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**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX (207) 287-3165

|   |                                       |  |  |
|---|---------------------------------------|--|--|
| <b>PROPERTY LOCATION</b>  |                                       | »Caution: Permit Required - Attach in Space Below«   |  |
| City, Town or Plantation  | AUGUSTA                               | AUGUSTA<br>Date Permitted 6/21/05<br>Permit # 5552 TOWN COPY<br>\$100 FEE Double Fee Charged<br>Local Plumbing Inspector Signature<br>L.P.I. # 850   |  |
| Street or Road  | 646 RIVERSIDE DR.                     |  |  |
| Subdivision Lot #   |                                       |  |  |
| <b>OWNER/APPLICANT INFORMATION</b>  |                                       |  |  |
| NAME (last, first, MI)  | POLK, KEVIN C / O SHAWNEE RD          |  |  |
| MAILING ADDRESS OF OWNER/APPLICANT  | 219 CAPITOL ST.<br>AUGUSTA, ME. 04330 |  |  |
| Daytime Tel. #  | 207-622-9000                          | Municipal Tax Map # 52 Lot # 5A  |  |
| <b>OWNER OR APPLICANT STATEMENT</b>   |                                       | <b>Caution: Inspection Required</b>  |  |
| I state 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<br>Signature of Owner or Applicant: <i>Kevin Polk</i> Date: 6/20/05 |                                       | I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application<br>Local Plumbing Inspector Signature: <i>Paul A. Beers</i> (1st) Date Approved: 6/20/05<br>(2nd) Date Approved: |  |

|   |  |   |
|---|--|---|
| <b>PERMIT INFORMATION</b>   |  |   |
| <b>TYPE OF APPLICATION:</b><br><input type="checkbox"/> 1. First Time System<br><input checked="" type="checkbox"/> 2. Replacement System<br>Type Replaced <u>UNKNOWN</u><br>Year Installed <u>UNKNOWN</u><br><input type="checkbox"/> 3. Expanded System<br><input type="checkbox"/> a. minor expansion<br><input type="checkbox"/> b. major expansion<br><input type="checkbox"/> 4. Experimental System<br><input type="checkbox"/> 5. Seasonal Conversion | <b>THIS APPLICATION REQUIRES:</b><br><input checked="" type="checkbox"/> 1. No Rule Variance<br><input type="checkbox"/> 2. First Time System Variance<br><input type="checkbox"/> a. Local Plumbing Inspector approval<br><input type="checkbox"/> b. State & Local Plumbing Inspector approval<br><input type="checkbox"/> 3. Replacement System Variance<br><input type="checkbox"/> a. Local Plumbing Inspector approval<br><input type="checkbox"/> b. State & Local Plumbing Inspector approval<br><input type="checkbox"/> 4. Minimum Lot Size Variance<br><input type="checkbox"/> 5. Seasonal Conversion Approval | <b>DISPOSAL SYSTEM COMPONENT(S)</b><br><input checked="" type="checkbox"/> 1. Non-Engineered System<br><input type="checkbox"/> 2. Primitive System (graywater & alt toilet)<br><input type="checkbox"/> 3. Alternative Toilet, specify: _____<br><input type="checkbox"/> 4. Non-Engineered Treatment Tank (only)<br><input type="checkbox"/> 5. Holding Tank _____ Gallons<br><input type="checkbox"/> 6. Non-Engineered Disposal Area (only)<br><input type="checkbox"/> 7. Separated Laundry System<br><input type="checkbox"/> 8. Engineered System (2000 gpd or more)<br><input type="checkbox"/> 9. Engineered Treatment Tank (only)<br><input type="checkbox"/> 10. Engineered Disposal Area (only)<br><input type="checkbox"/> 11. Pretreatment, specify: _____<br><input type="checkbox"/> 12. Miscellaneous components |
| <b>SIZE OF PROPERTY</b><br>1.8+/- ACRES <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres  | <b>DISPOSAL SYSTEM TO SERVE:</b><br><input checked="" type="checkbox"/> 1. Single Family Dwelling Unit<br>No. of Bedrooms <u>2</u><br><input type="checkbox"/> 2. Multiple Family Dwelling: Number of Units _____<br><input type="checkbox"/> 3. Other _____ (Specify)<br>Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped   | <b>TYPE OF WATER SUPPLY</b><br><input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private<br><input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other   |
| <b>SHORELAND ZONING</b><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |  |   |

