622-4744 Work tel / pm (N.R.F.)
622-2589 Home

George Young

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

07168227

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street or Lot #	Route 105 - So Belfast Ave

PROPERTY OWNER'S NAME

Last: Young First: Lance

Applicant Name:	Lance Young
Mailing Address of Owner/Applicant (If Different)	R-7 B-501 Augusta Me 04330

11-753

AUGUSTA PERMIT # 1,494 TOWN COPY

Date Permit Issued: 12/2/88

$ 120.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 8108

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.

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

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

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

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

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS

1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER _____

DISPOSAL SYSTEM TO SERVE:

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

SIZE OF PROPERTY	ZONING
2 ac+	

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.)

3 bedrooms

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 18 "

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: _____

DESIGN FLOW: 300 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 7/12/88 (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 51 SE# 7/12/88 Date

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

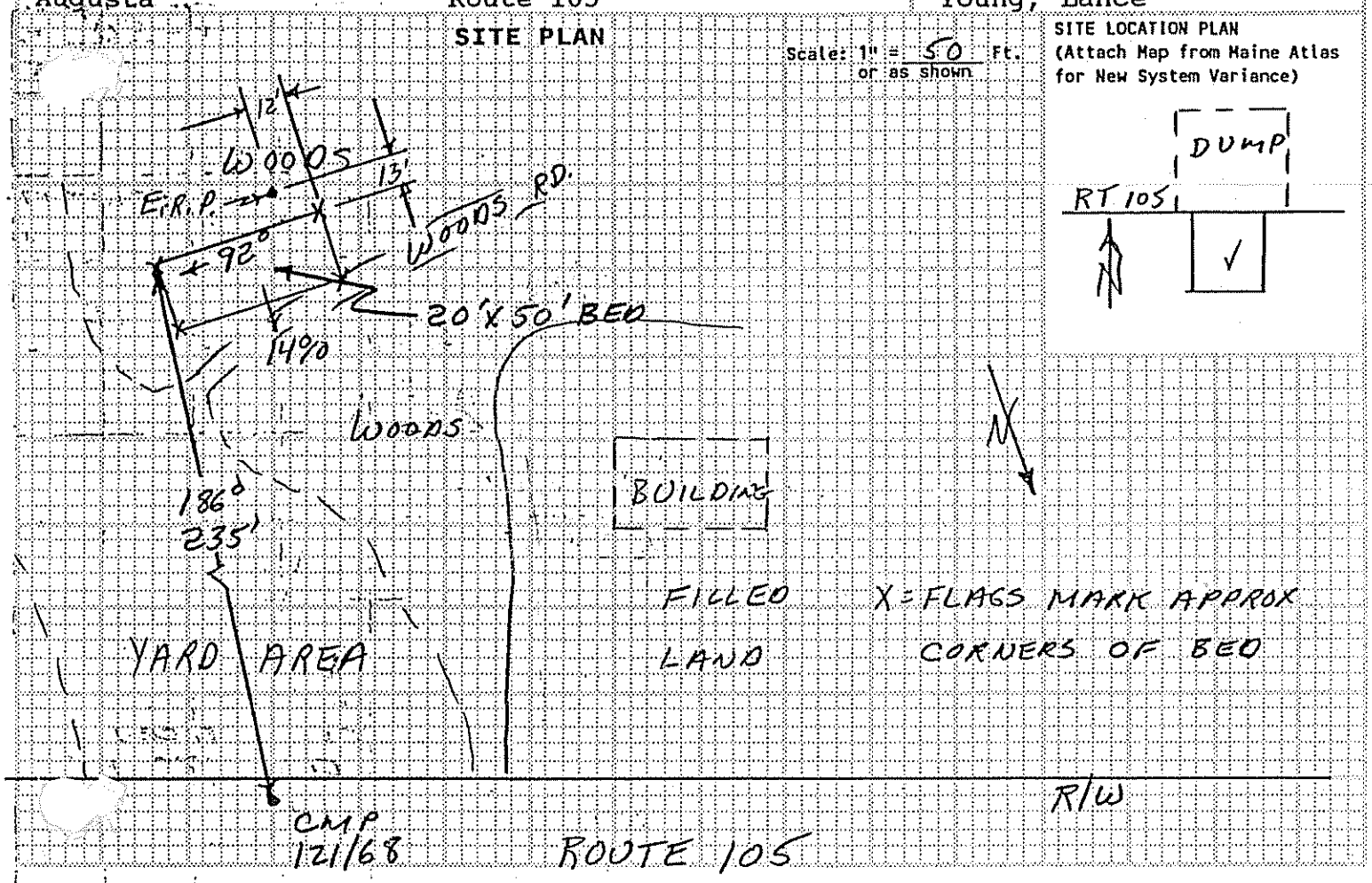
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

