

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE Permit # 1790
Street or Road	RACCOON COVE ROAD	Date Permit Issued	3-28-16 Fee \$ 265. Double Fee Charged ()
Subdivision, Lot #		<i>Michael Bellamy</i> Local Plumbing Inspector Signature L.P.I. # 820	
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	HAASS, BLAKE	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	<input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State
Mailing Address of	97 WALKER ROAD	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	LAMOINE, ME. 04605		
Daytime Tel. #	(207) 479-0330	Municipal Tax Map #	5 Lot # 4-10
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
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.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
<i>William B. Keene</i> Signature of Owner or Applicant		<i>Michael Bellamy</i> Local Plumbing Inspector Signature	
Date 3-28-16		(1st Date Approved)	
		(2nd Date Approved)	

PERMIT INFORMATION		
TYPE OF APPLICATION <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. < 25% Expansion <input type="checkbox"/> b. ≥ 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENT(S) <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY _____ sq. ft. 1 1/2 acres <input checked="" type="checkbox"/>	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____	TYPE OF WATER SUPPLY TO BE <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device 16 END FEED CONCRETE CHAMBERS <input type="checkbox"/> a. Cluster Array <input checked="" type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 900 sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW 270 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE CONDITION 3 1 C at Observation Hole # 1 Depth 18"	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input checked="" type="checkbox"/> 1. Not Required, SET HOUSE <input type="checkbox"/> 2. May be Required TO ALLOW <input type="checkbox"/> 3. Required GRAVITY Specify only for engineered systems DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. 44° d 28' m 43" s N Lon. 68° d 17' m 03.77" s W If g.p.s., state margin of error 30' ±

SITE EVALUATOR STATEMENT		
I certify that on 3-14-16 (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).		
<i>William A. LaBelle, Jr.</i> Site Evaluator Signature	319 SE#	3-24-16 Date
WILLIAM A. LABELLE, JR.	(207) 537-5900	labelleseptic@rivah.net
Site Evaluator Name Printed	Telephone Number	E-mail Address

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation
LAMOINE

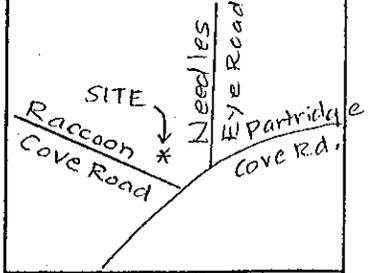
Street, Road, Subdivision
RACCOON COVE ROAD

Owner or Applicant Name
BLAKE HAASS

SITE PLAN

Scale 1" = 50 Ft.

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



(SEE ATTACHED SITE PLAN)

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole #1 Test Pit Boring

 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		10YR 3/2	N.E.
GRAVELLY	FRIABLE	10YR 4/6	
LOAM	FIRM	10YR 4/4	

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Soil Profile	Classification Condition	Slope	Limiting Factor Depth	<input type="checkbox"/> Ground Water Restrictive Layer	<input type="checkbox"/> Bedrock	<input type="checkbox"/> Pit Depth
3	C	10%	22"			

Observation Hole #2 Test Pit Boring

 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		10YR 3/3	N.E.
GRAVELLY	FRIABLE	2.5Y	
LOAM	FIRM	5/3	Common

DEPTH BELOW MINERAL SOIL SURFACE (inches)

Soil Profile	Classification Condition	Slope	Limiting Factor Depth	<input checked="" type="checkbox"/> Ground Water Restrictive Layer	<input type="checkbox"/> Bedrock	<input type="checkbox"/> Pit Depth
3	C	10%	20"			

