SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

05249728

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Division Lot #	Route 3 No Bellast Ave

PROPERTY OWNER'S NAME

Last: Garside, Sr First: William H.

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

~~This permit is issued Permit # 1635 issued 6/19/89~~

AUGUSTA PERMIT # 1,635 TOWN COPY

Date Permit Issued 6 9 89 $ 48.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 808

This set changed. See back set. 7-31-89

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.

William H Garside Sr. 6/5/89

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.

Gary R. Fuller Oct. 6, 1989

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
45,000'	

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. ☐ Requires 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

Drilled well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

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

SIZE 1500 GALS.

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 & ELEVATION)
3. ☐ REQUIRED

DOSE: 107 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING) EMPLOYEES, WATER RECORDS, ETC.)

Two 2-bedroom apts

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 20 "

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

1. ■ BED 1500 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 454 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 5/23/89 (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.

Wm W. Richard 51 5/23/89

Site Evaluator Signature SE# Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

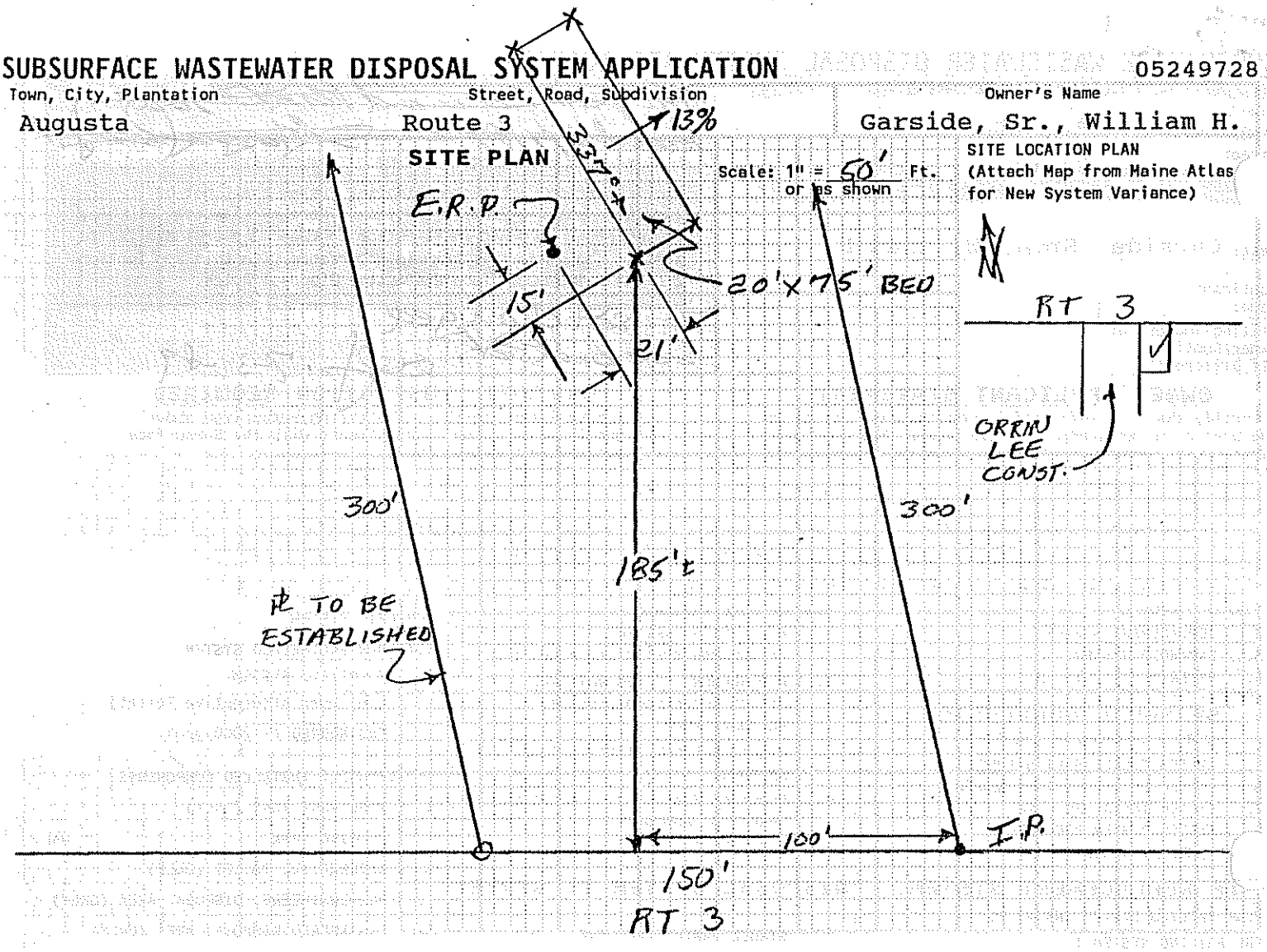
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

