

# 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

City, Town, or Plantation: Augusta  
Street or Road: 869 Eastern Avenue  
Subdivision, Lot #: \_\_\_\_\_

**>> CAUTION: Permit Required - Attach in Space Below <<**  
**>> CAUTION: LPI APPROVAL REQUIRED <<**

Town/City: Augusta Permit #: 6655  
Date Permit Issued: 4/21/12 Fee: \$ 250.00 Double Fee Charged ( )  
15.00  
Local Plumbing Inspector Signature: [Signature] L.P.I. # 850  
Map 15 of 7-B

## OWNER/APPLICANT INFORMATION

Name (last, first, MI): Stevens, Gerald  Owner  Applicant  
Mailing Address of Owner/Applicant: 106 Eldridge Road Wells, ME 04090  
Daytime Tel. #: (207) 468-0184

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

## Owner/Applicant Statement

I state and acknowledge 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 permit and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: [Signature] Date: 4/21/12

## CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.  
Local Plumbing Inspector Signature: [Signature]  
Date Approved (Rough-In): 4/21/12  
Date Approved (Final): \_\_\_\_\_

## PERMIT INFORMATION

<b>TYPE OF APPLICATION</b> 1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> 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. <input type="checkbox"/> 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	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 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 Disposal Area 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 checked="" type="checkbox"/> Pre-treatment, specify: <u>outlet filter on tank</u> 12. <input type="checkbox"/> Miscellaneous components
<b>SIZE OF PROPERTY</b> _____ sq. ft. 10 <input checked="" type="checkbox"/> acres	<b>DISPOSAL SYSTEM TO SERVE:</b> 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>2</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ Specify Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> 1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<b>TREATMENT TANK</b> 1. <input checked="" type="checkbox"/> Concrete <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY: <u>1000</u> Gallons	<b>DISPOSAL AREA TYPE/SIZE</b> 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: <u>594</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> 1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe If Yes or Maybe, 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	<b>DESIGN FLOW</b> <u>180</u> gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities 3. <input type="checkbox"/> Section 503.0 (meter read.)
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN <u>3 / D / 3D</u> at Observation Hole # <u>TP 1</u> Depth: <u>13"</u> OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> 1. <input type="checkbox"/> Small 2.0 sq. ft./gpd. 2. <input type="checkbox"/> Medium 2.6 sq. ft./gpd. 3. <input checked="" type="checkbox"/> Medium Large 3.3 sq. ft./gpd. 4. <input type="checkbox"/> Large 4.1 sq. ft./gpd. 5. <input type="checkbox"/> Extra-Large 5.0 sq. ft./gpd.	<b>EFFLUENT/EJECTOR PUMP</b> 1. <input type="checkbox"/> Not required 2. <input checked="" type="checkbox"/> May be required 3. <input type="checkbox"/> Required >> Specify only for engineered systems Dose _____ Gallons	LATITUDE AND LONGITUDE at center of disposal area Lat. <u>N 044 d 17 m 11.25 s</u> Lon. <u>W 069 d 41 m 48.36 s</u> If g.p.s., state margin of error: _____

## SITE EVALUATOR COMMENTS

System-15' by 40' stone bed for proposed 2 bedroom dwelling

## SITE EVALUATOR STATEMENT

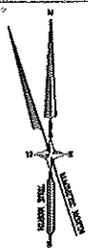
I Certify that on April 6, 2010 (date) I completed a site evaluation on this project and state that the data reported is accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241) as interpreted by me.

Kane P. Coffin  
Kane P. Coffin, an agent of E.S. Coffin Engineering & Surveying, Inc.  
E.S. Coffin Engineering & Surveying, Inc.  
432 Cony Road P.O. Box 4687  
Augusta, Maine 04330-1687

