SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation	Lamoine
Street or Road	Lydia's Way
Subdivision, Lot #	Lot #21 Marlboro Woods

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Sanborn Reginald ● Owner ☐ Applicant

Mailing Address of Owner/Applicant: P.O. Box 1115, Ellsworth, Me. 04605

Daytime Tel. #:

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: LAMOINE Permit #: 1805

Date Permit Issued: 6/30/16 Fee: $ 250 Double Fee Charged [ ]

Local Plumbing Inspector Signature

L.P.I. #: 1040

☐ Owner ☒ Town ☐ State

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 this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map #: 5 Lot #: 14-21

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.

Reginald J. Sanborn 6-29-16
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.

(1st) date approved

Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

● 1. First Time System
☐ 2. Replacement System
Type replaced: _____
Year installed: _____
☐ 3. Expanded System
☐ a. <25% Expansion
☐ b. ≥25% 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

1.16 ☐ SQ. FT. ● ACRES

SHORELAND ZONING

☐ Yes ● No

DISPOSAL SYSTEM TO SERVE

● 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

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

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

● 1. Concrete
● a. Regular
☐ b. Low Profile
☐ 2. Plastic
☐ 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. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

● 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:
● 1. Table 4A (dwelling unit(s))
☐ 2. Table 4C (other facilities)
SHOW CALCULATIONS for other facilites
☐ 3. Section 4G (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION
3 / C
at Observation Hole # 1
Depth 30"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

☐ 1. Medium—2.6 sq. ft. / gpd
● 2. Medium—Large 3.3 sq. ft / gpd
☒ 3. Large—4.1 sq. ft. / gpd
☐ 4. 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

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 23 m 59.6 s
Lon. 068 d 17 m 06.6 s
if g.p.s, state margin of error: ±10'
NAD 27

SITE EVALUATOR STATEMENT

I certify that on 6-14-16 (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).

Site Evaluator Signature	SE #	Date
Robert G Vile Jr	204	6-15-16

Site Evaluator Name Printed	Telephone Number	E-mail Address
Robert G. Vile Jr.	234-2451	robertvilesoilconsultant@gmail.com