07168227

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	Route 105	Young, Lance

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

7 2 " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0				
6	S.L.	FRIABLE	B	
10				
15				
20				18
30	G.T.	FIRM	G.B.	
40				
50				

Depth Below Mineral Surface

Soil Profile	Classification Condition	Slope	Limiting Factor	☒ Ground Water ☐ Restr. Layer ☐ Bedrock
3	C	14 %	18	

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

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

Depth Below Mineral Surface

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

Site Evaluator Signature

51
SE#

7/12/88
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

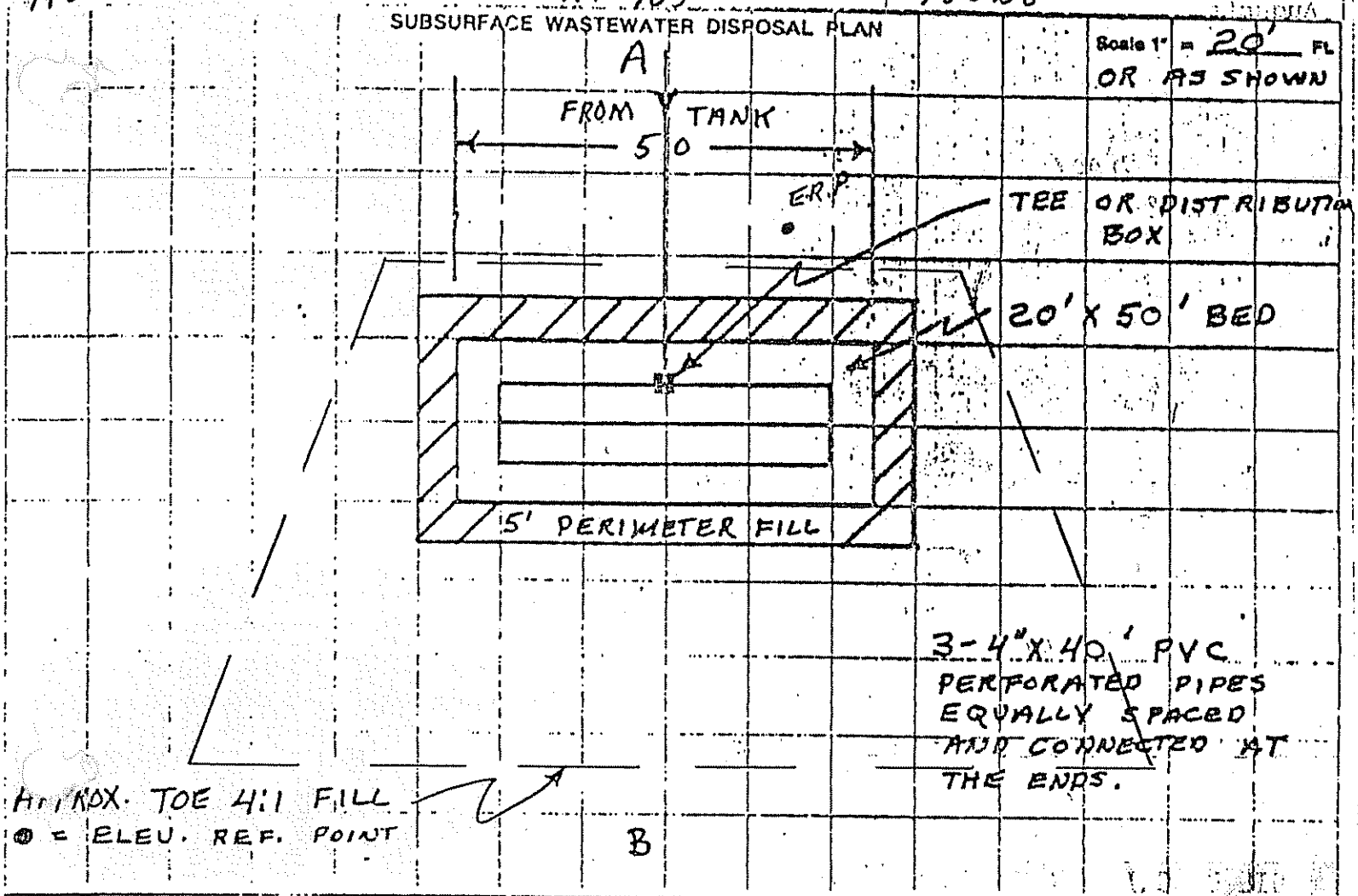
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: RT 105