SE #331  
Licensed Site Evaluator  
(207) 623-9475 or 1-800-244-9475

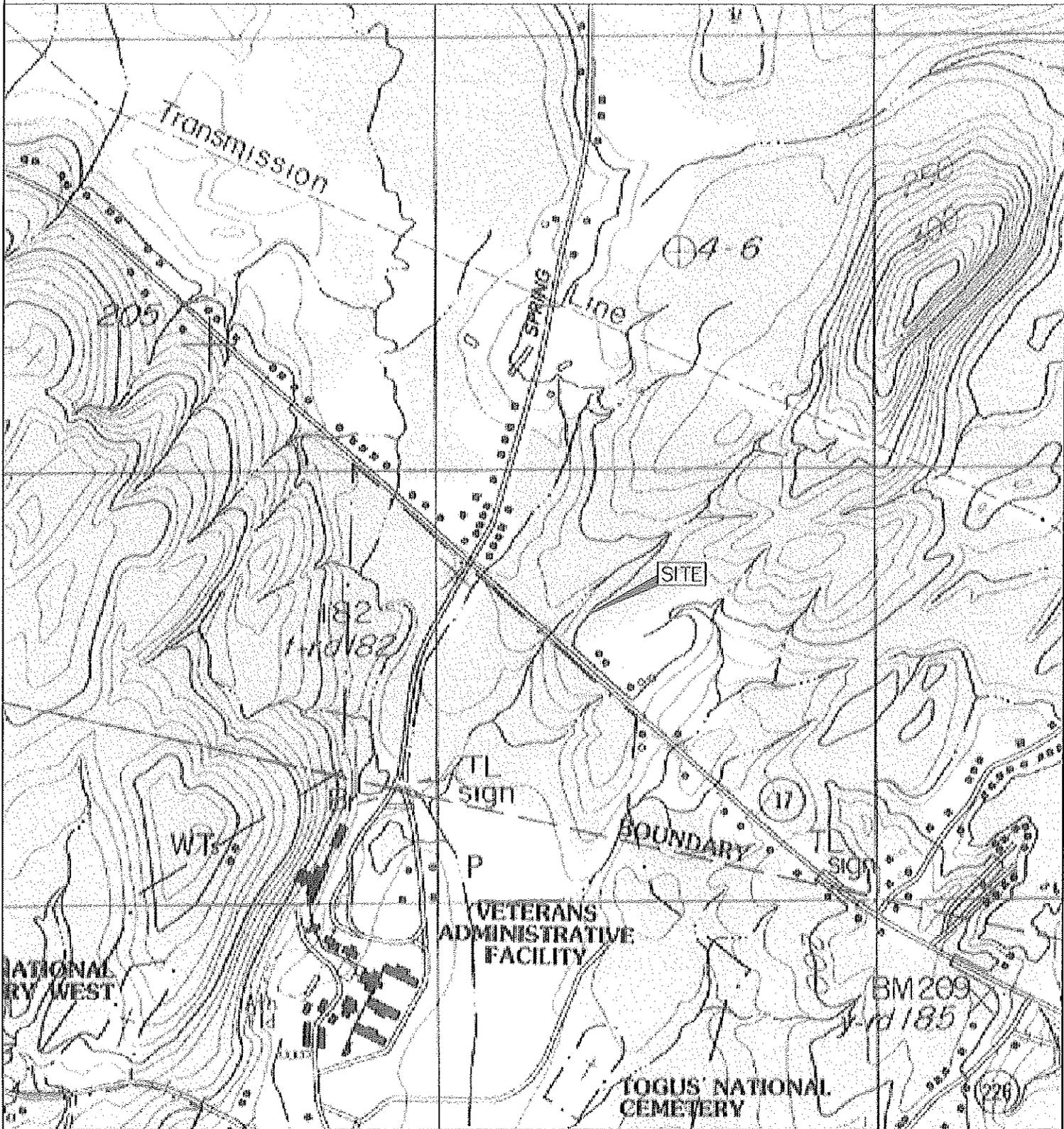
April 8, 2008  
Date  
Fax (207)623-0016

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator  
See back of this form for conditions of permit



# SITE LOCATION MAP

SCALE 1" = 1000'



## HHE-200

ENGINEERING  
**E.S. COFFIN**  
 SURVEYING  
 O 2009  
 E.S. COFFIN ENGINEERING & SURVEYING, D.C.  
 42 Cong Road, P.O. Box 4587 Augusta, Maine 04330  
 Ph: (207) 631-9375 Fax: (207) 633-0016 Toll Free: 1-800-244-9478

