SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

M11 L169

AUGUSTA PERMIT # 215 ✓ STATE COPY

Date Permit Issued: 5 11 84 $ 40 FEE

111 Robert St Pierre — Local Plumbing Inspector Signature — L.P.I. # 6617 — ☐ If Double Charged

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Leavitt Road

PROPERTY OWNERS NAME

Last: Wildes First: Sharon

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	326 Eastern Avenue Augusta, Maine 04330

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant — Date

Caution: Inspection Required

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

Robert St Pierre — Local Plumbing Inspector Signature — 6/21/84 Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. [X] NEW SYSTEM
2. [ ] REPLACEMENT SYSTEM
3. [ ] EXPANDED SYSTEM
4. [ ] SEASONAL CONVERSION
5. [ ] EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. [X] NO RULE VARIANCE REQUIRED
2. [ ] NEW SYSTEM VARIANCE Attach New System Variance Form
   [ ] REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. [ ] Requires only Local Plumbing Inspector Approval
   4. [ ] Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS

COMPLETE SYSTEM

1. [X] NON-ENGINEERED SYSTEM
2. [ ] PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. [ ] ENGINEERED (> 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. [ ] TREATMENT TANK (ONLY)
5. [ ] HOLDING TANK
6. [ ] ALTERNATIVE TOILET (ONLY)
7. [ ] NON-ENGINEERED DISPOSAL AREA (ONLY)
8. [ ] ENGINEERED DISPOSAL AREA (ONLY)
9. [ ] SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

1. [ ] BED 3. [ ] TRENCH
2. [ ] CHAMBER 4. [ ] OTHER _____

DISPOSAL SYSTEM TO SERVE:

1. [X] SINGLE FAMILY DWELLING
2. [ ] MODULAR OR MOBILE HOME
3. [ ] MULTIPLE FAMILY DWELLING
4. [ ] OTHER _____ SPECIFY

SIZE OF PROPERTY: 3.5A ±

ZONING:

TYPE OF WATER SUPPLY: Drilled

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. [X] SEPTIC [ ] Regular [ ] Low Profile
2. [ ] AEROBIC

SIZE 1000 GALS

WATER CONSERVATION

1. [ ] NONE
2. [X] LOW VOLUME TOILET
3. [ ] SEPARATED LAUNDRY SYSTEM
4. [ ] ALTERNATIVE TOILET

SPECIFY _____

PUMPING

1. [ ] NOT REQUIRED
2. [X] MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. [ ] REQUIRED

DOSE: 60 GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

3 Bedroom

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR 27"

SIZE RATINGS USED FOR DESIGN PURPOSES

1. [ ] SMALL
2. [ ] MEDIUM
3. [X] MEDIUM-LARGE
4. [ ] LARGE
5. [ ] EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. [X] BED 900 Sq. Ft
2. [ ] CHAMBER _____ Sq. Ft
   [ ] REGULAR [ ] H-20
3. [ ] TRENCH _____ Linear Ft
4. [ ] OTHER _____

DESIGN FLOW 270 (GALLONS DAY)