05249728

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Route 3	Garside, Sr., William H.

SITE PLAN

Scale: 1" = 50' Ft. or as shown



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

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 1 ☐ Test Pit ☒ Boring

+2" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–6	S.L.	FRIABLE	B	
6–20				20"
20–50	G.T.	FIRM	G.B.	

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	C	13 %	20	☒ Ground Water ☐ Restr. Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
		%		☐ Ground Water ☐ Restr. Layer ☐ Bedrock

Site Evaluator Signature

51
SE#

5/23/89
Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

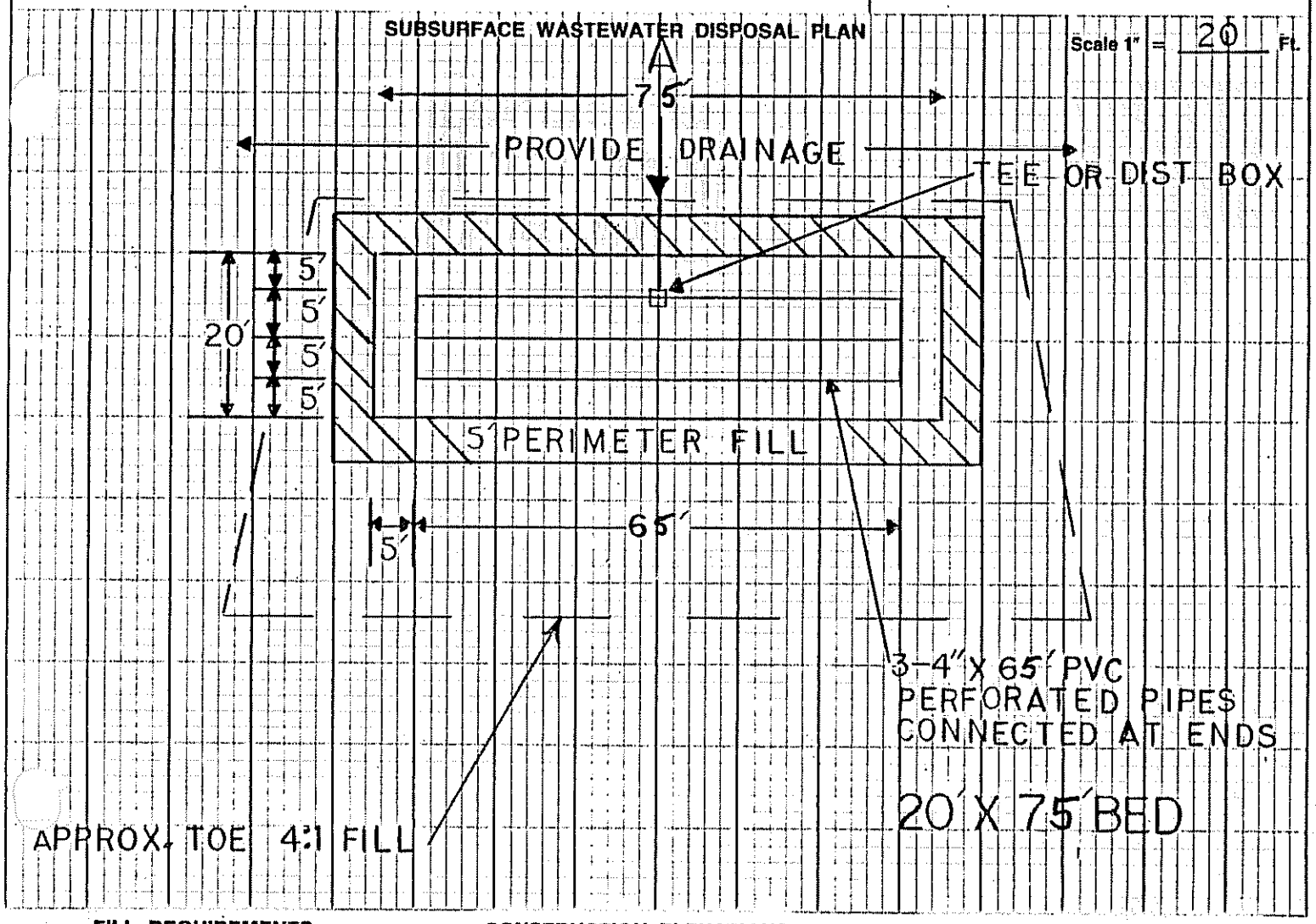
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation | Street, Road, Subdivision | Owners Name

