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: PINKHAM'S FLAT RD

Subdivision, Lot #:

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: Lamoine Permit # 933

Date Permit Issued 11/28/18 Fee: $ 265 Double Fee Charged [ ]

Local Plumbing Inspector Signature: [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 # 7 Lot # 3-4

OWNER/APPLICANT INFORMATION

Name (last, first, MI): DURRELL STACEY ☒ Owner □ Applicant

Mailing Address of Owner/Applicant: POB 134 / SEAL COVE, ME 04674

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.

[signature] 2-16-18
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

11 1/2 A ± □ 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: 1350 ☒ 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

- □ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION

9 / D / A III

at Observation Hole # TB1

Depth 14" - 12"

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 29 m 56 s

Lon. 68 d 20 m 64 s

If g.p.s, state margin of error: 30'±

SITE EVALUATOR STATEMENT

I certify that on 12-8-17 (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).

[signature] 189 12-11-17
Site Evaluator Signature SE # Date

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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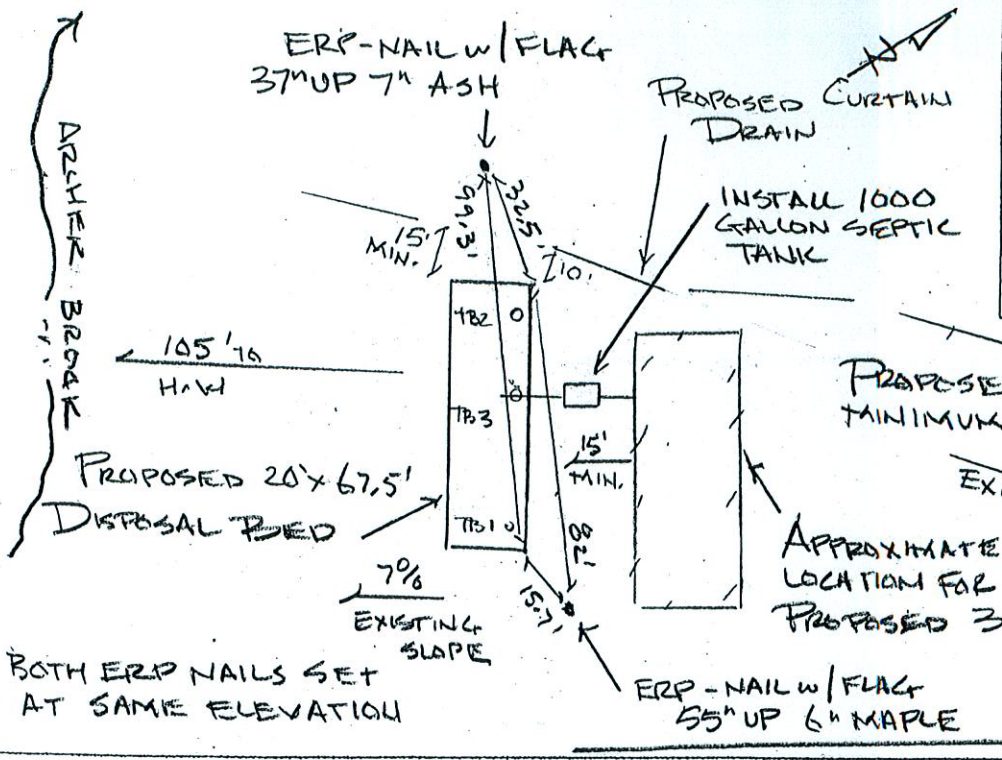
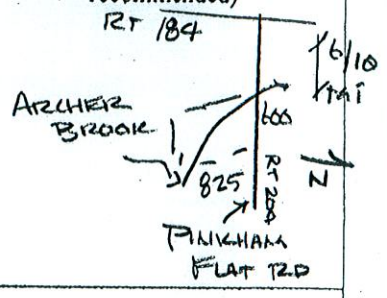
Maine Dept. Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
LAMOINE	PINKHAM'S FLAT RD	STACEY DURRELL

SITE PLAN Scale 1" = _____ ft. or as shown



SITE LOCATION PLAN
(map from Maine Atlas recommended)



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

Observation Hole TB1,2,3 ☒ Test Pit ☒ Boring
0" " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10	LOAM	FILL	YELLOW BROWN	NONE
10–20	FINE SANDY LOAM	CORKINAL SURFACE FRIABLE		
20–30	SILTY CLAY LOAM	FIRM	OLIVE BROWN	COMMON DISTINCT
30–40		DEPTH	PROBE	
40–50				

Soil Classification	Slope	Limiting Factor	
9 / D/A III (Profile / Condition)	7 %	12-14	[☒] Ground Water [ ] Restrictive Layer [ ] Bedrock BELOW [ ] Pit Depth ORIGINAL

Observation Hole _____ ☐ Test Pit ☐ Boring
_____ " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0–10				
10–20				
20–30				
30–40				
40–50				

Soil Classification	Slope	Limiting Factor	
_____ / _____ (Profile / Condition)	_____ %	_____ "	[ ] Ground Water [ ] Restrictive Layer [ ] Bedrock [ ] Pit Depth

