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: MOOSE RUN

Subdivision, Lot #:

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: Lamoine Permit #: 1899

Date Permit Issued: 6-8-18 Fee: $ 265 Double Fee Charged [ ]

Local Plumbing Inspector Signature: L.P.I. # 394

□ 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 # 1 Lot # 23-3

OWNER/APPLICANT INFORMATION

Name (last, first, MI): RICHARDS JOHN BARBARA ■ Owner □ Applicant

Mailing Address of Owner/Applicant: 164 LINDLEY TERRACE WILLIAMSTOWN MA 01267

Daytime Tel. #: 413-458-9941

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.

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

2.4A □ 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 CONCRETE
■ a. cluster array □ c. Linear
□ b. regular load □ d. H-20 load
□ 4. Other: _____
SIZE: 1280 ■ 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 facilities
3 BEDROOM HOME
□ 3. Section 4G (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION
B1 D/Silt
at Observation Hole # TB 1
Depth 10 "
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
RAISE HOME FOR GRAVITY FEED
Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 27 m 34.3 s
Lon. 68 d 20 m 53 s
If g.p.s, state margin of error: 30 ft

SITE EVALUATOR STATEMENT

I certify that on 6-1-18 (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 # 189 | Date 6-4-18

Mike J Gramlich | 843-6395 | POB 284 Holden ME 04429

Site Evaluator Name Printed | Telephone Number | E-mail Address

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

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Division of Health Engineering, Station 10
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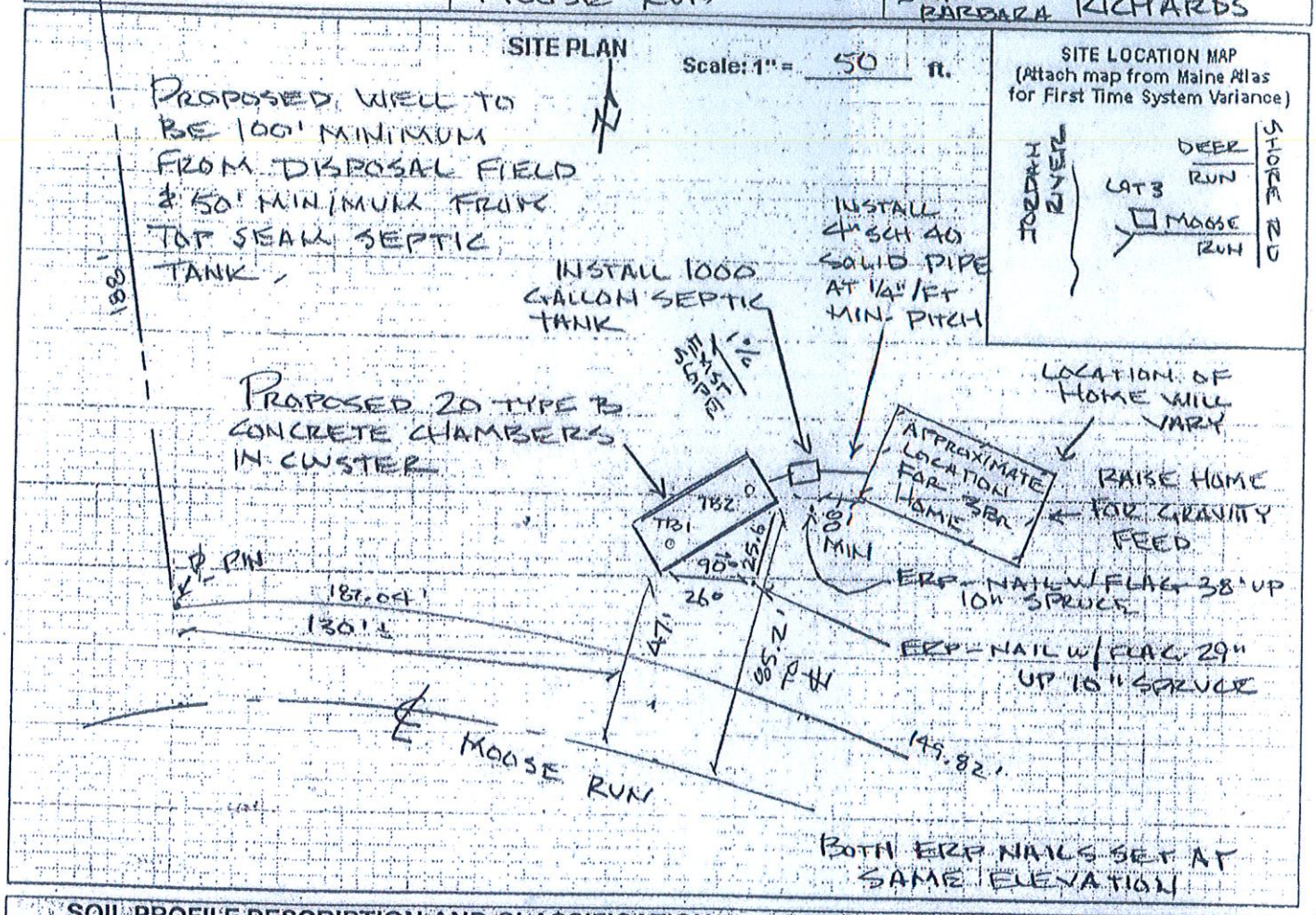
Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
LAMOINE	MOOSE RUN LOT 3	JOHN BARBARA RICHARDS