|   |   |   |   |
|---|---|---|---|
| <b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b>   |   |   |   |
| <b>TREATMENT TANK</b><br><input checked="" type="checkbox"/> 1. Concrete<br><input type="checkbox"/> a. Regular<br><input type="checkbox"/> b. Low Profile<br><input type="checkbox"/> 2. Plastic<br><input type="checkbox"/> 3. Other _____<br>CAPACITY: <u>1000</u> Gallons | <b>DISPOSAL FIELD TYPE &amp; SIZE</b><br><input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench<br><input checked="" type="checkbox"/> 3. Proprietary Device<br><input type="checkbox"/> a. Cluster Array <input checked="" type="checkbox"/> c. Linear<br><input type="checkbox"/> b. Regular Load <input type="checkbox"/> d. H-20<br><input type="checkbox"/> 4. Other _____<br>Size: <u>120</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> lin. ft. | <b>GARBAGE DISPOSAL UNIT</b><br><input checked="" type="checkbox"/> 1. NO <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe<br>If Yes or Maybe, specify one below:<br><input type="checkbox"/> a. Multi-compartment tank<br><input type="checkbox"/> b. _____ Tanks in series<br><input type="checkbox"/> c. Increase in tank capacity<br><input type="checkbox"/> d. Filter on tank outlet | <b>DESIGN FLOW</b><br><u>180</u> Gallons per day<br>Based On:<br><input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s))<br><input type="checkbox"/> 2. Table 501.2 (other facilities)<br>Show Calculations -- for other facilities-- |
| <b>SOIL DATA &amp; DESIGN CLASS</b><br>PROFILE: <u>3</u> • CONDITION: <u>C</u> • DESIGN: <u>I</u><br>at Observation Hole # _____<br>Depth: <u>34</u> _____ N/R<br>OF MOST LIMITING SOIL FACTOR  | <b>DISPOSAL AREA SIZING</b><br><input type="checkbox"/> 1. Small --- 2.00 sq. ft. /gpd<br><input type="checkbox"/> 2. Medium --- 2.60 sq. ft. /gpd<br><input checked="" type="checkbox"/> 3. Medium-Large --- 3.30 sq. ft. /gpd<br><input type="checkbox"/> 4. Large --- 4.10 sq. ft. /gpd<br><input type="checkbox"/> 5. Extra-Large --- 5.00 sq. ft. /gpd   | <b>EFFLUENT/EJECTOR PUMP</b><br><input type="checkbox"/> 1. Not required<br><input type="checkbox"/> 2. May Be Required<br><input checked="" type="checkbox"/> 3. Required >> Specify Only for Engineered or Experimental Systems<br>DOSE: _____ Gallons  | <input type="checkbox"/> 3. Section 503.0 (meter readings)<br>ATTACH WATER-METER DATA   |

|  |   |  |
|--|---|--|
| <b>SITE EVALUATOR'S STATEMENT</b>  |   |  |
| I CERTIFY that on <u>6/14/05</u> (date) I completed a site evaluation on this property 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 CHR 241) |   |  |
| Signature: <i>Paul A. Beers</i><br>Site Evaluator Signature<br>PAUL A. BEERS<br>Site Evaluator Name Printed  | # <u>56</u><br>SE #<br>207-582-7400<br>Telephone Number | Date: <u>6/15/05</u><br>decaycwr@msn.com<br>E-Mail Address |
| Note: Changes to or deviations from design should be confirmed with the Site Evaluator<br>HHE-200 Rev. 8/01  |   |  |

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Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX (207) 287-3165

