

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 <u>Lamoine</u>	Permit # <u>1938</u>
Street or Road	PARTRIDGE COVE ROAD	Date Permit Issued <u>1, 2, 19</u>	Fee \$ <u>265</u> Double Fee Charged ()
Subdivision, Lot #	#579	<u>Delella J A</u> Local Plumbing Inspector Signature	
OWNER/APPLICANT INFORMATION		L.P.I. # <u>394</u>	
Name (last, first, MI)	YOUNG, DANA	Fee: \$ <u>265</u> state min. fee \$ _____	Locally adopted fee _____
Mailing Address of	579 PARTRIDGE COVE ROAD	Copy: <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Town <input type="checkbox"/> State	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	LAMOINE, ME. 04605	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.	
Daytime Tel. # email address:		Municipal Tax Map # <u>16</u>	Lot # <u>13</u>
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.	
<u>Dana Young</u> Signature of Owner or Applicant		_____	
<u>2 JAN 19</u> Date		_____	
		Local Plumbing Inspector Signature	
		(1st Date Approved)	
		(2nd Date Approved)	

PERMIT INFORMATION		
TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced: <u>STONE BED</u> Year Installed: <u>1980's</u> <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	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 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 checked="" type="checkbox"/> 6. Non-engineered Disposal Field (only) (SEE NOTE PAGE 2) <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. <u>20±</u> acres	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>2</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____ Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <input type="checkbox"/> Proposed <input checked="" 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)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete EXISTING <input type="checkbox"/> a. Regular SEE <input type="checkbox"/> b. Low Profile NOTE <input type="checkbox"/> c. with lift station PG, 2. <input type="checkbox"/> d. water tight <input type="checkbox"/> e. two compartment <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device _____ <input type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE <u>600</u> 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 <u>180</u> 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 <u>3</u> CONDITION <u>C</u> at Observation Hole # <u>1</u> Depth <u>24</u> " OF MOST LIMITING SOIL FACTOR	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 type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May be Required, SEE NOTE PG, 2 <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 LATITUDE AND LONGITUDE at center of disposal area Lat. <u>44</u> d <u>28</u> m <u>30.11</u> s N Lon. <u>68</u> d <u>16</u> m <u>41.83</u> s W If g.p.s., state margin of error: <u>30'</u>

SITE EVALUATOR STATEMENT			
I certify that on <u>12-20-18</u> (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).			
<u>William A. LaBelle, Jr.</u> Site Evaluator Signature	319 SE#	<u>12-28-18</u> Date	<u>labelleseptic@rivah.net</u> E-mail Address
WILLIAM A. LABELLE, JR.	(207) 537 - 5900		
Site Evaluator Name Printed	Telephone Number	E-mail Address	Page 1 of 3

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Town, City, Plantation
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Street, Road, Subdivision
PARTRIDGE COVE ROAD

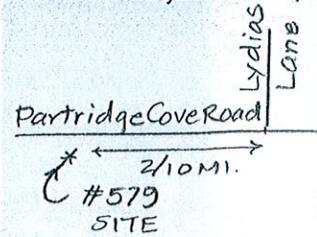
Owner or Applicant Name
DANA YOUNG

SITE PLAN

Scale 1" = 40 Ft.

(SEE ATTACHED SITE PLAN)

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

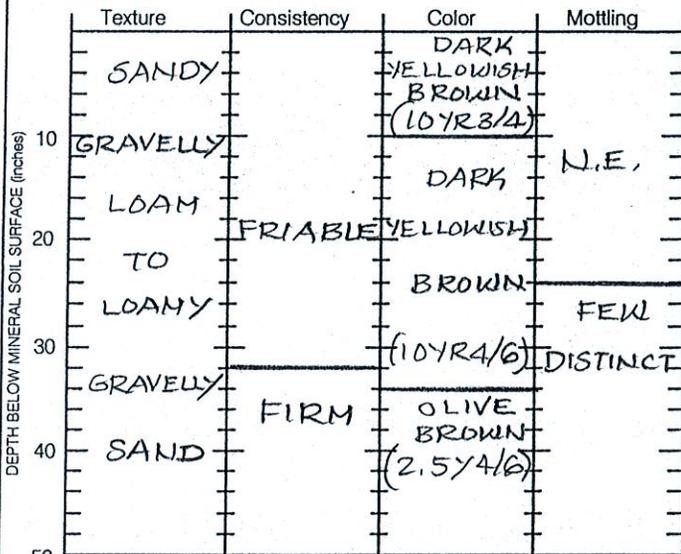


NOTES:

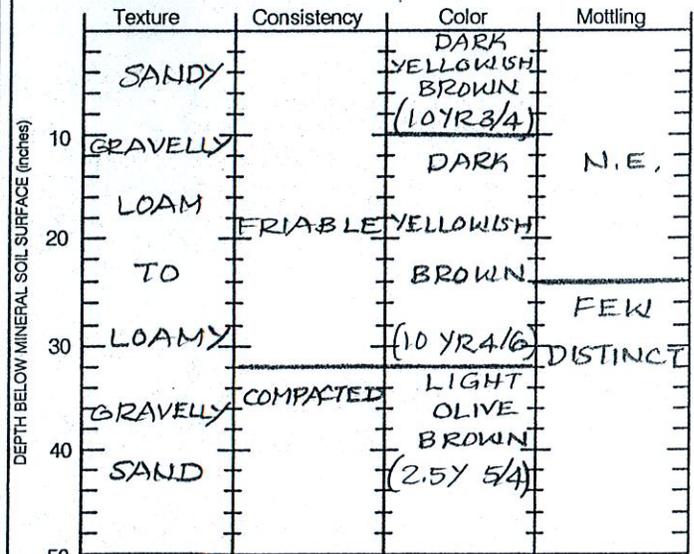
1. TANK WAS NOT UNCOVERED, MUST UNCOVER TANK, PUMP OUT AND CHECK CONDITION, REPLACE TANK, IF NEEDED, TANK MUST BE 8' MIN. FROM BUILDING AND PROPOSED GARAGE AND 50 FT. MIN. FROM WELL.
2. COULD NOT VERIFY GRAVITY FEED FROM EXISTING TANK.

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

Observation Hole #1 Test Pit Boring
1/2 " Depth of organic horizon above mineral soil



Observation Hole #2 Test Pit Boring
1/2 " Depth of organic horizon above mineral soil



Soil Profile <u>3</u>	Classification <u>C</u>	Slope <u>8%</u>	Limiting Factor <u>24"</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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Soil Profile <u>3</u>	Classification <u>C</u>	Slope <u>4 1/2%</u>	Limiting Factor <u>24"</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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[Signature]
 Site Evaluator's Signature

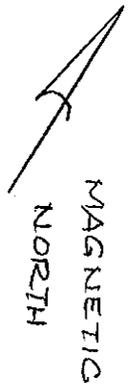
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 S. E. #

