replaces #1933 11/28/2018

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	PINKHAMS FLAT RD
Subdivision, Lot #	

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City Lamoine Permit # 1943
Date Permit Issued 1-23-19 Fee: $ 0 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 # 7 Lot # 3-4

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	DURREL 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 of Owner or Applicant 1-29-19 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
11.5A □ 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 NOT DIFFUSION PLASTIC STANDARD
□ a. cluster array ■ c. Linear
□ b. regular load □ d. H-20 load
□ 4. Other: ____
SIZE: 136 ■ sq. ft. □ lin. ft.

GARBAGE DISPOSAL UNIT
X 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/A111
at Observation Hole # TB1
Depth 12"-19
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
□ 1. Medium---2.6 sq. ft. / gpd
□ 2. Medium---Large 3.3 sq. f.t / gpd
□ 3. Large---4.1 sq. ft. / gpd
■ 4. Extra Large---5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP
□ 1. Not Required
X 2. May Be Required
□ 3. Required
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 54 s
If g.p.s, state margin of error: 30'±

SITE EVALUATOR STATEMENT

12-20-18

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).

Site Evaluator Signature — SE # 189 — Date 12-21-18

Site Evaluator Name Printed: Mike J Gramlich
Telephone Number: 843-6395.
E-mail Address: POB 284 Holden ME 04429

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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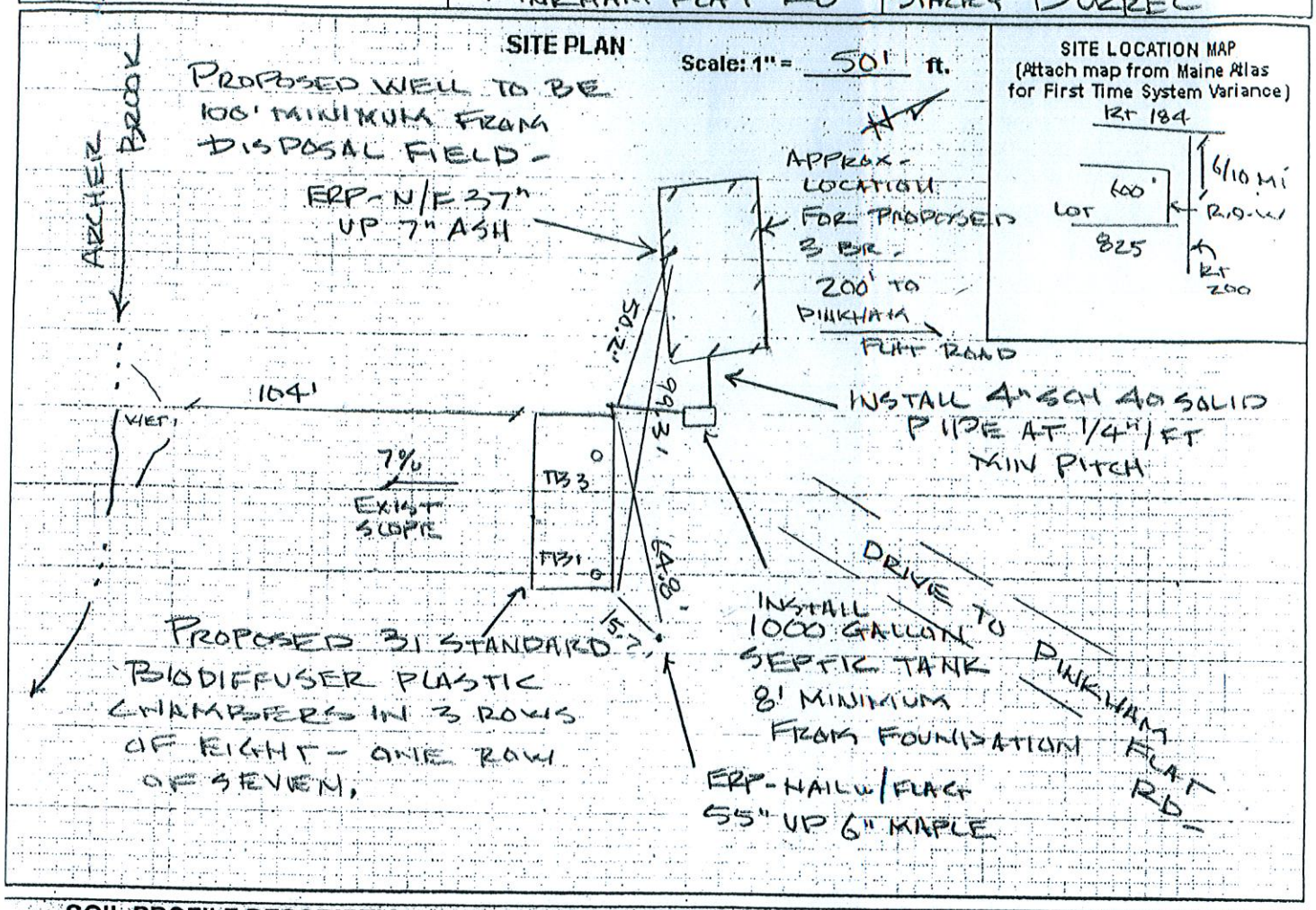
Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
LAMOINE	PINKHAM FLAT RD	STACEY DURREL