Town, City, Plantation  
**AUGUSTA**

Street, Road, Subdivision  
**646 RIVERSIDE DR.**

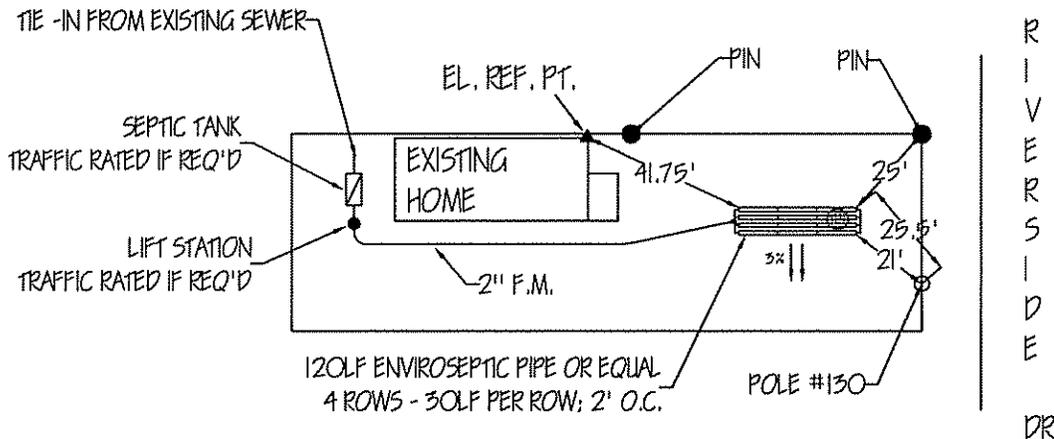
Owner's or Applicant Name  
**KEVIN POLK**

## SITE PLAN

Scale  $1' = 50'$  Ft.  
or as shown

SITE LOCATION PLAN  
(Attach map from Maine Atlas  
for First Time System Variance)

SEE  
ATTACHED  
MAP



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

Observation Hole TP1 Test Pit  Boring   
Depth of Organic Horizon Above Mineral Soil \_\_\_\_\_

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture         | Consistency | Color         | Mottling        |
|---|-----------------|-------------|---------------|-----------------|
| 0   | FINE SANDY LOAM | FRIABLE     | DK BRN.       |                 |
| 10  | OLD FILL        |             |               |                 |
| 20  | FINE SANDY LOAM |             | REDDISH BROWN |                 |
| 30  |                 |             | OLIVE BRN.    | FEW FAINT @ 34" |
| 40  |                 | FIRM        | OLIVE GRAY    |                 |
| 50  |                 |             |               |                 |

|                                   |                     |                               |  |
|-----------------------------------|---------------------|-------------------------------|--|
| Soil Classification<br><b>3 C</b> | Slope<br><b>3 %</b> | Limiting Factor<br><b>32'</b> | <input checked="" type="checkbox"/> Ground Water |
| Profile                           | Condition           | Depth                         | <input type="checkbox"/> Restrictive Layer       |
|                                   |                     |                               | <input type="checkbox"/> Bedrock                 |

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 | <input type="checkbox"/> Ground Water      |
| Profile             | Condition | Depth           | <input type="checkbox"/> Restrictive Layer |
|                     |           |                 | <input type="checkbox"/> Bedrock           |

