

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	Ellsworth
Street	FIRE ROAD 103
Subdivision Lot #	
PROPERTY OWNERS NAME	
Last: MATHIS	First: RALPH
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	

ELLSWORTH

PERMIT # 1769

STATE COPY

Date Permit Issued: 5/2/91

\$ 160 FEE

Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 955

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.

Ralph H. Mathis Jr. 5/2/91
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:

- ☒ NEW SYSTEM
- ☐ REPLACEMENT SYSTEM
- ☐ EXPANDED SYSTEM
- ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION

to be completed by the LPI

- ☐ SYSTEM COMPLIES WITH RULES
- ☐ CONNECTED TO SANITARY SEWER
- ☐ SYSTEM INSTALLED - P#
- ☐ SYSTEM DESIGN RECORDED AND ATTACHED N/A

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED

THE FAILING SYSTEM IS:

- ☐ BED
- ☐ CHAMBER
- ☐ TRENCH
- ☐ OTHER: N/A

SIZE OF PROPERTY

212 X 282

ZONING

SHORE LAND

THIS APPLICATION REQUIRES:

- ☒ NO RULE VARIANCE
- ☐ NEW SYSTEM VARIANCE
Attach New System Variance Form
- ☐ REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
 - ☐ Requiring Local Plumbing Inspector Approval
 - ☐ Requires State and Local Plumbing Inspector Approval
- ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:

- ☒ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☐ OTHER

SPECIFY

INSTALLATION IS:

COMPLETE SYSTEM

- ☒ NON-ENGINEERED SYSTEM
 - ☐ PRIMITIVE SYSTEM
(Includes Alternative Toilet)
 - ☐ ENGINEERED (+ 2000 gpd)
- #### INDIVIDUALLY INSTALLED COMPONENTS:
- ☐ TREATMENT TANK (ONLY)
 - ☐ HOLDING TANK GAL
 - ☐ ALTERNATIVE TOILET (ONLY)
 - ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
 - ☐ ENGINEERED DISPOSAL AREA (ONLY)
 - ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY

Proposed Drilled Well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☒ SEPTIC Regular
 - ☐ Low Profile
- ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- ☒ NONE
- ☐ LOW VOLUME TOILET
- ☐ SEPARATED LAUNDRY SYSTEM
- ☐ ALTERNATIVE TOILET

SPECIFY:

PUMPING

- ☐ NOT REQUIRED
- ☐ MAY BE REQUIRED
(DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
- ☒ REQUIRED
DOSE: Check manufacturer's Req.

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

3 Bed Room
Home.
Minimum

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE 3
CONDITION CAT III

DEPTH TO LIMITING FACTOR

20"

SIZE RATINGS USED FOR DESIGN PURPOSES

- ☐ SMALL
- ☐ MEDIUM
- ☒ MEDIUM-LARGE
- ☐ LARGE
- ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- ☐ BED Sq. Ft.
- ☒ CHAMBER 459 Sq. Ft.
 - ☐ REGULAR
 - ☐ H-20
- ☐ TRENCH Linear Ft.
- ☐ OTHER

DESIGN FLOW: 270 GPD

(GALLONS/DAY)

SITE EVALUATOR STATEMENT

On April 20, 1991 (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.

