SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation	DEER ISLE
Street or Road	LINDSAY LANE
Subdivision, Lot #	

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

DEER ISLE PERMIT # 2164 TOWN COPY

Date Permit Issued: 9/12/07 $ 100.00 ☐ If Double Fee Charged FEE

Local Plumbing Inspector Signature L.P.I. # 265

OWNER/APPLICANT INFORMATION

Name (last, first, MI) ■ Owner ☐ Applicant

NEVELLS, HOWARD & JANET
SHIRLEEN NEVELLS

Mailing Address of Owner/Applicant: 190 BURNT COVE ROAD, STONINGTON, ME. 04681

Daytime Tel. #: (207) 367-2308

Municipal Tax Map # 1 Lot # 14-2

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.

Shirleen Nevells 9/11/07
Signature of Owner or Applicant Date

CAUTION: INSPECTION REQUIRED

I have inspected the installation authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. 9/10/08 (1st) date approved

Local Plumbing Inspector Signature 9/10/08 (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

2+ ☐ 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 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: 900 ■ 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 501.1 (dwelling unit(s))
☐ 2. Table 501.2 (other facilities)
SHOW CALCULATIONS
--- for other facilites ---

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
2 / A,III/B / 1
at Observation Hole # 1
Depth 24"
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

SITE EVALUATOR STATEMENT

I certify that on 8-27-04 (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 | 117 SE # | 9-11-04 Date

RICHARD BABINE Site Evaluator Name Printed | (207) 825-3623 Telephone Number | E-mail Address

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

HHE-200 Rev. 8/01

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

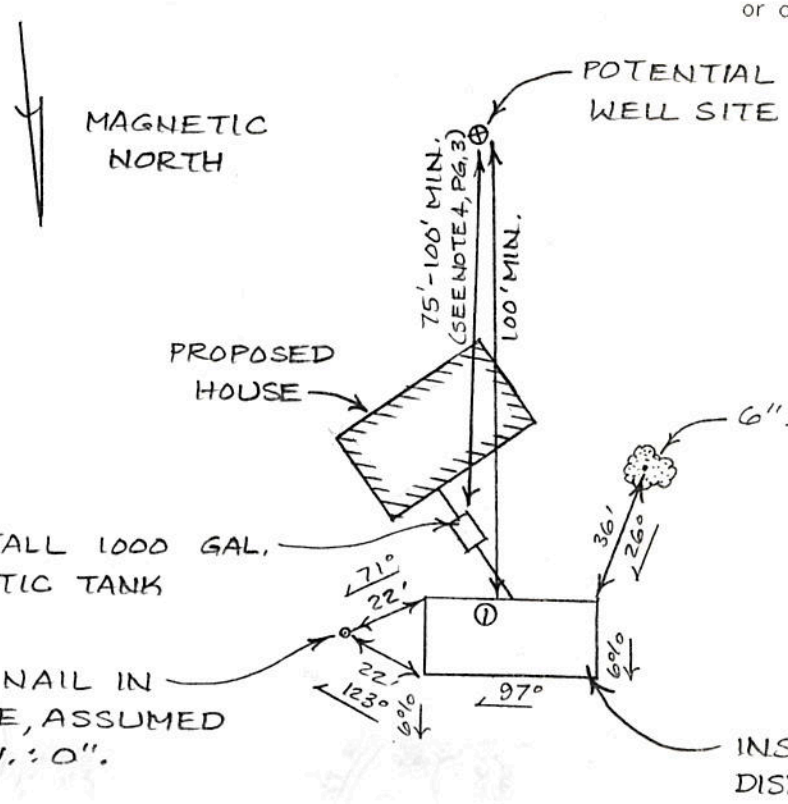
Town, City, Plantation: DEER ISLE

Street, Road Subdivision: LINDSAY LANE

Owner's Name: HOWARD & JANET NEVELLS

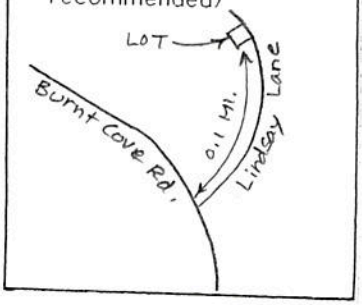
SITE PLAN

Scale 1" = 50 Ft. or as shown



SITE LOCATION PLAN

(Map from Maine Atlas recommended)



