SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	ELLSWORTH
Street Subdivision Lot #	RIVERSIDE LANE

PROPERTY OWNERS NAME

Last: DRESSEL First: PETER

Applicant Name:	PETER DRESSEL
Mailing Address of Owner/Applicant (If Different)	

ELLSWORTH PERMIT # 1787 STATE COPY

Date Permit Issued: 6/2/92 $ 10 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1955

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Peter Dressel 6/1/92

Signature of Owner/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.

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ NEW SYSTEM
2. ☑ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: ✓

SIZE OF PROPERTY: ±2 ACRES

ZONING: SHORELAND

THIS APPLICATION REQUIRES:
1. ☐ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE
   Attach New System Variance Form
3. ☑ REPLACEMENT SYSTEM VARIANCE
   Attach Replacement System Variance Form
   a. ☑ Requiring Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☑ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☑ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM
   (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☑ SEPTIC: ☑ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☑ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET
   SPECIFY: _____

PUMPING
1. ☑ NOT REQUIRED
2. ☐ MAY BE REQUIRED
   (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

EXISTING 3 BEDROOM DWELLING

MINIMUM DESIGN FLOW: 270 G.P.D. (GALLONS/DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
9	D

DEPTH TO LIMITING FACTOR: 10"

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☑ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☑ BED 1400 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

SITE EVALUATOR STATEMENT

On 5-19-92 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Joseph Brochu — Site Evaluator Signature

227 — SE#

5-28-92 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

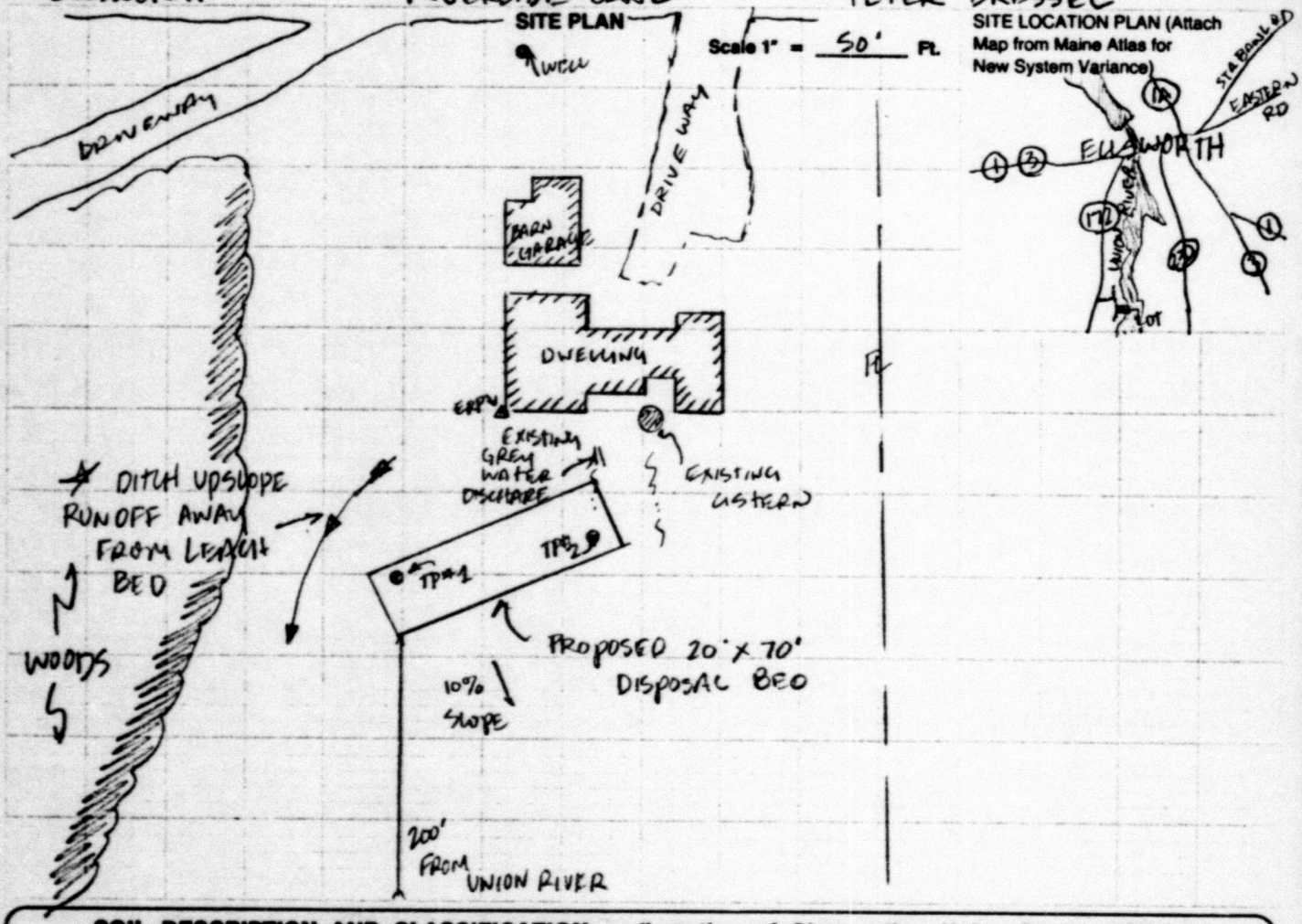
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SITE PLAN

