SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Map 1A Lot 1

01010451

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	27 Bunny St Cushnoc Est. L-1-205

PROPERTY OWNER'S NAME

Last: Bonenfant First: Paul

Applicant Name:	Paul Bonenfant
Mailing Address of Owner/Applicant (If Different)	R-3 B-1240 Augusta ME 04330

AUGUSTA 4134 TOWN COPY

Date Permit Issued: 3/3/99 $ 100.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 850

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 3/10/99 Date

CAUTION: INSPECTION REQUIRED

5/4/99 I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

See Amended set to rear of application

Local Plumbing Inspector Signature Date Approved

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

F REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS

1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER _____

SIZE OF PROPERTY	ZONING
.986ac+-	

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. ☐ Requires 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 well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ■ SEPTIC: ■ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE 1000 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 & ELEVATION)
3. ☐ REQUIRED

DOSE: 54 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING) EMPLOYEES, WATER RECORDS, ETC.)

3 bedrooms

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
5	C

DEPTH TO LIMITING FACTOR: 40 "

SIZE RATINGS USED FOR DESIGN PURPOSES

1. ☐ SMALL
2. ■ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA-LARGE

DISPOSAL AREA TYPE/SIZE

1. ☒ BED 1000 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 300 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 12/3/94 (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 51 SE# 12/4/94 Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

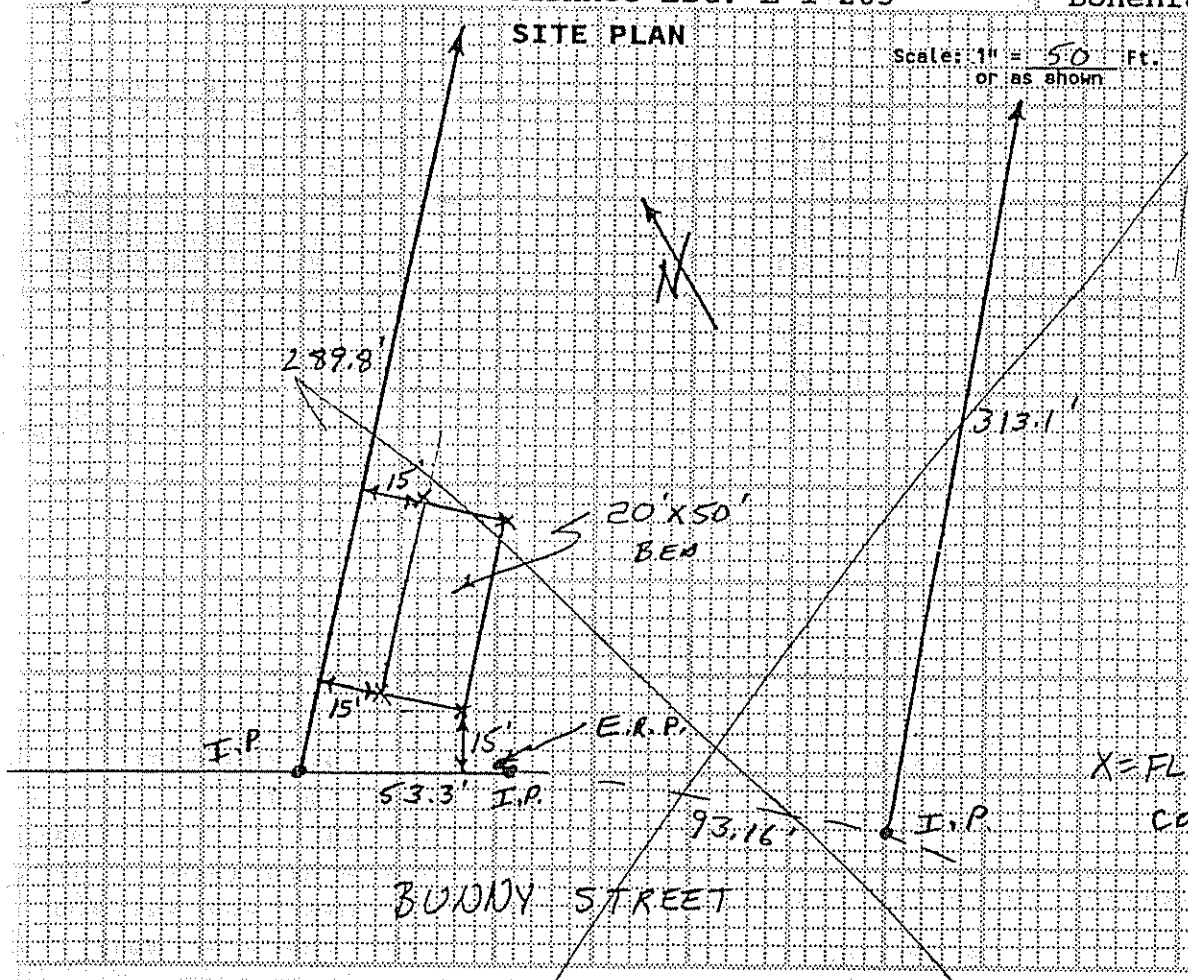
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

