M79 L36

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

AUGUSTA 3534 TOWN COPY
Date Permit Issued: 8/29/96 $ 60.00 FEE ☐ If Double Fee Charged
Local Plumbing Inspector Signature L.P.I. # 850

PROPERTY LOCATION

Town or Location	AUGUSTA
Street Subdivision Lot #	OAKLAND ROAD

PROPERTY OWNERS NAME

Last: AUBE First: NORMAN + THERESA

Mailing Address of Owner	RR 5 Box 490
	AUGUSTA ME 04330
Daytime Tel. #	623-4409

Municipal Tax Map # _____ Page # _____

Owner Statement

I state 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.

Theresa Aube
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 Application.

Local Plumbing Inspector Signature Date Approved 10/3/96

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ First Time System
2. ☐ Multi-User System
3. ☒ Replacement System
4. ☐ Expanded System
   a. ☐ One-time exempted
   b. ☐ Non-exempted
   ☐ Experimental System
6. ☐ Seasonal Conversion

THIS APPLICATION REQUIRES:
1. ☒ No Rule Variance
2. ☐ First Time System Variance (Municipal)
3. ☐ First Time System Variance (State)
4. ☐ Replacement System Variance
   a. ☐ Local Plumbing Inspector approval
   b. ☐ State & Local Plumbing Inspector approval
5. ☐ Minimum Lot Size Variance
6. ☐ Seasonal Conversion Variance

DISPOSAL SYSTEM COMPONENT(S)
1. ☐ Non-Engineered System
2. ☐ Primitive System
3. ☐ Alternative Toilet
   Specify _____
4. ☐ Non-Engineered Treatment Tank
5. ☐ Holding Tank _____ Gallons
6. ☒ Non-Engineered Disposal Area (only)
7. ☐ Separated Laundry System
8. ☐ Engineered System (+2000 gpd)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal Area (only)

SIZE OF PROPERTY
1 ± ACRE

SHORELAND ZONING
☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE:
1. ☒ Single Family Dwelling Unit
2. ☐ Multiple Family Dwelling Unit
   Number of Units _____
3. ☐ Other _____ SPECIFY

TYPE OF WATER SUPPLY
PUBLIC WATER

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK EXISTING
1. ☒ Concrete
   ☒ Regular
   ☐ Low Profile
2. ☐ Plastic

SIZE 1000 Gallons
(SAVE + USE IF IN GOOD CONDITION)

DISPOSAL AREA TYPE/SIZE
1. ☒ Stone Bed 594 Sq. Ft.
2. ☐ Proprietary Device _____ Sq. Ft.
   ☐ Clustered ☐ Linear
   ☐ Regular ☐ H-20
3. ☐ Trench _____ Lin. Ft.
4. ☐ Other _____

GARBAGE DISPOSAL UNIT
1. ☒ No
2. ☐ Yes
   ☐ Multi-compartment tank
   ☐ Tank in series
   ☐ Increase in tank capacity
   ☐ Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW
(Show Calculations)
TWO BEDROOM SINGLE FAMILY DWELLING
2 BR x 90 GPD = 180 GPD

DESIGN FLOW: 180 (Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE	DESIGN
2	C

DEPTH TO MOST LIMITING FACTOR 24"

DISPOSAL AREA SIZING
1. ☐ Small 2.0
2. ☐ Medium 2.60
3. ☒ Medium-Large 3.30
4. ☐ Large 4.10
5. ☐ Extra-Large 5.00

PUMPING
1. ☒ Not required
2. ☐ May be required
3. ☐ Required

DOSE _____ Gallons

SITE EVALUATOR'S STATEMENT

7 / 25 / 96 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules.

