SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering
(207)289-3826

622-6861 M81L/7

PROPERTY ADDRESS

Town Or Plantation: AUGUSTA

Street Subdivision Lot #: MIDDLE ROAD

PROPERTY OWNERS NAME

Last: DAUTEUIL First: GREG

Applicant Name:

Mailing Address of Owner/Applicant (If Different): R-3 B-861A AUGUSTA, ME 04330

AUGUSTA — Caution: Permit Required — PERMIT # 1,037 — TOWN COPY

Date Permit Issued: 5/26/87 — $ #40.00 FEE — ☐ If Double Fee Charged

Local Plumbing Inspector Signature: Gary R. Fuller — L.P.I. # 1850

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: 5/24/87

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: Gary R. Fuller — Date Approved: September 8 (1987)

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
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:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: ____

SIZE OF PROPERTY: 2 1/2 Ac

ZONING:

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
DRILLED

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC ☐ Regular ☐ Low Profile
2. ☐ AEROBIC
SIZE: 2-1500 G TANKS IN SERIES. 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.)
6 - 2 BEDROOM APARTMENTS @ 180 G/UNIT

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
5	C

DEPTH TO LIMITING FACTOR: 24.

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

DISPOSAL AREA TYPE/SIZE
1. ☐ BED ____ Sq. Ft.
*2. ☒ CHAMBER 1400 Sq. Ft.
☒ REGULAR ☐ H-20
3. ☐ TRENCH ____ Linear Ft.
4. ☐ OTHER: ____
* INFILTRATORS

DESIGN FLOW: 1080 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 4/13/87 (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 Signature — SE# 51 — Date 4/18/87

