623-1324

89 033

Department of Human Services
Division of Health Engineering
(207)289-3826

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street division Lot #	Riverside Drive

PROPERTY OWNERS NAME

Last: Towle First: Clifford L.

Applicant Name:	Clifford L. Towle
Mailing Address of Owner/Applicant (If Different)	381 Riverside Drive Augusta, Maine 04330

AUGUSTA 1792 TOWN COPY

Caution: Permit Required
Subsurface Wastewater Disposal System

Date Permit Issued: 1/26/89 $ 149.19 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1808

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.

Clifford L. Towle — 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 — 5-23-90 Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION n/a
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

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED ?
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☒ TRENCH (probably)
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY ½± acre

ZONING

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. ☐ Requiring Local Plumbing Inspector Approval
b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____
SPECIFY

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

TYPE OF WATER SUPPLY
public water supply

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 AND ELEVATION)
3. ☒ REQUIRED
DOSE: 30 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
2-bedroom, single family dwelling
sized per Table 7-1 of the SSWD Rules (10-144A CMR 241)
(minimum design flow)
DESIGN FLOW: 180 gpd (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
2/3	"B"

DEPTH TO LIMITING FACTOR: 25 at test pit 2

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 300 Sq. Ft.
☒ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 10-28-89 (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.

William T. Noble — Site Evaluator Signature — 75 SE# — 11-12-89 Date

STATE OF MAINE — WILLIAM T NOBLE #75 — LICENSED SITE EVALUATOR

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

89 033

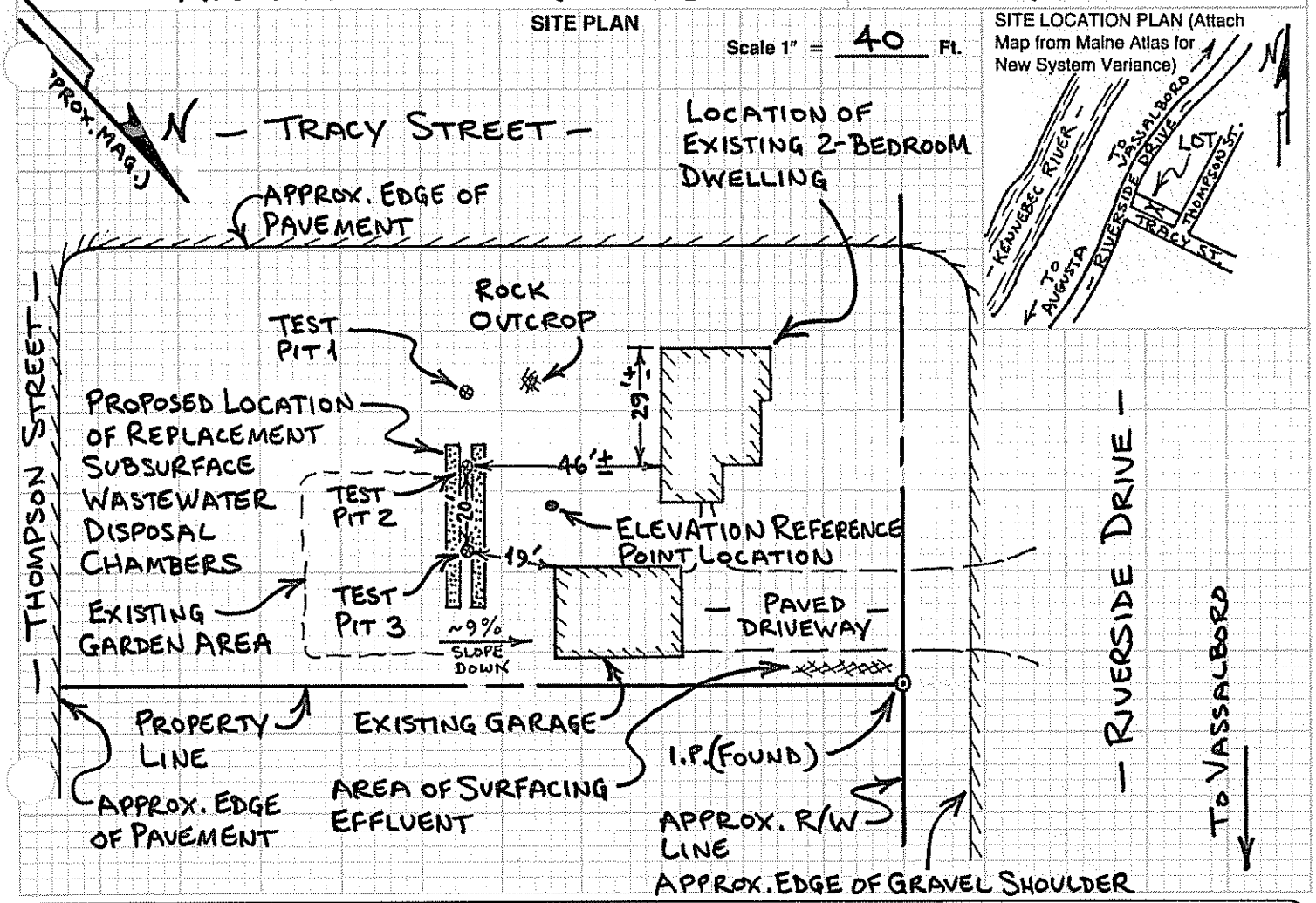
Department of Human Services
Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	RIVERSIDE DRIVE	CLIFFORD L. TOWLE

