

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
 Division of Health Engineering, 10SHS  
 (207)287-5672 FAX (207)287-3165

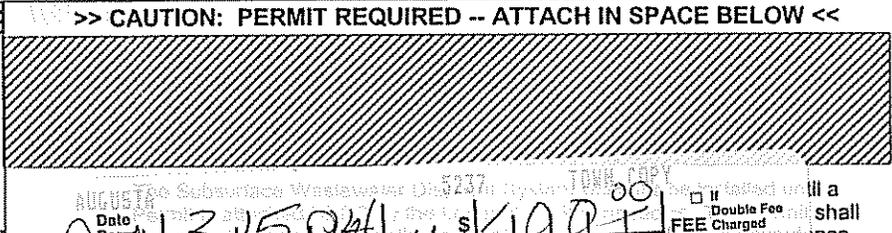
>> CAUTION: PERMIT REQUIRED -- ATTACH IN SPACE BELOW <<

**PROPERTY LOCATION**

City, Town, or Plantation: **AUGUSTA**

Street or Road: **77 BUNNY STREET LOT # 209**

Subdivision, Lot #:



**OWNER/APPLICANT INFORMATION**

Name (last, first, MI): **BONENFANT, PAUL**  Owner  Applicant

Mailing Address of Owner/Applicant: **92 OLD BELGRADE ROAD  
AUGUSTA, ME 04330**

Daytime Tel. #: **622-5013**

Permit Issued: **131504** \$ **1100** Fee Charged:  Double Fee  Fee

Date Permit Issued: **3/11/04**

Local Plumbing Inspector Signature: *[Signature]* L.P.I. # **1850**

Municipal Tax Map # **1A** Lot # **5**

**OWNER OR APPLICANT 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: *[Signature]* Date: **3/11/04**

**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: *[Signature]* Date Approved: **3/19/04**

**PERMIT INFORMATION**

**TYPE OF APPLICATION**

1. First Time System  
 2. Replacement System  
 Type replaced \_\_\_\_\_  
 Year installed \_\_\_\_\_  
 3. Expanded System  
 a. Minor Expansion  
 b. Major Expansion  
 4. Experimental System  
 5. Seasonal Conversion

**SIZE OF PROPERTY**  
**1.0**  sq. ft.  acres

**SHORELAND ZONING**  
 Yes  No

**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 TO SERVE:**

1. Single Family Dwelling Unit, No. of Bedrooms: **3**  
 2. Multiple Family Dwelling Unit, No. of Units: \_\_\_\_\_  
 3. Other \_\_\_\_\_ (specify)

Current Use  Seasonal  Year Round  Undeveloped

**DISPOSAL SYSTEM COMPONENTS**

1. Complete Non-engineered System  
 2. Primitive System (graywater & alt. Idilet)  
 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. Pretreatment, specify: \_\_\_\_\_  
 12. Miscellaneous Components

**TYPE OF WATER SUPPLY**

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

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 2)**

**TREATMENT TANK**

1. Concrete  
 a. Regular  
 b. Low Profile (IF NEEDED)  
 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 **900**  sq. ft.  lin. ft.

**GARBAGE DISPOSAL UNIT**

1.  No 3.  Maybe  
 2.  Yes >> 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  
**5 / B / 2**

at Observation Hole # **TP-1**  
 Depth **N/A**  
 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 or experimental systems

DOSE \_\_\_\_\_ gallons

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

**SITE EVALUATOR'S STATEMENT**

I certify that on **3/8/04** (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: *[Signature]* SE#: **188** Date: **3/8/2004**

Site Evaluator Name Printed: **WILLIAM P BROWN** Telephone Number: **293-2110** E-mail Address: \_\_\_\_\_

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Division of Health Engineering, Station 10  
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Town, City, Plantation

