Call 622-5213
Mary Carter

Called 8/22 12:10 NA
12:45

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of 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: 873 RIVERSIDE DRIVE

Subdivision, Lot #:

AUGUSTA PERMIT # 5419 TOWN COPY

Date Permit Issued: 8/23/05

$ 175.00 ☐ If Double Fee Charged FEE

L.P.I. # 800

Local Plumbing Inspector Signature

OWNER/APPLICANT INFORMATION

Name (Last, First, MI): GERALD CASS ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 873 RIVERSID DRIVE, AUGUSTA, ME 04330

Daytime Tel. #: 623-3196

Municipal Tax Map # 55 Lot # 23

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.

Mary L. Carter 8/22/05
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.

Local Plumbing Inspector Signature Date 9/2/05

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

☐ SQ. FT. ☐ ACRES

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

SHORELAND ZONING

☐ Yes ☒ No

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

☒ Concrete: EXISTING
☒ Regular: SEPTIC
☐ Low Profile: TANK TO
☐ 2. Plastic: BE USED
☐ 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: 900 ✓ sq. ft. ☐ in. ft.

GARBAGE DISPOSAL UNIT

☒ 1. No ☐ 2. Yes ☐ 3. Maybe
If Yes or Maybe, specify unit 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 501.3 (dwelling unit(s))
☐ 2. Table 501.2 (other facilities)
SHOW CALCULATIONS
--- for other facilities ---
☐ 3. Section 503.9 (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
9	E	5

at Observation Hole # 2
Depth: 0-
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
☐ 3. Required
Specify only for engineered systems:
DOSE: ____ gallons

SITE EVALUATOR STATEMENT

I certify that on 8/16/05 (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).

Robert Farrell — Site Evaluator Signature
4007 — SE #
8/16/05 — Date

ROBERT S. FARRELL — Site Evaluator Name Printed
622-3363 — Telephone Number
orw@gwi.net — E-mail Address

