

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

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

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; Caution: Permit Required – Attach in Space Below &lt;&lt;</b>	
City, Town, or Plantation	Augusta	AUGUSTA Date Permit Issued: 3-10-00 \$1000.00 L.P.I. # 1700	4348 TOWN COPY FEE Charged <input type="checkbox"/> If Double Fee Charged
Street or Road	Hospital Street		
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	Cyr, Greg <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant		
Mailing Address of <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	Rt. 2 Box 76		
Daytime Tel. #	786-2069	Municipal Tax Map #	13 Lot # 7

<b>Owner/Applicant Statement</b>		<b>Caution: Inspections Required</b>	
I state that the information submitted is correct to the best of my knowledge, that I have read and agree with the conditions on the back of this form and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.		I have inspected the installation authorized above and on back of this form and found it to be in compliance with the Subsurface Wastewater Disposal Rules and local ordinances.	
Signature of Owner/Applicant: <u>[Signature]</u> Date: 3-10-00		Local Plumbing Inspector Signature: _____ (1st) Date Approved: _____ _____ (2nd) Date Approved: _____	

PERMIT INFORMATION			
<b>TYPE OF APPLICATION</b>	<b>THIS APPLICATION REQUIRES</b>	<b>DISPOSAL SYSTEM COMPONENT(S)</b>	
1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Year Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non-exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 5. <input type="checkbox"/> Minimum Lot Size Variance 6. <input type="checkbox"/> Seasonal Conversion Variance	1. <input checked="" type="checkbox"/> Complete non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input type="checkbox"/> Non-Engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (+2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components	
<b>SIZE OF PROPERTY</b>	<b>DISPOSAL SYSTEM TO SERVE:</b>		<b>TYPE OF WATER SUPPLY</b>
_____ sq. ft. 58 <input checked="" type="checkbox"/> acres	1. <input type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: 1 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input checked="" type="checkbox"/> Other: <u>Restaurant &amp; Apartment</u> specify		1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input checked="" type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____
<b>SHORELAND ZONING</b>			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
<b>TREATMENT TANK</b>	<b>DISPOSAL AREA TYPE/SIZE</b>	<b>GARBAGE DISPOSAL UNIT</b>	<b>DESIGN FLOW</b>
1. <input checked="" type="checkbox"/> Concrete <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input checked="" type="checkbox"/> Other 1000 gal. Grease trap CAPACITY: 1000 Gallons	1. <input checked="" type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input type="checkbox"/> Proprietary Device <input type="checkbox"/> Cluster array <input type="checkbox"/> Linear <input type="checkbox"/> Regular load <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE: 3525 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	1. <input type="checkbox"/> No 3. <input checked="" type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> (specify one below): <input type="checkbox"/> Multi-compartment tank <input type="checkbox"/> Tanks in series <input type="checkbox"/> Increase in tank capacity <input type="checkbox"/> Filter on tank outlet	505 gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input checked="" type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS --for other facilities-- Restaurant with 25 outdoor seats 5 employees 25 x 10 = 250 gpd (1.8x) 5 x 15 = 75 gpd 3. <input type="checkbox"/> Section 503.0 (meter read.) ATTACH WATER-METER DATA
<b>SOIL DATA &amp; DESIGN CLASS</b>	<b>DISPOSAL FIELD SIZING</b>	<b>PUMPING</b>	
PROFILE CONDITION DESIGN 9 / D / 9D at Observation Hole # TP 1 Depth: 12" Elevation: -75" OF MOST LIMITING SOIL FACTOR	1. <input type="checkbox"/> Small 2.0 sq. ft./gpd. 2. <input type="checkbox"/> Medium 2.6 sq. ft./gpd. 3. <input type="checkbox"/> Medium Large 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large 4.1 sq. ft./gpd. 5. <input checked="" type="checkbox"/> Extra-Large 5.0 sq. ft./gpd.	1. <input type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered or experimental systems Dose _____ Gallons	

**SITE EVALUATOR STATEMENT**

I Certify that on December 19, 1999 (date) I completed a site evaluation on this project and state that the data reported is accurate and 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).

