C- 446-5228 PIF 12/19/11

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

City, Town, or Plantation: AUGUSTA

Street or Road: HELLENIC WAY

Subdivision, Lot #: 9-17

AUGUSTA PERMIT # 6633 TOWN COPY

Date Permit Issued: 12/19/11 $ 250.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI): KARAGIANNESS, CHRISTOS ✓ Owner Applicant

Mailing Address of Owner/Applicant: 813 RIVER SIDE DR. AUGUSTA, ME. 04330

Daytime Tel. #: 622-0027

Municipal Tax Map # 51 Lot # 208 SL 1415

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.

Christos Karagiannes 12-16-11
Signature of Owner or Applicant — Date

CAUTION: INSPECTION REQUIRED

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

Local Plumbing Inspector Signature — (1st) date approved 12/27/11 — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
✓ 2. Replacement System
Type replaced: ?
Year installed: ?
3. Expanded System
a. Minor Expansion
b. Major 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 ± ✓ ACRES (SQ. FT.)

SHORELAND ZONING

Yes ✓ No

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: ____
✓ 2. Multiple Family Dwelling, No. of Units: 2
3. Other: ____ (specify)

Current Use: Seasonal ✓ Year Round Undeveloped

TYPE OF WATER SUPPLY

1. Drilled Well 2. Dug Well 3. Private
✓ 4. Public 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

✓ 1. Concrete 2 TANKS
✓ a Regular 1 IS EXISTING
b Low Profile
2 Plastic
3. Other ____
CAPACITY 1,000 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: 268 ✓ 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

450 gallons per day
BASED ON:
✓ 1. Table 501.1 (dwelling unit(s))
2. Table 501.2 (other facilities)
SHOW CALCULATIONS for other facilites
1-2 BED + 1-3 BED
3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE 3, CONDITION C, DESIGN 1
at Observation Hole # 1
Depth 18"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Small---2.0 sq. ft. / gpd
2. Medium---2.6 sq. ft. / gpd
✓ 3. Medium---Large 3.3 sq. ft / gpd
4. Large---4.1 sq. ft. / gpd
5. 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 21 m 042 s
Lon. 69 d 44 m 680 s
if g.p.s, state margin of error: 11

SITE EVALUATOR STATEMENT

I certify that on 11/29/11 (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 # 256 — Date 11/30/11

JOHN PHILBRICK — Site Evaluator Name Printed — Telephone Number 547-3732 — E-mail Address

HHE-200 Rev. 4/05

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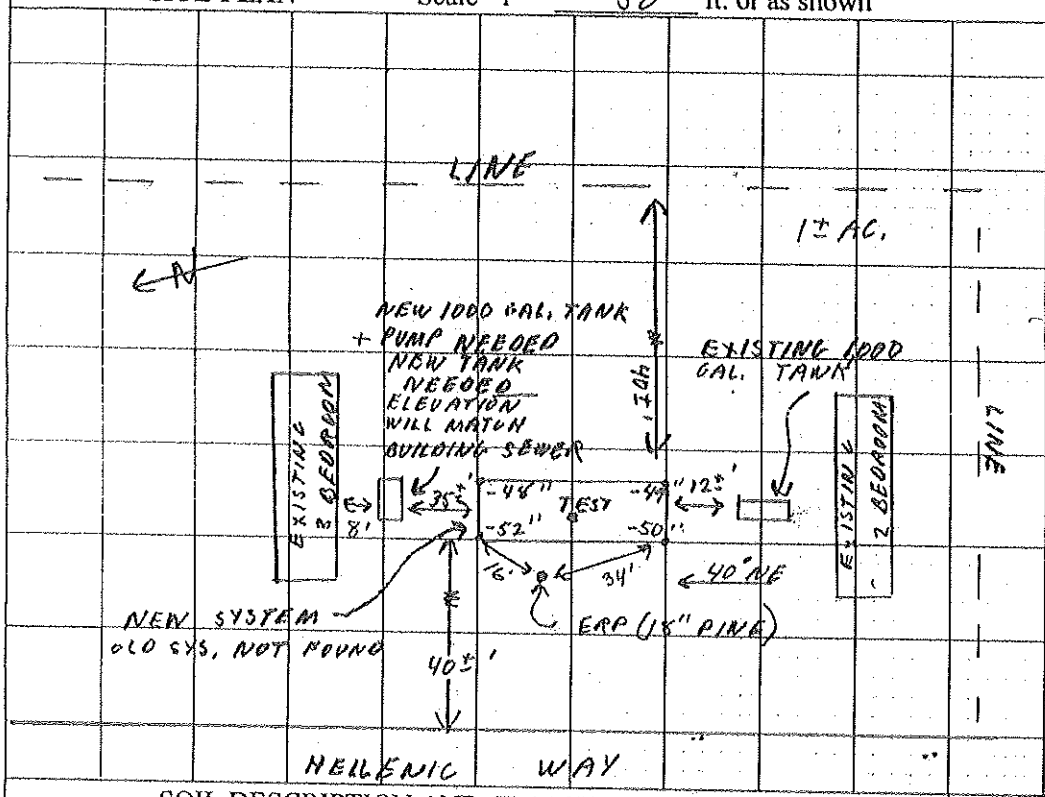
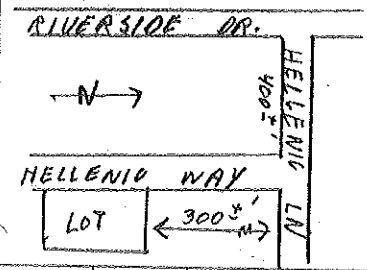
Department of Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
AUGUSTA	HELLENIC WAY	CHRASTOS KARAGIANNESS