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

MAY 19 1987

Town, City, Plantation

...SPOSAL ...STEM ... LICATION

Street, Road, Subdivision

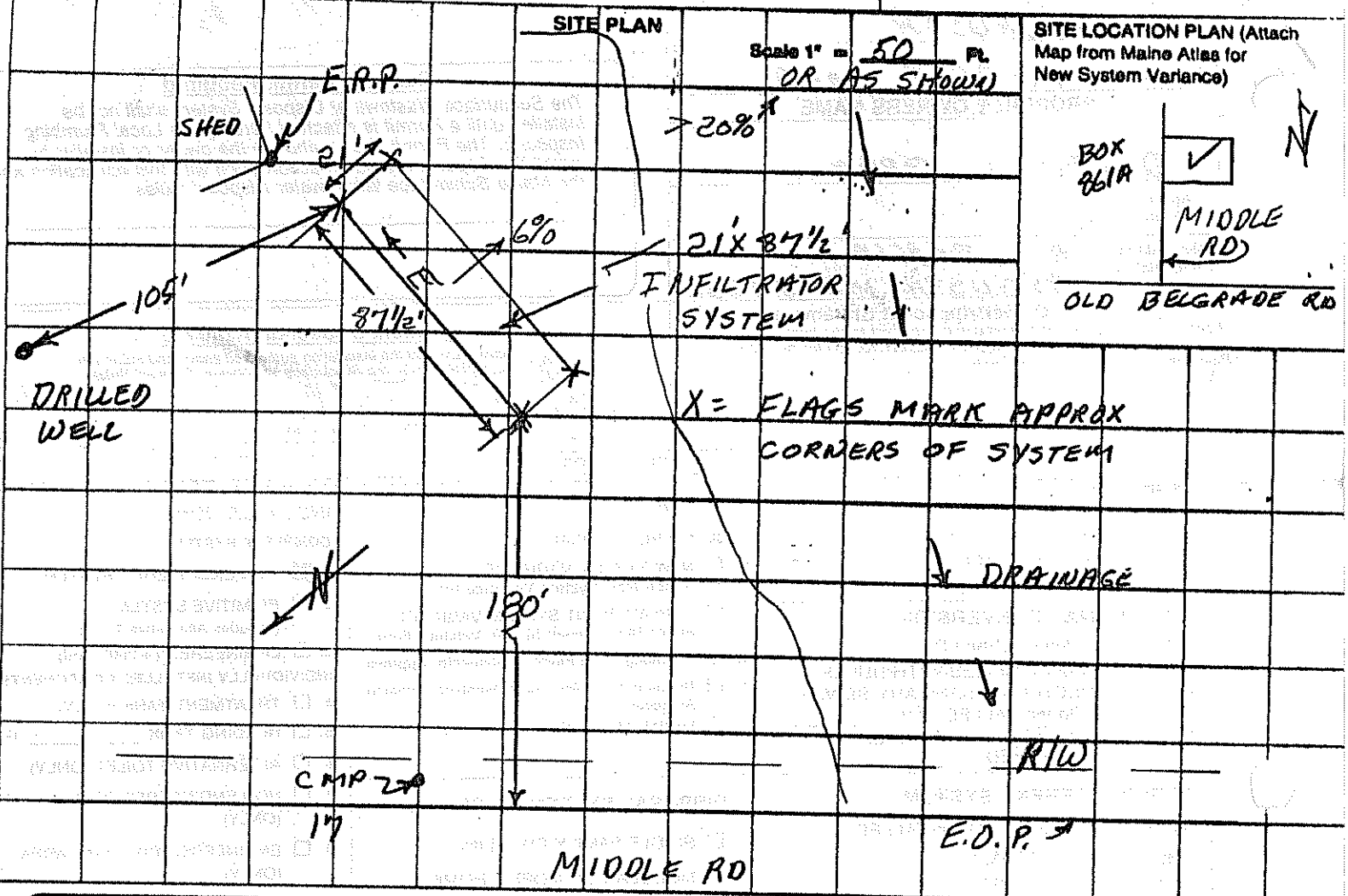
Division of Health Engineering

Owners Name

SITE PLAN

Scale 1" = 50 Ft. OR AS SHOWN

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



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

Observation Hole 1, 2, 3, 4+5 ☒ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (Inches)	Texture	Consistency	Color	Mottling
0–6	L.S.	FRIABLE	B	
6–24				24
24–50		FIRM	G.B.	

Soil	Classification	Slope	Limiting Factor	
5 (Profile)	C (Condition)	6 %	24	☒ 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
0–50				

