

Corbett

MAINE DEPARTMENT OF HUMAN SERVICES APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit. Page 1 of 2

Town: Augusta Street, Road, etc.: Mud Mills Road Plumbing Permit No.: 198EP Date of Plumbing Permit: 9-2-77

Owner of property: Allenwood Park Inc. Owner's address: BFD 1 Gardiner, Me. Size of lot: 47,600 Sq. feet / Acres

Name & type of establishment: _____ gpd Is lot Zoned? Yes No Type of Zoning: Shoreland Resource Protection

Name of applicant: Cynthia Corbett If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following: Deed restriction re. private sewage disposal Copy of the subdivision's soils report Soils report from a State Agency

Applicant's address: _____ Tel. No.: _____

Town: Fairfield Me. Zip Code: 04937 Subdivision name: Mud Mill Road Lot No.: 4

Applicant's signature: _____ Date: 9-2-77

Owner's signature: _____ Date: 9-2-77

This application is for: New System Expanded System Replacement System Replacement of Treatment Tank Only Disposal Area Only

The water supply for this property is: Dug well, depth _____, lining _____; Drilled well, depth 75 ft, lining galvanized Spring depth _____, lining _____; Surface water Body, Course— with disinfection, without disinfection. Public Utility, name _____

SITE INVESTIGATION Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II.

Soil Profile No.	Soil Profile No. <u>1</u>		Soil Profile No.		Soil Profile No.		Soil Profile No.	
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring
Thickness and Description of strata encountered	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata	Organic strata
	Inches <u>0</u>	Inches						
	1st strata <u>Dr Brn Sandy Loam</u>	1st strata						
	Inches <u>4</u>	Inches						
Depth from bottom of organic horizon to:	2nd strata <u>Red Brn Sandy Loam</u>	2nd strata						
	Inches <u>9</u>	Inches						
	3rd strata <u>lt Brn Sandy Loam</u>	3rd strata						
	Inches <u>10</u>	Inches						
Total Depth of observation hole	Total Depth of observation hole Inches <u>61</u>	Total Depth of observation hole Inches						
	Max. Ground water table—mottling <u>23</u> inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches	Max. Ground water table—mottling _____ inches
	Impervious layer, clay, etc. <u>24</u> inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches	Impervious layer, clay, etc. _____ inches
	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>	Bedrock <u>None Evident</u>
Surface slope	Surface slope <u>7.5%</u>	Surface slope _____ %						
	Soil Group & Condition per Table 9-1 of the Code, II <u>3-0</u>	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II	Soil Group & Condition per Table 9-1 of the Code, II

On 9/2/77 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: _____ Date signed: 9/2/77

Health Engineering License No. 158

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM: <input checked="" type="checkbox"/> COMBINED SYSTEM <input type="checkbox"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="checkbox"/> Sealed Vault Privy <input type="checkbox"/> Open Pit Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Incinerator Toilet <input type="checkbox"/> Chemical Toilet <input type="checkbox"/> Other, describe _____ See Chapter 9 of the Code, II.	TREATMENT TANK: <input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Metal Size in gallons _____ <input type="checkbox"/> Aerobic Tank Manufacturer— Model No. _____ Size in gallons _____	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION Fill will be: <u>12</u> in. uphill; <u>13</u> in. downhill	
		Type _____ SIZE _____ <input type="checkbox"/> Trench System: Total trench length _____ <input checked="" type="checkbox"/> Bed System Length _____ Width _____ <input type="checkbox"/> Chamber System Number _____ <input type="checkbox"/> Type A <input type="checkbox"/> Single File <input type="checkbox"/> Type B <input type="checkbox"/> Cluster <input type="checkbox"/> Mound System Length _____ Width _____ at base <input type="checkbox"/> Special System Length _____ Width _____		DETAILS <input type="checkbox"/> A Distribution Box is required; Pumping is— <input type="checkbox"/> required, <input checked="" type="checkbox"/> not required. The Dose will be _____ gallons	
		WAIVER <input type="checkbox"/> Required <input checked="" type="checkbox"/> Not Required		DISTANCES <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.	
		PROPERTY / LOT LOCATION MAP			

FOR THE USE OF LPI ONLY

Denial: Application is denied for following reasons; portions of the Code II are cited. Form is incomplete (_____ pg.) as to General info, Site Investigation, System Proposed, Site Plan, Disposal System Plan, Cross-Section, Statement. See Section 2.3.

