PIF 12/4/12

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5670 - Fax: (207) 287-4172

AUGUSTA PERMIT #6739 TOWN COPY
Date Permit Issued: 12/4/12 $150.00 fee
Gary R. Fuller LPI # 850

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA
Street or Road: 691 WEST RIVER ROAD
Subdivision, Lot #:

OWNER/APPLICANT INFORMATION

Name (last, first, MI): BECHARD, RICHARD ☒ Owner ☐ Applicant
Mailing Address of Owner/Applicant: 691 WEST RIVER ROAD AUGUSTA, ME 04330
Daytime Tel. #: 621-2709

Municipal Tax Map # 3 Lot # 97

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.
Richard J. Bechard 12-4-12
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.
Gary R. Fuller (1st) date approved 12/6/12
Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION
- ☐ 1. First Time System
- ☒ 2. Replacement System
  - Type replaced: TRENCHES
  - Year installed: ±1960
- ☒ 3. Expanded System
  - ☐ a. <25% Expansion
  - ☒ b. ≥25% 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 PUMP CHAMBER

SIZE OF PROPERTY
± 4 ☐ 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: 2 BEDROOMS + 1 BEDROOM EXP. (specify)

Current Use ☐ Seasonal ☒ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY
☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
- ☒ 1. Concrete
  - ☒ a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other:

CAPACITY: 1000 GAL.
EXISTING

SOIL DATA & DESIGN CLASS
PROFILE CONDITION: 5 C
at Observation Hole # 2
Depth 28"
of Most Limiting Soil Factor

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.

DISPOSAL FIELD SIZING
- ☒ 1. Medium---2.6 sq. ft. / gpd
- ☐ 2. Medium---Large 3.3 sq. ft / gpd
- ☐ 3. Large---4.1 sq. ft. / gpd
- ☐ 4. Extra Large---5.0 sq. ft. / gpd

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

EFFLUENT/EJECTOR PUMP
- ☐ Not Required
- ☐ May Be Required
- ☒ Required

Specify only for engineered systems:
DOSE: ____ gallons

DESIGN FLOW
270 gallons per day
BASED ON:
- ☒ 1. Table 4A (dwelling unit(s))
- ☐ 2. Table 4C(other facilities)
  SHOW CALCULATIONS for other facilites
- ☐ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44 d 21 m 15 s
Lon. 69 d 45 m 40 s
if g.p.s. state margin of error:

SITE EVALUATOR STATEMENT

I certify that on 11/28/12 (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
12/2/12 — Date
VAUGHN L. SMITH — Site Evaluator Name Printed
441-28887 — Telephone Number
SOILTESTMAN@AOL.COM — E-mail Address

