SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

M75 L1

AUGUSTA PERMIT # 249 STATE COPY

Date Permit Issued 6 19 84 $ 40 FEE ☐ If Double Fee Charged

85 Robert St Pierre
Local Plumbing Inspector Signature

L.P.I. # 1667

PROPERTY ADDRESS

Town Or Plantation	Augusta
Street Subdivision Lot #	Weeks Mill Rd

PROPERTY OWNERS NAME

Last: Bradstreet First: Joe

Applicant Name:	R710 #6
Mailing Address of Owner/Applicant (If Different)	Augusta ME 04330

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 Bradstreet
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.

Robert St Pierre — 12/4/84
Local Plumbing Inspector Signature — Date/Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☒ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☒ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
   ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   4. ☐ Requires both State and Local Plumbing Inspector Approval

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
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 _____

N/A

DISPOSAL SYSTEM TO SERVE:

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☒ OTHER garage - storage (SPECIFY)

SIZE OF PROPERTY	ZONING
30± ac.	N/A

TYPE OF WATER SUPPLY

well proposed

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 gal 750 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.)

2 employees
25 gpd / per emp.

DESIGN FLOW: 50 (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 18" in original

SIZE RATINGS USED FOR DESIGN PURPOSES

1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. ☒ BED 165 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

10' X 16.5'

SITE EVALUATOR STATEMENT

☐ SITE EVALUATION WAIVED BY LOCAL OPTION)

On August 9, 1983 (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.

Stephen E Goodwin — 65 — 10/18/83
Site Evaluator or Professional Engineer's Signature — SE# / PE# — Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local

City

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: Augusta

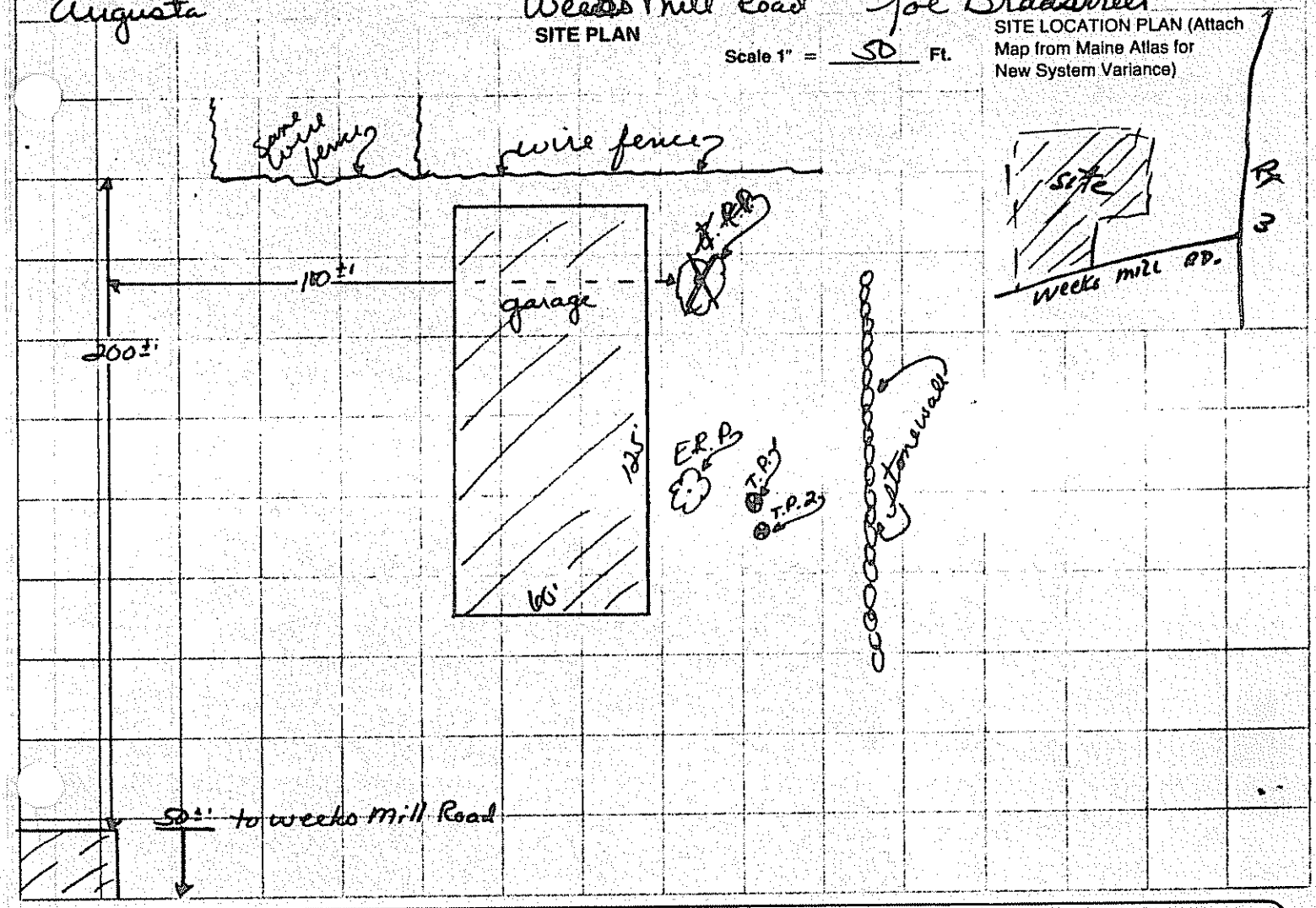
Street, Road, Subdivision: Weeks Mill Road

