FORMS

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering HHSB
(207) 287 5672 Fax (207) 287 3165

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA

Street or Road: 77 OUTLET ROAD

Subdivision, Lot #:

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

AUGUSTA 5320 TOWN COPY

Date Permit Issued: 7/8/04 $100.00 FEE ☐ # Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI): BRUNELLE, ROBERT ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 223 OUTLET ROAD, AUGUSTA, ME 04330

Daytime Tel. #: 622-3906

Municipal Tax Map # 94 Lot # 39

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.

Robert Brunelle
Signature of Owner or 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 Application

See Rev Sed (1st) date approved

Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

☐ 1. First Time System
☒ 2. Replacement System
Type replaced: BED
Year installed: ?
☐ 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. Pre-treatment, specify: _____
☐ 12. Miscellaneous Components

SIZE OF PROPERTY

±5 ☐ 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

EXISTING
☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private
☐ 4. Public ☐ 5. Other

Amended 9/8/04 Sec Rec Sed

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

☒ 1. Concrete
☒ a. Regular
☐ b. Low Profile
☐ 2. Plastic
☐ 3. Other: _____
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: 1200 ☒ 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 501.1 (dwelling unit(s))
☐ 2. Table 501.2 (other facilities)
SHOW CALCULATIONS
— for other facilities —

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
B / C /
at Observation Hole # 1
Depth 16"
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 systems:
DOSE: _____ gallons

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

SITE EVALUATOR STATEMENT

I certify that on 6/23/04 (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).