Owners Name: YOUNG

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' FL OR AS SHOWN



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	18"	Reference Elevation is	0	NAIL IN 3" MAPLE
Depth of Fill (Downslope)	60±	Bottom of Disposal Area	-67"	
		Top of Distribution Lines or Chambers	-56"	

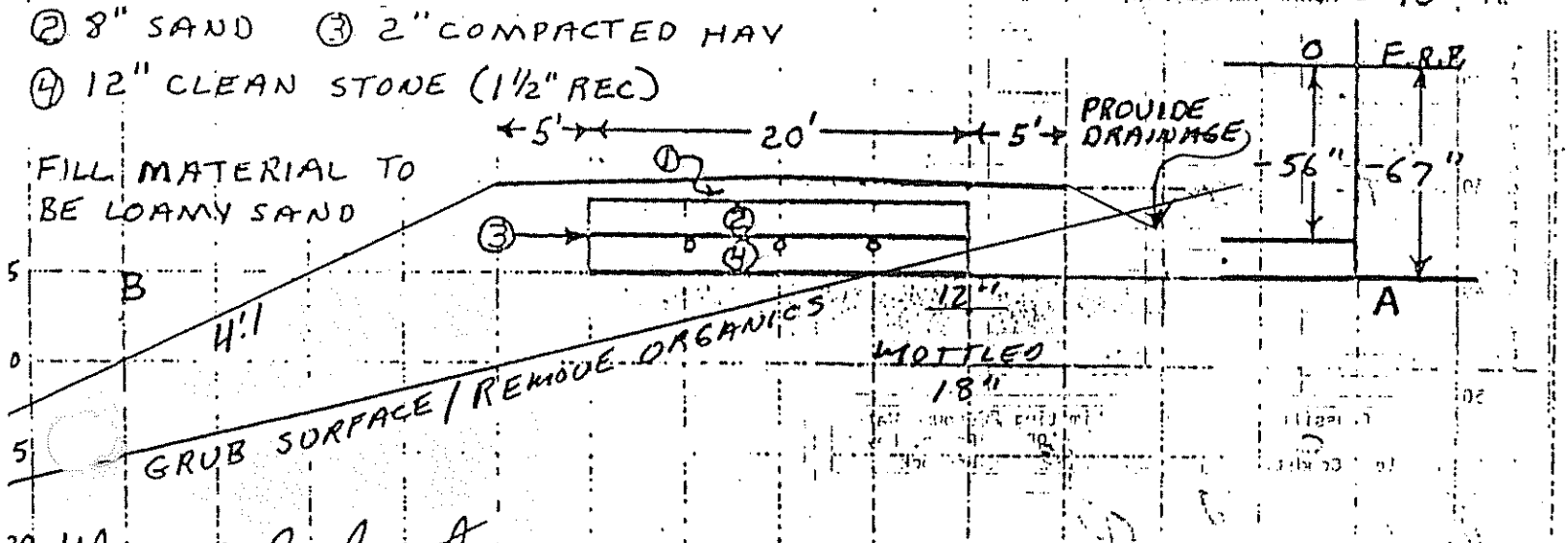
DISPOSAL AREA CROSS SECTION

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

① 3" TOPSOIL CROWNED @ 3%

② 8" SAND ③ 2" COMPACTED HAY

④ 12" CLEAN STONE (1½" REC)



Wm W Richard
Site Evaluator or Professional Engineer's Signature

#51
SE # / PE #

7/12/88
Date

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