M 11 L213

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

AUGUSTA 3447 TOWN COPY

Date Permit Issued: 5/6/96 $ 60.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 808

PROPERTY LOCATION

Town or Plantation	AUGUSTA
Street Subdivision Lot #	OFF SPRING ROAD

PROPERTY OWNERS NAME

Last: WITHAM	First: MARTHA
Mailing Address of Owner	c/o Mike Witham RR 7 BOX 1965 AUGUSTA ME 04330
Daytime Tel. #	

Municipal Tax Map # 11 ~~Page #~~ Lot 213

Owner 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.

Martha Witham — Signature of Owner/Applicant — 5/8/96 Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

seal needed

Local Plumbing Inspector Signature — 6/17/96 Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☒ First Time System
2. ☐ Multi-User System
3. ☐ Replacement System
4. ☐ Expanded System
   a. ☐ One-time exempted
   b. ☐ Non-exempted
5. ☐ Experimental System
6. ☐ Seasonal Conversion

THIS APPLICATION REQUIRES:
1. ☒ No Rule Variance
2. ☐ First Time System Variance (Municipal)
3. ☐ First Time System Variance (State)
4. ☐ Replacement System Variance
   a. ☐ Local Plumbing Inspector approval
   b. ☐ State & Local Plumbing Inspector approval
5. ☐ Minimum Lot Size Variance
6. ☐ Seasonal Conversion Variance

DISPOSAL SYSTEM COMPONENT(S)
1. ☒ Non-Engineered System
2. ☐ Primitive System
3. ☐ Alternative Toilet
   Specify _____
4. ☐ Non-Engineered Treatment Tank
5. ☐ Holding Tank _____ Gallons
6. ☐ Non-Engineered Disposal Area (only)
7. ☐ Separated Laundry System
8. ☐ Engineered System (+2000 gpd)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal Area (only)

SIZE OF PROPERTY
5± ACRES

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE:
1. ☒ Single Family Dwelling Unit
2. ☐ Multiple Family Dwelling Unit
   Number of Units _____
3. ☐ Other _____ SPECIFY

TYPE OF WATER SUPPLY
PROPOSED DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ Concrete
   ☒ Regular
   OR ☒ Low Profile
2. ☐ Plastic

SIZE 1000 Gallons

DISPOSAL AREA TYPE/SIZE
1. ☒ Stone Bed 891 Sq. Ft.
2. ☐ Proprietary Device ____ Sq. Ft.
   ☐ Clustered ☐ Linear
   ☐ Regular ☐ H-20
3. ☐ Trench _____ Lin. Ft.
4. ☐ Other _____

GARBAGE DISPOSAL UNIT
1. ☒ No
2. ☐ Yes
   ☐ Multi-compartment tank
   ☐ Tank in series
   ☐ Increase in tank capacity
   ☐ Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW
(Show Calculations)
THREE BEDROOM SINGLE FAMILY DWELLING
3BR x 90GPD = 270

DESIGN FLOW: 270 (Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE	DESIGN
7	C

DEPTH TO MOST LIMITING FACTOR 18"

DISPOSAL AREA SIZING
1. ☐ Small 2.0
2. ☐ Medium 2.60
3. ☒ Medium-Large 3.30
4. ☐ Large 4.10
5. ☐ Extra-Large 5.00

PUMPING
1. ☒ Not required
2. ☐ May be required
3. ☐ Required

DOSE _____ Gallons

SITE EVALUATOR'S STATEMENT

7/30/94 - DESIGN SUBJECT TO LOCAL, STATE AND FEDERAL ORDINANCES
+ 4/5/96 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules.

Site Evaluator Signature	168 SE #	4-18-96 Date
JOHN W. LORD JR Print Name	(207) 873-3388 Telephone	

