SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

City, Town, or Plantation: AUGUSTA

Street or Road: 486 RT 17 EASTERN AVE

Subdivision, Lot #: 1

AUGUSTA PERMIT # 6443 TOWN COPY

Date Permit Issued: 5/12/10 $ 120.00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. #

OWNER/APPLICANT INFORMATION

Name (last, first, MI): R. PETERS ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 52 Water ST, Oakland ME. 04963

Daytime Tel. #: 242-2059

Municipal Tax Map # 11 Lot # 255

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.

Signature of Owner or Applicant — Date 3-31-10 RP

CAUTION: INSPECTION 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 6/3/11 — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

☒ 1. First Time System
☐ 2. Replacement System
Type replaced: ____
Year installed: ____
☐ 3. Expanded System ☐ a. Minor Expansion ☐ b. Major Expansion
☐ 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 Permit

DISPOSAL SYSTEM COMPONENTS

☒ 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

2.75 AC± ☐ 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)

Current Use ☐ Seasonal ☐ Year Round ☒ Undeveloped

TYPE OF WATER SUPPLY

PROPOSED
☒ 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
OR ☒ b. Low Profile WITH FILTER.
☒ 2. Plastic
☐ 3. Other: ____
CAPACITY: 1000 GAL.

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: 400 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

(☒ 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

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
2 C ATU 1
at Observation Hole # TP-1
Depth 24"
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

EFFLUENT EJECTOR PUMP

☐ 1. Not Required
☐ 2. May Be Required DEPENDS ON TANK ELEVATION
☐ 3. Required
Specify only for engineered systems:
DOSE: ____ gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 17 m 50.5 s
Lon. -69 d 43 m 47.8
If g.p.s. state margin of error: 17'

SITE EVALUATOR STATEMENT

I certify that on 5-15-08 (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 L Studer — 275 (SE #) — 5-16-08 (Date) — STILL OK 3-31-10 DLStuder

DAVID L STUDER, LSE 275
93 SPRAGUE ROAD
WASHINGTON ME 04574
207-845-2352 irenic@midcoast.com

845-2352 (Telephone Number) irenic@midcoast.com (E-mail Address)

sign should be confirmed with the Site Evaluator.

HHE-200 Rev. 4/05

RECEIVED MAR 31 2010 CEO

Tiffany Petey # 465-6223

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3166

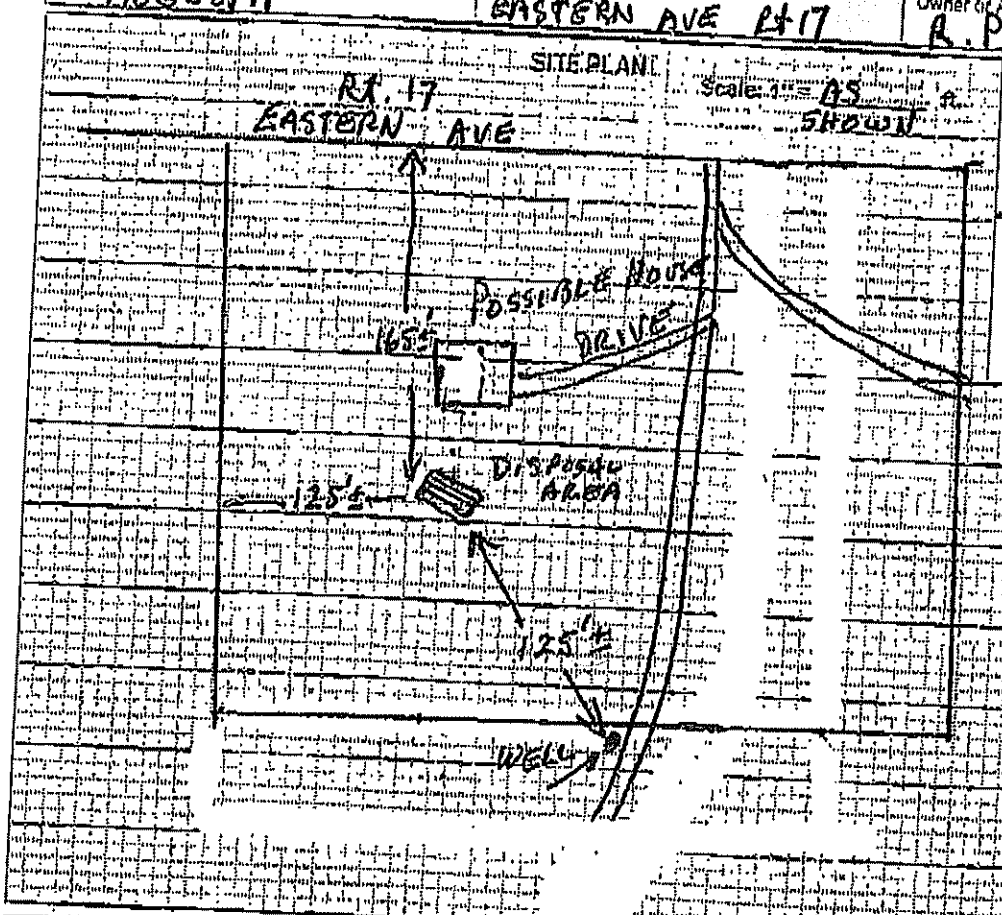
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: EASTERN AVE Rt 17