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

Observation Hole 1 ■ Test Pit ☐ Boring

2 " Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0	FINE SANDY LOAM	FRIABLE	BROWN	NONE
10			RED BROWN	
20	SANDY LOAM		YELLOW BROWN	
30				
40				
50				

Soil Classification	Slope	Limiting Factor	
Profile: 2	6 %	24"	☐ Ground Water
Condition: A, III/B			☐ Restrictive Layer
			■ Bedrock
			☐ Pit Depth

Observation Hole ____ ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

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

Soil Classification	Slope	Limiting Factor	
Profile	%	"	☐ Ground Water
Condition			☐ Restrictive Layer
			☐ Bedrock
			☐ Pit Depth

Site Evaluator Signature

117 SE •

9-11-04 Date

HHE-200 Rev. 7/97

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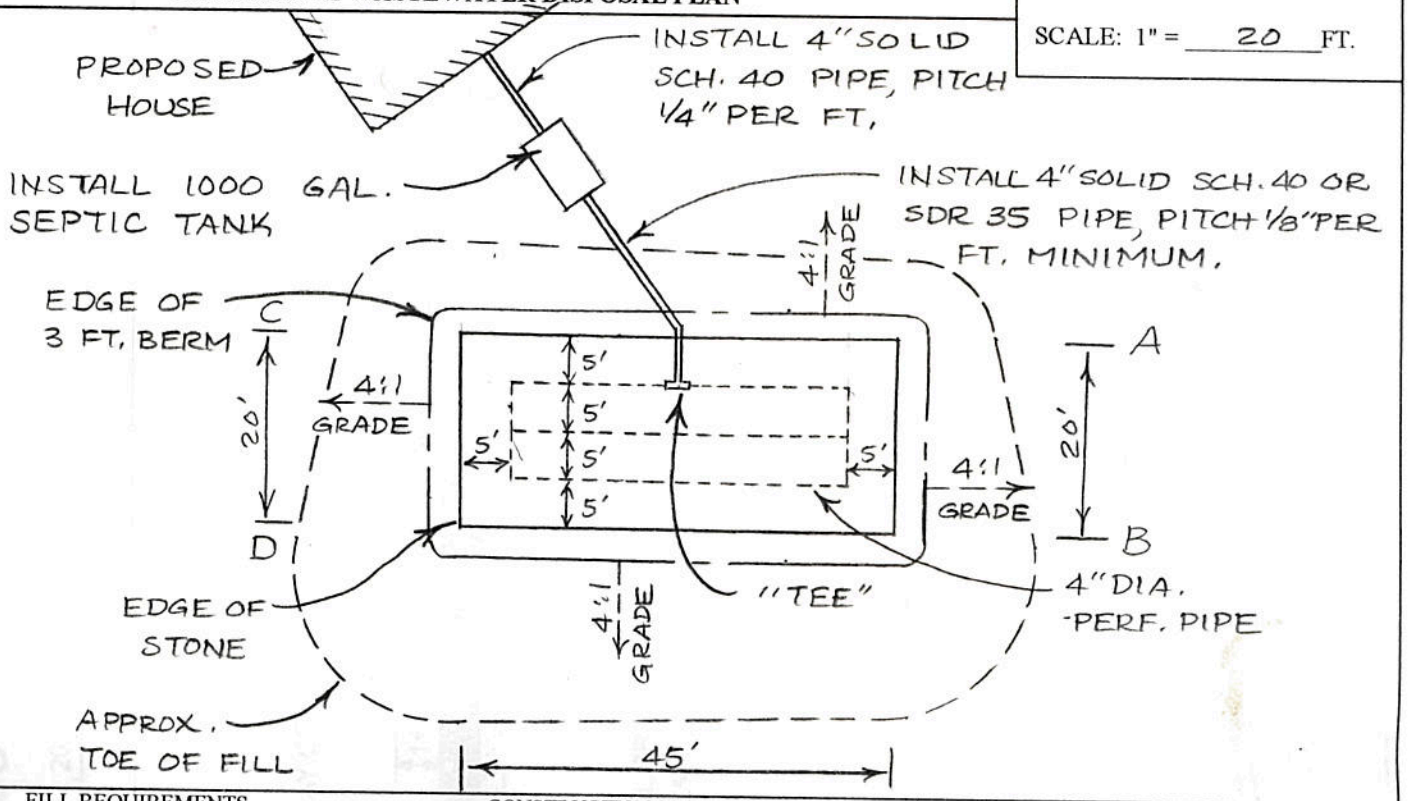
Department of Human Services
Division of Health Engineering
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
DEER ISLE	LINDSAY LANE	HOWARD & JANET NEVELLS

