SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-6672 FAX (207) 287-4172

PROPERTY LOCATION

City, Town, Plantation: AUGUSTA

Street or Road: So. Belfast Ave ROUTE #105

Subdivision, Lot #: Map 11 Lot 45C Stony Brook LOT #6

>> Caution: Permit Required – Attach In Space Below <<

AUGUSTA 4518 TOWN COPY

Date Permit Issued: 10/20/00 $ 100.00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature: [signature] L.P.I. # 150

OWNER/APPLICANT INFORMATION

Name (last, first, MI): HIGGINS Mary Lee ☒ Owner ☐ Applicant

Mailing Address of ☐ Owner ☒ Applicant: RALPH'S HOMES, WALDOBORO, 04572

Daytime Tel. #: 832-2036

Municipal Tax Map # 11 Lot # 45-C

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: 10-18-00

Caution: Inspections 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: [signature] (1st) Date Approved: 2-11-01

(2nd) Date Approved:

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☒ First Time System
2. ☐ Replacement System
Type Replaced: _____
Year Installed: _____
3. ☐ Expanded System
   a. ☐ One-time exempted
   b. ☐ Non-exempted
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 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:
12. ☐ Miscellaneous components

SIZE OF PROPERTY
1.2+ ☐ 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

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 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 900 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
1. ☒ No 3. ☐ Maybe
2. ☐ Yes >> 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 facilities –
3. ☐ Section 503.0 (meter readings) ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION DESIGN
3 / C / 1
at Observation Hole # 2
Depth 21" Elevation _____"
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

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

SITE EVALUATOR STATEMENT

I certify that on 9/20/00 (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 # 194 Date 9/21/00

Site Evaluator Name Printed: J. JOHN BROCHU Telephone # 832-0690

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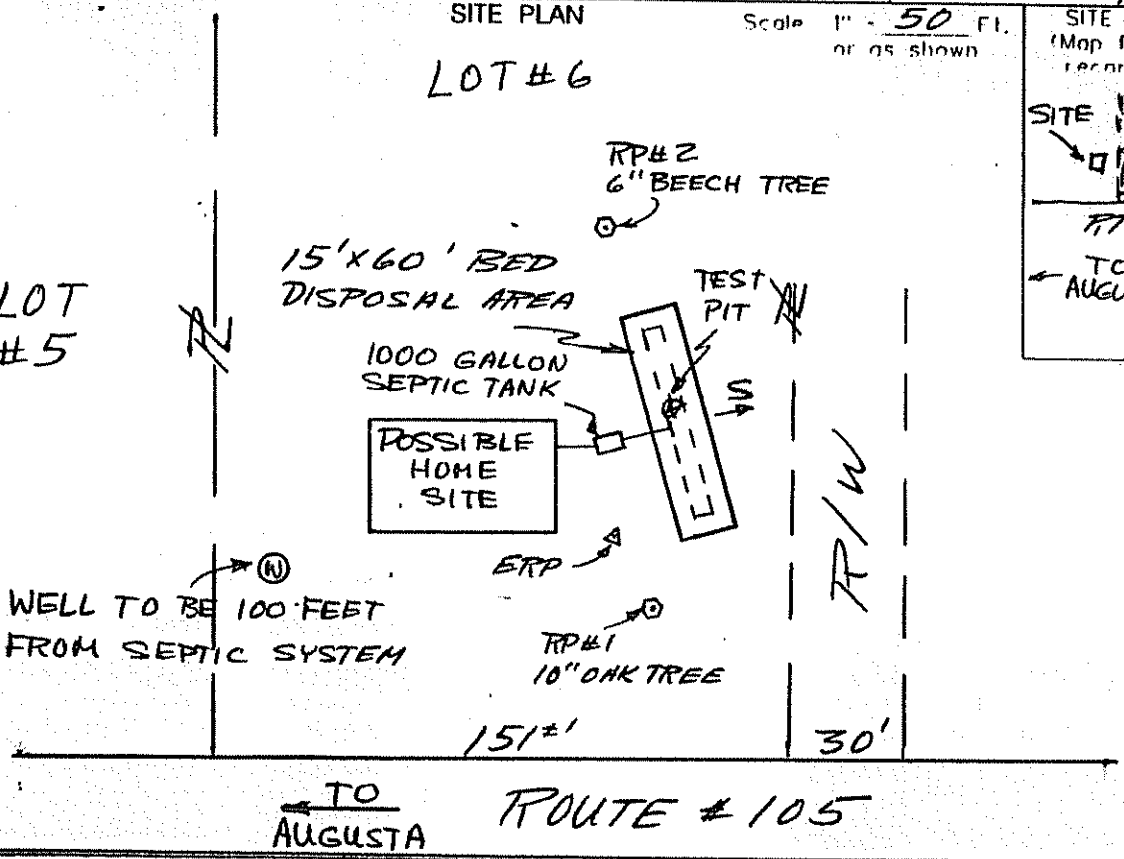
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: AUGUSTA | Street, Road, Subdivision: RT #105 LOT #6 | Owner's Name: HIGGINS