CLIENT: **GERALD STEVENS**  
 PROJECT: **SEPTIC SYSTEM DESIGN**

SUBTITLE: **SITE LOCATION MAP**

LOCATION: EASTERN AVENUE

SCALE: AS SHOWN

DATE: AUGUST 1, 2010 COUNTY: KENNEBEC STATE: MAINE

DATE: APRIL 02, 2010

Town, City, Plantation  
 Augusta

Street, Road, Subdivision  
 Eastern Avenue

Owner's Name  
 Gerald Stevens

**SITE PLAN**

Scale: 1" = \_\_\_ feet

**TEXTURE TERMS**

Sand  
 Loamy sand  
 Sandy loam  
 Loam  
 Silty loam  
 Silty clay loam  
 Silty clay  
 Bedrock

**TEXTURE**

**ABUNDANCE**  
 Very-36-60%  
 Extremely-61-90%

**MODIFIER TERMS**

VF-very fine  
 F-fine  
 M-medium  
 C-course  
**ROCK**  
 Gravelly-0.1-3"  
 Cobblely-3-10"  
 Stony-+10"

**MOTTLING**

**CONTRAST**  
 Faint  
 Distinct  
 Prominent

**ABUNDANCE**  
 None  
 Few-<2%  
 Common-2-20%  
 Many->20%

**CONSISTENCE**

**TERMS**  
 Loose  
 Friable  
 Firm  
 Very Firm  
 Cemented

**SOIL DESCRIPTION AND CLASSIFICATION**

Observation Hole TP 1  Test Pit  Boring  
2 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0 fine sandy loam	Friable	Dk Brown	None
		Lt Olive Br	
		Dk Yel Brown	
10 very fine sandy loam	Firm	Lt Olive Br	Common Distinct
		Olive Br	
20 loam		Olive	
30			
40			
50			

Soil Classification <u>3</u> <u>D</u> Profile Condition	Slope <u>5</u> %	Limiting Factor <u>13</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Observation Hole TP 2  Test Pit  Boring  
2 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0 fine sandy loam	Friable	Dk Brown	None
		Dk Yel Brown	
10 very fine sandy loam	Firm	Yel Brown	Common Distinct
		Lt Olive Br	
20 loam		Olive	
30			
40			
50			

Soil Classification <u>3</u> <u>C</u> Profile Condition	Slope <u>7</u> %	Limiting Factor <u>15</u> "	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Site Evaluator's Signature *Kane P. Coffey*

SE # 331

Date: 04/08/10

HHE-200

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering

Town, City, Plantation  
**Augusta**

Street, Road, Subdivision  
**Eastern Avenue**

Owner's Name  
**Gerald Stevens**

**FILL REQUIREMENTS**  
Depth of Fill (Upslope) 27-30"  
Depth of Fill (Downslope) 34-42"

**CONSTRUCTION ELEVATIONS**

Reference Elevation is 00"  
Bottom of Disposal Area -29"  
Top of distribution lines -18"

