

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5872 FAX (207) 287-4172

Called 8/13
Self message

PROPERTY LOCATION		>> Caution: Permit Required -- Attach in Space Below <<	
City, Town, or Plantation	AUGUSTA		
Street or Road	315 CIVIL CENTER DRIVE		
Subdivision, Lot #	AUGUSTA Date Permit Issued: 8/30/04 5365 TOWN COPY \$ 175.00 <input type="checkbox"/> Double Fee Charged		
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	DUPLESSIS, GERRY <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant		
Mailing Address of <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	315 CIVIL CENTER DRIVE AUGUSTA ME 04330		
Daytime Tel. #	623-2250 425-2090 Municipal Tax Map # 79 Lot # 6		
Owner or Applicant Statement		Caution: Inspection Required	
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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant: <u>Gerry Duplessis</u> Date: <u>8/30/04</u>		Local Plumbing Inspector Signature: <u>Gary R. Kull</u> (1st) Date Approved: <u>12/15/04</u> (2nd) Date Approved: <u>12/17/04</u>	

PERMIT INFORMATION			
TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENT(S)	
1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>UNK</u> Year Installed: <u>UNK</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion Approval	1. <input type="checkbox"/> Complete Non-engineered System 2. <input type="checkbox"/> Primitive System (graywater & alternative toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, capacity: _____ gallons 6. <input checked="" type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd or more) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components	
SIZE OF PROPERTY	DISPOSAL SYSTEM TO SERVE		
<u>4</u> - 25,000 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> acres	1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY _____		
SHORELAND ZONING	TYPE OF WATER SUPPLY		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
1. <input checked="" type="checkbox"/> Concrete <u>USE EXISTING</u> a. <input checked="" type="checkbox"/> Regular <u>IF POSSIBLE</u> b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY: <u>1,200</u> gallons	1. <input checked="" type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input type="checkbox"/> Linear b. <input type="checkbox"/> Regular load d. <input type="checkbox"/> H-20 Load 4. <input type="checkbox"/> Other: _____ SIZE: <u>900</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe >> If yes/maybe, specify one below: a. <input type="checkbox"/> Multi-Compartment Tank b. <input type="checkbox"/> Tanks in Series c. <input type="checkbox"/> Increase in Tank Capacity d. <input type="checkbox"/> Filter on Tank Outlet	<u>270</u> gallons-per-day (gpd) BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS -- for other facilities --
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	ATTACH WATER-METER DATA
PROFILE CONDITION DESIGN <u>7</u> • <u>C</u> • <u>1</u> at Observation Hole # <u>1</u> Depth <u>20</u> • Elevation <u>-59</u> • OF MOST LIMITING SOIL FACTOR	1. <input type="checkbox"/> Small -- 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium -- 2.6 sq. ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large -- 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large -- 4.1 sq. ft./gpd 5. <input type="checkbox"/> Extra Large -- 5.0 sq. ft./gpd	1. <input type="checkbox"/> Not Required 2. <input checked="" type="checkbox"/> May Be Required 3. <input type="checkbox"/> Required >> Specify dose for engineered & experimental systems DOSE: _____ gallons	

SITE EVALUATOR STATEMENT	
I certify that on <u>9 AUG 04</u> (date) I completed a site evaluation on this property and state that the data reported herein are accurate and that the proposed system is in compliance with the Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241). Signature: <u>Stephen P. Robbins</u> Site Evaluator Signature	301 SE# Date: <u>26 AUG 04</u>

Stephen P. Robbins
P.O. Box 271
East Winthrop, ME 04343
 Site Evaluator name printed

377-6707
 Telephone#

narrowspd@aol.com
 E-Mail Address

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
CS071 287-2572 FAX CS071 287-4172

