M8L8

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Division Lot #	Rt 3

PROPERTY OWNERS NAME

Maine Woods Furniture

Last: Higgins First: Norman

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	RR 7 Box 217 N. Belfast Ave Augusta

AUGUSTA 2170 DB TOWN COPY

Date Permit Issued 6/11/91 $ 40.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 1550

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.

Norman R. Higgins

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 7.25.91

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
~2 ac±	Commercial

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 Commercial
   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
Proposed Drilled

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC: ☒ Regular or ☒ Low Profile
2. ☐ AEROBIC

SIZE: 750 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 AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
6 Employees
w/o Shower
15 gpd
x 6

DESIGN FLOW: 90 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
2	A III/C

DEPTH TO LIMITING FACTOR: 28.

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 150 Sq. Ft.
   ☐ REGULAR ☐ H-20 in Fill
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 5/8/91 (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.

Site Evaluator Signature — SE# 201 — Date 5/8/91

(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

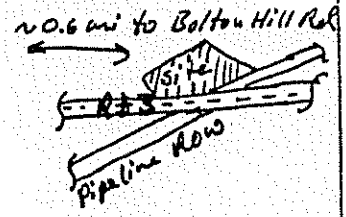
Street, Road, Subdivision: Rt 3

Owners Name: Higgins

SITE PLAN

Scale 1" = 50' Ft.

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



See Attached Page 2a

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

Observation Hole TP #1 ☒ Test Pit ☐ Boring

2" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0	Very		Dk Br	
6	Stoney	LS		
10	fine		Dk orange	
15	Sandy		Yl Brown	
20	loam	Friable		Common distinct
30		large	Rock or	Ledge
40				
50				

Soil	Classification	Slope	Limiting Factor	
2 (Profile)	AIII/L (Condition)	~5 %	28	☒ Ground Water 16" ☐ Restrictive Layer ☒ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

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

Hanson Beaplan
Site Evaluator Signature

201
SE#

5/8/91
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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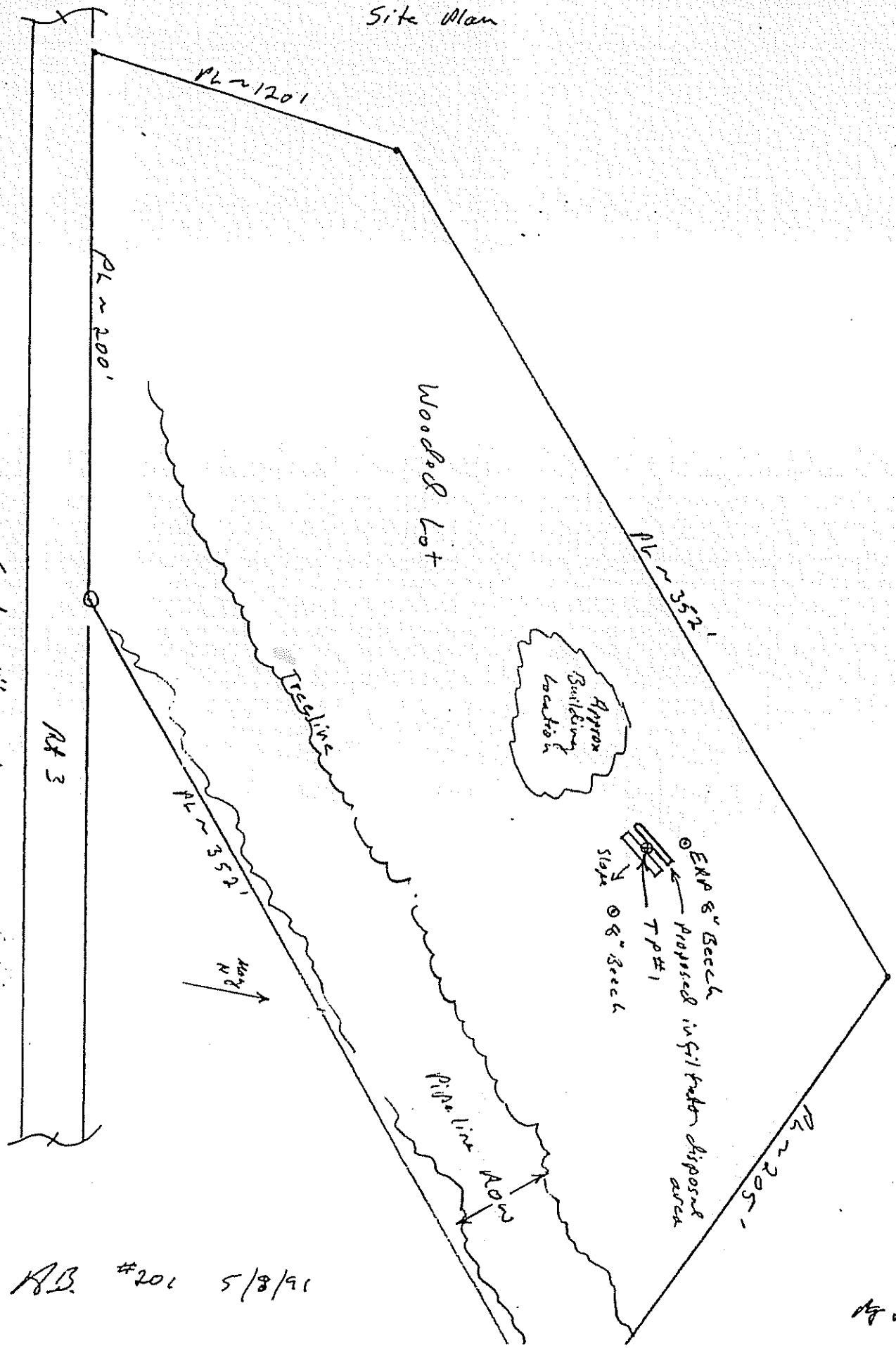
Town, City, Plantation	Street, Road, Subdivision	Owners Name
Augusta	Rt 3	Higgins