SITE PLAN

Scale: 1" = 50 ft.



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

Observation Hole # TB1&2 ☐ Test Pit ☒ Boring

2" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6	SANDY LOAM	FRIABLE	YELLOW BROWN	NONE
6–18	SILT LOAM	FIRM		COMMON DISTINCT
18–30		DEPTH	OF	
30–48			BORING	

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
8	P/A III	1	10"	☒ Groundwater ☐ 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
0–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
				☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature: [signature]

SE # 189

Date 6-4-18

Mike J Gramlich POB 284 Holden ME 04429 207 843-6395

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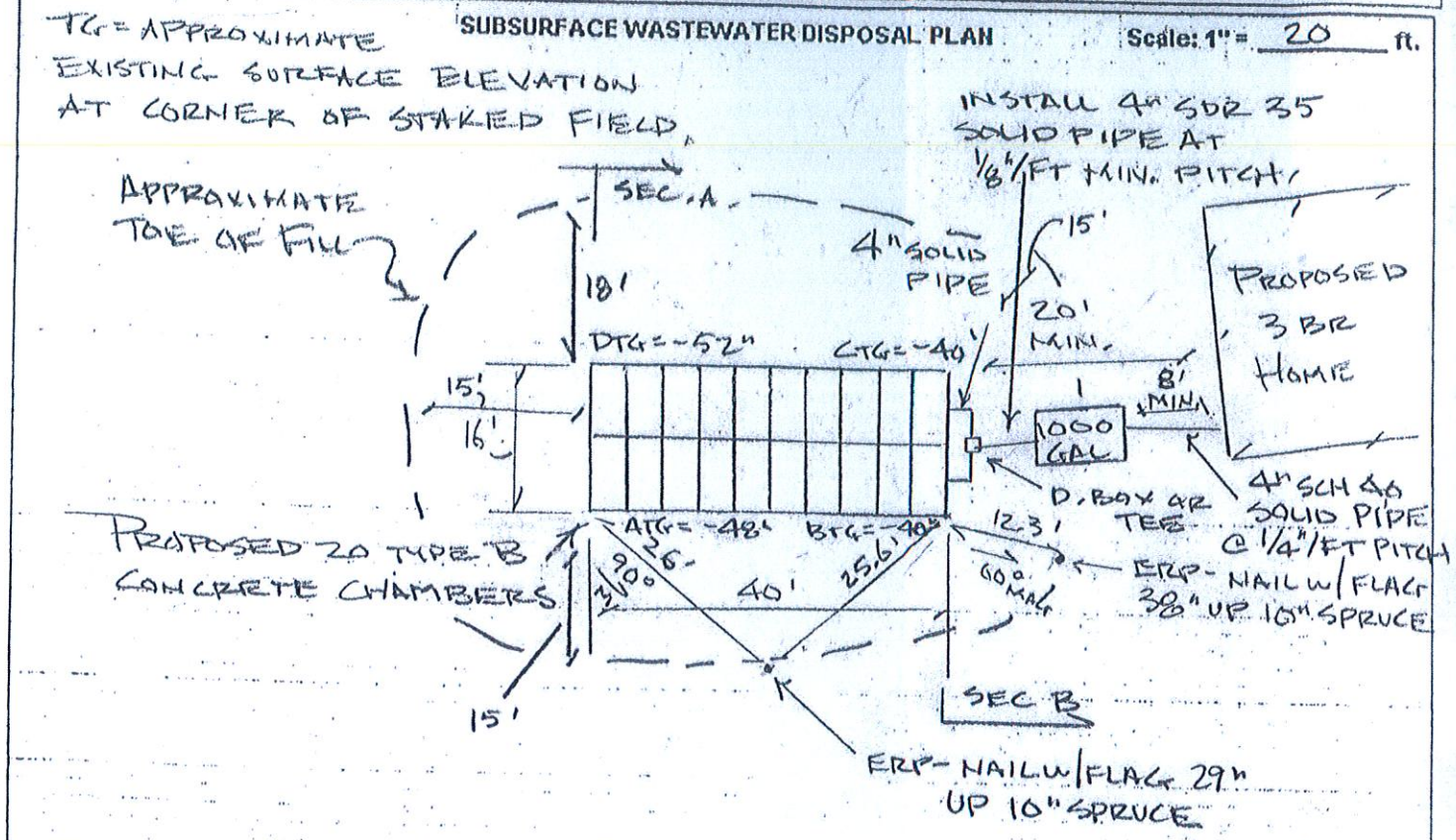
LAMOINE	MOOSE RUN	JOHN & BARBARA RICHARDS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS		
Depth of Backfill (upslope)	A 44"	32" B
Depth of Backfill (downslope)	40"	32"
DEPTHS AT CROSS-SECTION (shown below)		

