

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> Caution: Permit Required -- Attach In Space Below <<	
City, Town, or Plantation	ELLSWORTH	ELLSWORTH 3590 TOWN COPY Date Permit Issued: <u>9/26/01</u> Local Plumbing Inspector Signature \$ <u>1110</u> FEE ☐ Double Fee Charged L.P.I. # <u>18155</u>	
Street or Road	SEANEYS WOODLOT		
Subdivision, Lot #	ALTONS AVENUE		
OWNER/APPLICANT INFORMATION		Municipal Tax Map # <u>5</u> Lot # <u>53</u> LIFE TANK 15' DIA 15'	
Name (last, first, MI)	☐ Owner ☐ Applicant		
Mailing Address of	RAY BUILDERS		
☒ Owner ☐ Applicant	PO BOX ELLSWORTH, MAINE 04605		
Daytime Tel. #	207-667-5770		
Owner or Applicant Statement I state 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 <u>9/26/01</u>		Caution: Inspection Required I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. Local Plumbing Inspector Signature Date Approved <u>10/9/01</u>	
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 Approval	
SIZE OF PROPERTY <u>1</u> ± ☐ sq. ft. ☒ acres SHORELAND ZONING ☐ Yes ☒ No		DISPOSAL SYSTEM TO SERVE 1. ☒ Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. ☐ Multiple Family Dwelling, No. of Units: _____ 3. ☐ Other: _____ SPECIFY _____	
		DISPOSAL SYSTEM COMPONENT(S) 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: _____ TO BE 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 <u>1000</u> gallons		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 <u>1152</u> ☒ sq. ft. ☐ lin. ft.	
SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>8 / D / 3</u> at Observation Hole # <u>1</u> Depth <u>12</u> " Elevation <u>-78</u> " OF MOST LIMITING SOIL FACTOR		DESIGN FLOW <u>270</u> gallons per day BASED ON: 1. ☒ Table 901.1 (dwelling unit(s)) 2. ☐ Table 901.2 (other facilities) SHOW CALCULATIONS -- for other facilities -- 3. ☐ Section 903.0 (meter readings) ATTACH WATER-METER DATA	
		GARBAGE DISPOSAL UNIT 1. ☒ No 2. ☐ Maybe 3. ☐ Yes >> Specify one below: a. ☐ Multi-compartment Tank b. ☐ Tanks in Series c. ☐ Increase in Tank Capacity d. ☐ Filter on Tank Outlet	
		PUMPING 1. ☐ Not Required 2. ☒ May Be Required 3. ☐ Required >> Specify only for engineered or experimental systems: DOSE: _____ gallons	

I Certify that on 9-8-01 (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
William A. LaBelle Jr.
Site Evaluator Name Printed