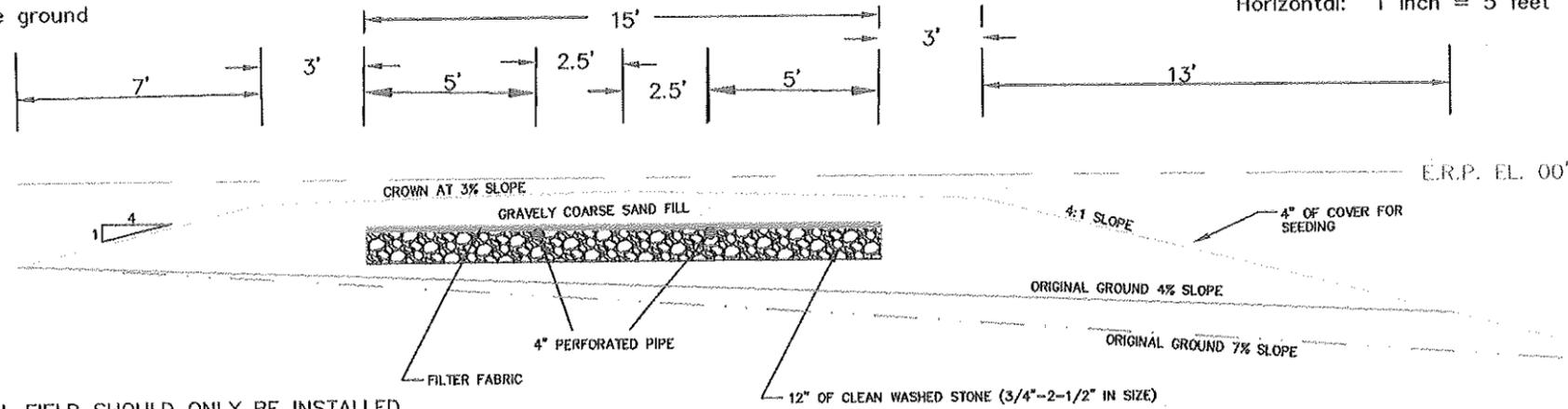
**ELEV. REF. PT:**

50d Spike in 16" Pine Tree  
36" above ground

**DISPOSAL AREA CROSS SECTION**

**SCALE:**

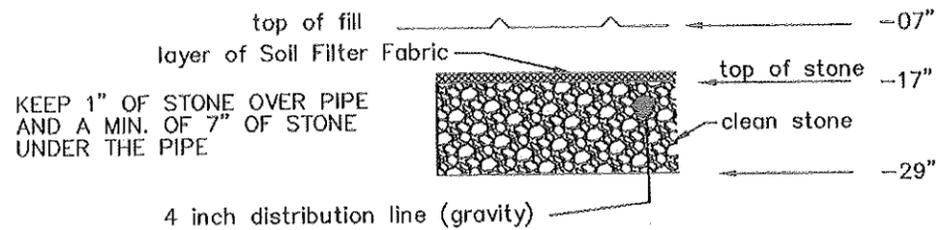
Vertical: 1 inch = 5 feet  
Horizontal: 1 inch = 5 feet



DISPOSAL FIELD SHOULD ONLY BE INSTALLED  
ACCORDING TO THE MAINE SUBSURFACE  
WASTE WATER DISPOSAL RULES 144A CMR 241  
UNDER TITLE 22 MRSA 42.

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

E.R.P.  
elev.



INSTALL 15' BY 40' STONE BED

**STONE BED (no scale)**

Site Evaluator's Signature *Kenneth P. Coffin*

SE # 331

Date: 04/08/10

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Department of Human Services (207) 287-5672  
 Division of Health Engineering (207) 287-4172 (fax)