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 16"
Depth of Fill (Downslope) 38+

CONSTRUCTION ELEVATIONS

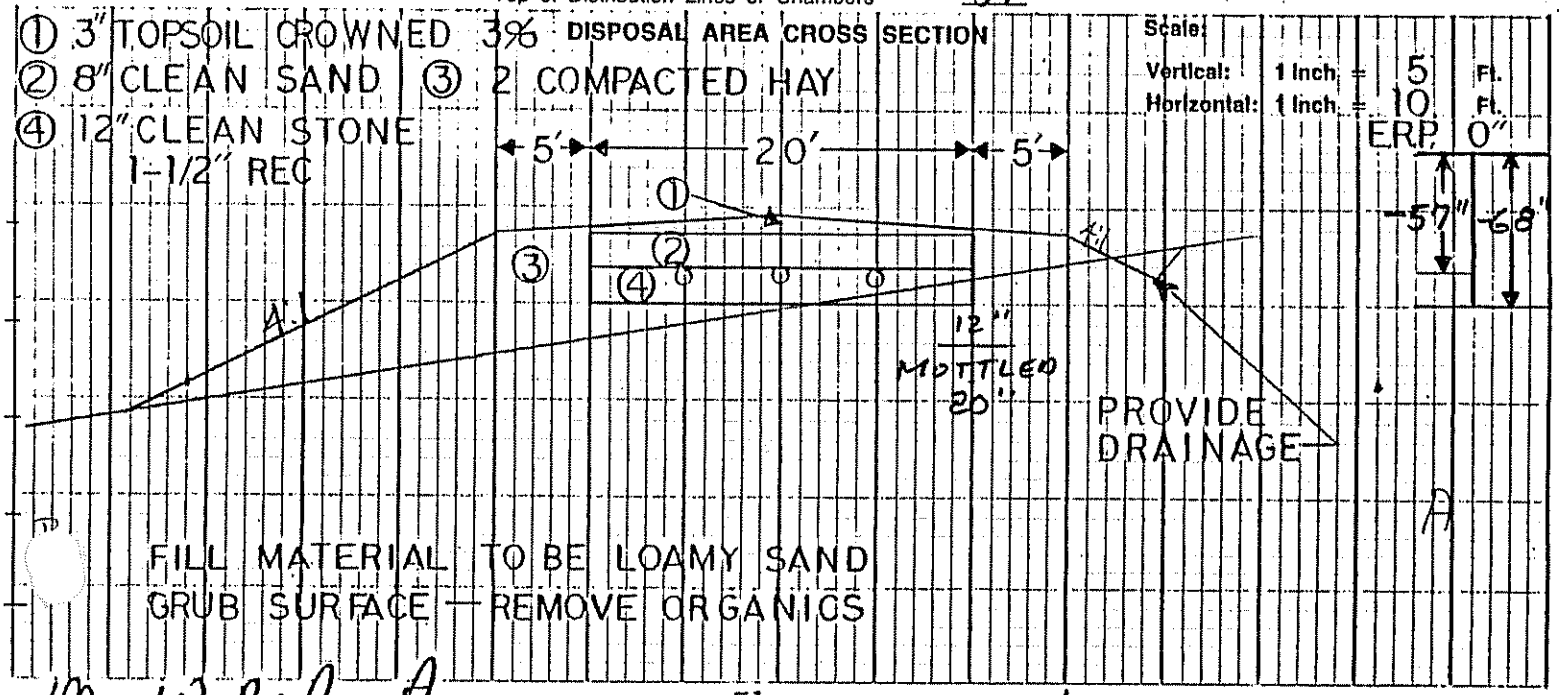
Reference Elevation is 0
Bottom of Disposal Area -68"
Top of Distribution Lines or Chambers -57"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL IN 14" OAK

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5 Ft.
Horizontal: 1 Inch = 10 Ft.