Scale 1" = 50' Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

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		DARK BROWN	
SILT LOAM	FRIABLE FIRM	BROWN	NONE
		OLIVE GREY	COMMON DISTINCT

Soil Profile	Classification Condition	Slope	Limiting Factor	
9	D	10 %	13	☐ Ground Water ☑ Restrictive Layer ☐ Bedrock

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			
SILT LOAM	LOOSE FRIABLE	BROWN	NONE
	FIRM	GREY OLIVE	COMMON DISTINCT
	REFUSAL ON ROCK		

Soil Profile	Classification Condition	Slope	Limiting Factor	
9	D	10 %	10	☐ Ground Water ☑ Restrictive Layer ☐ Bedrock

Joseph Brochu
Site Evaluator Signature

227
SE#

5-28-92
Date

HHE-200 Rev. 1/84

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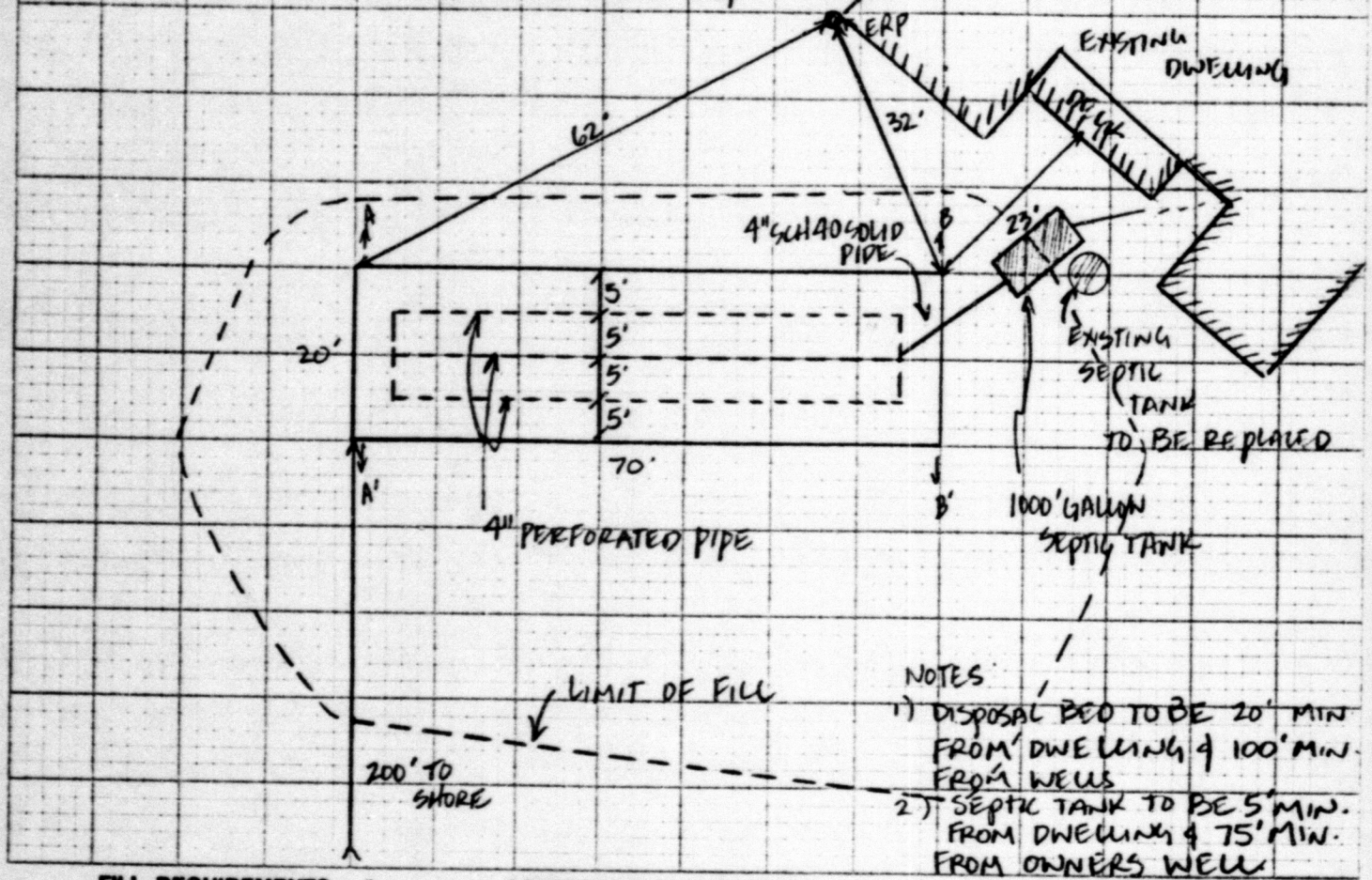
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SUBSURFACE WASTEWATER DISPOSAL PLAN

