Bldg. Permit 16351

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA, ME
Street or Road	GERARD ACRES RD.
Subdivision, Lot #	LOT # B 1-06-63

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

AUGUSTA PERMIT # 5826 TOWN COPY

Date Permit Issued 7/7/06 $ 100.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 500

OWNER/APPLICANT INFORMATION

Name (last, first, MI) PERZON, JOHN ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 333 MAIN ST APT. 2, YARMOUTH, ME 04096

Daytime Tel. # 841-5135

Municipal Tax Map # 8 Lot # 53J

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.

Signature of Owner or Applicant 7/5/06 Date

CAUTION: INSPECTION REQUIRED
I have inspected the installation authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules/Application.

Local Plumbing Inspector Signature (1st) date approved 10/5/06 (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 Permit

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
3.07 ☐ 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 TO BE
- ☒ 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 GAL.

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: 900 ☒ 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
270 gallons per day

BASED ON:
- ☐ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS for other facilites

90 GPD/BR (3) = 270

- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	A III	1

at Observation Hole # 1

Depth 24"

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

LATITUDE AND LONGITUDE
at center of disposal area

Lat. 44 d 20 m 01 s

Lon. -69 d 40 m 45 s

if g.p.s, state margin of error: +/- 20'

SITE EVALUATOR STATEMENT

I certify that on 6/12/06 (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	SE # 5364	Date 6/18/06
Site Evaluator Name Printed: RICKY S. PERSHKEN	Telephone Number: 873-5164	E-mail Address: aehrsp@prexar.com

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

HHE-200 Rev. 4/05

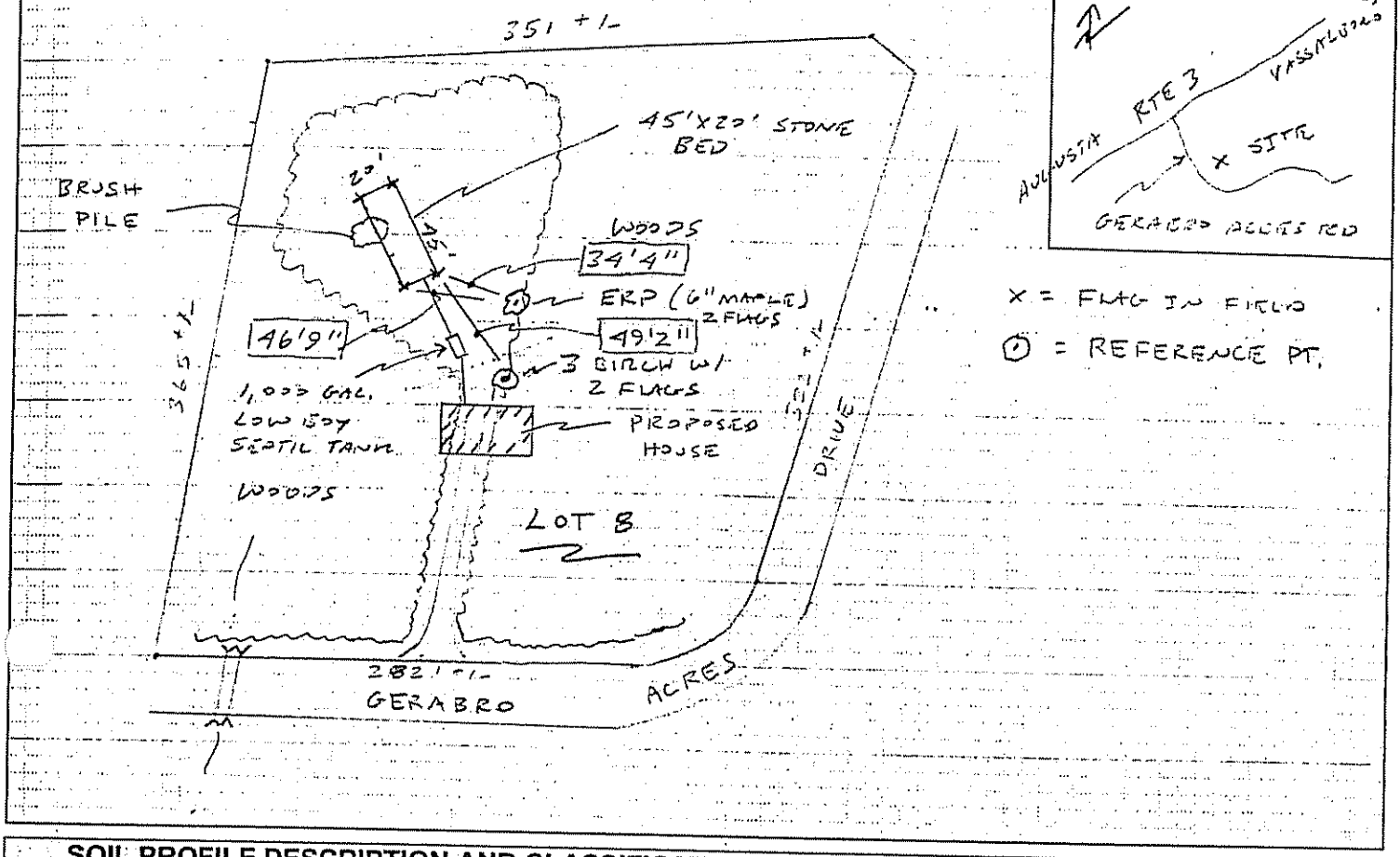
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 11
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	GERABRO ACRES RD.	JOHN PERRON