01010412

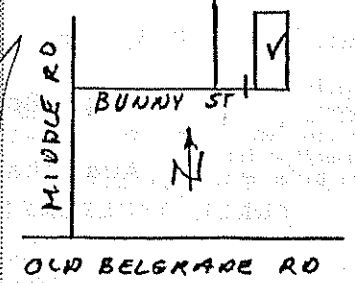
Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Cushnoc Est. L-1-205	Bonenfant, Paul

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 ☐Test Pit ☒Boring

+1 " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–6	L.S.	FRIABLE	B	
6–15				
15–30	L.S.	MOD FIRM		
30–40				40"
40–50				

Soil Classification		Slope	Limiting Factor	
5 Profile	C Condition	2 %	AD	☒Ground Water ☐Restr. Layer ☐Bedrock

Observation Hole _____ ☐Test Pit ☐Boring

_____ " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–6				
6–15				
15–30				
30–40				
40–50				

Soil Classification		Slope	Limiting Factor	
Profile	Condition	%		☐Ground Wa ☐Restr. La ☐Bedrock

Site Evaluator Signature

51
SE#

12/4/94
Date

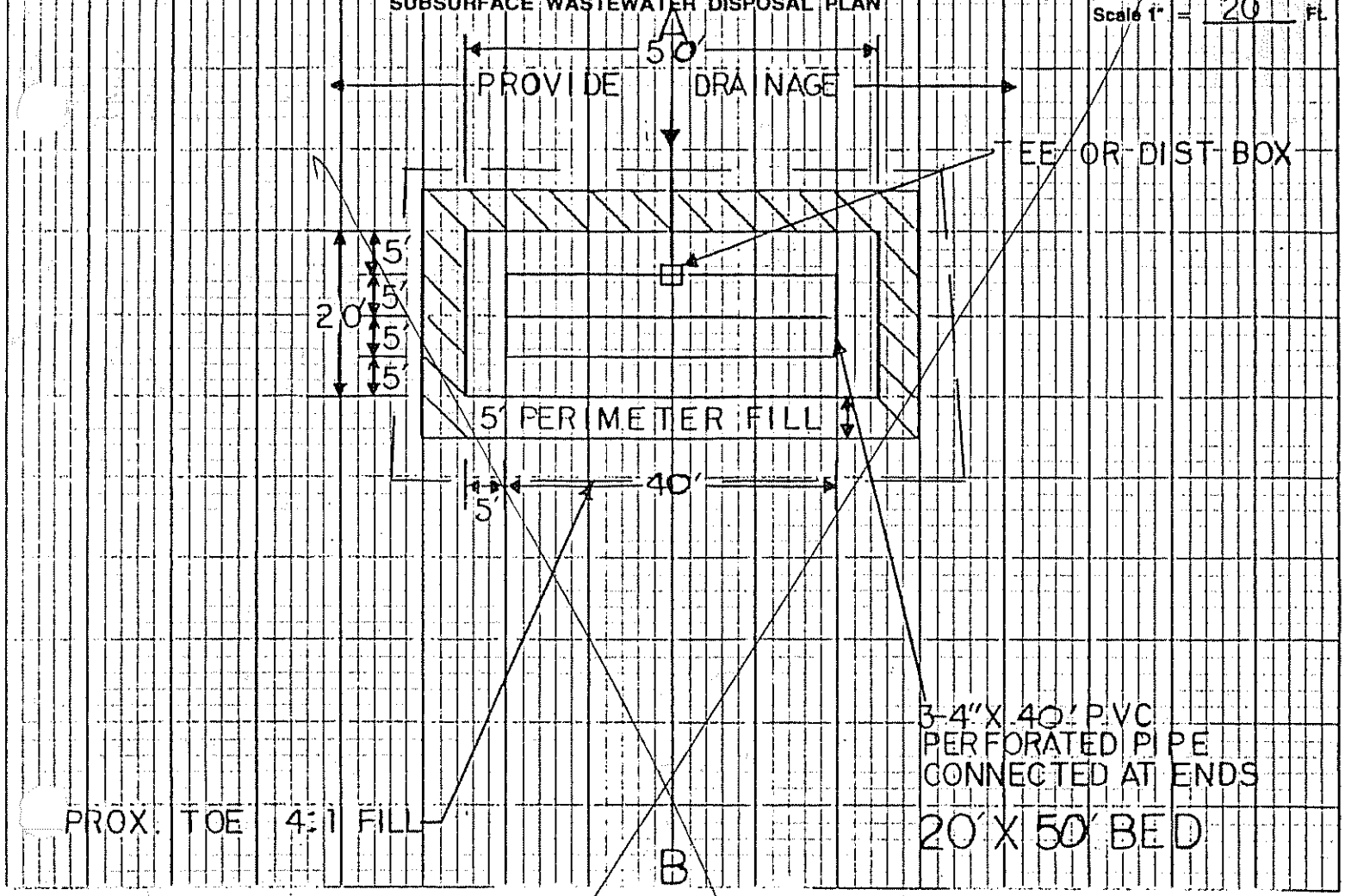
Approved for use as HHE 200 by Division of Health Engineering 9/87

SUBSURFACE WASTEWATER DISPOSAL SITE EVALUATOR APPLICATION — Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	CUSHNOC EST. L-1-205	BINENFANT

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 8"

Depth of Fill (Downslope) 12"

CONSTRUCTION ELEVATIONS

Reference Elevation Is

Bottom of Disposal Area 0

Top of Distribution Lines or Chambers -57"

