PIF 8/12/13

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA

Street or Road: 42 WITHAM LANE

Subdivision, Lot #: M/216C

AUGUSTA PERMIT #6828 TOWN COPY

Date Permit Issued: 8/6/13 $ 250.00 fee

15.00

LPI # 850

Mary R. Mullen

Municipal Tax Map # _____ LOT # _____

OWNER/APPLICANT INFORMATION

Name (last, first, MI): HENDERSON, JAMES [X] Owner [ ] Applicant

Mailing Address of Owner/Applicant: 15½ MAPLE STREET, LISBON FALLS, ME 04252

Daytime Tel. #: 522-3334

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.

James Henderson 7/30/13

Signature of Owner or Applicant 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. _____ (1st) date approved

_____ Local Plumbing Inspector Signature _____ (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

[X] 1. First Time System
[ ] 2. Replacement System
Type replaced: _____
Year installed: _____
[ ] 3. Expanded System
[ ] a. <25% Expansion
[ ] b. >25% Expansion
[ ] 4. Experimental System
[ ] 5. Seasonal Conversion

THIS APPLICATION REQUIRES

[X] 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

[X] 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

±2.5 [ ] SQ. FT. [X] ACRES

SHORELAND ZONING

[ ] Yes [X] No

DISPOSAL SYSTEM TO SERVE

[X] 1. Single Family Dwelling Unit, No. of Bedrooms: 2
[ ] 2. Multiple Family Dwelling, No. of Units: _____
[ ] 3. Other: _____ (specify)
Current Use [ ] Seasonal [ ] Year Round [X] Undeveloped

TYPE OF WATER SUPPLY

[X] 1. Drilled Well [ ] 2. Dug Well [ ] 3. Private
[ ] 4. Public [ ] 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

[X] 1. Concrete
[X] a. Regular
[ ] b. Low Profile
[ ] 2. Plastic
[ ] 3. Other
CAPACITY 1,000 GAL.

DISPOSAL FIELD TYPE & SIZE

[X] 1. Stone Bed [ ] 2. Stone Trench
[ ] 3. Proprietary Device
[ ] a. cluster array [ ] c. Linear
[ ] b. regular load [ ] d. H-20 load
[ ] 4. Other:
SIZE: 800 [X] sq. ft. [ ] lin. ft.

GARBAGE DISPOSAL UNIT

[X] 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

180 gallons per day
BASED ON:
[X] 1. Table 4A (dwelling unit(s))
[ ] 2. Table 4C(other facilities)
SHOW CALCULATIONS for other facilites
[ ] 3. Section 4G (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION: 3, C
at Observation Hole # 2
Depth 18"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

[ ] 1. Medium---2.6 sq. ft. / gpd
[X] 2. Medium---Large 3.3 sq. ft. / gpd
[ ] 3. Large---4.1 sq. ft. / gpd
[ ] 4. Extra Large---5.0 sq. ft. / gpd

EFFLUENT EJECTOR PUMP

[X] Not Required
[ ] May Be Required
[ ] Required
Specify for non-engineered systems:
Pump: _____ Alarm: _____

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 17 m 30 s
Lon. 69 d 45 m 10 s
if g.p.s. state margin of error: _____

SITE EVALUATOR STATEMENT

I certify that on 5/31/13 (date) I completed a site evaluation on the 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).

Vaughn L. Smith — Site Evaluator Signature

VAUGHN L. SMITH — Site Evaluator Name Printed

226 — Certificate Number

6/12/13 — Date

441-3887 — Telephone Number

SOILTESTMAN@AOL.COM — E-mail Address

STATE OF MAINE — VAUGHN L. SMITH — 226 — SITE EVALUATOR

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

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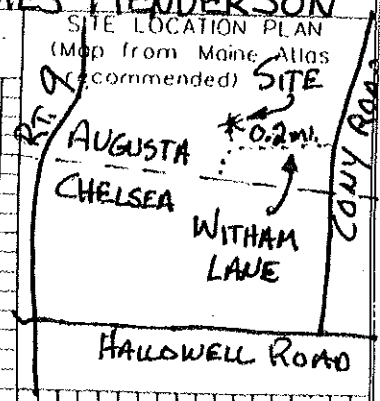
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: AUGUSTA
Street, Road Subdivision: WITHAM LANE
Owner's Name: JAMES HENDERSON