Vaughn L. Smith
Site Evaluator Signature

226 SE #

7/1/04
Date

VAUGHN L. SMITH
Site Evaluator Name Printed

207-622-6235
Telephone Number

E-mail Address

STATE OF MAINE SMITH 226 SITE EVALUATOR

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

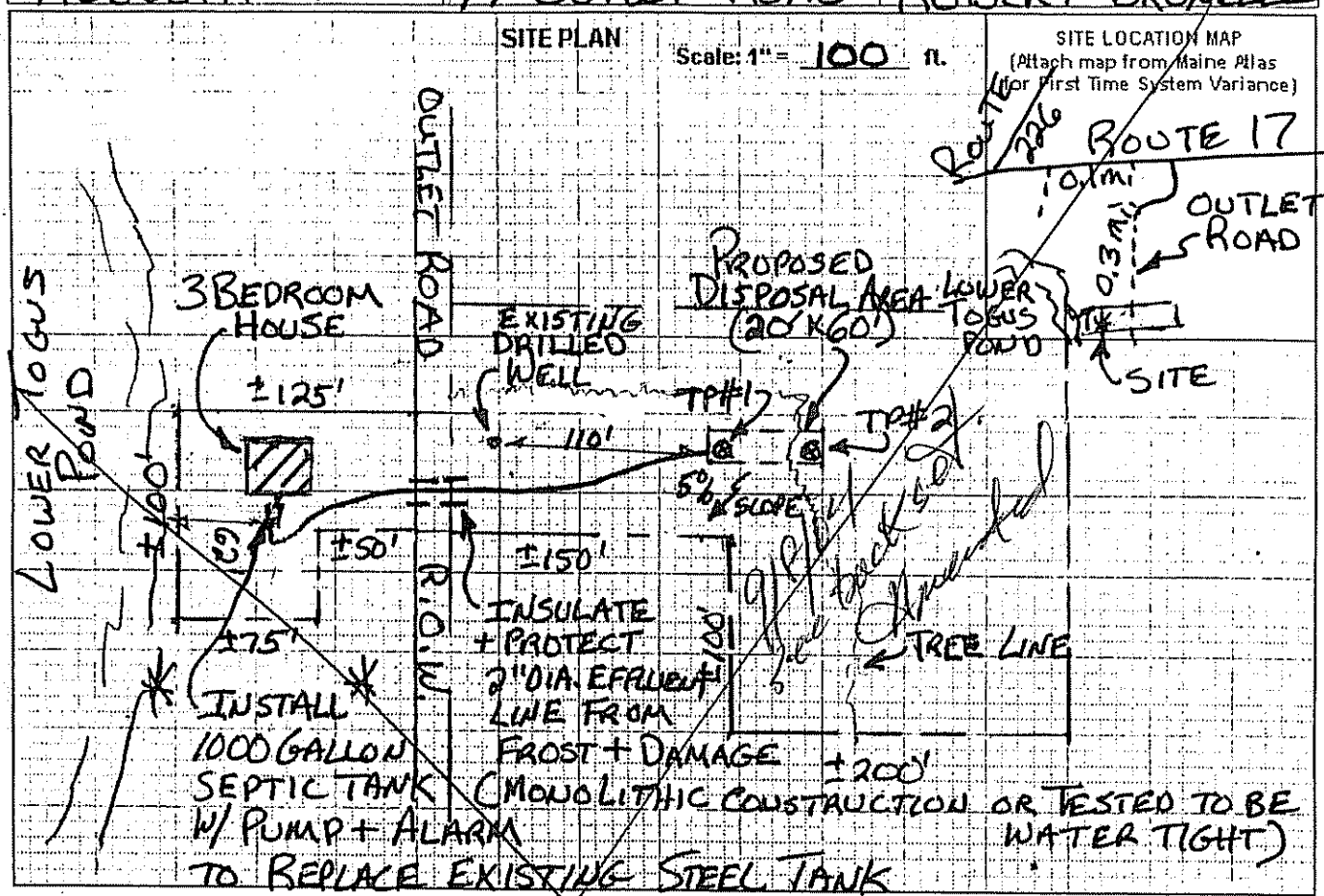
HHE-200 Rev. 8/01

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	77 OUTLET ROAD	ROBERT BRUNELLE

SITE PLAN Scale: 1" = 100 ft.



SITE LOCATION MAP
(Attach map from Maine Atlas for First Time System Variance)

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

Observation Hole # 1 ☒ Test Pit ☐ Boring

1" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	LOAM	FRIABLE	BROWN	NONE
6–18				
18–36		FIRM	OLIVE	FEW FAINT

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
8	C	3	16	☒ Groundwater ☒ Restrictive Layer ☐ Bedrock

Observation Hole # 2 ☒ Test Pit ☐ Boring

2" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	STONY	FRIABLE	STRONG BROWN	NONE
6–18	SANDY			
18–36	LOAM	FIRM	PALE OLIVE	FEW FAINT

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	C	5	20	☒ Groundwater ☒ Restrictive Layer ☐ Bedrock