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	22"-26"	Finished Grade Elevation	-6"	Location & Description: NAIL IN MAPLE TREE,
		Top of Distribution Pipe or Proprietary Device	-21"	
Depth of Fill (Downslope)	36"-40"	Bottom of Disposal Area	-32"	Reference Elevation: 0"

DISPOSAL AREA CROSS SECTION

(SEE ATTACHED CROSS SECTIONS A-B & C-D)

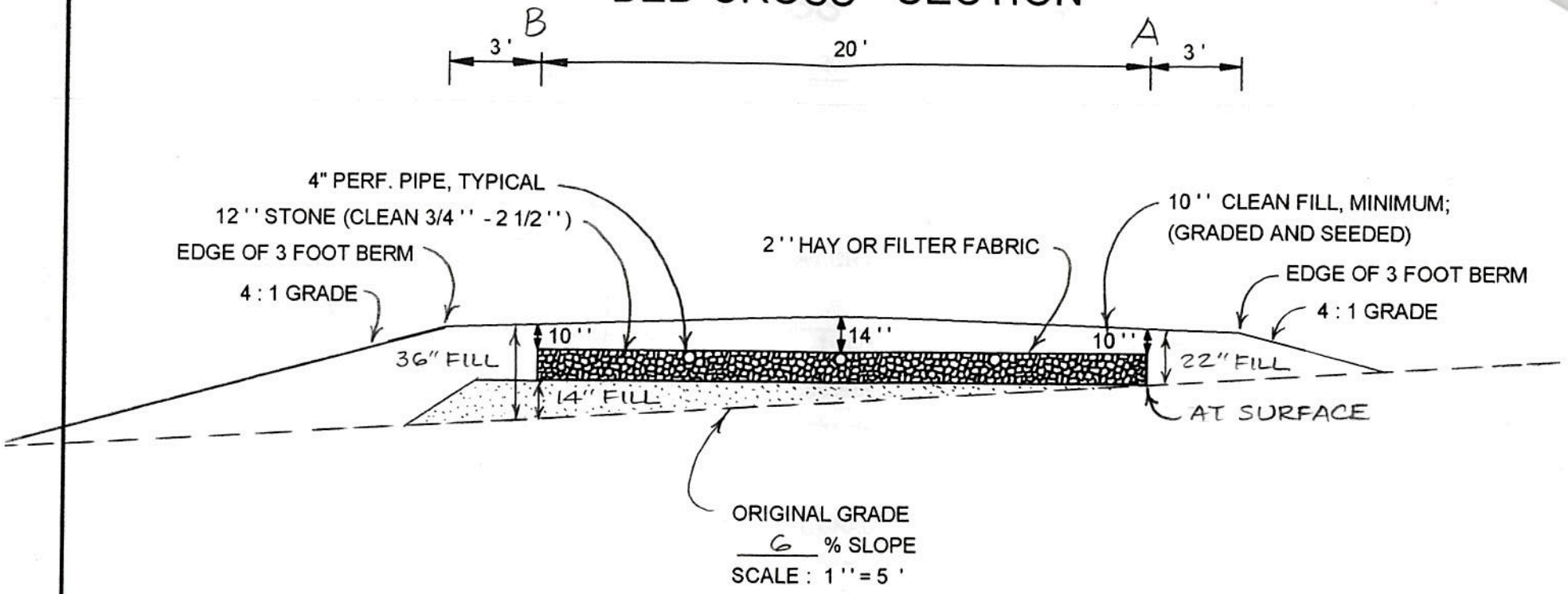
Scale
Horizontal 1" = ____ ft.
Vertical 1" = ____ ft.

NOTES:

1. DIVERT SURFACE WATER AND GROUND WATER AWAY FROM THE DISPOSAL SYSTEM.
2. CHECK SEPTIC TANK AT LEAST EVERY TWO YEARS FOR PUMPING.
3. GARBAGE DISPOSALS ARE NOT RECOMMENDED.
4. WELL CAN BE 75' - 100' MINIMUM FROM SEPTIC TANK, IF TANK IS OF MONOLITHIC CONSTRUCTION AND TESTED FOR WATERTIGHTNESS IN PRESENCE OF L.P. I. AND IS USED BY OWNER ONLY.
5. BUILDING FOUNDATION TO BE AT LEAST 20' MINIMUM FROM LEACHFIELD AND SLAB TO BE AT LEAST 15' MINIMUM FROM LEACHFIELD.
6. PROTECT ALL PIPING FROM FROST.

