

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services

MILBRIDGE PERMIT # 390 APPLICANTS COPY

PROPERTY LOCATION

Town or Plantation: Milbridge

Street Subdivision Lot: Wyman Road

PROPERTY OWNER'S NAME

Last: Black First: Hugh

Applicant's Name: _____

Mailing Address of Owner: 39 Iowana Ave
Trenton, N.J. 08630

Daytime Tel.: (609) 883-2658

Date Permit Issued: 12/2/98 11/10/01 Double Fee Charged

Charles S. [Signature]
Local Plumbing Inspector Signature

L.P.I. # 111918

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.

Owner 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]
Signature of Owner/Applicant

12-2-98
Date

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: _____

PERMIT INFORMATION

<p>TYPE OF APPLICATION:</p> <p>1. <input checked="" type="checkbox"/> First Time System</p> <p>2. <input type="checkbox"/> Replacement System Type Replaced _____ Year Installed _____</p> <p>3. <input type="checkbox"/> Expanded System <input type="checkbox"/> a. one time exempted <input type="checkbox"/> b. non exempted</p> <p>4. <input type="checkbox"/> Experimental System</p> <p>5. <input type="checkbox"/> Seasonal Conversion</p>	<p>THIS APPLICATION REQUIRES:</p> <p>1. <input checked="" type="checkbox"/> No Rule Variance</p> <p>2. <input type="checkbox"/> First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector approval <input type="checkbox"/> b. State & Local Plumbing Inspector approval</p> <p>3. <input type="checkbox"/> Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector approval <input type="checkbox"/> b. State & Local Plumbing Inspector approval</p> <p>4. <input type="checkbox"/> Minimum Lot Size Variance</p> <p>5. <input type="checkbox"/> Seasonal Conversion Approval</p>	<p>DISPOSAL SYSTEM COMPONENT(S)</p> <p>1. <input checked="" type="checkbox"/> Non-Engineered System</p> <p>2. <input type="checkbox"/> Primitive System (graywater & oil toilet)</p> <p>3. <input type="checkbox"/> Alternative Toilet _____</p> <p>4. <input type="checkbox"/> Non-Engineered Treatment Tank</p> <p>5. <input type="checkbox"/> Holding Tank _____ Gallons</p> <p>6. <input type="checkbox"/> Non-Engineered Disposal Area (only)</p> <p>7. <input type="checkbox"/> Separated Laundry System</p> <p>8. <input type="checkbox"/> Engineered System (>2000 gpd)</p> <p>9. <input type="checkbox"/> Engineered Treatment Tank (only)</p> <p>10. <input type="checkbox"/> Engineered Disposal Area (only)</p> <p>11. <input type="checkbox"/> Pretreatment</p>
<p>SIZE OF PROPERTY</p> <p><u>5.9 Acres</u></p>	<p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input checked="" type="checkbox"/> Single Family Dwelling Unit</p> <p>2. <input type="checkbox"/> Multiple Family Dwelling: Number of Units _____</p> <p>3. <input type="checkbox"/> Other _____</p>	<p>TYPE OF WATER SUPPLY</p> <p><u>Drilled well proposed</u></p>

