PIF 10/6/16

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-4172

## PROPERTY LOCATION

| | |
|---|---|
| City, Town, or Plantation | AUGUSTA |
| Street or Road | 159/166 YOUNG ROAD |
| Subdivision, Lot # | M72/L48 |

AUGUSTA PERMIT #7291 TOWN COPY [ ]
Date Permit Issued: 10/5/16 $ 250.00 fee
15.00
LPI # 850 tate

## OWNER/APPLICANT INFORMATION

| | |
|---|---|
| Name (last, first, MI) | PARKER STEVEN ■ Owner ☐ Applicant |
| Mailing Address of Owner/Applicant | 320 RIVERSIDE DR. AUGUSTA, ME 04330 |
| Daytime Tel. # | 485-2128 |

Municipal Tax Map # 72 Lot # 13

**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.
Signature of Owner or Applicant — Date 10-5-16

**CAUTION: INSPECTION REQUIRED**
I have inspected the installation authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.
(1st) date approved
Local Plumbing Inspector Signature — (2nd) date approved

## PERMIT INFORMATION

**TYPE OF APPLICATION**
- ■ 1. First Time System
- ☐ 2. Replacement System
  - Type replaced: ____
  - Year installed: ____
- ☐ 3. Expanded System
  - ☐ a. <25% Expansion
  - ☐ b. ≥25% 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 ± ☐ SQ. FT. ■ ACRES

**SHORELAND ZONING**
☐ Yes ■ No

**DISPOSAL SYSTEM TO SERVE**
- ■ 1. Single Family Dwelling Unit, No. of Bedrooms: 3
- ☐ 2. Multiple Family Dwelling, 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: ____
- CAPACITY: 1,000 GAL. MIN.

**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: ELJEN GSF (24)
- SIZE: 288 ■ 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**
270 gallons per day
BASED ON:
- ■ 1. Table 4A (dwelling unit(s))
- ☐ 2. Table 4C(other facilities)
  SHOW CALCULATIONS for other facilites
- ☐ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

**SOIL DATA & DESIGN CLASS**
PROFILE CONDITION
1 / C
at Observation Hole # TP
Depth 18"
of Most Limiting Soil Factor

**DISPOSAL FIELD SIZING**
- ☐ 1. Medium---2.6 sq. ft. / gpd
- ☐ 2. Medium---Large 3.3 sq. f.t / gpd
- ■ 3. Large---4.1 sq. ft. / gpd
- ☐ 4. 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: ± 15 gallons

**LATITUDE AND LONGITUDE**
at center of disposal area
Lat. 44 d 19 m 49.5 s
Lon. 69 d 39 m 47.7 s
if g.p.s, state margin of error: ± 10'

## SITE EVALUATOR STATEMENT

I certify that on 6-30-16 (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).

| | | |
|---|---|---|
| Mark A. Truman | 121 | 7-5-16 |
| Site Evaluator Signature | SE # | Date |
| MARK A. TRUMAN | 207-229-7482 | MARKATRUMAN@MAINESITEEVALUATIONS.COM |
| Site Evaluator Name Printed | Telephone Number | E-mail Address |

