PF 5/26/15 m12/L19K (labels)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation	Augusta
Street or Road	Rocque Lane
Subdivision, Lot #	Parcel #4

>> CAUTION: LPI APPROVAL REQUIRED <<

AUGUSTA PERMIT #7060 TOWN COPY
Date Permit Issued: 5/26/15 $ 250.00 fee
5.00
LPI# 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Lenox, Sharon ■ Owner ☐ Applicant
Mailing Address of Owner/Applicant	P.O. Box 336
	Oakland, Me. 04963
Daytime Tel. #	603-438-0160

OWNER OR APPLICANT STATEMENT
I state and acknowledge 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 of Owner or Applicant — Date 5-26-15

CAUTION: INSPECTION REQUIRED
I have inspected the installation authoirzed 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
- Type replaced: _____
- Year installed: _____
- ☐ 3. Expanded System
  - ☐ a. <25% Expansion
  - ☐ b. ≥25% Expansion
- ☐ 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 Permit

DISPOSAL SYSTEM COMPONENTS
- ■ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify: _____
- ☐ 4. Non-engineered Treatment Tank (only)
- ☐ 5. Holding Tank, _____ 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
1 1/4 Ac ☐ SQ. FT. ■ ACRES

SHORELAND ZONING
■ Yes ☐ No

DISPOSAL SYSTEM TO SERVE
- ■ 1. Single Family Dwelling Unit, No. of Bedrooms: 3
- ☐ 2. Multiple Family Dwelling, No. of Units: _____
- ☐ 3. Other: _____ (specify)

Current Use ☐ Seasonal ☐ Year Round ■ Undeveloped

TYPE OF WATER SUPPLY To be:
■ 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: 1000 GAL.

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: _____

SIZE: 907 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
■ 1. No ☐ 2. Yes ☐ 3. Maybe
If Yes or Maybe, specify one below:
- ☐ a. multi-compartment tank
- ☐ b. ___ tanks in series
- ☐ c. increase in tank capacity
- ☐ d. Filter on Tank Outlet

DESIGN FLOW
270 gallons per day
BASED ON:
- ■ 1. Table 4A (dwelling unit(s))
- ☐ 2. Table 4C(other facilities)
  SHOW CALCULATIONS for other facilites
- ☐ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION
3 / C
at Observation Hole # 1
Depth 27"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
- ☐ 1. Medium---2.6 sq. ft. / gpd
- ■ 2. Medium---Large 3.3 sq. f.t / gpd
- ☐ 3. Large---4.1 sq. ft. / gpd
- ☐ 4. Extra Large---5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP
- ■ 1. Not Required
- ☐ 2. May Be Required
- ☐ 3. Required

Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44 d 17 m 43.8 s
Lon. 69 d 39 m 46.0 s
if g.p.s, state margin of error: +/- 13'

SITE EVALUATOR STATEMENT

I certify that on 5/11/15 (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 # 288	Date 5/12/15
Site Evaluator Name Printed: Robert Gulchrist	Telephone Number: 465-5739	E-mail Address

Note : Changes to or deviations from the design should be confirmed with the Site Evaluator.