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

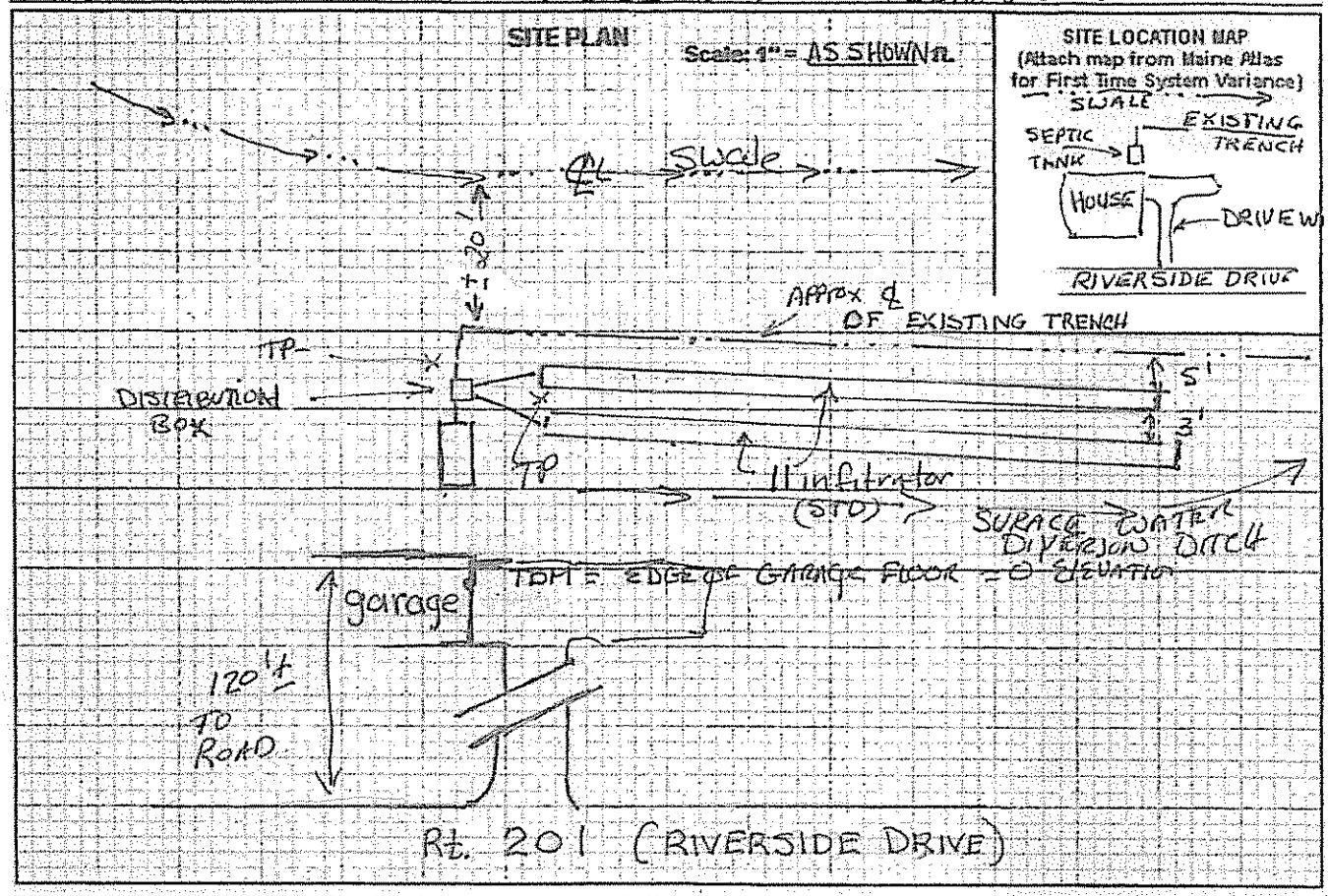
HHE-200 Rev. 8/01

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	873 RIVERSIDE DRIVE	GERALD Cass

SITE PLAN Scale: 1" = AS SHOWN



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

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

Observation Hole # _____ ☒ Test Pit ☐ Boring

2 " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	FILL	FILL	BROWN	—
6–12		SILTY GRAVEL TO SAND		
12–18				
18–24		MARINE SEDIMENT	gray	
24–30				
30–36		SURFACE OF MARINE SEDIMENT WAS ASSUMED TO BE LIMITING FACTOR		
36–42				
42–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
9	E	?		☐ 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				
6–12				
12–18				
18–24				
24–30				
30–36				
36–42				
42–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
				☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Robert Farrell 209 8/18/05

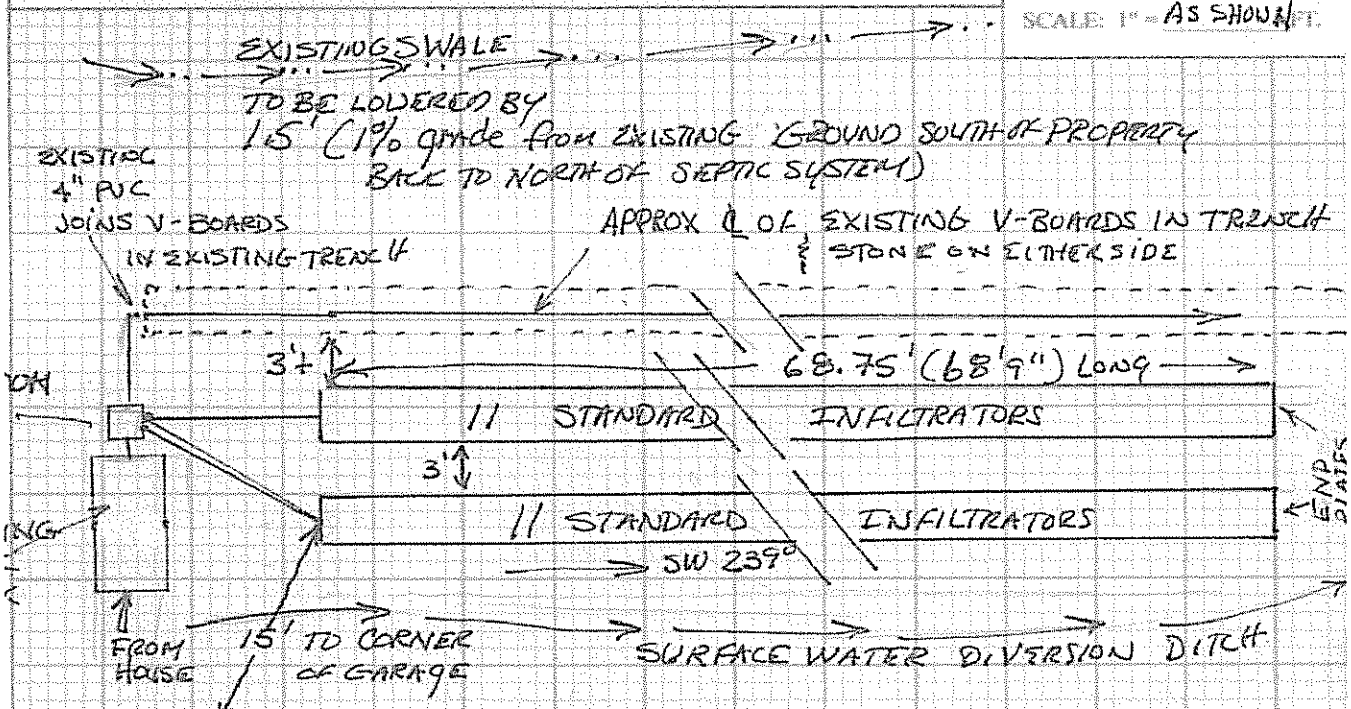
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Augusta	873 RIVERSIDE DRIVE	GERALD CASS