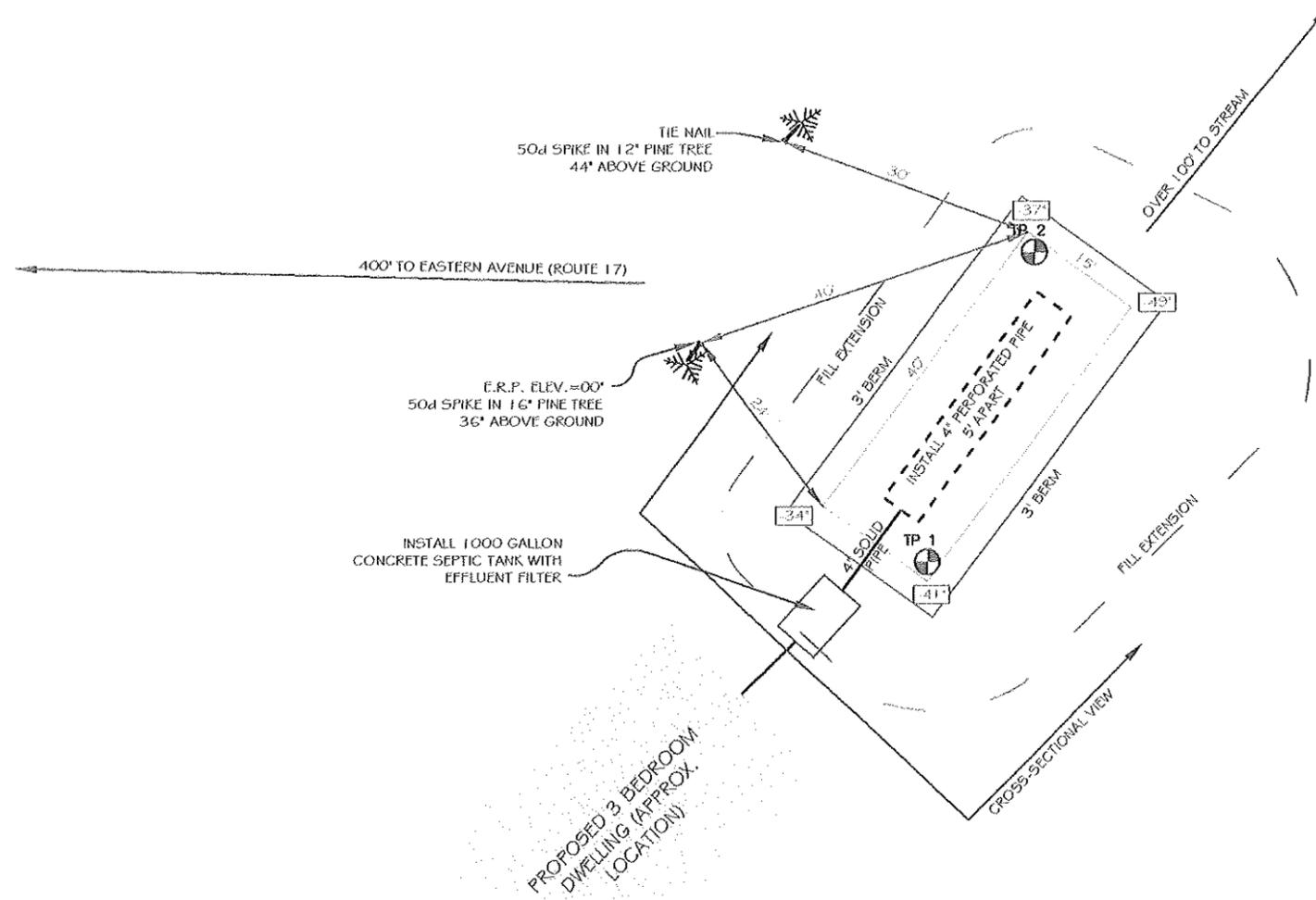
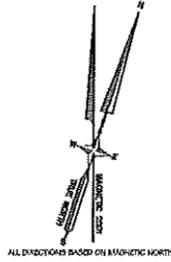
Town, City, Plantation  
**Augusta**

Street, Road, Subdivision  
**Eastern Avenue**

Owner's Name  
**Gerald Stevens**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20'



### DISPOSAL FIELD CONSTRUCTION TECHNIQUES

1. Vegetation shall be cut and removed from the area where backfill material is to be placed.
2. The area under the disposal field and backfill extensions shall be roto-tilled with gravelly coarse sand fill to a depth of 6-8 inches to form a Transitional Horizon.
3. Fill large holes that are left as a result of stump or stone removal with gravelly coarse sand fill.
4. Surface water (from roofs or upland) must be diverted away from the disposal field.
5. Septic tank(s), grease trap, pumping station, and lines may be relocated to accommodate site conditions as long as setbacks and intent of design are met.
6. All construction shall conform with Title 22 MRSA, Section 42, 10-144A-CMR 241 "Maine Subsurface Waste Water Disposal Rules" and other pertinent sections.
7. The owner/contractor shall carefully observe the vertical distance between the E.R.P. and the bottom of the leach field and notify the Site Evaluator promptly if separation distance appears to be at odds with the original ground.
8. The owner/applicant is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits.
9. Access openings for septic tanks serving single-family dwelling units may be buried, although water tight risers to within 6" of finish grade are required. The riser opening must be at least 18" in diameter over the tank cover. Outlet baffles that utilize an effluent filter must have a riser of at least 18" in diameter extended to finish grade.

ELEVATION REFERENCE POINT  
 DESCRIPTION:  
 50d spike in 1 1/2" Pine Tree  
 (36" above ground)  
 ELEVATION: 00'

SHEET TITLE  
**PLAN VIEW**

PROJECT:  
**GERALD STEVENS**  
 LOCATION:  
**EASTERN AVENUE**  
 TOWN:  
**AUGUSTA**  
 COUNTY:  
**KENNEBEC STATE MAINE**  
 SCALE: 1" = 20'  
 DATE: **APRIL 8, 2010**



Site Evaluator's Signature *Kane P. Coffin*

SE # **331**

Date: **04/08/10**

PROJ. NO. 2010-068

HHE-200