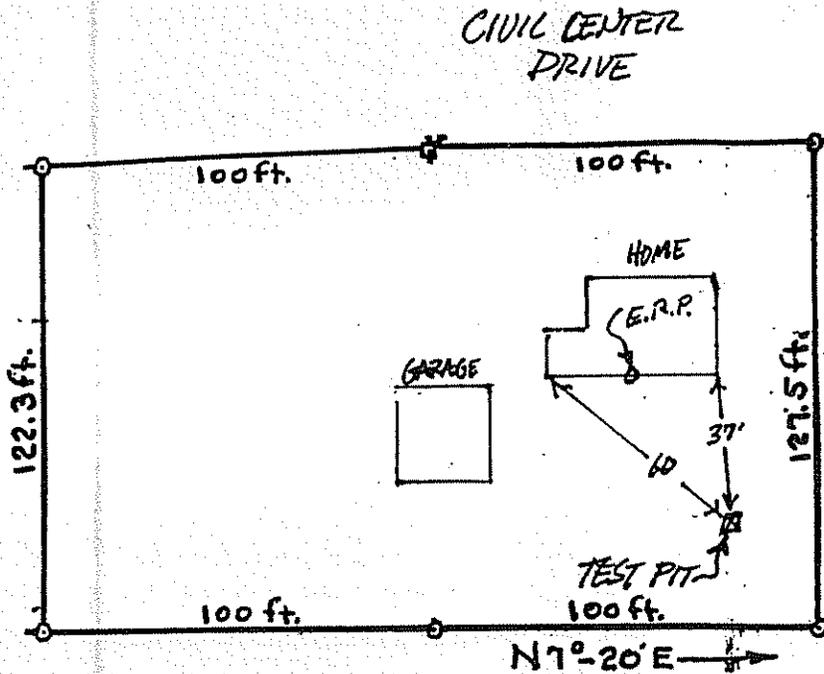
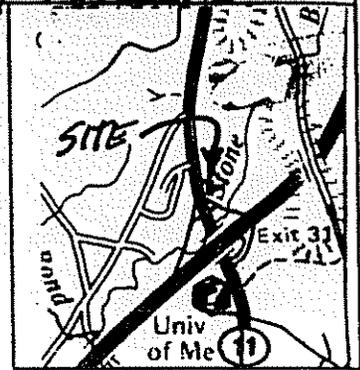
Town, City, Plantation
AUGUSTA

Street, Road Subdivision
315 CIVIC CENTER DRIVE

Owner's Name
GERTLY DUPRESSIS

SITE PLAN

Scale **1" = 50 Ft.**
or as shown



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

Observation Hole F1 Test Pit Boring
2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	LOAM LOAMY SAND	VERY FRAGILE	BROWN YELLOW BROWN	
10	SAND			