12-28-18
 Date

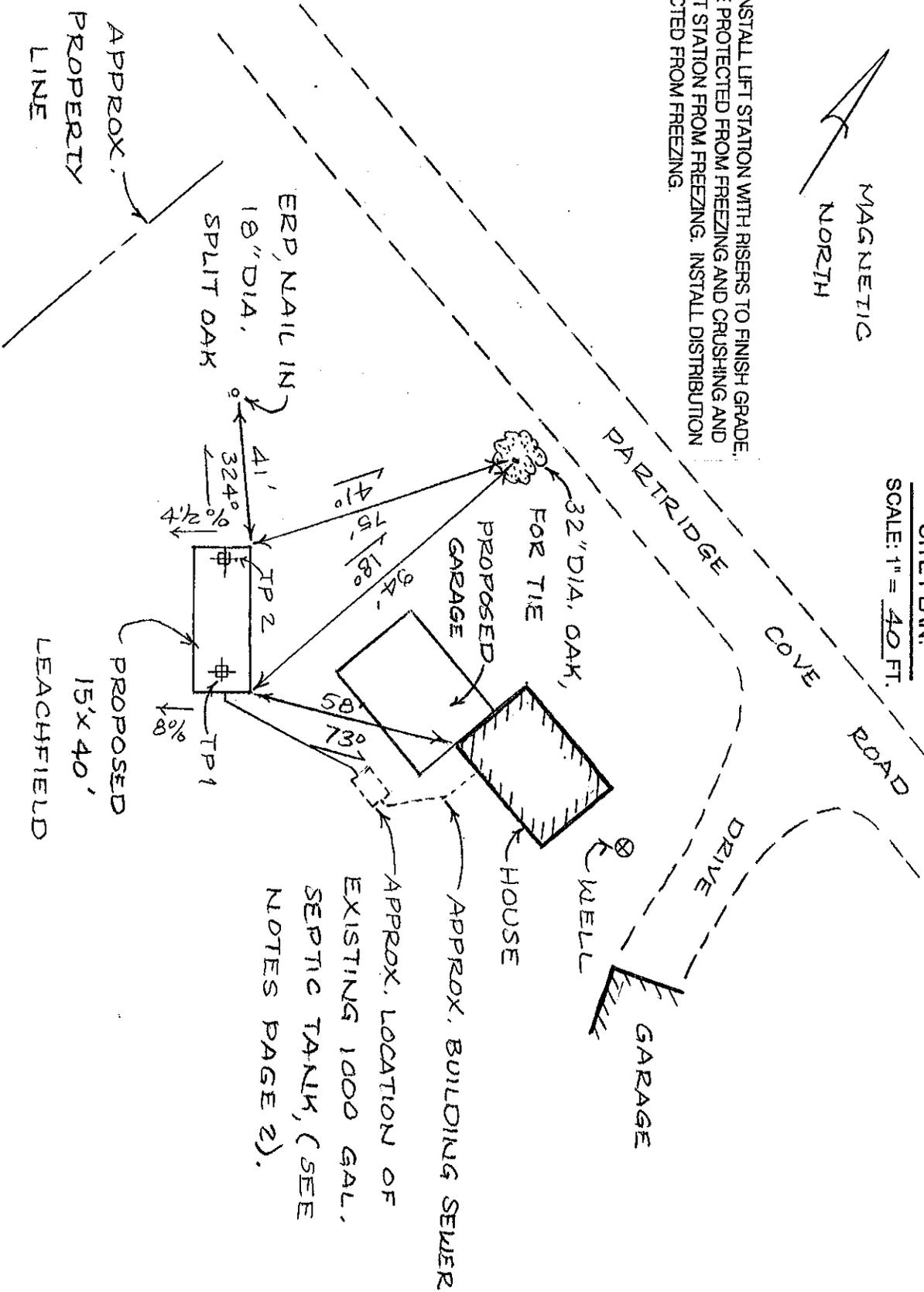
Town, City, Plantation LANOINE	Street, Road, Subdivision PARTRIDGE COVE ROAD	Owner or Applicant Name DANA YODING
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SITE PLAN:

SCALE: 1" = 40 FT.



NOTE:
IF PUMPED, INSTALL LIFT STATION WITH RISERS TO FINISH GRADE.
2" PUMP LINE PROTECTED FROM FREEZING AND CRUSHING AND
PROTECT LIFT STATION FROM FREEZING. INSTALL DISTRIBUTION
BOX; PROTECTED FROM FREEZING.



APPROX. LOCATION OF
EXISTING 1000 GAL.
SEPTIC TANK, (SEE
NOTES PAGE 2).

