

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	HALCOCK	HALCOCK	PERMIT # 1001 APPLICATIONS COPY
Street or Road	TIDAL FALLS ROAD	Date Permit Issued:	7.9.02 \$ 100.00 ☐ Double Fee Charged
Subdivision, Lot #		Local Plumbing Inspector Signature	L.P.I. # 13914
OWNER/APPLICANT INFORMATION		THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER TWO YEARS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.	
Name (last, first, MI)	CARTER, DONALD		
Address	PO Box 211		
City, State, Zip	HALCOCK, MAINE 04640		
Daytime Tel. #	207-422-6246	Municipal Tax Map #	22 Lot # 27
Owner or Applicant Statement		Caution: Inspection Required	
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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant: <u>Donald E. Carter</u> Date: <u>7/9/02</u>		Local Plumbing Inspector Signature: <u>[Signature]</u> Date Approved: <u>7/23/02</u>	

TYPE OF APPLICATION		THIS APPLICATION REQUIRES		DISPOSAL SYSTEM COMPONENT(S)	
1. ☒ First Time System	2. ☐ Replacement System	1. ☒ No Rule Variance	2. ☐ First Time System Variance	1. ☒ Con., etc Non-engineered System	2. ☐ Primitive System (graywater & alt toilet)
Type Replaced: _____	Year Installed: _____	a. ☐ Local Plumbing Inspector Approval	b. ☐ State & Local Plumbing Inspector Approval	3. ☐ Alternative Toilet, specify: _____	4. ☐ Non-Engineered Treatment Tank (only)
3. ☐ Expanded System	a. ☐ Minor expansion	3. Replacement System Variance	a. ☐ Local Plumbing Inspector Approval	5. ☐ Holding Tank, _____ gallons	6. ☐ Non-engineered Disposal Field (only)
b. ☐ Major expansion	4. ☐ Experimental System	b. ☐ State & Local Plumbing Inspector Approval	4. ☐ Minimum Lot Size Variance	7. ☐ Separated Laundry System	8. ☐ Complete Engineered System (2000 gpd or more)
5. ☐ Seasonal Conversion	5. ☐ Seasonal Conversion Approval	5. ☐ Seasonal Conversion Approval	5. ☐ Seasonal Conversion Approval	9. ☐ Engineered Treatment Tank (only)	10. ☐ Engineered Disposal Field (only)
SIZE OF PROPERTY		DISPOSAL SYSTEM TO SERVE		TO BE TYPE OF WATER SUPPLY	
3 ☐ sq. ft.	☒ acres	1. ☒ Single Family Dwelling Unit, No. of Bedrooms: <u>2</u>	2. ☐ Multiple Family Dwelling, No. of Units: _____	1. ☒ Drilled Well	2. ☐ Dug Well
SHORELAND ZONING		3. ☐ Other: _____		3. ☐ Priv	4. ☐ Public
☐ Yes ☒ No		SPECIFY _____		5. ☐ Other: _____	

TREATMENT TANK		DISPOSAL FIELD TYPE & SIZE		GARBAGE DISPOSAL UNIT		DESIGN FLOW	
1. ☒ Concrete	a. ☒ Regular	1. ☒ Stone Bed	2. ☐ Stone Trench	1. ☒ No	2. ☐ Maybe	180 gallons per day	
2. ☐ Plastic	b. ☐ Low Profile	3. ☐ Proprietary Device	a. ☐ Cluster array	2. ☐ Yes >> Specify one below:		BASED ON:	
3. ☐ Other: _____		c. ☐ Linear	b. ☐ Regular load	a. ☐ Multi-compartment Tank		1. ☒ Table 901.1 (dwelling unit)	
CAPACITY <u>1000</u> gallons		d. ☐ H-20 load	4. ☐ Other: _____	b. ☐ Tanks in Series		2. ☐ Table 901.2 (other facilities)	
		SIZE <u>600</u> ☒ sq. ft. ☐ lin. ft.		c. ☐ Increase in Tank Capacity		SHOW CALCULATIONS -- for other facilities --	
SOIL DATA & DESIGN CLASS		DISPOSAL FIELD SIZING		PUMPING			
PROFILE CONDITION	DESIGN	1. ☐ Small -- 2.0 sq. ft./gpd	2. ☐ Medium -- 2.6 sq. ft./gpd	1. ☒ Not Required			
<u>E, C, I</u>	at Observation Hole # <u>1</u>	3. ☒ Medium-Large -- 3.3 sq. ft./gpd	4. ☐ Large -- 4.1 sq. ft./gpd	2. ☐ May Be Required			
Depth <u>24"</u> Elevation <u>-80"</u>	OF MOST LIMITING SOIL FACTOR	5. ☐ Extra Large -- 5.0 sq. ft./gpd		3. ☐ Required >> Specify only for engineered or experimental systems:			
				DOSE: _____ gallons			

SITE EVALUATOR STATEMENT		
I Certify that on <u>5-28-02</u> (date) I completed a site evaluation on this property and state that the data reported are accurate that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).		
Signature	SE #	Date
<u>William A. LaBelle Jr</u>	<u>319</u>	<u>6-2-02</u>
Site Evaluator Name Printed	Telephone #	
<u>William A. LaBelle Jr</u>	<u>207-537-5900</u>	