*Spall A. Beers*  
Site Evaluator Signature

# 56  
SE#

5/6/05  
Date

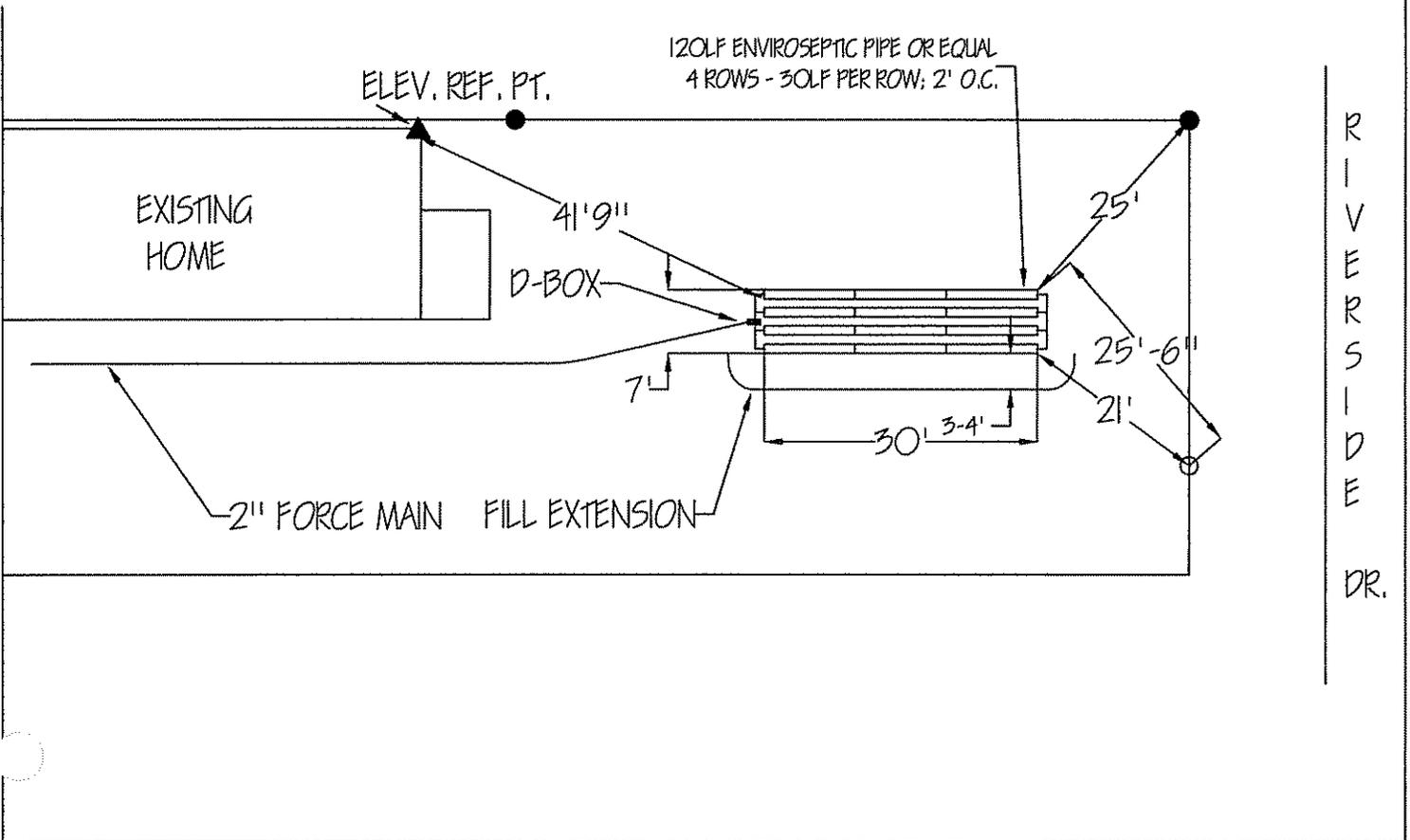
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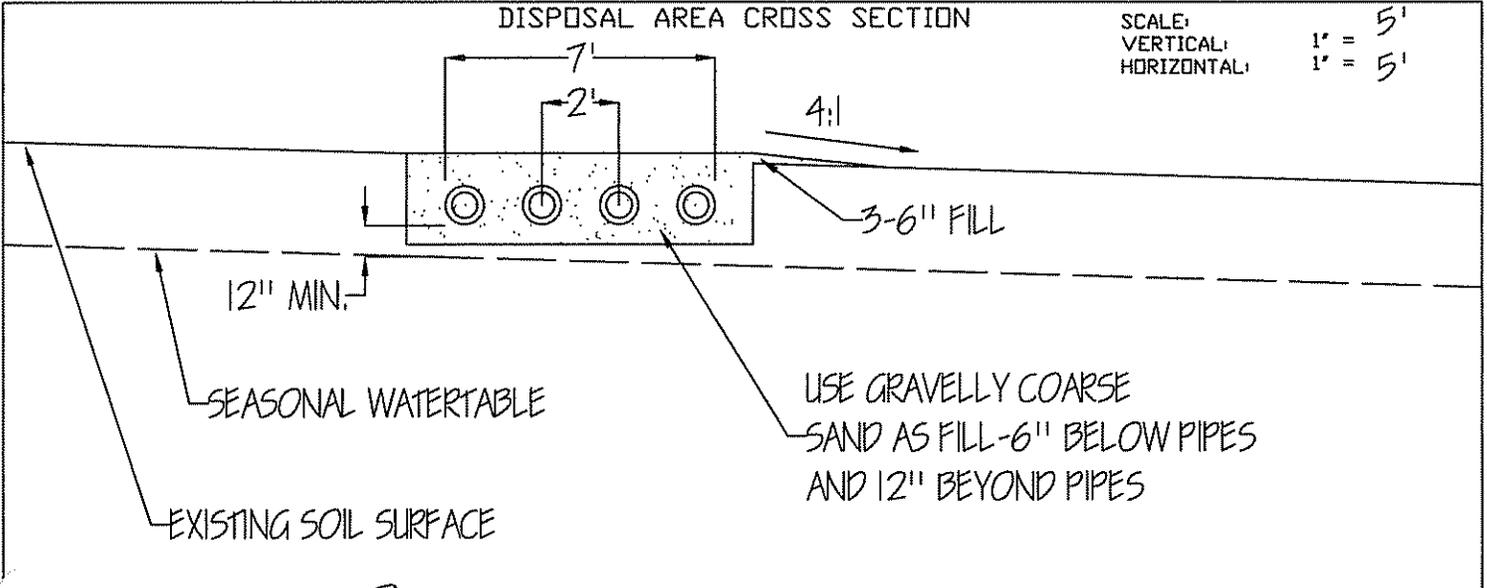
Town, City, Plantation: **AUGUSTA** Street, Road, Subdivision: **646 RIVERSIDE DR.** Owner or Applicant Name: **KEVIN POLK**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20' FT