W.C. 2.1
Site Evaluator's Signature

319
S. E. #

3-24-16
Date

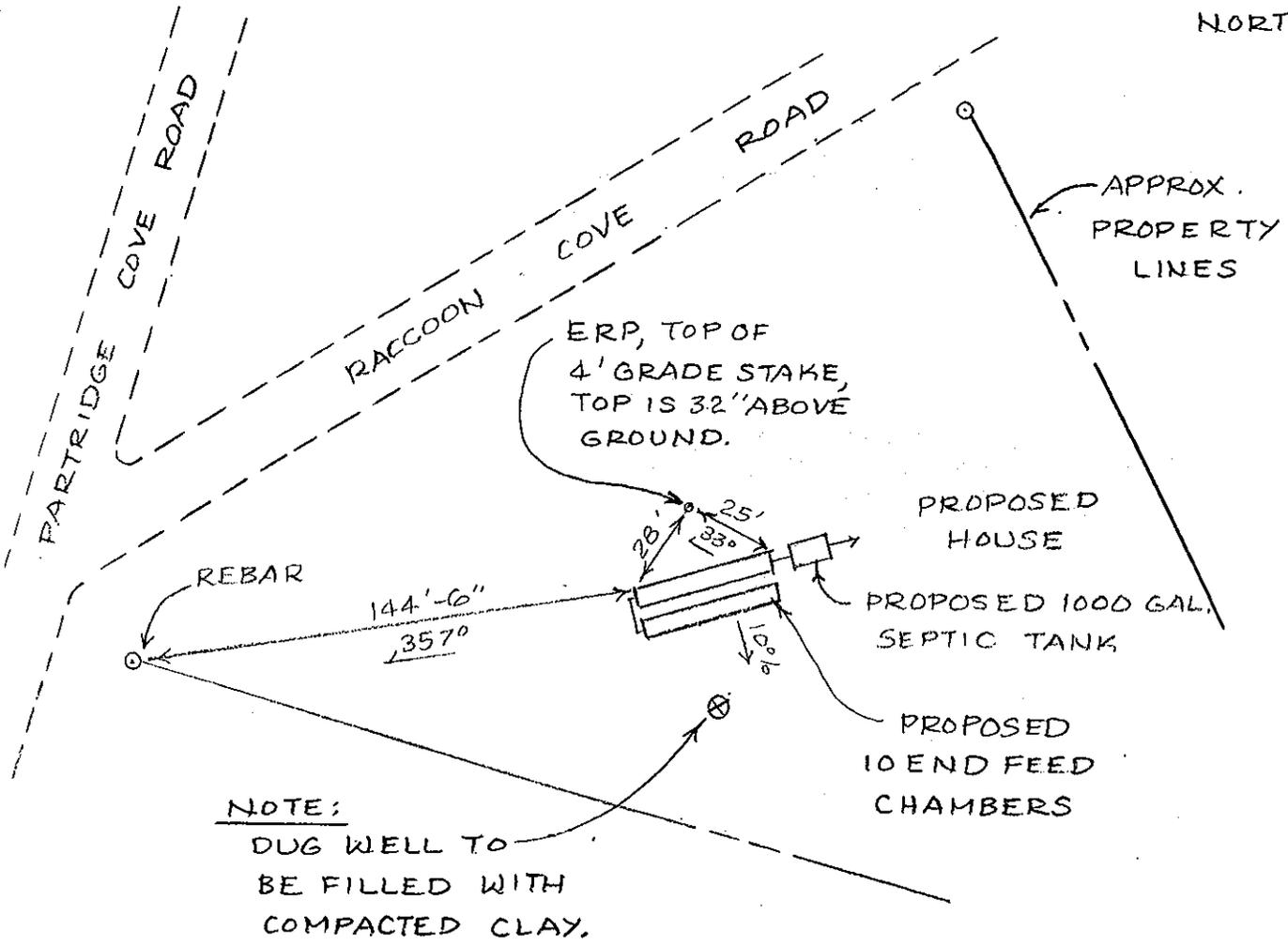
Town, City, Plantation LAMOINE	Street, Road, Subdivision RACCOON COVE ROAD	Owner or Applicant Name BLAKE HAASS
--	---	---

SITE PLAN:

SCALE: 1" = 50 FT.



MAGNETIC NORTH



W. C. Little

Site Evaluator's Signature

319

S.E. #

3-24-16

Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
 Division of Environmental Health, 11 BHS
 (207) 287-5872 FAX (207) 287-4172