Site Evaluator Signature — SE # 168 — Date 7-27-96
JOHN W. LORD JR — Print Name — (207) 873-3388 Telephone

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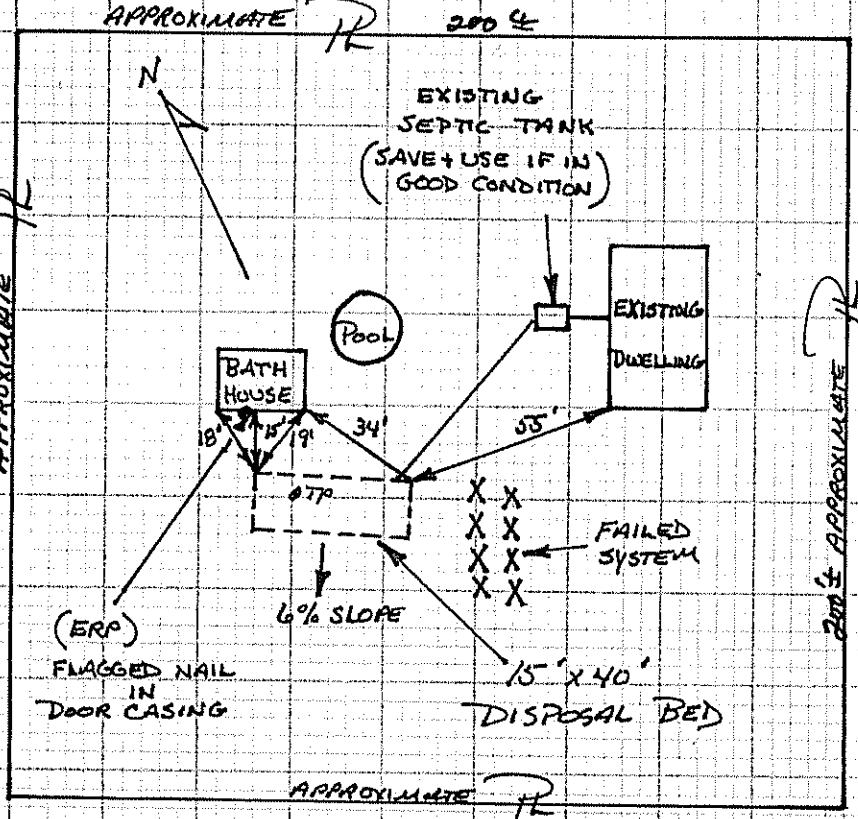
Department of Human Services
Division of Health Engineering

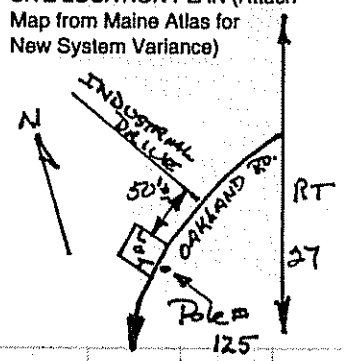
Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	OAKLAND ROAD	NORMAN + THERESA AUBE

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 TP 1 ☒ Test Pit ☐ Boring

ONE " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SANDY LOAM	FRIABLE	BROWN; ORANGE BROWN; YELLOW BROWN	
LOAMY SAND		OLIVE	COMMON FAINT

Soil	Classification	Slope	Limiting Factor	
2 (Profile)	C (Condition)	6 %	24"	☒ Ground Water ☐ 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

