FORMS

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 145	OUTLET ROAD
Subdivision, Lot #	

AUGUSTA 5437 TOWN CLERK

Date Permit Issued: 11/18/04 $ 100.00 ☐ If Double Fee Charged

Mary R. Fuller — Local Plumbing Inspector Signature

L.P.I. # 851

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	McGEE INVESTMENT PROPERTIES ☐ Owner ☐ Applicant
Mailing Address of Owner/Applicant	537 HIGH STREET WEST GARDINER, ME 04345
Daytime Tel. #	582-8810

Municipal Tax Map # 94 Lot # 6

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.

Dan Giblin — Signature of Owner or Applicant — Date 11-12-04

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Mary R. Fuller — Local Plumbing Inspector Signature — (1st) date approved 12/9/04 — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- X 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

- X 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

- X 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

±48,260 X SQ. FT. ☐ ACRES

SHORELAND ZONING

X Yes ☐ No

DISPOSAL SYSTEM TO SERVE

- X 1. Single Family Dwelling Unit, No. of Bedrooms: 3
- ☐ 2. Multiple Family Dwelling, No. of Units: _____
- ☐ 3. Other: _____ (specify)

Current Use ☐ Seasonal ☐ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY

X 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- X 1. Concrete
  - X a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: _____

CAPACITY: 1000 GAL.

DISPOSAL FIELD TYPE & SIZE

- ☐ 1. Stone Bed ☐ 2. Stone Trench
- X 3. Proprietary Device
  - ☐ a. cluster array ☐ c. Linear
  - X b. regular load ☐ d. H-20 load
- ☐ 4. Other: ENVIROSEPTICS

SIZE: 1200 X sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

X 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

270 gallons per day

BASED ON:

- X 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS

--- for other facilites ---

- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE / CONDITION / DESIGN

I / C / _____

at Observation Hole # I

Depth 15"

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
- X 4. Large---4.1 sq. ft. / gpd
- ☐ 5. Extra Large---5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ☐ 1. Not Required
- X 2. May Be Required
- ☐ 3. Required

Specify only for Engineered Systems:

DOSE: _____ gallons

STATE OF MAINE VAUGHN L. SMITH LICENSED SITE EVALUATOR

SITE EVALUATOR STATEMENT

I certify that on 10/19/04 (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).

Vaughn L. Smith — Site Evaluator Signature	226 — SE #	11/01/04 — Date
VAUGHN L. SMITH — Site Evaluator Name Printed	724-5635 — Telephone Number	E-mail Address

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

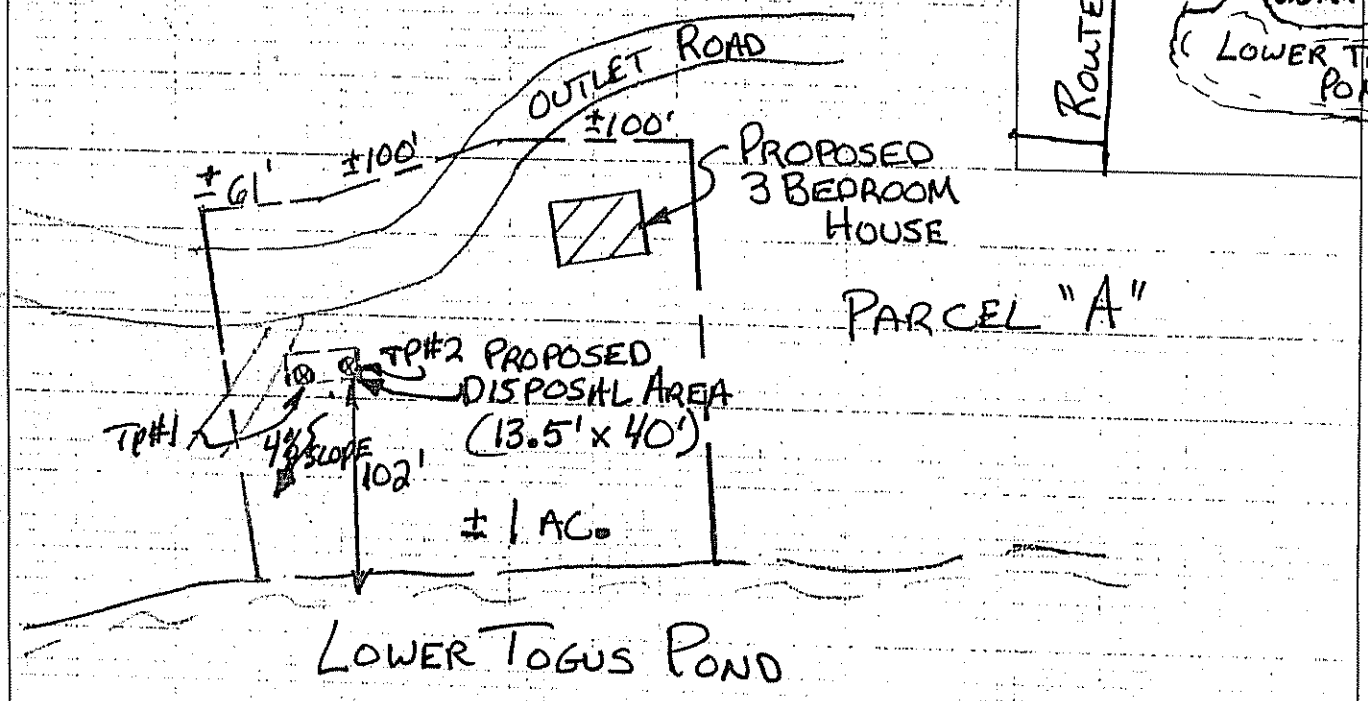
HHE-200 Rev.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