319
SE #
207-537-5900
Telephone #

9-11-01
Date

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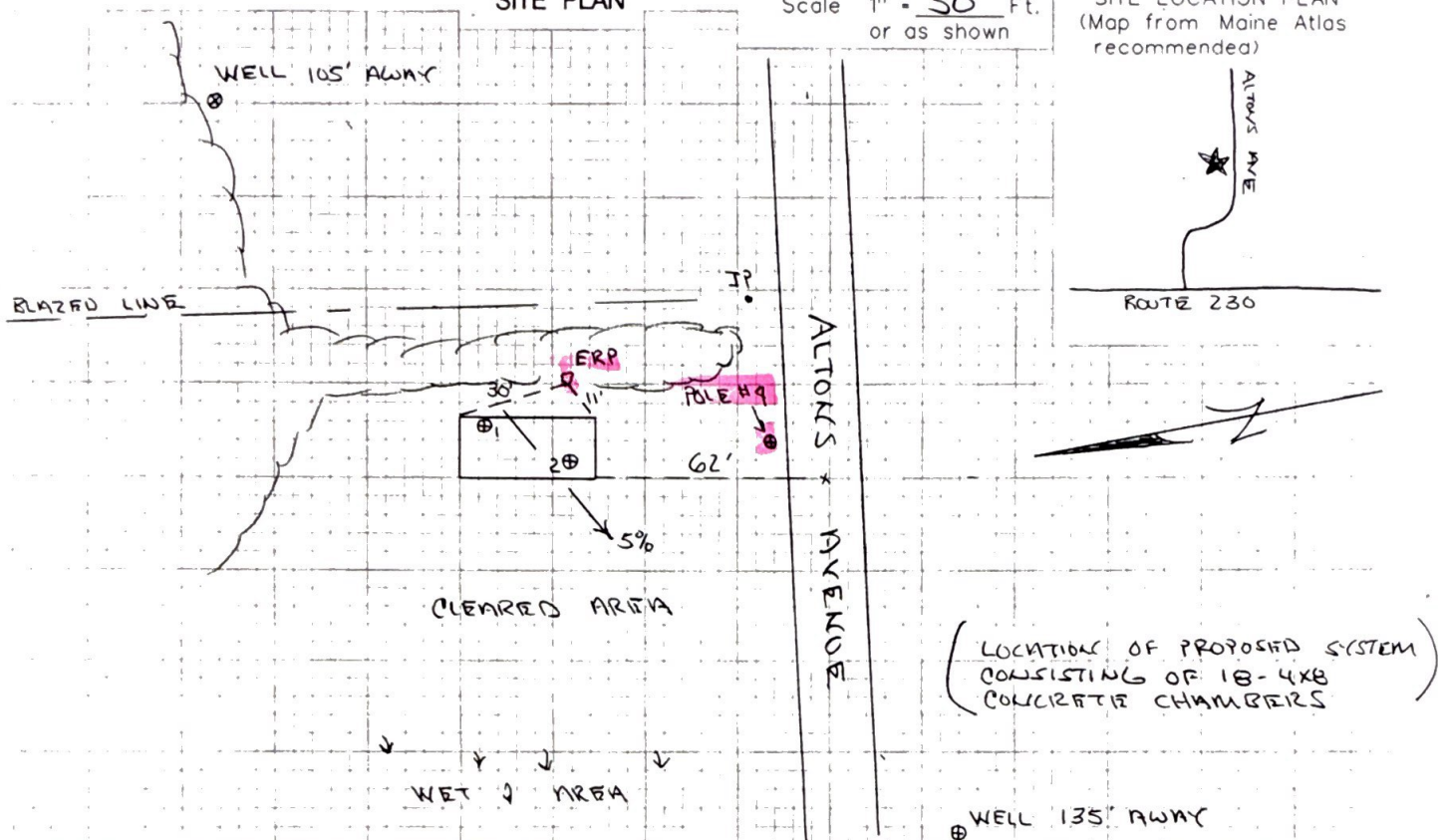
Town, City, Plantation
ELLSWORTH

Street, Road Subdivision
ALTONS AVENUE
SITE PLAN

Owner's Name
RAY BUILDERS

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
1" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0 MUXKY LOAM	FRIBLE	BLACK	
GRAVELLY		BRIGHT BROWN	
10 COBBLY			
SILT LOAM		PALE BROWN	FEW
20	FIRM		DISTINCT
30			
40			
50			

Soil Classification **8** **D** **5** %
Profile Condition Slope
Limiting Factor **12"**
☒ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

Observation Hole **#2** ☒ Test Pit ☐ Boring
1" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0 GRAVELLY	FRIBLE	DARK BROWN	
10 SILT LOAM		PALE YELLOW BROWN	COMMON
20 SILT	FIRM	PALE BROWN	DISTINCT
30			
40			
50			

Soil Classification **8** **D** **5** %
Profile Condition Slope
Limiting Factor **12"**
☒ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

Willie A. DeB...
Site Evaluator Signature

319
SE

9-11-01
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Street, Road, Subdivision