SITE PLAN

Scale: 1" = 100' ft.



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

Observation Hole # 1 ☒ Test Pit ☒ Boring

0 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	FINE SANDY LOAM	MEDIUM	DARK BROWN	
6–12	FINE TO MED. SANDY LOAM W/ STONES		MEDIUM REDDISH BROWN	NONE
18–24				FEW
24	LEDGE			

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	A III 1	0	24	☐ Groundwater ☐ Restrictive Layer ☒ Bedrock

Observation Hole # 2 ☒ Test Pit ☒ Boring

1 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	FINE S LOAM	MEDIUM	DARK BROWN	
6–12	FINE TO MED S LOAM W/ STONES		MEDIUM REDDISH BROWN	NONE
24	LEDGE			

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	A III 1	2	24	☐ Groundwater ☐ Restrictive Layer ☒ Bedrock

Rudy S. Pendleton
Site Evaluator Signature

S364
SE #

6-13-06
Date

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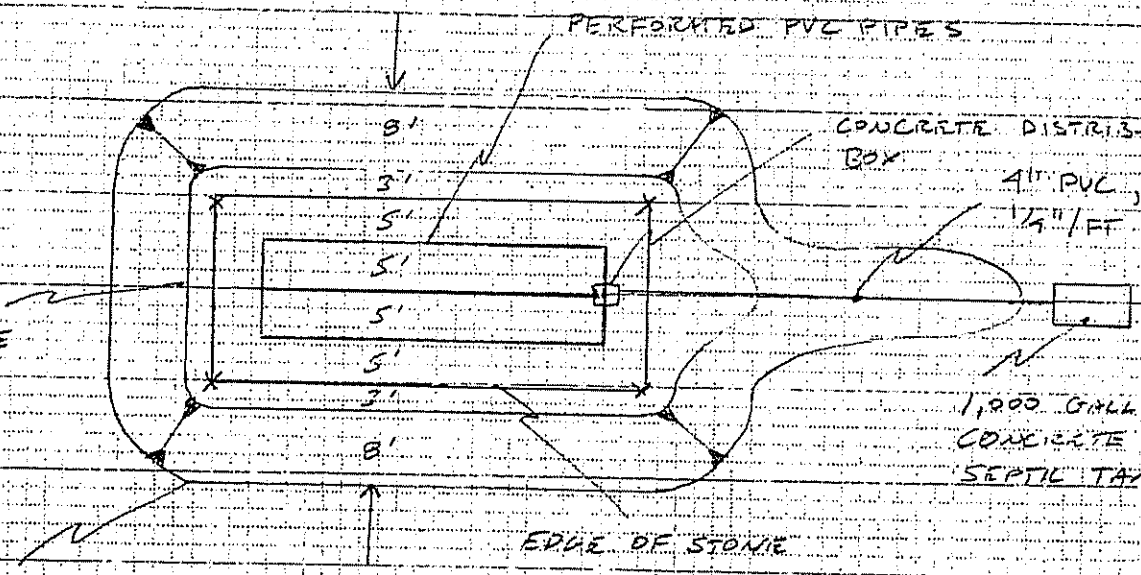
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