SITE PLAN

Scale 1" = 40 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 2 ☒ Test Pit ☐ Boring

1/2 " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6			DARK BROWN	
6–10	FINE SANDY LOAM	FRIABLE	STRONG BROWN	
10–15			YELLOWISH BROWN	
15–20				
20–30		"SOMEWHAT" FIRM	OLIVE BROWN	FEW FAINT
30–50				

NOTE: TEST PIT 1 REVEALED A SIMILAR SOIL PROFILE, BUT WITH BEDROCK AT A DEPTH OF 15", AND IS CLASSIFIED AS 2·B/AIII SOIL.

Soil Profile	Classification Condition	Slope	Limiting Factor	
2/3	"B"	~9 %	25"	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock

Observation Hole 3 ☒ Test Pit ☐ Boring

NONE " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6				
6–10	FINE SANDY LOAM	FRIABLE	DARK BROWN	
10–15				
15–20			STRONG BROWN	
20–30			YELLOWISH BROWN	
30–40			OLIVE BROWN	FEW FAINT
40–50				

NOTE: TEST PIT LOCATED IN ACTIVE GARDEN AREA.

Soil Profile	Classification Condition	Slope	Limiting Factor	
2	"B"	~9 %	28"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

William L. Noble
Site Evaluator Signature

75
SE#

11-12-89
Date

89 033

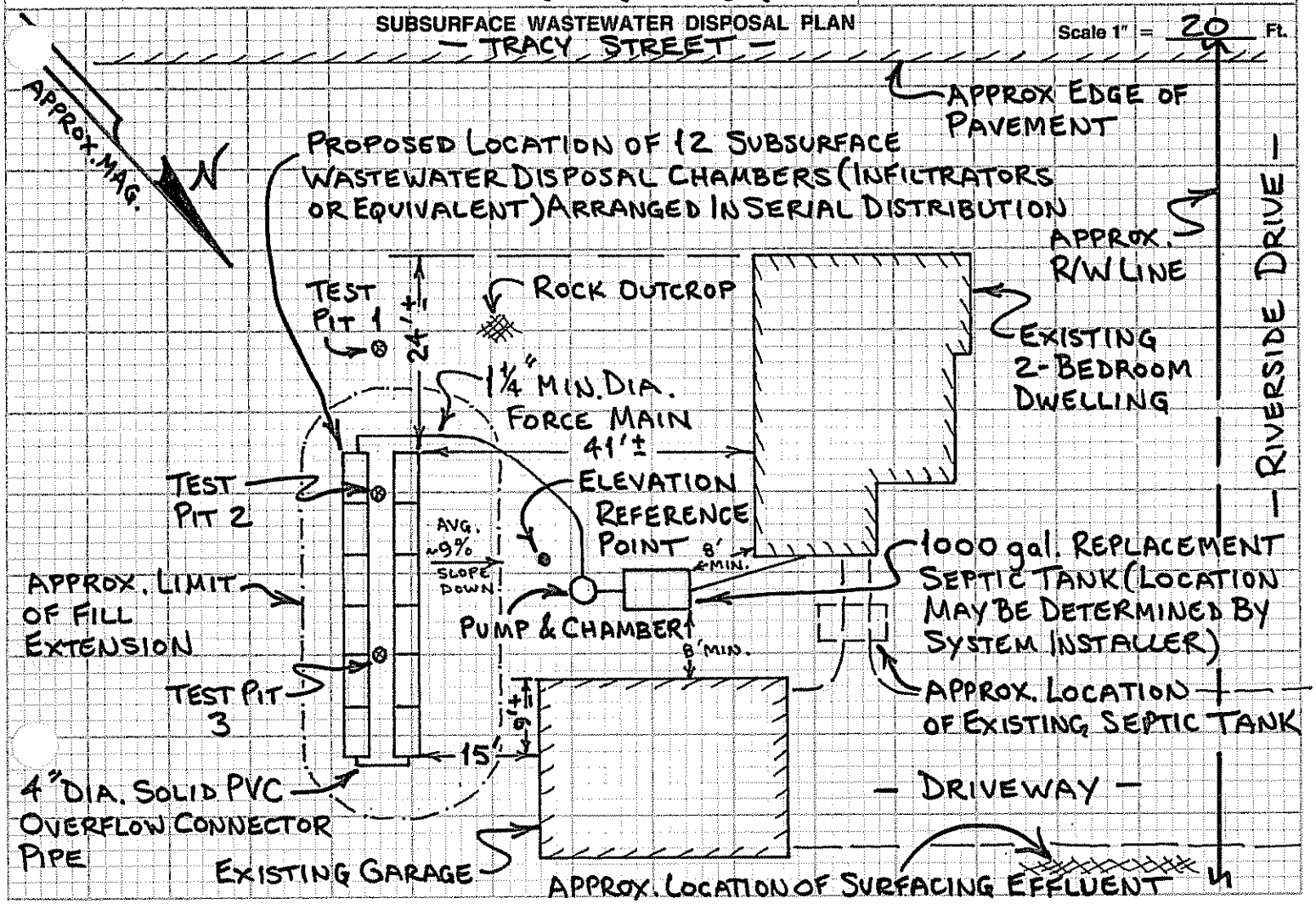
Department of Human Services
Division of Health Engineering