SITE PLAN Scale 1" = 50 ft. or as shown



SITE LOCATION PLAN
(map from Maine Atlas recommended)



24 - 4'x8' CEMENT CHAMBERS

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

Observation Hole 1 ☑ Test Pit ☐ Boring
0 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	OLD FILL	FRIABLE	MIXED	NONE
10	LOAMY SAND	↓	DARK BR. TAN	↓
20	↓	FIRM	GRAY	COMMON DISTINCT
30		↓	↓	↓
40				
50				

Soil Classification	Slope	Limiting Factor	
3 Profile / C 1 Condition	0 %	18"	[✓] 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				
10				
20				
30				
40				
50				

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

Site Evaluator Signature — SE # 256 — Date 11/30/11

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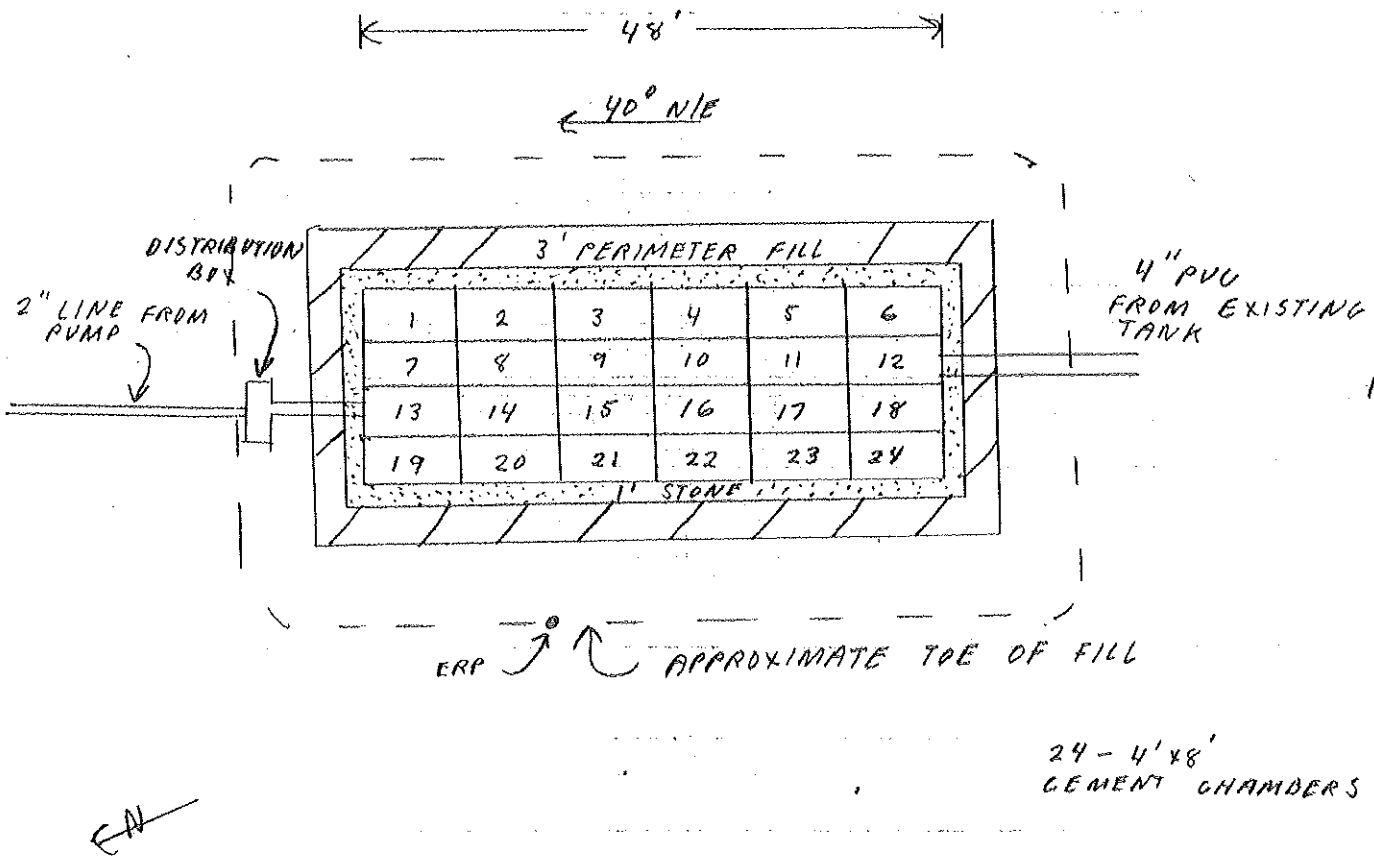
Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	HELLENIC WAY	CHRASTOS KARACIANNESS