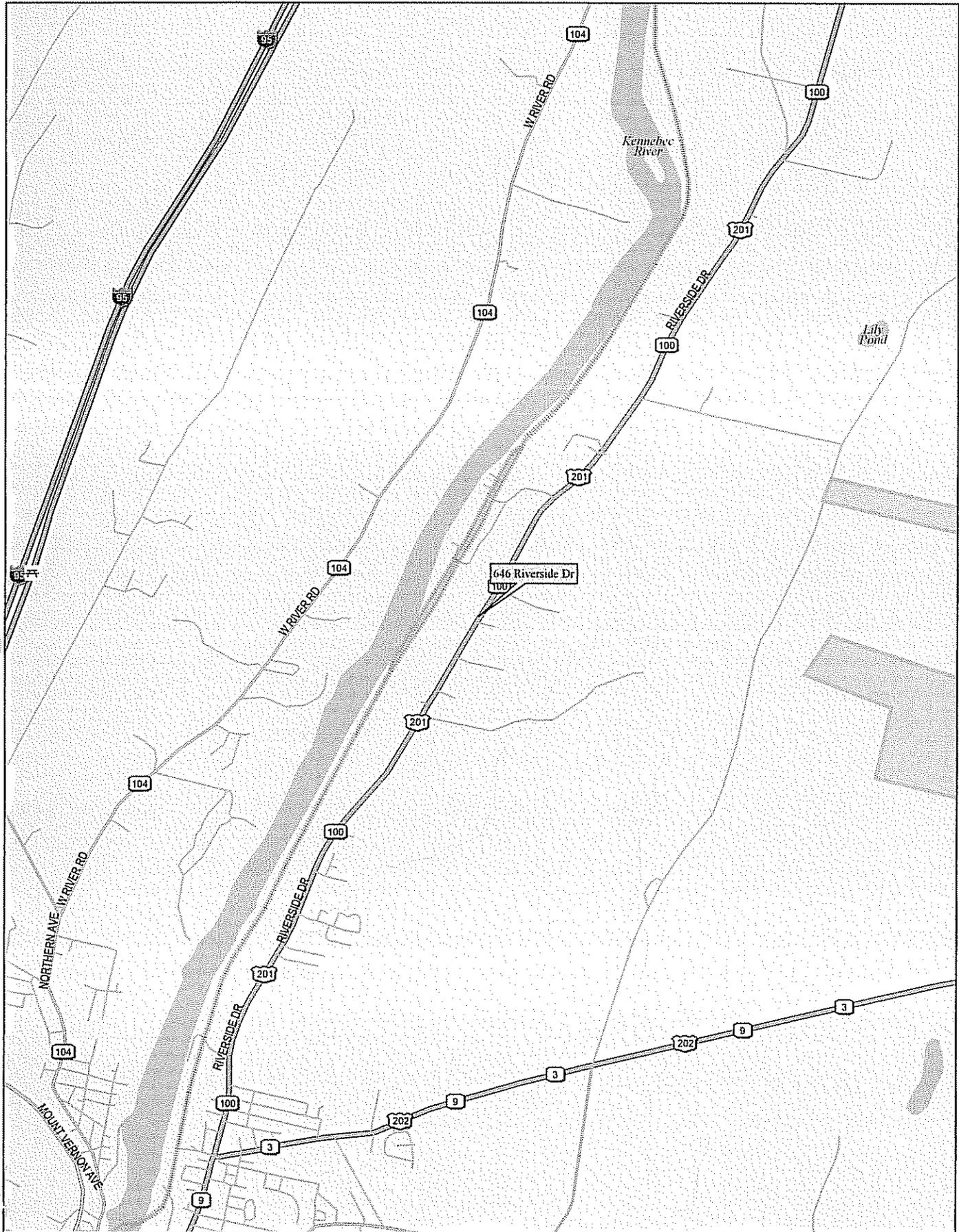
| FILL REQUIREMENTS                     |      | CONSTRUCTION ELEVATIONS                        |      | ELEVATION REFERENCE POINT |                         |
|---------------------------------------|------|--|------|---------------------------|-------------------------|
| Depth of Fill (Upslope)               | 0"   | Finished Grade Elevation                       | -60" | Location & Description    | NAIL IN CORNER OF HOME  |
| Depth of Fill (Downslope)             | 3-6" | Top of Distribution Pipe or Proprietary Device | -70" |                           | 82" UP FROM SIDING BASE |
| DEPTHS AT CROSS-SECTION (SHOWN BELOW) |      | Bottom of Disposal Area                        | -82" | Reference Elevation is:   | 0.0"                    |



