

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 10SHS
(207)287-5672 FAX (207)287-3165

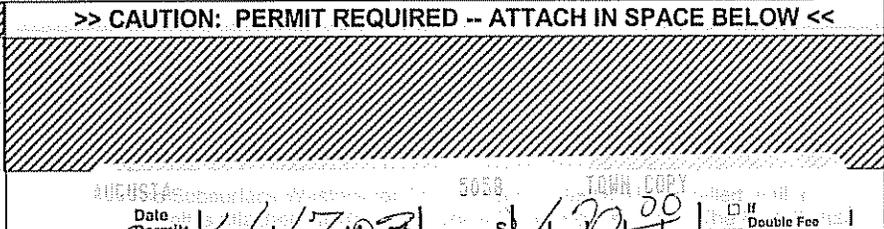
>> CAUTION: PERMIT REQUIRED -- ATTACH IN SPACE BELOW <<

PROPERTY LOCATION

City, Town, Plantation: **AUGUSTA**

Street or Road: **44 ALBEE ROAD**

Subdivision, Lot #:



OWNER/APPLICANT INFORMATION

Name (last, first, MI): **NICHOLS, JOHN**

Owner
 Applicant

AUGUSTA 5030 TOWN COPY

Date Permit Issued: **4/7/03**

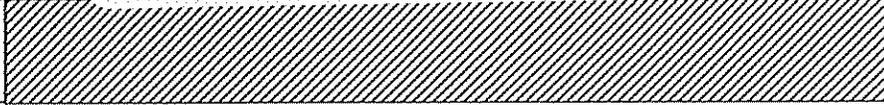
Local Plumbing Inspector Signature: *[Signature]*

L.P.I. #: **1800**

Double Fee Charged

Mailing Address of Owner/Applicant:

229 CAT MOUSAM ROAD
KENNEBUNK, ME 04043



Daytime Tel. #: **985-6058**

Municipal Tax Map # **71** Lot # **20**

OWNER OR APPLICANT 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.

Signature of Owner/Applicant: *[Signature]* Date: **4/4/03**

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: *[Signature]* (1st) Date Approved: **4/30/03**
(2nd) Date Approved:

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
 2. Replacement System
Type replaced **DRYWELL**
Year installed **UNKNOWN**

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. Pretreatment, specify: _____
 12. Miscellaneous Components

SIZE OF PROPERTY

0.46 sq. ft. acres

SHORELAND ZONING

Yes No

DISPOSAL SYSTEM TO SERVE:

1. Single Family Dwelling Unit, No. of Bedrooms: **2**
 2. Multiple Family Dwelling Unit, No. of Units: _____
 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
 a. Regular
 b. Low Profile
 2. Plastic
 3. Other **ONE-PIECE**

CAPACITY **1000** 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 **768** 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

180 gallons per day

BASED ON:

1. Table 501.1 (dwelling unit(s))
 2. Table 501.2 (other facilities)

SHOW CALCULATIONS -for other facilities-

3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN **8 / D / 3**

at Observation Hole # **TP-1**
Depth **10**"
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 or experimental systems

DOSE _____ gallons

SITE EVALUATOR'S STATEMENT

I certify that on **4/02/03** (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).