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

[signature] #51 4/18/87

Site Evaluator or Professional Engineer's Signature ... PE# Date

HHE 200 Rev 4/83

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA

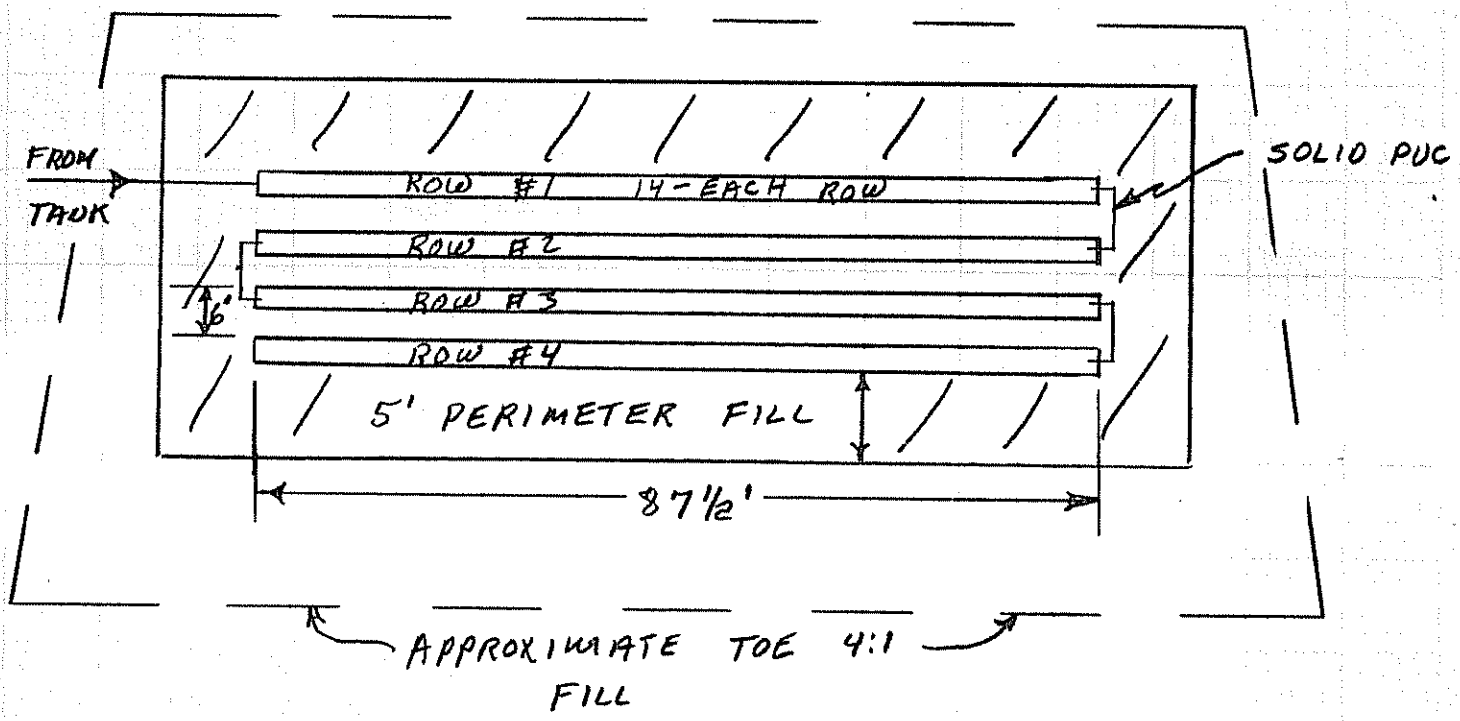
Street, Road, Subdivision: MIDDLE RD

Owners Name: DAUTEUIL

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

A



B

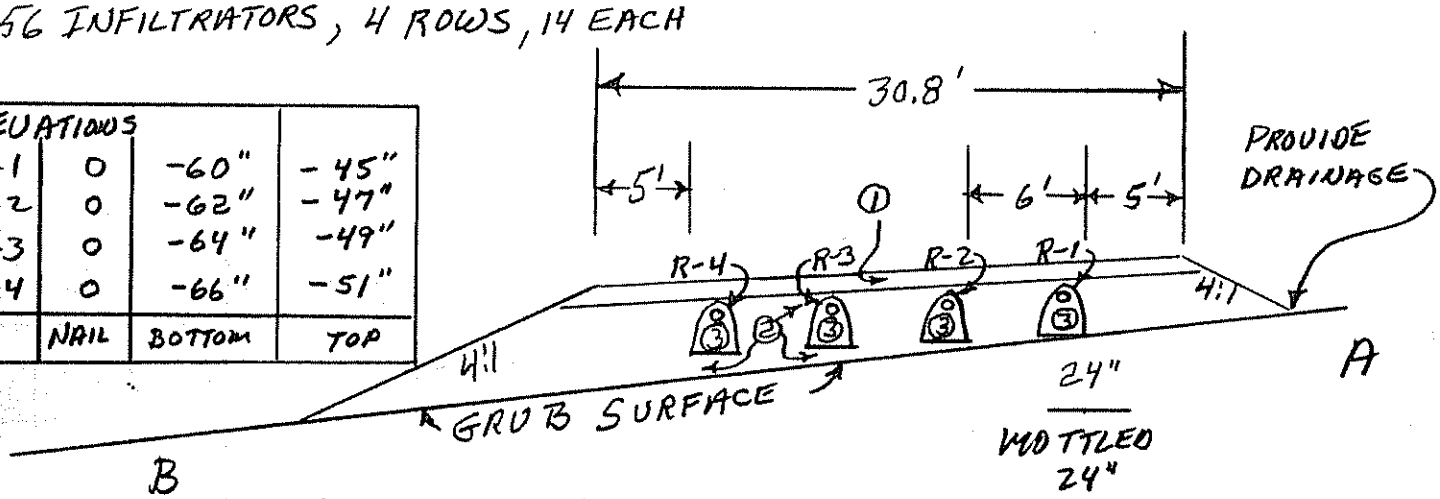
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	21"	Reference Elevation is ROW #1	0	NAIL IN CORNER OF SHED
Depth of Fill (Downslope)	34"	Bottom of Disposal Area	-60"	
		Top of Distribution Lines or Chambers	-45"	

DISPOSAL AREA CROSS SECTION

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

① 6" TOPSOIL
② SANDY GRAVEL FILL
③ 56 INFILTRATORS, 4 ROWS, 14 EACH

ELEVATIONS			
R-1	0	-60"	-45"
R-2	0	-62"	-47"
R-3	0	-64"	-49"
R-4	0	-66"	-51"
	NAIL	BOTTOM	TOP



Site Evaluator Signature: [signature]

SE#: 51

Date: 4/18/86