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	RIVERSIDE DRIVE	CLIFFORD L. TOWLE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope): 10"

Depth of Fill (Downslope): 13±"

(SEE NOTES 5 AND 6 BELOW)

CONSTRUCTION ELEVATIONS

Reference Elevation is 0.0"

Bottom of Disposal Area

Top of Distribution Lines or Chambers

(SEE CROSS-SECTION DIAGRAM BELOW)

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL WITH ORANGE FLAGGING IN CLOTHESLINE POST, 54" ABOVE GROUND LEVEL AT BASE OF POST.

DISPOSAL AREA CROSS SECTION

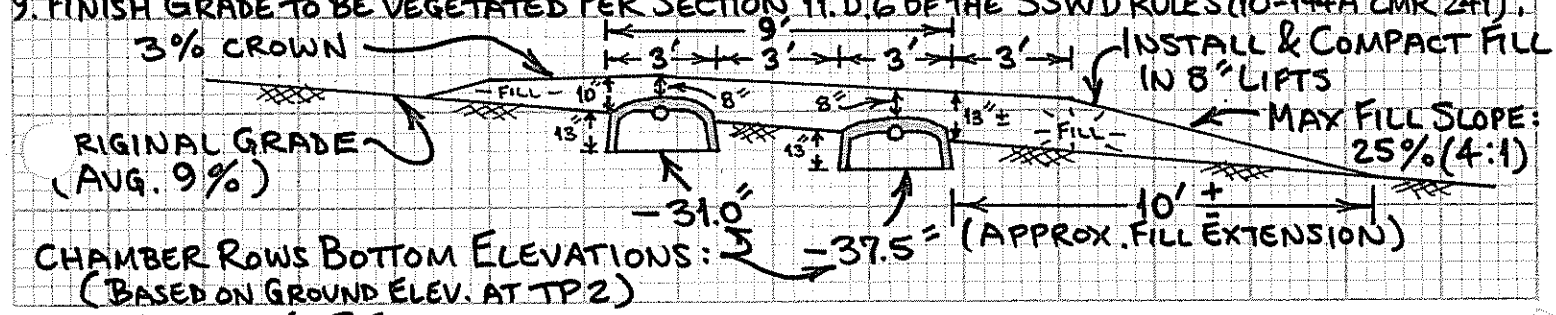
Scale:

Vertical: 1 inch = 5 Ft.

Horizontal: 1 inch = 5 Ft.

NOTES:

1. INSTALL CHAMBERS AS DIRECTED BY MANUFACTURER/DISTRIBUTOR.
2. BACKFILL & PERIMETER FILL TO BE SANDY LOAM TO LOAMY SHARP SAND IN TEXTURE.
3. GRADE LAND AROUND CHAMBERS TO DIVERT ANY WATER FROM THE AREA.
4. REMOVE ORGANIC LAYER & SCARIFY THE SOIL SURFACE BEFORE INSTALLING FILL.
5. REQUIRED FILL DEPTHS MAY VARY FROM THOSE SHOWN DUE TO IRREGULARITIES IN SOIL SURFACE.
6. MAX. CUT INTO ORIGINAL SOIL TO BE 13" AT UPHILL EDGE OF EACH CHAMBER ROW.
7. BOTTOM OF CHAMBERS TO BE LEVEL WITH MAX. GRADE TOLERANCE OF 1" PER 100'.
8. LOCATE TEST PITS 2 & 3 ON THE LOT & POSITION CHAMBERS OVER PITS AS SHOWN IN ABOVE PLAN.
9. FINISH GRADE TO BE VEGETATED PER SECTION 11.D.6 OF THE SSWD RULES (10-144A CMR 241).



William T. Noble — Site Evaluator Signature

75 — SE#

11-12-89 — Date

HHE-200 Rev. 1