Kane P. Coffin  
 Kane P. Coffin, an agent of Coffin Engineering & Surveying  
 Coffin Engineering & Surveying  
 (207) 623-9475

SE #331  
 Licensed Site Evaluator

March 03, 2000  
 Date

RR 7, Box 887A  
 Augusta, Maine 04330

See back of this form for conditions of permit

## INSTALLATION REQUIREMENTS

1. SETBACKS (under 1000 gpd) - Keep tank and leach fields 100 feet from wells, 50 feet from minor water courses, 100 feet from major water courses, and 10 feet from property lines, unless noted elsewhere on the forms. Septic tanks shall be a minimum of 8 feet from buildings and leach fields shall be 20 feet from buildings with basements and 15 feet from buildings with no full basement.
2. DRAINAGE - water runoff and drainage from basements, footings, or roofs shall not drain into the septic system and shall be diverted from the disposal field.
3. DISCHARGE - hot tubs shall not discharge into any disposal system utilized for any other waste water, but may be discharged into a separate laundry disposal field. No paint, paint thinner, commercial grease and oil, darkroom chemicals, etc. shall be disposed of in the disposal field.
4. CONDITIONS - excavations shall not be carried out when the soil moisture content is above the plastic limit. Disposal fields should not be installed in frozen ground or when the ambient air temperature is below freezing.
5. SITE PREPARATION - prior to placing backfill material, the vegetation shall be cut and removed. In areas adjacent to water bodies or wetland, erosion and sediment control measures shall be employed. The area under the disposal field and backfill extensions shall be plowed or disked to produce a thoroughly roughened surface to a depth of 6 to 8 inches. Surface water shall be diverted away from the disposal field.
6. EXCAVATION - the bottom of the each disposal field shall be installed at the elevation specified on this form. Avoid compaction of both sidewalls and bottom area. Make sure heavy equipment is not driven over the exposed bottom of the disposal field. If any portion of the bottom or sidewalls becomes smeared or compacted, that portion must be scarified to reopen soil pores.
7. BACKFILLING - At least 4 inches of cover material, suitable for establishment of a good vegetative cover shall be placed over the entire filled area including the fill material extensions. Backfill material shall be a minimum of 8 inches in thickness and consist of a coarse sand to a gravely coarse sand. Final grading shall be completed so that surface water will not collect over the disposal field. Immediately after completion of final grading, the fill material surface shall be stabilized by mulching and seeding to establish a good vegetative cover to prevent erosion. Grass, clover, trefoil, vetch, perennial wild flowers, or other herbaceous perennials may be utilized for disposal field surfaces. Woody shrubs or trees are unacceptable on disposal field surfaces.
8. SEPTIC TANK - The septic tank must be installed level and all joints, inspection covers, etc. must be water tight (the same is necessary for a pump tank if the system requires one). The outlet invert elevation should be equal to or higher than the finish grade of the septic field to avoid flooding of the tank and solids entering the field. Install a Zabel Industries, Inc. filter or equivalent on the outlet end of the septic tank when possible. Provide low profile septic tank when determined as necessary in the field. Septic tanks should be pumped out and checked every three years or more often to prolong the life of the waste water system.
9. FREEZING - Protect tanks, force mains, pump stations, D-boxes, etc. from freezing by either adequate ground cover or insulating.

