# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

**PROPERTY LOCATION**

City Town or Plantation: AUGUSTA
Street or Road: ROUTE 3 North Belfast Ave
Subdivision, Lot #: BICENTENNIAL PARK

**OWNER/APPLICANT INFORMATION**

Name (last, first, MI) Owner: CITY OF AUGUSTA ☐
Applicant: DEPARTMENT OF COMMUNITY SERVICES
Mailing Address of ☒ Owner ☐ Applicant: 16 CONY STREET, AUGUSTA, ME 04330
Daytime Tel #:

**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 or Applicant: [signature] Date: 5/2/02

**>> Caution: Permit Required -- Attach In Space Below <<**

AUGUSTA 4857 TOWN COPY
Date Permit Issued: 5/3/02 $ 100.00 FEE ☐ Double Fee Charged
Local Plumbing Inspector Signature: [signature] L.P.I. # 800

Rough insp. 5-15-02 GRF.

Municipal Tax Map # 4 Lot # 167

**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. ☒ 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**
± 30 ☐ 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 Approval

**DISPOSAL SYSTEM TO SERVE**
1. ☐ Single Family Dwelling Unit, No. of Bedrooms:
2. ☐ Multiple Family Dwelling, No. of Units:
3. ☒ Other: PARK AND PICNIC AREA
SPECIFY

**DISPOSAL SYSTEM COMPONENT(S)**
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:

**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 2-1000 gallons

**SOIL DATA & DESIGN CLASS**
PROFILE CONDITION DESIGN
2 / AIII /
at Observation Hole # 1
Depth 30 Elevation
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. ☐ 11-20 load
4. ☐ Other:
SIZE 3000 ☒ sq. ft. ☐ lin. ft.

**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

**GARBAGE DISPOSAL UNIT**
1. ☒ No 2. ☐ Maybe
2. ☐ Yes >> Specify one below:
a. ☐ Multi-compartment Tank
b. ☐ Tanks in Series
c. ☐ Increase in Tank Capacity
d. ☐ Filter on Tank Outlet

**PUMPING**
1. ☐ Not Required
2. ☒ May Be Required
3. ☐ Required >> Specify only for engineered or experimental systems:
DOSE: gallons

**DESIGN FLOW**
805 gallons per day
BASED ON
1. ☐ Table 901.1 (dwelling unit(s)
2. ☒ Table 901.2 (other facilities)
SHOW CALCULATIONS
-- for other facilities --
PARKS - 5 GPD/ATTENDE
155 ATTENDEES
+ 2 EMPLOYEES
3. ☐ Section 903.0 (meter readings)
ATTACH WATER METER DATA

**SITE EVALUATOR STATEMENT**

I Certify that on 9/7/01 (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 # 226 Date: 9/25/01
Site Evaluator Name Printed: VAUGHN L. SMITH Telephone #: 724-5635