TAMPER EVIDENT — VAUGHN SMITH 226 — LICENSED SITE EVALUATOR

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

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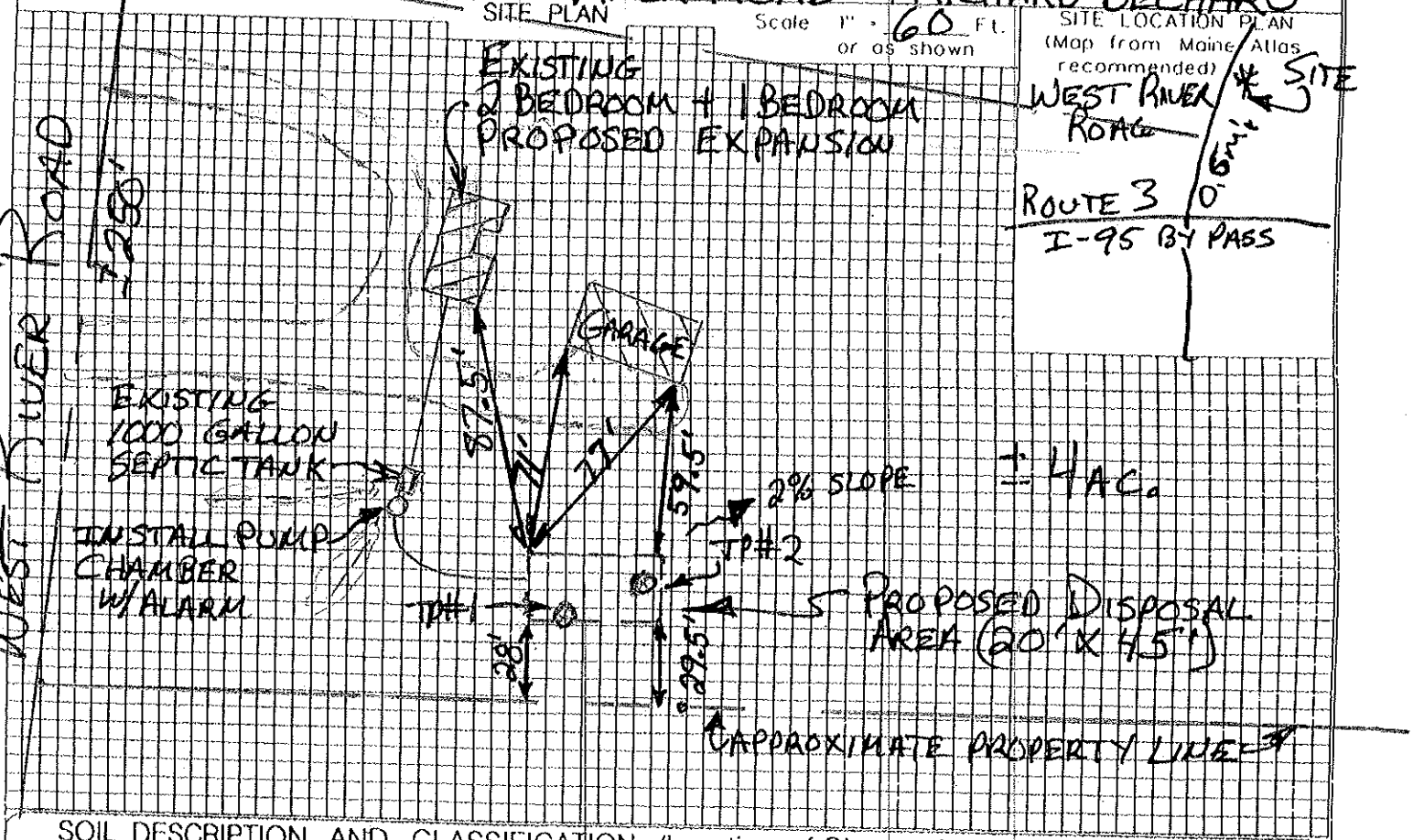
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 691 WEST RIVER ROAD
Owner's Name: RICHARD BECHARD

SITE PLAN

Scale 1" = 60 Ft. or as shown



SITE LOCATION PLAN
(Map from Maine Atlas recommended)

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
0–10	SANDY LOAM	FRIABLE	BROWN	
10–20	LOAMY		BROWNISH YELLOW	NONE
20–30	FINE	LOOSE		
30–40	SAND TO FINE SAND		LIGHT OLIVE BROWN	FEW DISTINCT

Soil Classification: Profile 5, Condition C; Slope 3 %; Limiting 30 "; ☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 ☒ Test Pit ☐ Boring
1 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10	SANDY LOAM	FRIABLE	BROWN	NONE
10–20	LOAMY		YELLOWISH BROWN	
20–30	FINE	LOOSE		
30–40	SAND TO FINE SAND		PALE OLIVE	FEW DISTINCT

Soil Classification: Profile 5, Condition C; Slope 2 %; Limiting Factor 28 "; ☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