## ATTACHMENT FOR HHE-200 FORM

1. The OWNER/APPLICANT, by signing the front of this form, agrees to provide payment for services rendered as quoted and billed by COFFIN ENGINEERING & SURVEYING, LLC (CE&S). Payment on all billings are due within 30 days of billing date, otherwise a late charge of 1.5% per month (18% per year), simple interest, will be added to the total amount. In the event that any portion, or all of the final billing, remains unpaid for a period of 60 days, the OWNER/APPLICANT shall pay all costs of collection, including actual attorney's fees, court costs, CE&S's cost to collect bill. PLEASE NOTE THAT THE PERSON SIGNING THIS FORM UNDER OWNER/APPLICANT IS RESPONSIBLE FOR PAYMENT OF SERVICES AND SHOULD CONTACT CE&S IF HE/SHE HAS NOT RECEIVED A BILL. The OWNER/APPLICANT recognizes that he owes CE&S \$2,000.00 from prior work on this project (unless he can produce a copy of the processed check deposited by CE&S). If the \$2,000.00 from prior work, plus \$600.00 for this septic system design, is not paid in full 30 days from the date of the OWNER/APPLICANT STATEMENT DATE on the front, then the OWNER/APPLICANT agrees to pay all costs of collection, including actual attorney's fees, court costs, CE&S's cost to collect bill, plus pay a late charge of 1.5% per month (18% per year), simple interest, added to the total amount. The OWNER/APPLICANT also agrees to allow CE&S to attach the property (58 acres on Hospital Street in Augusta, Maine) and/or recall this HHE-200 form if total bill is not paid within 30 days from above described date. The OWNER/APPLICANT also agrees to occupy premises until total bill is paid.
2. All construction shall conform with Title 22 MRSA, §42, 10-144A CMR 241 "Maine-Subsurface Waste Water Disposal Rules," and all other pertinent sections. The OWNER/APPLICANT is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits. The OWNER/APPLICANT shall carefully examine all documents submitted by CE&S and promptly notify CE&S upon becoming aware of any defects. The OWNER/APPLICANT agrees to limit the liability of the site evaluator and/or CE&S to the amount of the total fee for this septic design paid to CE&S.
3. This disposal system form shall not be transferable and becomes invalid if the authorized work has not commenced within two years after the issue date of the disposal system.
4. The OWNER/APPLICANT shall accurately describe the intended uses (present and future) for the system to the site evaluator. By signing the front of this form, the OWNER/APPLICANT agrees that the uses shown on said form is what was described to the site evaluator. Any change from the intended use described on this form requires a new design. Applicability of design must be reevaluated when location of structures are substantially different than those shown on the site plan or when other structures, additions, or appurtenances (i.e. swimming pools, garbage disposals) are considered. Property lines shown are as provided by the owner, or his agent and no guaranter accuracy is implied. Actual property lines must be confirmed by a boundary survey.