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = AS SHOWN FT.

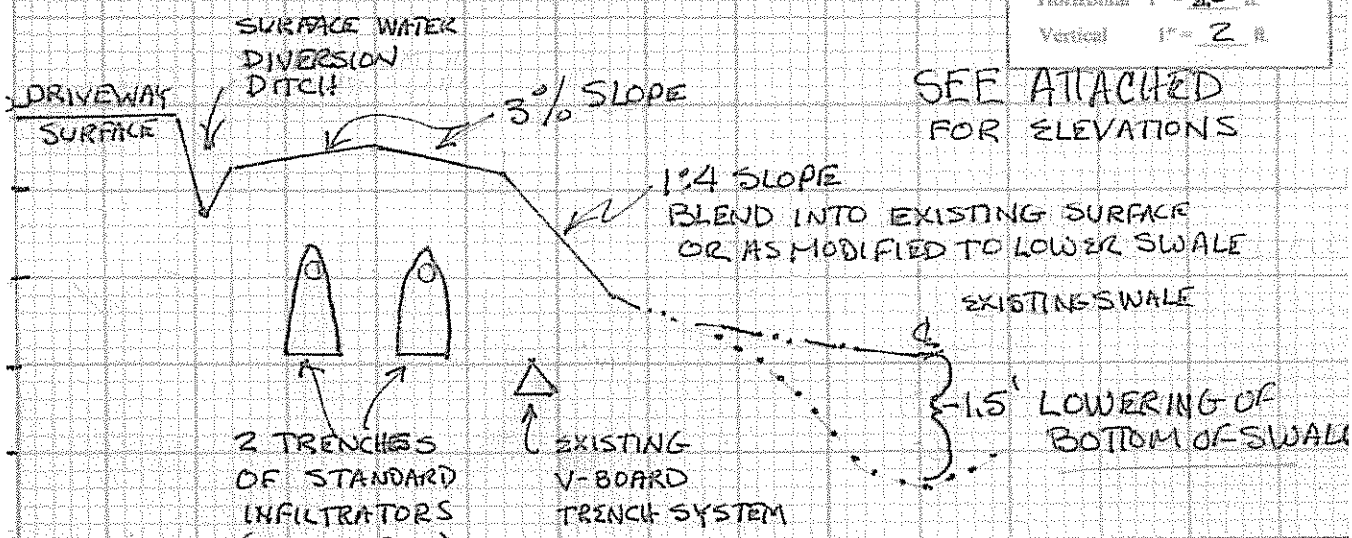


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	VARIABLE	Finished Grade Elevation		Location & Description	OF
		Top of Distribution Pipe or Proprietary Device	-1' 8 7/8"	GARAGE FLOOR	
Depth of Fill (Downslope)	VARIABLE	Bottom of Disposal Area	-2' 10 7/8"	Reference Elevation	0'