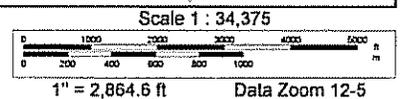
*Paul C. Reed*  
 Site Evaluator Signature

# 56  
 SE #

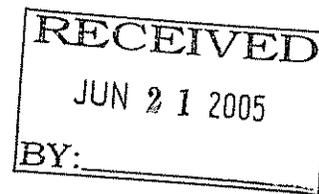
6/5/05  
 Date



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Paul A. Beers LSE, CSS  
26 Fairview Street  
Gardiner, ME. 04345  
207-582-7400



TOWN: **Augusta**

LOCATION: **646 Riverside Dr.**

APPLICANT'S NAME: **Kevin Polk**

1) The Plumbing and Subsurface Wastewater Disposal Rules adopted by the State of Maine, Department of Human Services pursuant to 22 M.R.S.A. § 42 (the "Rules") are Incorporated herein by reference and made a part of this application and shall be consulted by the owner/applicant, the system Installer and/or building contractor for further construction details and material specifications. The system installer should contact Paul A. Beers 582-7400, if there are any questions concerning materials, procedures or designs. The system Installer and/or building contractor installing the system shall be solely responsible for compliance with the Rules and with all state and municipal laws and ordinances pertaining to the permitting, inspection and construction of subsurface wastewater disposal systems. **Paul A. Beers does not have a financial interest in any proprietary product that may be specified as part of the attached design.**

