PIF 10/26/15

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5672 Fax (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA
Street or Road	15 STEVENS RD.
Subdivision, Lot #	155/45

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

AUGUSTA PERMIT #7153 TOWN COPY
Date Permit Issued: 10/23/15 $ 250.00 fee
15.00
LPI # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	DICKINSON, SALLY ☒ Owner ☐ Applicant
Mailing Address of Owner/Applicant	600 Edgehill Place Apopka, FL. 32703
Daytime Tel. #	321-439-1871

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.

Wayne Chadwick 10-23-15
Signature of Owner or 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 Application.

Gary R. Fuller — 11/2/15
Local Plumbing Inspector Signature — (1st) date approved — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION
- ☐ 1. First Time System
- ☒ 2. Replacement System
  - Type replaced: stone trench
  - Year installed: ~50's
- ☐ 3. Expanded System
  - ☐ a. <25% Expansion
  - ☐ b. ≥25% 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
1/4 Ac+ ☐ SQ. FT. ☒ ACRES

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE
- ☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 2
- ☐ 2. Multiple Family Dwelling, No. of Units: _____
- ☐ 3. Other: _____ (specify)

Current Use ☐ Seasonal ☒ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY
☐ 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
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other:

CAPACITY: 1,000 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: 20' x 30'

SIZE: 600 ☒ 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
180 gallons per day
BASED ON:
- ☒ 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
12/2-C
at Observation Hole # TA-1
Depth 38"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
- ☐ 1. Medium—2.6 sq. ft. / gpd
- ☒ 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
- ☒ 1. Not Required
- ☐ 2. May Be Required
- ☐ 3. Required

(Contractor Verify prior to Constr)

Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44 d 22 m 9.6 s
Lon. 69 d 43 m 36.7 s
if g.p.s, state margin of error: ±10'

SITE EVALUATOR STATEMENT

I certify that on 10-5-15 (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).

Stephen A. Down — 257 — 10-12-15
Site Evaluator Signature — SE # — Date

STEPHEN A. DOWN — 207-557-0793 — stevedown123@gmail.com
Site Evaluator Name Printed — Telephone Number — E-mail Address

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

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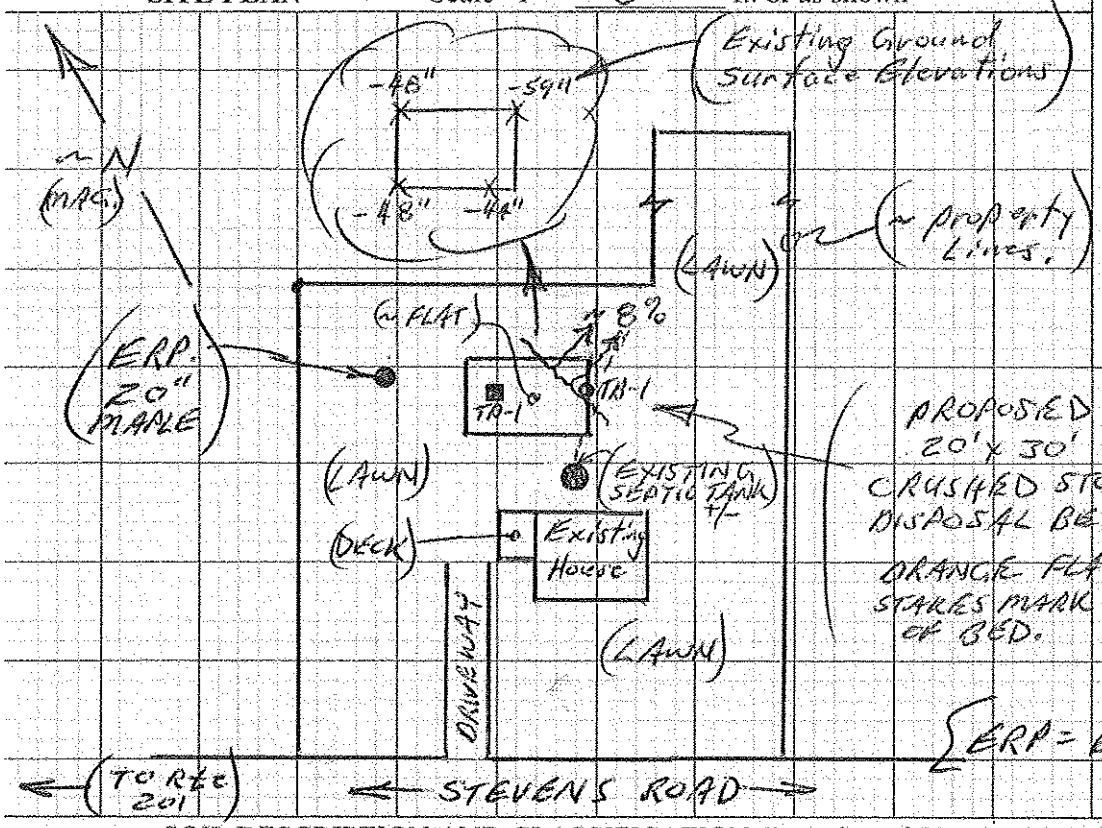
Department of Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