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

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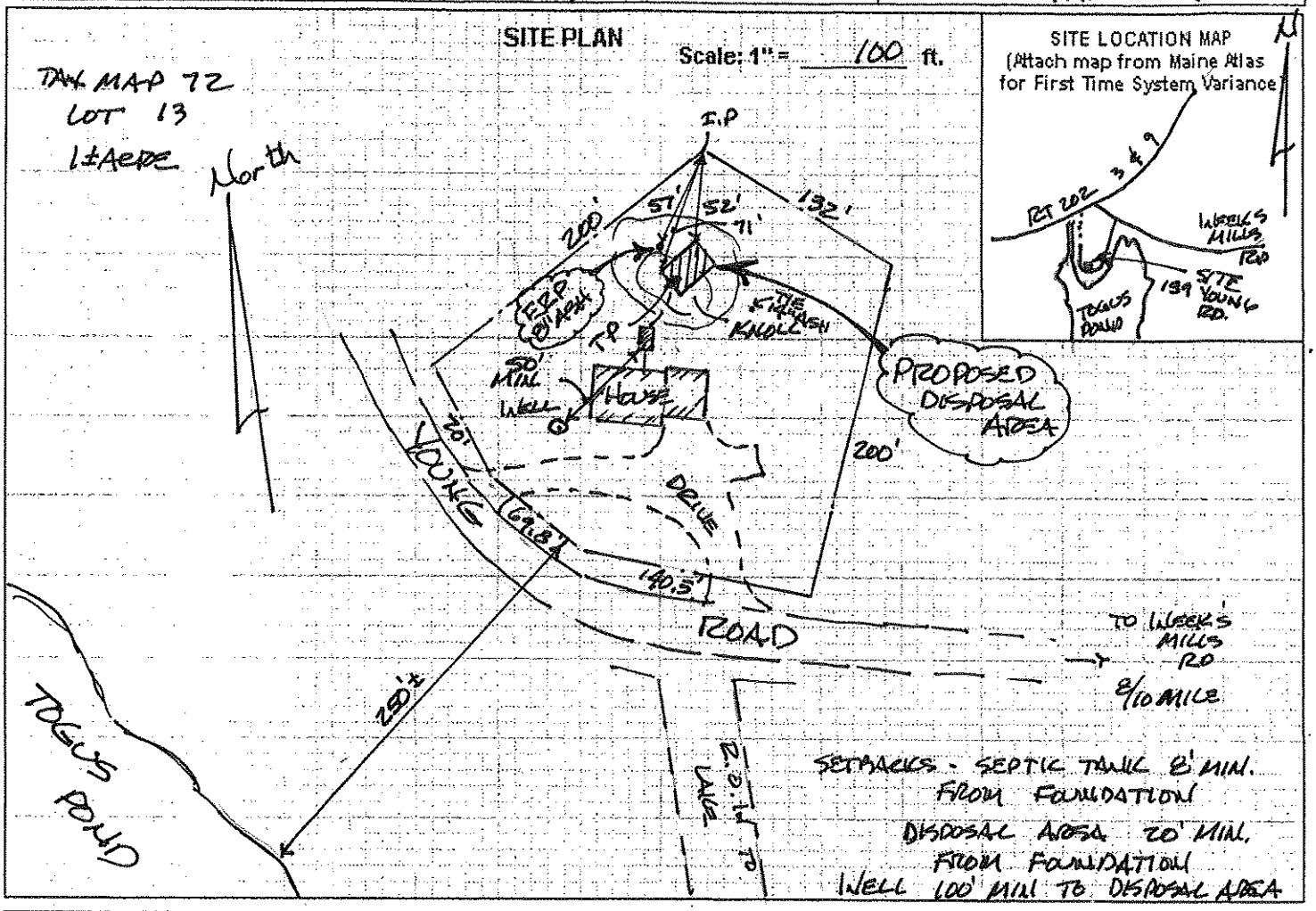
|---|---|---|
| AUGUSTA | 159 YOUNG ROAD | STEVEN PARKER |

## SITE PLAN

Scale: 1" = 100 ft.




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

Observation Hole # TP ■ Test Pit ☐ Boring

2" Depth of organic horizon above mineral soil

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–6 | LOAM | | DARK BROWN | |
| 6–12 | SILT LOAM | FRIABLE | OLIVE | |
| 12–18 | + GRAVEL | | BROWN | |
| 18–24 | VERY | FIRM | | FEW |
| 24–30 | GRAVELLY | | LIGHT | |
| 30–36 | LOAMY | | YELLOW | |
| 36–42 | SAND | | BROWN | |
| 42–48 | SILTY | | | |

| Soil Profile | Classification Condition | Slope Percent | Limiting Factor Depth | |
|---|---|---|---|---|
| 1 | C | 4 | 18 | ■ Groundwater ■ Restrictive Layer ☐ Bedrock |