PROPOSED 20' x 70' DISPOSAL BED!

Scale 1" = 20' Ft.



NOTES
1) DISPOSAL BED TO BE 20' MIN FROM DWELLING & 100' MIN. FROM WELLS
2) SEPTIC TANK TO BE 5' MIN. FROM DWELLING & 75' MIN. FROM OWNERS WELL

FILL REQUIREMENTS

Depth of Fill (Upslope)	A/B	26-30"
Depth of Fill (Downslope)	A'/B'	47-54"

CONSTRUCTION ELEVATIONS

Reference Elevation is	0"
Bottom of Disposal Area	-52"
Top of Distribution Lines or Chambers	-41"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

ERP NAIL W/ FLAGGING 8" UP CORNER BOARD 9"-10" ABOV GROUN

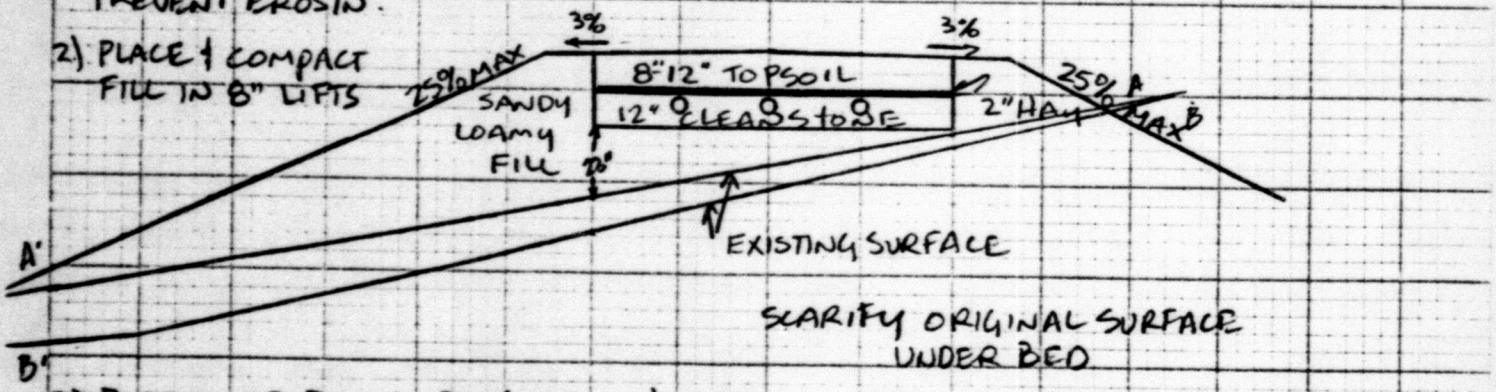
NOTES:

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

2) PLACE & COMPACT FILL IN 8" LIFTS

DISPOSAL AREA CROSS SECTION

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



SCARIFY ORIGINAL SURFACE UNDER BED

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

BOTTOM OF BED TO BE INSTALLED @ -52" BELOW E.R.P

Joseph Brooks
Site Evaluator Signature

227
SE#

5-28-92
Date

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