Owners Name: Joe Bradstreet

SITE PLAN

Scale 1" = 50 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 1 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
54" good sandy loam type fill over 3-C soil			

DEPTH BELOW MINERAL SOIL SURFACE (Inches): 0, 6, 10, 15, 20, 30, 40, 50

Soil	Classification	Slope	Limiting Factor	
3 (Profile)	C (Condition)	0-3 %	16	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole 2 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
loam		brown	
sandy loam	friable	yellowish brown	
sandy loam	firm	grayish brown	

DEPTH BELOW MINERAL SOIL SURFACE (Inches): 0, 6, 10, 15, 20, 30, 40, 50

Soil	Classification	Slope	Limiting Factor	
3 (Profile)	C (Condition)	4-6 %	18	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Stephen E. Hodsin — Site Evaluator or Professional Engineer's Signature

65 — SE# / PE#

10/18/83 — Date

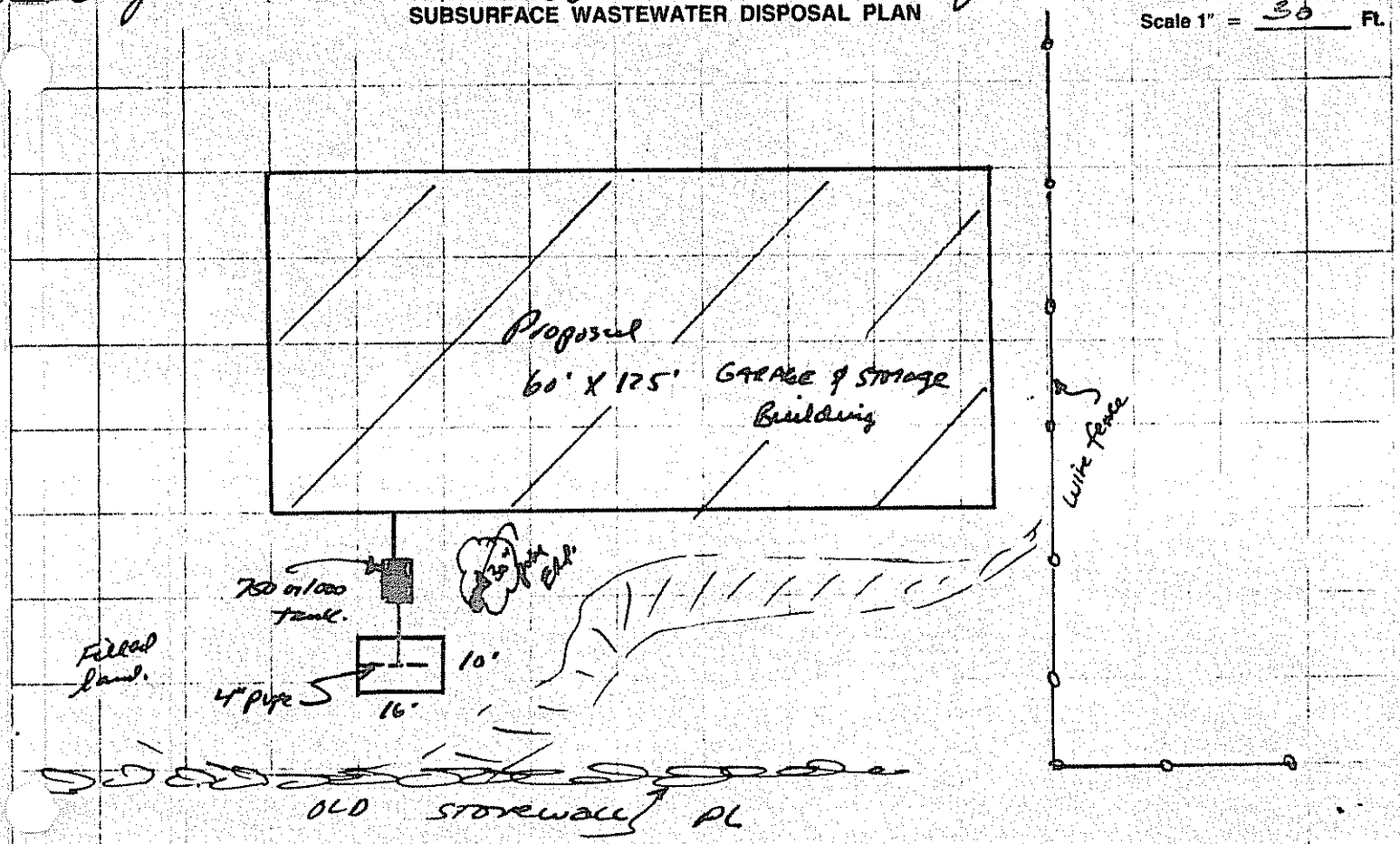
SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: Augusta
Street, Road, Subdivision: Wells Mill Rd.
Owners Name: Joe Bradstreet

