SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation	Augusta
Street or Road	Cony Road
Subdivision, Lot #	

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

AUGUSTA 4931 TOWN COPY
Date Permit Issued: 8 8 02
$ 175.00 ☐ If Double Fee Charged
Local Plumbing Inspector Signature
L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Panek Joseph J. ☒ Owner ☐ Applicant
Mailing Address of ☒ Owner ☐ Applicant	RR#7, Cony Rd. Box 2465 Augusta, Me.
Daytime Tel. #	622-6762

Municipal Tax Map # 11 Lot # 93

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.

Joseph Panek — Signature of Owner or Applicant — Date 8/16/02

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 — (1st) Date Approved 8/30/02 — (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION
1. ☐ First Time System
2. ☒ Replacement System
Type Replaced: Bed
Year Installed: 1952
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
81,000 ☒ sq. ft. ☐ acres

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE
1. ☒ Single Family Dwelling Unit, No. of Bedrooms: 2
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 USE Existing
a. ☐ Regular repair if
b. ☐ Low Profile necessary
2. ☐ Plastic
3. ☐ Other:
CAPACITY ____ 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
220 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
B / C / 1
at Observation Hole # 1
Depth 18 " Elevation -66 "
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 6/27/02 (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).

David P. Rocque	154	6/27/02
Site Evaluator Signature	SE #	Date
David P. Rocque	622-7487	
Site Evaluator Name Printed	Telephone #	

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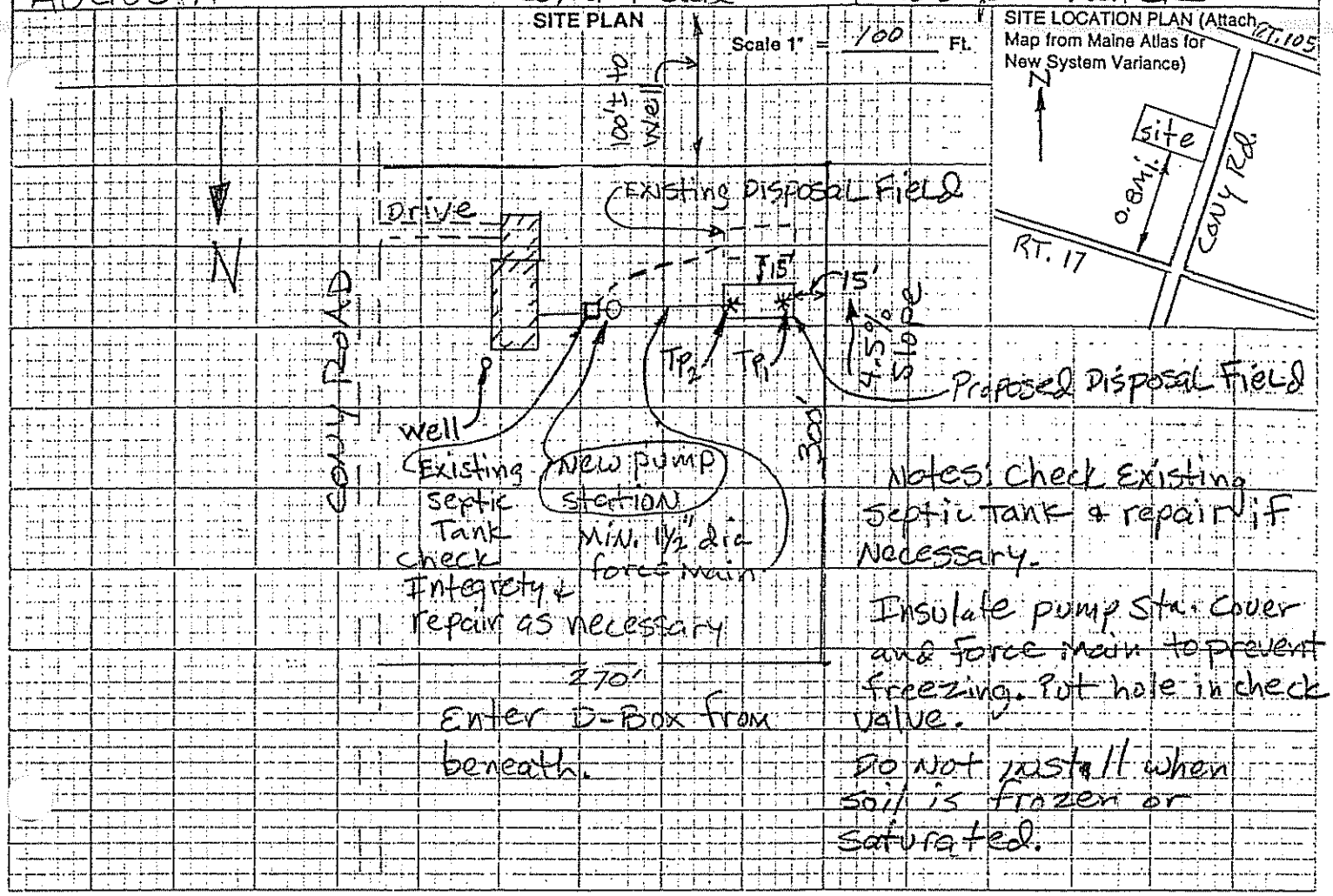
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	Cony Road	Joseph Panek

SITE PLAN Scale 1" = 100 Ft.