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input checked="" type="checkbox"/> Concrete <input checked="" type="checkbox"/> a. Regular <input checked="" type="checkbox"/> b. Low Profile</p> <p>2. <input type="checkbox"/> Plastic</p> <p>3. <input type="checkbox"/> Other _____</p> <p>SIZE: <u>1000</u> Gallons</p>	<p>DISPOSAL AREA TYPE / SIZE</p> <p>1. <input checked="" type="checkbox"/> Bed <u>600</u> Sq. Ft.</p> <p>2. <input type="checkbox"/> Proprietary Device _____ Sq. Ft. <input type="checkbox"/> Cluster <input type="checkbox"/> Linear <input type="checkbox"/> Regular <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> Trench</p> <p>4. <input type="checkbox"/> Other _____</p>	<p>GARBAGE DISPOSAL UNIT</p> <p>1. <input checked="" type="checkbox"/> No</p> <p>2. <input type="checkbox"/> Yes <input type="checkbox"/> Multi-compartment tank <input type="checkbox"/> Tank in series <input type="checkbox"/> Increase in tank capacity <input type="checkbox"/> Filter on tank outlet</p>	<p>CRITERIA USED FOR DESIGN FLOW (Show Calculations)</p> <p><u>2 Bedroom</u></p>
<p>PROFILE & DESIGN CLASS</p> <p>PROFILE: <u>2</u> DESIGN: <u>A/C</u></p> <p>DEPTH TO MOST LIMITING FACTOR: <u>24"</u></p>	<p>DISPOSAL AREA SIZING</p> <p>1. <input type="checkbox"/> Small - 2.00</p> <p>2. <input type="checkbox"/> Medium - 2.60</p> <p>3. <input checked="" type="checkbox"/> Medium-Large - 3.30</p> <p>4. <input type="checkbox"/> Large - 4.10</p> <p>5. <input type="checkbox"/> Extra-Large - 5.20</p>	<p>PUMPING</p> <p>1. <input type="checkbox"/> Not required</p> <p>2. <input checked="" type="checkbox"/> May be required</p> <p>3. <input type="checkbox"/> Required</p> <p>DOSE: <u>+30</u> Gallons</p>	<p>DESIGN FLOW: <u>180</u> (Gallons/Day)</p>

SITE EVALUATOR'S STATEMENT

On 11/6/98 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules.

[Signature]
Site Evaluator Signature

Robert Costa
Site Evaluator Name Printed

#280
SE
(207) 726-3914
Telephone

11/11/98
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

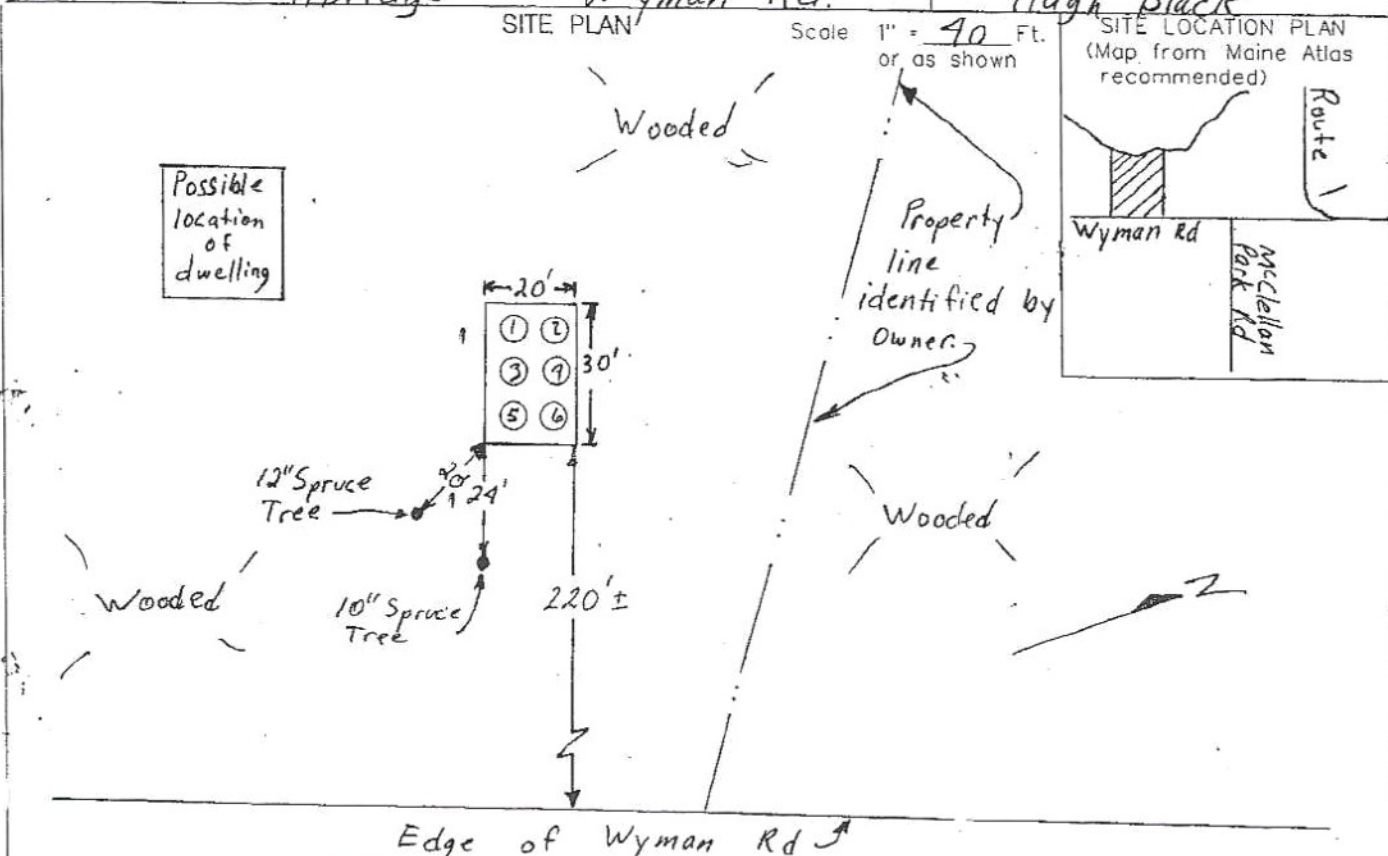
Town, City, Plantation Milbridge Street, Road Subdivision Wyman Rd.