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

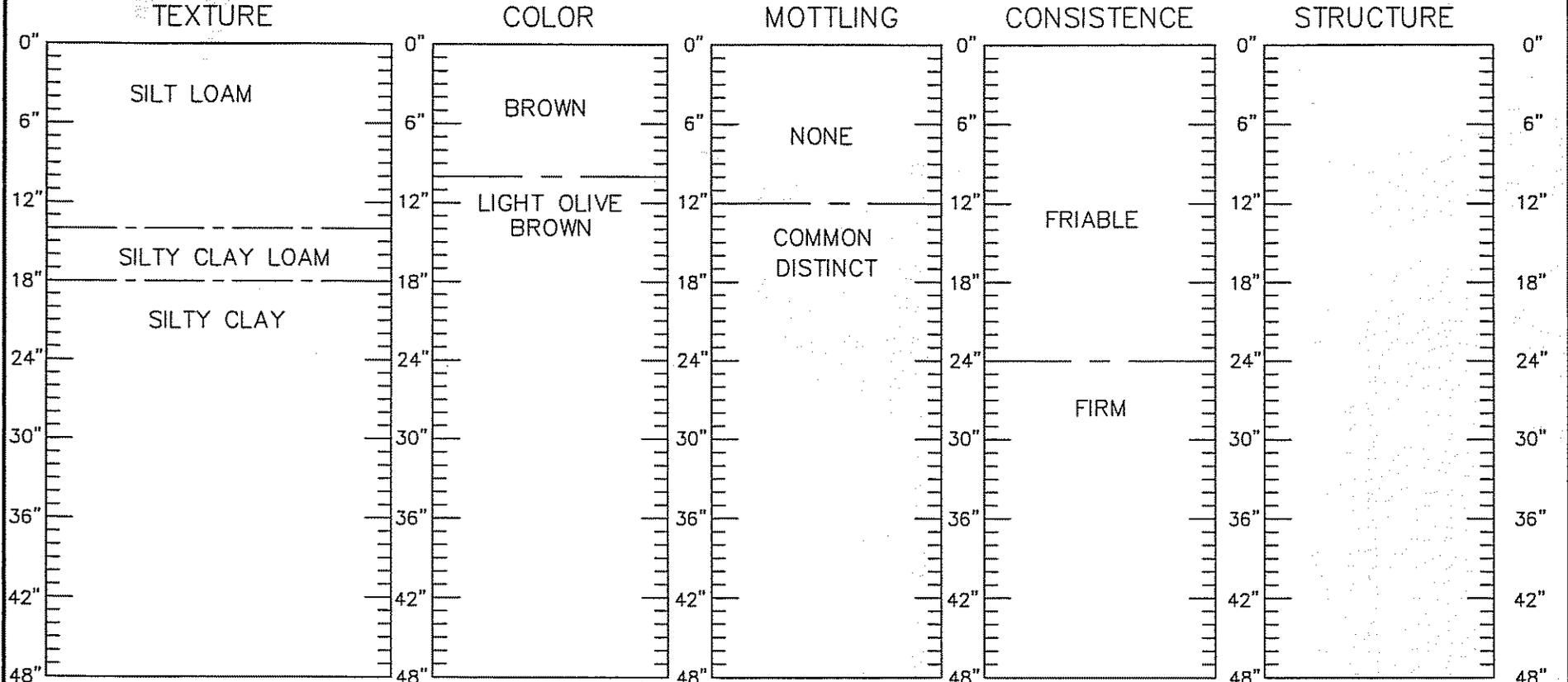
Department of Human Services  
Division of Health Engineering

Owner's Name: **GREG CYR** Street, Road, Subdivision: **HOSPITAL STREET** Town, City, Plantation: **AUGUSTA** Zoning: \_\_\_\_\_

**SOIL DESCRIPTION AND CLASSIFICATION**  
 Observation Hole: TP 1-4  Test Pit  Boring  
 Soil Profile: 9 Classification Condition: D Slope: 1 %  
 Depth: 12 " Ground Water   
 Restrictive Layer   
 Bedrock

Excessive surface stones (more than 50% by area)

\_\_\_\_\_ " Organic Matter



**TEXTURE TERMS**  
 Sand  
 Loamy sand  
 Sandy loam  
 Loam  
 Silt loam  
 Silty clay loam  
 Silty clay  
 Bedrock

**MODIFIER TERMS**  
 VF—very fine  
 F—fine  
 M—medium  
 C—course  
**ROCK**  
 Gravelly—0.1–3"  
 Cobbley—3–10"  
 Stony—+10"

**ABUNDANCE**  
 Very—36–60%  
 Extremely—61–90%

**CONTRAST**  
 Faint  
 Distinct  
 Prominent

**ABUNDANCE**  
 None  
 Few—<2%  
 Common—2–20%  
 Many—>20%

**TERMS**  
 Loose  
 Friable  
 Firm  
 Very Firm  
 Cemented

**TERMS**  
 Single grain  
 Spherical  
 Subangular blocky  
 Blocky  
 Prismatic  
 Platy  
 Massive

COMMENTS: \_\_\_\_\_

Site Evaluator's Signature: *Kevin P. Coffin*

SE # 331

Date: 12/19/99

HHE-200

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering

Town, City, Plantation  
**AUGUSTA**

Street, Road, Subdivision  
**HOSPITAL STREET**

Owner's Name  
**GREG CYR**

**FILL REQUIREMENTS**

Depth of Fill (Upslope) 28-43"  
Depth of Fill (Downslope) 28-41"