STATE OF MAINE VAUGHN L. SMITH 226 LICENSED SE # SITE EVALUATOR

Site Evaluator Signature

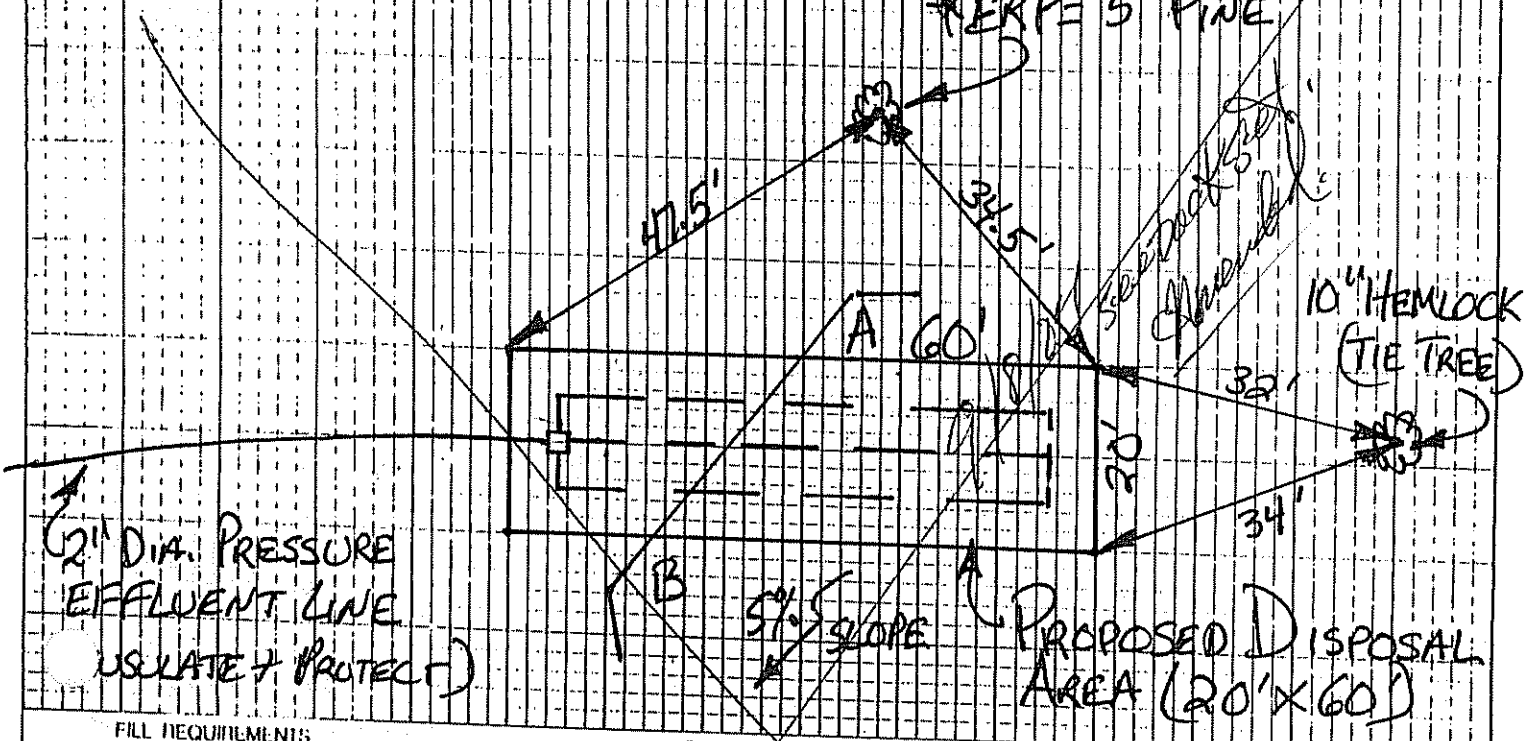
7/1/04
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

AUGUSTA 77 OUTLET ROAD — ROBERT BRUNELLE

SUBSURFACE WASTEWATER DISPOSAL PLAN — SCALE 1" = 20'

NOTES:
ALL TIES, ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION



FILL REQUIREMENTS

Depth of Fill (Upslope) 20"
Depth of Fill (Downslope) 36"
FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