CONSTRUCTION ELEVATIONS	
Finished Grade Elevation	-7"
Top of Distribution Pipe or Proprietary Device	-19"
Bottom of Disposal Field	-32"

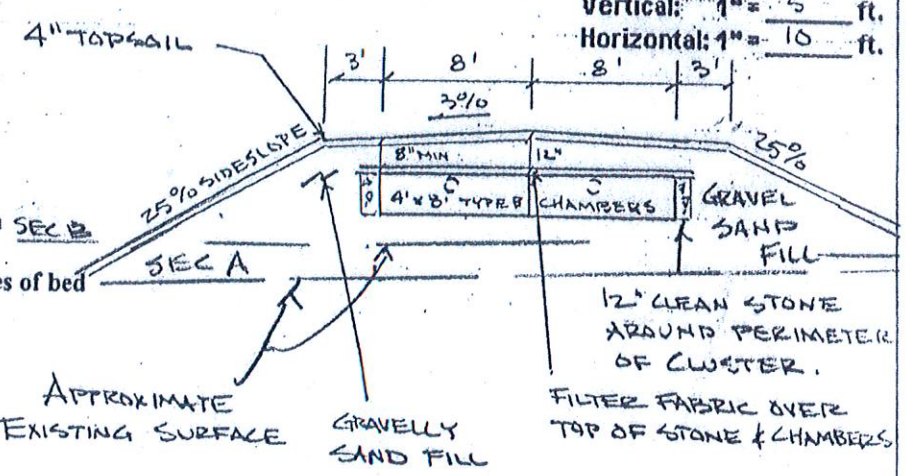
ELEVATION REFERENCE POINT

Location & Description: ERP - NAIL F 29" UP 10" SPRUCE

Reference Elevation is: 0.0" or: 0"

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 5 ft.
Horizontal: 1" = 10 ft.



Note:

1.) Scarify original surface under Disposal Field and fill extension.
2.) Place gravelly coarse sand fill in 8" lifts, incorporate into underlying original soil,
3.) Disposal Field to be level with a maximum grade tolerance of 2"/100 ft.
4.) Lime, fertilize, seed & mulch, top and sides of bed and all disturbed areas to prevent erosion.
5.) See Chapter 8 of code for additional requirements.
6.) Bottom of disposal field to be 32" below elevation of TBM (ERP).

Mike J Gramlich POB 284 Holden ME 207-843-6395

Site Evaluator Signature

189
SE #

6-4-18
Date