M81 L17A

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	MIDDLE RD

PROPERTY OWNERS NAME

Last DAUTEUIL First GREG

Applicant Name	
Mailing Address of Owner/Applicant (If Different)	187 NORTHERN AVE AUGUSTA, ME 04330

OK FOR PERMIT

AUGUSTA PERMIT # 427 TOWN COPY

Date Permit Issued: 4 18 85 $ 40.00 FEE ☐ If Double Fee Charged

Robert B St Pierre L.P.I. # 616

Local Plumbing Inspector Signature

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

Robert S St Pierre 4/17/85

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. [X] NEW SYSTEM
2. [ ] REPLACEMENT SYSTEM
3. [ ] EXPANDED SYSTEM
4. [ ] SEASONAL CONVERSION
5. [ ] EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. [X] NO RULE VARIANCE REQUIRED
2. [ ] NEW SYSTEM VARIANCE Attach New System Variance Form
   [ ] REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. [ ] Requires only Local Plumbing Inspector Approval
   4. [ ] Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS

COMPLETE SYSTEM

1. [X] NON-ENGINEERED SYSTEM
2. [ ] PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. [ ] ENGINEERED (< 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS

4. [ ] TREATMENT TANK (ONLY)
5. [ ] HOLDING TANK
6. [ ] ALTERNATIVE TOILET (ONLY)
7. [ ] NON-ENGINEERED DISPOSAL AREA (ONLY)
8. [ ] ENGINEERED DISPOSAL AREA (ONLY)
9. [ ] SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

1. [ ] BED 3. [ ] TRENCH
2. [ ] CHAMBER 4. [ ] OTHER _____

DISPOSAL SYSTEM TO SERVE:

1. [X] SINGLE FAMILY DWELLING
2. [ ] MODULAR OR MOBILE HOME
3. [ ] MULTIPLE FAMILY DWELLING
4. [ ] OTHER _____ SPECIFY

SIZE OF PROPERTY 1/2 Act

ZONING

TYPE OF WATER SUPPLY DRILLED

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. [X] SEPTIC [ ] Regular [ ] Low Profile
2. [ ] AEROBIC

SIZE 1000 GALS

WATER CONSERVATION

1. [ ] NONE
2. [X] LOW VOLUME TOILET
3. [ ] SEPARATED LAUNDRY SYSTEM
4. [ ] ALTERNATIVE TOILET

SPECIFY _____

PUMPING

1. [X] 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.)

3 BEDROOM

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
4	C

DEPTH TO LIMITING FACTOR 29

SIZE RATINGS USED FOR DESIGN PURPOSES

1. [ ] SMALL
2. [X] MEDIUM
3. [ ] MEDIUM-LARGE
4. [ ] LARGE
5. [ ] EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. [X] BED _____ Sq Ft
2. [ ] CHAMBER _____ Sq Ft
   [ ] REGULAR [ ] H-20
3. [ ] TRENCH _____ Linear Ft
4. [ ] OTHER _____

DESIGN FLOW 300 (GALLONS DAY)

SITE EVALUATOR STATEMENT

[ ] SITE EVALUATION WAIVED BY LOCAL OPTION

On 2/25/85 (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.