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

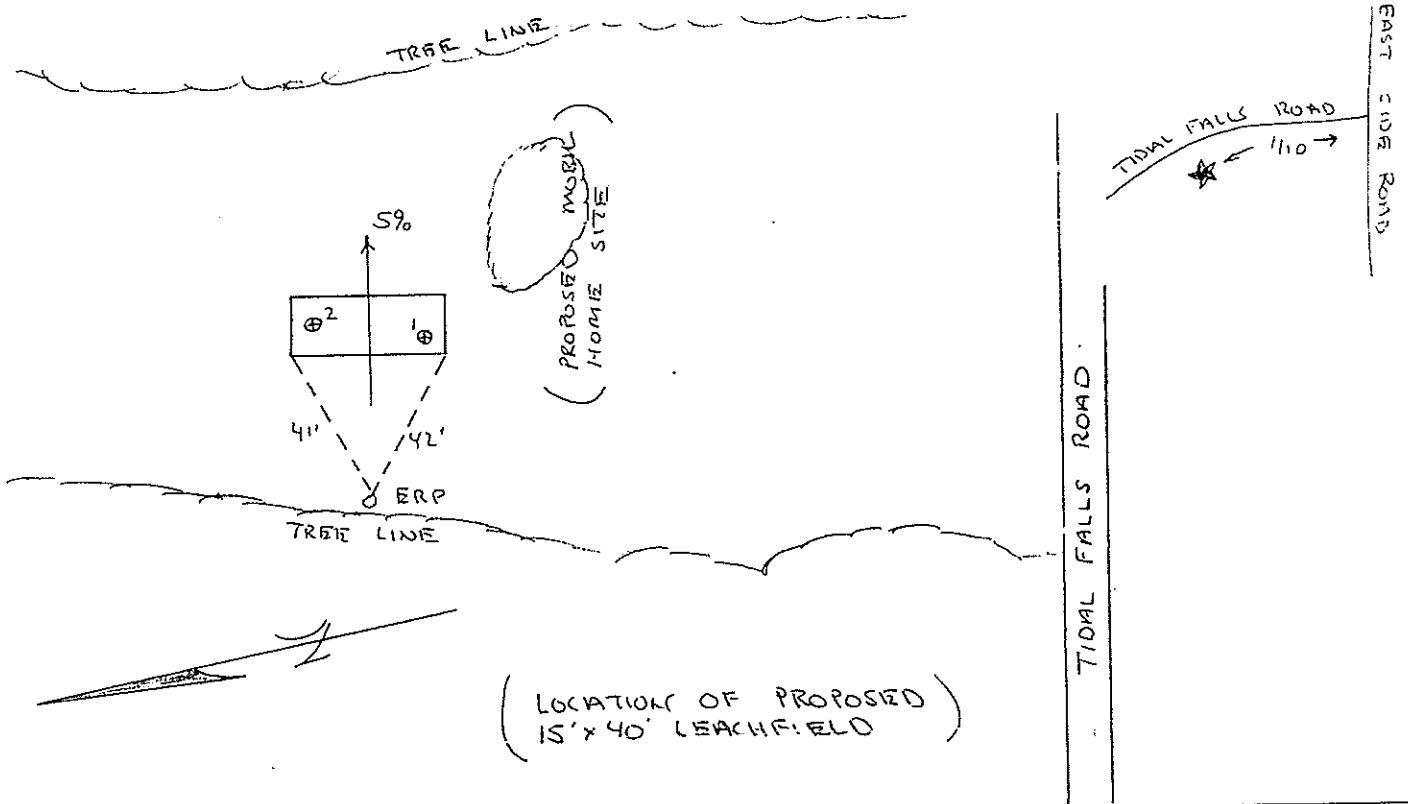
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation
HAUCCOCK

Street, Road Subdivision
TIDAL FALLS ROAD
SITE PLAN

Owner's Name
CARTER, DONALD
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
" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
Sandy loam	Frable	Dark Brown	
Loamy Fine Sand		Pale Brown	N/E
	FIRM		

Soil Classification 2 Slope 5 % Limiting Factor 24 " ☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

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

Texture	Consistency	Color	Mottling
Sandy loam	Frable	Dark Brown	
Fine loamy sand		Light yellow	
		Pale Brown	N/E
	FIRM		

Soil Classification 2 Slope 5 % Limiting Factor 26 " ☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

William A. Bay
Site Evaluator Signature

319
SE *

6-2-02
Date

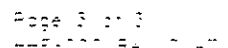
Page 2 of 3
HHE-200 Rev. 7-97

Department of Human Services
Division of Health Engineering
(207) 287-5572 FAX (207) 287-4172

Owner's Name

CARTER, DONALD

SCALE 1" = 20 FT



John S. Gilbert, Inc.

— Well Drilling —

8 Fletcher St.
Ellsworth, Maine 04605
667-8337

06-26-02

Well on Tidal Falls Road is producing
2½ gallons per minute.

250 feet deep at 9.00 per foot = 2250.00
50 feet of casing at 8.00 per foot = 400.00
1 drive shoe at 35.00

TOTAL DUE = \$2,685.00

Thank you,


John

pd
7/12/02
CK # 128