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

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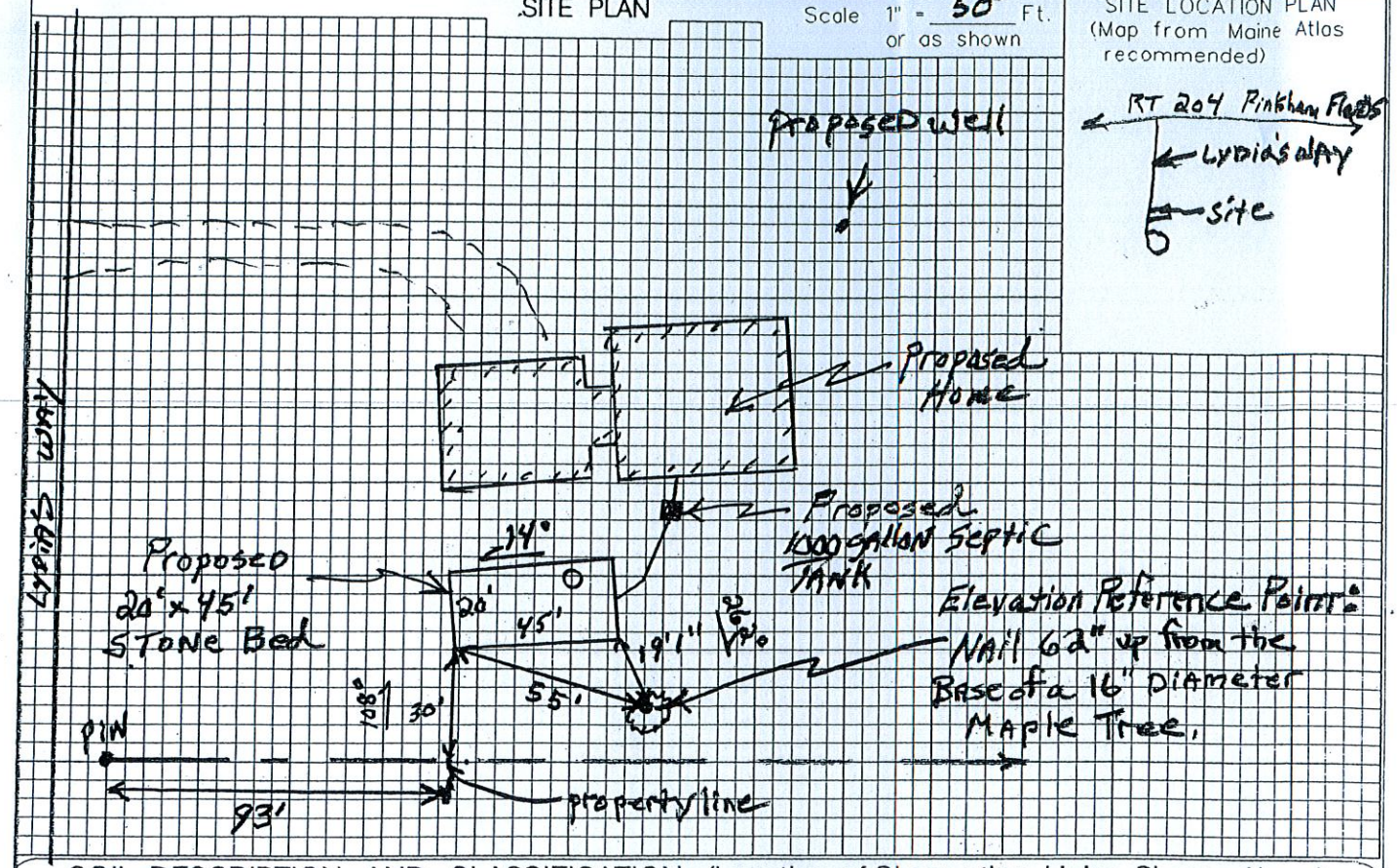
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: Lamoine | Street, Road Subdivision: LOT #21 Marlboro Woods | Owner's Name: Reginald Sanborn

SITE PLAN

Scale 1" = 50 Ft. or as shown



SITE LOCATION PLAN
(Map from Maine Atlas recommended)

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

Observation Hole #1 ■ Test Pit ☐ Boring

2 " Depth of Organic Horizon Above Mineral Soil

Depth (inches)	Texture	Consistency	Color	Mottling
0–10	Sandy Loam	Friable	Grey Strong Brown	None
10–20	gravelly Sandy Loam		Yellowish Brown	
20–30			Light olive Brown	common distinct
30–40		Firm		
40–50				

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	5 %	30"	■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole _____ ☐ Test Pit ☐ Boring

1 " Depth of Organic Horizon Above Mineral Soil

Depth (inches)	Texture	Consistency	Color	Mottling
0–50				

NOTE:

ALL PERMITS AND OR NOTIFICATIONS REQUIRED PRIOR TO CONSTRUCTION ARE THE RESPONSIBILITY OF THE OWNER.

Soil Classification	Slope	Limiting Factor	
Profile / Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Robert G Libby — Site Evaluator Signature