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

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

Observation Hole TP1 ☒ Test Pit ☐ Boring

SOD " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	Loam		Dark	NONE
6		Friable	Brown	observed
10	Fine Sandy		Yellow	
15	Loam		Brown	
20	Silty	Firm	olive	Few
	Clay		Brown	Faint
30	Loam			
40				
50				

Soil	Classification	Slope	Limiting Factor	
B (Profile)	C (Condition)	4.5 %	18"	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole TP2 ☒ Test Pit ☐ Boring

SOD " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	gravelly		Dark	NONE
6			Brown	
10	fine	Friable		observed
15	Sandy		yellow Brown	
20	Loam	Firm	olive	Few
			Brown	Faint
30				
40				
50				

Soil	Classification	Slope	Limiting Factor	
3 (Profile)	C (Condition)	4.5 %	16"	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

David P. Rogue
Site Evaluator Signature

154
SE#

6/27/02
Date

HHE-200 Rev. 1/84

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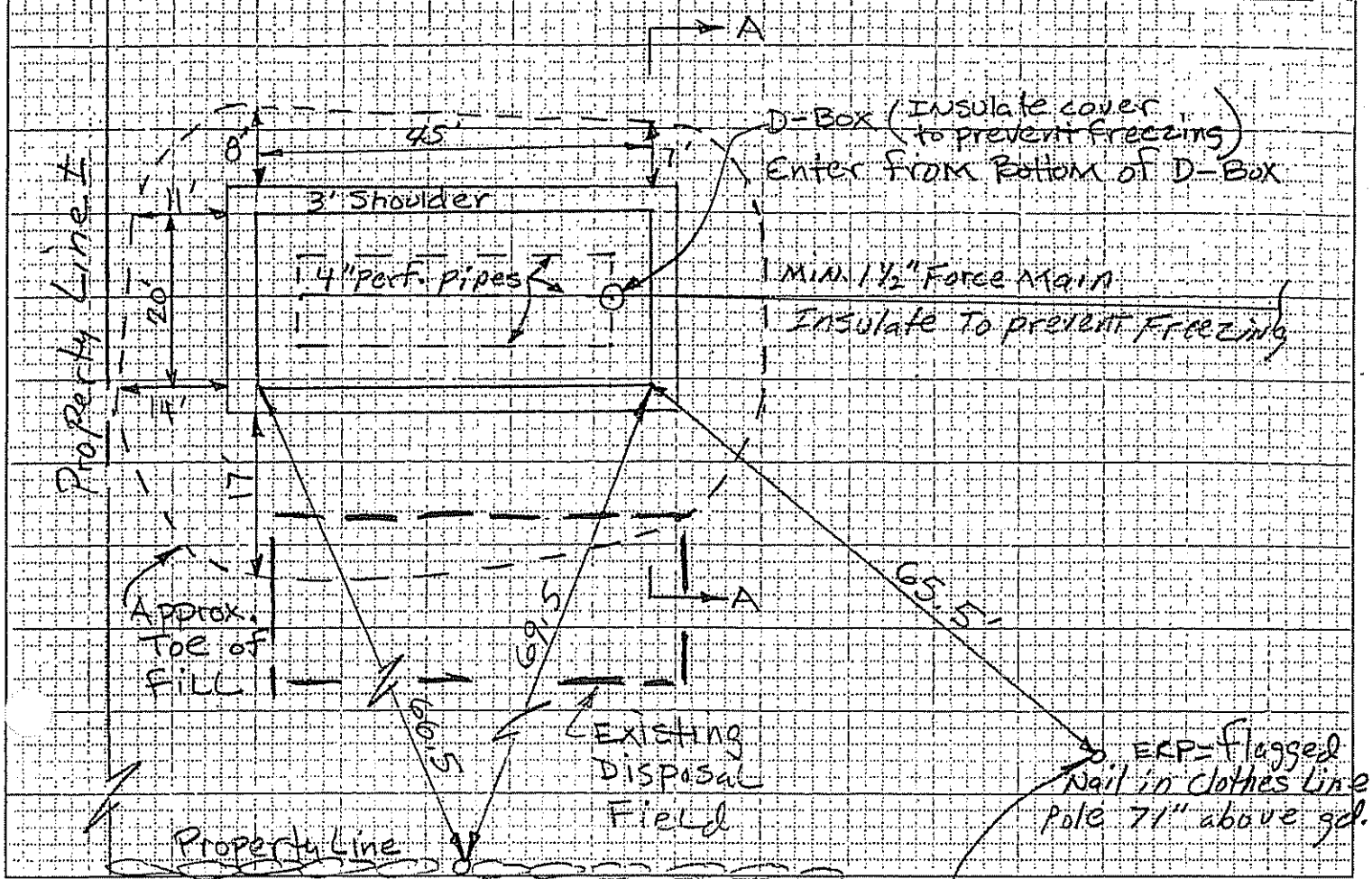
AUGUSTA	CONY ROAD	Joseph Panek