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature

168
SE#

7-29-96
Date

HHE-200 Rev.1/84

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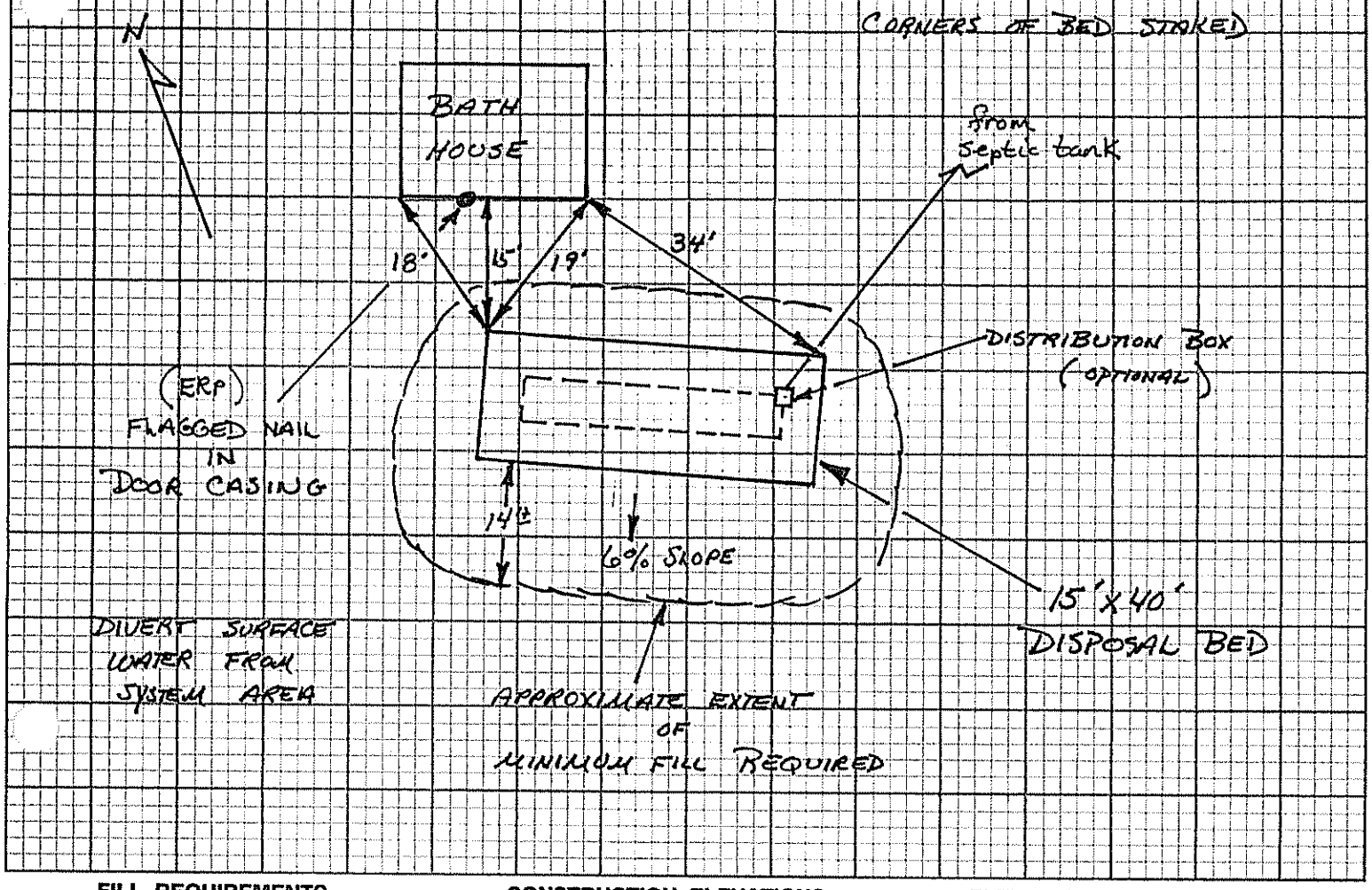
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 12"
Depth of Fill (Downslope) 22±"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0
Bottom of Disposal Area -66"
Top of Distribution Lines ~~or Chambers~~ -55"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION (ERP)

FLAGGED NAIL IN DOOR CASING 37" ABOVE EXISTING GRADE AT DOOR CASING

DISPOSAL AREA CROSS SECTION

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

(SEE ATTACHED BED DIAGRAM)

Site Evaluator Signature

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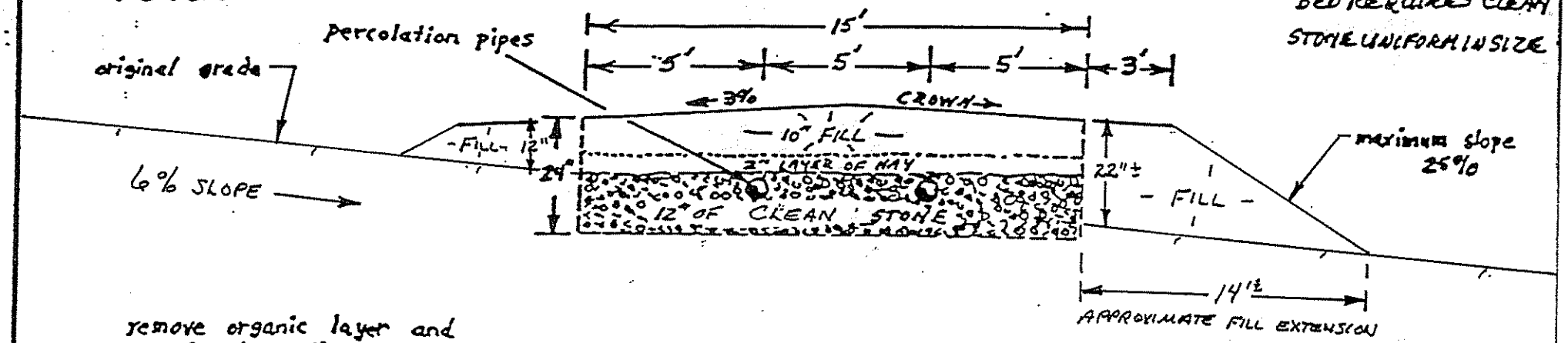
HHE-200 Rev.1/84