Observation Hole # _____ ☐ Test Pit ☐ Boring

_____" Depth of organic horizon above mineral soil

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–6 | | | | |
| 6–12 | | | | |
| 12–18 | | | | |
| 18–24 | | | | |
| 24–30 | | | | |
| 30–36 | | | | |
| 36–42 | | | | |
| 42–48 | | | | |

| Soil Profile | Classification Condition | Slope Percent | Limiting Factor Depth | |
|---|---|---|---|---|
| | | | | ☐ Groundwater ☐ Restrictive Layer ☐ Bedrock |

Mark A Tolman
Site Evaluator Signature

121
SE #

Date

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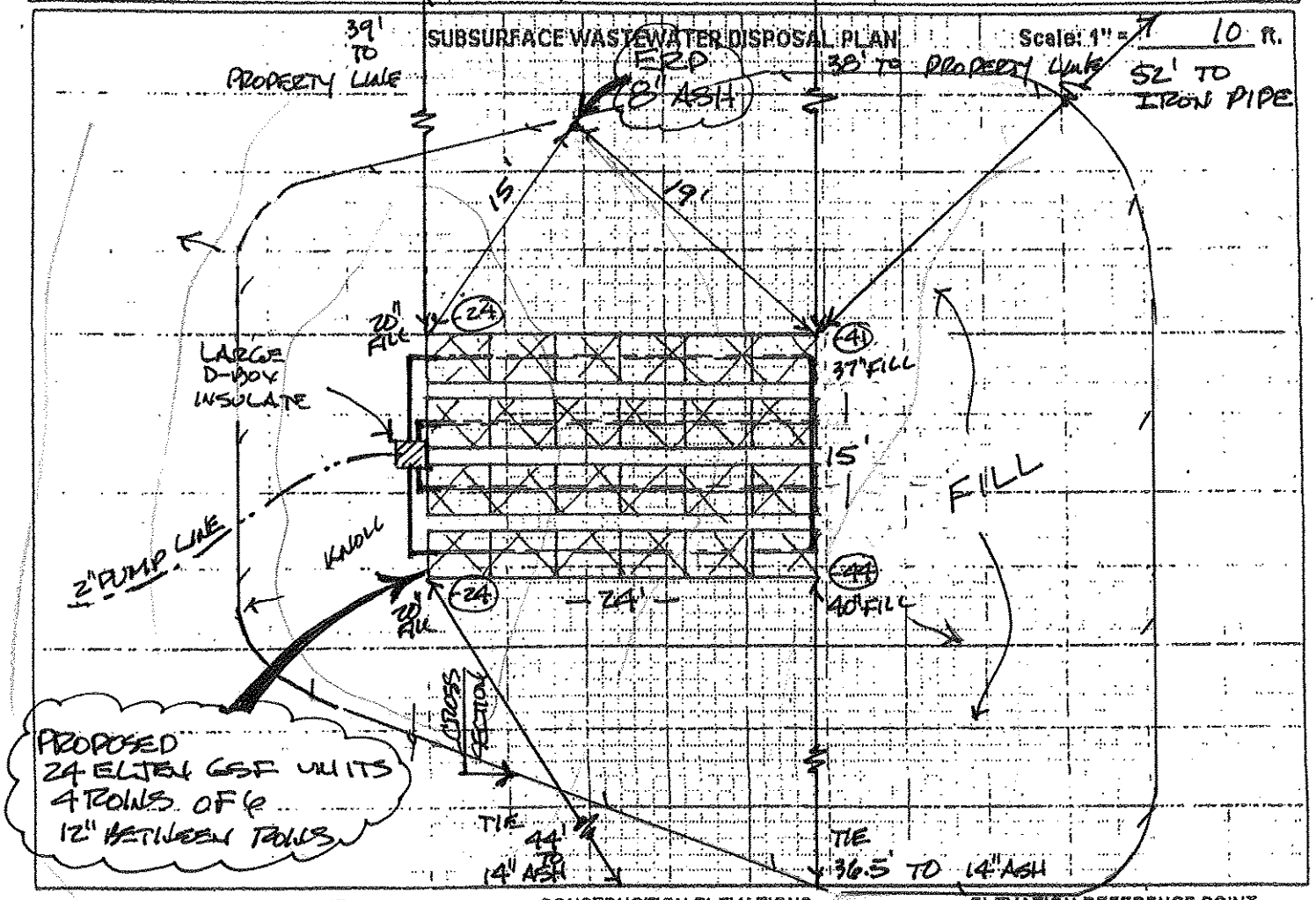
## SUBSURFACE WASTEWATER DISPOSAL PLAN

