Street or Road: 21 ASH LANE

Subdivision, Lot #: MARLBORO OFF MAXWELL AVE

Date Permit Issued 6/30/14 Fee: $ 250 Double Fee Charged [ ]

Local Plumbing Inspector Signature

L.P.I. # 1040

☐ Owner ☒ Town ☐ State

OWNER/APPLICANT INFORMATION

Name (last, first, MI): MILLER ED ☐ Owner ☐ Applicant

Mailing Address of Owner/Applicant: C/O SCOTT WERNER

Daytime Tel. #

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 # 16 Lot # 38

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 6-30-14

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. 7/28/14 (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

± 4 ☐ SQ. FT. ☒ ACRES

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE

- ☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 2
- ☐ 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: 648 ☒ 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

180 gallons per day

BASED ON:

- ☐ 1. Table 4A (dwelling unit(s))
- ☐ 2. Table 4C(other facilities)
  SHOW CALCULATIONS for other facilites
- ☐ 3. Section 4G (meter readings)
  ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION: 3 / AIII

at Observation Hole # 1

Depth 15"

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

Specify only for engineered systems:

DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 44 d 28 m 30 s

Lon. 68 d 16 m 05 s

if g.p.s, state margin of error: GARMIN GPS

SITE EVALUATOR STATEMENT

I certify that on 11-9-13 (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 #	Date
	227	11-30-13

Site Evaluator Name Printed	Telephone Number	E-mail Address
JOE BOUCHER	667-5025	

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

PERMIT # 1735

1735

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	LAMOINE
Street or Road	21 ASH LANE
Subdivision, Lot #	MARLBORO OFF MAXWELL AVE

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

The Subsurface Wastewater Disposal System ***shall not*** be installed until a Permit is attached HERE 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.

OWNER/APPLICANT INFORMATION

Name (last,first, MI): MILLER ED ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: c/o SCOTT WEBNER c/o BARRY CONSTN

Daytime Tel. #:

Municipal Tax Map # 16 Lot # 38

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 6-28-14

CAUTION: INSPECTION REQUIRED

I have inspected the installation authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Local Plumbing Inspector Signature — (1st) date approved — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☒ 1. First Time System
- ☐ 2. Replacement System
  - Type replaced: _____
  - Year installed: _____
- ☐ 3. Expanded System
  - ☐ a. Minor Expansion
  - ☐ b. Major 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

± 4 ☐ SQ. FT. ☒ ACRES

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE

- ☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 2 (1)
- ☐ 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
  - or ☒ 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: 648 ☒ 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

180 gallons per day

BASED ON:

- ☒ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS for other facilites

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	ATU	

at Observation Hole # 1

Depth 15 "

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- ☐ 1. Small—2.0 sq. ft. / gpd
- ☐ 2. Medium—2.6 sq. ft. / gpd
- ☒ 3. Medium—Large 3.3 sq. f.t / gpd
- ☐ 4. Large—4.1 sq. ft. / gpd
- ☐ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ☐ 1. Not Required
- ☐ 2. May Be Required
- ☒ 3. Required

Specify only for engineered systems:

DOSE: _____ gallons

☐ 3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 44 d 28 m 30 s

Lon. 68 d 16 m 05 s

if g.p.s, state margin of error: GARMIN

SITE EVALUATOR STATEMENT

I certify that on 11-9-13 (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 #	Date
	227	11-30-13