Lee Bros. Construction

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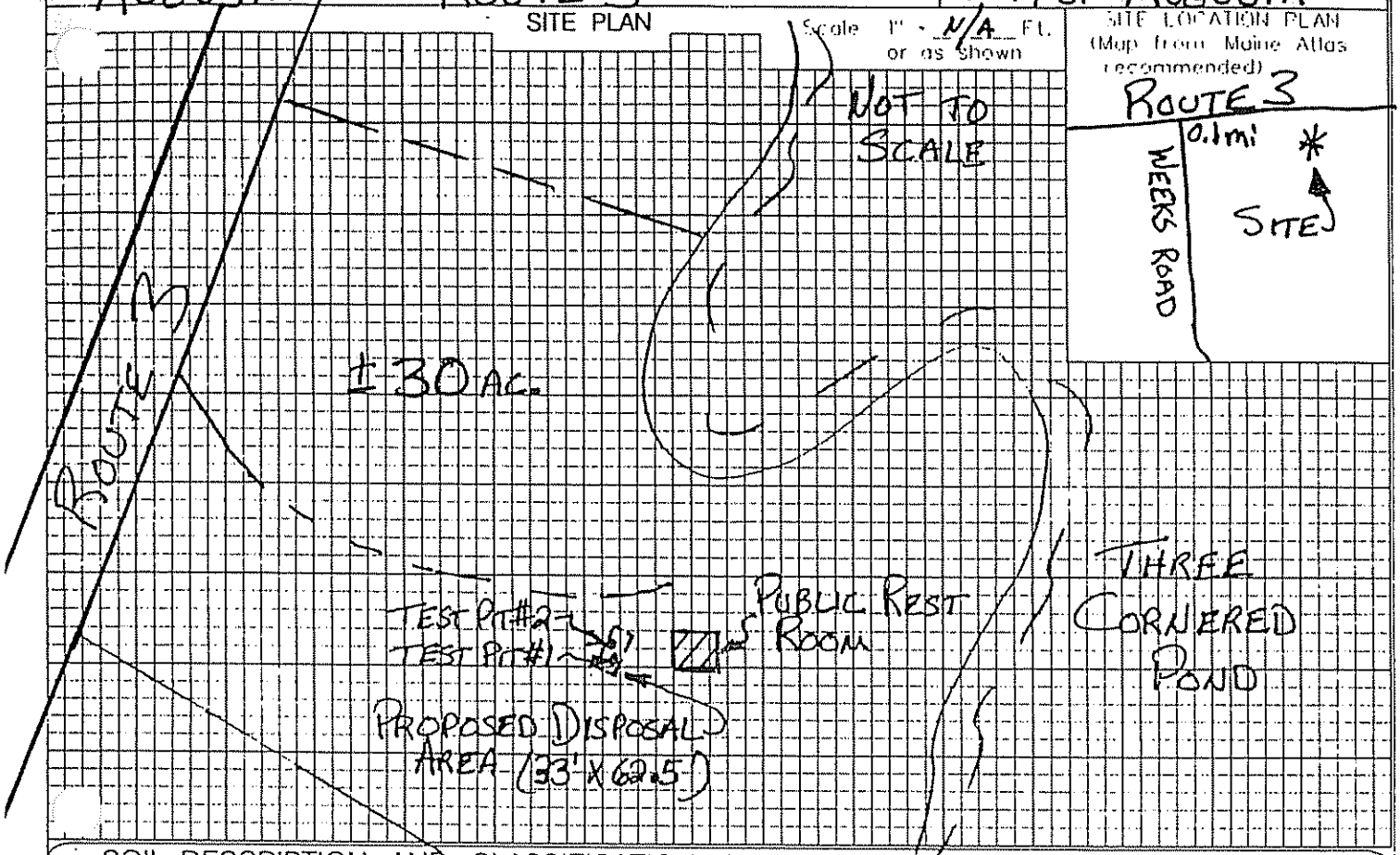
Town, City, Plantation: AUGUSTA | Street, Road Subdivision: ROUTE 3 | Owner's Name: CITY OF AUGUSTA

SITE PLAN

Scale 1" = N/A 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
2 " Depth of Organic Horizon Above Mineral Soil

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–30 | VERY STONY SANDY LOAM | FRIABLE | BROWN. YELLOWISH BROWN | NONE |
| 30 | XXX | XXX | XXX | XXX |
| 30–50 | | BEDROCK REFUSAL @ 30" | | |

| Soil Classification Profile | Condition | Slope | Limiting Factor | |
|---|---|---|---|---|
| 2 | AIII | 7 | 30" | ☐ Ground Water ☐ Restrictive Layer ☒ Bedrock ☐ Pit Depth |