Site Investigation indicates site is totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10. Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1.

System Proposed does not conform to Code; See Sections 9.

Site Investigation indicates site modifications are necessary; See Sections 4.3, 4.4, 4.6, 8.7, _____

Miscellaneous _____ See Section _____

Acceptance: Application for permit is approved with condition specified, comply with Section _____ without condition

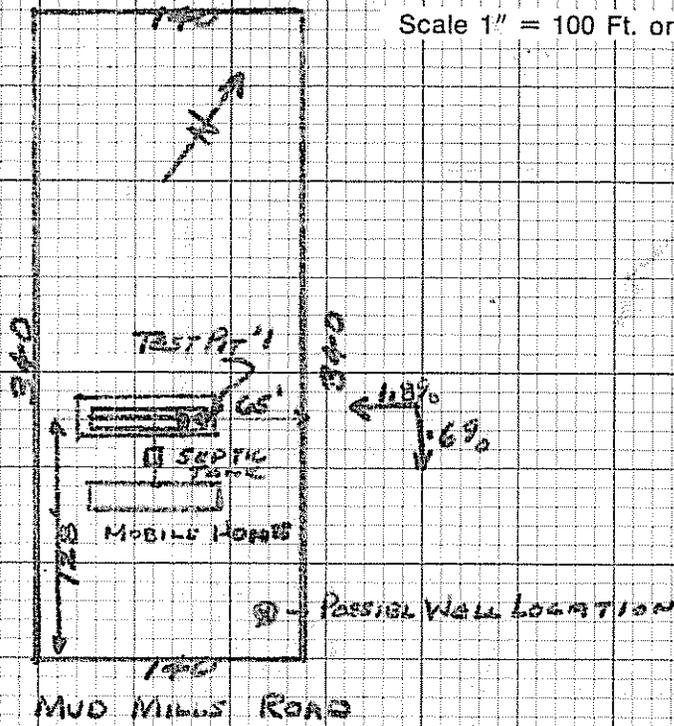
Signed LPI: Richard P. Baber Date: 9-2-77 HHE - 200 1/77