SITE PLAN — Scale 1" = 110 Ft. or as shown

SITE LOCATION PLAN (Map from Maine Atlas recommended)



SEE NEXT PAGE

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

Observation Hole #1 — ☒ Test Pit ☐ Boring
3" Depth of Organic Horizon Above Mineral Soil

Depth (inches below mineral soil surface)	Texture	Consistency	Color	Mottling
0–10	FINE	FRIABLE	BROWN / YELLOWISH BROWN	NONE
10–20	SANDY			
20–30	LOAM	FIRM	PALE OLIVE	FEW DISTINCT
30–40				
40–50				

Soil Classification: Profile 3, Condition C
Slope: 9%
Limiting Factor: 19" ☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 — ☒ Test Pit ☐ Boring
3" Depth of Organic Horizon Above Mineral Soil

Depth (inches below mineral soil surface)	Texture	Consistency	Color	Mottling
0–10	FINE	FRIABLE	BROWN / YELLOWISH BROWN	NONE
10–20	SANDY			
20–30	LOAM	FIRM	PALE OLIVE	FEW DISTINCT
30–40				
40–50				

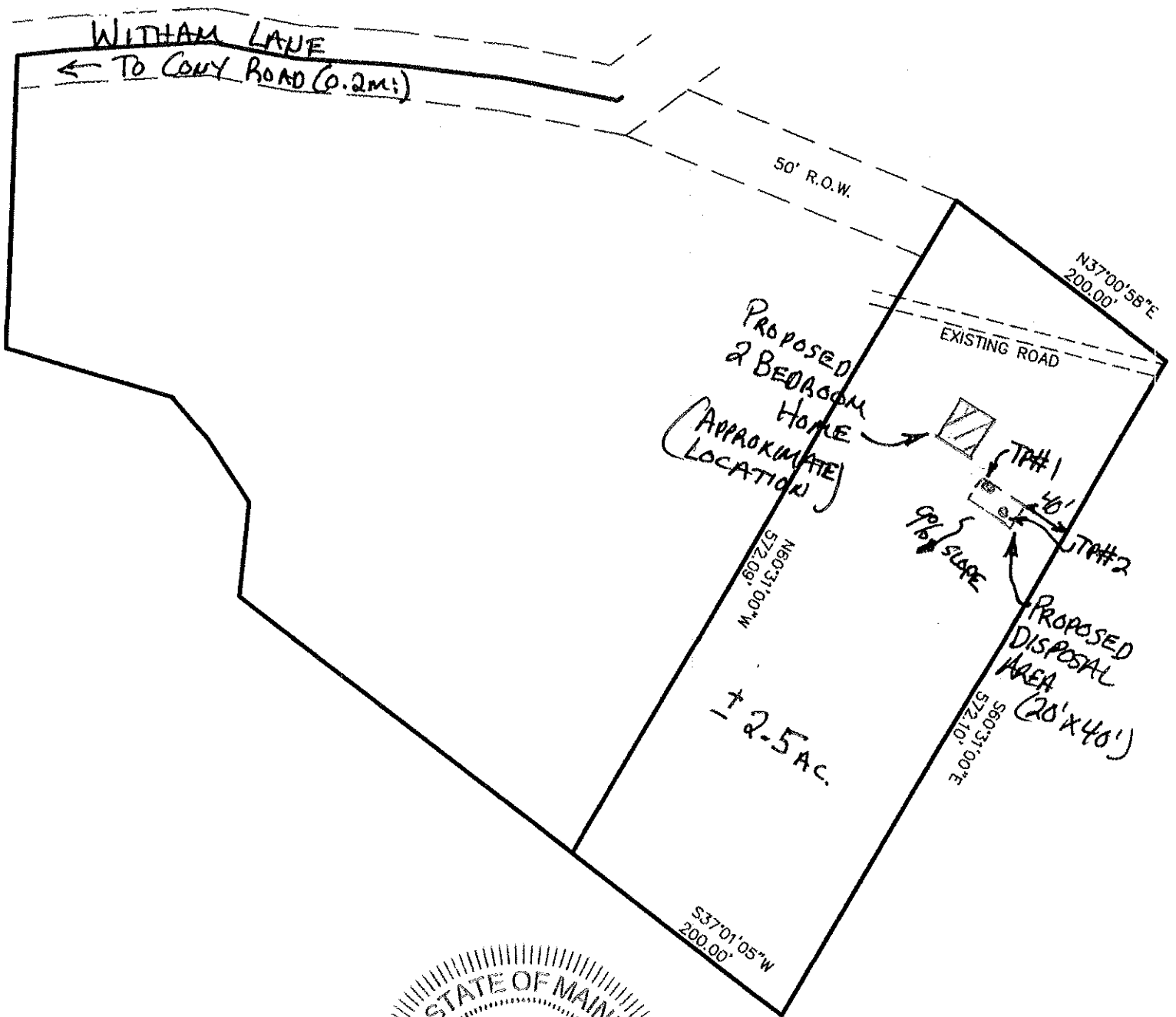
Soil Classification: Profile 3, Condition C
Slope: 6%
Limiting Factor: 18" ☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