SITE EVALUATOR STATEMENT

( ) SITE EVALUATION WAIVED BY LOCAL OPTION

On 6-21-83 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

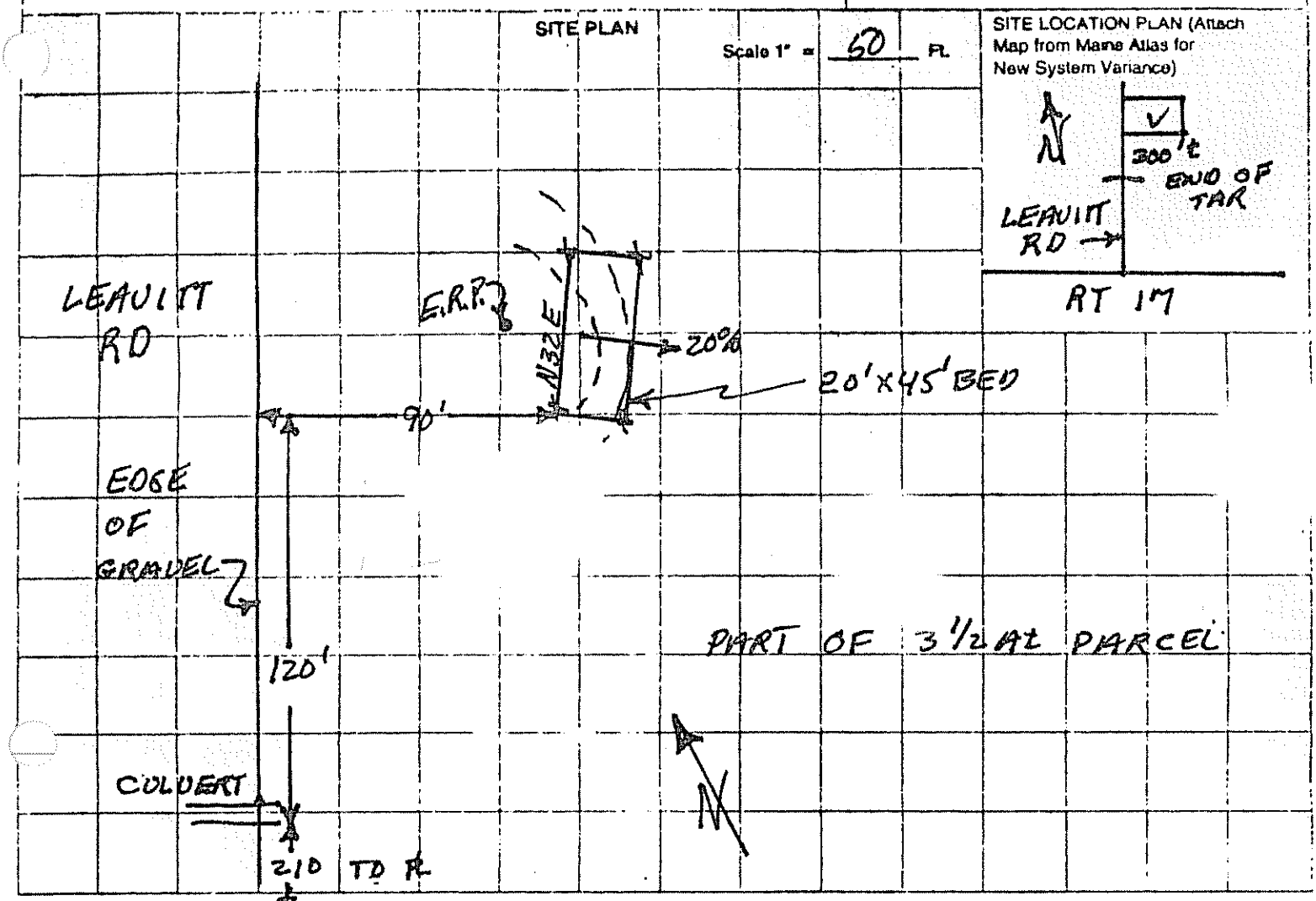
Alan W Richard #51 6-28-83

City

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION — Division of Health Engineering

Town, City, Plantation | Street, Road, Subdivision | Owners Name

SITE PLAN — Scale 1" = 60 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
0–10	S.L.	Friable	R.B	
10–30				
30–50		Firm	G.B	

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor
3	C	20%	27"

☐ 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
0–50				

Soil (Profile)	Classification (Condition)	Slope	Limiting Factor
		%	

☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

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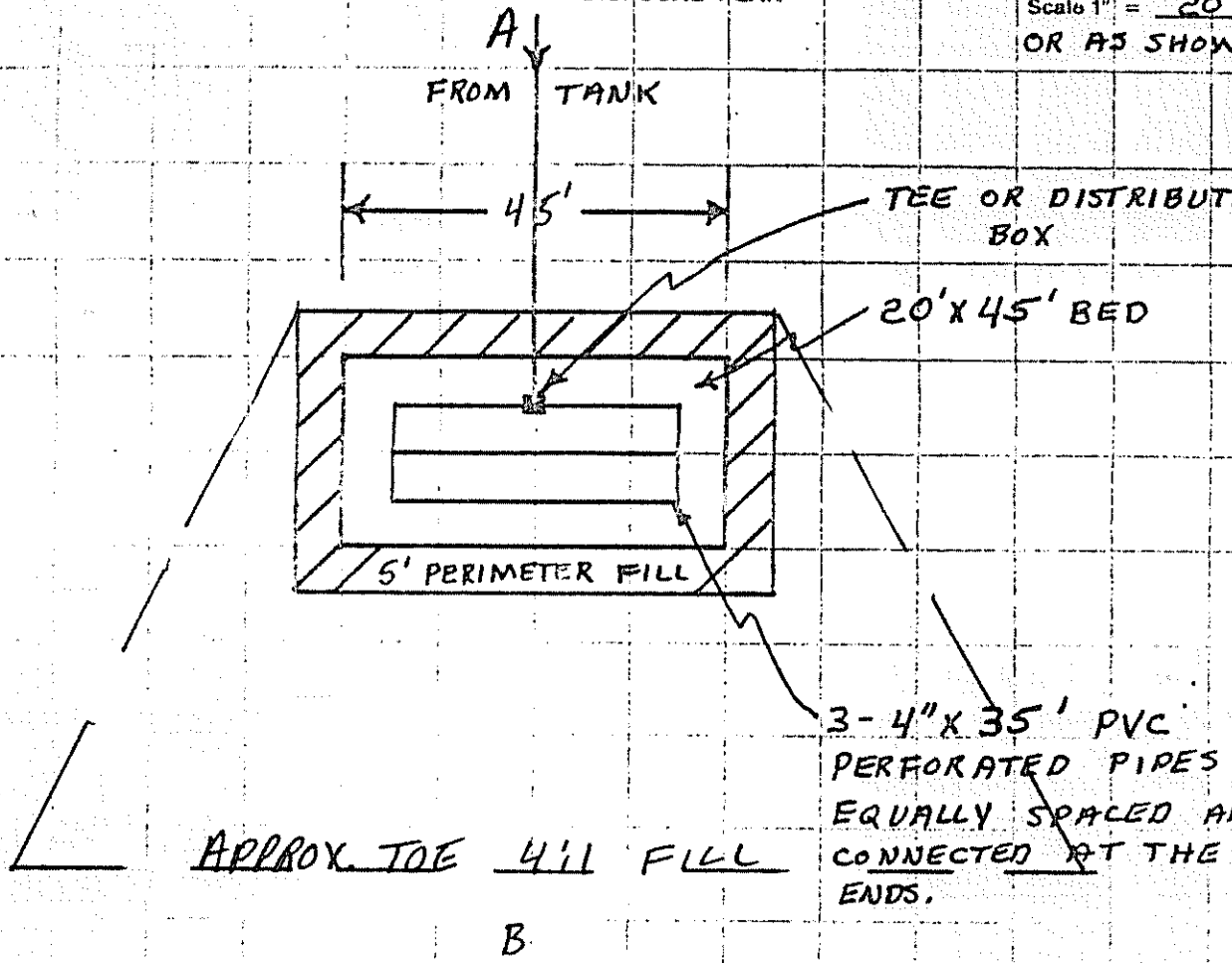
Town, City, Plantation	Street, Road, Subdivision	Owners Name
Augusta	Leavitt Road	Wildes, Sharon