SUBSURFACE WASTEWATER DISPOSAL PLAN

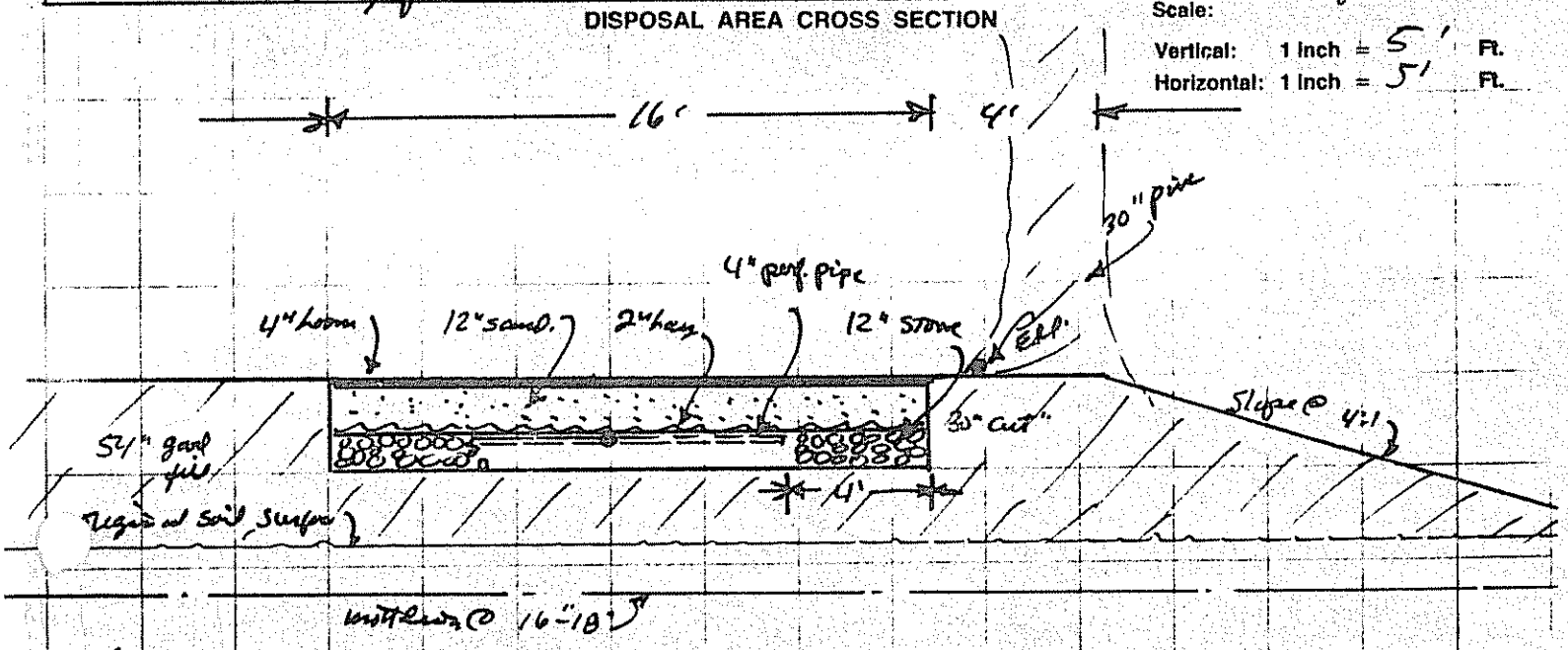
Scale 1" = 30 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	0 "	Reference Elevation is ground @ base.	Ground @ base of 30" pine
Depth of Fill (Downslope)	0 "	Bottom of Disposal Area 24-36" Below	tree = finished grade level
in existing fill		Top of Distribution Lines or Chambers 12-24" Below	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 Inch = 5' Ft.
Horizontal: 1 Inch = 5' Ft.



Stephen E. Goodwin
Site Evaluator or Professional Engineer's Signature

65
SE # / PE #

10/18/83
Date

HHE-200 Rev. 4/83