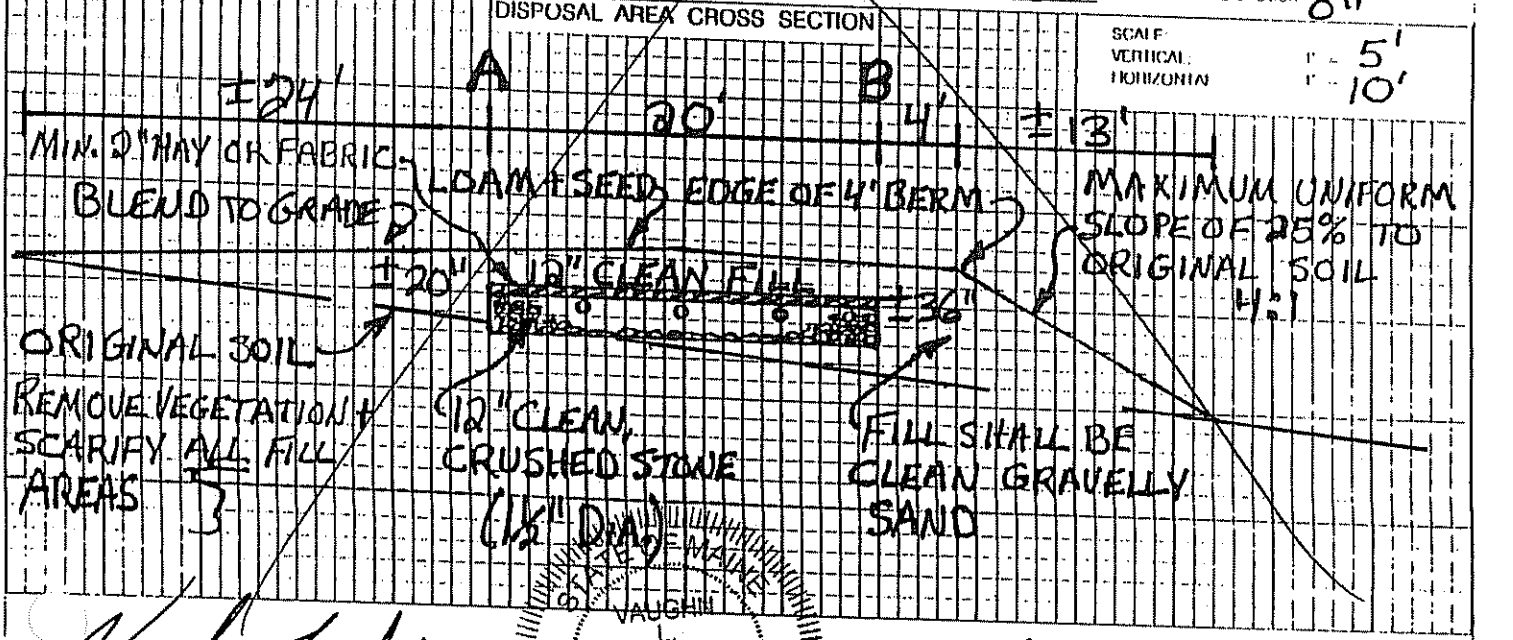
Finished Grade Elevation -30"
Top of Distribution Pipe or Proprietary Device -42"
Bottom of Disposal Area -54"

ELEVATION REFERENCE POINT

Location & Description 5" PINE W/NAIL 48" ABOVE GROUND
Reference Elevation 0"

DISPOSAL AREA CROSS SECTION

SCALE
VERTICAL 1" = 5'
HORIZONTAL 1" = 10'



Vaughn L. Smith
Evaluator Signature

VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

7/1/04
Date

9/8/04 Amending permit #5320

REPLACEMENT SYSTEM VARIANCE REQUEST

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application (HHE-200) for the proposed replacement system which requires a variance to the Rules. The LPI shall review the Replacement System Variance Request an HHE-200 and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 2006)
2. There will be no change in use of the structure except as authorized for one-time exempted expansions outside the shoreland zone of major waterbodies/courses.
3. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
4. The BOD5 plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION Town of AUGUSTA

Permit No. #5320 Date Permit Issued 7/8/04

Property Owner's Name: ROBERT BRUNELLE Tel. No.: 622-3906

System's Location: 77 OUTLET ROAD

Property Owner's Address: 223 OUTLET ROAD

(if different from above) AUGUSTA, MAINE 04330

SPECIFIC INSTRUCTIONS TO THE:

LOCAL PLUMBING INSPECTOR (LPI):
If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, then you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

SITE EVALUATOR:
If after completing the Application, you find that a variance for the proposed replacement system is needed, complete the Replacement Variance Request with your signature on reverse side of form.

PROPERTY OWNER:
If has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

PROPERTY OWNER

I understand that the proposed system requires a variance to the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

Robert E. Brunelle — SIGNATURE OF OWNER

9-08-04 — DATE

LOCAL PLUMBING INSPECTOR

I, George A. Lowry Jr., the undersigned, have visited the above property and have determined to the best of my knowledge that it cannot be installed in compliance with the Rules. As a result of my review of the Replacement Variance Request, the Application, and my on-site investigation, I **(check and complete either a or b)**:

a. (approve, disapprove) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in **Comments** Section below and return to the applicant. --OR--

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (recommend, do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, the reasons shall be stated in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: Although the original design was without variance the installation and function was not practical.