John Holdsworth
Site Evaluator Signature

281

SE#

5/9/91

Date

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

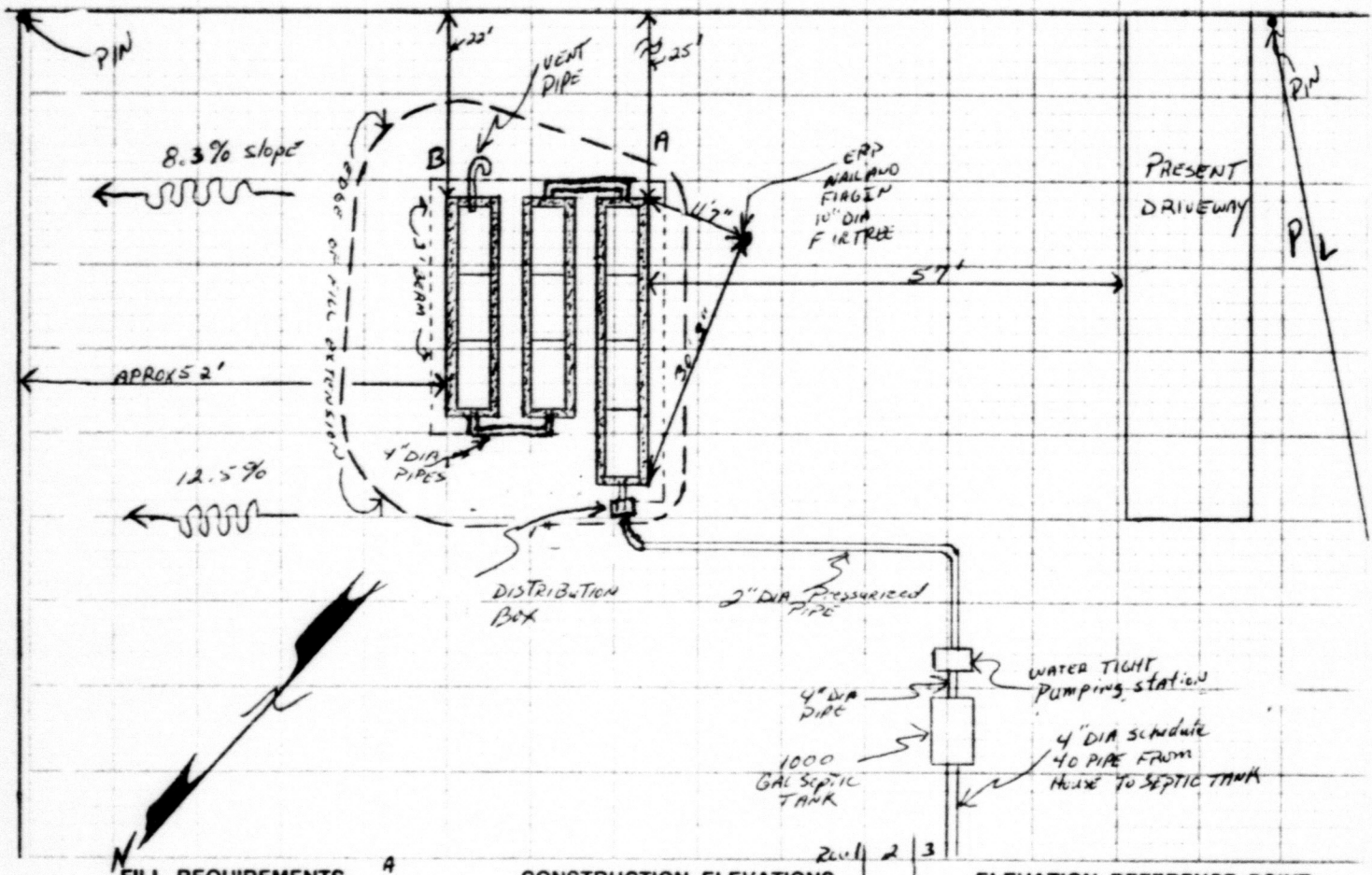
Ellsworth

FIRE ROAD ~~103~~ 103

RALPH MATHIS

SUBSURFACE WASTEWATER DISPOSAL PLAN FIRE ROAD ~~103~~ 103

Scale 1" = 20' Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope)
Depth of Fill (Downslope)

	A
11"	Reference Elevation is
17"	Bottom of Disposal Area
B	Top of Distribution Lines or Chambers

CONSTRUCTION ELEVATIONS

2001	2	3
-0	-0	-0
-45 1/2	57 1/2	70
-32 1/2	48 1/2	57

ELEVATION REFERENCE POINT

LOCATION & DESCRIPTION
CRP - NAIL AND FIRE IN
10" DIA FIRE TREE AT
1' 6 1/2"

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = Ft.
Horizontal: 1 inch = Ft.

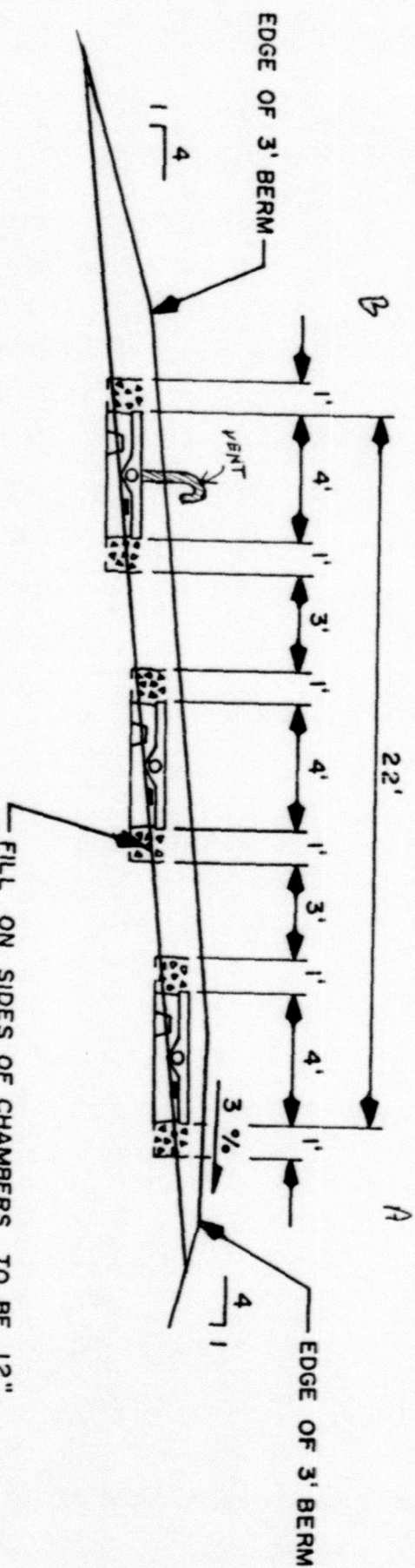
" PLEASE SEE "
ATTACHED
COPY

John H. Ellsworth
Site Evaluator Signature

251
SE#

5/9/94
Date

CHAMBER CROSS SECTION 8 - 9 %



FILL ON SIDES OF CHAMBERS TO BE 12" OF CRUSHED STONE.

FILL AROUND CHAMBERS TO BE SANDY LOAM TEXTURE.

FILL UNDER CHAMBERS TO BE SANDY LOAM TEXTURE.

Notes:

1. Remove vegetation and scarify original soil under chambers and fill extension areas.
2. Bottom of chambers to be level with a maximum grade tolerance of 1" per 100'.
3. Provide for surface drainage away from chamber area
4. Finished grade shall be seeded and mulched to prevent erosion.
5. A minimum of 6" of clean fill over the chambers is required.

OWNER RALPH Mathis		NO. OF CHAMBERS 10		PERCENT SLOPE 8.3%	
LOCATION FIRE ROAD 103		ELEVATIONS			
DATE 5/9/91		SCALE 1" = 5'		REF. POINT -0-	
SITE EVALUATOR <i>[Signature]</i>		BOTTOM TRENCH (1) -45 1/2		BOTTOM TRENCH (2) -57 3/4	
		BOTTOM TRENCH (3) -70"			