Called 5-6 12noon Called 2-24 1:40 626-9076

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

AUGUSTA 4131 TOWN COPY
Date Permit Issued: 2/24/99
$ 100 FEE ☐ If Double Fee Charged
L.P.I. # 850
Local Plumbing Inspector Signature

PROPERTY LOCATION

Town or Plantation	AUGUSTA
Street Subdivision Lot #	851 RIVERSIDE DRIVE

PROPERTY OWNER'S NAME

Last: Drummond	First: Robert
Applicant's Name	ROBERT D RUMMOND
Mailing Address of Owner	69 EASTERN AVE AUGUSTA, ME 04330
Daytime Tel. #	

Municipal Tax Map # 55 Lot # 22

Owner Statement

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

Robert Drummond — Signature of Owner/Applicant — Date 2-24-99

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 — Date Approved 8/2/99

PERMIT INFORMATION

TYPE OF APPLICATION:

1. ☐ First Time System
2. ☒ Replacement System
   Type Replaced TRENCH
   Year Installed ?
3. ☐ Expanded System
   ☐ a. one time exempted
   ☐ b. non exempted
4. ☐ Experimental System
   ☐ 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 Approval

DISPOSAL SYSTEM COMPONENT(S)

1. ☒ Non-Engineered System
2. ☐ Primitive System (graywater & alt toilet)
3. ☐ Alternative Toilet
4. ☐ Non-Engineered Treatment Tank
5. ☐ Holding Tank ____ Gallons
6. ☐ Non-Engineered Disposal Area (only)
7. ☐ Separated Laundry System
8. ☐ Engineered System (>2000 gpd)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal Area (only)
11. ☐ Pretreatment

SIZE OF PROPERTY

1/3 Ac.±

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE:

1. ☐ Single Family Dwelling Unit
2. ☐ Multiple Family Dwelling: Number of Units
3. ☒ Other AUTO SALES/REPAIR

TYPE OF WATER SUPPLY

AUGUSTA W.D.

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ Concrete
   ☒ a. Regular
   ☐ b. Low Profile
2. ☐ Plastic
3. ☐ Other ____

SIZE 1000 Gallons

DISPOSAL AREA TYPE / SIZE

1. ☐ Bed ____ Sq. Ft.
2. ☒ Proprietary Device 320 Sq. Ft.
   ☒ Cluster ☐ Linear
   ☐ Regular ☒ H-20
3. ☐ Trench
4. ☐ Other ____

GARBAGE DISPOSAL UNIT

1. ☒ No
2. ☐ Yes
   ☐ Multi-compartment tank
   ☐ Tank in series
   ☐ Increase in tank capacity
   ☐ Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

UP TO 8 EMPLOYEES PER DAY.

DESIGN FLOW: 120 (Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE	DESIGN
FILL	9-D

DEPTH TO MOST LIMITING FACTOR 36"

DISPOSAL AREA SIZING

1. ☐ Small - 2.00
2. ☐ Medium - 2.60
3. ☐ Medium-Large - 3.30
4. ☐ Large - 4.10
5. ☒ Extra-Large - 5.20

PUMPING

1. ☐ Not required
2. ☒ May be required
3. ☐ Required

DOSE 40 Gallons

SITE EVALUATOR'S STATEMENT

On 10/21/98 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed sytem is in compliance with the Subsurface Wastewater Disposal Rules.

William W. Rideout — Site Evaluator Signature — SE # 51 — Date 10/22/98

WILLIAM W. RIDEOUT — Site Evaluator Name Printed — (207) 582-4161 Telephone

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation: AUGUSTA

Street, Road Subdivision: 851 RIVERSIDE DR

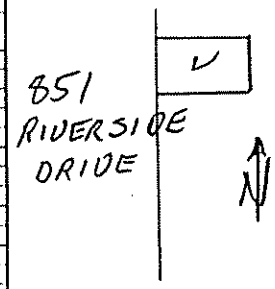
Owner's Name: Diamond

SITE PLAN

Scale 1" = _____ Ft. or as shown

SEE PAGE 4

SITE LOCATION PLAN (Map from Maine Atlas recommended)



