

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	SWANS ISLAND	Town/City _____	Permit # _____
Street or Road	STANLEY POINT ROAD	Date Permit Issued ___/___/___	Fee \$ _____ Double Fee Charged ()
Subdivision, Lot #		L.P.I. # _____	
OWNER/APPLICANT INFORMATION		Local Plumbing Inspector Signature _____	
Name (last, first, MI)	VAN HORNE, ERIC	<input type="checkbox"/> Owner <input type="checkbox"/> Town <input type="checkbox"/> State <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	
Mailing Address of	147 ATLANTIC ROAD	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	SWANS ISLAND, ME. 04685		
Daytime Tel. #	(207) 526-4224	Municipal Tax Map # _____ Lot # _____	
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge 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 Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant _____ Date _____		Local Plumbing Inspector Signature _____ (1st Date Approved) _____ (2nd Date Approved) _____	

PERMIT INFORMATION

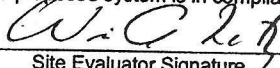
TYPE OF APPLICATION <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENT(S) <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY _____ sq. ft. <input type="checkbox"/> 2± acres <input checked="" type="checkbox"/>	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____	TYPE OF WATER SUPPLY TO BE <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular OR <input checked="" type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <u>20 TYPE</u> <u>843 GSF UNITS</u> <input checked="" type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE <u>960</u> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW <u>270</u> gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE <u>3 / C</u> CONDITION _____ at Observation Hole # <u>1</u> Depth <u>15</u> " OF MOST LIMITING SOIL FACTOR _____	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input checked="" type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. <u>44° 08' 13"</u> N Lon. <u>68° 15' 30.5"</u> W If g.p.s., state margin of error <u>30'</u>

SITE EVALUATOR STATEMENT

I certify that on 11-13-15 (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.	SE# 319 Telephone Number (207) 537-5900	Date 11-18-15 E-mail Address labelleseptic@rivah.net
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Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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Town, City, Plantation

SWANS ISLAND

Street, Road, Subdivision

STANLEY POINT ROAD

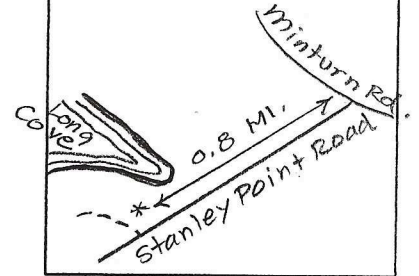
Owner or Applicant Name

ERIC VAN HORNE

SITE PLAN

Scale 1" = 40 Ft.

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)



(SEE ATTACHED SITE PLAN)

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole #1 Test Pit Boring
6 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		DARK GRAY (10YR 4/1)	
GRAVELLY	FRIABLE		N.E.
STONY		BLACK	
LOAM	FIRMER	(7.5YR 2.5/1)	ORGANIC STREAKING

Observation Hole #2 Test Pit Boring
7 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		DARK GRAY (10YR 4/1)	
GRAVELLY	FRIABLE	DARK	N.E.
STONY		BROWN	
LOAM	FIRMER	(7.5YR 3/4)	FEW FAINT

Soil Profile 3 Classification C Slope 4% Limiting Factor 15" Depth Ground Water Restrictive Layer Bedrock Pit Depth

Soil Profile 3 Classification C Slope 1/2% Limiting Factor 16" Depth Ground Water Restrictive Layer Bedrock Pit Depth

Eric Van Horne
Site Evaluator's Signature

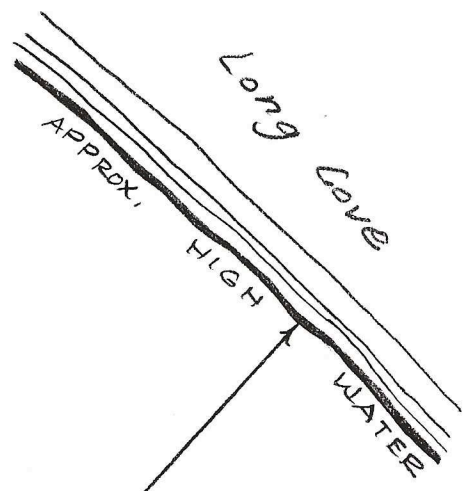
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S. E. #

11-18-15
Date

Town, City, Plantation SWANS ISLAND	Street, Road, Subdivision STANLEY POINT ROAD	Owner or Applicant Name ERIC VAN HORNE
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SITE PLAN:
SCALE: 1" = 40 FT.