Site Evaluator Name Printed	Telephone Number	E-mail Address
JOE BROOKS	667-5025	

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

HHE-200 Rev. 4/05

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

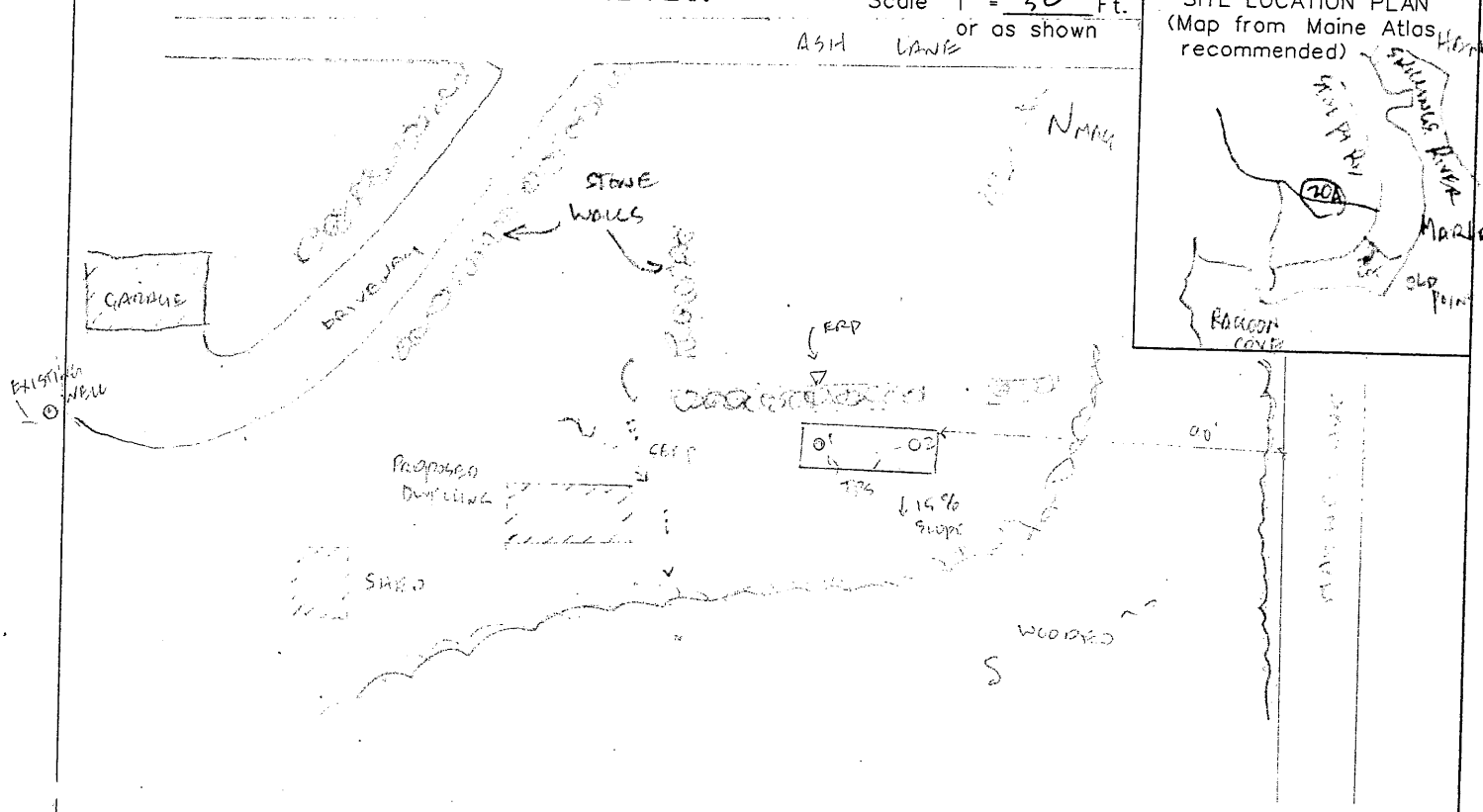
Town, City, Plantation: LAMOINE

Street, Road Subdivision: 21 ASH LANE MARLBORO

Owner's Name: ED MILLER

SITE PLAN

Scale 1" = 50' Ft. or as shown



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

Observation Hole TP#1 ☒ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10	Gravelly Sandy Loam	Friable	Dark Brown; Dark Reddish Brown	None
10–20		Firm		
20–30				
30–40				
40–50				

Soil Classification		Slope	Limiting Factor	
3 Profile	A+II Condition	15 %	15 "	☐ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole TP#2 ☒ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10	Very Rocky Sandy Loam	Friable	Dark Brown; Dark Red Brown	None
10–20		Firm		
20–30				
30–40				
40–50				

Soil Classification		Slope	Limiting Factor	
3 Profile	A+II Condition	15 %	16 "	☐ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Site Evaluator Signature: [signature]