Site Evaluator Signature | SE# 51 | Date 5/23/89

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

07139614

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Route 3

PROPERTY OWNER'S NAME

Last: Garside First: William H.

Applicant Name:	William H. Garside
Mailing Address of Owner/Applicant (If Different)	R-7, B-131 Augusta Me.04330

This permit to amend Permit # 16357 issued 6/9/89. [signature] 7-31-89

CAUTION: PERMIT REQUIRED

The Subsurface Wasterwater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

official copy

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.

William H Garside 7/31/89

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.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

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3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION

to be completed by the LPI

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YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS

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2. ☐ CHAMBER 4. ☐ OTHER _____

SIZE OF PROPERTY	ZONING
45,000'	

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DISPOSAL SYSTEM TO SERVE:

1. ■ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

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COMPLETE SYSTEM

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INDIVIDUALLY INSTALLED COMPONENTS

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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

Drilled Well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

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

SIZE 1000 GALS.

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 & ELEVATION)
3. ☐ REQUIRED

DOSE: 69 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING) EMPLOYEES, WATER RECORDS, ETC.)

~~2 Bedroom~~
3 Bedroom
William W. Rideout gave me a verbal O.K. for the above change. Phone conversation 7/31/89 3:07 P.M.
[signature]

DESIGN FLOW: 300 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 20 "

SIZE RATINGS USED FOR DESIGN PURPOSES

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

DISPOSAL AREA TYPE/SIZE

1. ■ BED 1000 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 5/23/89 (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.