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

| Depth below mineral soil surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0–30 | COBBLY SANDY LOAM | FRIABLE | STRONG BROWN | NONE |
| 30 | XXX | XXX | XXX | XXX |
| 30–50 | | BEDROCK REFUSAL @ 36" | | |

| Soil Classification Profile | Condition | Slope | Limiting Factor | |
|---|---|---|---|---|
| 2 | AIII | 15 | 36" | ☐ Ground Water ☐ Restrictive Layer ☒ Bedrock ☐ Pit Depth |

Vaughn L. Smith — Site Evaluator Signature | 226 | 9/25/01

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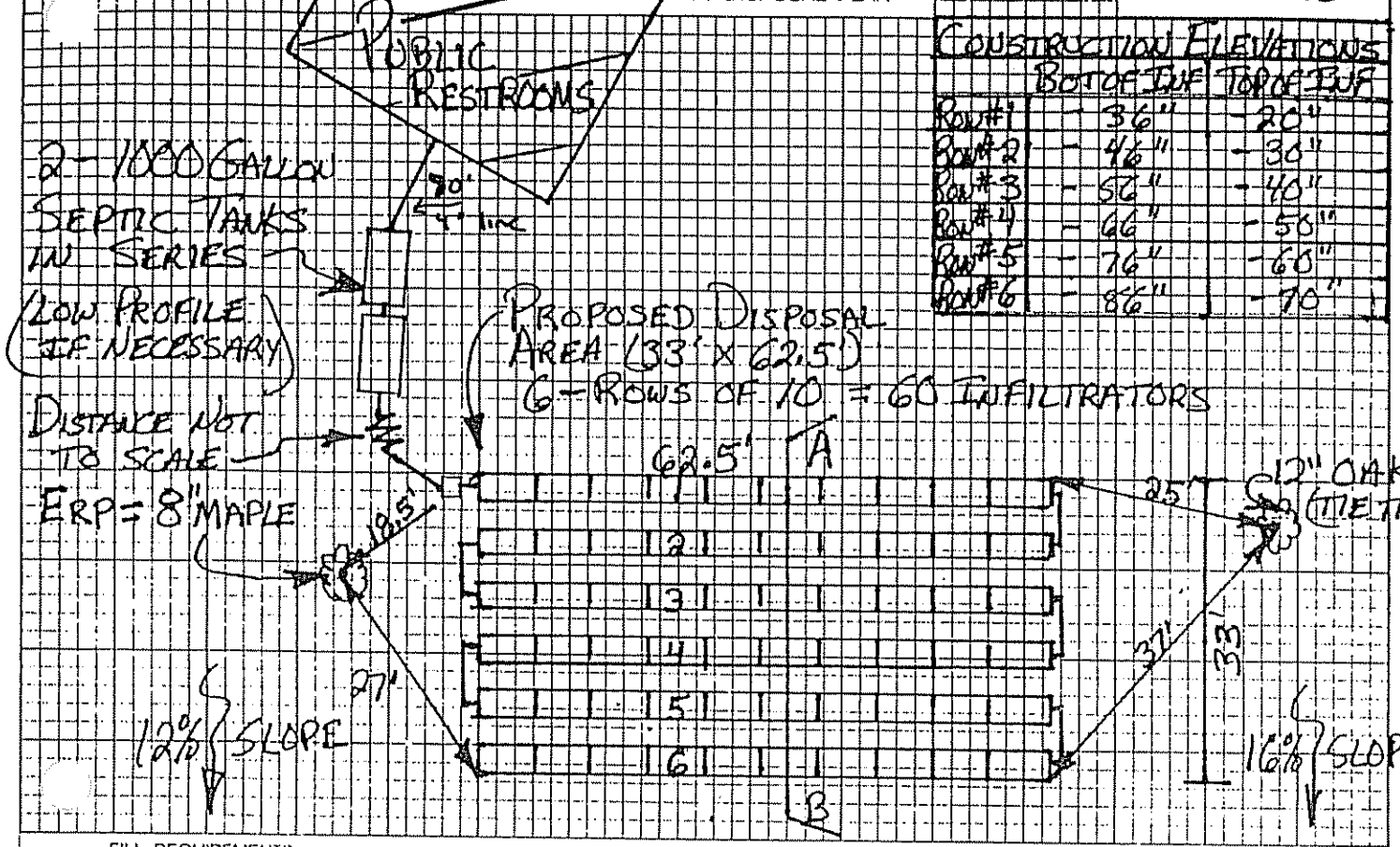
## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.

