SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

9973
4B

37,377.56 38 sq 1.06 gpd
1183.5

AUGUSTA 2605 TOWN COPY

Date Permit Issued: 12/5/92 $ 60.00 FEE ☐ If Double Fee Charged

L.P.I. # 1151

Local Plumbing Inspector Signature

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA 68/17 LR
Street Subdivision Lot #	TASKER ROAD

PROPERTY OWNERS NAME

Last: STOVER First: WILLIAM W.

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	RR7 BOX 2248 AUGUSTA 04330

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/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.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI N/A
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS: N/A
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY: 1-1½ AC
ZONING: RURAL ?

THIS APPLICATION REQUIRES:
1. ☒ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
a. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
PROPOSED DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING
1. ☐ NOT REQUIRED
2. ☒ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
2 BEDROOM
MODERATE FLOW
240 GPD
20 X 40 BED

DESIGN FLOW: 240 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 18.

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 792+ Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 10-8-92 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

David I Studer — Site Evaluator Signature
275 — SE#
10-12-92 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA

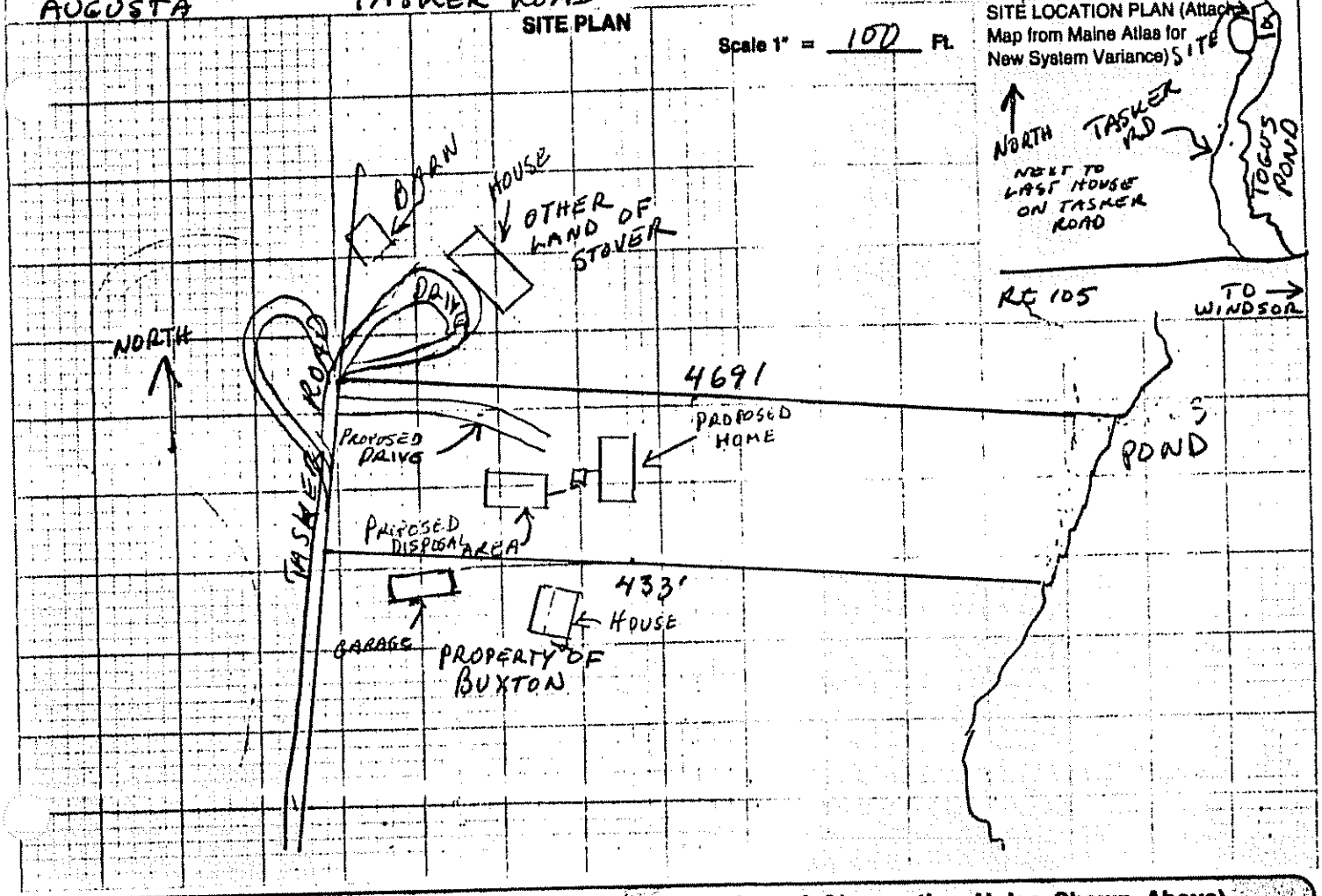
Street, Road, Subdivision: TASKER ROAD

Owners Name: WILLIAM W. STOVER

SITE PLAN

Scale 1" = 100 Ft.

SITE LOCATION PLAN (Attach a Map from Maine Atlas for New System Variance)



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

Observation Hole: TP-1 ☒ Test Pit ☐ Boring

0-2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
ROCKY SANDY LOAM	FRIABLE — NO RESTRICTION	LIGHT YELLOW BROWN 10YR 6/4	NONE EVIDENT
ROCKY SANDY LOAM	ROOTS TO 24"	10YR 4/4 DARK YELLOW BROWN	COMMON DISTINCT

Soil	Classification	Slope	Limiting Factor
2 (Profile)	C (Condition)	0-3 %	18" ☑ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole: TP-2 ☒ Test Pit ☐ Boring

0-2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
ROCKY VERY FINE SANDY LOAM	FRIABLE	LIGHT YELLOW BROWN	NONE EVIDENT
		DARK YELLOW BROWN	Common Distinct

Soil	Classification	Slope	Limiting Factor
2 (Profile)	C (Condition)	0-3 %	18" ☑ Ground Water ☐ Restrictive Layer ☐ Bedrock

David J Studer
Site Evaluator Signature

275
SE#

10-12-92
Date

HHE-200 Rev.1/84

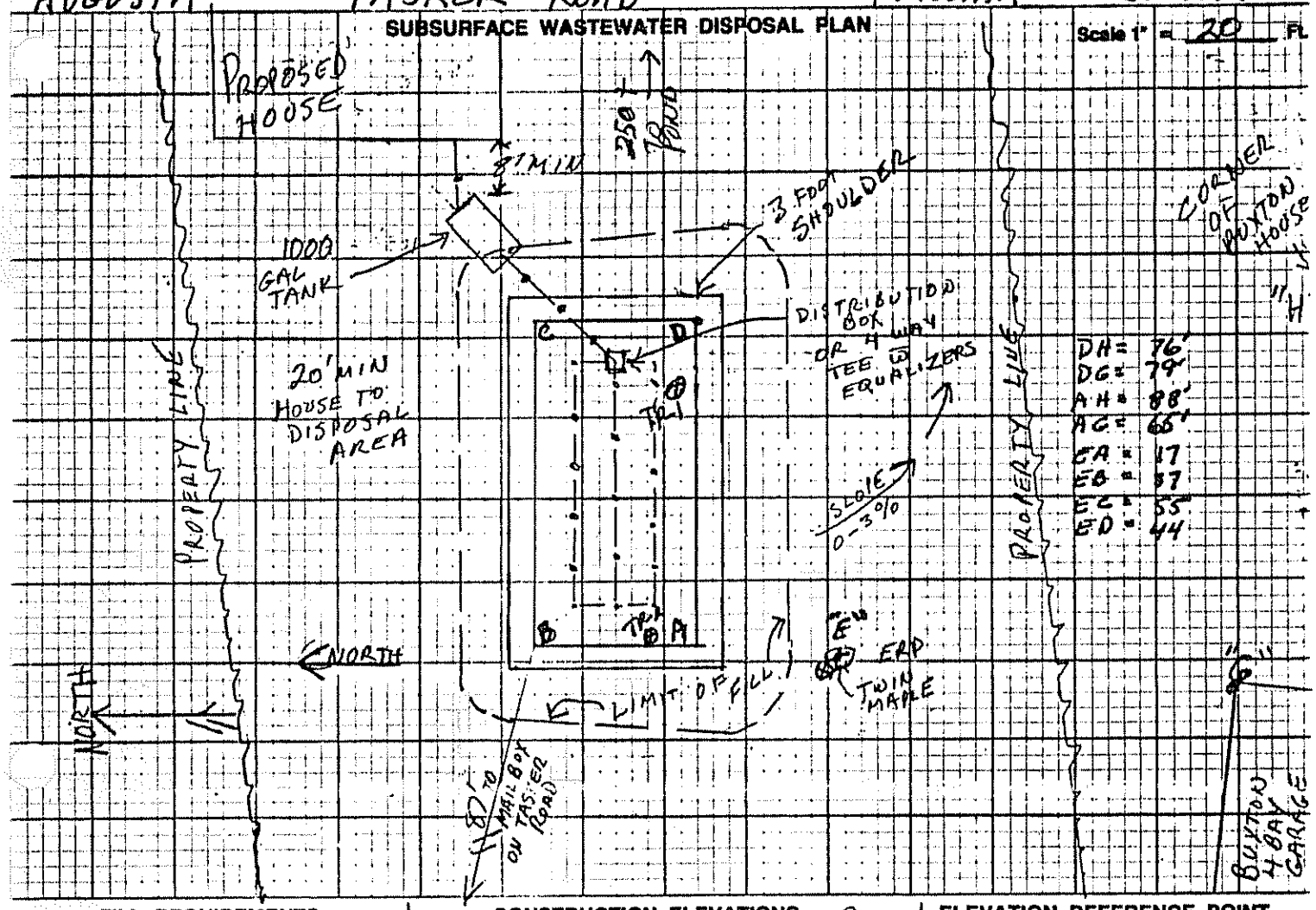
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	TASKER ROAD	WILLIAM W. STOVER

