

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services  
Div. Environmental Health, 11 SHS  
(207) 287-2070 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE Permit # 1913
Street or Road	MOOSE RUN	Date Permit Issued	8.14.18 Fee \$ 265 Double Fee Charged ( )
Subdivision, Lot #	LOT # 8	Local Plumbing Inspector Signature	<i>Rebecca O'Brien</i> L.P.I. # 394
OWNER/APPLICANT INFORMATION		Fee: \$ 265 state min. fee \$ Locally adopted fee	Copy: <input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State
Name (last, first, MI)	EGAN, RICHARD <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	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.	
Mailing Address of <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	CLIFF ALBEE 41 TUCKER MTN. ROAD SULLIVAN, ME. 04664	Municipal Tax Map #	1 Lot # 23-8
Daytime Tel. #		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.		CAUTION: INSPECTION REQUIRED	
<i>[Signature]</i> Signature of Owner or Applicant Date		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.  (1st Date Approved)  Local Plumbing Inspector Signature (2nd Date Approved)	

## PERMIT INFORMATION

<b>TYPE OF APPLICATION</b> <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. Minor Expansion <25% <input type="checkbox"/> b. Major Expansion ≥ 25% <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<b>THIS APPLICATION REQUIRES</b> <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	<b>DISPOSAL SYSTEM COMPONENT(S)</b> <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
<b>SIZE OF PROPERTY</b> _____ sq. ft. 2.1 acres	<b>DISPOSAL SYSTEM TO SERVE</b> <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 4 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____ Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing <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: _____

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<b>TREATMENT TANK</b> <input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> c. with lift station <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device 16 SIDE FEED CONCRETE CHAMBERS <input type="checkbox"/> a. Cluster Array <input checked="" type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 1232 sq. ft. lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> <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	<b>DESIGN FLOW</b> 300 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
<b>SOIL DATA &amp; DESIGN CLASS PROFILE CONDITION</b> 3 / C at Observation Hole # 1 Depth 16" OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> <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	<b>EFFLUENT/EJECTOR PUMP</b> <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input checked="" type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA <b>LATITUDE AND LONGITUDE</b> at center of disposal area Lat. 44° 27' m 33.7" S N Lon. 68° 20' m 52.9" S W if g.p.s., state margin of error 30'

## SITE EVALUATOR STATEMENT

I certify that on 6-14-18 (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).

<i>[Signature]</i>	319	6-17-18
Site Evaluator Signature	SE#	Date
WILLIAM A. LaBELLE, JR.	(207) 537 - 5900	labelleseptic@rivah.net
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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(207) 287-2070 FAX (207) 287-4172

Town, City, Plantation  
**LAMOINE**

Street, Road, Subdivision  
**MOOSE RUN LOT 8**

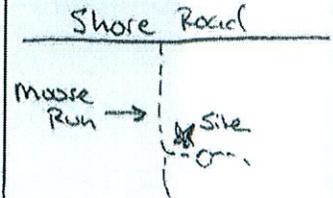
Owner or Applicant Name  
**RICHARD EGAN**

SITE PLAN

Scale 1" = 60 Ft.

( SEE ATTACHED SITE PLAN )

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



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

Observation Hole #1  Test Pit  Boring  
3 " Depth of organic horizon above mineral soil

	Texture	Consistency	Color	Mottling
10	SANDY LOAM	FRIABLE	DARK YEL. BROWN (10YR3/6)	N.E.
20	TO LOAM	COMPACTED	LIGHT OLIVE BROWN (2.5Y 5/4)	FEW DISTINCT
30				
40				
50				

Soil Profile <u>3</u>	Classification <u>C</u>	Slope <u>0%</u>	Limiting Factor <u>16"</u> Depth	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Observation Hole #2  Test Pit  Boring  
3 " Depth of organic horizon above mineral soil

	Texture	Consistency	Color	Mottling
10	SANDY GRAVELLY	FRIABLE	DARK YELLOWISH BROWN (10YR4/6)	N.E.
20	LOAM	FIRM	YELLOWISH BROWN (10YR 5/6)	
30				
40				
50				

Soil Profile <u>3</u>	Classification <u>C</u>	Slope <u>2 1/2%</u>	Limiting Factor <u>18"</u> Depth	<input type="checkbox"/> Ground Water <input checked="" type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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W. C. 2.7  
Site Evaluator's Signature

319  
S. E. #

6-17-18  
Date

Town, City, Plantation  
LAMOINE

Street, Road, Subdivision  
MOOSE RUN

LOTS  
LOT 8

Owner or Applicant Name  
RICHARD EGAN

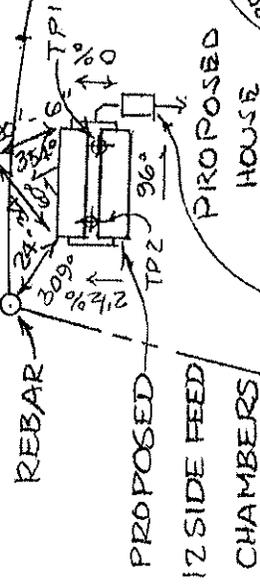
MAGNETIC  
NORTH

SITE PLAN:

SCALE: 1" = 60 FT.

ERP, NAIL IN  
12" DIA. SPRUCE

MOOSE



PROPOSED  
12 SIDE FEED  
CHAMBERS

PROPOSED  
1000 GAL.  
SEPTIC TANK

APPROX.  
PROPERTY  
LINES

CULVERT

RUN

UPLAND

- LOT 8 -

WETLAND

WETLAND

NOTE:

IF PUMPED, INSTALL LIFT STATION  
WITH RISERS TO FINISHED GRADE,  
2" PUMP LINE PROTECTED FROM  
FREEZING AND CRUSHING AND  
PROTECT LIFT STATION FROM  
FREEZING. INSTALL A DISTRIBUTION  
BOX PROTECTED FROM FREEZING.

*W.C. L...*

Site Evaluator's Signature

319

S.E. #

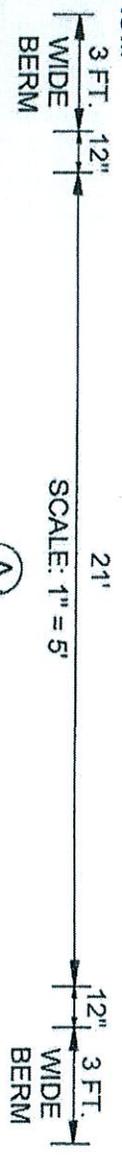
6-17-18

Date



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

DISPOSAL AREA CROSS SECTION



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

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.

CROWN FINISH GRADE FROM CENTER AT 3% SLOPE

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

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

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

THOROUGHLY MIX, DISK OR ROTO-TILL  
 CLEAN, COARSE, SHARP SAND INTO  
 TOP 6 INCHES OF ORIGINAL SOIL TO  
 CREATE A TRANSITION ZONE, SEC. 11-B.

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.

- ELEVATIONS:
- ELEV. REF. PT. (ERP): 0"
  - FINISHED GRADE: -35" CROWN
  - TOP OF CHAMBERS: -47"
  - BOTTOM OF CHAMBERS: -60"

OWNER: RICHARD EGAN  
 LOCATION: LAMOINE

*WAC*

DOC 17 WILLIAM A. LABELLE, JR.

S.E.# 319

DATE 6-17-18