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Town Augusta	Street, Road, etc. Mud Mills Road If on water body, give name	Owner of property Allenwood Park Inc.
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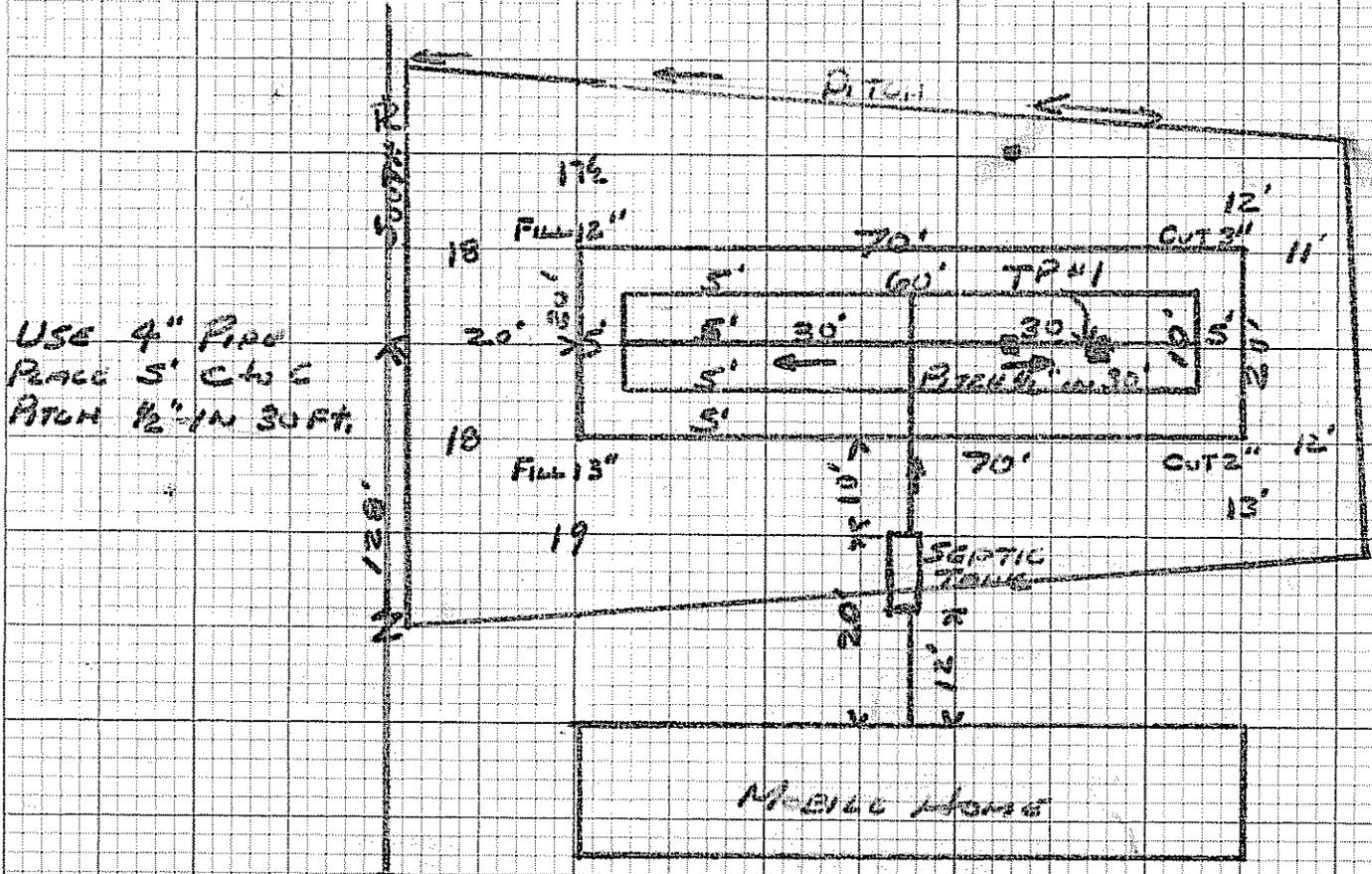
Site Plan

Scale 1" = 100 Ft. or _____



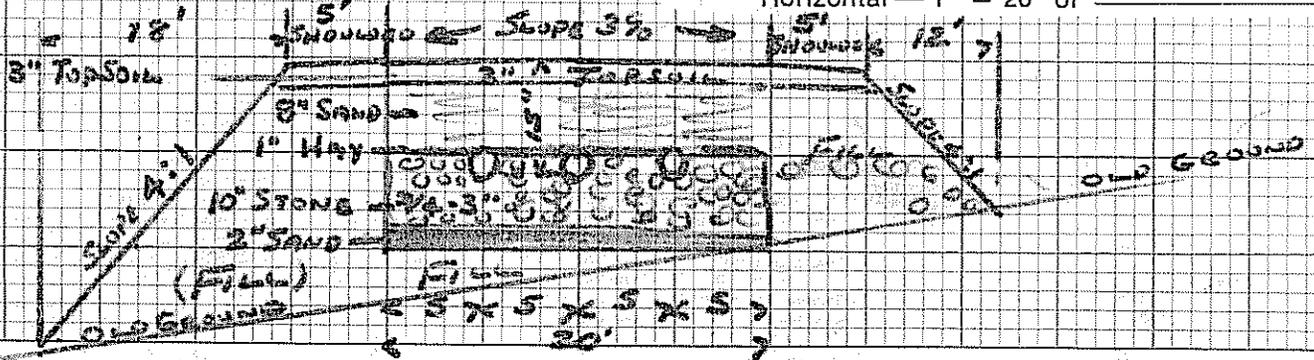
Private Sewage Disposal Plan

Scale 1" = 20' or _____



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or _____
Horizontal — 1" = 20' or _____



Statement: (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

HHE - 200 1/77

Signature Required
Date: 9-2-77
Applicant: _____
Owner: [Signature]