George A. Lowry Jr. — LPI SIGNATURE

9/8/04 — DATE

HHE-204 Rev 6/00

+$20.00

FORMS

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	Restrictive Layer			to 7"			10" inches	
from HHE-200	Bedrock			to 12"			— inches	
SETBACK DISTANCES (in feet)	**Disposal Fields**			**Septic Tanks**			**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 [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]	—	—
Owner's wells	100 down to 60 ft	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	80'	—
Neighbor's wells	100 down to 60 ft [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]	—	—
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]	—	—
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	84'	62'
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft	—	—
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 [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	—	—
Slopes greater than 3:1	10 ft	18 ft	25 ft	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	13'	—
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 down toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft	—	—

OTHER

1. Fill extension Grade - to 3:1

2.

3.

Footnotes: a. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State variance.

b. 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.

c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope or property line.

d. Natural Resources Protection Act requires a 25 foot setback on slopes with less than 20% from the edge of disturbance and 100 feet on slopes greater than 20% except for the repair or installation of a replacement system when no practical alternative exists.

STATE OF MAINE
JOHN SMITH
228
LICENSED
SITE EVALUATOR

[signature] 8/20/04

SITE EVALUATOR'S SIGNATURE DATE

REVISED VLS

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

Page 2, HHE-204 Rev 6/00

FORMS

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering HE-SHS
(207) 287-5672 Fax (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA

Street or Road: 77 OUTLET ROAD

Subdivision, Lot #:

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

The Subsurface Wastewater Disposal System *shall not* be installed until a Permit is attached HERE by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

OWNER/APPLICANT INFORMATION

Name (last, first, MI): BRUNELLE, ROBERT — [X] Owner [ ] Applicant

Mailing Address of Owner/Applicant: 223 OUTLET ROAD, AUGUSTA, ME 04330

Daytime Tel. #: 622-3906

Municipal Tax Map # _____ Lot # _____

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: Edward L. McLaughlin — Date: 8/8/04

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: Gary R. Fuller — (1st) date approved: 9/25/04 — (2nd) date approved: 10/1/04

PERMIT INFORMATION

TYPE OF APPLICATION

- [ ] 1. First Time System
- [X] 2. Replacement System
  - Type replaced: BED
  - Year Installed: ?
- [ ] 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
- [X] 3. Replacement System Variance
  - [X] a. Local Plumbing Inspector Approval
  - [ ] b. State & Local Plumbing Inspector Approval
- [ ] 4. Minimum Lot Size Variance
- [ ] 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

- [X] 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

±5 [ ] SQ. FT. [X] ACRES

DISPOSAL SYSTEM TO SERVE

- [X] 1. Single Family Dwelling Unit, No. of Bedrooms: 3
- [ ] 2. Multiple Family Dwelling, No. of Units: _____
- [ ] 3. Other: _____ (specify)

Current Use: [ ] Seasonal [X] Year Round [ ] Undeveloped

SHORELAND ZONING

[X] Yes [ ] No

TYPE OF WATER SUPPLY

EXISTING

- [X] 1. Drilled Well
- [ ] 2. Dug Well
- [ ] 3. Private
- [ ] 4. Public
- [ ] 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- [X] 1. Concrete
  - [X] a. Regular
  - [ ] b. Low Profile
- [ ] 2. Plastic
- [ ] 3. Other: _____

CAPACITY: 1000 GAL.

DISPOSAL FIELD TYPE & SIZE

- [ ] 1. Stone Bed
- [ ] 2. Stone Trench
- [X] 3. Proprietary Device
  - [ ] a. cluster array
  - [ ] c. Linear
  - [X] b. regular load
  - [ ] d. H-20 load
- [ ] 4. Other: EZ MRO SEPTICS

SIZE: 1200 [X] sq. ft. [ ] lin. ft.