204 — SE #

6-15-16 — Date

HHE-200 Rev. 7/97

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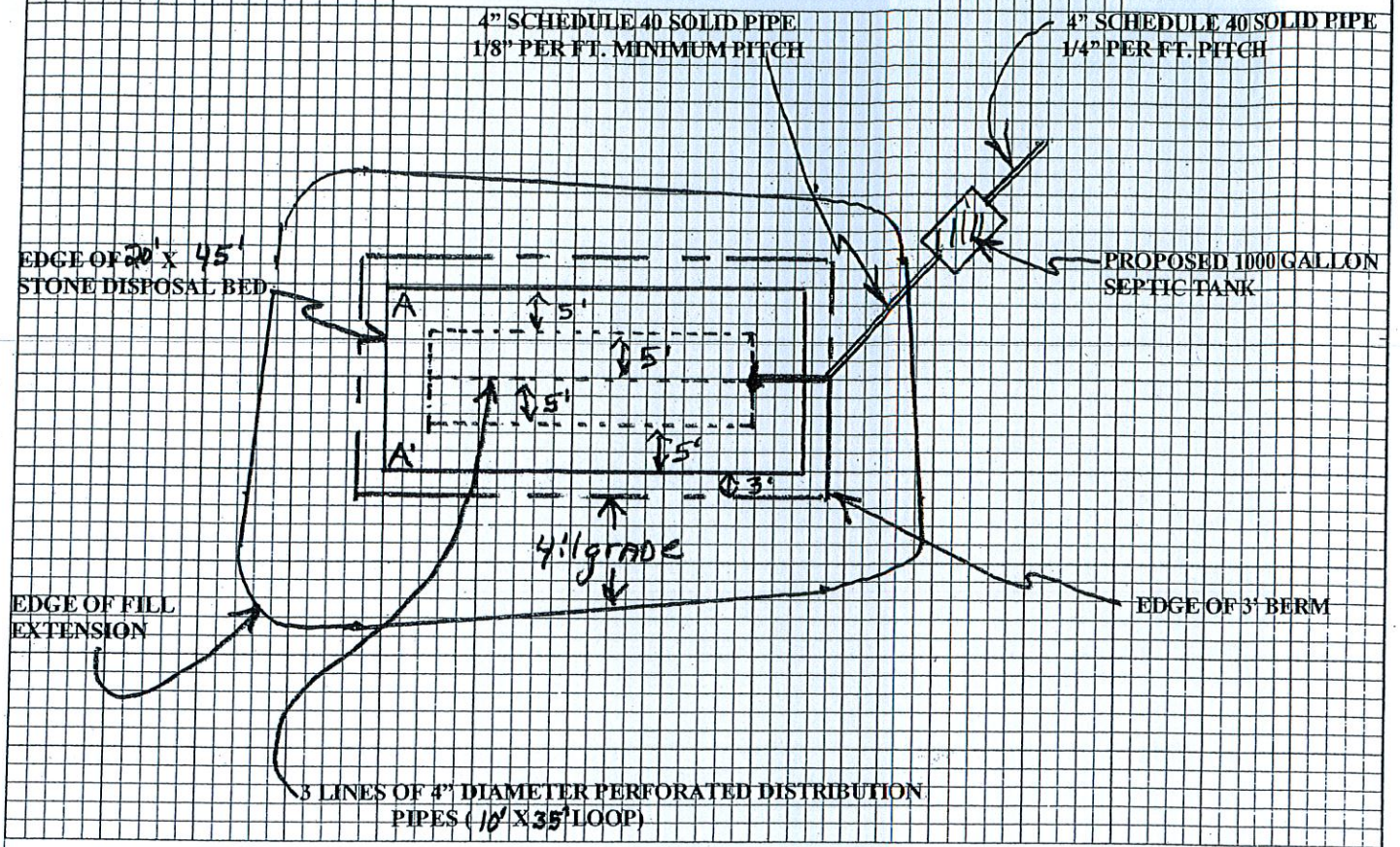
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Lamoine	Lot #21 Marlboro Woods	Reginald Sanborn

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	4"-11" A	Finished Grade Elevation	-37"	Location & Description Nail 62"
Depth of Fill (Downslope)	14"-26" A'	Top of Distribution Pipe or Proprietary Device	-48"	up in 16" Maple Tree,
		Bottom of Disposal Area	-59"	Reference Elevation ≈ 0"

