

Back of house

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS	
Town Or Plantation	HANCOCK
Street	RT. 1
Subdivision Lot #	
PROPERTY OWNERS NAME	
Last: BOWDEN	First: ALICE
Applicant Name:	(SAME)
Mailing Address of Owner/Applicant (If Different)	R.F.D. #2, BOX 458 ELLSWORTH, ME. 04605

HANCOCK	PERMIT #	226	TOWN COPY
Date Permit Issued: 11/17/86	\$	114.00	FEE
John Hallmark Local Plumbing Inspector Signature	L.P.I. #	15612	Double Fee Charged

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.

Alice Bowden
Signature of Owner/Applicant

11-17-86
Date

Caution: Inspection Required

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

John Hallmark
Local Plumbing Inspector Signature

11/18/86
Date Approved

PERMIT INFORMATION		
THIS APPLICATION IS FOR: 1. ☐ NEW SYSTEM 2. ☒ REPLACEMENT SYSTEM 3. ☐ EXPANDED SYSTEM 4. ☐ SEASONAL CONVERSION 5. ☐ EXPERIMENTAL SYSTEM	THIS APPLICATION REQUIRES: 1. ☒ NO RULE VARIANCE REQUIRED 2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form 3. ☐ Requiring Local Plumbing Inspector Approval 4. ☐ Requires State and Local Plumbing Inspector Approval	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 6. ☐ ALTERNATIVE TOILET (ONLY) 7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY) 8. ☐ ENGINEERED DISPOSAL AREA (ONLY) 9. ☐ SEPARATED LAUNDRY SYSTEM
IF REPLACEMENT SYSTEM: YEAR FAILING SYSTEM INSTALLED <u>PRE 1950</u> THE FAILING SYSTEM IS: 1. ☐ BED 3. ☐ TRENCH 2. ☐ CHAMBER 4. ☐ OTHER: _____	DISPOSAL SYSTEM TO SERVE: 1. ☒ SINGLE FAMILY DWELLING 2. ☐ MODULAR OR MOBILE HOME 3. ☐ MULTIPLE FAMILY DWELLING 4. ☐ OTHER _____ SPECIFY _____	TYPE OF WATER SUPPLY DRILLED WELL
SIZE OF PROPERTY 5 ACRES	ZONING _____	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK 1. ☒ SEPTIC: ☒ Regular ☐ Low Profile 2. ☐ AEROBIC SIZE: <u>1000</u> 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 (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION) 3. ☐ REQUIRED DOSE: _____ GALS.	CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING EMPLOYEES, WATER RECORDS, ETC.) <u>3 BEDROOM, SINGLE FAMILY DWELLING</u> MINIMUM
SOIL CONDITIONS USED FOR DESIGN PURPOSES PROFILE <u>3</u> CONDITION <u>C</u> DEPTH TO LIMITING FACTOR: <u>15</u>	SIZE RATINGS USED FOR DESIGN PURPOSES 1. ☐ SMALL 2. ☐ MEDIUM 3. ☒ MEDIUM-LARGE 4. ☐ LARGE 5. ☐ EXTRA LARGE	DISPOSAL AREA TYPE/SIZE 1. ☒ BED <u>900</u> Sq. Ft. 2. ☐ CHAMBER _____ Sq. Ft. ☐ REGULAR ☐ H-20 3. ☐ TRENCH _____ Linear Ft. 4. ☐ OTHER: _____	DESIGN FLOW: <u>270 GPD</u> (GALLONS/DAY)

SITE EVALUATOR STATEMENT

☐ SITE EVALUATION WAIVED BY LOCAL OPTION

On NOVEMBER 8, 1986 (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.