Signature: *[Signature]*
Site Evaluator Signature

WILLIAM P BROWN
Site Evaluator Name Printed

188
SE#

293-2110
Telephone #

4/03/2003
Date

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

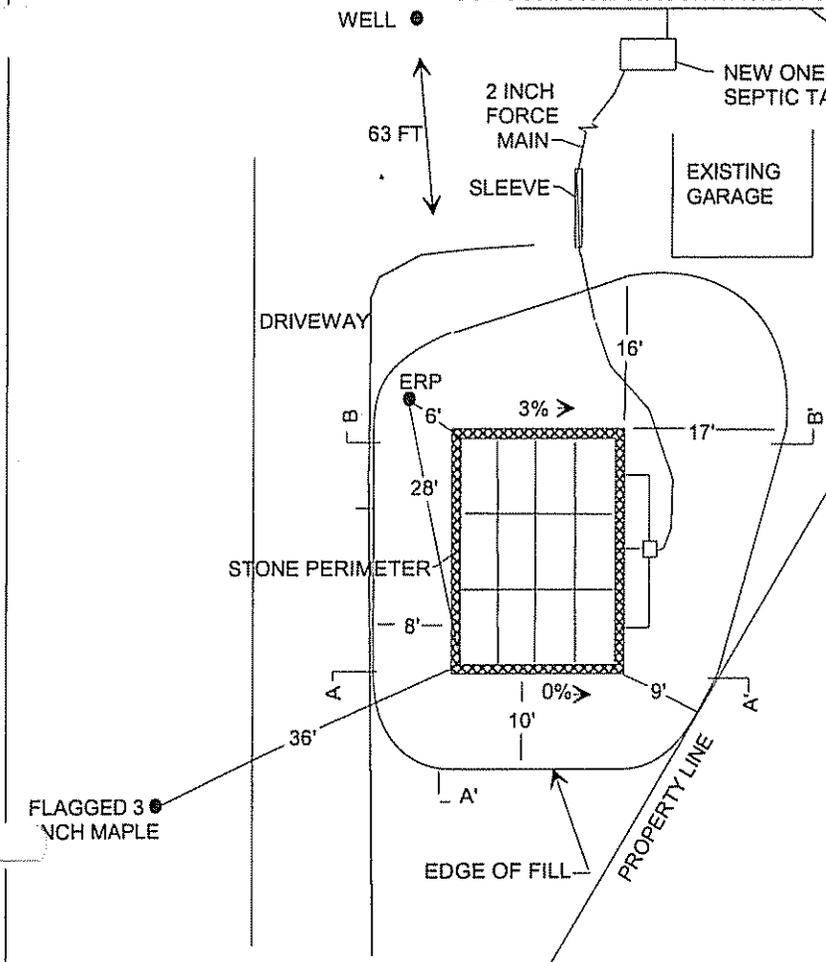
AUGUSTA

ALBEE ROAD

JOHN NICHOLS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



- USE 12- 4' X 8' CONCRETE CHAMBERS WITH SIDE ENTRY DISTRIBUTION PIPING
- EXTEND ONE FOOT WIDE PERIMETER OF CRUSHED STONE AROUND THE CHAMBERS
- MEASUREMENTS ARE TO EDGE OF CONCRETE CHAMBERS FOR LAYOUT PURPOSES. MEASUREMENTS FOR SETBACKS ARE FROM OUTSIDE EDGE OF STONE PERIMETER
- REDUCE SLOPE TO 3:1 NEAR DRIVEWAY AND NEAR PROPERTY LINE TO MAINTAIN FILL ON PROPERTY
- REMOVE EXISTING TANK AND INSTALL NEW ONE-PIECE COMBINATION SEPTIC TANK / LIFT STATION AT LEAST 25 FEET FROM OWNER'S WELL
- PROTECT FORCE MAIN FROM FREEZING
- SLEEVE FORCE MAIN INSIDE LARGER DIAMETER PVC PIPE UNDER DRIVEWAY AREA

FILL REQUIREMENTS

Depth of Fill (Upslope) **32-34"**
 Depth of Fill (Downslope) **32-40"**
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finish Grade Elevation **VARIES**
 Top of distribution Lines or Chambers **-20"**
 Bottom of Disposal Area **-33"**

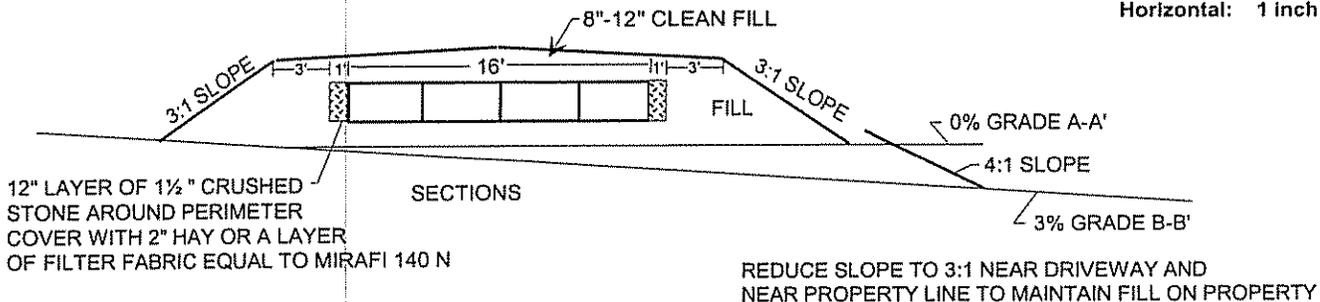
ELEVATION REFERENCE POINT

Location and Description:
FLAGGED NAIL IN POWER POLE, 4 FT ABOVE GROUND
 Reference Elevation is: **00"**

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.
 Horizontal: 1 inch = 10 Ft.