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

Observation Hole 1 ☒ Test Pit ☐ Boring

— " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	FILL	FRIABLE	B	
10	PRIOR TO			
20	1972			
30				36
40	OLD GROUND	FIRM	O.G.	
50				

Soil Classification (Profile / Condition)	Slope	Limiting Factor	
FIL/9/D	0-1%	36"	☒ 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 (Profile / Condition)	Slope	Limiting Factor	
	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Alan W. Rideout
Site Evaluator Signature

51
SE •

10/22/98
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

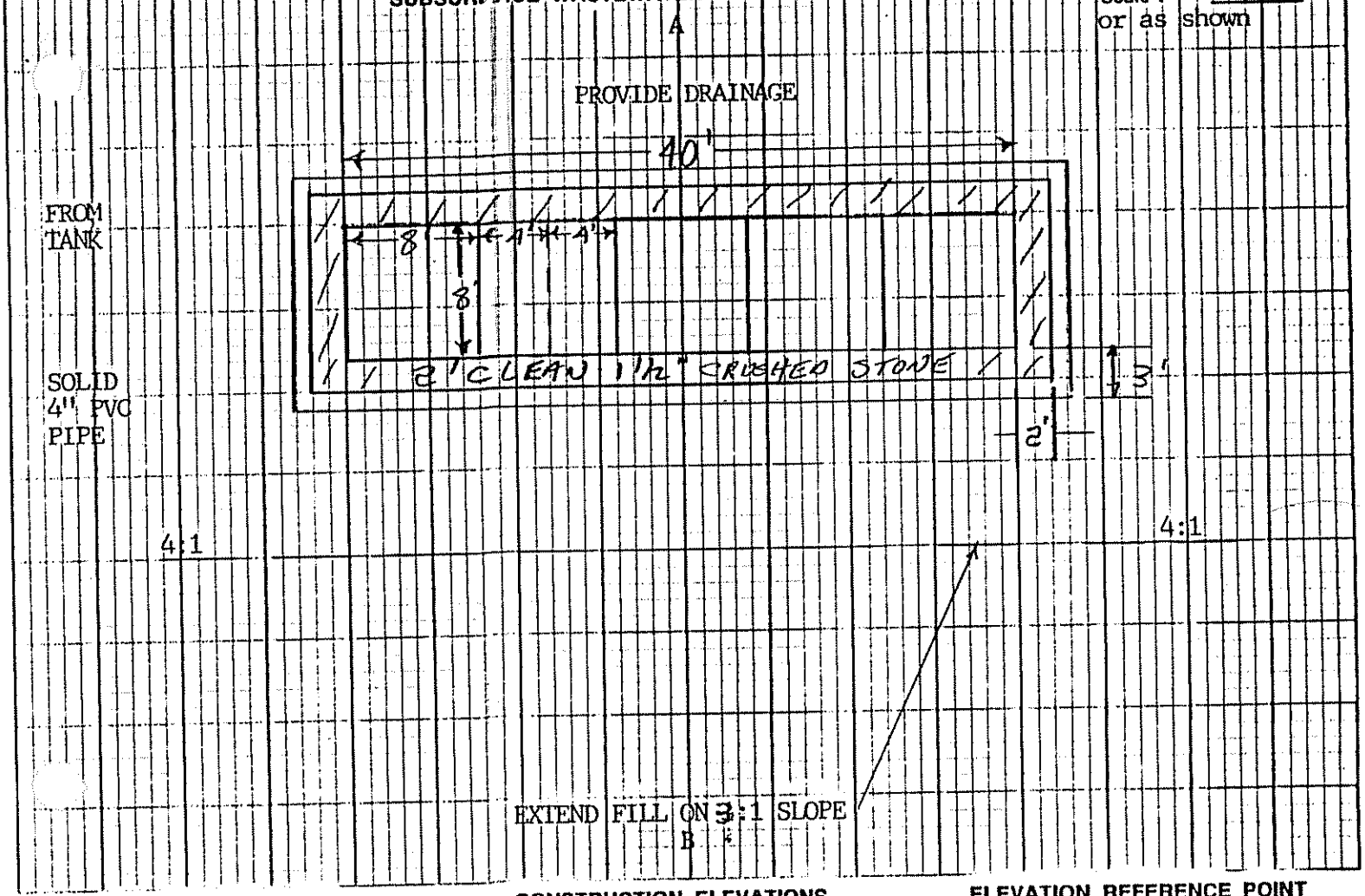
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: 851 RIVERSIDE DR.