Teresa L. Draine

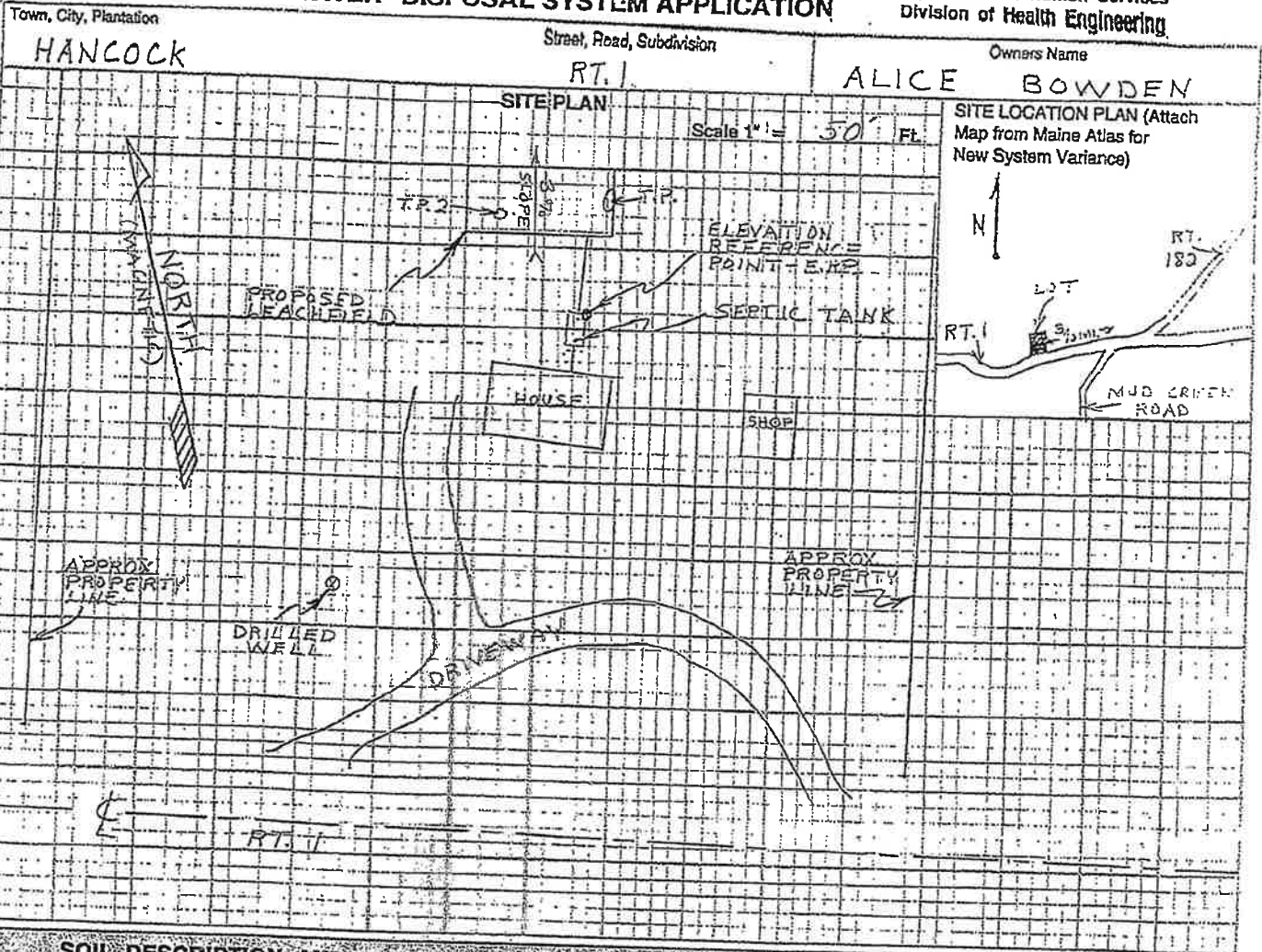
#203
SE#

11-9-86
Date

on back of house

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole T.P. 1 ☒ Test Pit ☐ Boring

1" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM	ERIALBLE	DARK BROWN	
		YELLOWISH BROWN	
	FIRM	OLIVE	COMMON MEDIUM
			GRAY AND REDDISH BROWN

Soil Profile 3 Classification C Slope 3% Limiting Factor 15

☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole T.P. 2 ☒ Test Pit ☐ Boring

1" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM	ERIALBLE	DARK BROWN	
LOAMY SAND			
SANDY LOAM		DARK REDDISH-BROWN	
	FIRM	REDDISH-BROWN	COMMON MEDIUM
		OLIVE-GRAY	FAINT, LIGHT GRAY

Soil Profile 3 Classification C Slope 3% Limiting Factor 20

☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Teresa L. Downing

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

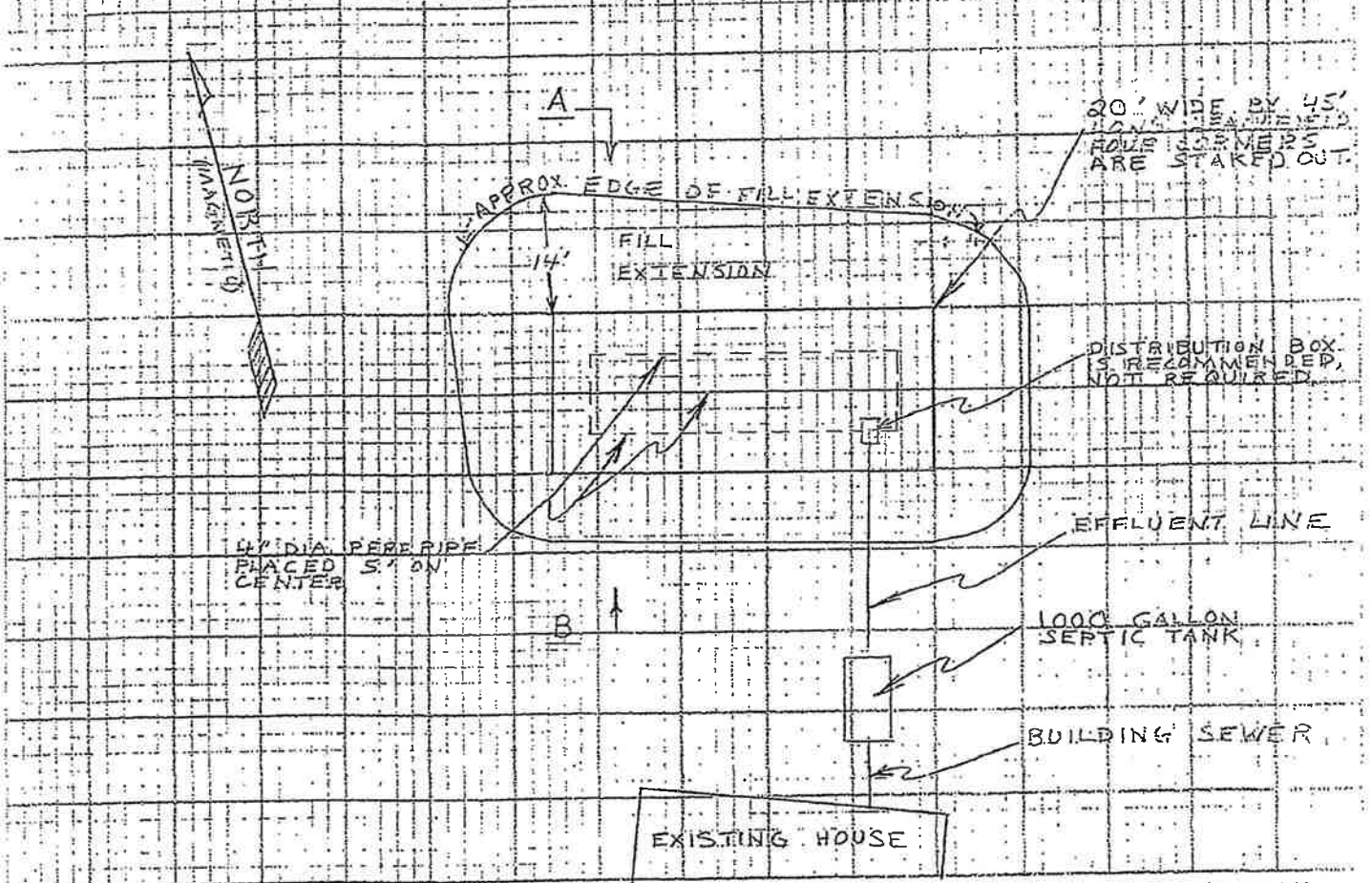
City, Plantation
HANCOCK

Street, Road, Subdivision
RT. 1

Owners Name
ALICE BOWDEN

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) 22"
Depth of Fill (Downslope) 24-29"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0"
Bottom of Disposal Area -36"
Top of Distribution Lines or Chambers -25"

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

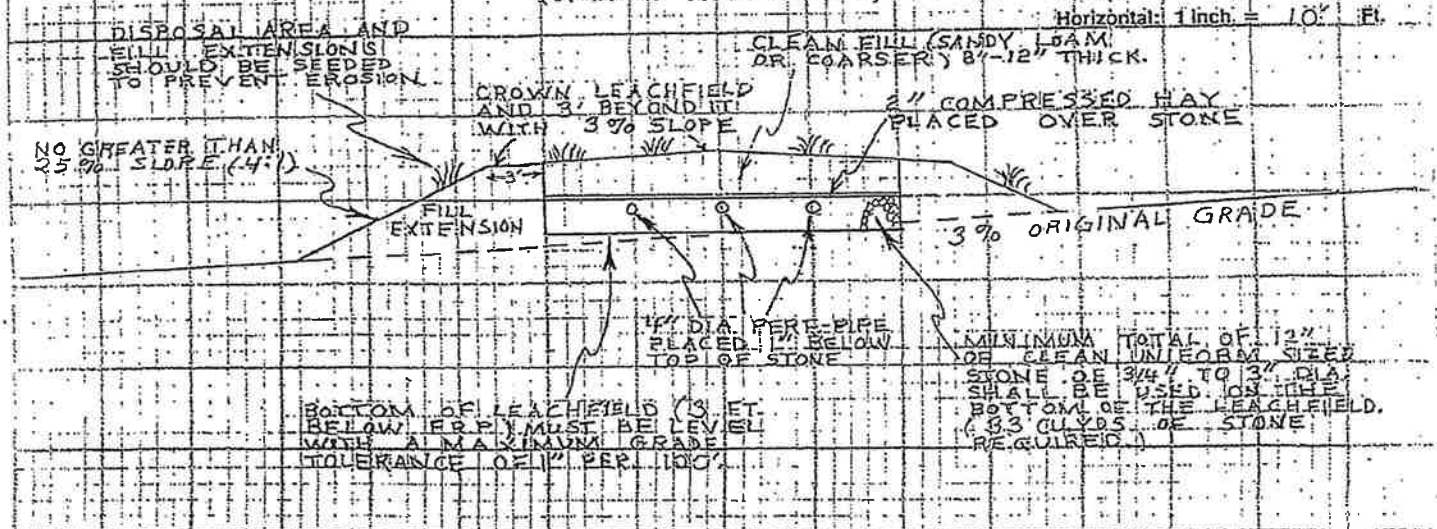
E.R.P. IS TOP OF CEMENT SEPTIC TANK.

DISPOSAL AREA CROSS SECTION (ACROSS A-B ABOVE)

Scale:

Vertical: 1 inch = 5' Ft.

Horizontal: 1 inch = 10' Ft.



Site Evaluator Signature

#203
SE#

11-9-86
Date