- REMOVE VEGETATION IN DISPOSAL AREA
- SCARIFY ENTIRE FILL AREA
- MIX 4 INCHES OF FILL MATERIAL THOROUGHLY WITH EXISTING SOIL TO FORM TRANSITION ZONE (ACCORDING TO CHAPTER 8, PLUMBING CODE)
- FILL SHALL BE GRAVELLY COARSE SAND
- PLACE 12 INCH PERIMETER OF CRUSHED STONE AROUND ENTIRE CONCRETE SYSTEM
- INSTALL ALL CHAMBERS PER MANUFACTURER'S INSTRUCTIONS
- CROWN FINISH GRADE FROM CENTER AT 3%
- LOAM, SEED, MULCH

REDUCE SLOPE TO 3:1 NEAR DRIVEWAY AND NEAR PROPERTY LINE TO MAINTAIN FILL ON PROPERTY

COVER TOP SEAMS BETWEEN CONCRETE CHAMBERS WITH HAY OR FABRIC

WILLIAM P BROWN

Site Evaluator Signature

188
SE #

4/3/2003
Date

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HHE-200 Rev. 10/02

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
Soil Profile	Ground Water Table			to 7"			10 inches	
Soil Condition from HHE-200	Restrictive Layer			to 7"			inches	
	Bedrock			to 12"			inches	
SETBACK DISTANCES (in feet)	Disposal Fields (total design flow)			Septic Tanks (total design flow)			Disposal Fields	Septic Tanks
from	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water supply wells	300 ft	300 ft	300 ft	100 ft	100 ft	100 ft		
Owner's wells	100 down to 60 ft [a]	200 down to 100 ft	300 down to 150 ft	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	63'	25'
Neighbor's wells	100 down to 60 ft [f]	200 down to 120 ft [f]	300 down to 180 ft [f]	100 down to 50 ft [f]	100 down to 75 ft [f]	100 down to 75 ft [f]		
Water supply line	10 ft [h]	20 ft [h]	25 ft [h]	10 ft [h]	10 ft [h]	10 ft [h]		
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft [d]	200 down to 120 ft [d]	100 down to 180 ft [d]	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft		
Water course, minor	50 down to 25 ft [e]	100 down to 50 ft [e]	150 down to 75 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft		
Edge of fill extension -- Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]		
Slopes greater than 3:1	10 ft [g]	18 ft [g]	25 ft [g]	N/A	N/A	N/A		
No full basement (e.g. slab, frost wall, columns)	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		5'
Full basement (below grade foundation)	20 down to 10 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		
Property lines	10 down to 5 ft [c]	18 down to 9 ft [c]	20 down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 down to 10 ft [c]	9'	
Burial sites or graveyards, measured from the downhill toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft		

OTHER

1. **REDUCE FILL EXTENSION TO LESS THAN 4 TO 1 NEAR DRIVEWAY AND NEAR PROPERTY LINE**

2. _____

3. _____

Footnotes: [a] Single-family well setbacks may be reduced as prescribed in Section 701.2
 [b] This distance may be reduced to 25 feet, if the septic tank or holding tank is tested in the plumbing inspector's presence and shown to be watertight or of monolithic construction.
 [c] Additional setbacks may be needed to prevent fill material extensions from encroaching on abutting property.
 [d] Additional setbacks may be required by local Shoreland zoning.
 [e] Natural Resources Protection Act requires a 25 foot setback on slopes of less than 20%, from the edge of soil disturbance and 100 feet on slopes greater than 20%. See Chapter 15.
 [f] May not be any closer to neighbor's well than the existing disposal field or septic tank unless written permission is granted by the neighbor. This setback may be reduced for single family houses with Department approval. See Section 702.3.
 [g] The fill extension shall reach the existing ground before the 3:1 slope or within 100 feet of the disposal field.
 [h] See Section 1402.10 for special procedures when these minimum setbacks cannot be achieved.

WILLIAM P BROWN *William P Brown*

 SITE EVALUATOR'S SIGNATURE

4/3/2003

 DATE

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (does does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

 SIGNATURE OF THE DEPARTMENT

 DATE