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	24-31"	Finished Grade Elevation	-17"	Location & Description: See above
Depth of Backfill (downslope)	31-42"	Top of Distribution Pipe or Proprietary Device	-31"	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-41"	Reference Elevation is: 0.0" or:

DISPOSAL FIELD CROSS-SECTION

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

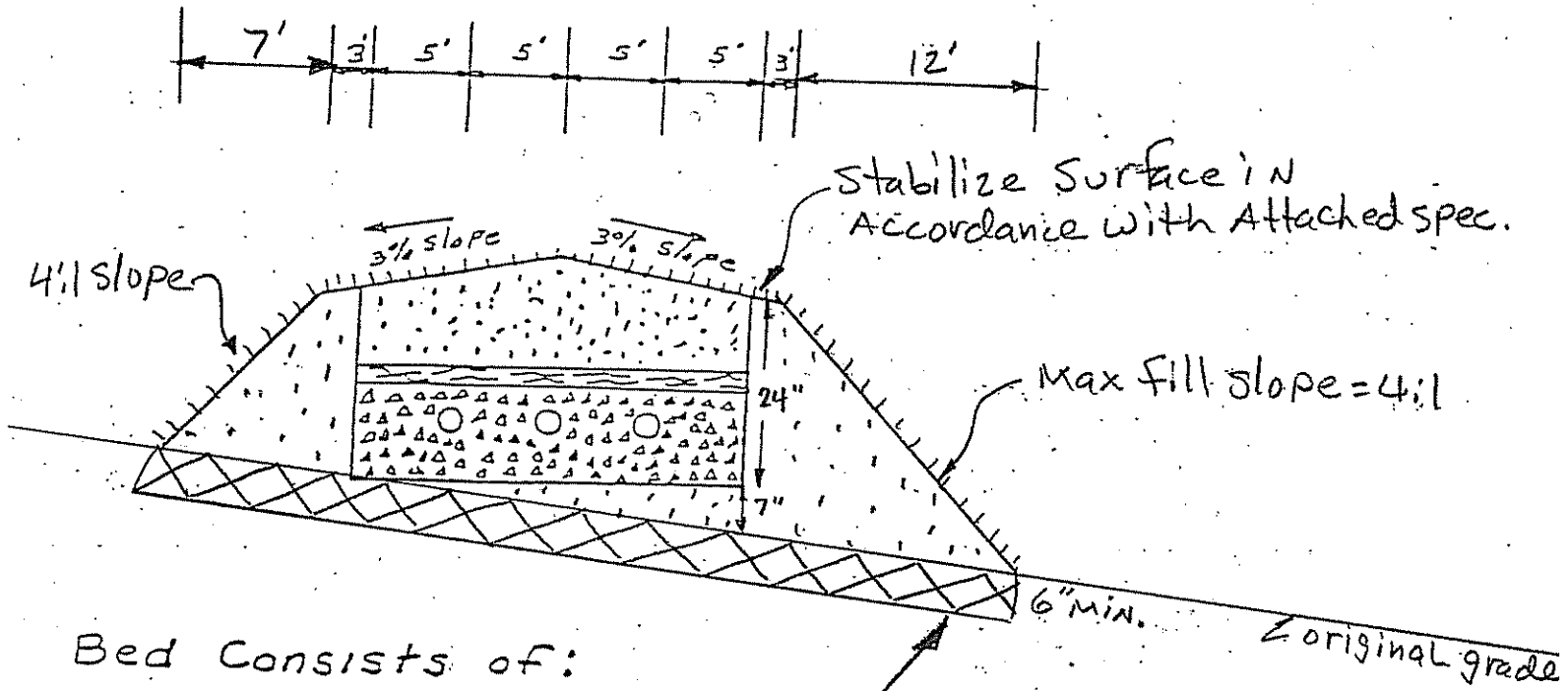
Disposal Field to be 20'x45' stone bed with 3-4" perforated pipes 5' apart and 5' from sides + end of stone bed.

David P. Rague 154 6/27/02

Site Evaluator Signature SE # Date

Subsurface Absorption Area Cross-Section

(Not to Scale)



Bed Consists of:

12" of 3/4"-2 1/2" stone; 6" under pipe and 2" over pipe.

2" of compressed hay over stone, or Approved filter fabric.

8" of gravelly coarse sand fill, over hay/fabric.

Top of bed to be stabilized with loam AND SEED.

Note:
Remove organic matter and carify soil before installing ed and fill.

TRANSITION HORIZON:

Remove the organic soil horizon from beneath the Disposal Area and fill extension Area, Mix in 6" Minimum gravelly Coarse Sand fill, then bring to grade with gravelly Coarse sand fill.

Gravelly Coarse Sand Fill Shall Have Approx.:
15%-30% gravel
2%-8% fines
No more than 2% clay

Care should be taken to AVOID compacting the soil under the Leach field and Fill Area. This would eliminate the Natural Soil Pores and Severely Limit the soil's Ability to handle the Waste water.