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

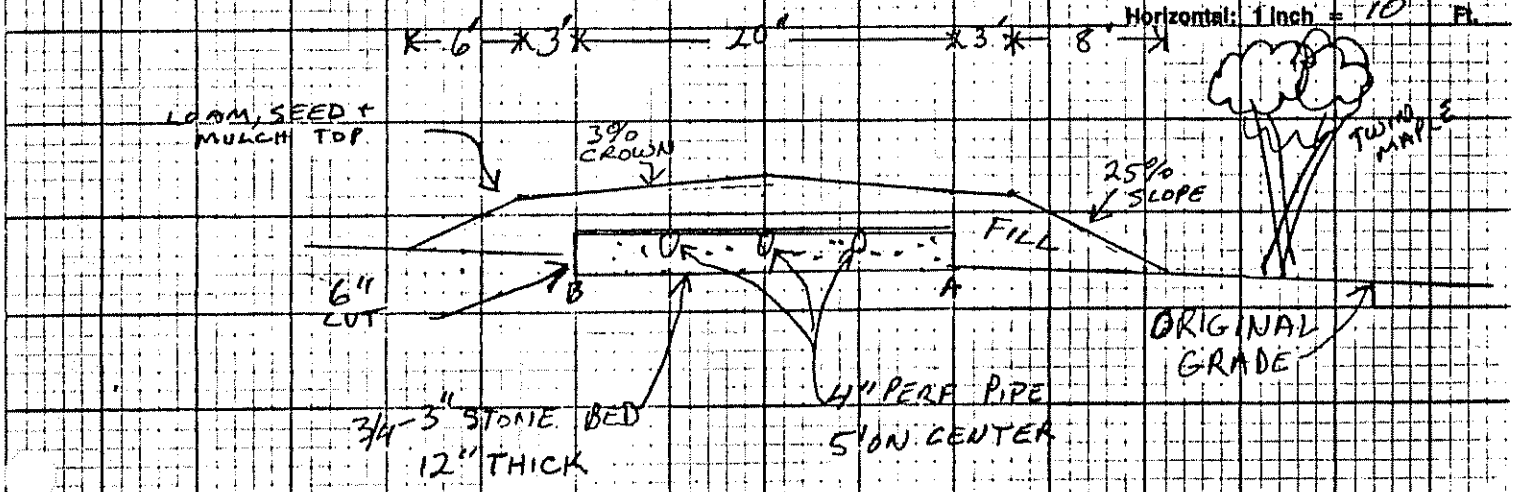


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	18"	Reference Elevation Is	0	FLAGGED NAIL IN TWIN MAPLE ABOUT 6' ABOVE GRADE
Depth of Fill (Downslope)	23"	Bottom of Disposal Area	67"	
		Top of Distribution Lines or Chambers	56"	

DISPOSAL AREA CROSS SECTION

THRU B - A

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



David J Studer
Site Evaluator Signature

275
SE#

10-12-92
Date

HHE-200 Rev