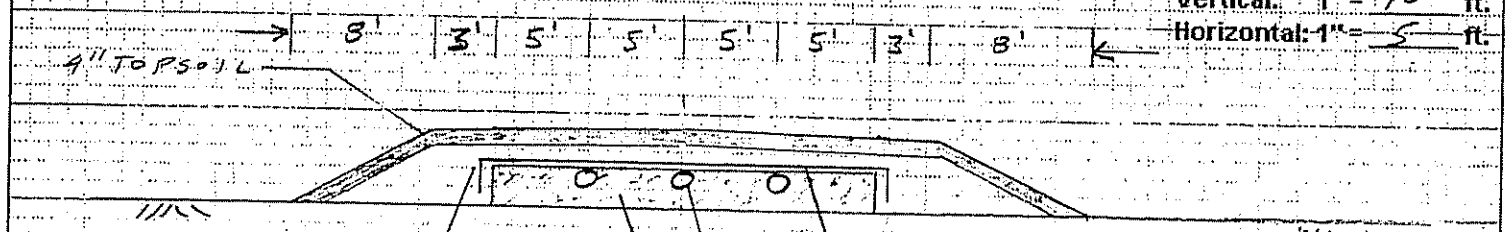
INSTALL A 45' x 20' STONE BED WITH (3) 4" DIA. PERFORATED PVC PIPES, 35' LONG, IN A GRID ARRAY. INSTALL IN ACCORDANCE WITH STATE + LOCAL CODES.

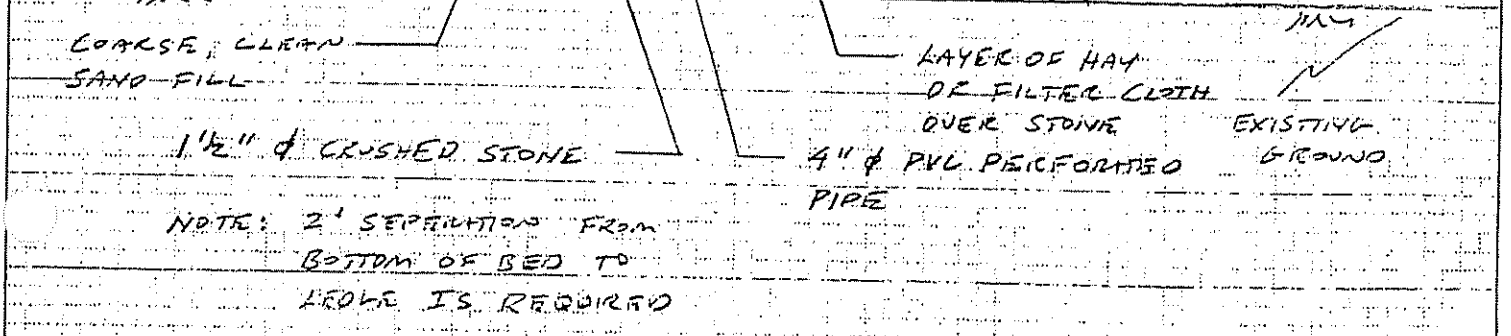
X = FLAG IN FIELD

BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	24"	Finished Grade Elevation	-34"	Location & Description: NAIL IN 6" MAPLE 40" AGL
Depth of Backfill (downslope)	24"	Top of Distribution Pipe or Proprietary Device	-46"	Reference Elevation is: (0.0") or:
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-58"	

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 10 ft.
Horizontal: 1" = 5 ft.





NOTE: 2' SEPERATION FROM BOTTOM OF BED TO LEDGE IS REQUIRED

Ricky S. Pendleton — Site Evaluator Signature
S364 — SE #
6-18-06 — Date