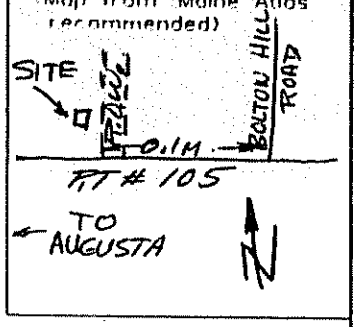
SITE PLAN

Scale 1" = 50 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
0–10	STONEY COBBLY GRAVELLY SANDY LOAM	FRIABLE	REDDISH BROWN	NONE
10–20			YELLOW BROWN	
20–30	SILTY COBBLY GRAVELLY SANDY LOAM	FIRM	LIGHT OLIVE BROWN	COMMON DISTINCT
30–40			OLIVE	
40–50				

Soil Classification		Slope	Limiting Factor	
3 Profile	C Condition	12 %	21"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole _____ ☐ Test Pit ☐ Boring
_____" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10				
10–20				
20–30				
30–40				
40–50				

Soil Classification		Slope	Limiting Factor	
Profile	Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

J John Brochu — Site Evaluator Signature
194 — SE #
9/21/00 — Date

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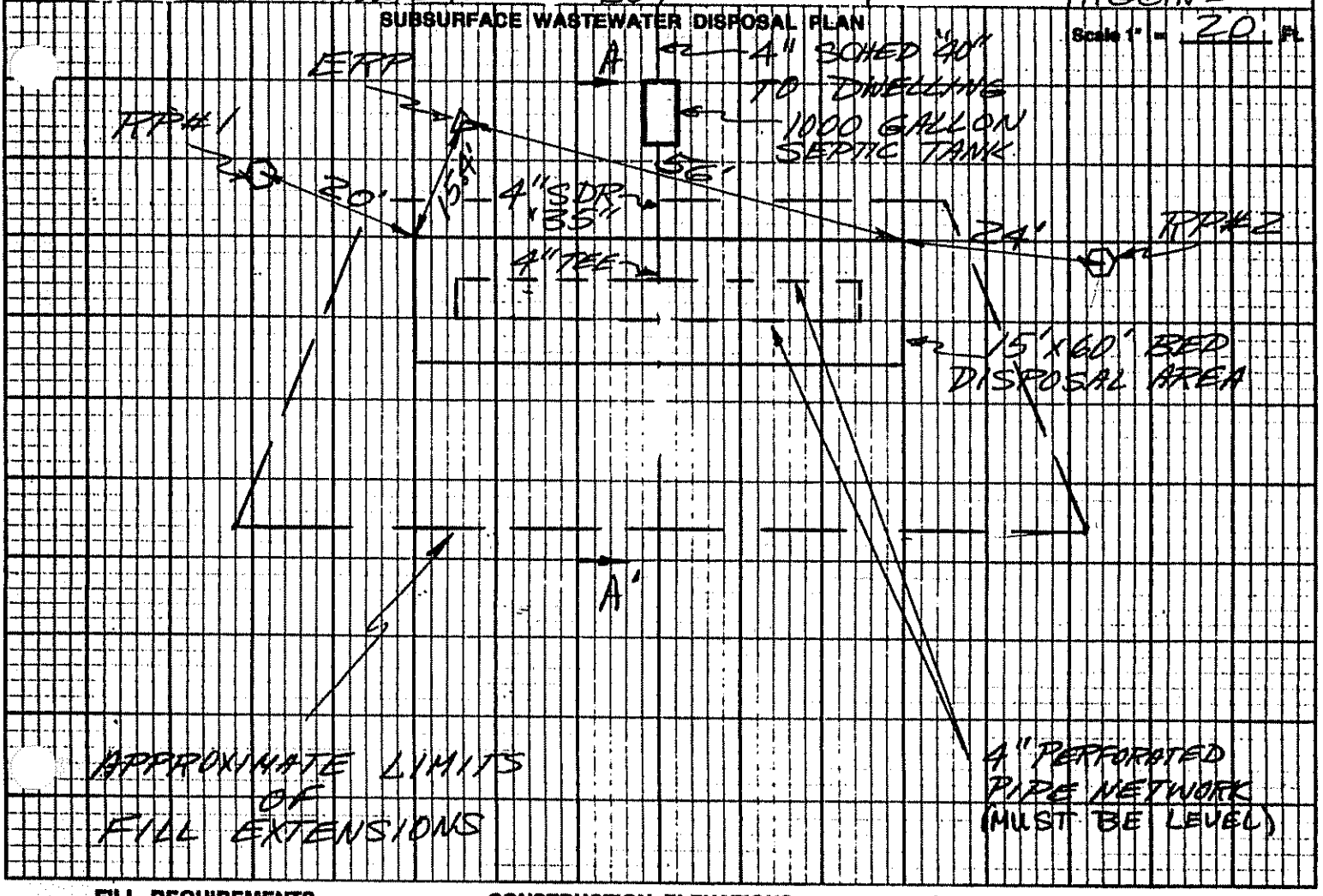
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	ROUTE #105 LOT # 6	HIGGINS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 15'