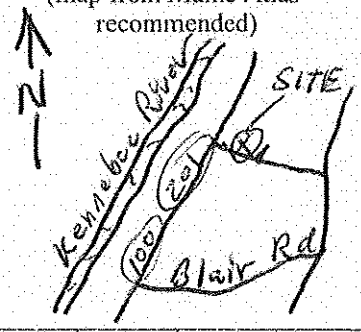
Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 15 STEVENS RD.
Owner's Name: SALLY DICKINSON

SITE PLAN Scale 1" = 50' ft. or as shown



[ERP = Elevation Reference Point.]

SITE LOCATION PLAN
(map from Maine Atlas recommended)



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

Observation Hole TP-1 ☒ 44" Test Pit ☒ 56" Boring
1"-2" " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–56"	SILTY SAND, (OLD FILL) WITH SCATTERED DEBRIS	FRIABLE with LOOSE ZONES	LIGHT TO MEDIUM BROWN	NONE EVIDENT
				COMMON, FAINT. 46" (10-5-15)

Soil Classification	Slope	Limiting Factor
12/2 (Profile) C (Condition)	0-8 %	38" ±

☒ Ground Water
[ ] Restrictive Layer
[ ] Bedrock
[ ] Pit Depth

Observation Hole TB-1 ☐ Test Pit ☒ Boring 54"
_____ " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–50				

GENERAL NOTES:

MAINTAIN 20 FT. MIN. DIST. BETWEEN THE STONE BED OR PROPRIETARY DEVICE & THE DWELLING.

EMPTY EXISTING SEPTIC TANK, CRUSH OR REMOVE AND BACKFILL (compacted) VOID SPACE.

INSTALL SEPTIC TANK AT LEAST 8 FT. FROM THE DWELLING.

Soil Classification	Slope	Limiting Factor
12/2 (Profile) C (Condition)	____ %	____ "

[ ] Ground Water
[ ] Restrictive Layer
[ ] Bedrock
[ ] Pit Depth

Stephen A. Brown 257 10-12-15
Site Evaluator Signature SE # Date

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Division of Environmental Health
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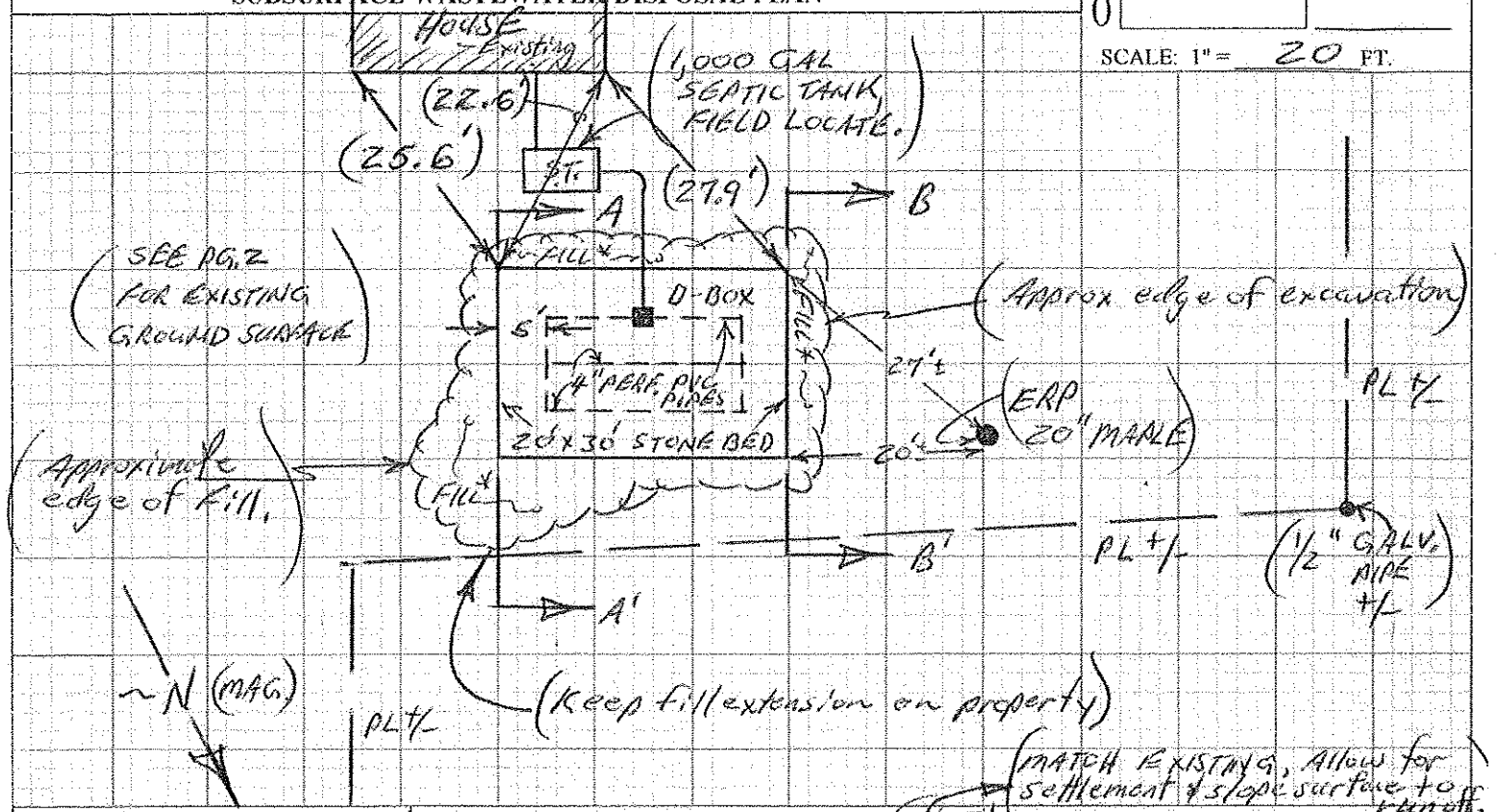
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: 15 STEVENS ROAD