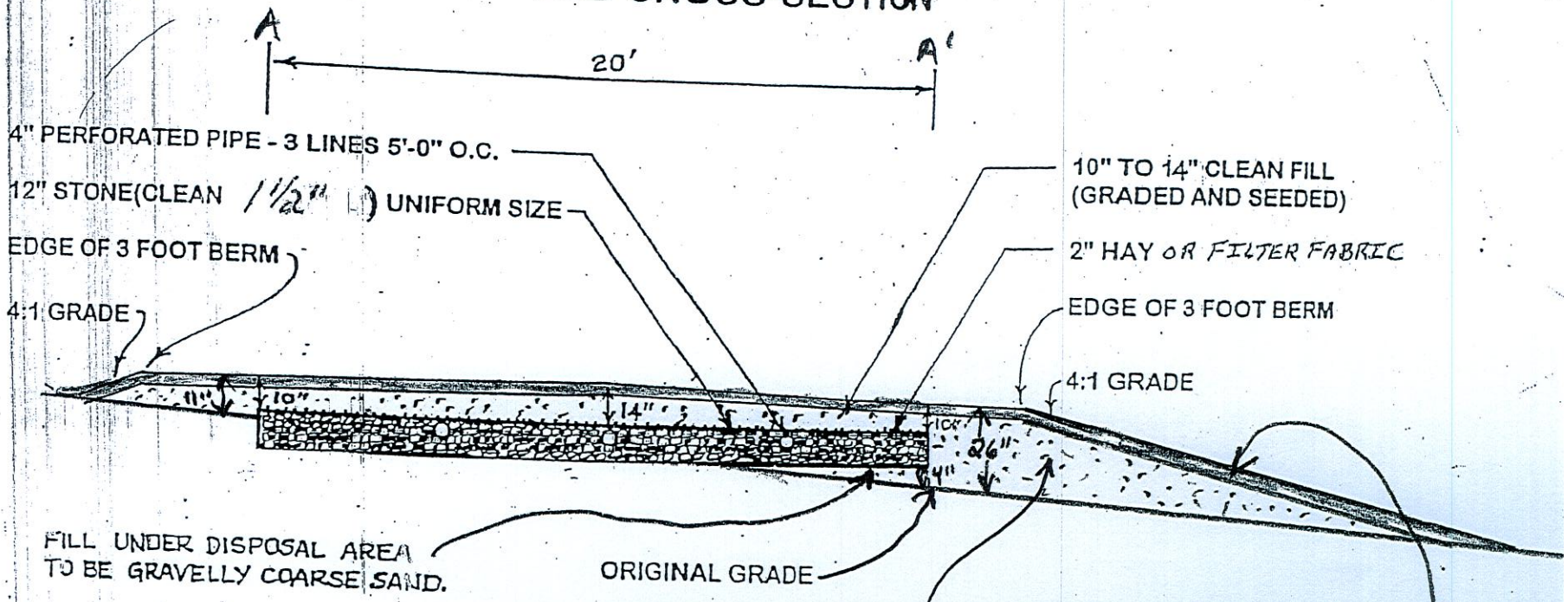
DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" =
HORIZONTAL: 1" =

(SEE ATTACHED CROSS SECTION A-A')

Robert [signature]	204	6-15-16
Site Evaluator Signature	SE #	Date

BED CROSS-SECTION



SCALE: 1" = 5'.

NOTES:

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER DISPOSAL AREA AND FILL EXTENSION AREAS.
2. BOTTOM OF DISPOSAL AREA TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100".
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM DISPOSAL AREA.
4. CREATE A TRANSITIONAL HORIZON BY MIXING TOP 4-6" OF ORIGINAL SOIL WITH FILL TO BE USED UNDER DISPOSAL AREA AND FILL EXTENSIONS.
5. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

OWNER: Reginald Sanborn
LOCATION: Lot #21 Marlboro Woods Lamoine
DISPOSAL AREA DIMENSIONS: 20' x 45'
DISPOSAL AREA ELEVATIONS:
ELEVATION REFERENCE POINT: 0"
TOP OF DISTRIBUTION LINE: -48"
BOTTOM OF STONE: -59"

SITE EVALUATOR:
ROBERT G. VILE, JR. #204
Robert G Vile
DATE: 6-15-16