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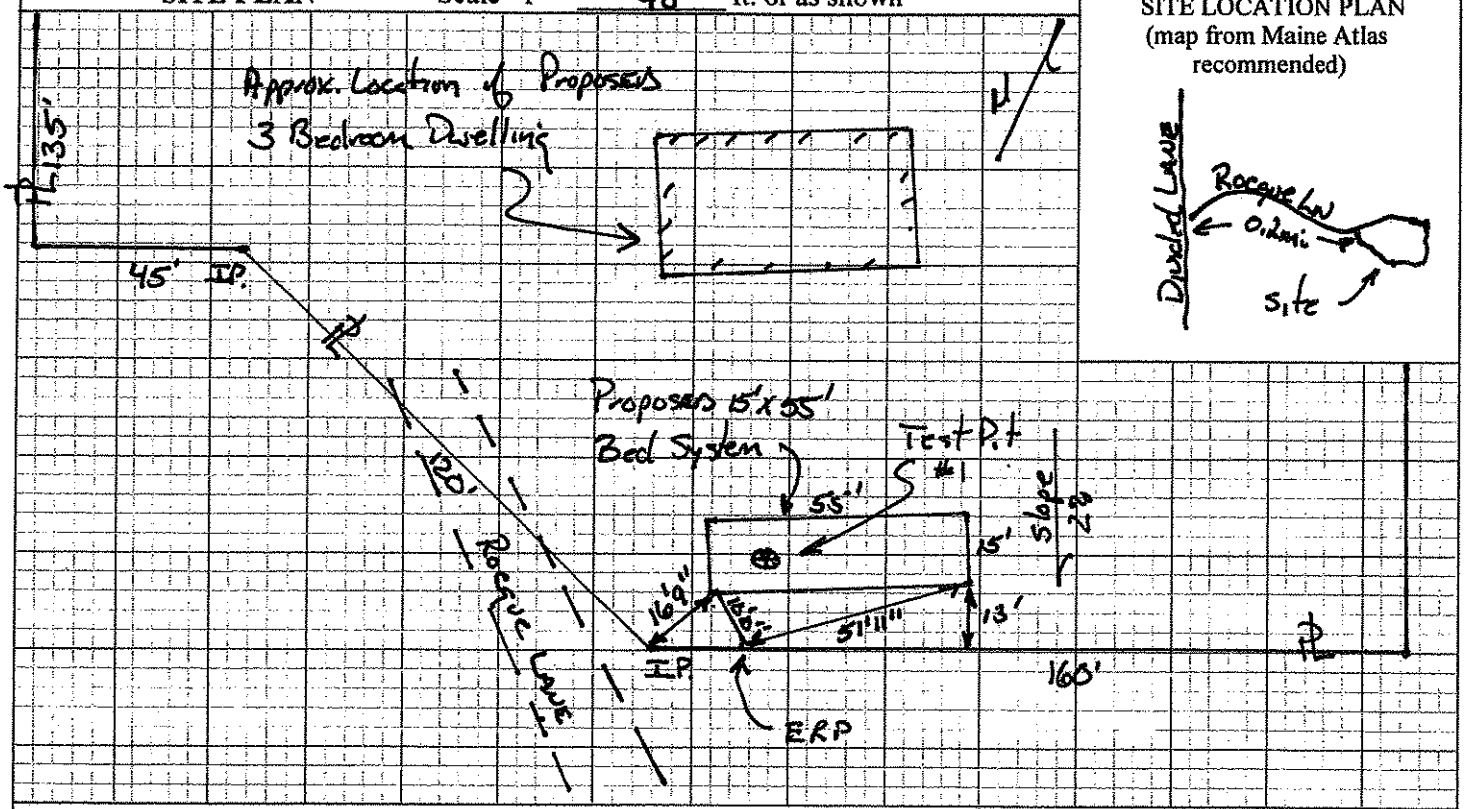
Department of Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Rocque Lane Parcel #4	Sharon Lenox

SITE PLAN Scale 1" = 40 ft. or as shown



SITE LOCATION PLAN
(map from Maine Atlas recommended)

SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole TP#1 ☒ Test Pit ☐ Boring
1½ " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	Sandy Loam	Friable	4/6 7.5YR	None
10–40		Firm	5/6 7.5 YR	few faint
40–50	Limit of Excavation @ 50"			

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	2 %	27"	☒ Ground Water [ ] Restrictive Layer [ ] Bedrock [ ] Pit Depth

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 Classification	Slope	Limiting Factor	
Profile / Condition	%	"	[ ] Ground Water [ ] Restrictive Layer [ ] Bedrock [ ] Pit Depth