Depth of Fill (Downslope) 37'

CONSTRUCTION ELEVATIONS

Reference Elevation Is ASSUMED 0.0"

Bottom of Disposal Area -59"

Top of Distribution Lines or Chambers -70"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL 38" ABOVE GROUND ON 6" MAPLE TREE

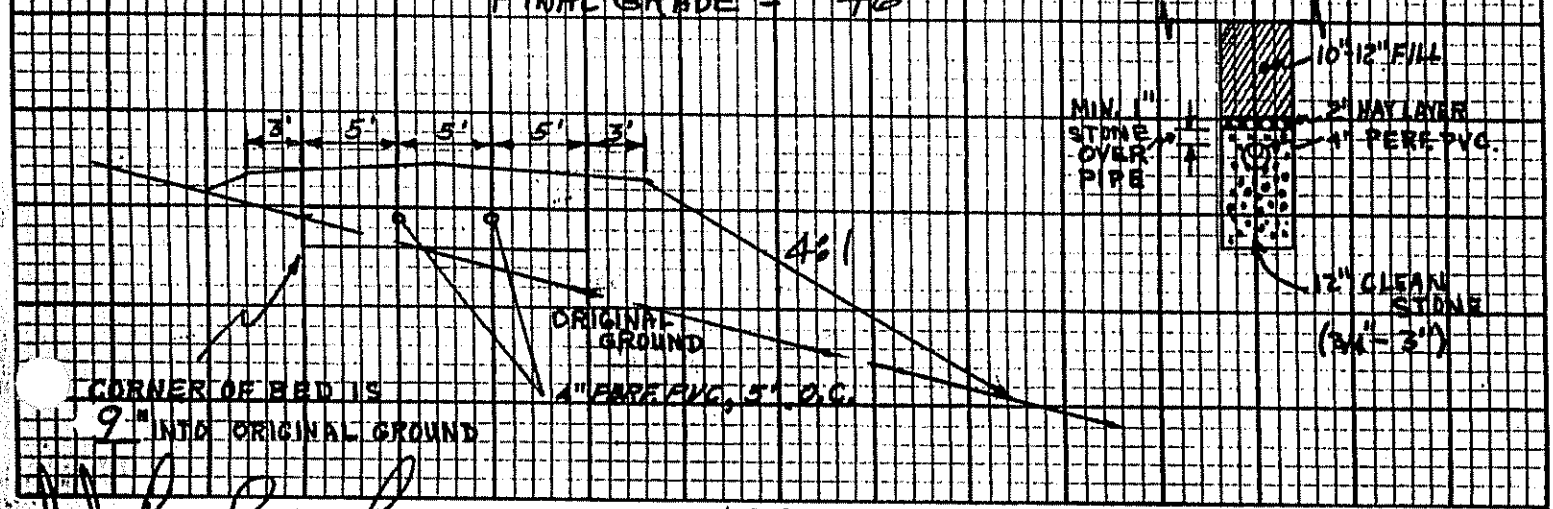
DISPOSAL AREA CROSS SECTION

A-A'

- SCARIFY SURFACE BEFORE PLACING FILL
- FILL TO BE GRAVELLY SAND
- SLOPE SURFACE @ 3%
- LOAM & SEED

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

FINAL GRADE = -46"



John Brochu
Site Evaluator Signature

194
SE#

9/21/00
Date

HHE-200 Rev.1/84