SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

87-03

12-65A

PROPERTY ADDRESS

Town Or Plantation: Augusta

Street Subdivision Lot #: Route 105 Co. Rd. Wat

PROPERTY OWNERS NAME

Last: Trask, Jr. First: Clyde L.

Applicant Name: Susan E Trummond
~~Theresa L. Noble~~

Mailing Address of Owner/Applicant (If Different): ~~31 Laurel Street, Apt. 2~~ ~~Augusta, Maine 04330~~ 21 Charland St Winslow Maine 04901

AUGUSTA PERMIT # 1,331 TOWN COPY

Date Permit Issued: 5 26 88 $ 40.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature: [signature] L.P.I. # 883

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.

Susan E Drummond — Signature of Owner/Applicant — Date 6/1/88

Caution: Inspection Required

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

[signature] — Local Plumbing Inspector Signature — Date Approved 9-15-8

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# ____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM: n/a
YEAR FAILING SYSTEM INSTALLED ____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: ____

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☐ Requiring Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☒ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER ____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK ____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

SIZE OF PROPERTY	ZONING
1.75 ± acres	rural

TYPE OF WATER SUPPLY
proposed drilled well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: ____

PUMPING
1. ☐ NOT REQUIRED
2. ☒ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: 35 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3-bedroom, single family dwelling
sized per Table 7-1 of the SSWD Rules (10-144A CMR 241)
(minimum design flow)

DESIGN FLOW: 270 gpd (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 15" at test pit

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED ____ Sq. Ft.
2. ☐ CHAMBER ____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH ____ Linear Ft.
4. ☒ OTHER: 475 sq.ft. "Infiltrators" by ECO-TEC, Inc.

SITE EVALUATOR STATEMENT

On 9-27-87 (date) I conducted a site evaluation for this project and certify that the data reported is accurate and the system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

