

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or
Plantation
Cranberry Isles
Street
Subdivision Lot # MAIN RD (CR CRANBERRY)
PROPERTY OWNERS NAME

Last TOWNS First JOHN

Applicant
Name: (SAME)Mailing Address of
Owner/Applicant
(if Different) CRANBERRY IS. ME 04625

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.

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:

- 1 ☒ NEW SYSTEM (or EXISTING WORK)
2 ☒ REPLACEMENT SYSTEM
3 ☐ EXPANDED SYSTEM
4 ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION

to be completed by the LPI

- 5 ☐ SYSTEM COMPLIES WITH RULES
6 ☐ CONNECTED TO SANITARY SEWER
7 ☐ SYSTEM INSTALLED - 82
8 ☐ SYSTEM DESIGN RECORDED
AND ATTACHED

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED

THE FAILING SYSTEM IS:

- 1 ☐ BED 3 ☐ TRENCH
2 ☐ CHAMBER 4 ☐ OTHER

SIZE OF PROPERTY

~6 ACRES
(TOTAL)

ZONING

SHORELAND
(BUT NOT AT SITE)

THIS APPLICATION REQUIRES:

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

DISPOSAL SYSTEM TO SERVE:

- 1 ☒ SINGLE FAMILY DWELLING
2 ☐ MODULAR OR MOBILE HOME
3 ☐ MULTIPLE FAMILY DWELLING
4 ☒ OTHER BED + BREAKFAST
SPECIFY

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 _____ GAL
6 ☐ ALTERNATIVE TOILET (ONLY)
7 ☐ NON-ENGINEERED DISPOSAL AREA
(ONLY)
8 ☐ ENGINEERED DISPOSAL AREA
(ONLY)
9 ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY
EXISTING WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- 1 ☒ SEPTIC ☐ Regular
2 ☐ AEROBIC ☒ Low Profile

SIZE: 1000 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
USE PERSONS ON TREATMENT TANK
LOCATION AND ELEVATION
3 ☐ REQUIRED
DOSE _____ GALS

SOIL CONDITIONS USED FOR
DESIGN PURPOSES

PROFILE CONDITION

3 B/C

DEPTH TO
LIMITING
FACTOR

18

SIZE RATINGS USED FOR
DESIGN PURPOSES

- 1 ☐ SMALL
2 ☐ MEDIUM
3 ☒ MEDIUM-LARGE
4 ☐ LARGE
5 ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- 1 ☒ BED 1080 Sq Ft
2 ☐ CHAMBER _____ Sq Ft
3 ☐ TRENCH _____ Linear Ft
4 ☐ OTHER _____

CRITERIA USED FOR
DESIGN PLAN (BEDROOMS, BATHING,
EMPLOYEES, WATER RECORDS, ETC.)3-Room BED + BREAK
FIRST (2 50 GPD/Room)
PLUS PROPRIETOR'S
QUARTERS (2 180 GPD)DESIGN
FLOW: 150 + 180 = 330 GPD
(GALLONS/DAY)

SITE EVALUATOR STATEMENT

On JULY 8, 1988 (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.

