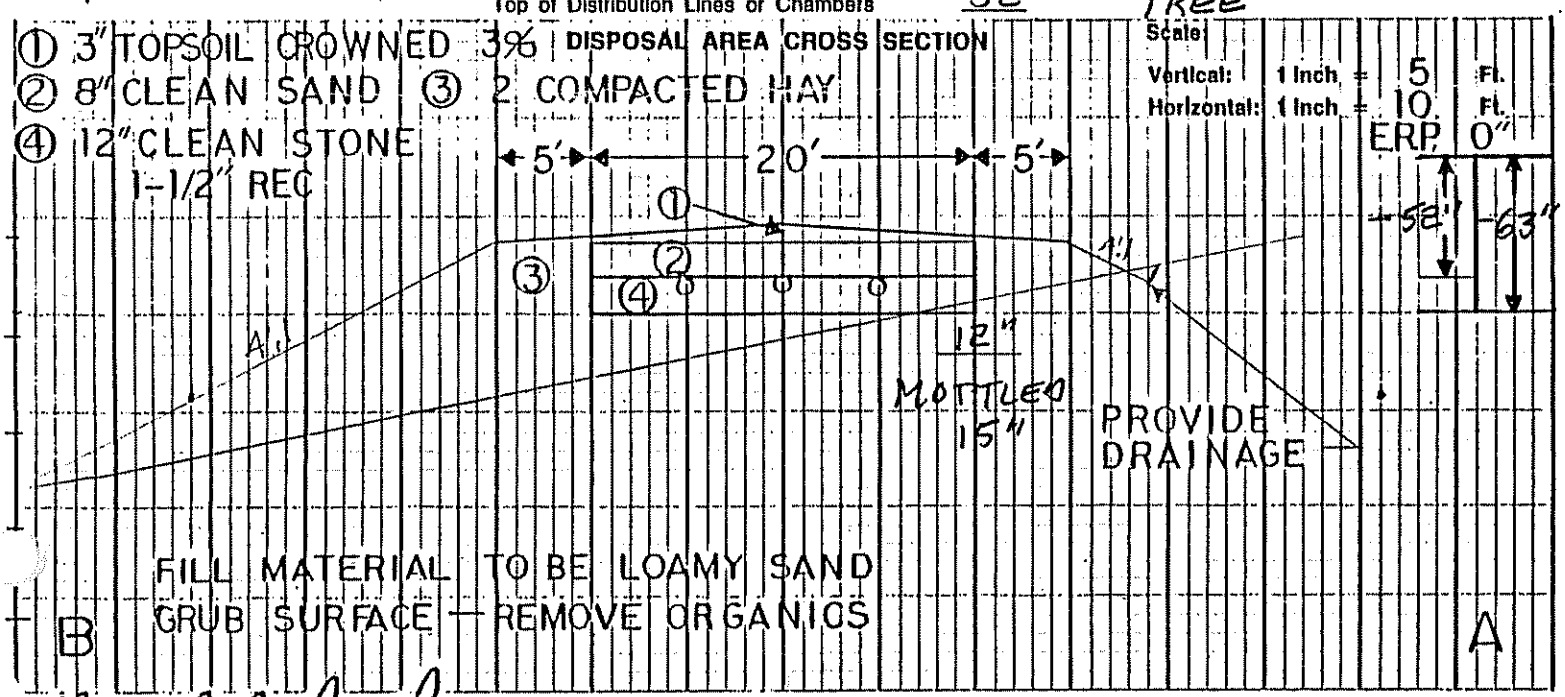
Reference Elevation is 0
Bottom of Disposal Area -63"
Top of Distribution Lines or Chambers -52"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL IN 5" APPLE TREE

DISPOSAL AREA CROSS SECTION

Scale
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



Site Evaluator Signature: [signature]

SE#: 51

Date: 10/16/97