20			GRAY	ASSUMED
30				
40	SANDY SILT	FIRM		
50				

Soil Classification: **7** Profile, **C** Condition
Slope: **3-7** %
Limiting Factor: **20"**
 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

Steph P. Dubois
Site Evaluator Signature

301
SE

26 AUG 04
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 FAX (207) 287-4172

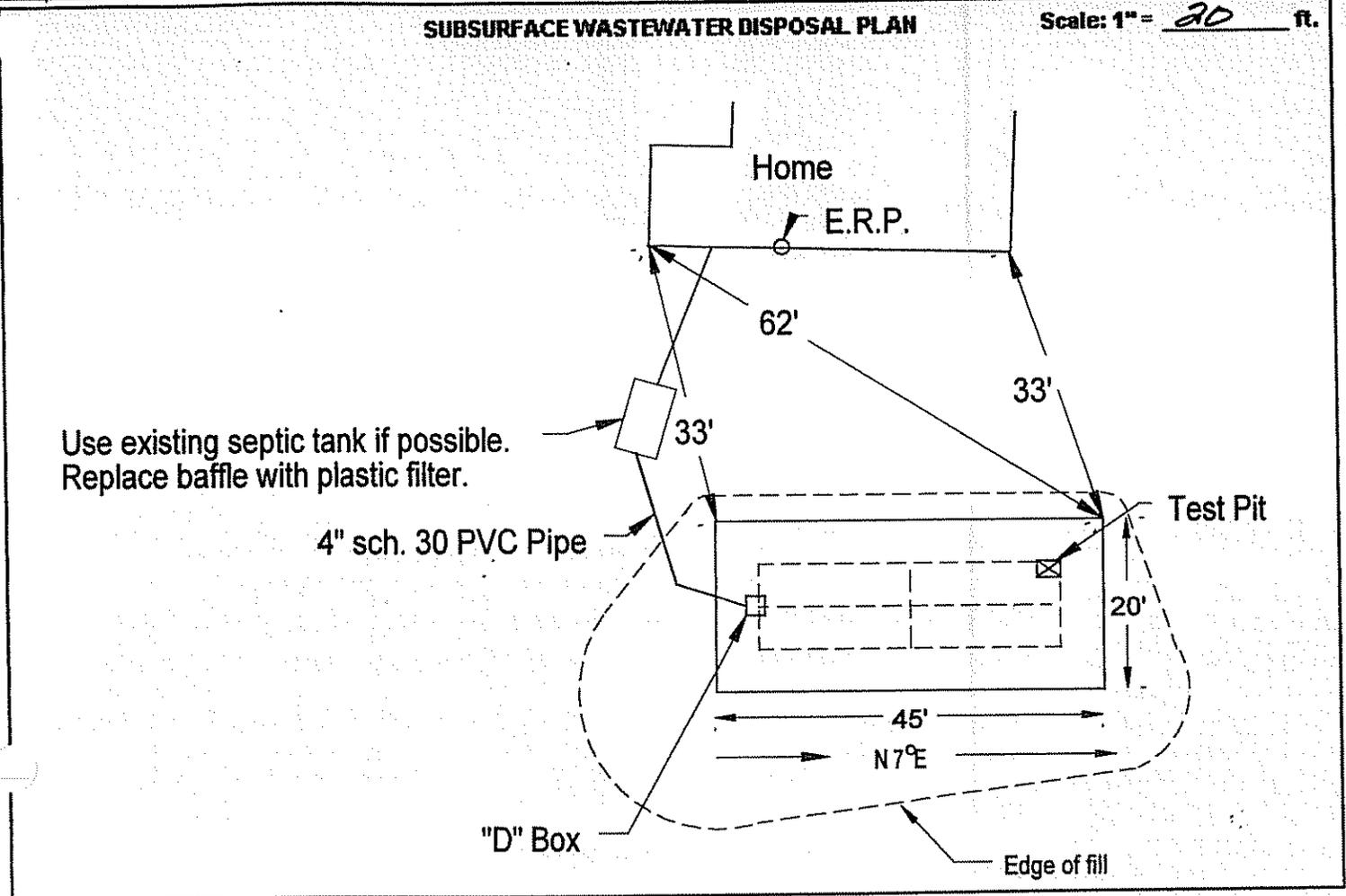
Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
315 CIVIL CENTER DRIVE