**CONSTRUCTION ELEVATIONS**

Reference Elevation is 00"  
Bottom of Disposal Area n/a  
Top of Chambers n/a

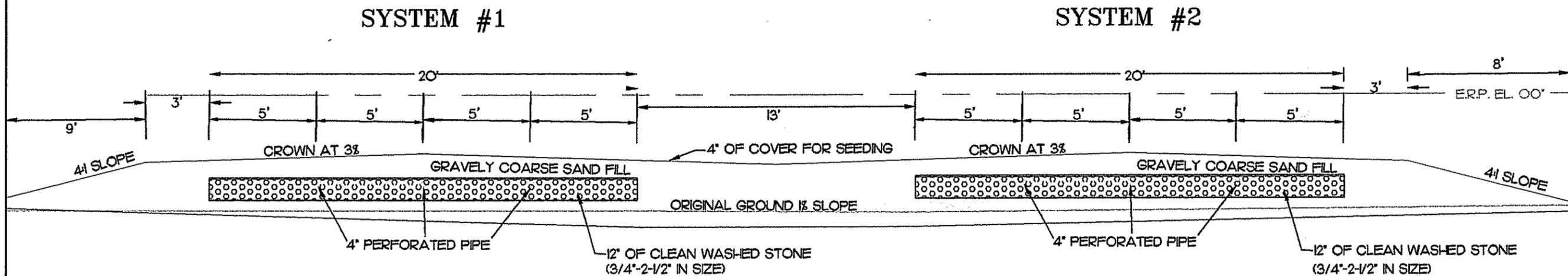
**ELEV. REF. PT:**

TOP OF BUILDING (EAST CORNER)  
(112" above ground)

**DISPOSAL AREA CROSS SECTION**

**SCALE:**

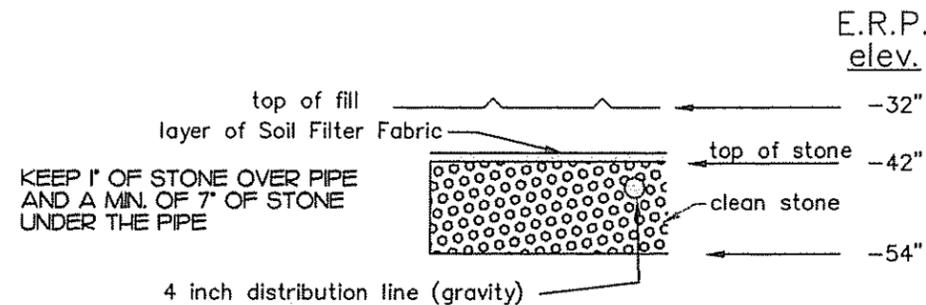
Vertical: 1 inch = 5 feet  
Horizontal: 1 inch = 5 feet



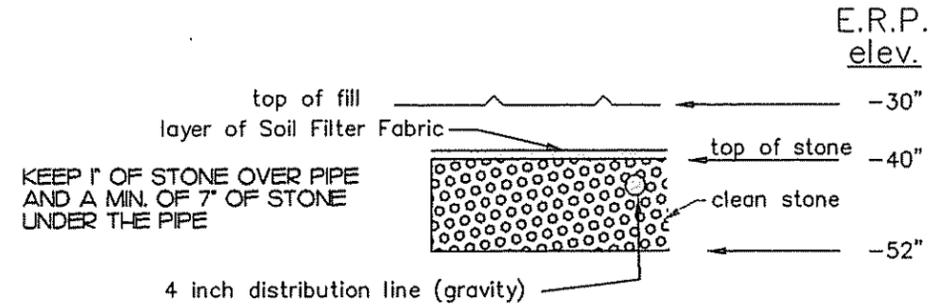
DISPOSAL FIELD SHOULD ONLY BE INSTALLED ACCORDING TO THE MAINE SUBSURFACE WASTE WATER DISPOSAL RULES.