**AUGUSTA**

Street, Road, Subdivision

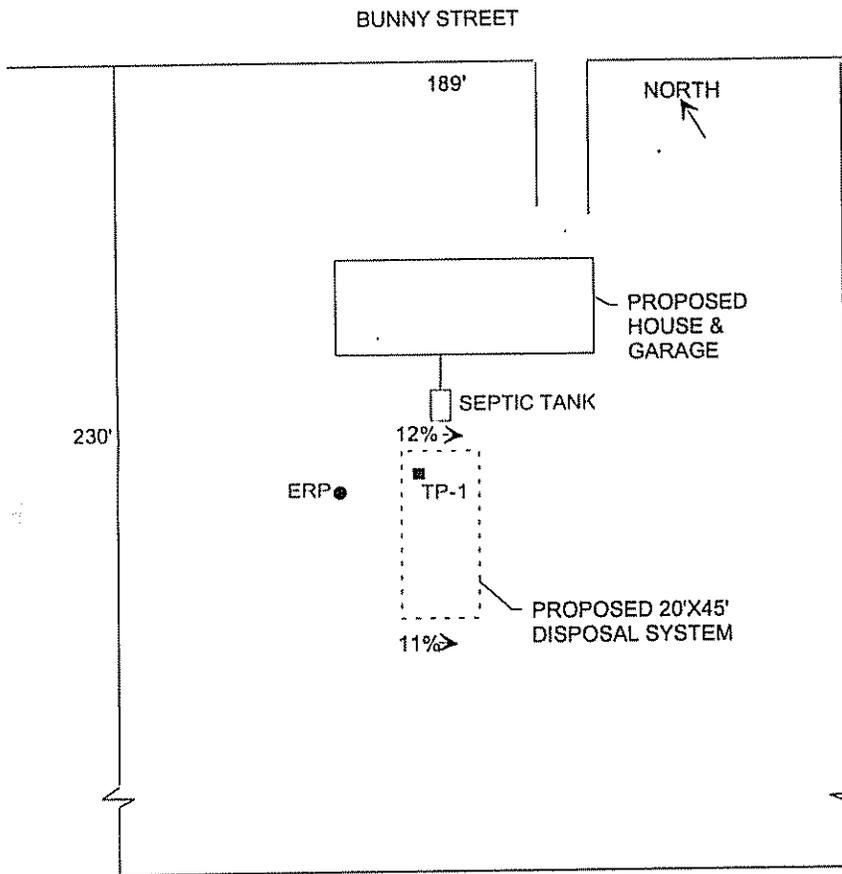
**BUNNY STREET LOT 209**

Owner or Applicant Name

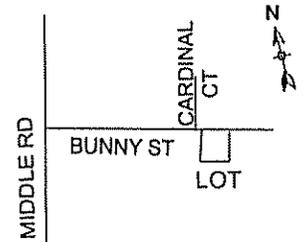
**PAUL BONENFANT**

SITE PLAN

Scale 1" = 50 Ft.



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



ERP TO TP-1 = 23'

PROPOSED WELL TO BE AT LEAST 100 FEET FROM SEPTIC SYSTEM

HOUSE ON FULL FONDATION TO BE AT LEAST 20 FT FROM SYSTEM

SYSTEM IS 150 FEET FROM NEIGHBOR'S WELL

## SOIL PROFILE DESCRIPTION AND CLASSIFICATION

Observation Hole # TP-1  Test Pit  Boring

0 " Depth of organic horizon above mineral soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
	0	LOAMY SAND	FRIABLE TO LOOSE	LIGHT BROWN
20	MEDIUM SAND		ORANGE BROWN	
40			LIGHT BROWN	
50	Soil Profile <b>5</b>	Classification Condition <b>B</b>	Slope Percent <b>11-12%</b>	Limiting Factor Depth <b>N/A</b>

Groundwater  
 Restrictive Layer  
 Bedrock

## (Location of Observation Holes Shown Above)

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 Profile	Classification Condition	Slope Percent	Limiting Factor Depth

Groundwater  
 Restrictive Layer  
 Bedrock

**WILLIAM P BROWN**  
Site Evaluator Signature

188  
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3/8/2004  
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Owners Name  
**PAUL BONENFANT**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