STATE OF MAINE — VAUGHN L. SMITH — LIC. 226 — SITE EVALUATOR

Site Evaluator Signature: Vaughn L. Smith
Date: 6/12/13

HHE-200 Rev. 7/97

SCALE: 1" ≈ 110 FEET



STATE OF MAINE
VAUGHN L. SMITH
226
LICENSED SITE EVALUATOR

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

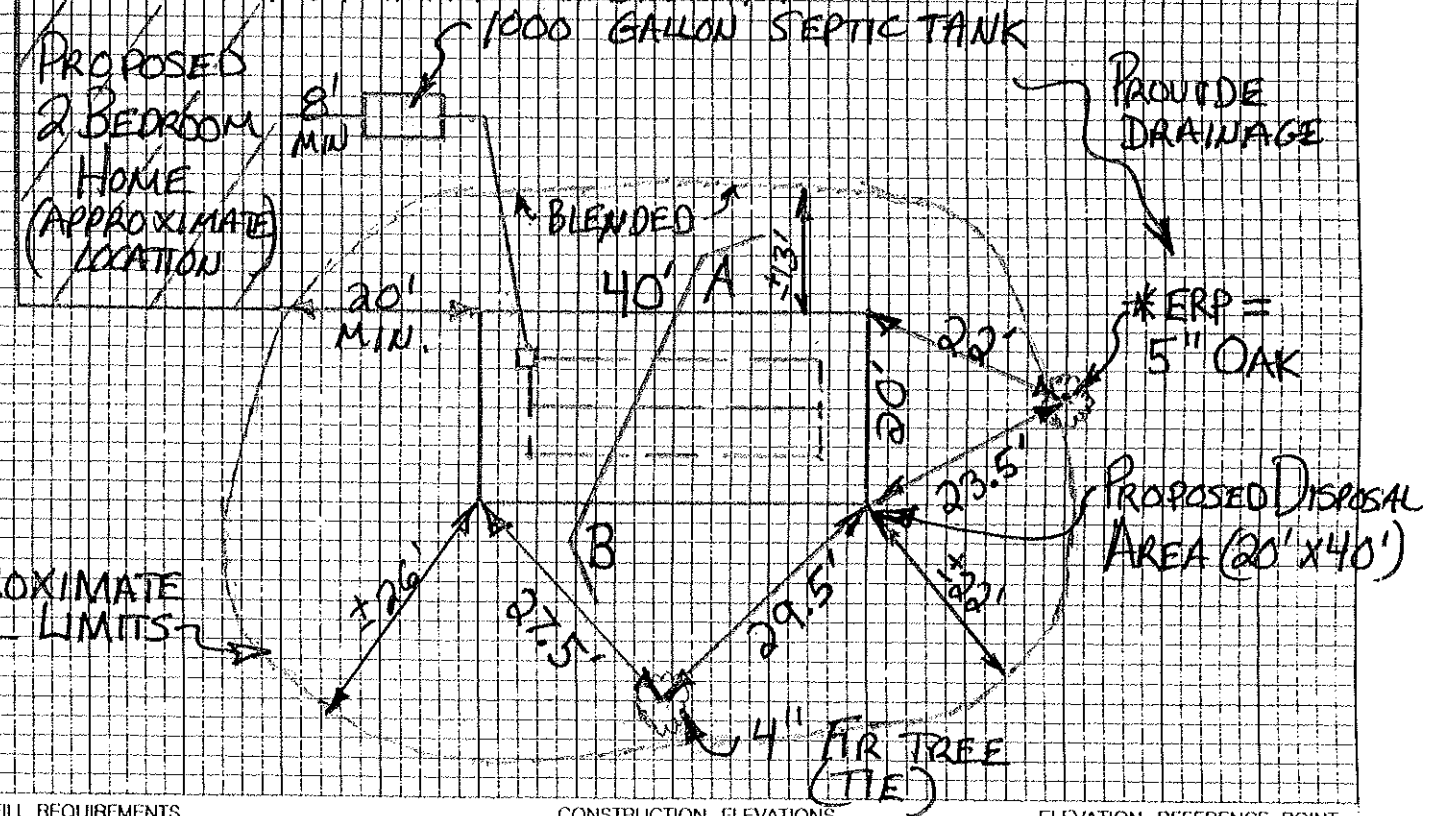
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: WITHAM LANE
Owner's Name: JAMES HENDERSON

