SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

', Town, 'lantation	Augusta
Street or Road	Pioneer Road
Subdivision, Lot #	

>> Caution: Permit Required – Attach In Space Below <<

AUGUSTA PERMIT # 5645 TOWN COPY
Date Permit Issued: 9/19/05 $ 109 ☐ If Double Fee Charged FEE
Local Plumbing Inspector Signature L.P.I. # 872

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Aikwa East Little League — Owner / Applicant
Mailing Address of ☐ Owner ☒ Applicant	PO Box 4660
Daytime Tel. #	445 4799

Municipal Tax Map # 10 Lot # 32

Owner or Applicant 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] 9-20-05
Signature of Owner or Applicant Date

Caution: Inspections Required

I have inspected the installation authorized 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
Time Replaced: _____
Installed: _____
3. ☐ Expanded System
   a. ☐ One-time exempted
   b. ☐ Non-exempted
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 Approval

DISPOSAL SYSTEM COMPONENT(S)
1. ☐ Complete Non-engineered System
2. ☐ Primitive System (graywater & alt toilet)
3. ☐ Alternative Toilet, specify: _____
4. ☐ Non-Engineered Treatment Tank (only)
5. ☒ Holding Tank, 1500 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
☐ sq. ft.
☐ acres

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE
1. ☐ Single Family Dwelling Unit, No. of Bedrooms: _____
2. ☐ Multiple Family Dwelling, No. of Units: _____
3. ☐ Other: Cassell Lee Co
SPECIFY

TYPE OF WATER SUPPLY
1. ☐ Drilled Well 2. ☐ Dug Well 3. ☐ Private
4. ☒ Public 5. ☐ Other:

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ Concrete
   a. ☐ Regular
   b. ☐ Low Profile
2. ☐ Plastic
3. ☐ Other: _____
CAPACITY 1500 gallons

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: N/A
SIZE _____ ☐ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
1. ☐ No 3. ☐ Maybe
2. ☐ Yes >> Specify one below:
   a. ☐ Multi-compartment Tank
   b. ☐ Tanks in Series
   c. ☐ Increase in Tank Capacity
   d. ☒ Filter on Tank Outlet
N/A

DESIGN FLOW
_____ gallons per day
BASED ON:
1. ☐ Table 501.1 (dwelling unit(s)
2. ☐ Table 501.2 (other facilities)
SHOW CALCULATIONS
– for other facilities –
N/A
Seasonal
3. ☐ Section 503.0 (meter readings)
ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
_____/_____/_____
at Observation Hole #_____
Depth _____" Elevation_____"
OF MOST LIMITING SOIL FACTOR

DISPOSAL FIELD SIZING
1. ☐ Small – 2.0 sq. ft./gpd
2. ☐ Medium – 2.6 sq. ft./gpd
3. ☐ Medium-Large – 3.3 sq. ft./gpd
4. ☐ Large – 4.1 sq. ft./gpd
5. ☐ Extra Large – 5.0 sq. ft./gpd

PUMPING
1. ☐ Not Required
2. ☐ May Be Required
3. ☐ Required >> Specify only for engineered or experimental systems:
DOSE: gallons

SITE EVALUATOR STATEMENT

I certify that on _____ (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 SE # Date

Site Evaluator Name Printed Telephone #