GARBAGE DISPOSAL UNIT

[X] 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:

- [X] 1. Table 501.1 (dwelling unit(s))
- [ ] 2. Table 501.2 (other facilities)

SHOW CALCULATIONS

-- for other facilities --

SOIL DATA & DESIGN CLASS

PROFILE: B / CONDITION: D / DESIGN: _____

at Observation Hole # 2

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
- [X] 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
- [X] 3. Required

Specify only for engineered systems:

DOSE: _____ gallons

- [ ] 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SITE EVALUATOR STATEMENT

I certify that on 6/23/04 (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).

Site Evaluator Signature: Vaughn L. Smith — Date: 7/1/04

Site Evaluator Name Printed: VAUGHN L. SMITH

Site Evaluator # 226 — Telephone Number: 622-5635 — E-mail Address: REVISED 8/20/04 (VLS)

VAUGHN L. SMITH — SITE EVALUATOR # 226 — STATE OF MAINE

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

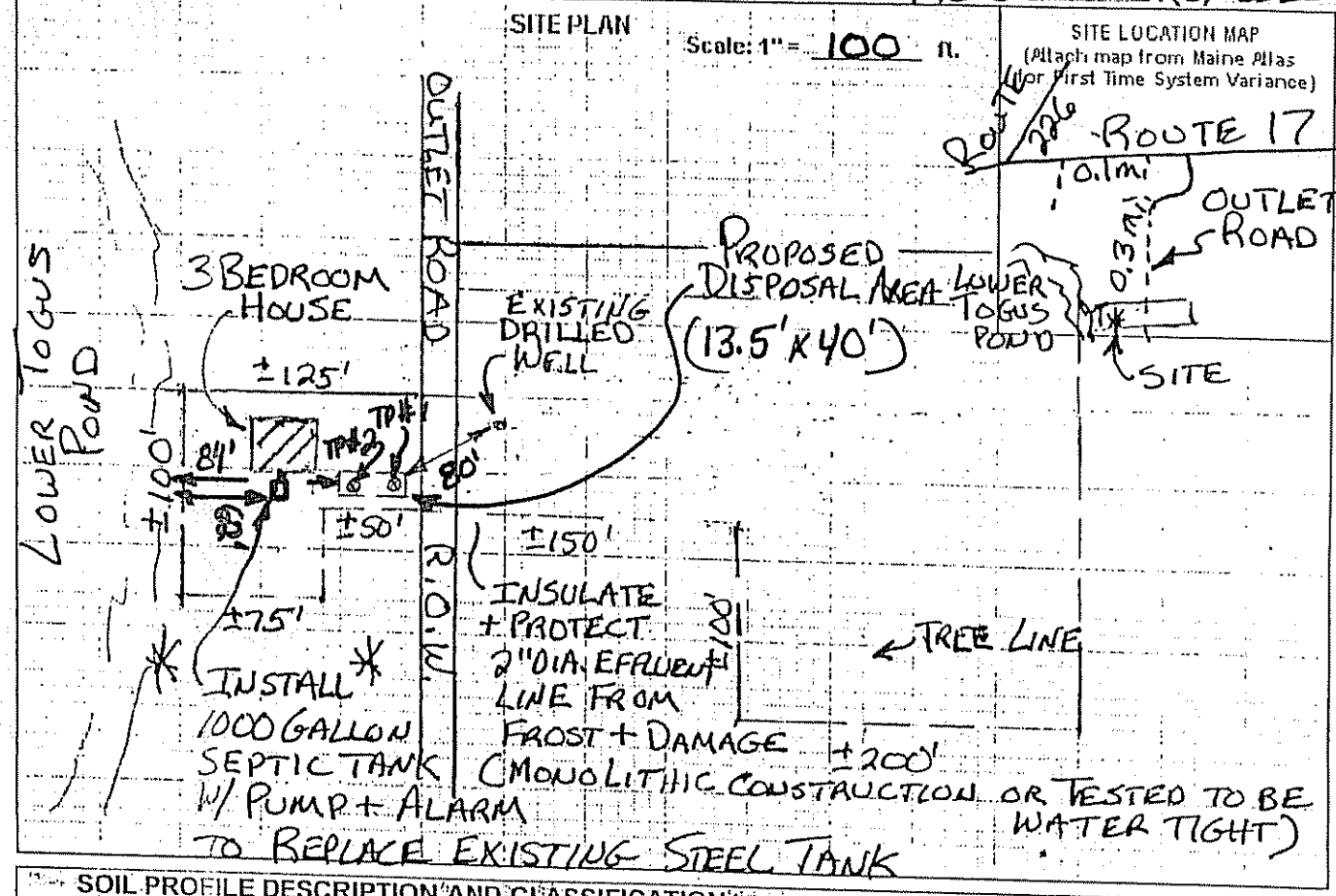
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	77 OUTLET ROAD	ROBERT BRUNELLE