Site Evaluator or Professional Engineer's Signature

#51 SE# PE#

2/26/85 Date

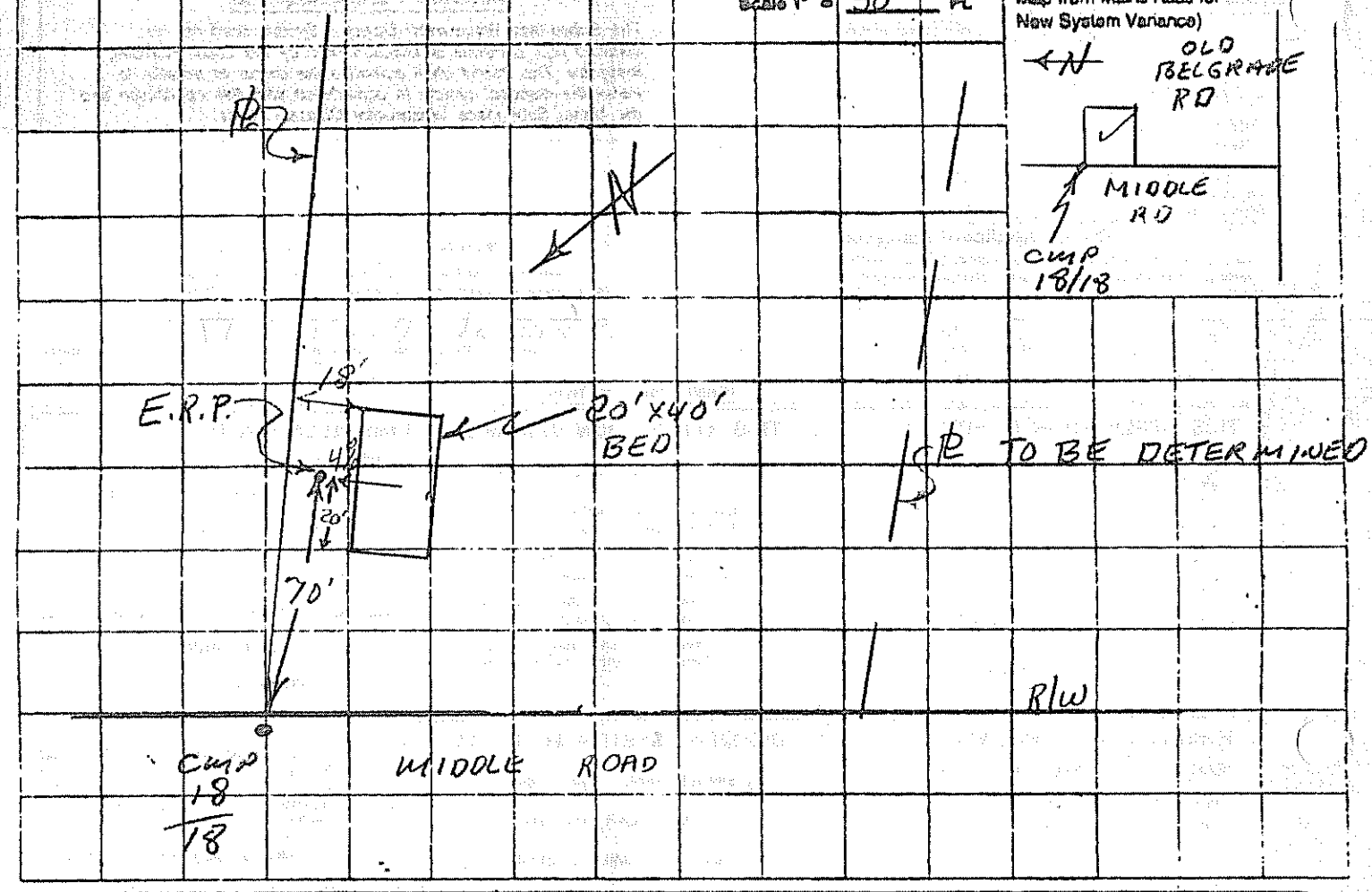
* Local Plumbing Inspector's Signature if a Local Site Evaluation Waiver under a Local Option

HHE - 200 Rev. 4/83

Town, City, Plantation | Street, Road, Subdivision | Owners Name

SITE PLAN

Scale 1" = 50 Ft.



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
0–8	L.S.	FRIABLE	B	8
8–29			Y.B	29
29–40			G.B.	40

Soil	Classification	Slope	Limiting Factor
4 (Profile)	C (Condition)	4 %	29 ☒ Ground Water ☐ 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
0–20				

Soil	Classification	Slope	Limiting Factor
		%	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

[signature] #51 2/26/85

Site Evaluator or Professional Engineer's Signature | SE # / PE # | Date

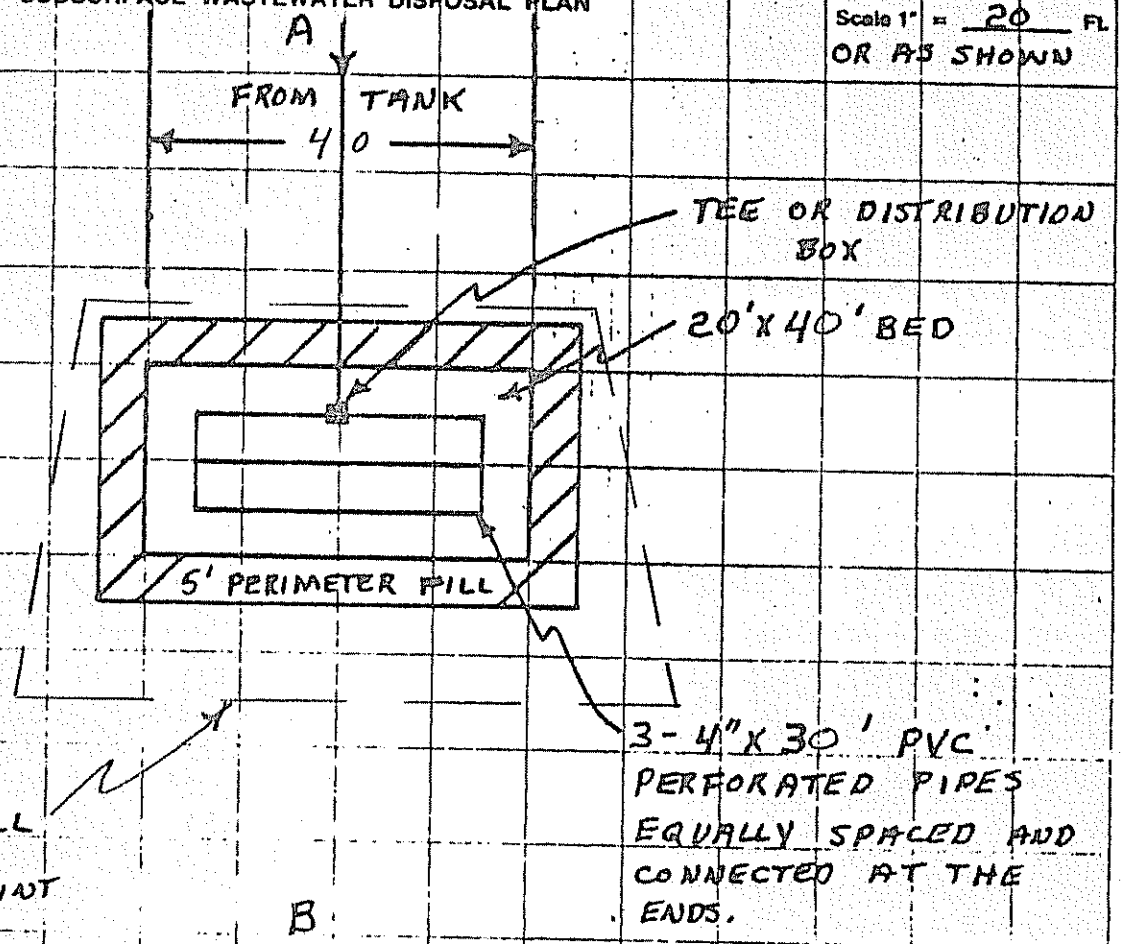
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	MIDDLE ROAD	DAUTEUIL

