M52 L1B

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation: AUGUSTA

Street Subdivision Lot #: 618 RIVERSIDE DRIVE

PROPERTY OWNERS NAME

Last: PISELLI First: JOE

Applicant Name: SAME

Mailing Address of Owner/Applicant (If Different): 618 RIVERSIDE DRIVE AUGUSTA 04330

AUGUSTA 3045 TOWN COPY

Date Permit Issued: 8 30 92

Local Plumbing Inspector Signature

$ 60.00 FEE ☐ If Double Fee Charged

L.P.I. # 85

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.

Joseph M Piselli 8/30/92

Signature of Owner/Applicant — Date

Caution: Inspection Required

Have inspected the installation authorized above and found it to be in Compliance with the Subsurface Wastewater Disposal Rules

Local Plumbing Inspector Signature — Date Approved 9/12/92

PERMIT INFORMATION

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

SEASONAL CONVERSION
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

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

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

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

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

SIZE OF PROPERTY: 2 AC±

ZONING: RESIDENTIAL

TYPE OF WATER SUPPLY: CITY

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: _____ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
(3) BEDROOM
MODERATE FLOW

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
7	C

DEPTH TO LIMITING FACTOR: 16

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

DISPOSAL AREA TYPE/SIZE
1. ☒ BED 1188 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft
4. ☐ OTHER: _____

DESIGN FLOW: 360.— (GALLONS/D)

SITE EVALUATOR STATEMENT

Soil (Profile)	Classification (Condition)	Slope %	Limiting Factor	
7	C	5	16	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Soil	Classification	Slope %	Limiting Factor	
				☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA

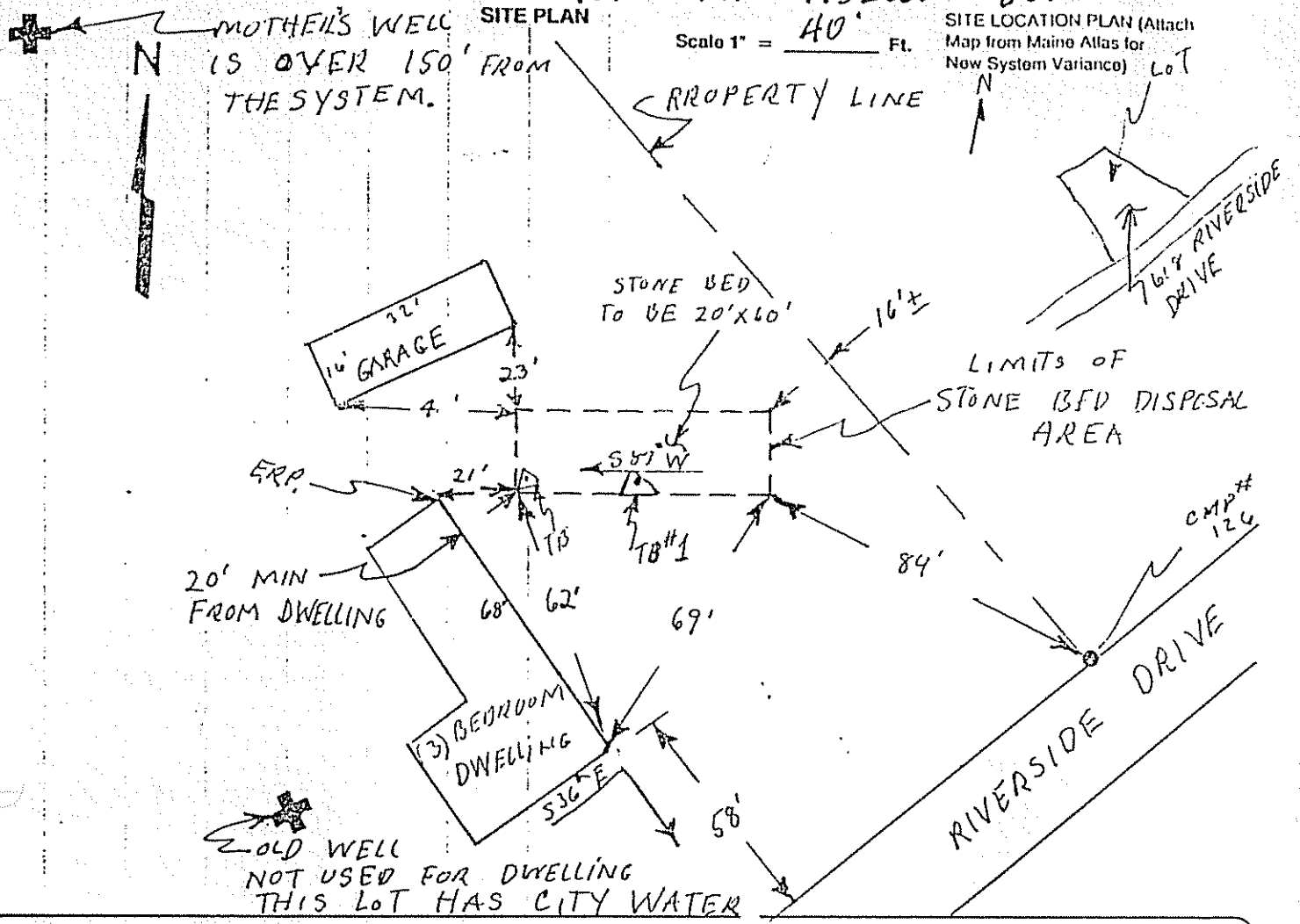
Street, Road, Subdivision: 618 RIVERSIDE DRIVE

