M4 L62A

Department of Human Services
Division of Health Engineering
(207)289-3826

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation	Augusta.
Street Division Lot #	Cross Hill Rd.

PROPERTY OWNERS NAME

~~623-4933~~ 623-4201

Last: Poulin First: Paul E. Jr.

Applicant Name:	Poulin, Paul E.
Mailing Address of Owner/Applicant (If Different)	Augusta Me. 04330

Caution: Permit Required

Date Permit Issued: AUGUST 7 1989 $ 60.00 FEE Double Fee Charged

TOWN COPY

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.

Paul E. Poulin Jr. 7/19/91

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.

John Faccianelli 7-26-91

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

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

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

SIZE OF PROPERTY	ZONING
200' X 200'	Rural

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

well To be drilled

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

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

SIZE: 1,000 GALS.

Zabel Filter Recomended

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.)

3 bedroom

Moderate Flow

20' x 60'

DESIGN FLOW: 360. (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
2	C

DEPTH TO LIMITING FACTOR: 25".

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

1. ☒ BED 1200 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 11-9-1989 (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.

[signature] 241 11-15-1989

Site Evaluator Signature SE# Date

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: Augusta

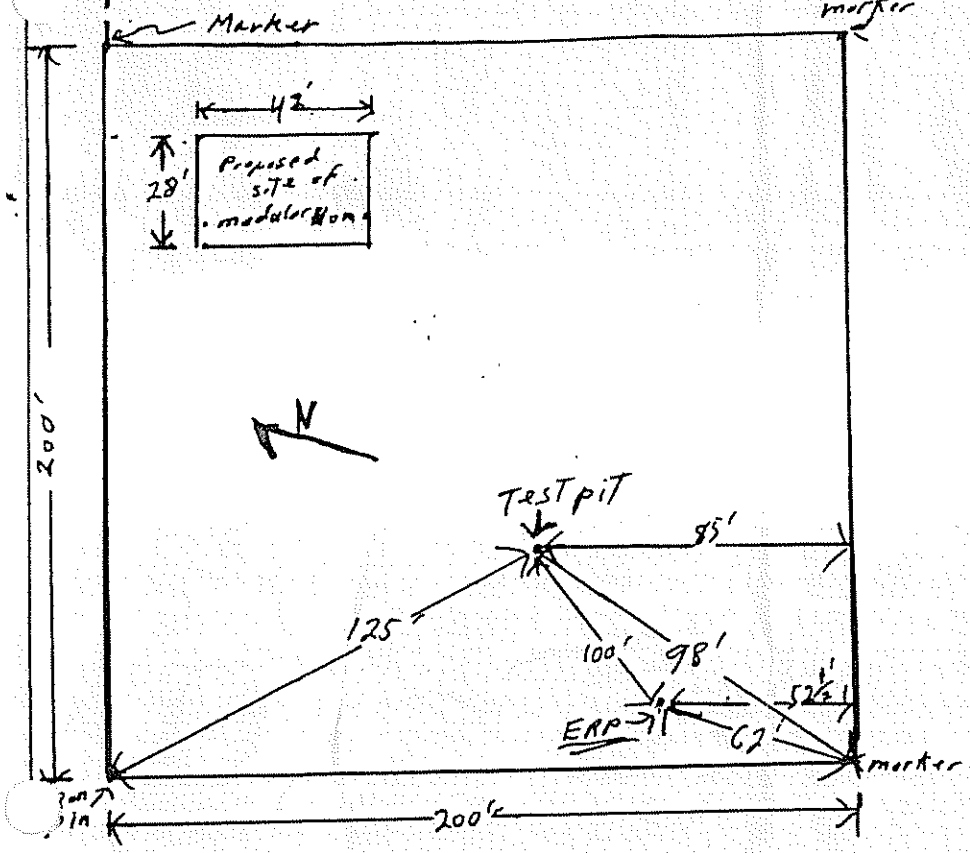
Street, Road, Subdivision: Cross Hill Road

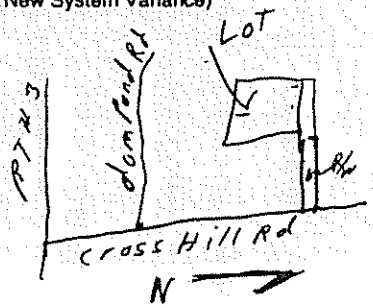
Owners Name: Paul Poulin JR.