Owner's Name Hugh Black

SITE PLAN

Scale 1" = 40 Ft.
or as shown

SITE LOCATION PLAN
(Map from Maine Atlas recommended)



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

Observation Hole 1-6 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	Sandy loam	Friable	Brown	
10			Red brown	
24"				24"
30				
40				
50				

Soil Classification 2 A/C Slope 0 %
Limiting Factor 24" Ground Water
 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 _____ " Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Rudolf Cox
Site Evaluator Signature

SE •

Date

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

Town, City, Plantation

Milbridge

Street, Road, Subdivision

Wyman Rd

Owner's Name

Hugh Black

Possible location of dwelling

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20' FT.

4" Solid PVC Pipe
 (Sch. 40 (ASTM-D2665))

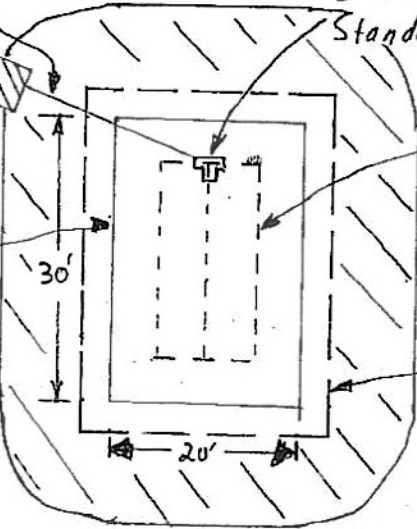
Sanitary Tee or
 Standard "D" box

1000 Gallon
 Septic Tank

4" Perf. pipe

Edge of
 Stone

Edge of
 3' berm



12" Spruce
 Tree

10" Spruce
 Tree

FILL REQUIREMENTS

CONSTRUCTION ELEVATIONS

ELEVATION REFERENCE POINT

Depth of Fill (Upslope)

24"

Finished Grade Elevation

- 17"

Depth of Fill (Downslope)

29"

Top of Distribution Pipe or Proprietary Device

- 30"

fill extension

12'

Bottom of Disposal Area

- 41"

Location & Description *Flagged nails*
 in 10" x 12" Spruce Trees

Reference Elevation 0"

DISPOSAL AREA CROSS SECTION

See Detail Pg 4.

SCALE:

VERTICAL:

1" =

HORIZONTAL:

1" =

Robert Lane

280

11/11/98

Site Evaluator Signature

SE

Date

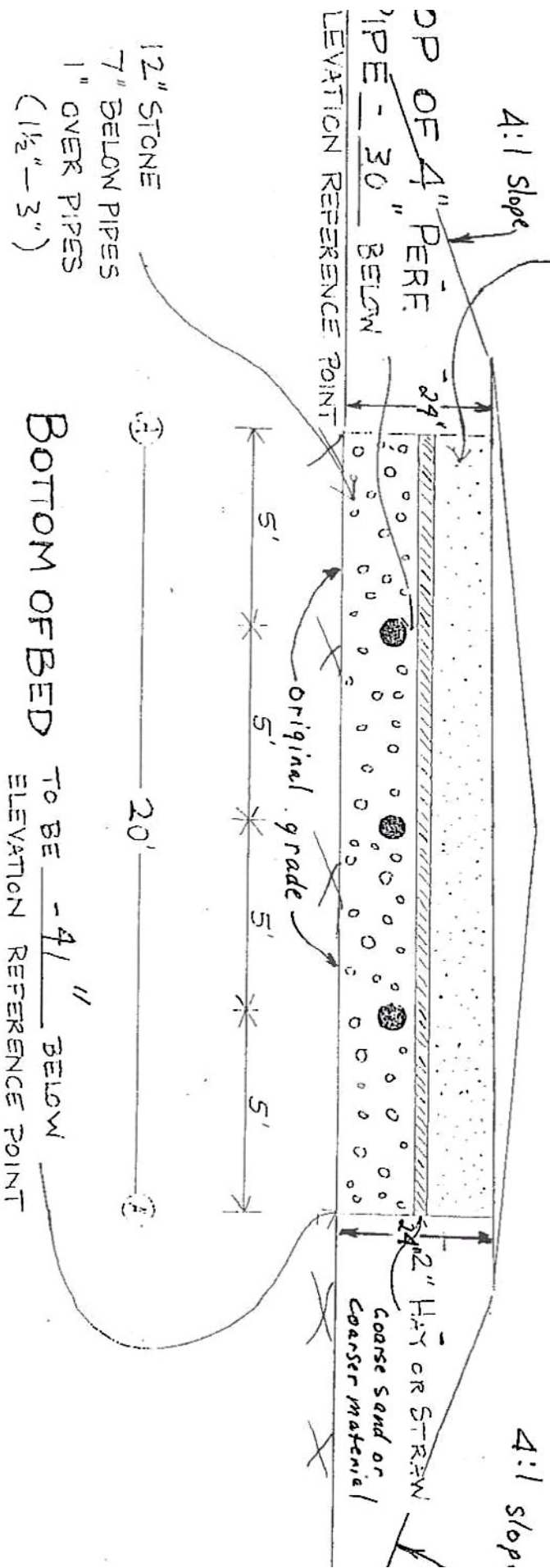
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HHE-200 Rev. 7/97

10"-12" CLEAN BACKFILL

CROWN AND SEED — USE VETCH, CLOVER, TREFOIL,
PERENNIAL WILDFLOWERS, OR OTHER HERBACEOUS PERENNIALS.

EXTEND FILL OUT FROM BED 3' AT 3%
THEN CARRY OUT TO ORIGINAL GRADE AT 4:1 SLOPE.



(See Reverse Side For
Construction Standards)

CROSS SECTION VERTICAL 1" = 1'
HORIZONTAL 1" = 1'

Hugh Black

Arbit Co

DATE: 11/11/98 PAGE 4

* **Note:** Do not work soil when wet or frozen.

1. Remove vegetation from ground surface under disposal area and fill extension.
2. Scarify or till surface under bed and extension areas to minimize glazing in original soil.
3. Use 12" of clean 1.5"-2.5" stone: free of fines, dust, ashes or clay.
4. The bottom of the disposal area and distribution line(s) shall be level with the maximum grade tolerance of 1" per 100'.
5. Fill shall be free of foreign material, placed in lifts and compacted and placed. Fill shall be sandy loam or coarser.
6. The finish grade of the backfill over the disposal area shall be crowned from the center of the disposal area at a 3% slope and extended 3' to 5' beyond the edge of the disposal area. At that point the fill shall be sloped at a uniform grade of no greater than 25% (4:1) to the original ground.
7. The perimeter of the disposal area and fill extension to be graded and diversion ditches installed to divert ground and surface waters.
8. The finished disposal area and fill extensions shall be seeded to prevent erosion. Grass, clover, trefoil, vetch, perennial wild flowers, or other herbaceous perennials may be utilized for disposal area surfaces. Woody shrubs are unacceptable. Woody shrubs in conjunction with hardy perennial ground cover may be used on fill extensions only.
9. Frost protection: pump and gravity lines installed in exposed areas with little or no snow cover shall be protected against freezing.

Plan of Bed Area