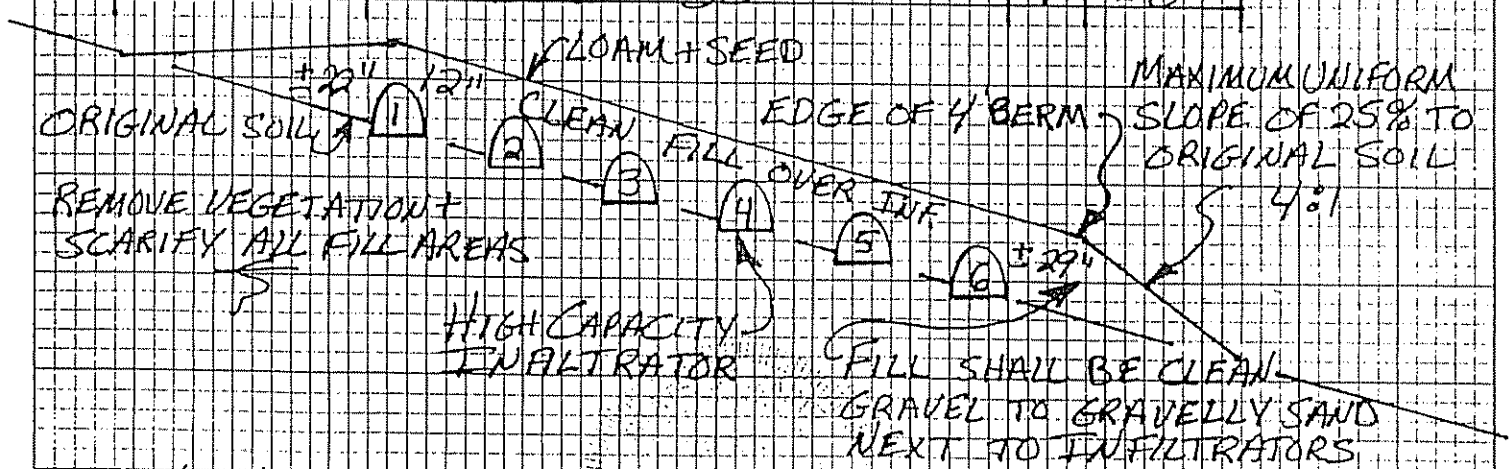
| CONSTRUCTION ELEVATIONS | BOT OF INF | TOP OF INF |
|---|---|---|
| ROW #1 | -36" | -20" |
| ROW #2 | -46" | -30" |
| ROW #3 | -56" | -40" |
| ROW #4 | -66" | -50" |
| ROW #5 | -76" | -60" |
| ROW #6 | -86" | -70" |




| FILL REQUIREMENTS | | CONSTRUCTION ELEVATIONS | | ELEVATION REFERENCE POINT | |
|---|---|---|---|---|---|
| Depth of Fill (Upslope) | 22" | Finished Grade Elevation | | Location & Description | 8" MAPLE W/NAIL 29" ABOVE GROUND |
| Depth of Fill (Downslope) | 29" | Top of Distribution Pipe or Proprietary Device | | Reference Elevation | 0" |
| FILL DEPTHS WILL VARY | | Bottom of Disposal Area | SEE ABOVE | | |

## DISPOSAL AREA CROSS SECTION

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




Site Evaluator Signature: Vaughn L. Stitt

SE: 226

Date: 9/25/01