SITE PLAN

Scale 1" = 50' Ft.

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





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

Observation Hole: Back Hoe ☑ Test Pit ☐ Boring

3-0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
Fine Sandy Loam		Brown	
	Friable	Red brown	
Sandy Loam		Yellow Brown	
Fine Loamy Sand			
Fine Loamy Sand with Cobbles		Olive	Common distinct mottles

Soil	Classification	Slope	Limiting Factor	
2 (Profile)	C (Condition)	9 %	25"	☑ 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

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

[signature] — Evaluator Signature

241 — SE #

11-15-1989 — Date

HHE-200 Rev. 1 84

Department of Human Services
Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

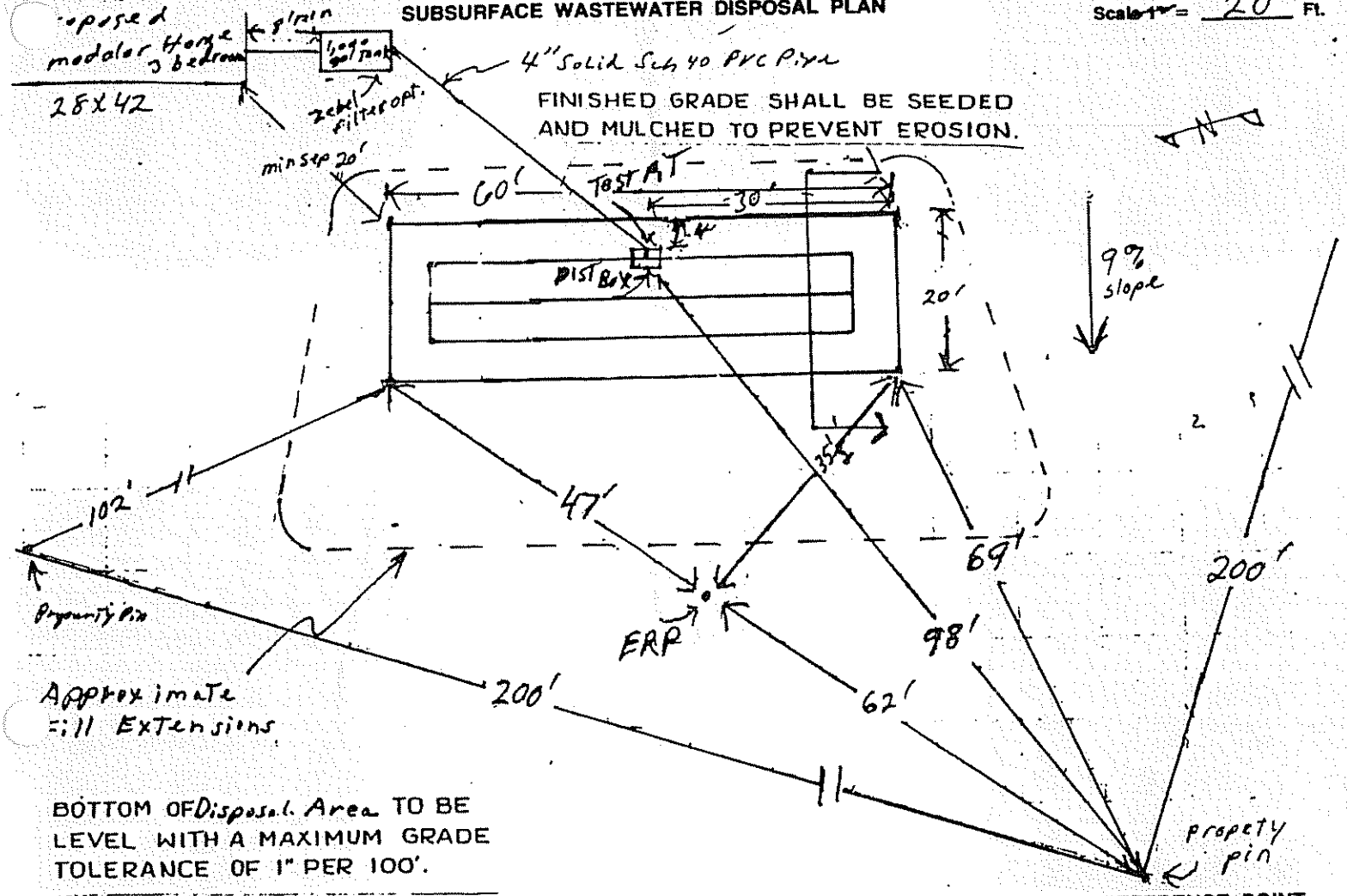
Town, City, Plantation: Augusta

Street, Road, Subdivision: CROSS Hill Road