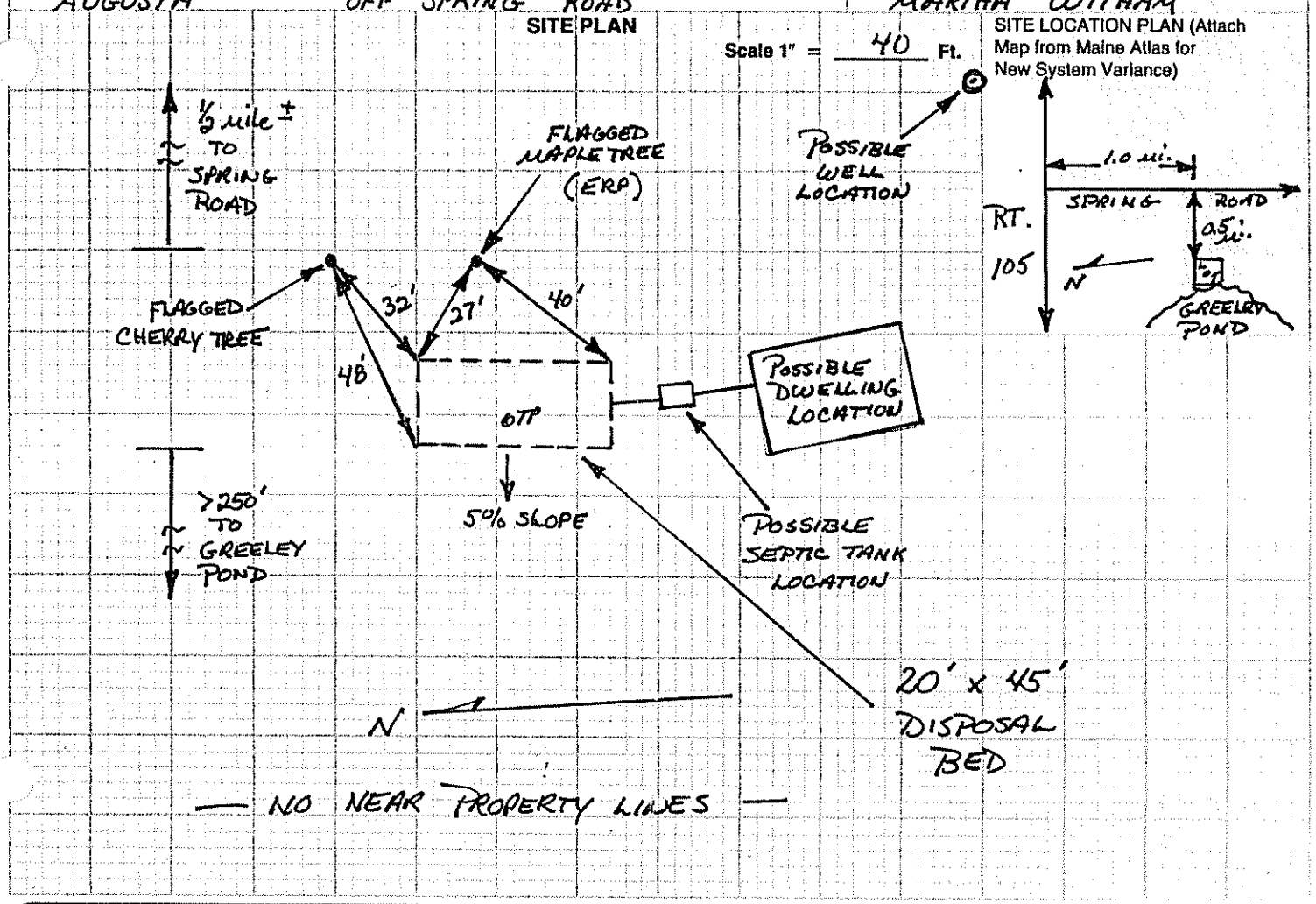
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	OFF SPRING ROAD	MARTHA WITHAM

SITE PLAN

Scale 1" = 40 Ft.



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

Observation Hole TP 1 ☒ Test Pit ☐ Boring

ONE " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
		BROWN	
SANDY LOAM	FRIABLE	YELLOW BROWN	
SILTY CLAY LOAM	FIRM	OLIVE	COMMON DISTINCT

Soil	Classification	Slope	Limiting Factor	
7 (Profile)	C (Condition)	5 %	18	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling