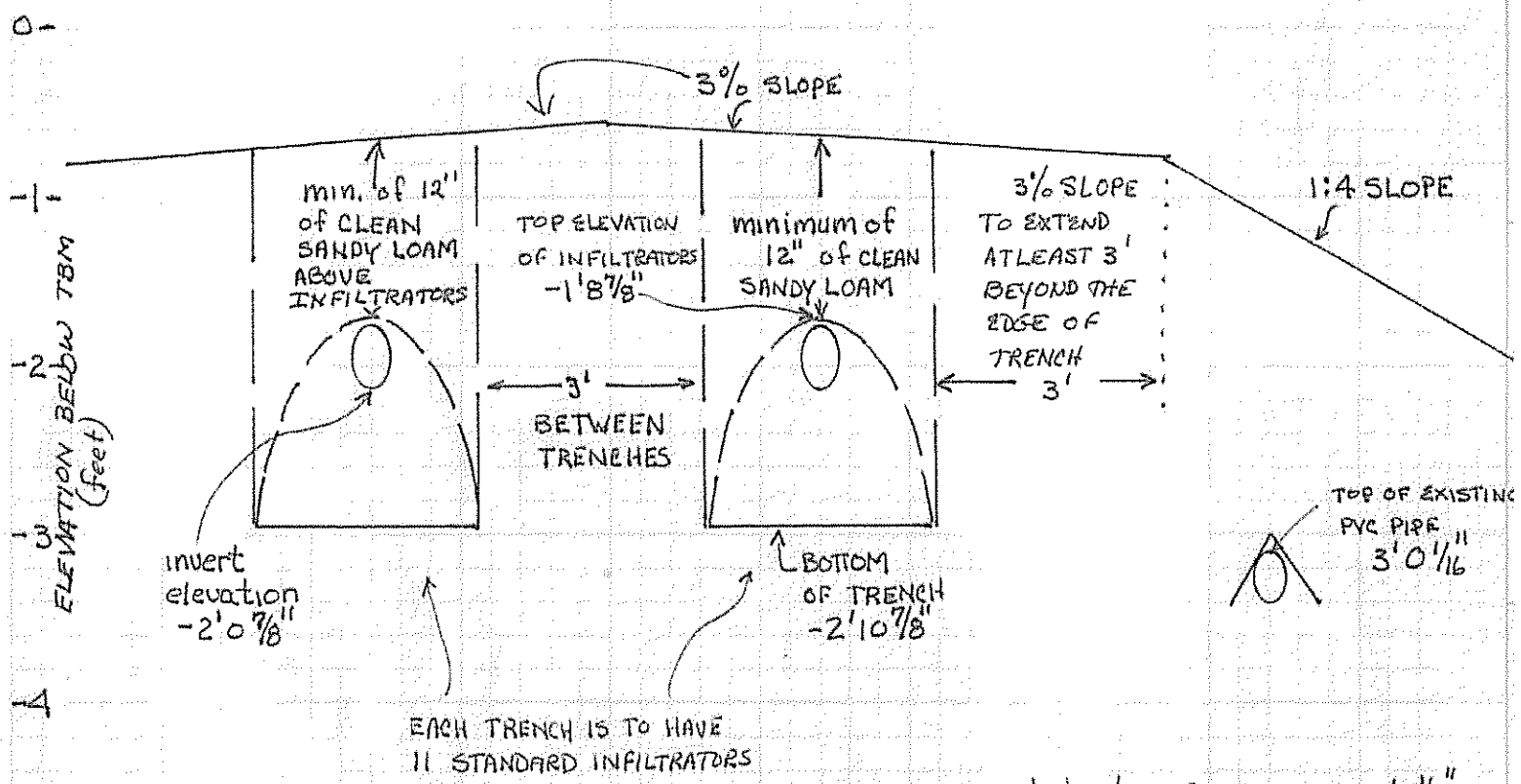
DISPOSAL AREA CROSS SECTION

Scale:
Horizontal 1" = 10 ft.
Vertical 1" = 2 ft.

SEE ATTACHED FOR ELEVATIONS



Robert H Farrel — Site Evaluator Signature
009 — SE #
8/18/05 — Date



current elevation of SWALE IS -2'11 1/4" beside current trench
BOTTOM OF SWALE IS TO BE LOWERED BY 1'6" to ELEVATION -4'5 1/4"

DETAILED SECTION