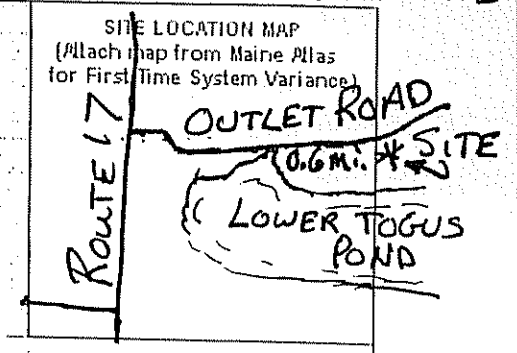
Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: OUTLET ROAD
Owner or Applicant Name: McGEE INVESTMENT PROPERTIES

SITE PLAN Scale: 1" = 100 ft.



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 # 1 ☒ Test Pit ☐ Boring
2" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	LOAM	FRIABLE	OLIVE BROWN	NONE
6–18				
18–24				
24–36		FIRM	PALE OLIVE	FEW FAINT
36–42				
42–48				

Soil Profile: 1 — Classification: C — Slope: 4 Percent — Limiting Factor: 15 Depth — ☒ Groundwater ☒ Restrictive Layer ☐ Bedrock

Observation Hole # 2 ☒ Test Pit ☐ Boring
2" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	STONY LOAM	FRIABLE	OLIVE BROWN	NONE
6–18				
18–24				
24–36	LOAM	FIRM		FEW FAINT
36–42			PALE OLIVE	
42–48				

Soil Profile: 1 — Classification: C — Slope: 5 Percent — Limiting Factor: 16 Depth — ☒ Groundwater ☒ Restrictive Layer ☐ Bedrock

STATE OF MAINE — VAUGHN L. SMITH 226 — LICENSED SITE EVALUATOR

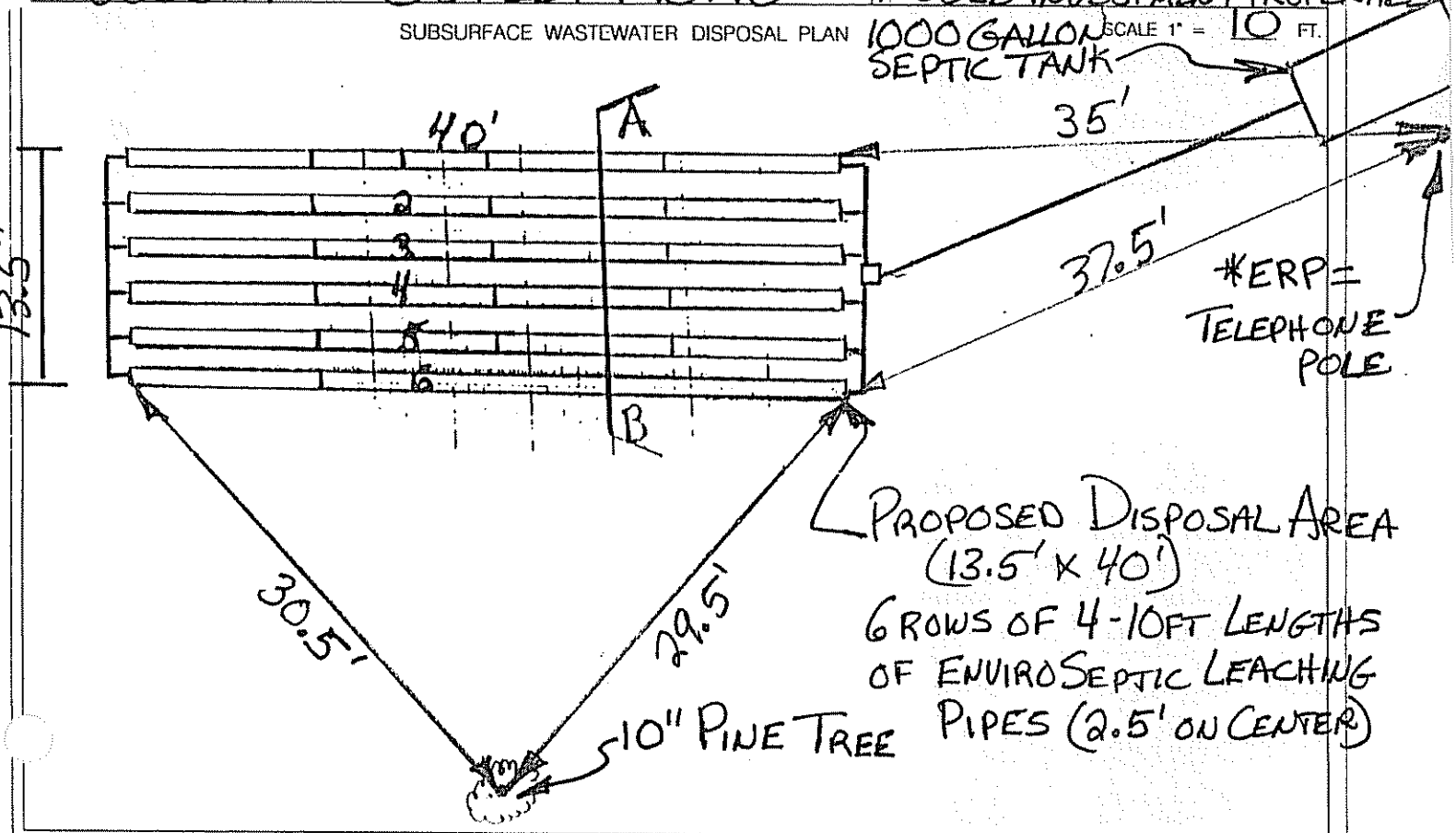
Vaughn L. Smith — Site Evaluator Signature
226 — SE #
11/01/04 — Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
AUGUSTA	OUTLET ROAD	MCGEE INVESTMENT PROPERTIES