SUBSURFACE WASTEWATER DISPOSAL PLAN

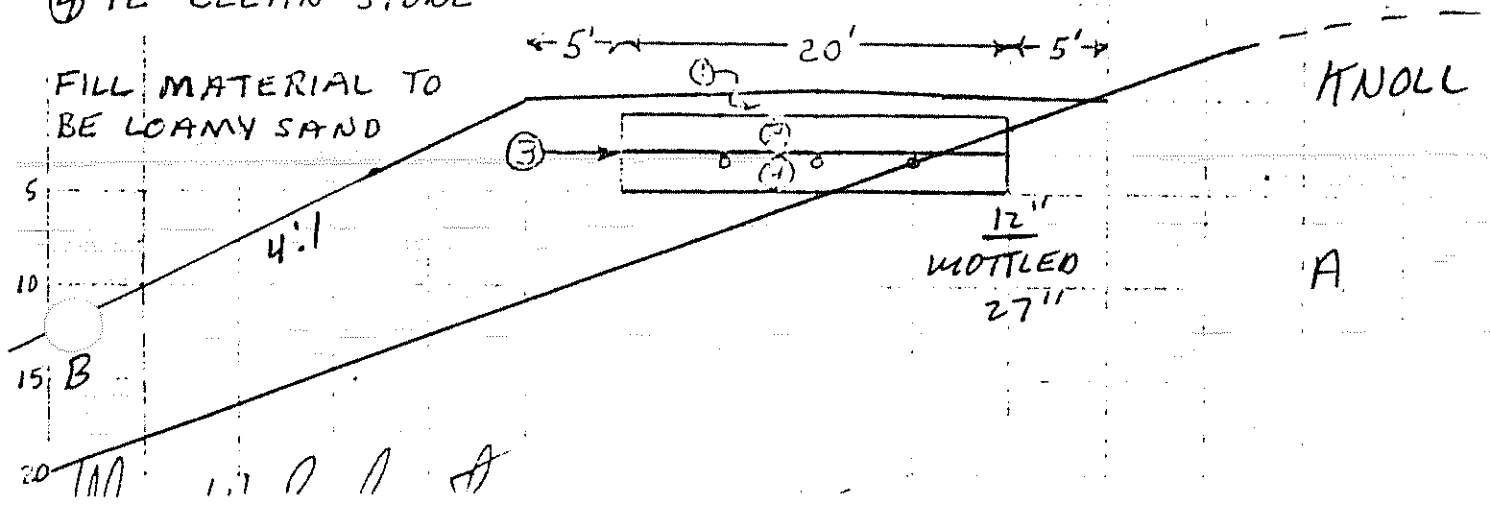
Scale 1" = 20 FT.
OR AS SHOWN



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	9	Reference Elevation is	0	NAIL IN 3" WHITE BIRCH
Depth of Fill (Downslope)	48+	Bottom of Disposal Area	-75	
		Top of Distribution Lines or Chambers	-64	

DISPOSAL AREA CROSS SECTION

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

① 3" TOPSOIL CROWNED @ 5%
② 8" SAND ③ 2" COMPACTED HAY
④ 12" CLEAN STONE

FILL MATERIAL TO BE LOAMY SAND