William T. Noble — Site Evaluator Signature — SE# 75 — Date 10-15-87

STATE OF MAINE — WILLIAM T NOBLE 075 — LICENSED SITE EVALUATOR

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

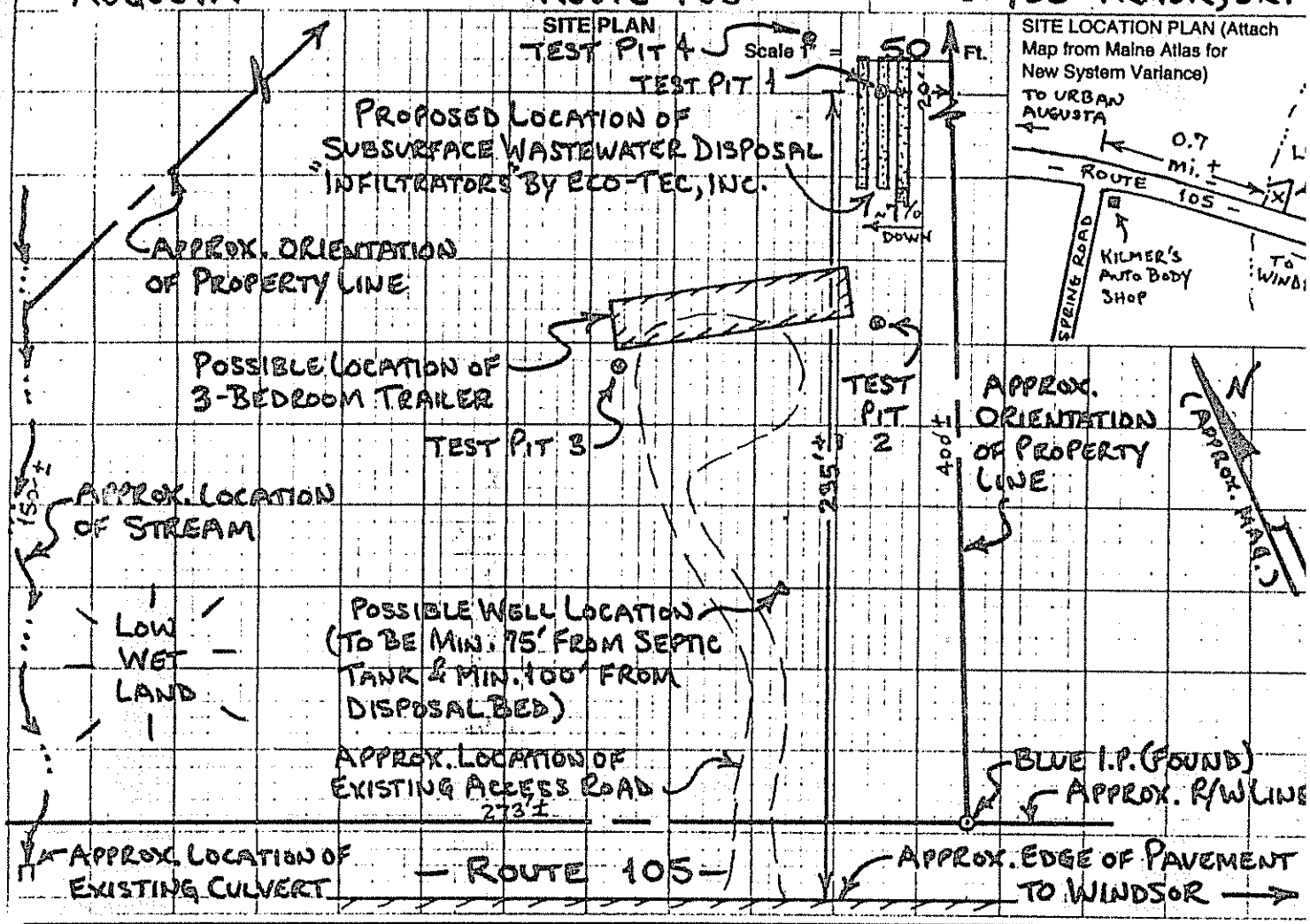
87 033

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	ROUTE 105	CLYDE TRASK, JR.

SITE PLAN



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

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

Observation Hole 1 — ☒ Test Pit ☐ Boring

2" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	FINE SANDY LOAM	FRIABLE	DARK BROWN	
6–10			STRONG BROWN	
10–15			BROWN	
15–20		FIRM	OLIVE BROWN	COMMON DISTINCT

NOTE: TEST PITS 3 AND 4 EXHIBIT A SIMILAR SOIL PROFILE, BUT HAVE DRAINAGE MOTTLES AT 3" TO 6" IN DEPTH, AND ARE CLASSIFIED AS 3-E SOIL.

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	C	7 %	15"	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole 2 — ☒ Test Pit ☐ Boring

1" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	FINE SANDY LOAM	FRIABLE	DARK BROWN	
6–10			STRONG BROWN	
10–15			BROWN	
15–20		FIRM	OLIVE	COMMON DISTINCT

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	D	2 %	13"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

William J. Noble
Site Evaluator Signature

75
SE#

10-15-87
Date

HHE-200 Rev. 1/84

8703

Department of Human Services
Division of Health Engineering

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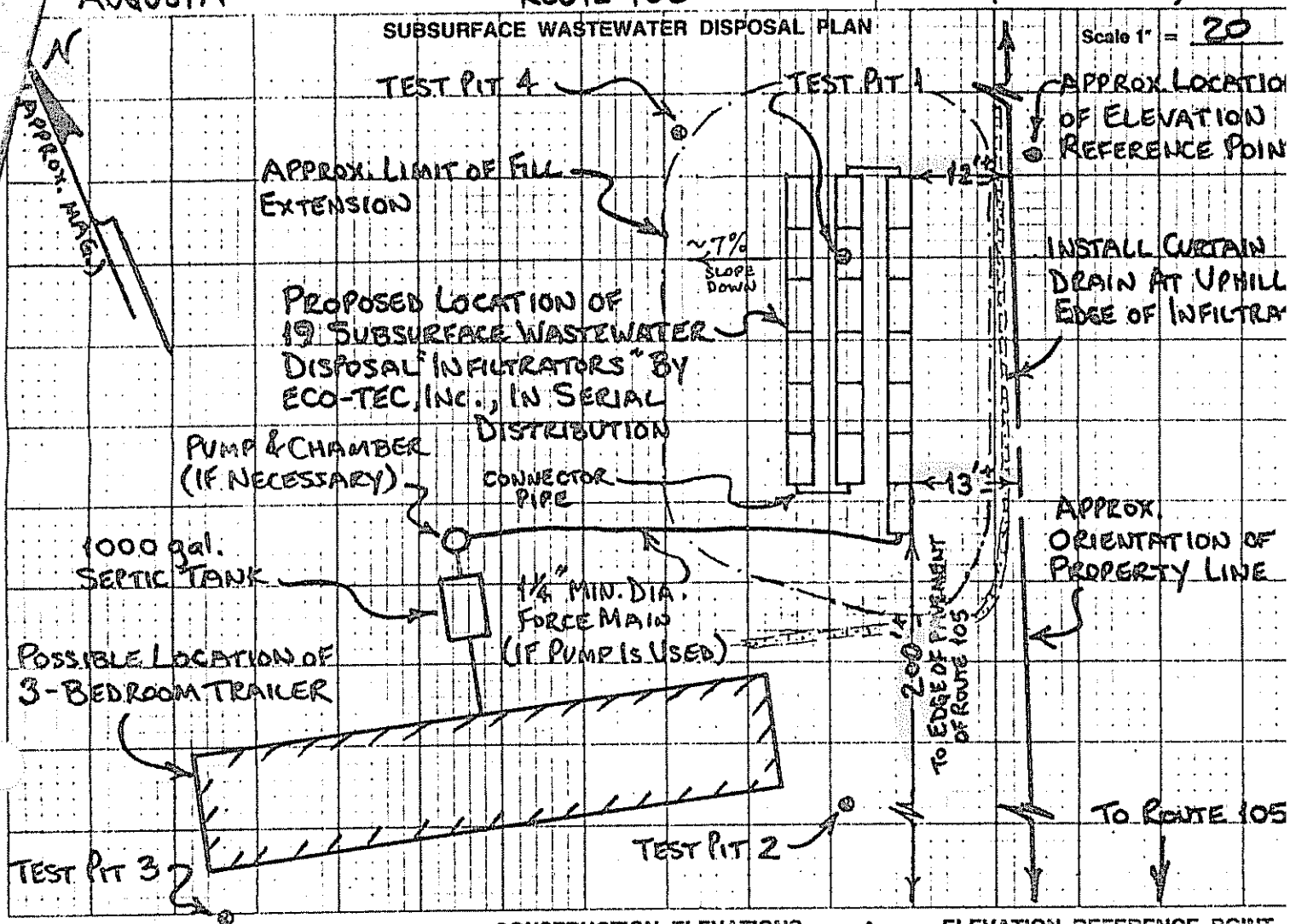
City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	ROUTE 105	CLYDE TRASK, JR.

