SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation	Augusta
Street or Road	RT. #3 N. Belfast AVE
Subdivision, Lot #	

>> Caution Permit Required -- Attach in Space Below <<

AUGUSTA 5358 TOWN COPY
Date Permit Issued: 8/1/2004
$ 100.00 ☐ If Double Fee Charged
FEE
Local Plumbing Inspector Signature
L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI) Wilcox John J. ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 3493 N. Belfast AVE. Augusta, Me. 04330

Daytime Tel. # 622-4438

Municipal Tax Map # 4 Lot # 11e

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.

John Wilcox 7/17/04
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.

Local Plumbing Inspector Signature — (1st) Date Approved — (2nd) Date Approved

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

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 Approval

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

68 ☐ 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

Prop.
- ☒ 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 gallons

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 1050 ☒ 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

300 gallons per day

BASED ON:
- ☒ 1. Table 501.1 (dwelling unit(s)
- ☐ 2. Table 502.2 (other facilities)

SHOW CALCULATIONS -- for other facilities --

- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
7 / C / 1

at Observation Hole # 2

Depth 30" Elevation -87"

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

SITE EVALUATOR STATEMENT

I certify that on 7/17/04 (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).

David P. Roque — Site Evaluator Signature
154 — SE #
7/17/04 — Date
David P. Roque — Site Evaluator Name Printed
622-7487 — Telephone #

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

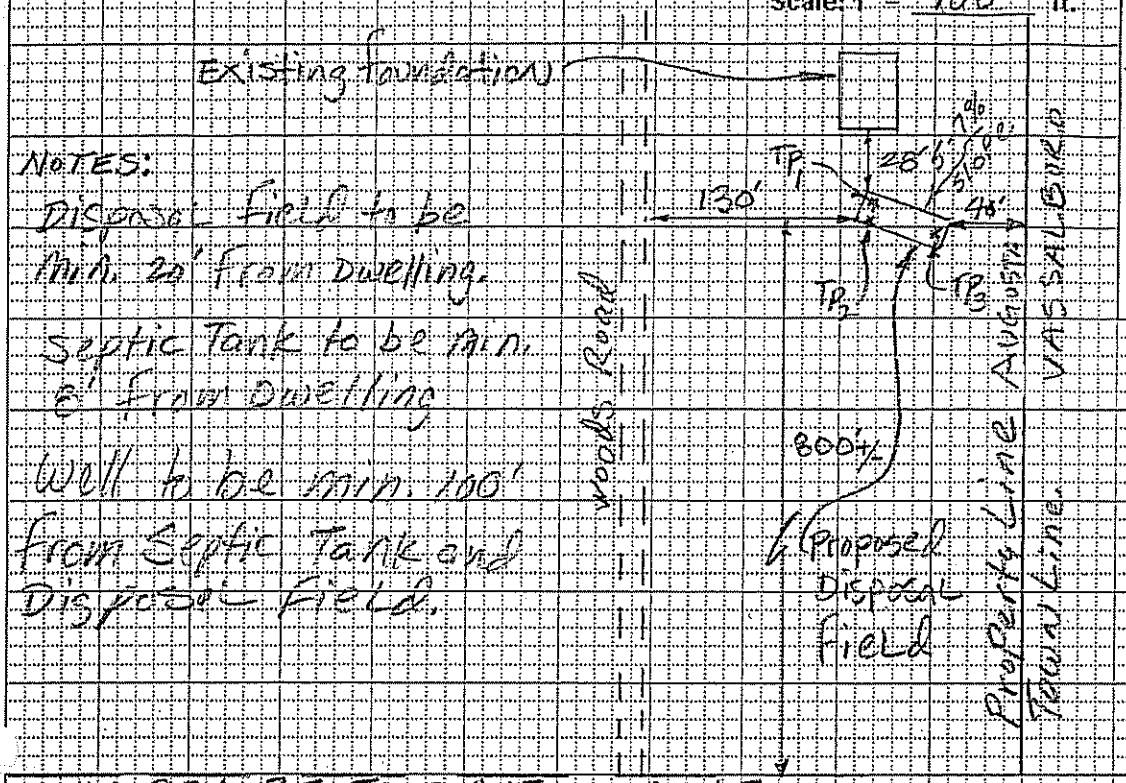
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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	North Belfast AVE.	John Wilcox

SITE PLAN

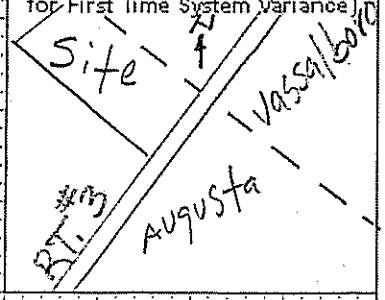
Scale: 1" = 100 ft.



NOTES:
Disposal field to be min. 20' from Dwelling.
Septic Tank to be min. 8' from Dwelling
Well to be min. 100' from Septic Tank and Disposal Field.