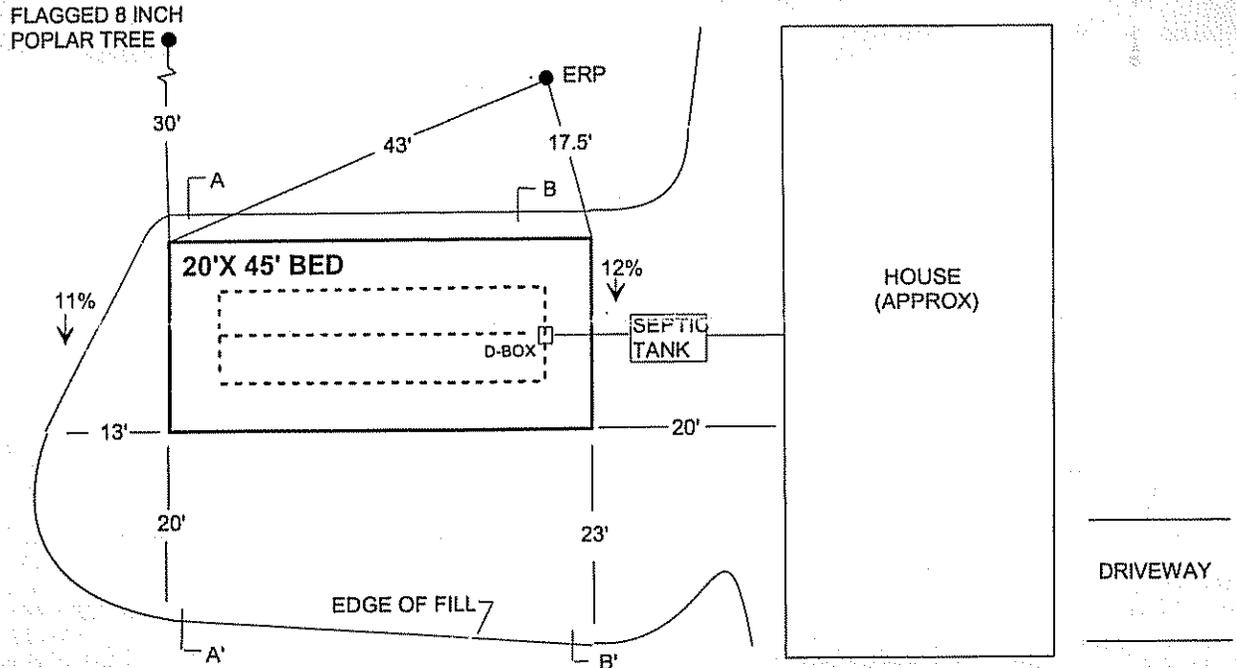
SEPTIC TANK MAY BE FIELD ADJUSTED  
AT LEAST 8 FT FROM HOUSE

LOCATE WELL AT LEAST 100 FEET FROM DISPOSAL SYSTEM  
LOCATE HOUSE AT LEAST 20 FEET FROM DISPOSAL SYSTEM

*new*



BLEND FILL FOR SEPTIC SYSTEM  
INTO FILL FOR HOUSE (AS SHOWN)



### FILL REQUIREMENTS

Depth of Fill (Upslope)  
Depth of Fill (Downslope)

6 "  
32-35 "

### CONSTRUCTION ELEVATIONS

Finish Grade Elevation  
Top of Distribution Pipe or Proprietary device  
Bottom of Disposal Area

VARIES  
-56"  
-67"

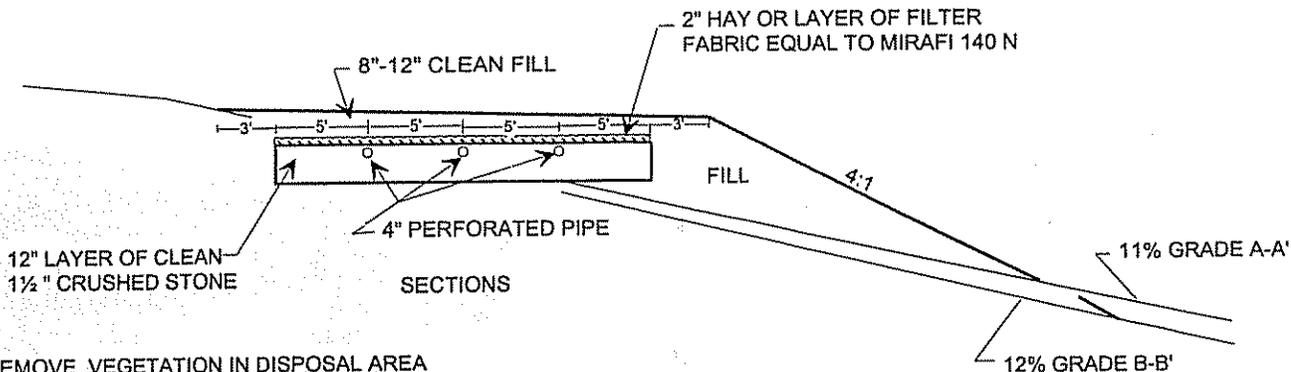
### ELEVATION REFERENCE POINT

Location and Description  
**FLAGGED NAIL IN 6 INCH BEECH TREE, 2 FEET ABOVE GROUND**  
Reference Elevation is 00"

### DISPOSAL AREA CROSS SECTION

Scale:

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



REMOVE VEGETATION IN DISPOSAL AREA  
SCARIFY ENTIRE FILL AREA  
MIX 4 INCHES OF FILL MATERIAL THOROUGHLY WITH EXISTING SOIL TO FORM  
A TRANSITION ZONE (ACCORDING TO CHAPTER 8, PLUMBING CODE)  
ALL FILL SHALL BE GRAVELLY COARSE SAND  
CROWN FINISH GRADE FROM CENTER AT 3%  
OR SLOPE ALL ONE-WAY (AS SHOWN)  
LOAM, SEED, MULCH DISTURBED AREAS