-40"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

MARK ON GRADE STAKE

DISPOSAL AREA CROSS SECTION

① 3" TOPSOIL CROWNED 3%

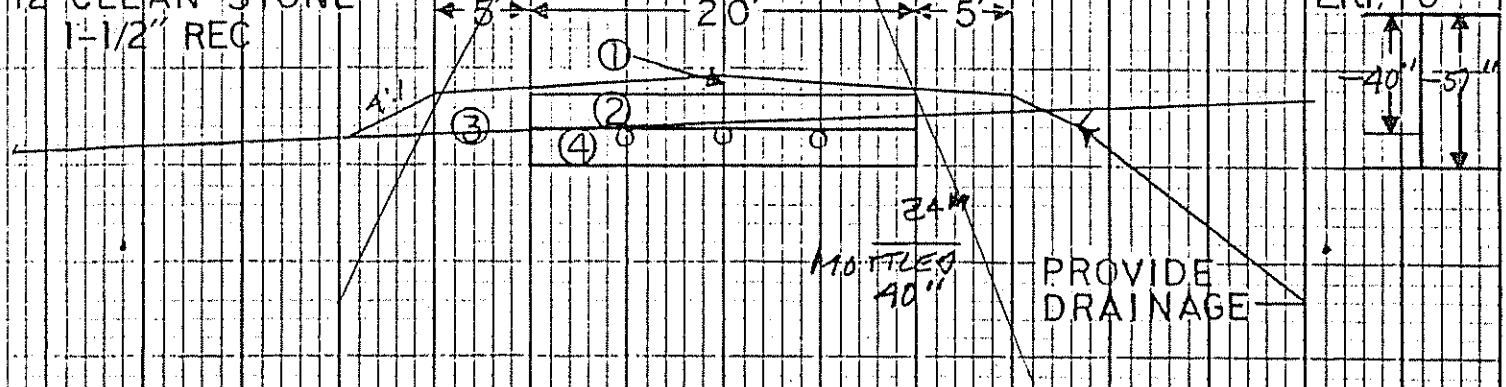
② 8" CLEAN SAND ③ 2 COMPACTED HAY

④ 12" CLEAN STONE 1-1/2" REC

Scale:

Vertical: 1 Inch = 5 Ft.

Horizontal: 1 Inch = 10 Ft.



FILL MATERIAL TO BE LOAMY SAND

GRUB SURFACE — REMOVE ORGANICS

A

Site Evaluator Signature	SE#	Date
[signature]	51	12/4/94

HHE-200 Rev.1/84

Map 1A Lot 1

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

Town or Plantation: AUGUSTA

Subdivision Lot #: CUSHNOC EST L-1-205

PROPERTY OWNER'S NAME

Last: BONENFANT First: PAUL

Applicant's Name:

Mailing Address of Owner: K-10 B-3240 AUGUSTA, ME 04330

Daytime Tel. #: 622-5013

Caution: Permit Required

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.

Municipal Tax Map #: Lot #:

Owner Statement

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

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 Application

Local Plumbing Inspector Signature — Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION:

1. [X] First Time System
2. [ ] Replacement System
   Type Replaced ____
   Year Installed ____
3. [ ] Expanded System
   [ ] a. one time exempted
   [ ] b. non exempted
4. [ ] Experimental System
5. [ ] Seasonal Conversion

THIS APPLICATION REQUIRES:

1. [X] 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 Approval

DISPOSAL SYSTEM COMPONENT(S)

1. [X] Non-Engineered System
2. [ ] Primitive System(graywater & alt toilet)
3. [ ] Alternative Toilet ____
4. [ ] Non-Engineered Treatment Tank
5. [ ] Holding Tank ____ Gallons
6. [ ] Non-Engineered Disposal Area (only)
7. [ ] Separated Laundry System
8. [ ] Engineered System (>2000 gpd)
9. [ ] Engineered Treatment Tank (only)
10. [ ] Engineered Disposal Area (only)
11. [ ] Pretreatment

SIZE OF PROPERTY

.986 Ac ±

SHORELAND ZONING

[ ] Yes [X] No

DISPOSAL SYSTEM TO SERVE:

1. [X] Single Family Dwelling Unit
2. [ ] Multiple Family Dwelling: Number of Units ____
3. [ ] Other ____

TYPE OF WATER SUPPLY

DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. [X] Concrete
   [X] a. Regular
   [ ] b. Low Profile
2. [ ] Plastic
3. [ ] Other ____

SIZE 1000 Gallons

DISPOSAL AREA TYPE / SIZE

1. [X] Bed 1000 Sq. Ft.
2. [ ] Proprietary Device ____ Sq. Ft.
   [ ] Cluster [ ] Linear
   [ ] Regular [ ] H-20
3. [ ] Trench
4. [ ] Other ____

GARBAGE DISPOSAL UNIT

1. [X] No
2. [ ] Yes
   [ ] Multi-compartment tank
   [ ] Tank in series
   [ ] Increase in tank capacity
   [ ] Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

3 BEDROOMS @ 120 GPD EACH.

PROFILE & DESIGN CLASS

PROFILE	DESIGN
5	C

DEPTH TO MOST LIMITING FACTOR 40 "