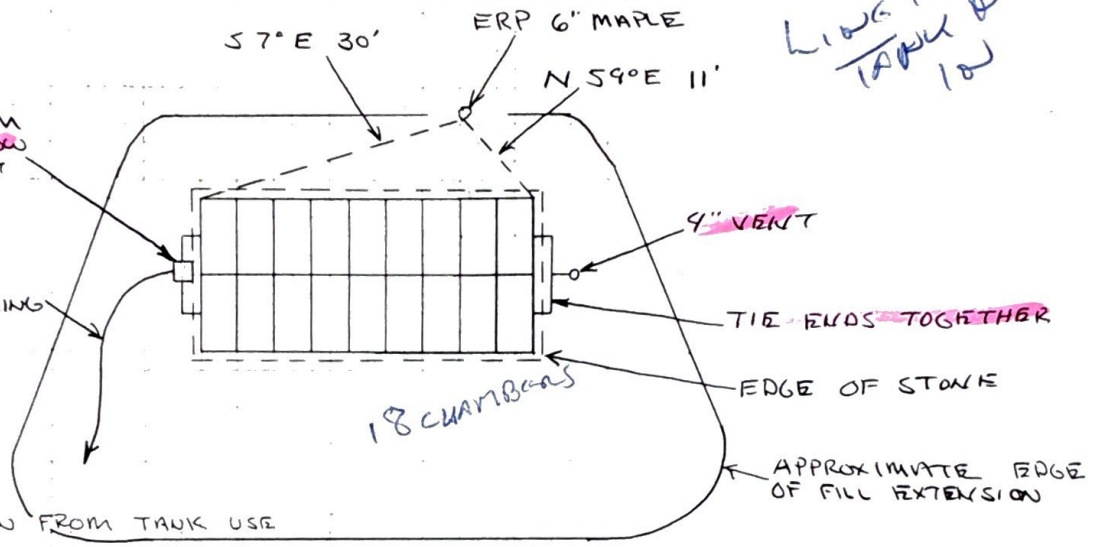
ALTUS AVENUE

Owner's Name

RAY BUILDERS

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT



PROPOSED SYSTEM CONSISTING OF 4x8 CHAMBERS PLACED IN A CLUSTER. FOUR CORNERS ARE STAKED OUT.

FILL REQUIREMENTS

Depth of Fill (Upslope)	30"
Depth of Fill (Downslope)	44"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation	-36"
Top of Distribution Pipe or Proprietary Device	-47"
Bottom of Disposal Area	-60"

ELEVATION REFERENCE POINT

Location & Description	N 59° E 11'
From SE CORN OF CHAM	
Reference Elevation	6" MAPLE NAIL 0"
	55" ABOVE GROUND
SCALE	
VERTICAL:	1" = 5'
HORIZONTAL:	1" = 10'

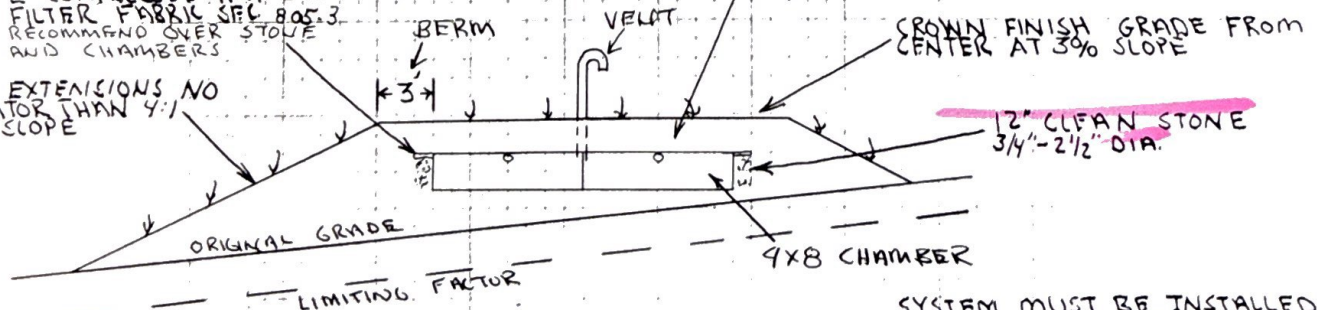
TOP 4" OF FILL TO BE A GOOD LOAM SOIL MIX TO ESTABLISH A GOOD VEGETATIVE COVER SEED AND MULCH TO PREVENT EROSION

DISPOSAL AREA CROSS SECTION

FILL MATERIAL SHALL BE 8"-12" THICK OVER CHAMBERS AND SHALL BE GRAVELY COURSE SAND TO THE STANDARDS IN SEC. 804.0 IN THE SUBSURFACE RULES.

2" COMPRESSED HAY OR FILTER FABRIC SFC 805.3 RECOMMEND OVER STONE AND CHAMBERS

FILL EXTENSIONS NO GREATER THAN 4:1 25% SLOPE



REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER ENTIRE FILL AREA

BOTTOM OF CHAMBERS MUST BE LEVEL W/ MAX GRADE TOLERANCE OF 2" PER 100'

SYSTEM MUST BE INSTALLED ACCORDING TO THE RULES AND PRACTICES SET FORTH IN THE SUBSURFACE WASTEWATER RULES IN EFFECT AT THIS TIME

Willie A. DeBeauvoir
Site Evaluator Signature

319

SE

9-11-01

Date