Owners Name: Paul E. Poulin JR.

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



BOTTOM OF Disposal Area TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.

FILL REQUIREMENTS

Depth of Fill (Upslope): 11'

Depth of Fill (Downslope): 32'

CONSTRUCTION ELEVATIONS

Reference Elevation is: 0"

Bottom of Disposal Area: -45"

Top of Distribution Lines or Chambers: -33"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

ERP Nail in Tag #74 6" oak Tree

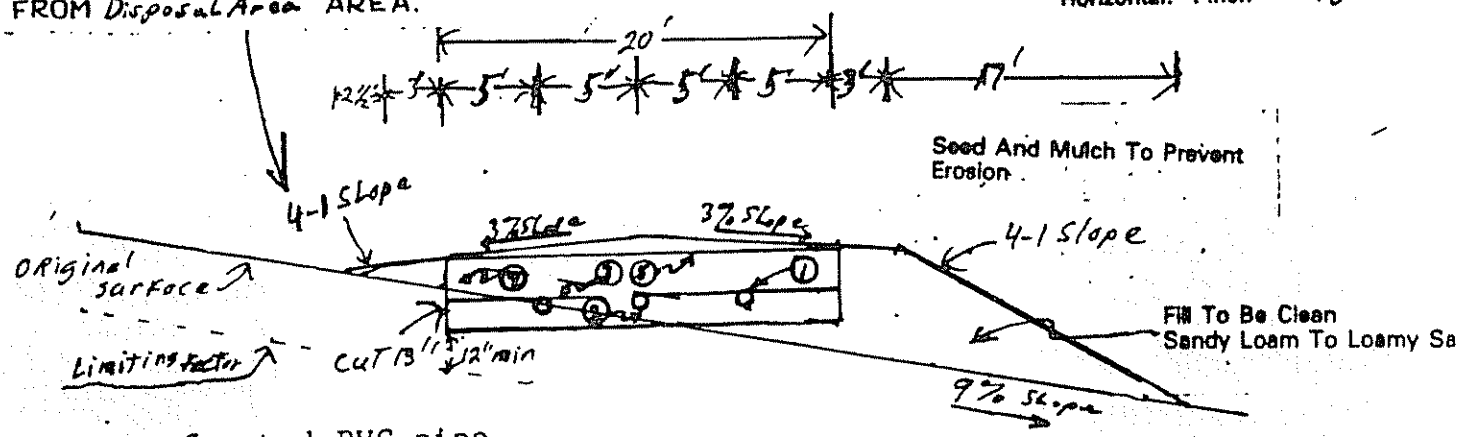
PROVIDE FOR SURFACE DRAINAGE AWAY FROM Disposal Area AREA.

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.

Horizontal: 1 inch = 10 Ft.



① 4-inch perforated PVC pipe
② 12" crushed rock as per Table 11-2
③ 2" compacted hay
④ 8" clean sand
⑤ 4" loam

REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER Disposal Area AND FILL EXTENSION AREAS.

11-15-89