DISPOSAL AREA SIZING

1. [ ] Small - 2.00
2. [X] Medium - 2.60
3. [ ] Medium-Large - 3.30
4. [ ] Large - 4.10
5. [ ] Extra-Large - 5.20

PUMPING

1. [ ] Not required
2. [X] May be required
3. [ ] Required

DOSE 50 Gallons

DESIGN FLOW: 360 (Gallons/Day)

SITE EVALUATOR'S STATEMENT

On 12/3/94 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed sytem is in compliance with the Subsurface Wastewater Disposal Rules. REVISED

Site Evaluator Signature — SE # 51 — Date 4/27/99

LIAM W. RIDEOUT — Site Evaluator Name Printed — (207) 582-4161 Telephone

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

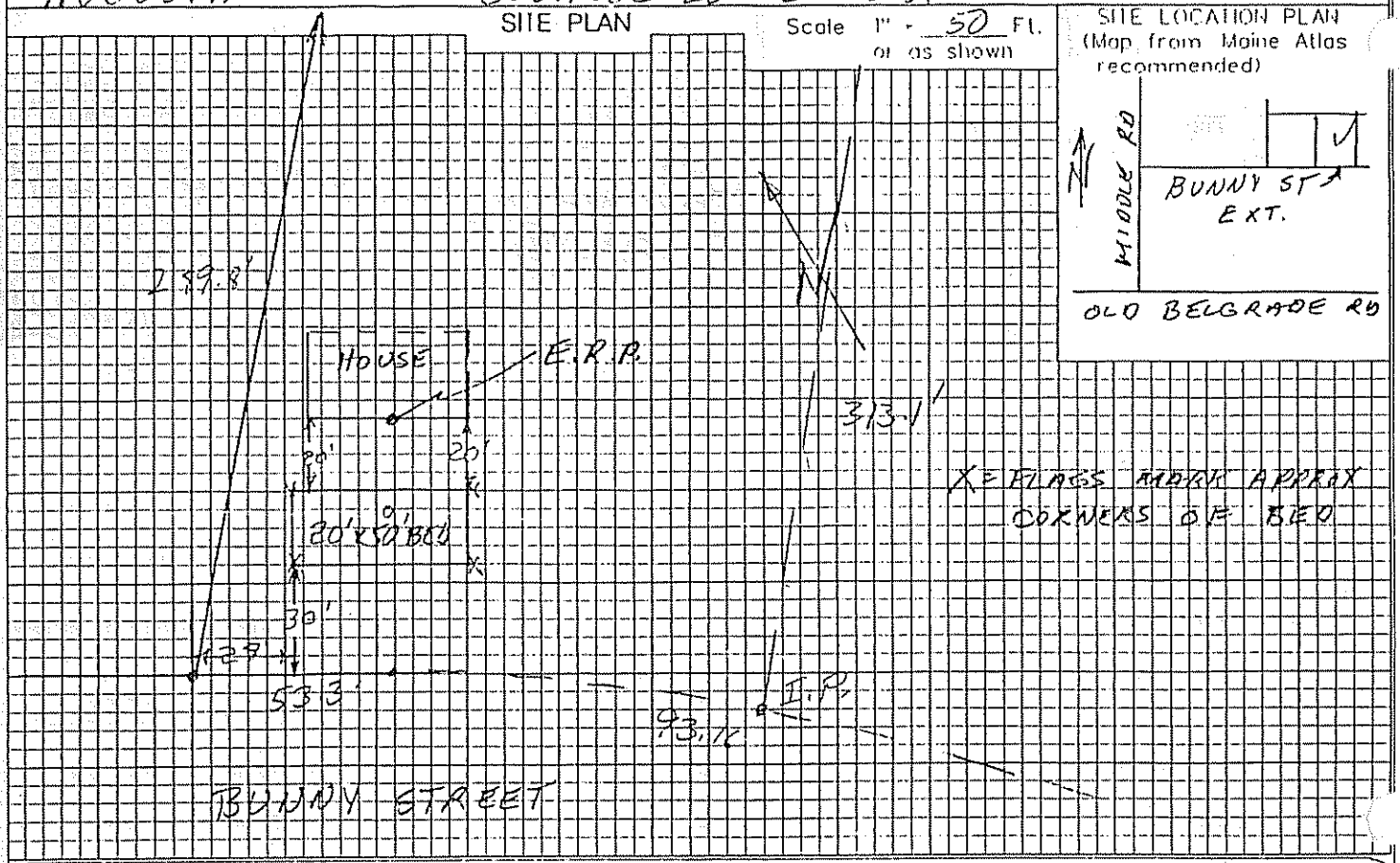
Town, City, Plantation: AUGUSTA

Street, Road Subdivision: CUSHNOC EST L-1-205

Owner's Name: BONEY FIRST

SITE PLAN

Scale 1" = 50 Ft. or as shown



SOIL 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	L.S.	FRIABLE	B	
10				
20				
30	L+S.	MOD FIRM	G.B.	
40				40
50				

Soil Classification: Profile	Condition	Slope	Limiting Factor	
5	C	2 %	40"	☒ 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