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.

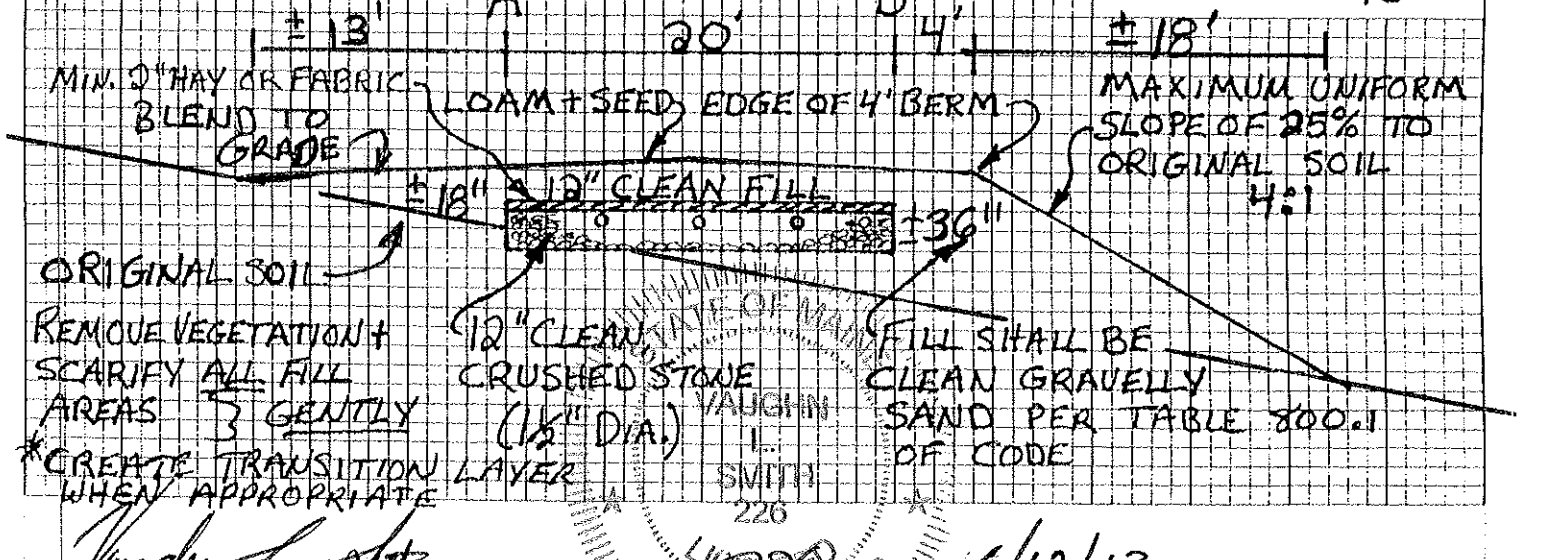
NOTE:
ALL TIES/ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	±18"	Finished Grade Elevation	-30"	Location & Description	5" OAK W/NAIL 47" ABOVE GROUND
Depth of Fill (Downslope)	±36"	Top of Distribution Pipe or Proprietary Device	-42"	Reference Elevation	0"
FILL DEPTHS WILL VARY		Bottom of Disposal Area	-54"		

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 10'



Site Evaluator Signature: Vaughn L. Smith
Date: 6/12/13

STATE OF MAINE
VAUGHN L. SMITH
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LICENSED SITE EVALUATOR