INSTALL 2 - 20' BY 84' STONE BEDS

REMOVE VEGETATION AND ROTO-TILL GRAVELLY COARSE SAND FILL INTO ORIGINAL GROUND TO A DEPTH OF 6-8 INCHES.



**STONE BED DETAIL (no scale)**



**STONE BED DETAIL (no scale)**

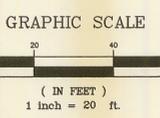
DATE	
REVISIONS	
NO.	
SHEET TITLE	CROSS-SECTIONAL VIEW
SCALE	1" = 5'
DATE	MARCH 03, 2000
PROJECT	GREG CYR
LOCATION	HOSPITAL STREET
TOWN	AUGUSTA
COUNTY	KENNEBEC STATE MAINE
ENGINEERING & SURVEYING	<b>COFFIN</b>
© 1999	COFFIN ENGINEERING & SURVEYING, LLC
	1000 P.O. BOX 487 AUGUSTA, MAINE 04301-0487 1-800-241-9475
PROJ. NO.	99023
DATE	MAR 6 2000
PROJ. NO.	HHE-200

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 12/19/99

RECEIVED



OWNER HAS THE OPTION OF MOVING TANKS, PUMPING STATION, LINES, AND/OR DISTRIBUTION BOX TO BETTER UTILIZE THE SITE.

**NOTE:**  
THIS PLAN IS DERIVED FROM THE CITY OF AUGUSTA'S TOPOGRAPHIC MAP. NO WARRANTY IS MADE IN REGARD TO PROPERTY LINES OR ELEVATIONS. THIS PLAN IS THE FRONT PORTION OF THE PROPOSED DEVELOPMENT. THE REMAINDER OF THE PROJECT IS THE CONSTRUCTION OF A 9 HOLE PAR 3 GOLF COURSE AND IS SHOWN ON SKETCH PLAN BY GREG CYR, DATED 8/99.

- LEGEND:**
- IRON PIN FOUND
  - GRANITE MONUMENT FOUND
  - 5/8" REBAR PROPOSED
  - UTILITY POLE
  - GUY ANCHOR
  - HYDRANT
  - WATER VALVE
  - CONIFEROUS TREE
  - DECIDUOUS TREE
  - STOCKADE FENCE
  - WIRE FENCE
  - STONE WALL
  - VEGETATION
  - WELL
  - LIGHT
  - CATCH BASIN
  - SANITARY MANHOLE
  - EXISTING CONTOUR
  - OVERHEAD UTILITY LINE
  - POSSIBLE PROPERTY LINE
  - CANOPY TREE
  - SHRUB
  - UNDERSTORY TREE
  - EVERGREEN TREE/CONIFER
  - SILT FENCE
  - PROPOSED FIVE FOOT CONTOUR
  - PROPOSED ONE FOOT CONTOUR
  - WOOD STAKE (4' HIGH)

NO.	REVISIONS	DATE
1	ADDED 21' ON FOOTPRINT OF EACH FIELD	

**SHEET TITLE:**  
**SEPTIC SYSTEM PLAN**

**SCALE:** 1" = 20'

**DATE:** DECEMBER 19, 1999

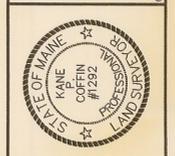
**CLIENT/PROJECT:**  
**GREG CYR  
PROPOSED RESTAURANT**

**LOCATION:** HOSPITAL STREET

**TOWN:** AUGUSTA **COUNTY:** KENNEBEC **STATE:** MAINE

CONY ROAD  
PO BOX 4867  
AUGUSTA, ME 04304-1687  
1-800-244-9475

27 WASHINGTON ST.  
PO BOX 1031  
AUGUSTA, ME 04403-1031  
1-888-282-4365



PROJ. NO. 99214

**SS** RECEIVED  
MAR 6 2000