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20



FILL REQUIREMENTS

Depth of Fill (Upslope) 24"

Depth of Fill (Downslope) 26½±

(SEE DIAGRAM BELOW)

CONSTRUCTION ELEVATIONS

Reference Elevation is 0.0"

Bottom of Disposal Area (SEE CROSS-SECTION

Top of Distribution Lines or Chambers BELOW)

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL WITH ORANGE FLAGGING I POPLAR TREE, 52" ABOVE GROU LEVEL AT TREE BASE.

NOTES:

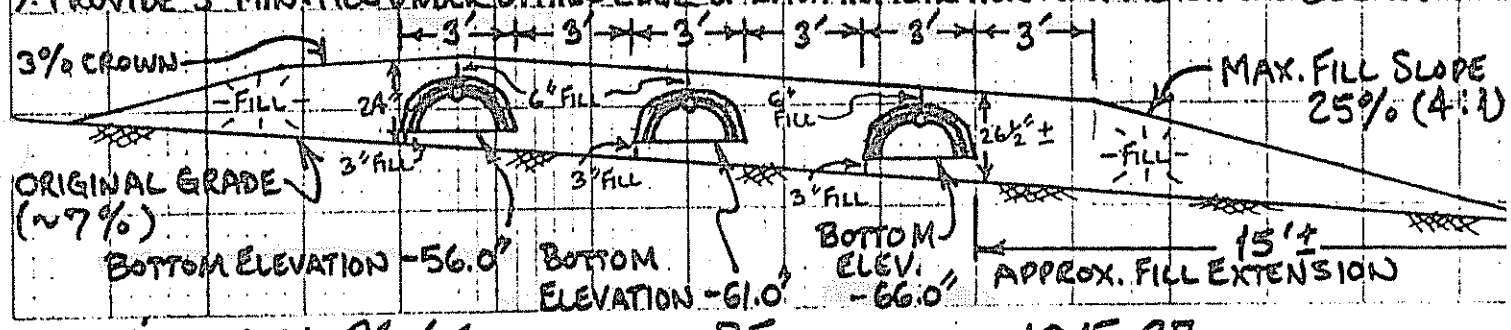
1. INSTALL "INFILTRATORS" AS DIRECTED BY ECO-TEC, INC.
2. BACKFILL & PERIMETER FILL TO BE SANDY LOAM OR COARSER.
3. GRADE LAND AROUND INFILTRATORS TO DIVERT ANY WATER FROM AREA.
4. REMOVE ANY ORGANIC LAYER & SCARIFY THE SOIL SURFACE BEFORE INSTALLING FILL.
5. BOTTOM OF INFILTRATORS TO BE LEVEL WITH MAX. GRADE TOLERANCE OF 1" PER 100'.
6. LOCATE TEST PITS ON THE LOT & POSITION INFILTRATORS OVER TP1 AS SHOWN IN ABOVE PLAN.
7. REQUIRED FILL DEPTHS MAY VARY FROM THOSE SHOWN DUE TO IRREGULARITIES IN SOIL SURFACE.
8. FINISH GRADE TO BE SEEDED & MULCHED PER SECTION 11.D OF THE SSWD RULES.
9. PROVIDE 3" MIN. FILL UNDER UPHILL EDGE OF EACH INFILTRATOR ROW AS SHOWN BELOW.

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = 5 Ft.

Horizontal: 1 Inch = 5 Ft.



William J. Noble — Site Evaluator Signature

75 — SE#

10-15-87 — Date