Wm W. Rideout

Site Evaluator Signature

51

SE#

5/23/89

Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

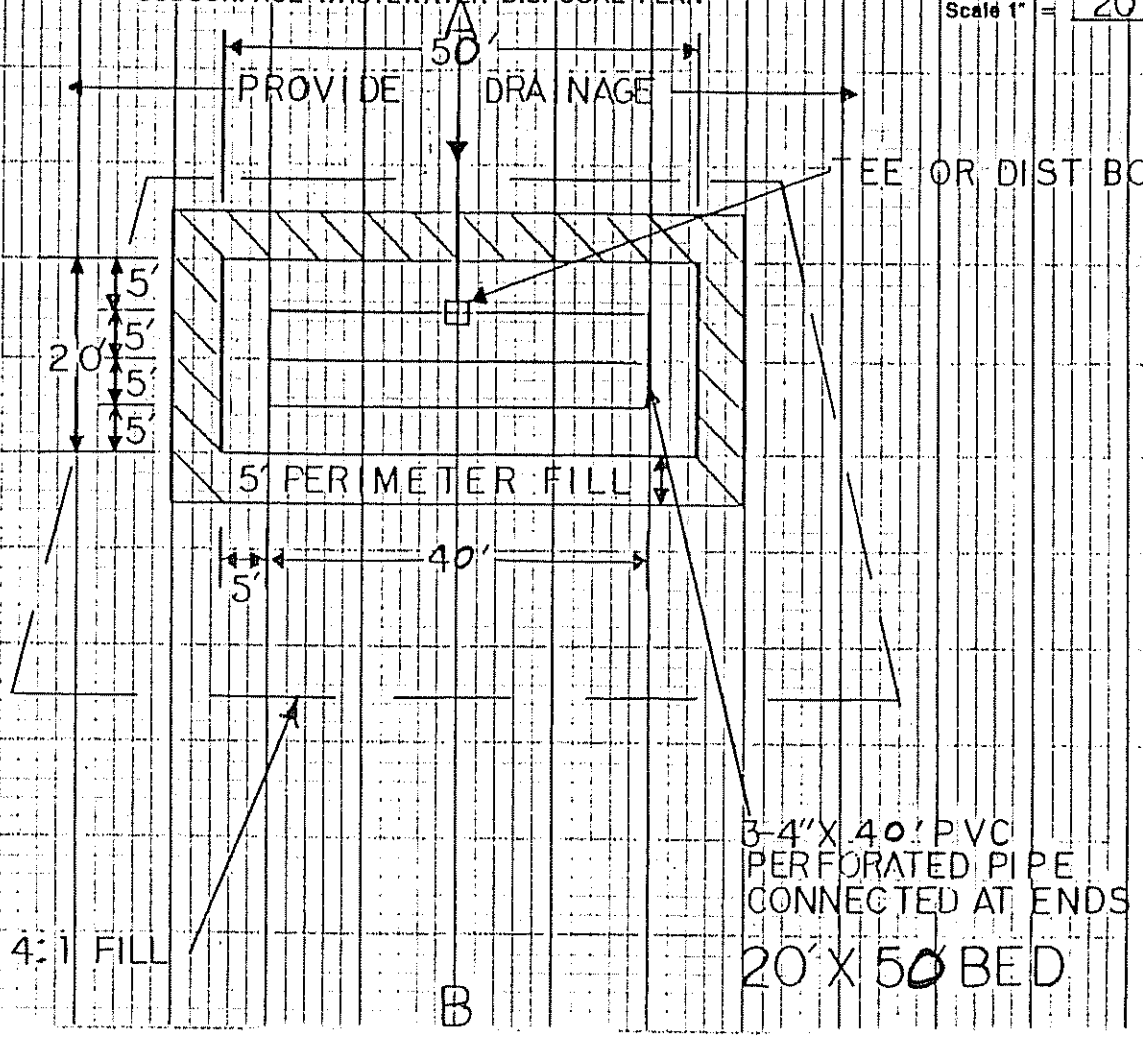
Town, City, Plantation: Augusta

Street, Road, Subdivision: Route 3

Owners Name: Garside, William H.

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	16"	Reference Elevation Is	0	NAIL IN 14" OAK
Depth of Fill (Downslope)	38±	Bottom of Disposal Area	-68"	
		Top of Distribution Lines or Chambers	-57"	

① 3" TOPSOIL CROWNED 3%

② 8" CLEAN SAND ③ 2 COMPACTED HAY

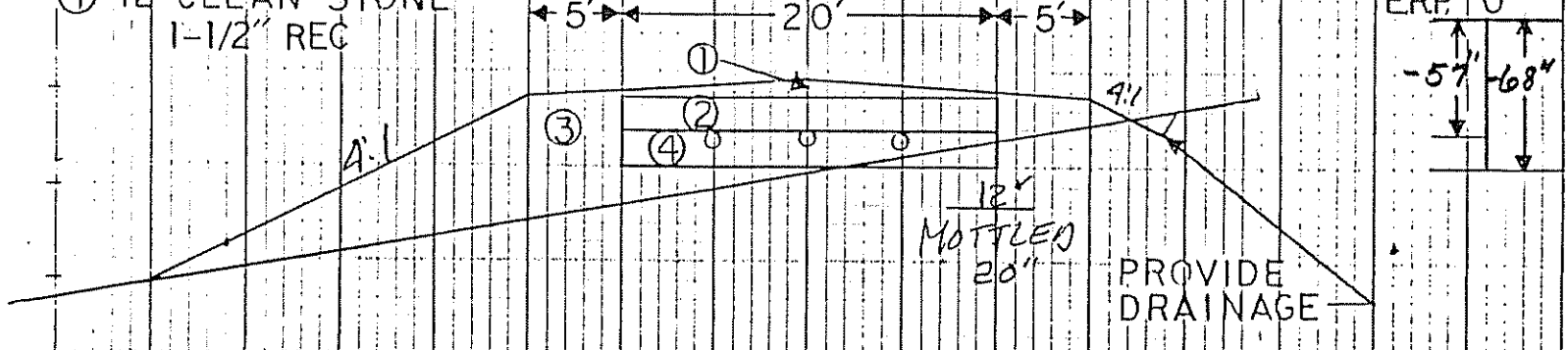
④ 12" CLEAN STONE 1-1/2" REG

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = 5 Ft.

Horizontal: 1 Inch = 10 Ft.



FILL MATERIAL TO BE LOAMY SAND

GRUB SURFACE — REMOVE ORGANICS

3

A

Site Evaluator Signature: [signature]

SE#: 51

Date: 05/23/89

HHE-200 Rev. 1/84