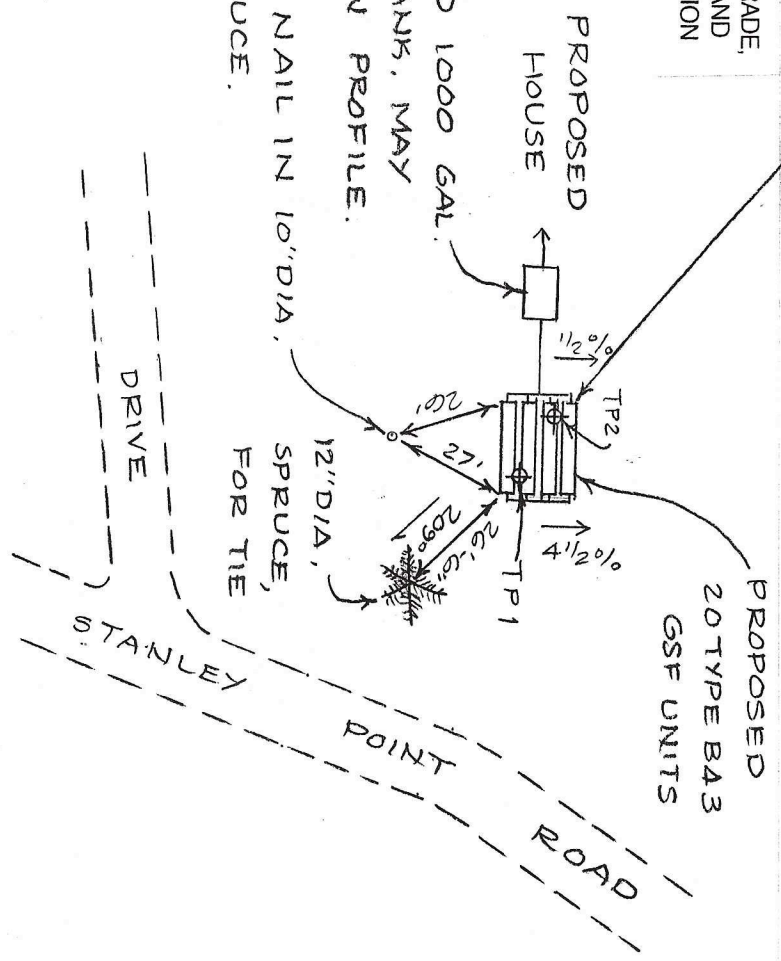
MAGNETIC
NORTH



NOTE:
IF PUMPED, INSTALL LIFT STATION WITH RISERS TO FINISH GRADE,
2" PUMP LINE PROTECTED FROM FREEZING AND CRUSHING AND
PROTECT LIFT STATION FROM FREEZING. INSTALL DISTRIBUTION
BOX; PROTECTED FROM FREEZING.

PROPOSED 1000 GAL.
SEPTIC TANK. MAY
NEED LOW PROFILE.

ERP, NAIL IN 10" DIA,
SPRUCE.



Site Evaluator's Signature
W.C.R.