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft. OR AS SHOWN

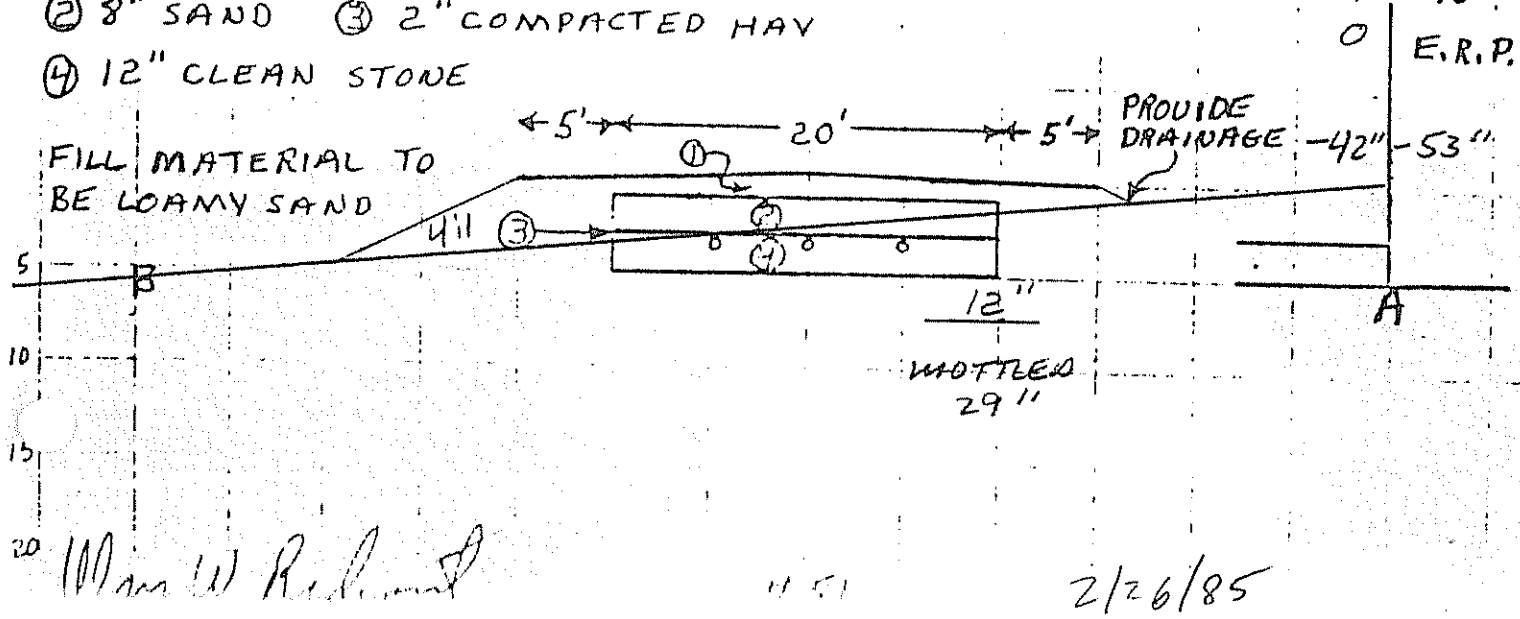


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	7	Reference Elevation is	0	NAIL IN 10" APPLE TREE
Depth of Fill (Downslope)	14±	Bottom of Disposal Area	-53"	
		Top of Distribution Lines or Chambers	-42"	

DISPOSAL AREA CROSS SECTION

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

① 3" TOPSOIL CROWNED @ 3%
② 8" SAND ③ 2" COMPACTED HAY
④ 12" CLEAN STONE



[signature]

2/26/85