SUBSURFACE WASTEWATER DISPOSAL PLAN

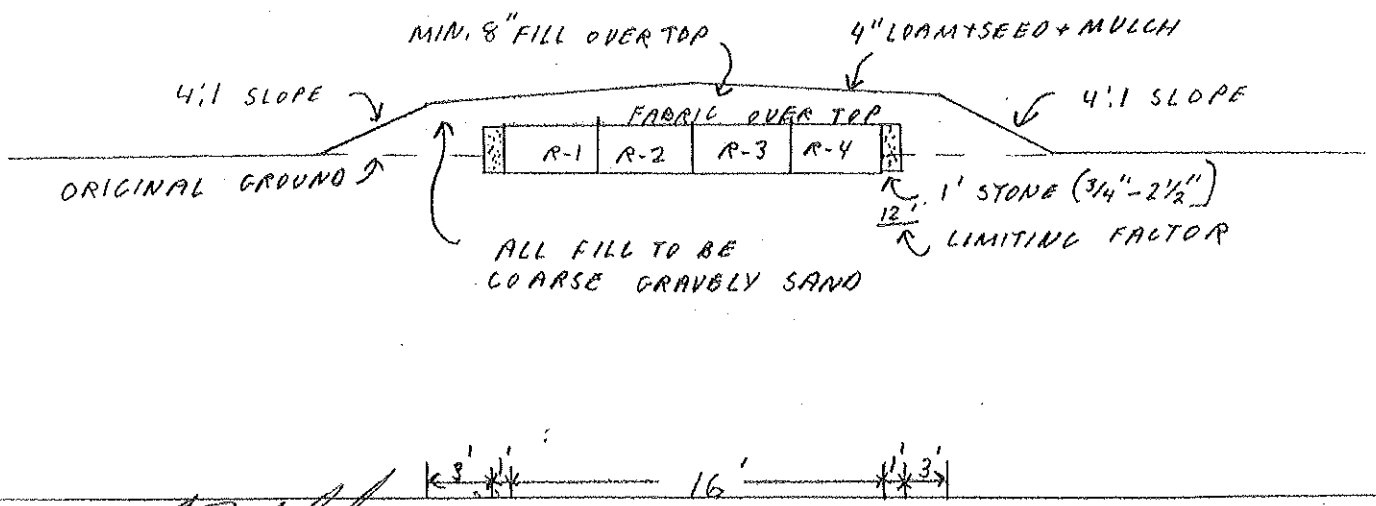
Scale: 1" = 16' ft.



BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	19"	Finished Grade Elevation	-35"	Location & Description: ERP IS IN 18" PINE, 10' W. OF SYSTEM, 48" ABOVE GROUND
Depth of Backfill (downslope)	23"	Top of Distribution Pipe or Proprietary Device	-47"	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-60"	Reference Elevation is: 0.0" or:

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 8 ft.
Horizontal: 1" = 4 ft.



Site Evaluator Signature	SE #	Date
	256	11/30/11