2) This application is intended to represent facts pertinent to the Rules only. **It shall be the responsibility of the owner/applicant, system installer and/or building contractor to determine compliance with and to obtain permits under all applicable local, state and/or federal laws and regulations (including, without limitation, Natural Resources Protection Act, wetland regulations, zoning ordinances, subdivision regulations, Site Location of Development Act and minimum lot size laws) before installing this system or considering the property on which the system is to be installed a "buildable" lot. It is recommended that a wetland scientist be consulted regarding wetland regulations.**

Prior to the commencement of construction/installation, the local plumbing inspector shall inform the owner/applicant and Paul A. Beers of any local ordinances, which are more restrictive than the Rules in order that the design may be amended. All designs are subject to review by local, state and/or federal authorities. Paul A. Beers's liability shall be limited to revisions required by regulatory agencies pursuant to laws or regulations In effect at the time of preparation of this application.

3). All information shown on this application relating to property lines, well locations, subsurface structures and underground facilities (such as, utility lines, drains, septic systems, water lines, etc.) are based solely upon information provided by the owner/applicant and has been relied upon by Paul A. Beers in preparing this application. The owner/applicant shall review this application prior to the start of construction and confirm this information.

4). Installation of a garbage (grinder) disposal is not recommended. If one is installed, an additional 1000 gallon septic tank or a septic tank filter should be connected in series to the proposed septic tank.

5). The system user shall avoid introducing kitchen grease or fats into this system. Chemicals such as septic tank cleaners and/or chlorine (such as from water treatment) and controlled or hazardous substances shall not be disposed of in this system.

- 6) The septic tank should be pumped within two years of installation and subsequently as recommended by the pump service, but in no event should the septic tank be pumped less often than once every three years.
- 7) The actual water flow or number of bedrooms **shall not exceed the design criteria indicated on this application** without a re-evaluation of the system as proposed. If the system is supplied by public water or a private service with a water meter, the water consumption per period should be divided by the number of days to calculate the average daily water consumption (water usage (cu.ft.) x 7.48. (gallons per cu. ft.) .
- 8) The general minimum setback between a well and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.
- 9) When a gravity system is proposed: **BEFORE CONSTRUCTION/INSTALLATION BEGINS**, the system installer or building contractor shall review the elevations of all points given in this application and the elevation of the existing and/or proposed building drain and septic tank inverts for compatibility to minimum slope requirements. In gravity systems, the invert of the septic tank(s) outlet(s) shall be at least 4 inches above the invert of the distribution box outlet at the disposal area. When an effluent pump is required, provisions shall be made to make certain that surface ground water does not enter the septic tank or pump station. An alarm device warning of a pump failure shall be installed. Insulate gravity pipes, pump lines and the distribution box as necessary to prevent freezing.
- 10) On all systems, remove the vegetation; organic duff and old fill material from under the disposal area and any fill extension. On sites where the proposed system is to be installed in natural soil, scarify the bottom and sides of the excavated disposal area with a rake. Do not use wheeled equipment on the scarified soil surface. For systems installed in fill, scarify the native soil by roto-tilling to a depth of at least 8 inches over the entire disposal and fill extension area to prevent glazing and to promote fill bonding. Place fill in loose layers no deeper than 8 inches and compact thoroughly before placing more fill (this ensures that voids and loose pockets are eliminated to minimize the chance of leakage). Do not use wheeled equipment on the scarified soil area until after 12 inches of fill is in place. Keep equipment off plastic chambers, leaching pipe or In-drains. Divert the surface water away from the disposal area by ditching or shallow swales.
- 11). Unless noted otherwise, fill shall be gravelly coarse sand, which contains no more than 5 % fines (silt and clay).
- 12). Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 13). Seed all filled and disturbed surfaces with perennial grass seed, then mulch with hay or equivalent material to prevent erosion.