**WILLIAM P BROWN** *William P Brown*  
Site Evaluator Signature

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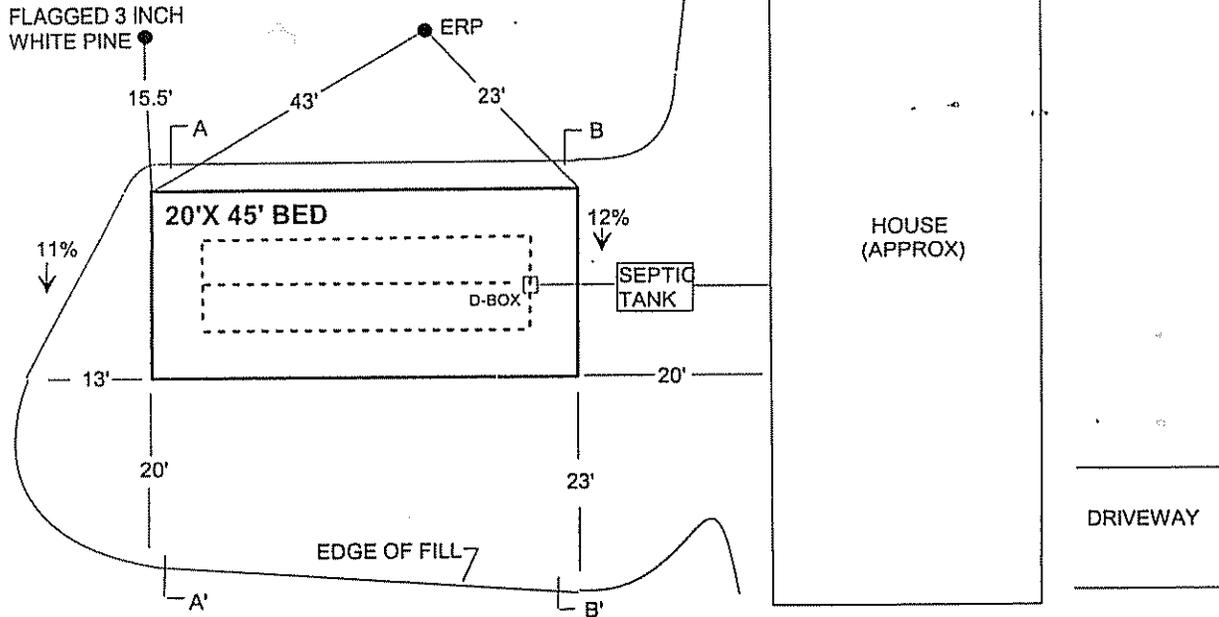
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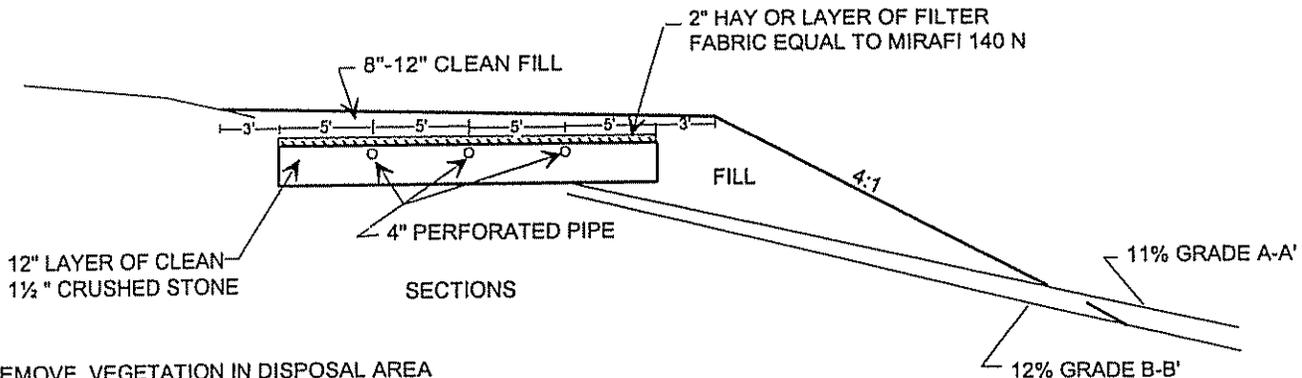
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