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

Site Evaluator Signature

168
SE#

4-18-96
Date

HHE-200 Rev. 1/84

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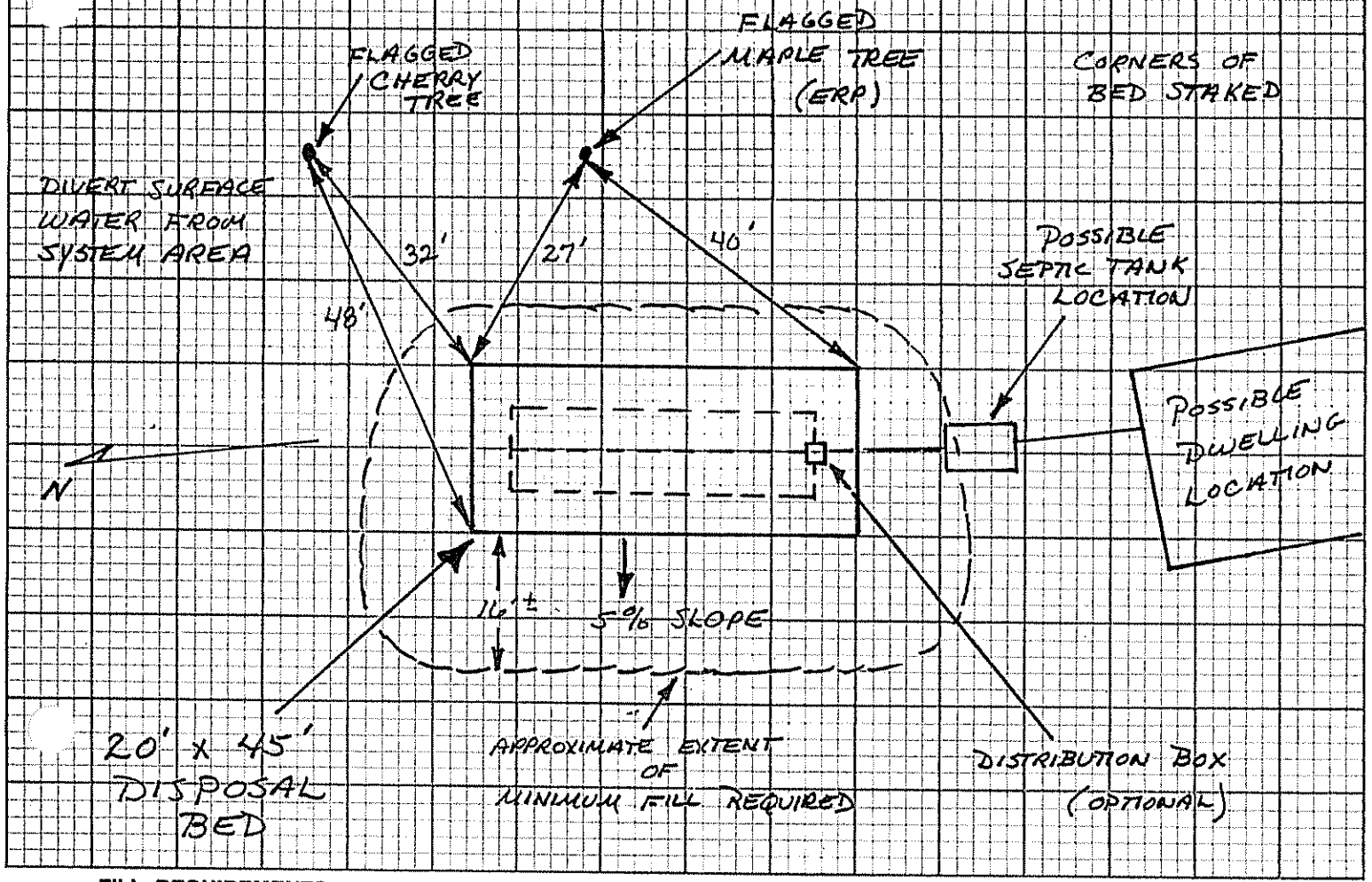
AUGUSTA	OFF SPRING ROAD	MARTHA WITHAM

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 18"
Depth of Fill (Downslope) 30"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0
Bottom of Disposal Area -57"
Top of Distribution Lines or Chambers -46"

ELEVATION REFERENCE POINT (ERP) LOCATION & DESCRIPTION

FLAGGED NAIL IN FLAGGED MAPLE TREE AS LOCATED ABOVE

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = Ft.
Horizontal: 1 Inch = Ft.

(SEE ATTACHED BED DIAGRAM)