NORTH BELFAST AVE. RT. #3

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+3 ☒ Test Pit ☐ Boring

None " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–12	gravelly Sandy Loam	Friable	Dark yellow Brown	None observed
12–30	Very gravelly Loamy Sand		Brown	
30–42	Limit of Excavation			

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
4	B	5-7	N/A	☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Observation Hole # 2 ☒ Test Pit ☐ Boring

none " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–12	gravelly Sandy Loam	Friable	Dark yellow Brown	
12–30	very gravelly Loamy Sand		Brown	
30–42	fine Sand & Silt	Firm	Olive	Common Dist.

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
7	C	5-7	30	☒ Groundwater ☒ Restrictive Layer ☐ Bedrock

David P. Rocque — Site Evaluator Signature
154 — SE #
7/17/04 — Date

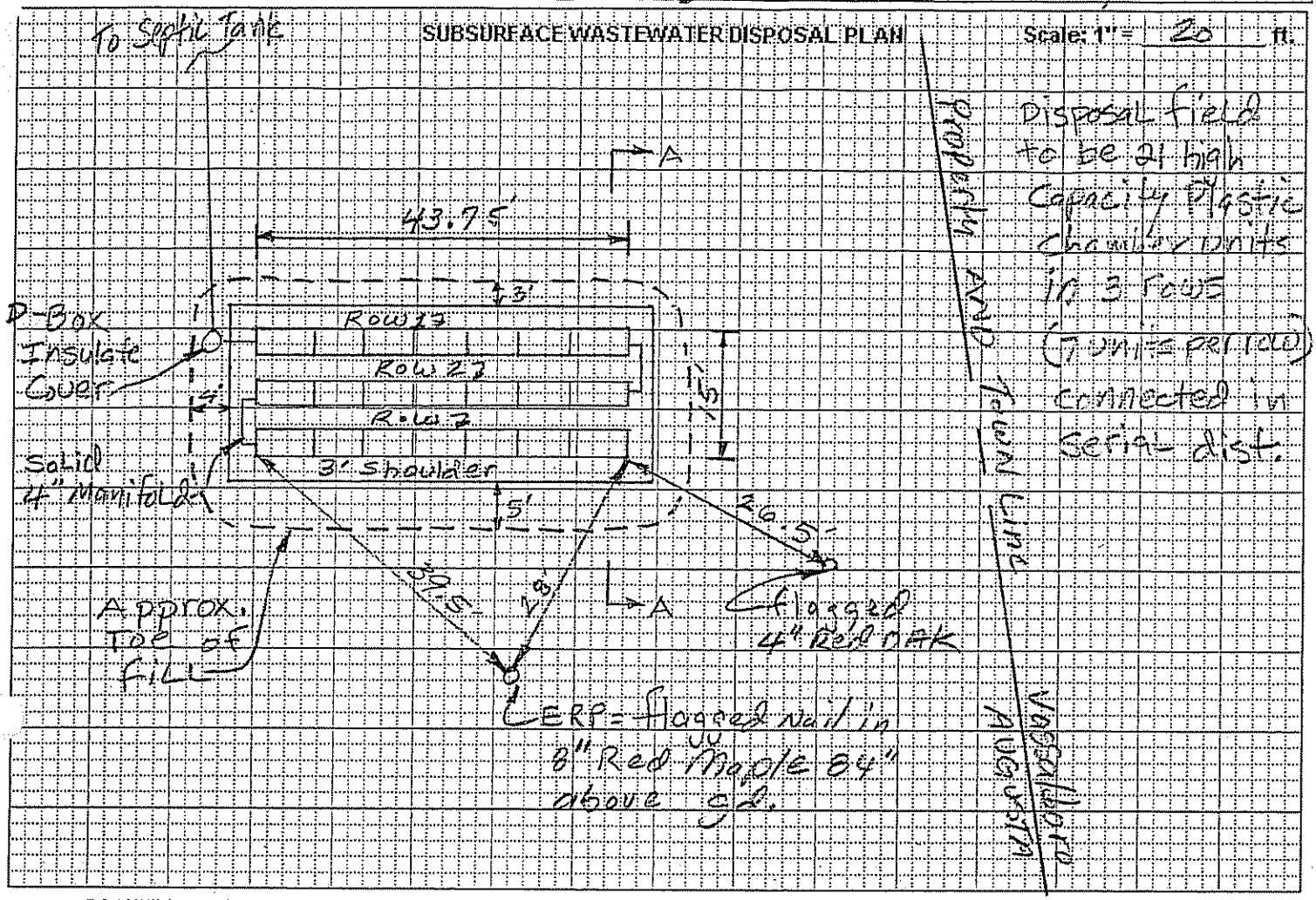
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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	North Belfast AVE.	John Wilcox

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	6"-12"	Finished Grade Elevation	See below	Location & Description: flagged nail in 8" Maple 84" above gd.
Depth of Backfill (downslope)	8"-10"	Top of Distribution Pipe or Proprietary Device	____"	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	____"	Reference Elevation is: 0.0" or: ____