SITE PLAN

Scale: 1" = 100 ft.



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

Observation Hole # 1 ☒ Test Pit ☐ Boring

1 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	LOAM	FRIABLE	BROWN	NONE
12–18				
24–30		FIRM	OLIVE	FEW FAINT

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
8	D	3	10	☒ Groundwater ☐ Restrictive Layer ☐ Bedrock

Observation Hole # 2 ☒ Test Pit ☐ Boring

2 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6		FRIABLE	BROWN	NONE
12–18				
24–30	LOAM			
36–42		FIRM	PALE OLIVE	FEW FAINT

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
8	D	5	13	☒ Groundwater ☐ Restrictive Layer ☐ Bedrock

Vaughn L. Smith
Site Evaluator Signature

STATE OF MAINE
VAUGHN L. SMITH
226
SE #
LICENSED SITE EVALUATOR

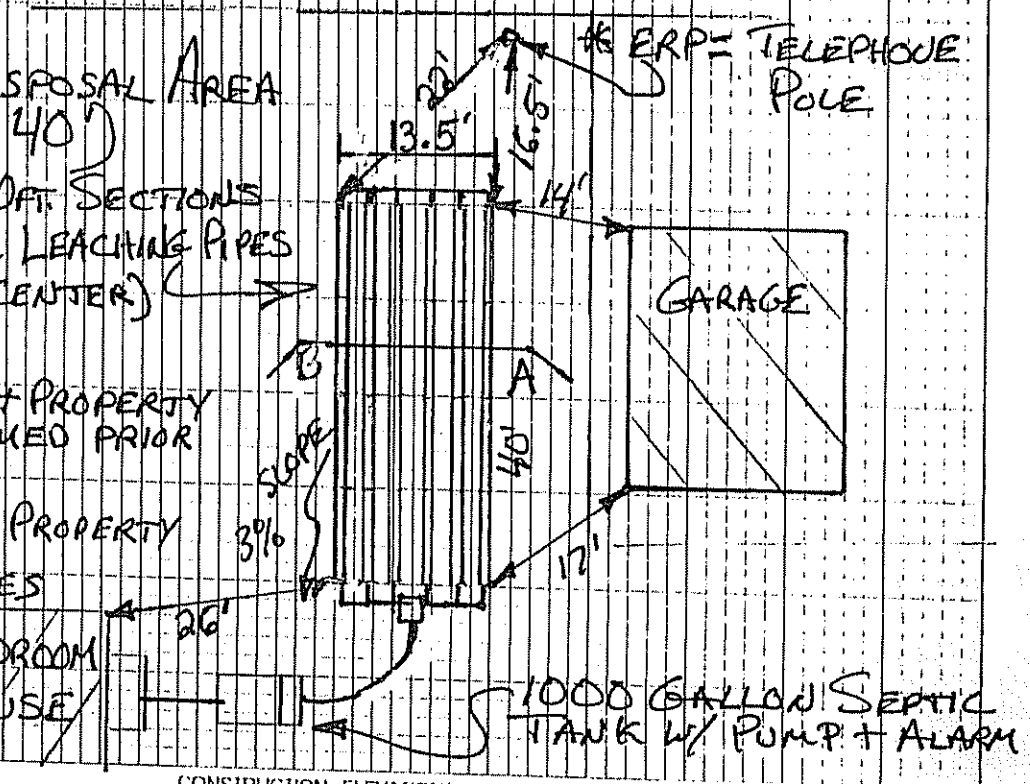
7/1/04 REVISED 8/20/04
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