S.E. #
319

Date
11-18-15

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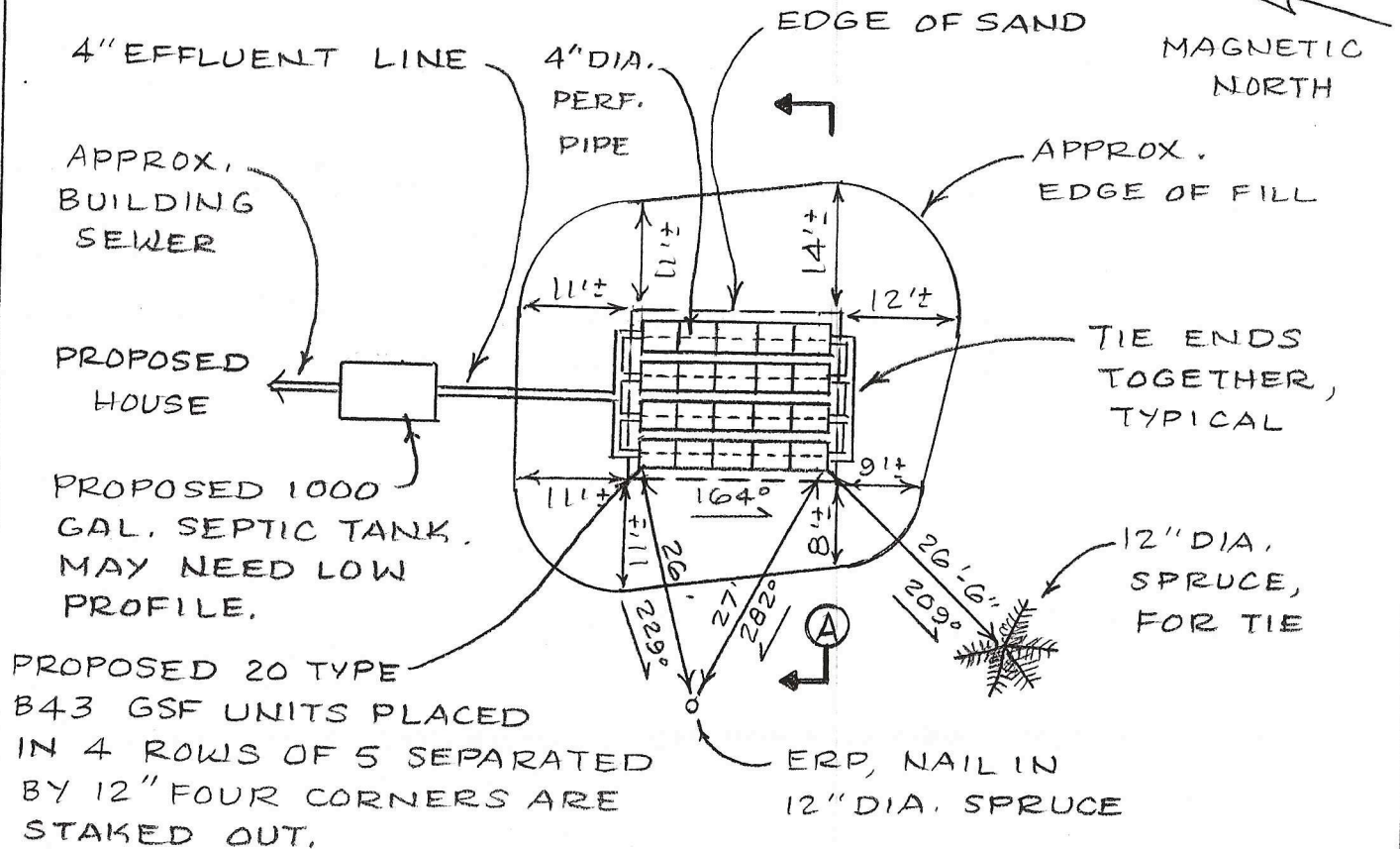
SWANS ISLAND

STANLEY POINT ROAD

ERIC VANHORNE

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



NOTE: SEE NOTE PAGE 2A.

FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT
Depth of Backfill (Upslope) 19'-23"	Finished Grade Elevation MIN. -41"			Location & Description NAIL 34"
Depth of Backfill (Downslope) 24'-27"	Top of Distribution Pipe -49"		N/A	ABOVE GROUND IN 10" DIA. SPRUCE.
Depths @ cross-section shown below or on X-sec. detail. Bottom of Disposal Field (GSF UNITS) -60"				Reference Elevation is: 0"

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

NOTES:

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. Well to be 51' minimum from septic tank(s) and 100' minimum from disposal field.
4. All work done adjacent to wetlands and water bodies must be done in compliance with section 11-M of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPS" (DEPW0588).
5. Install septic tank(s) risers 18" in diameter "minimum" to within 6" of finished grade on inlet, cleanout and outlet covers (recommend extending risers to finish grade).
6. Full basement below grade foundation, frost wall or columns must be 20' minimum from edge of disposal field and slab on grade must be 15' minimum from edge of disposal field.

W. C. L. J.
Site Evaluator's Signature

319
S.E. #

11-10-15
Date

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