Site Plan



RB #201 5/8/91

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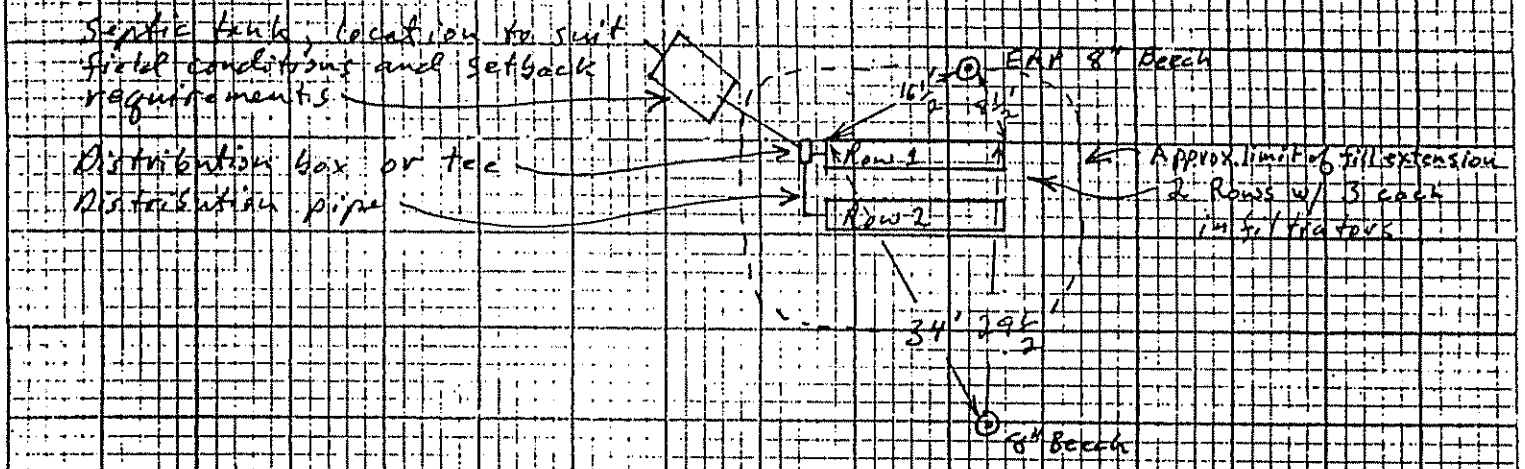
Augusta	Rt 3	Higgins

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) ~20"
Depth of Fill (Downslope) ~20"

CONSTRUCTION ELEVATIONS

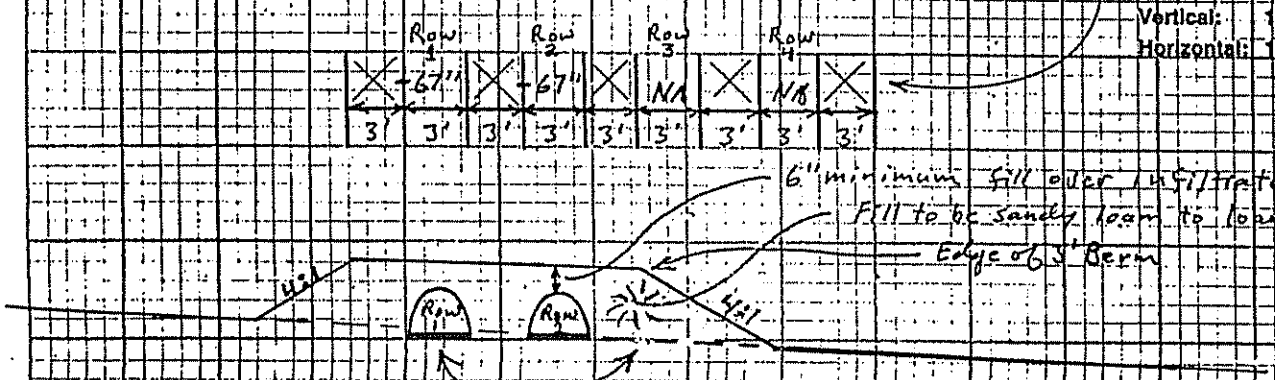
Reference Elevation is 0'00"
Bottom of Disposal Area See below
~~Top of Distribution Lines or Chambers~~ = bottom +15"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

ERP is real flagpole nail in 8" Beech tree shown above

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5' Ft.
Horizontal: 1 inch = 10' Ft.



Remove organic layer and scarify soil surface
Final grade to divert surface water runoff and prevent ponding.
Septic tank to be at least 8' from structures and at least 100' from wells.
Infiltrators to be at least 15' from structures and at least 100' from wells.

Site Evaluator Signature

201
SE#

5/8/91
Date

HHE-200 Rev. 1/84