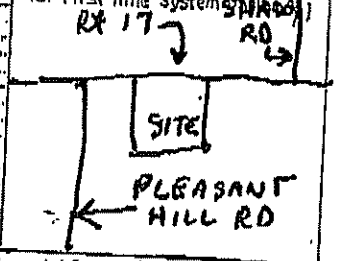
Owner or Applicant Name: R. PETERS

SITE PLAN

Scale: 1" = AS SHOWN ft.



SITE LOCATION MAP
(Attach map from Maine Atlas for First Time System Sheet)



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

Observation Hole # TP-1 ☒ Test Pit ☐ Boring

0-1/2" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0				
6	LOAM		DK BN	
		FRIABLE		
12				
18	GRAVELLY SANDY LOAM TO LOAMY SAND		ORANGE	
24			OLIVE	C.D.
30	LARGE ROCK OR LEDGE			
36				
42				
48				

Soil Profile: 2C A III — Classification: — Slope Percent: 12-14 — Limiting Factor Depth: 24 — ☒ Groundwater ☒ 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
0				
6				
12				
18				
24				
30				
36				
42				
48				

Soil Profile: — Classification: — Slope Percent: — Limiting Factor: — ☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

D Studer — Site Evaluator Signature

275 — SE #

5-16-08 — Date

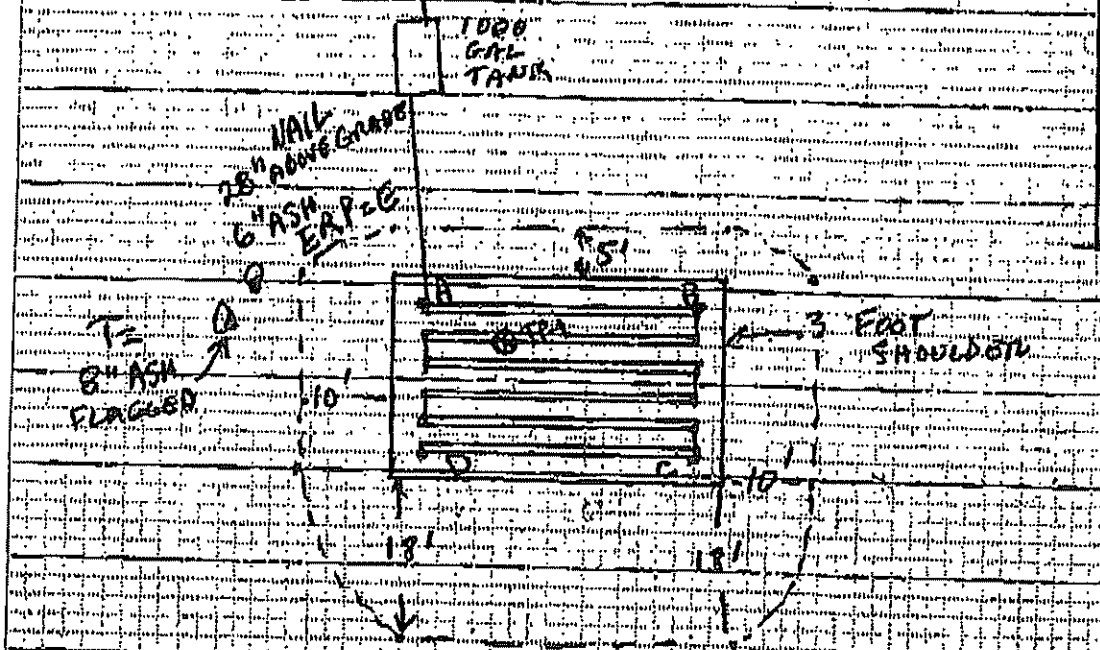
Still OK 3-31 D Studer

Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3166

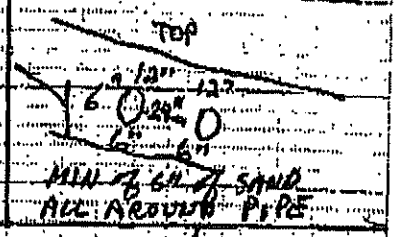
Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	Rt 17 EASTERN AVE	R. PETERS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



DETAIL NOT TO SCALE



TE = 5'
TA = 20.25
TB = 50
TC = 52
TD = 24.75

EA = 18'
EB = 47.75
EC = 51
ED = 25.75

ORIGINAL ELEVATIONS
A = -36
B = -42
C & D = -64

SERIAL DISTRIBUTION
6 ROWS of 30' LONG ENVIRO SEPTIC PIPE
3' ON CENTER; 2' BETWEEN ROWS
DISTRIBUTION MAY BE REVERSED TO FEED AT "B" INSTEAD of "A"

5" DROP FOR ROWS 1, 2, 3
6" DROP FOR ROWS 4, 5 & 6

BACKFILL REQUIREMENTS
Depth of Backfill (upslope) 24-30"
Depth of Backfill (downslope) 24"
DEPTHS AT CROSS-SECTION (shown below)

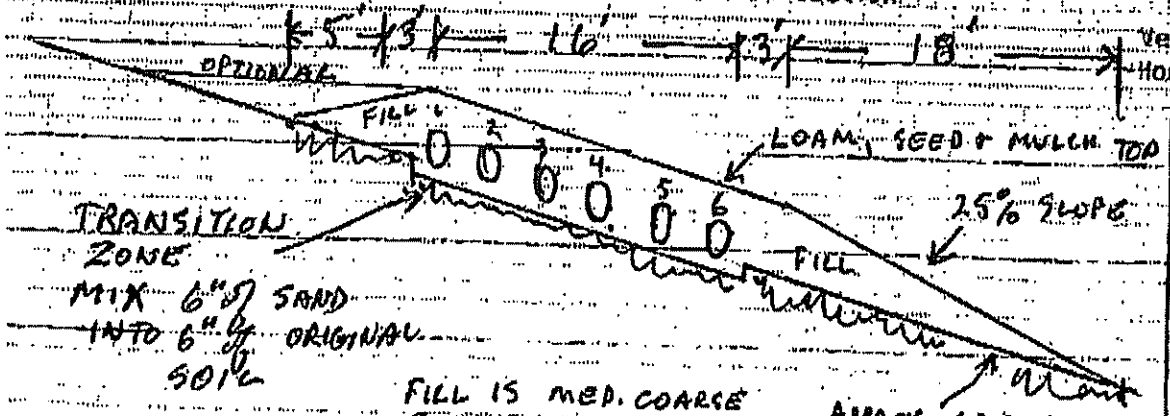
CONSTRUCTION ELEVATIONS
Finished Grade Elevation 12" OVER PIPE
Top of Distribution Pipe or Proprietary Device
Bottom of Disposal Field SEE BELOW

ELEVATION REFERENCE POINT
Location & Description: NAIL IN 6" ASH 28" ABOVE GRADE
Reference Elevation is: 0.0" or:

DISPOSAL FIELD CROSS-SECTION

THRU A → D

Scales:
Vertical: 1" = 5 ft.
Horizontal: 1" = 10 ft.



PIPE ELEVATIONS

ROWS	TOP	BOTTOM
1	-24"	-36"
2	-29"	-41"
3	-34"	-46"
4	-40"	-52"
5	-46"	-58"
6	-52"	-64"

STILL OK 3-31-10 D Studer

D Studer 275 5-16-08

Site Evaluator Signature