STATE OF MAINE
VAUGHN L. SMITH
226
LICENSED SITE EVALUATOR

Site Evaluator Signature: [signature] 226

Date: 12/2/12

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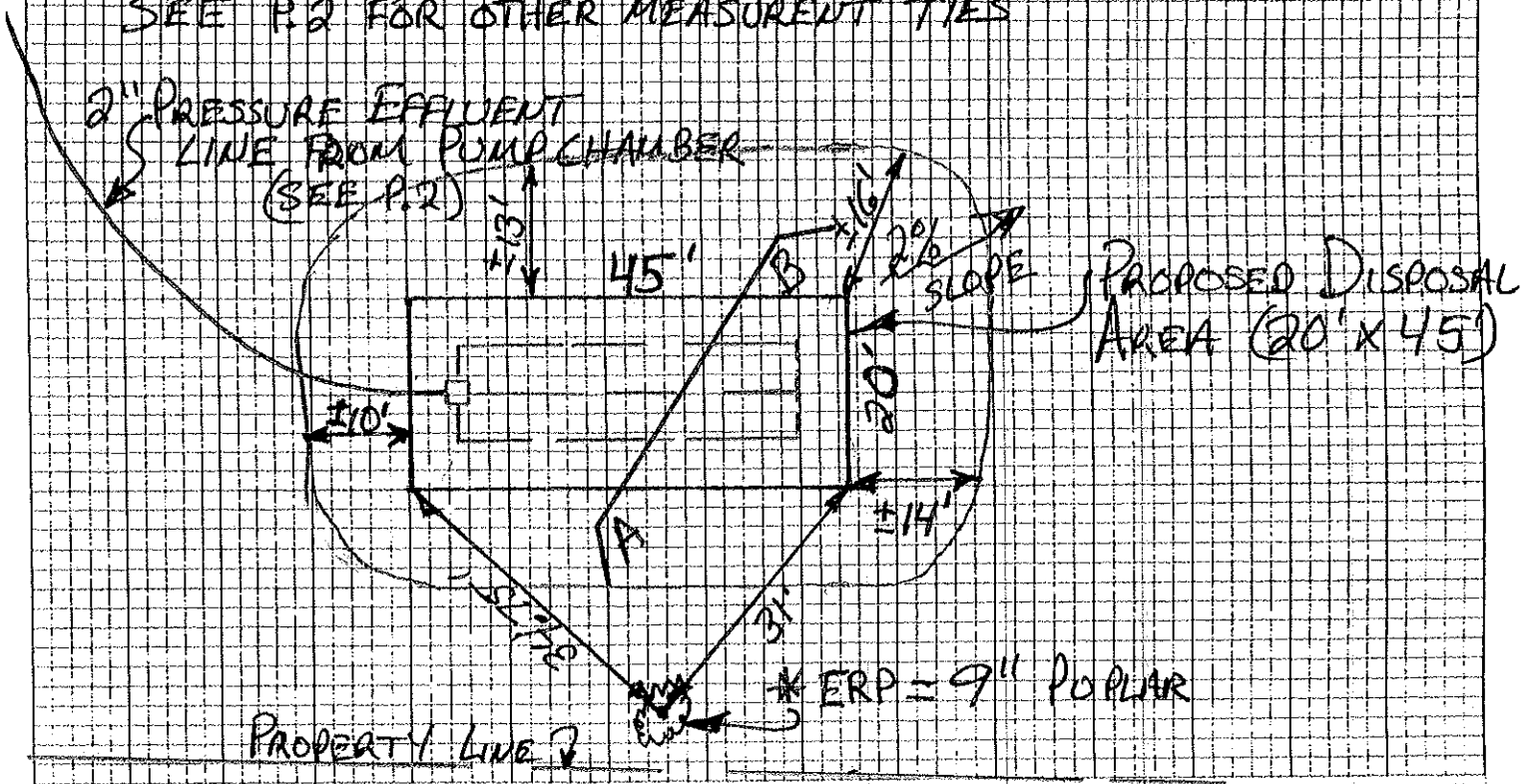
SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.

NOTE:
ALL TIES, ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION
SEE P.2 FOR OTHER MEASUREMENT TIES

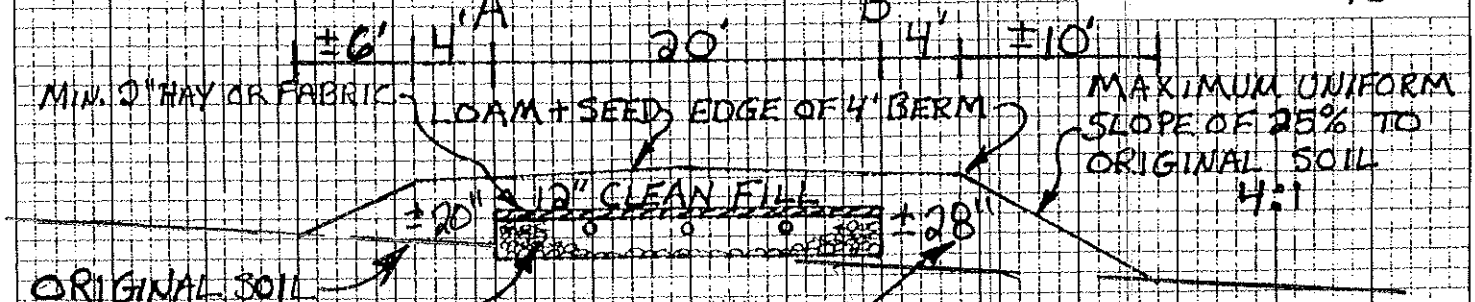


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	±20"	Finished Grade Elevation	-30"	Location & Description: 9" POPLAR W/NAIL 51" ABOVE GROUND
Depth of Fill (Downslope)	±28"	Top of Distribution Pipe or Proprietary Device	-42"	Reference Elevation: 0"
		Bottom of Disposal Area	-54"	

FILL DEPTHS WILL VARY

DISPOSAL AREA CROSS SECTION

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



REMOVE VEGETATION + SCARIFY ALL FILL AREAS GENTLY

*CREATE TRANSITION LAYER WHEN APPROPRIATE

12" CLEAN CRUSHED STONE (1½" DIA.)

FILL SHALL BE CLEAN GRAVELLY SAND PER TABLE 800.1 OF CODE

STATE OF MAINE
VAUGHN L. SMITH
226
LICENSED
SITE EVALUATOR

Site Evaluator Signature

12/2/12
Date