AUGUSTA 77 OUTLET ROAD | ROBERT BRUNELLE

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



NOTES:
1) ALL TIES, ELEVATIONS + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION
2) ALL FILL SHALL REMAIN ON PROPERTY
3) SEE P.2 FOR OTHER NOTES

FILL REQUIREMENTS

Depth of Fill (Upslope) 32"

Depth of Fill (Downslope) 42"

FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

Finished Grade Elevation -30"

Top of Distribution Pipe or Proprietary Device -42"

Bottom of Disposal Area -54"

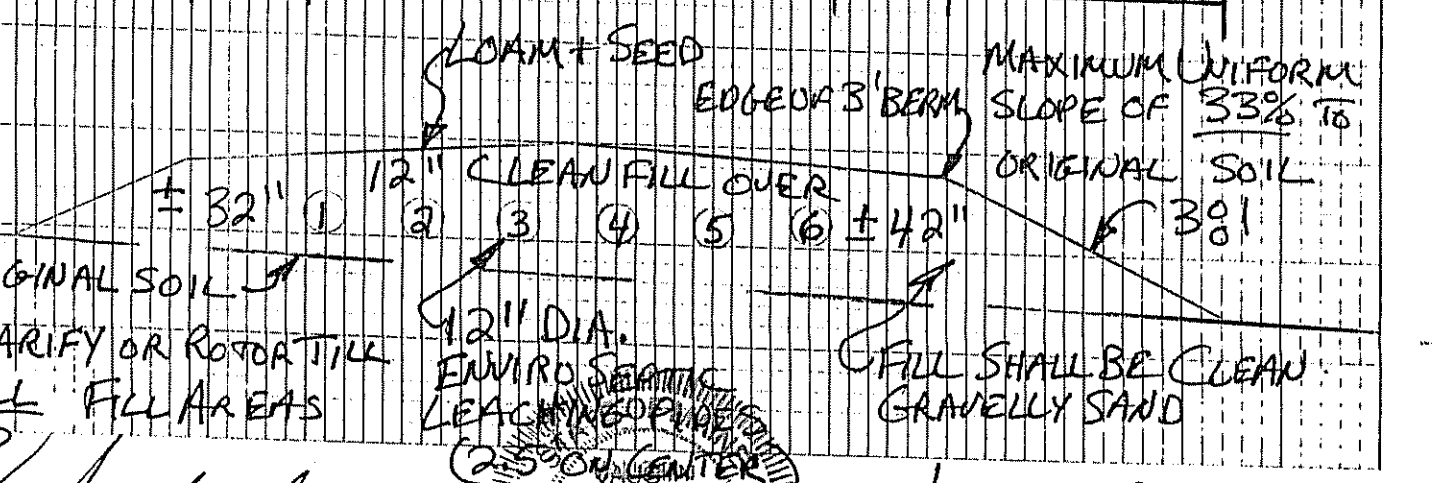
ELEVATION REFERENCE POINT

Location & Description TELEPHONE POLE W/NAIL 44" ABOVE GROUND

Reference Elevation 0"

DISPOSAL AREA CROSS SECTION

SCALE VERTICAL 1" = 5'
HORIZONTAL 1" = 5'



SCARIFY OR ROTOTILL ALL FILL AREAS

Vaughn L. [illegible]
Signature

24 pcs [illegible]

VAUGHN L. [illegible]
LICENSED SITE EVALUATOR

8/20/04 REVISION

Date

KCS