Site Evaluator Signature _____ SE # #189 Date 12-11-17

Mike J Gramlich SE #189 POB 284 Holden ME 207-843-6395

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Division of Health Engineering, Station 10
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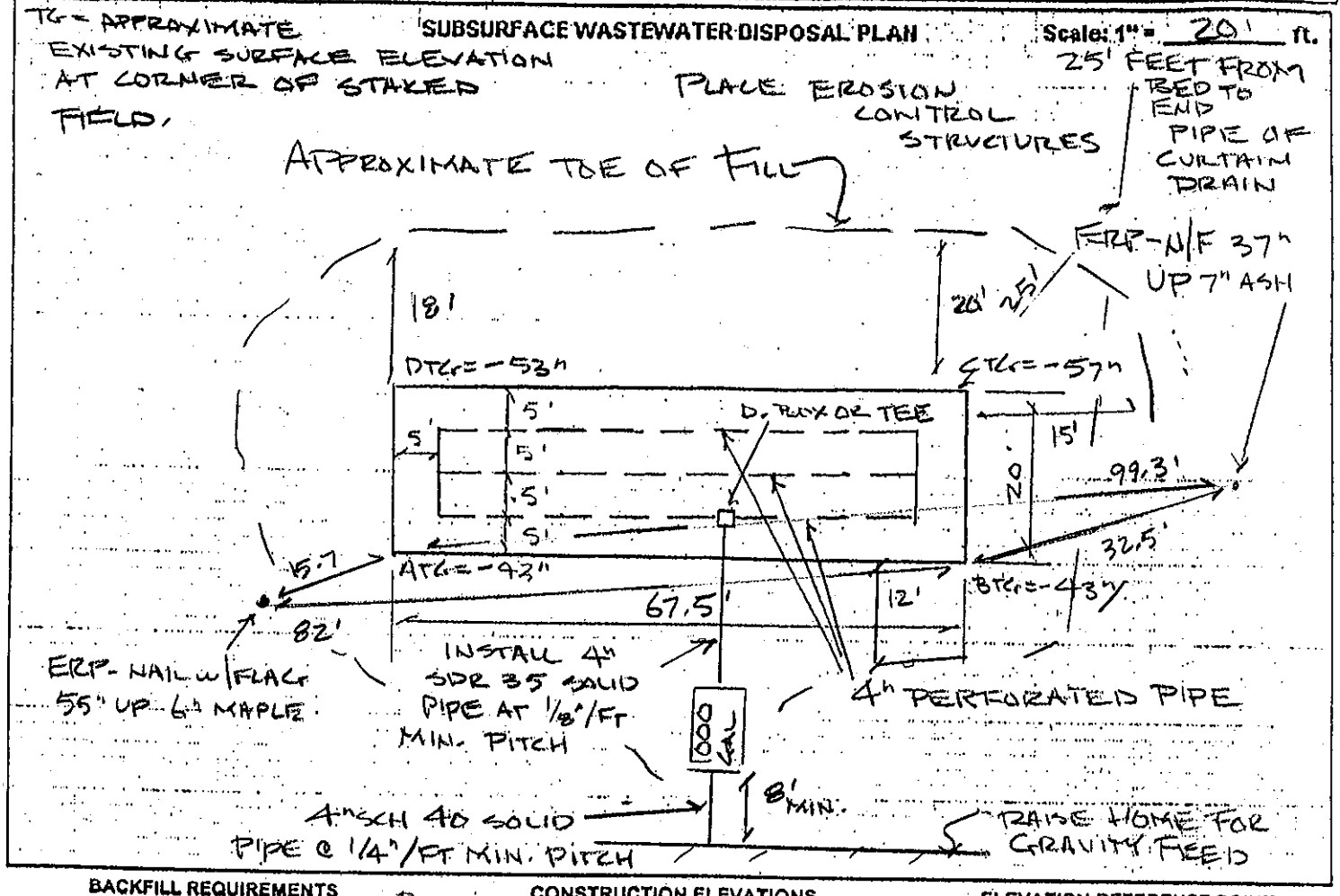
LAMOINE	PINKHAM'S FLAT RD	STACEY DURRELL

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft.



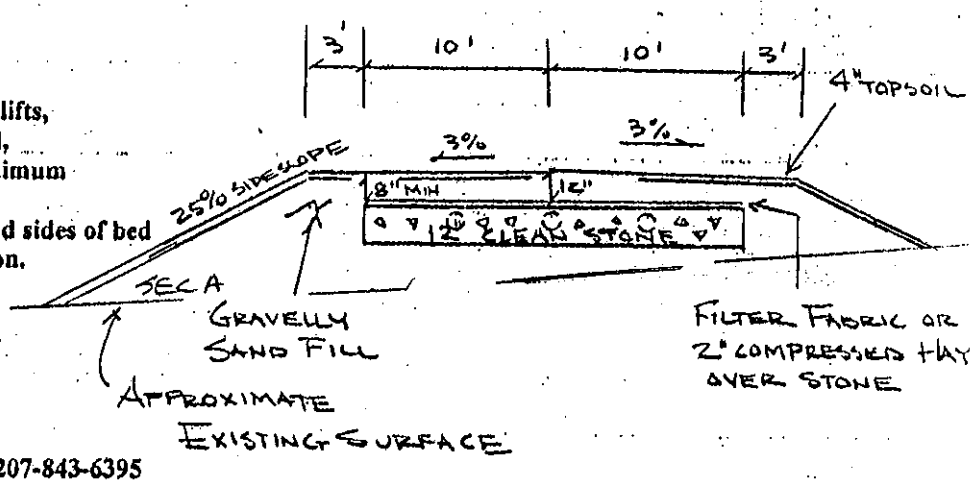
BACKFILL REQUIREMENTS			CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope)	A 28"	B 28"	Finished Grade Elevation	-21"	Location & Description: ERP - NAIL w/FLAG 37" UP 7" ASH
Depth of Backfill (downslope)	D 32"	C 36"	Top of Distribution Pipe or Proprietary Device	-34"	
DEPTHS AT CROSS-SECTION (shown below)			Bottom of Disposal Field	-45"	Reference Elevation is: 0.0" or:

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 11 of code for additional requirements.
6.) Bottom of disposal field to be 45" below elevation of TBM (ERP).



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Site Evaluator Signature | #189 SE # | 12-11-17 Date