Site Evaluator Signature _____ SE # 288 Date 5/17/15

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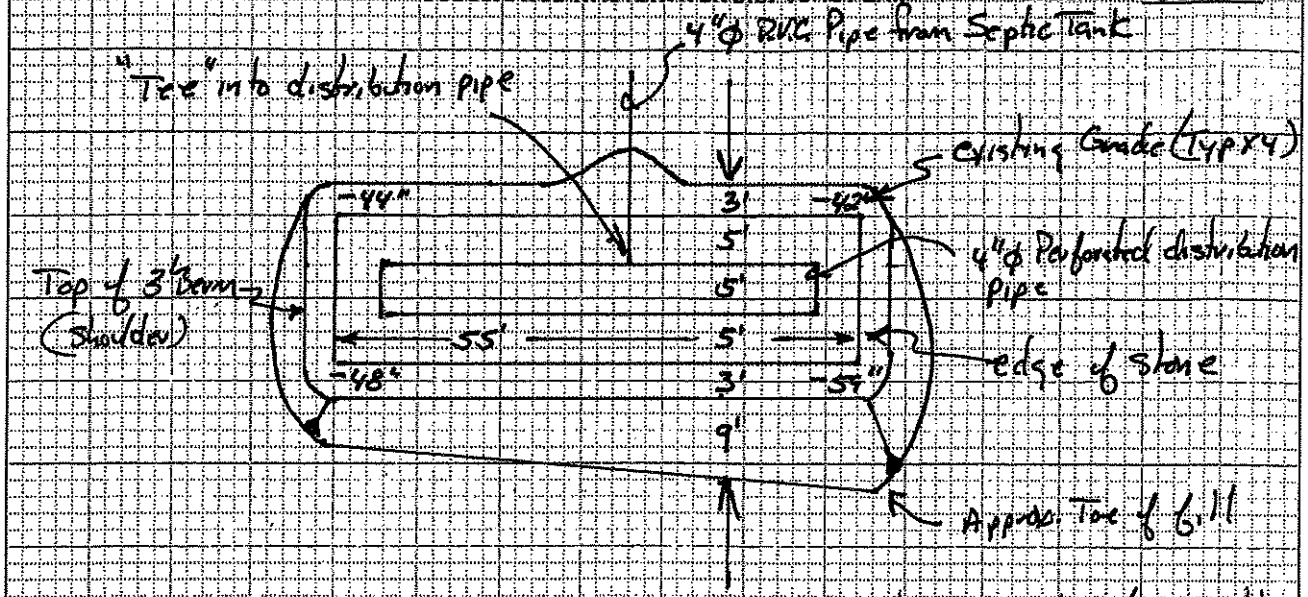
Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
Augusta	Rocque Lane Parcel #4	Sharon Lenox

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.

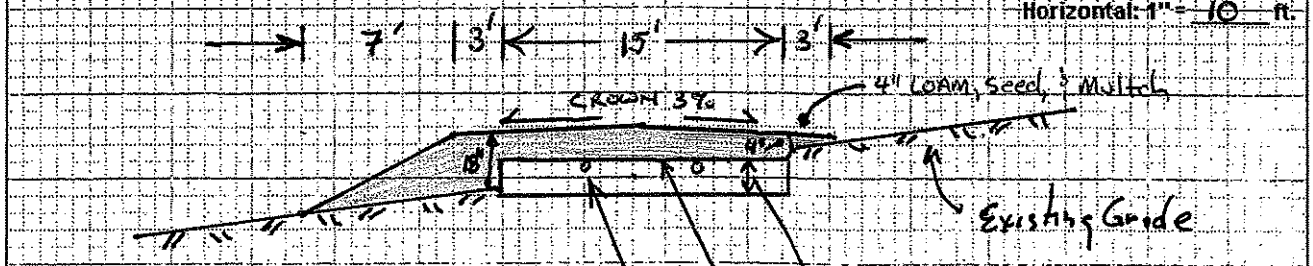


Install A 15'x55' Bed with 2-45 ft. Long 4"ϕ Perf. Distribution Pipes in A continuos grid spaced 5' Apart. Bottom of Stone To be Level.

BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	4 "	Finished Grade Elevation	-37 "	Location & Description: Nail in 4"ϕ Popplar Tree 4'4" above ground
Depth of Backfill (downslope)	18 "	Top of Distribution Pipe or Proprietary Device	-46 "	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-57 "	Reference Elevation is: 0.0" or: —

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 5 ft.
Horizontal: 1" = 10 ft.



- Fill to be A gravelly Coarse Sand
- Remove sod under All fill & scarify soil
- Create Transition Horizon by blending Top 4" of soil with fill

Rabelle Gilchrist — Site Evaluator Signature
208 — SE #
5/17/15 — Date