Owners Name: JOE PISELLI

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 TB#1 ☐ Test Pit ☒ Boring

1" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0–6	SANDY LOAM	FRIABLE	DARK BROWN	
6–10	↓	↓	↓	
10–15	SANDY LOAM	FRIABLE	YELLOW BROWN	
15–20	SANDY LOAM	FRIABLE	YELLOW TO OLIVE	COMMON DISTINCT
20–30	SILT LOAM	FIRM	OLIVE TO GRAY	
30–40	FINE SAND	FIRM	OLIVE TO GRAY	

Soil	Classification	Slope	Limiting Factor	
7	C	5 %	16	☒ Unsuitable Water ☐ Restrictive Layer ☐ Backyard

Observation Hole _____ ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Depth	Texture	Consistency	Color	Mottling
0–6				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

Soil	Classification	Slope	Limiting Factor	
		%		☐ Unsuitable Water ☐ Restrictive Layer ☐ Backyard

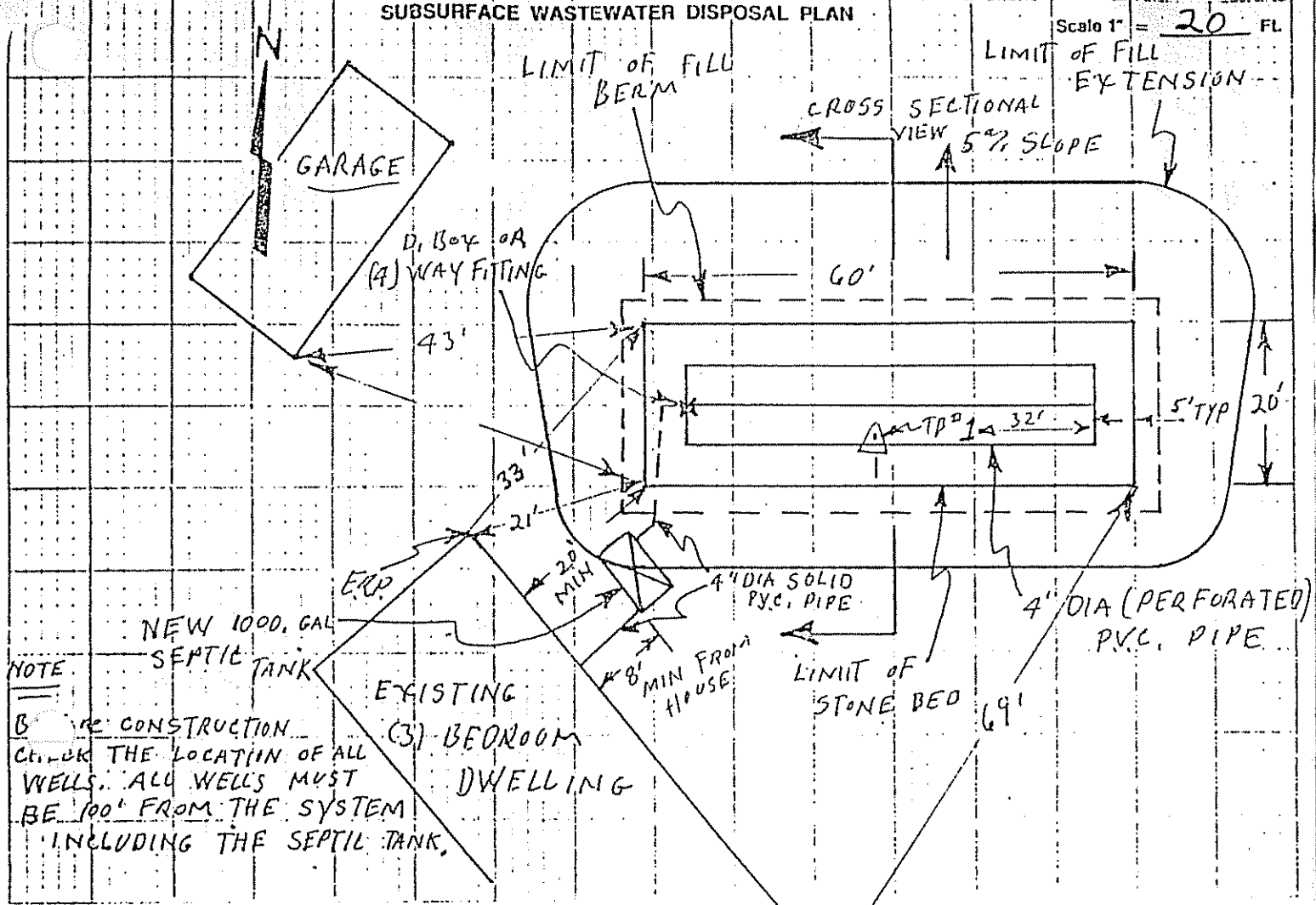
SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

City, Plantation: AUGUSTA | Street, Road, Subdivision: 618 RIVERSIDE DRIVE | Owners Name: PISELLI JOE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 FT.



NOTE

BEFORE CONSTRUCTION CHECK THE LOCATION OF ALL WELLS. ALL WELLS MUST BE 100' FROM THE SYSTEM INCLUDING THE SEPTIC TANK.

FILL REQUIREMENTS

Depth of Fill (Upslope) _____

Depth of Fill (Downslope) _____

CONSTRUCTION ELEVATIONS

~~Reference Elevation is~~ ---

Bottom-of-Disposal-Area ---

~~Top-of-Distribution-Lines-or-Chambers~~ ---

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

_____

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 Inch = _____ Ft.

Horizontal: 1 Inch = _____ Ft.