Site Evaluator Signature	SE #	Date
[signature]	117	9-11-04

BED CROSS - SECTION



NOTES:

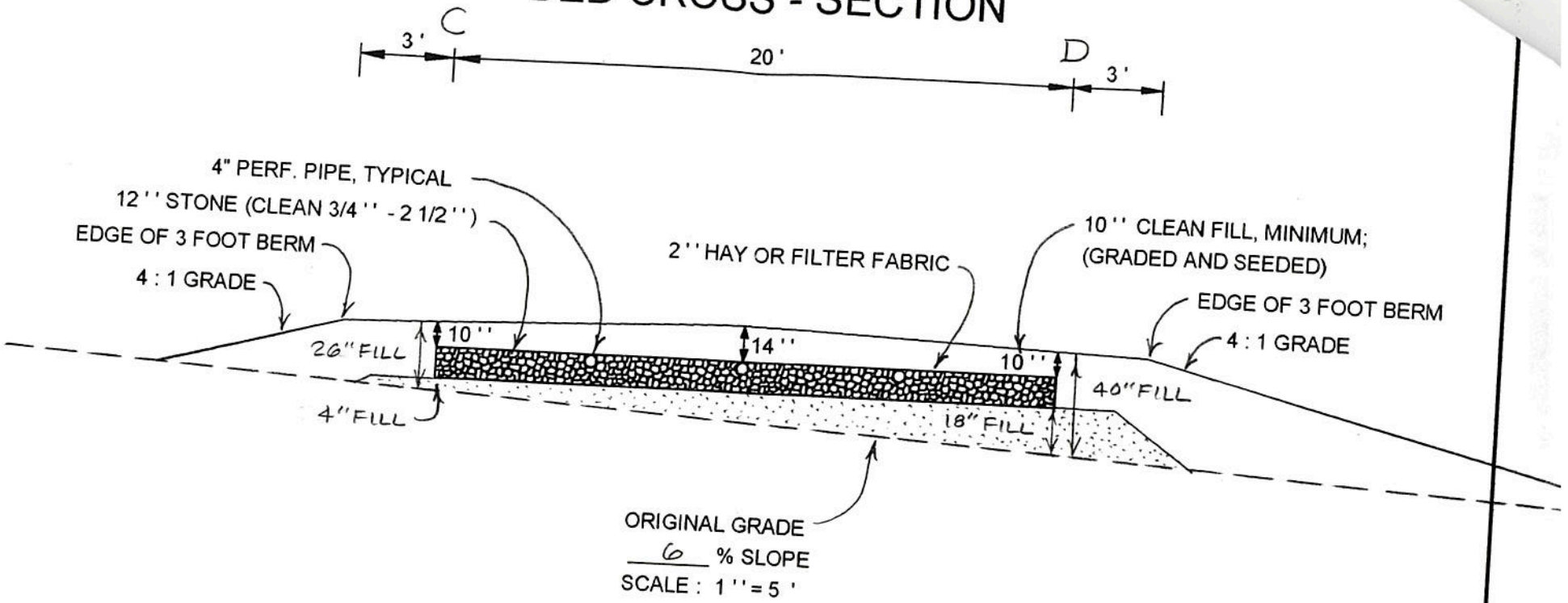
1. REMOVE THE VEGETATION AND SCARIFY THE AREA BENEATH SYSTEM AND FILL EXTENSIONS.
2. INSTALL GRAVELLY SANDY LOAM FILL IN 8'' LIFTS AND COMPACT USING A SMALL DOZER.
3. KEEP THE BOTTOM OF THE BED LEVEL.
4. THE TOP 4'' OF THE CLEAN FILL WILL CONSIST OF SOIL AMENDMENT MIX, SUITABLE FOR ESTABLISHMENT OF A VEGETATIVE COVER. THIS WILL BE PLACED OVER THE SYSTEM INCLUDING FILL EXTENSIONS.

OWNER: HOWARD & JANET NEVELLS

LOCATION: DEER ISLE

RICHARD BABINE | 117 (S.E. #) | 9-11-04 (DATE)

BED CROSS - SECTION



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OWNER: HOWARD & JANET NEVELLS

LOCATION: DEER ISLE

Richard Babine — RICHARD BABINE

117 — S.E. #

9-11-04 — DATE