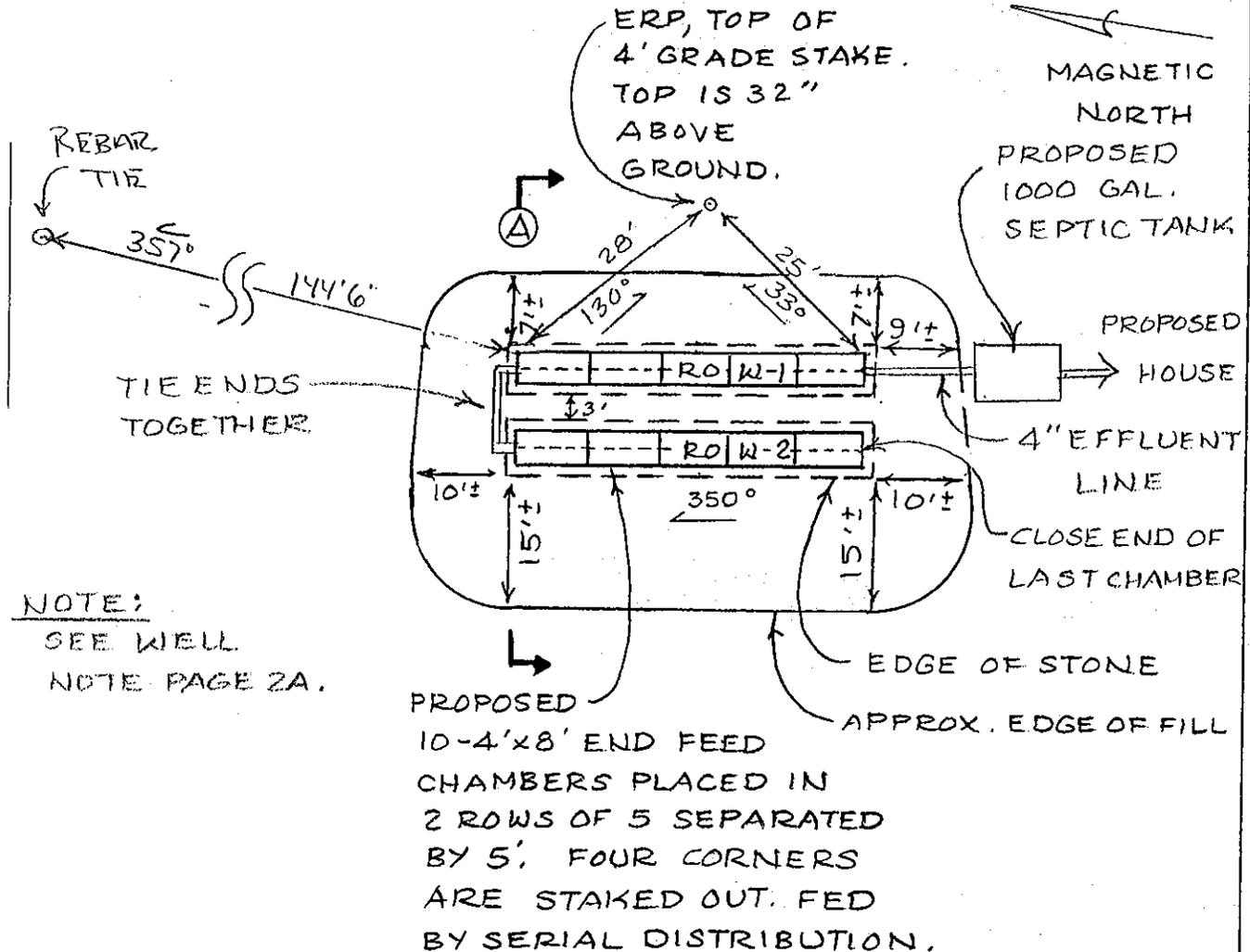
Town, City, Plantation
LAMOINE

Street, Road, Subdivision
RACCOON COVE ROAD

Owner or Applicant Name
BLAKE HAASS

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT
Depth of Backfill (Upslope)	18"	Finished Grade Elevation	(See	(See		Location & Description 34"
Depth of Backfill (Downslope)	21"-22"	Top of Distribution Pipe or Proprietary Device	attached	N/A		ABOVE GROUND, TOP OF
Depths @ cross-section shown below or on X-sec. detail.		Bottom of Disposal Field	X-Sec.)			4' GRADE STAKE
						Reference Elevation is: 0"

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

NOTES:

1. Tank(s) must be 8' minimum from building. 51' MIN FROM WELL
2. Grade surrounding area to divert surface water away from system.
3. Well to be 51' minimum from septic tank(s) and 100' minimum from disposal field.
4. All work done adjacent to wetlands and water bodies must be done in compliance with section 11-M of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPS" (DEPW0588).
5. Install septic tank(s) risers 18" in diameter "minimum" to within 6" of finished grade on inlet, cleanout and outlet covers (recommend extending risers to finish grade).
6. Full basement below grade foundation, frost wall or columns must be 20' minimum from stone around chambers and slab on grade must be 15' minimum from stone around chambers.