Site Evaluator's Signature

SE: #

Date

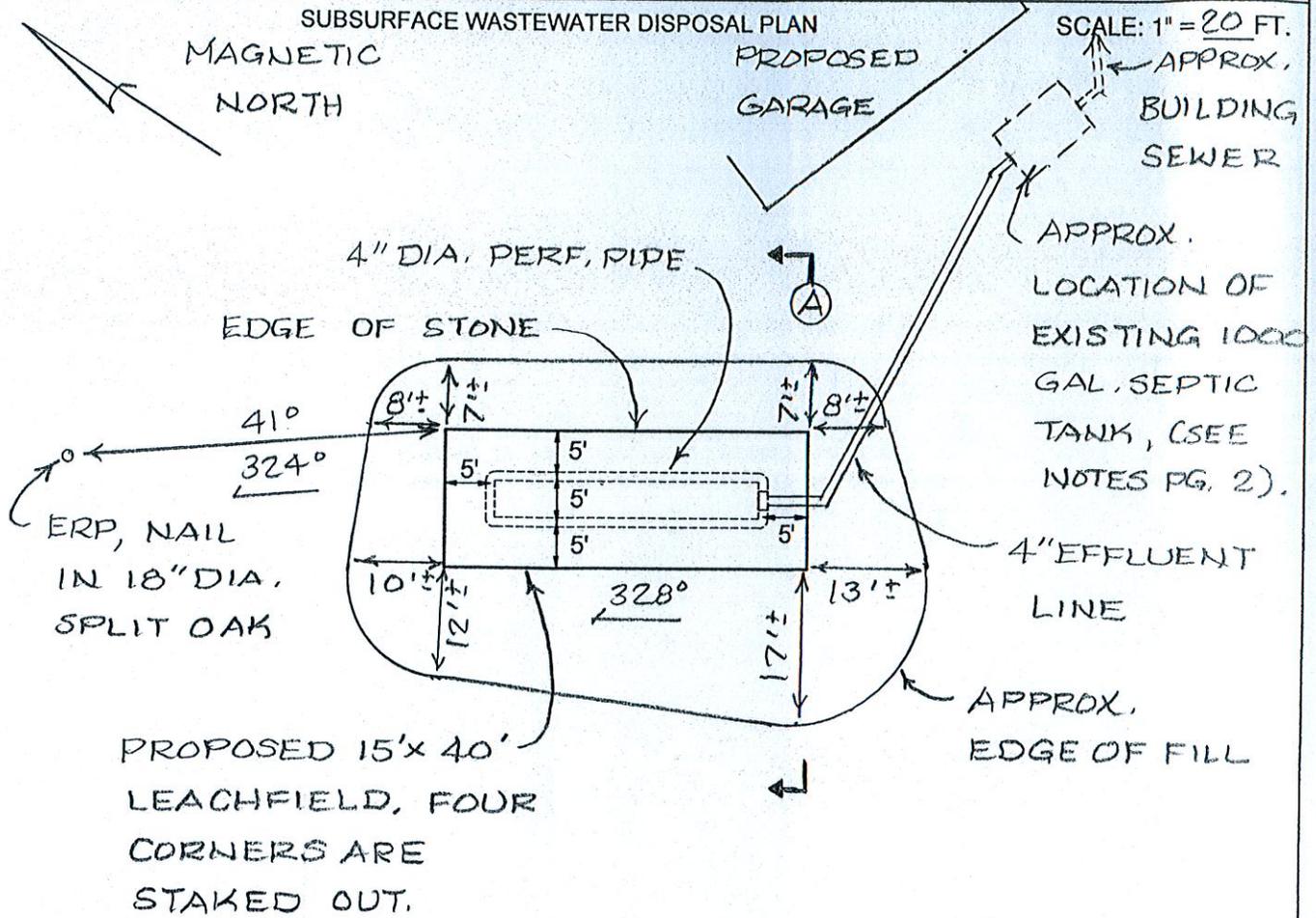
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FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT
Depth of Backfill (Upslope)	15"	Finished Grade Elevation	CROWN -34"			Location & Description NAIL 39"
Depth of Backfill (Downslope)	23"-29"	Top of Distribution Pipe or Proprietary Device	-49"	N/A		ABOVE GROUND IN 18" DIA. SPLIT OAK.
Depths @ cross-section shown below or on X-sec. detail.		Bottom of Disposal Field	-60"			Reference Elevation is: 0"

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

NOTES:

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. All work done adjacent to wetlands and water bodies must be done in compliance with section 12 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).
4. 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).
5. Full basement below grade foundation or frost wall must be 20' minimum from edge of disposal field and no full basement, slab, columns or posts must be 15' minimum from edge of disposal field.

W. C. L. H.
 Site Evaluator's Signature

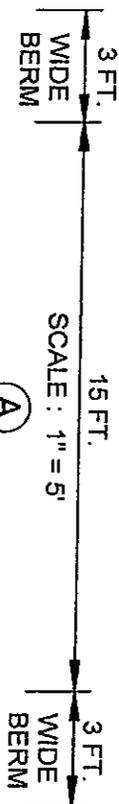
319
 S.E. #

12-28-10
 Date

15' X 40' BED

DISPOSAL BED CROSS SECTION

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



FILL MATERIAL SHALL BE 8"-12" THICK
OVER STONE 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

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F,
PLACED OVER STONE.

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

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

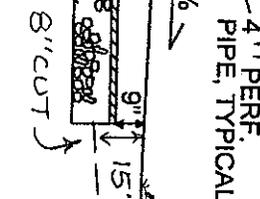
BOTTOM OF STONE MUST BE
LEVEL WITH MAXIMUM GRADE
TOLERANCE OF 2" PER 100'.

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.

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

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



EXISTING GRADE

LIMITING FACTOR

24" FILL

5" FILL

9" FILL

12" FILL

15" FILL

8" CUT

ELEVATIONS:
ELEV. REF. PT. (ERP): 0"
FINISHED GRADE: -34" CROWN
TOP OF DISTRIBUTION PIPE: -49"
BOTTOM OF STONE: -60"

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: DANA YOUNG
LOCATION: LAMOINE

DOC17

WILLIAM A. LABELLE, JR.

S.E.#

DATE

W.A. Labelle, Jr.

319

12-28-18