SEWAGE DISPOSAL BED DETAILS

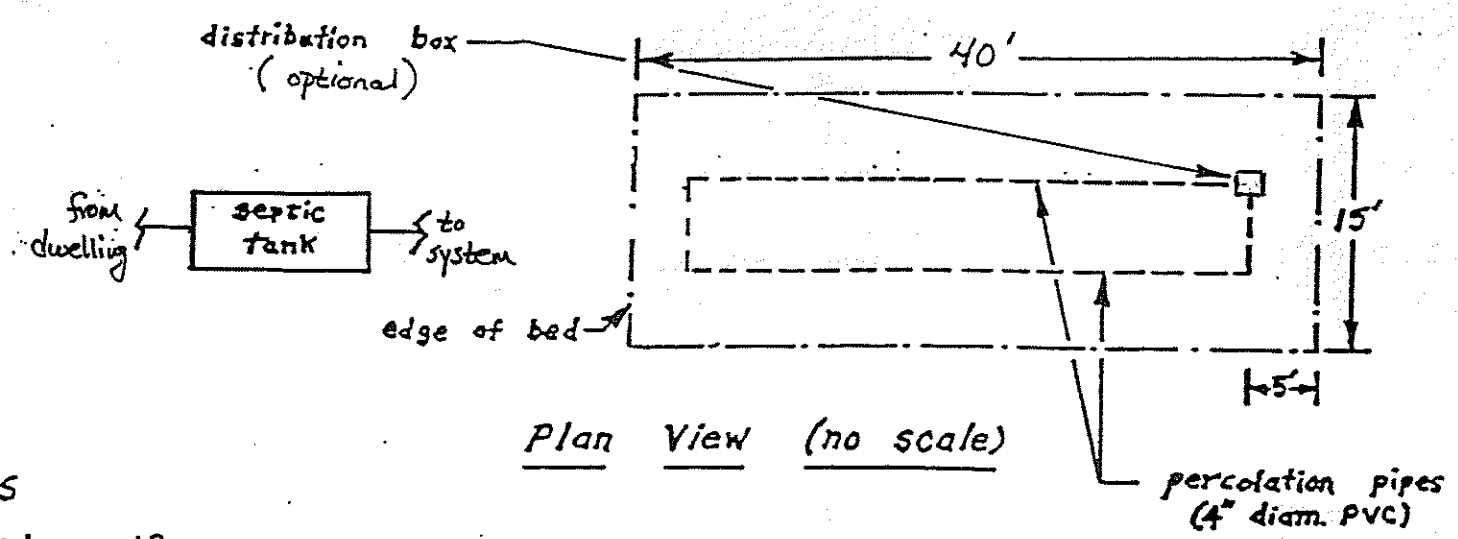
Loam + MULCH TO COVER.

BED REQUIRES CLEAN STONE UNIFORM IN SIZE



remove organic layer and scarify the soil surface before installing fill.

Bed Cross Section (no scale)



Plan View (no scale)

NOTES

1.) 12 inches of fill is required at uphill side of bed.
2.) Texture of fill shall be gravelly coarse sand.
3.) Refer to the MAINE STATE PLUMBING CODE, PART II for further details regarding installation procedures.

BR: NORMAN + THERESA AUBE

DATE: 7-29-96

BY: JOHN W. LORDI JR. #168