SITE PLAN

Scale: 1" = 50' ft.



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

Observation Hole # TB 1 & 3 ☒ Test Pit ☒ Boring

0" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)

Depth	Texture	Consistency	Color	Mottling
0–6	LOAM	FILL	YELLOW	
6–12	FINE SANDY LOAM	ORIGINAL SURFACE / FRIABLE	BROWN	NONE
18–24	SILTY CLAY LOAM	FIRM	OLIVE BROWN	COMMON DISTINCT
36		DEPTH OF PROBE		

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
9	D/AH	7	12-14. BELOW ORIGINAL	☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Observation Hole # _____ ☐ Test Pit ☐ Boring

_____" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)

Depth	Texture	Consistency	Color	Mottling
0–48				

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

Site Evaluator Signature: Mike J Gramlich POB 284 Holden ME 04429 207 843-6395

SE # 189

Date 12-21-18

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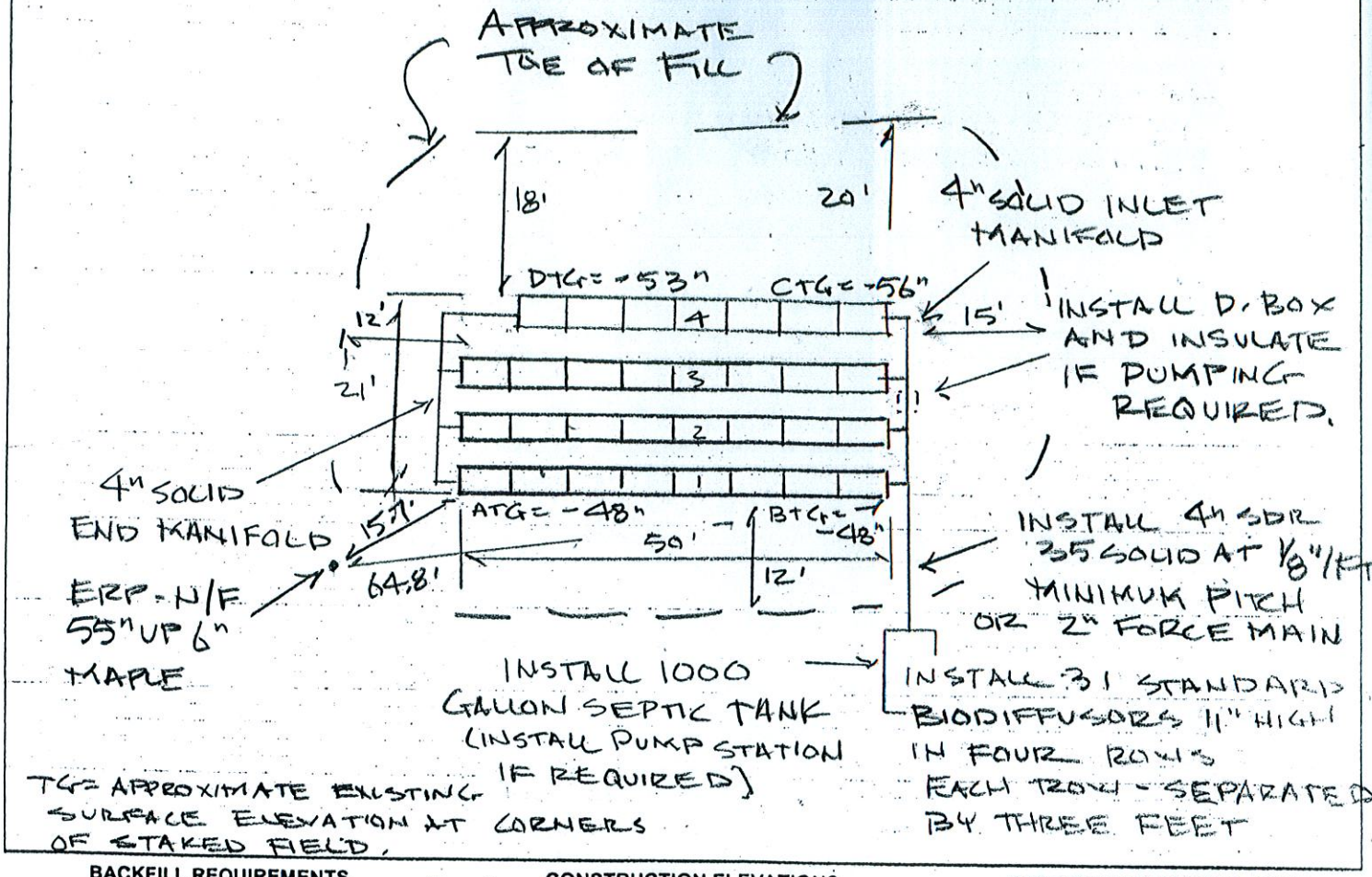
SUBSURFACE WASTEWATER DISPOSAL PLAN

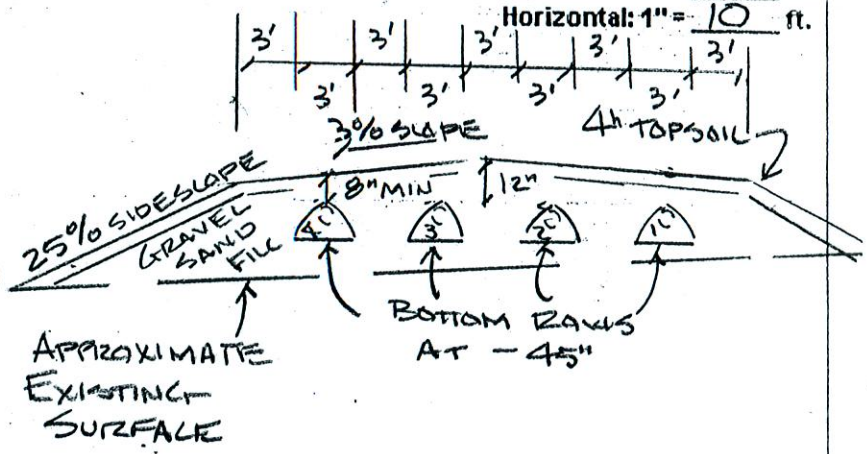
Scale: 1" = 20' ft.



BACKFILL REQUIREMENTS			CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Backfill (upslope) A	28	28" B	Finished Grade Elevation	-21"	Location & Description: ERP - N/F 55" UP 6" MAPLE
Depth of Backfill (downslope)	32	35"	Top of Distribution Pipe or Proprietary Device	-34"	Reference Elevation is: 0.0" or: 0
DEPTHS AT CROSS-SECTION D (shown below)		C	Bottom of Disposal Field	-45"	

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).

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

Site Evaluator Signature	SE #	Date
	#189	12-21-18