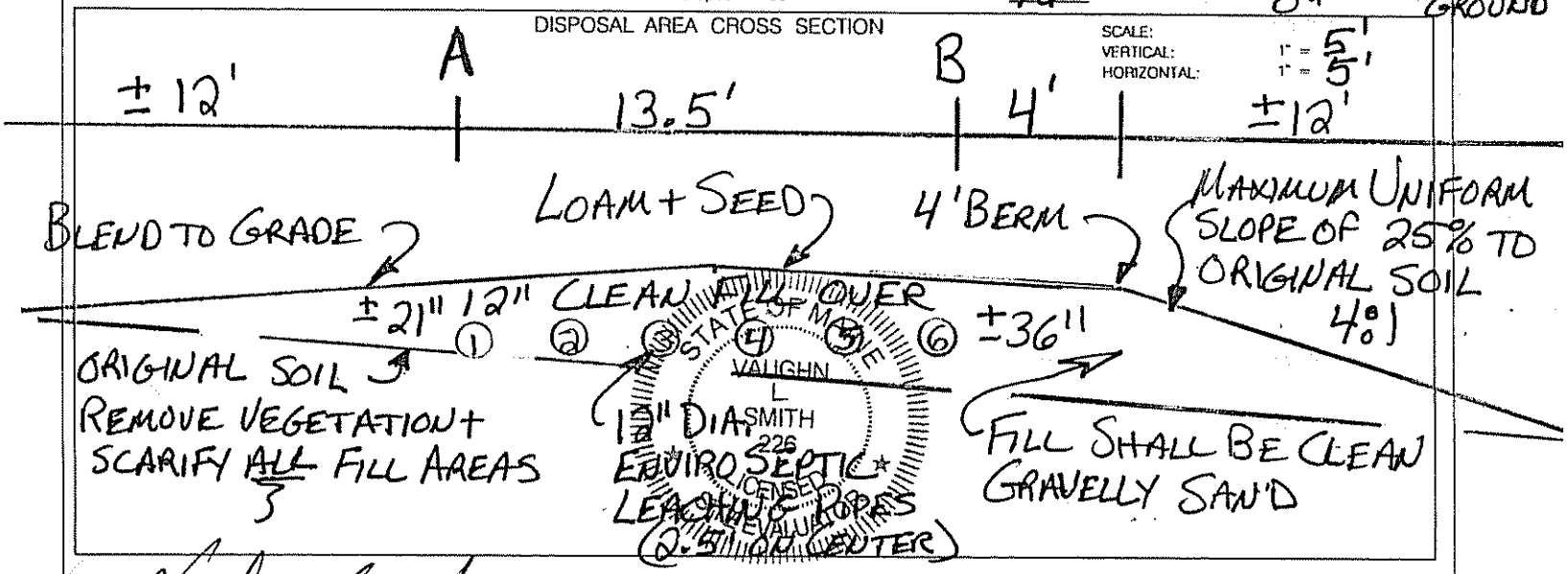
SUBSURFACE WASTEWATER DISPOSAL PLAN — SCALE 1" = 10 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	± 21"	Finished Grade Elevation	-48"	Location & Description: TELEPHONE POLE w/ NAIL 48" ABOVE GROUND
Depth of Fill (Downslope)	± 36"	Top of Distribution Pipe or Proprietary Device	-60"	
		Bottom of Disposal Area	-72"	Reference Elevation: 0"

DISPOSAL AREA CROSS SECTION

SCALE: VERTICAL: 1" = 5'; HORIZONTAL: 1" = 5'



STATE OF MAINE VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

Vaughn L. Smith — Site Evaluator Signature

226 — SE #

11/01/04 — Date