Owner or Applicant Name
GERRY DUPLESSIS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS

Depth of Backfill (upslope) 16-22"
 Depth of Backfill (downslope) 24-39"
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation -23"
 Top of Distribution Pipe or Proprietary Device -36"
 Bottom of Disposal Field -47"

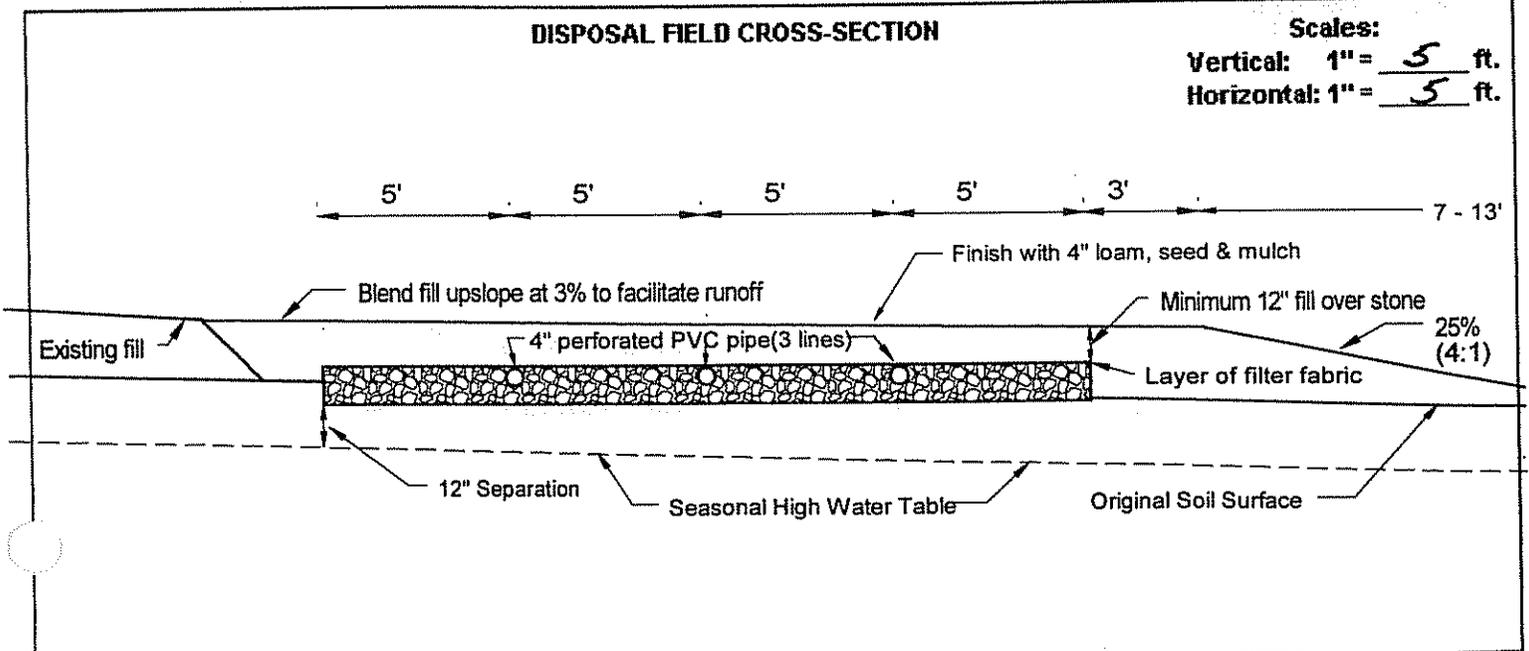
ELEVATION REFERENCE POINT

Location & Description: TOP OF CONCRETE BELOW CELLAR WINDOW
 Reference Elevation is: 0.0" or: _____

DISPOSAL FIELD CROSS-SECTION

Scales:

Vertical: 1" = 5 ft.
 Horizontal: 1" = 5 ft.



Steph L. P. Plumber

S.E. #301

26 AUG 04

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Town

Address

Owner

AUGUSTA

315 CIVIC CENTER DRIVE
ATTACHMENT TO HHE-200

GERRY DUPRESSIS

notes:

1. Construction to conform with "State of Maine Subsurface Wastewater Disposal Rules".
2. Property lines shown are as provided by owner, agent, or municipality. No guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
3. Remove organic material and scarify/rototill/furrow area under drainfield and fill extensions.
4. Unless otherwise specified, all fill will be coarse sand to a gravelly coarse sand. See Sec. 804.0 in the Maine State Plumbing Code for further clarification of fill requirements. In 8" lifts, compacted as placed. First lift to be thoroughly mixed with original soil.
5. Septic tanks and pump stations shall be installed watertight to prevent infiltration of ground and surface water.
6. Force mains, pump stations, and or gravity piping subject to freezing shall be adequately insulated.
7. Unless otherwise specified, **septic tank** to be located by contractor; at minimum; 8' to proposed or existing home and or buildings, 10' to property line & water supply line, 100' to all wells and shoreline. Owners well setback can be reduced to 75' if tested for water-tightness in presence of L.P.I. .
8. A septic tank outlet filter is recommended.
9. If replacement system with new tank, existing tank or cesspool to be filled with soil or removed. If existing tank is to be utilized, tank is to be thoroughly inspected for condition.
10. Unless otherwise specified, this plan does not allow the placement of pumps between the wastewater source and the septic tank.
11. Unless otherwise specified, disposal area to existing or proposed buildings setback is 20'.
12. Water from gutters, driveways, walks, and other surface water to be diverted away from system.
13. Loam, seed and mulch all disturbed areas to prevent erosion and facilitate runoff.
14. Unless otherwise specified, keep traffic heavier than lawn tractor away from all components of system.
15. Keep sanitary napkins, cigarette butts, coffee grounds, paper towels, grease, and nonbiodegradables out of system.
16. Many times it is impossible to locate water supplies. Property owner assumes responsibility of proper setback to any unknown water supplies.
17. Discharge from water treatment equipment and residential floor drains is not considered wastewater and must not be plumbed into septic system. This flow should be diverted into a separate drywell (Disposal area that does not require design or permit).
18. Plumbing fixtures must be strictly maintained to insure excess water does not enter septic system. Excess water can lead to premature clogging and total failure of disposal area.
19. Venting of disposal area is not required, but can facilitate biological action in disposal area.
20. Pumped systems will be equipped with audible high water alarm, wired to separate circuit as pump.
21. If a BK2000 Waste-Water Management system or any other Norweco products are included in this design, the designer has a financial interest in the sale of these products. Owner is encouraged to research comparable products and make final choice. If owner chooses a competitors product, design will be revised to note said change at no charge.
22. Take 3 copies of the plan to your local plumbing inspector for required permit.

Stephen P. Robbins

S.E.#301

Date 26 AUG 04

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S. R.