SEE ATTACHED SHEET 3A

SEE CONSTRUCTION NOTES ATTACHED TO FORM HHE-200

AUGUSTA 618 RIVERSIDE DRIVE PISELLI JOE

REFERENCE ELEVATION = 0"

ROW	1	2	3	4	5	6	7
BOTTOM OF DISPOSAL AREA	±60"	—	—	—	—	—	—
TOP OF DISTRIBUTION LINES OR CHAMBERS	±49"	—	—	—	—	—	—

DEPTH OF FILL (UPSLOPE) = 22" ±

DEPTH OF FILL (DOWNSLOPE) = 32" ±

[redacted]

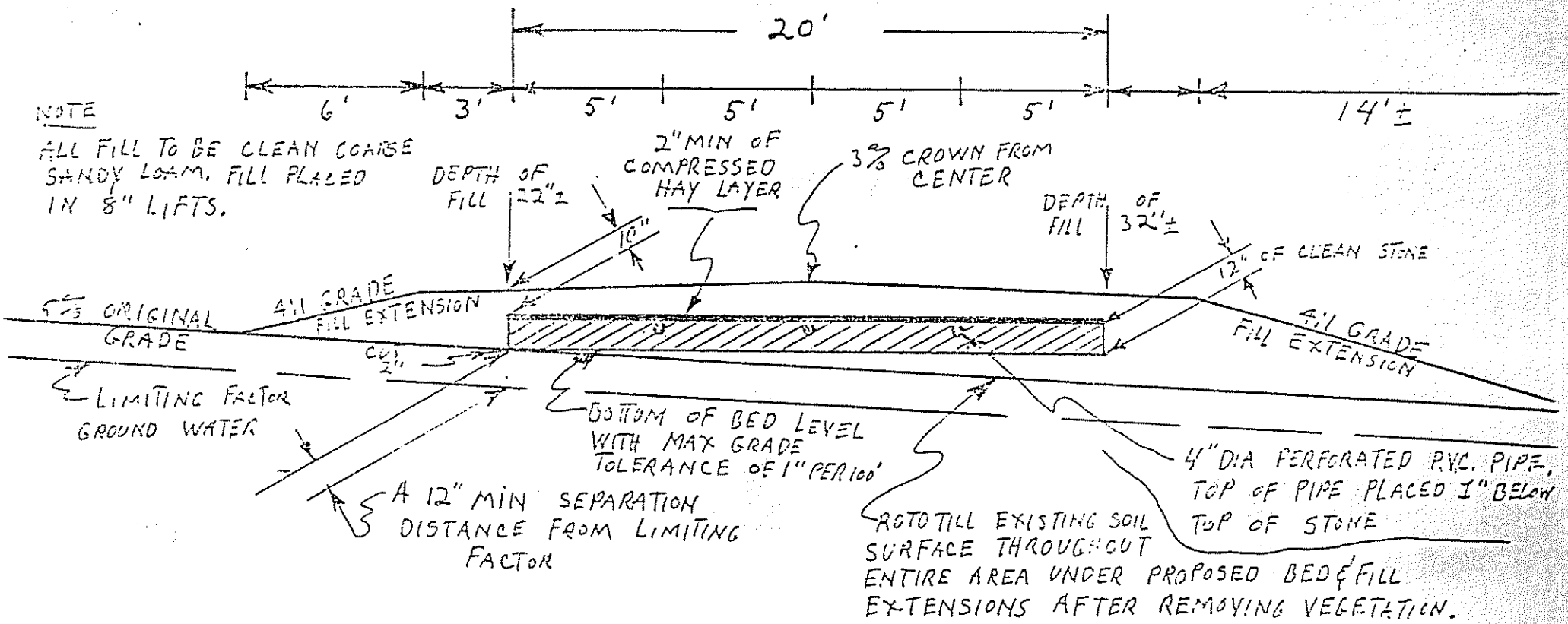
ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

THE ERP IS WHERE THE BRICK FOUNDATION WALL MEETS THE CEMENT FOUNDATION WALL ON THE CORNER OF THE DWELLING. (SEE SHEET 3)

SCALE:

VERTICAL 1 INCH = 5 FT

HORIZONTAL 1 INCH = 5 FT

ATTACHMENT

SHEET 3A