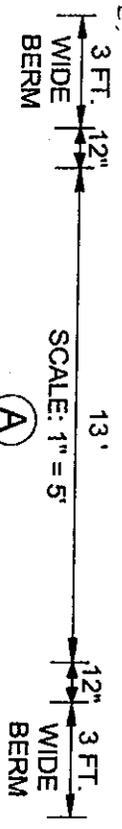
W. C. 2.7
 Site Evaluator's Signature

319
 S.E. #

3-24-16
 Date

NOTE: GRADE UPSLOPE
TO DIVERT SURFACE
WATER AWAY FROM
SYSTEM AND HOUSE.

DISPOSAL AREA CROSS SECTION SLOPE 10 %



FILL MATERIAL SHALL BE 8"-12" THICK
OVER CHAMBERS AND SHALL BE GRAVELLY
COARSE SAND TO THE STANDARDS IN
SEC. 11-E IN THE SUBSURFACE RULES.

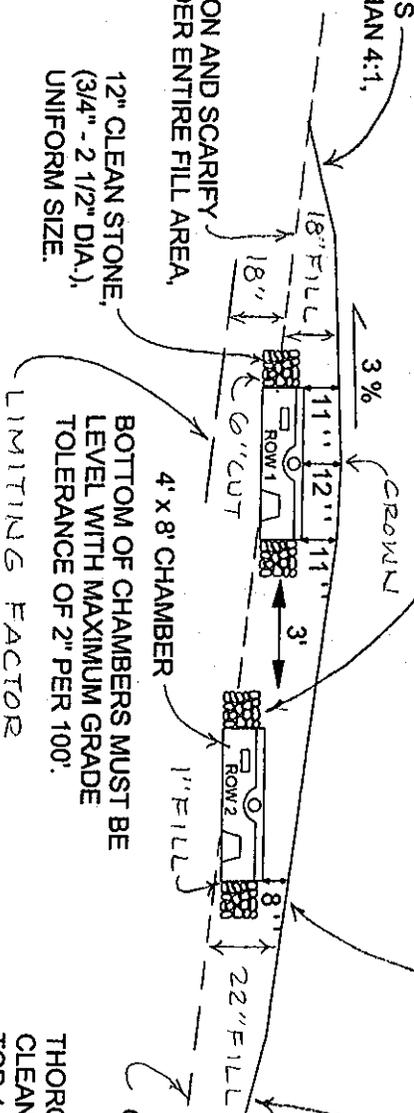
TOP 4" OF FILL TO BE A GOOD LOAM
SOIL MIX TO ESTABLISH A GOOD
VEGETATIVE COVER; SEED AND
AND MULCH TO PREVENT EROSION,
SEC. 11-G.

FILL EXTENSIONS
NO GREATER THAN 4:1,
(25% SLOPE).

FILL EXTENSIONS
NO GREATER THAN 4:1,
(25% SLOPE).

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F
RECOMMENDED OVER STONE AND CHAMBERS

REMOVE VEGETATION AND SCARIFY
ORIGINAL SOIL UNDER ENTIRE FILL AREA,
SEC. 11-B.



12" CLEAN STONE,
(3/4" - 2 1/2" DIA.),
UNIFORM SIZE.

BOTTOM OF CHAMBERS MUST BE
LEVEL WITH MAXIMUM GRADE
TOLERANCE OF 2" PER 100'.
LIMITING FACTOR

ORIGINAL GRADE

THOROUGHLY MIX, DISK OR ROTO-TILL
CLEAN, COARSE, SHARP SAND INTO
TOP 4 INCHES OF ORIGINAL SOIL TO
CREATE A TRANSITION ZONE, SEC. 11-B.

ELEVATIONS:

ELEV. REF. PT. (ERP):	ROW 1	ROW 2
FINISHED GRADE:	0" (CROWN -34")	-49" (MIN.)
TOP OF CHAMBERS:	-46"	-57"
BOTTOM OF CHAMBERS:	-59"	-70"

NOTE:
SYSTEM MUST BE INSTALLED ACCORDING
TO THE RULES AND PRACTICES SET FORTH
IN THE MOST CURRENT VERSION OF THE
STATE OF MAINE SUBSURFACE WASTEWATER
DISPOSAL RULES. INSTALLATION CONTRACTOR
MUST BE FAMILIAR WITH SAID RULES AND
CONSTRUCT SYSTEM IN FULL COMPLIANCE
WITH SECTION 11 OF SAID RULES.

OWNER: BLAKE HAASS
LOCATION: LAMOINE

William A. Labelle, Jr.
WILLIAM A. LABELLE, JR.

319
S.E.#

8-5-15
DATE