Owners Name: Drummond

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 10 Ft. or as shown



FILL REQUIREMENTS

Depth of Fill (Upslope) 36"

Depth of Fill (Downslope) 36"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0

Bottom of Disposal Area -72"

Top of Distribution Lines or Chambers -59"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

FLAGGED NAIL IN CORNER OF BUILDING

DISPOSAL AREA CROSS SECTION

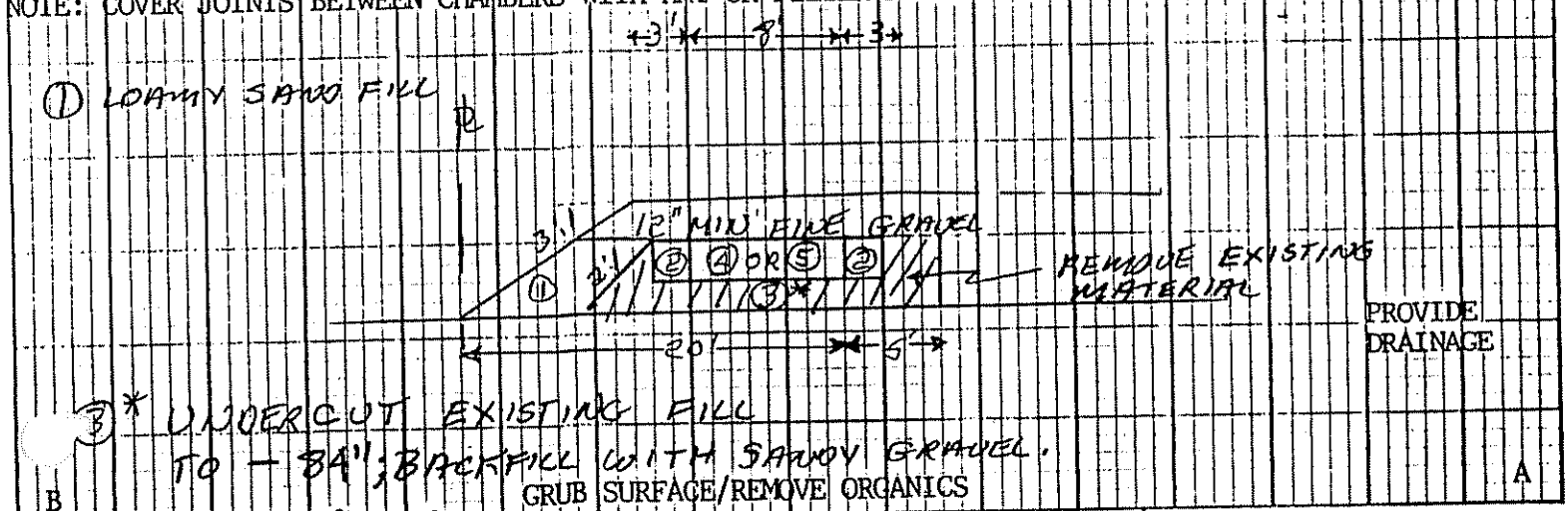
Scale:

Vertical: 1 inch = 5 Ft.

Horizontal: 1 inch = 10 Ft.

1; [illegible] 2; 2' clean 1½" crushed stone, covered with 2" compacted hay. 3; sandy gravel fill to 2:1. 4; 5 = 8'x8' chambers. 5; 10 = 4'x8' chambers.

NOTE: COVER JOINTS BETWEEN CHAMBERS WITH HAY OR FILTER FABRIC.