Owner's Name: SALLY DICKINSON

SUBSURFACE WASTEWATER DISPOSAL PLAN

0 _____ SCALE: 1" = 20 FT.

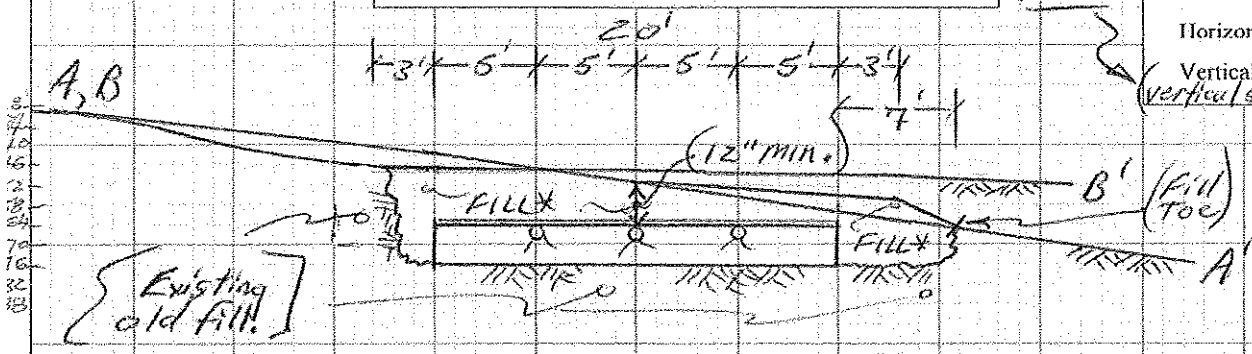


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	30"-34"±	Finished Grade Elevation (At Ctr. of Bed)	-40"+/- (MATCH EXISTING, Allow for settlement & slope surface to run off.)	Location & Description: ORANGE FLAGGED NAIL IN 20" MAPLE, ABOUT 4 FEET ABOVE GROUND
Depth of Fill (Downslope)	24"-30"±	Top of Distribution Pipe ~~or Proprietary Device~~	-65"	Reference Elevation: = 0" = ERP
		Bottom of Disposal Area (bottom of stone)	-76"	

DISPOSAL AREA CROSS SECTION

Note:

Scale
Horizontal 1" = 5 ft.
Vertical 1" = 10 ft.
(vertical scale is exaggerated)



CONSTRUCTION TO COMPLY WITH 'THE CODE', 10-144 CMR 241.
REMOVE VEGETATION, ORGANICS, WASTEWATER CONTAMINATED & DELETERIOUS MATERIAL.
PROPERLY DISPOSE OF WASTE. FILL ANY SUBEXCAVATION / VOIDS WITH "FILL*" OR SILTY MEDIUM TO COARSE SAND.
PLACE FILTER FABRIC OR 2" COMPRESSED HAY ON 12" LAYER OF 3/4" to 1-1/2" CLEAN CRUSHED STONE.
*FILL: COARSE GRAVELLY SAND PER SECTION 11-E OF THE CODE.
MAINTAIN A MINIMUM 3% GRADE OVER THE BED, MAY SLOPE ALL ONE DIRECTION OVER THE BED.
PROVIDE FOR SURFACE RUNOFF & DRAINAGE AWAY FROM THE DISPOSAL AREA.
LOAM (4" MINIMUM), SEED AND MULCH ALL DISTURBED AREAS.
Questions?, concerns? Or if existing fill varies from that described on page 2, call Site Evaluator.

Stephen A. Brown — 257 — 10-12-15
Site Evaluator Signature — 557-0793 SE # — Date