DISPOSAL FIELD CROSS-SECTION

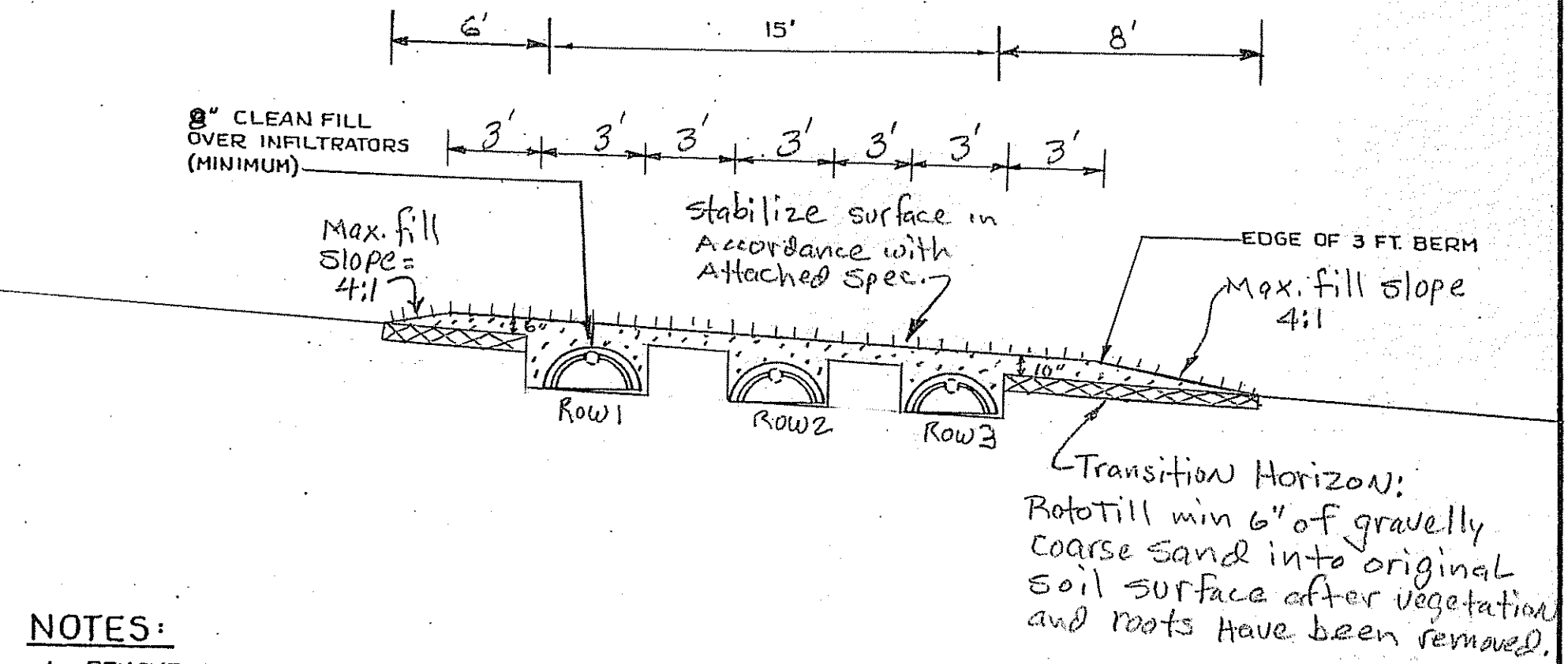
Scales: Vertical: 1" = ____ ft. Horizontal: 1" = ____ ft.

Elevations based on 12" high chambers
Elevations may vary depending on brand used.

Row #	Bottom Chambers	Top Chambers	Finish Grade
1	-63"	-47"	-39"
2	-68"	-52"	-44"
3	-73"	-57"	-49"

David F. Krause — Site Evaluator Signature
154 — SE #
7/17/04 — Date

INFILTRATOR CROSS SECTION 5-6%



NOTES:

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER INFILTRATORS AND FILL EXTENSION AREAS.
2. BOTTOM OF INFILTRATORS TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM INFILTRATOR AREA.
4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

ORIGINAL GRADE 5-7%

FILL UNDER INFILTRATORS TO BE N/A TEXTURE.

FILL AROUND INFILTRATORS TO BE Gravelly Coarse Sand TEXTURE.

SITE EVALUATOR: DAVID P. ROCQUE		
OWNER: John Wilcox	NUMBER OF INFILTRATORS: 21	PERCENT SLOPE: 5-7%
LOCATION: AUGUSTA North Belfast AVE.	ELEVATIONS: REFERENCE PT. 0"	BOTTOM TRENCH #1 "63"
DATE: 7/17/04 / SCALE: 1 INCH = 5 FEET	BOTTOM TRENCH #2 -68"	BOTTOM TRENCH #3 -73"