Alan W. Rideout
Site Evaluator Signature

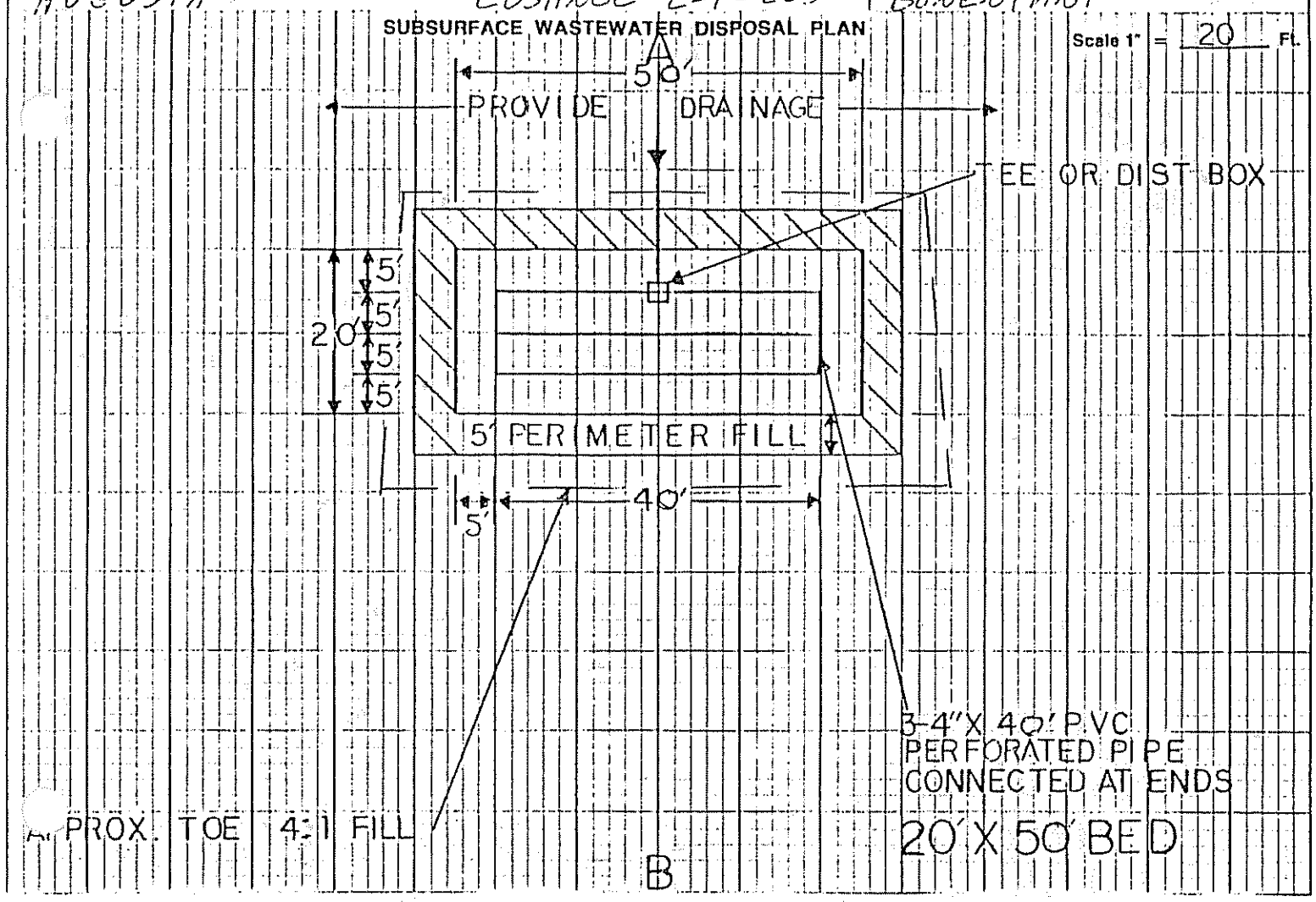
57
SE #

4/27/99
Date

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	CUSHNOC L-1-205	BONENFANT

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

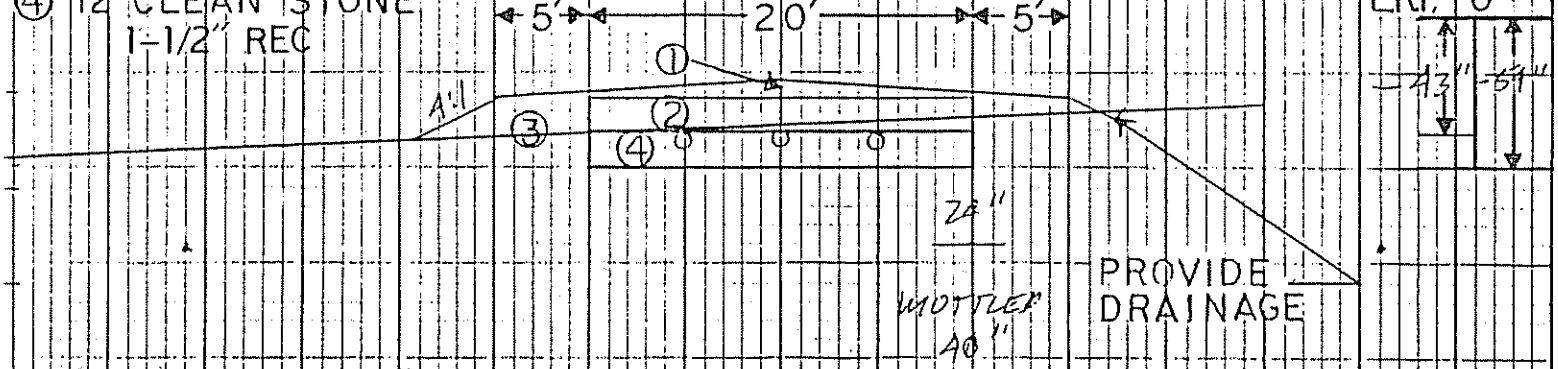


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	8"	Reference Elevation Is	0	TOP OF FOUNDATION.
Depth of Fill (Downslope)	12"	Bottom of Disposal Area	-54"	
		Top of Distribution Lines or Chambers	-43"	

① 3" TOPSOIL CROWNED 3%
② 8" CLEAN SAND ③ 2 COMPACTED HAY
④ 12" CLEAN STONE
1-1/2" REC

DISPOSAL AREA CROSS SECTION

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



FILL MATERIAL TO BE LOAMY SAND
GRUB SURFACE — REMOVE ORGANICS

A

Site Evaluator Signature: [signature]

SE#: 51

Date: 4/27/99