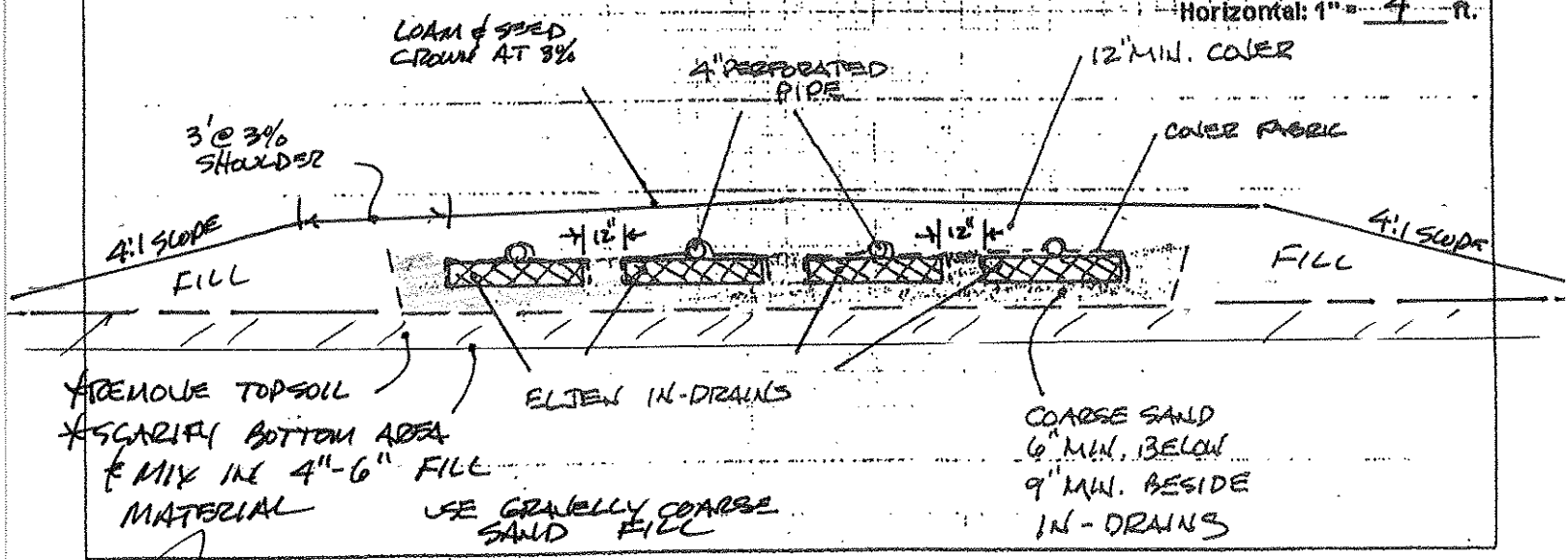
Scale: 1" = 10 ft.




| BACKFILL REQUIREMENTS | | CONSTRUCTION ELEVATIONS | | ELEVATION REFERENCE POINT |
|---|---|---|---|---|
| Depth of Backfill (upslope) | 20" | Finished Grade Elevation MIN. | -4" | Location & Description: NAIL IN 8" ASH |
| Depth of Backfill (downslope) | 40" | Top of Distribution Pipe or Proprietary Device | -13" | +27" BASE OF TREE |
| DEPTHS AT CROSS-SECTION (shown below) | | Bottom of Disposal Field (ELJENS) | -24" | Reference Elevation is: 0.0" ft. |

## DISPOSAL FIELD CROSS-SECTION

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




Mark A Tolman — Site Evaluator Signature
121 — SE #
7-5-16 — Date