SE # 227

Date: 11-30-13

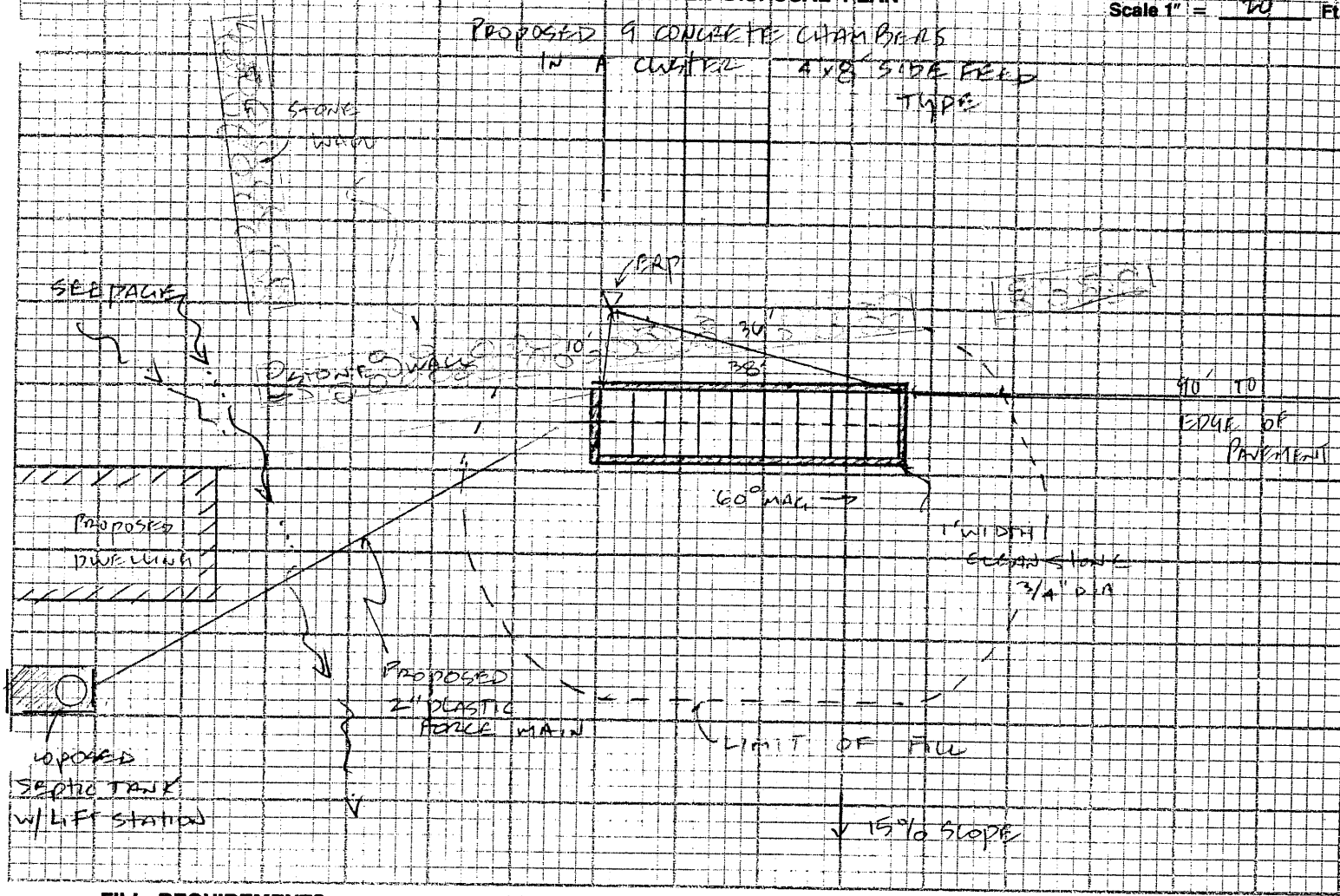
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
LAMOINE	21 ASH LANE MARLBORO	ED MILLER

SUBSURFACE WASTEWATER DISPOSAL PLAN

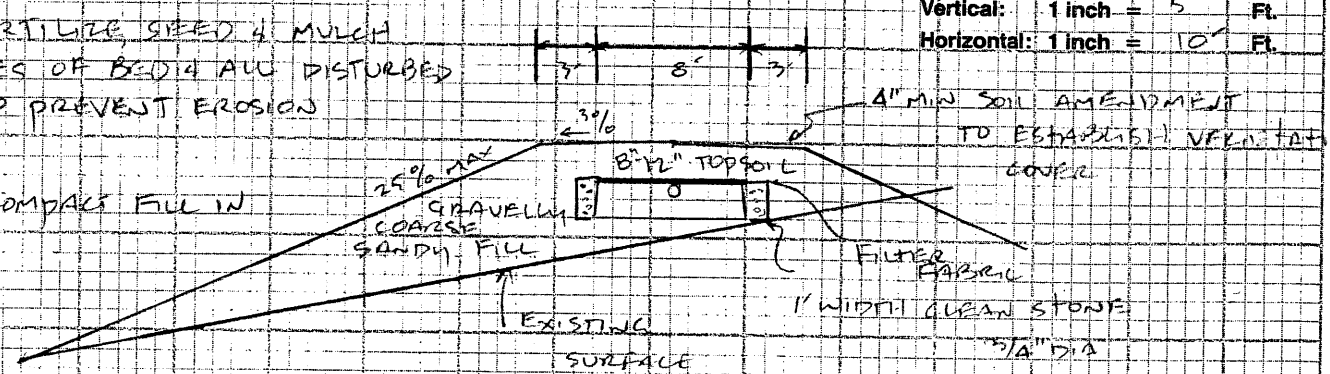
Scale 1" = 20' Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	26"	Reference Elevation is	0"	NAIL W/ FLAGGING 43" UP A 10" DIA ASH
Depth of Fill (Downslope)	36"	Bottom of Disposal Area	-49"	
		Top of Distribution Lines or Chambers	-36"	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5' Ft.
Horizontal: 1 inch = 10' Ft.



Notes

1) LIME, FERTILIZE, SEED & MULCH TOP & SIDES OF BED & ALL DISTURBED AREAS TO PREVENT EROSION

2) PLACE & COMPACT FILL IN 8" LIFTS

3) BOTTOM OF BED TO BE INSTALLED LEVEL W/A MAX GRADE TOLERANCE OF 1"/100'

SCARIFY ORIGINAL SURFACE UNDER BED

Site Evaluator Signature	SE#	Date
[signature]	227	11-30-13