Site Evaluator Signature

168
SE#

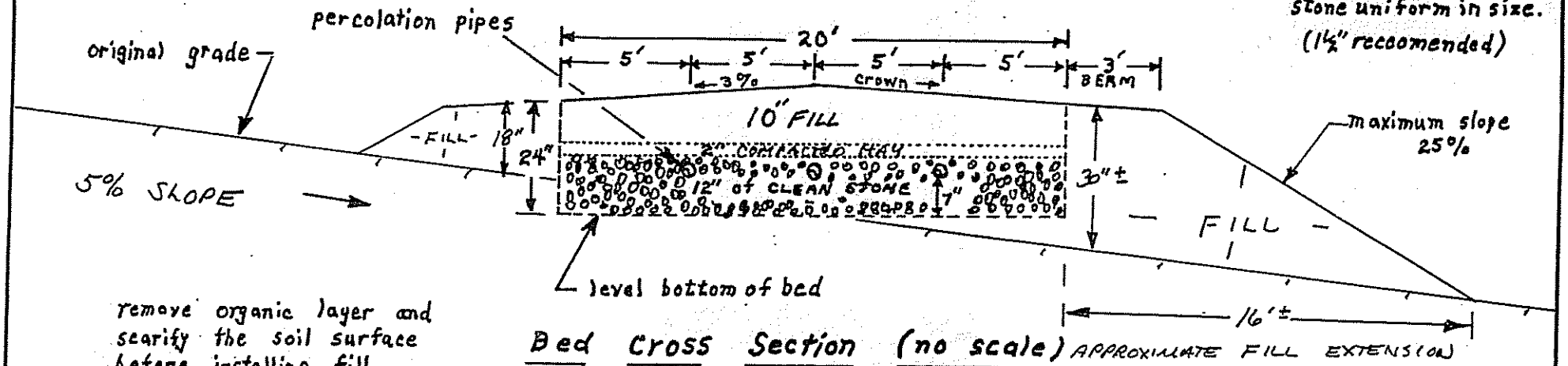
4-18-96
Date

HHE-200 Rev. 1/84

SEWAGE DISPOSAL BED DETAILS

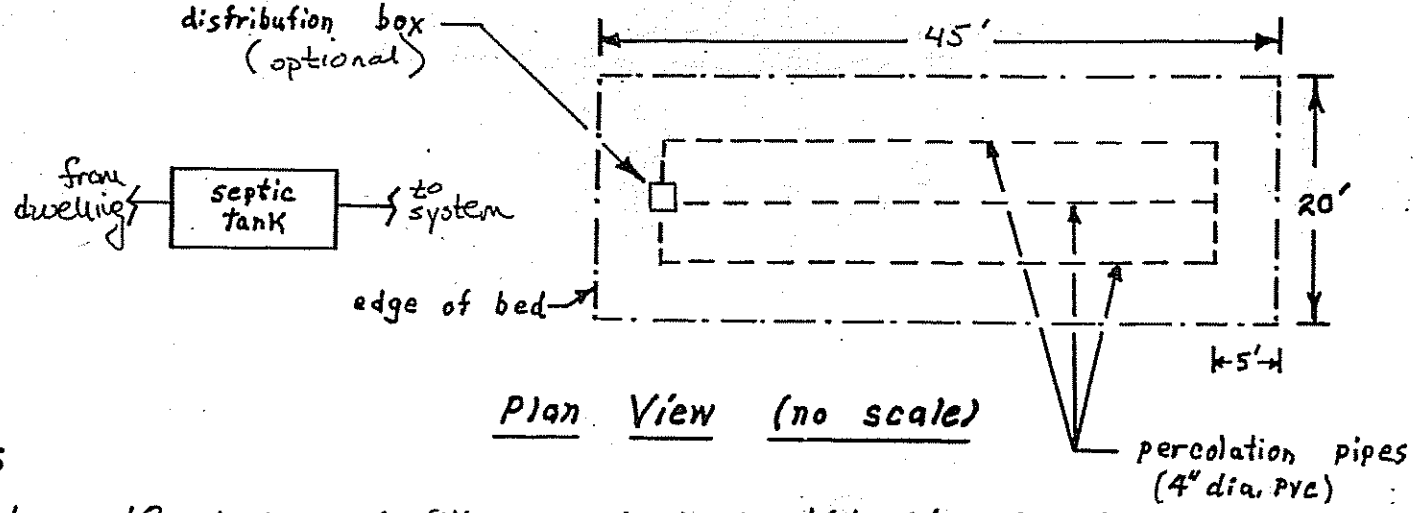
4" Loam mulch to cover.

bed requires stone uniform in size. (1½" recommended)



remove organic layer and scarify the soil surface before installing fill.

Bed Cross Section (no scale)



Plan View (no scale)

NOTES

1.) 18 inches of fill is required at uphill side of bed.
2.) texture of fill shall be gravelly coarse sand.
3.) refer to the MAINE STATE PLUMBING CODE, PART II (EFFECTIVE DATE: JULY 1, 1995) for further details regarding installation procedures. (MAINE SUBSURFACE WASTE WATER DISPOSAL RULES)

DR: MARTHA WITHAM

DATE: 4-18-96

BY: JOHN W. LORD, JR. S.E. #168