Wm. W. Richard

Site Evaluator Signature

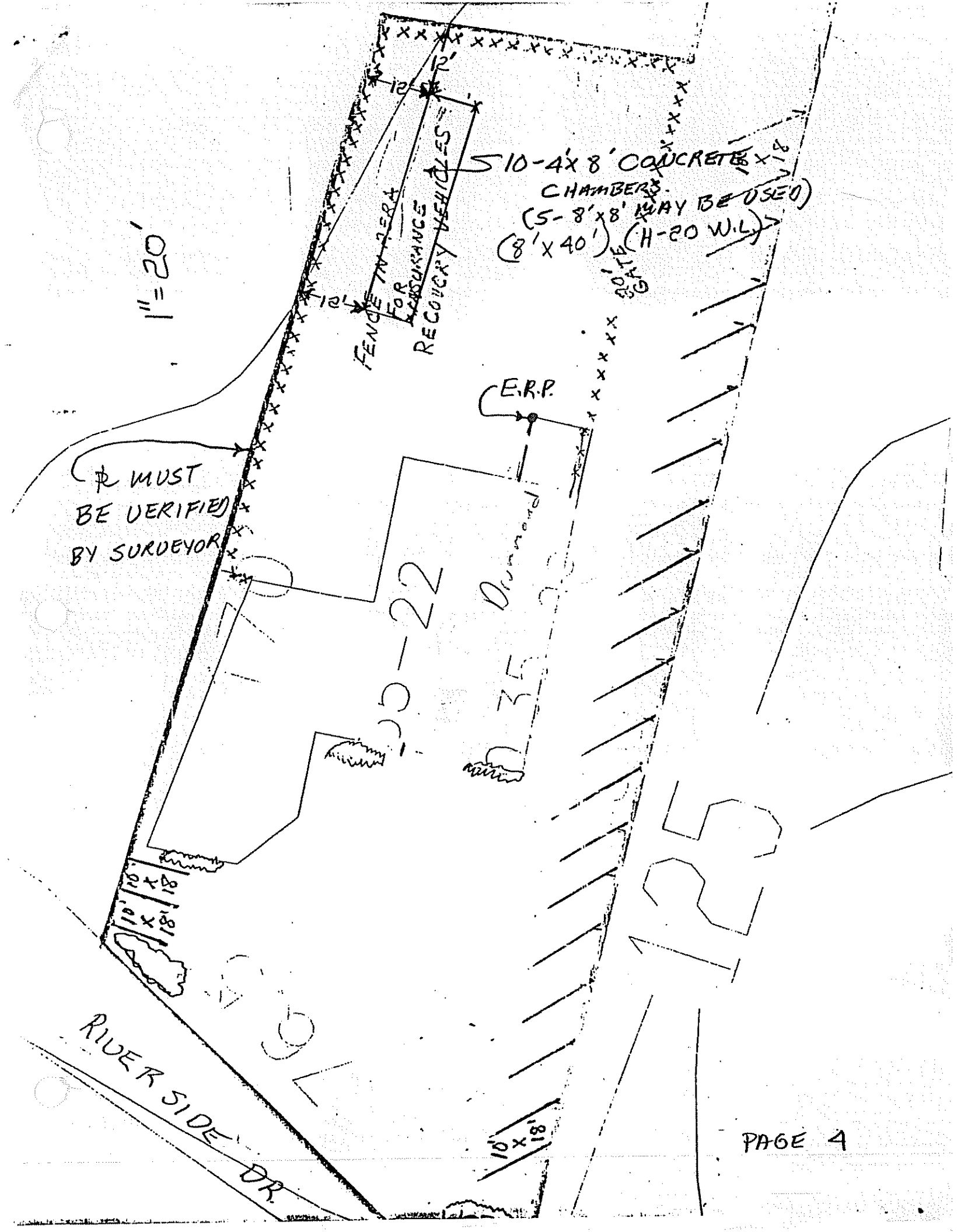
51

SE#

10/22/98

Date

HHE-200 Rev. 1/84


12'
12'
12'
10-4'x 8' CONCRETE CHAMBERS
(5-8'x8' MAY BE USED)
(8'x40') (H-20 W.L.)
FENCE TO BE USED FOR RECOVERY VEHICLES
1" = 20'
E.R.P.
MUST BE VERIFIED BY SURVEYOR
CC-22
10'x18'
10'x18'
10'x18'
RIVERSIDE DR.