Site Evaluator Signature

187
SEX7/13/88
Date(Local Plumbing Inspector's Signature
if permit is for Seasonal Conversion.)

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

Street, Road, Subdivision

Department of Human Services
Division of Health Engineering

Owner's Name

CRANBERRY ISLES

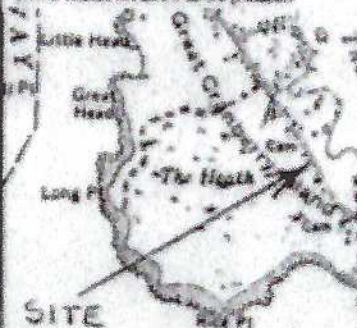
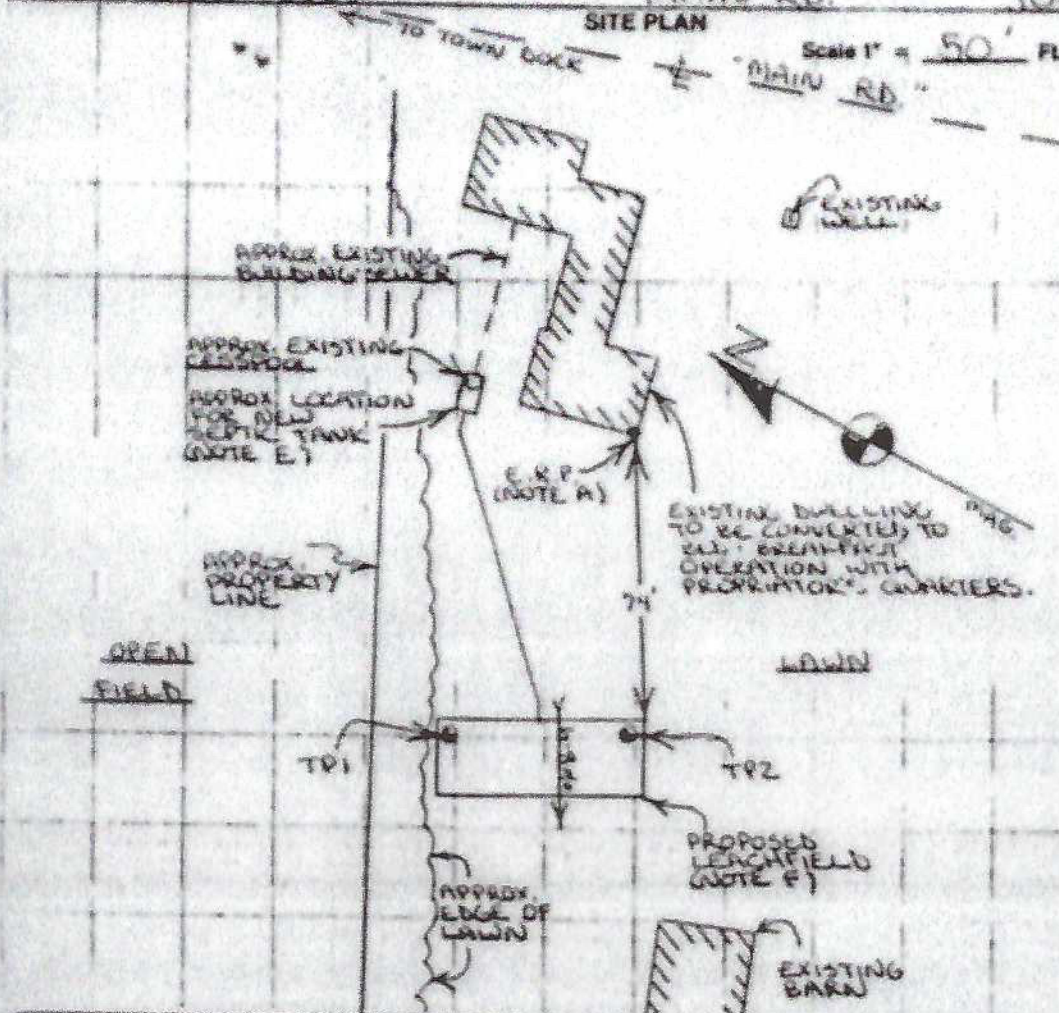
MAIN RD.

JOHN TOWNS

SITE PLAN

Scale 1" = 50' PL

SITE LOCATION PLAN (ATTACH)



KEY:

- DESIGNATES OBSERVATION HOLE (TH)
- DESIGNATES DIRECTION AND DEGREE OF DOWNHILL SLOPE
- DESIGNATES ELEVATION REFERENCE POINT (E.R.P.)

REFER ALSO TO ATTACHED SHEET FOR THESE DESIGN NOTES/SPECIFICATIONS (BY LETTER)

A B D E F
G H J K L

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP1 ☒ Test Pit ☐ Boring

0" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0-10" FINE SANDY LOAM	FRIBLE	DARK BROWN	INDISTINCT
10-15" FINE SANDY LOAM		YELLOWISH BROWN	
15-20" VERY GRANELLY LOAMY SAND	FIRM IN PLACE	BROWN YELLOW (MAY MATERIAL)	
20-25" HARD-CLAY (NO LEDGE EVIDENT)			

Soil	Classification	Slope	Limiting Factor	☐ Ground Water	☐ Fractured Layer	☐ Bedrock
3	B/C	~6%	18			

Observation Hole TP2 ☒ Test Pit ☐ Boring

0" Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0-10" FINE SANDY LOAM	FRIBLE	DARK BROWN	INDISTINCT
10-15" FINE SANDY LOAM		YELLOWISH BROWN	
15-20" VERY GRANELLY LOAMY SAND	FIRM IN PLACE	BROWN YELLOW (MAY MATERIAL)	
20-25" HARD-CLAY (NO LEDGE EVIDENT)			

Soil	Classification	Slope	Limiting Factor	☐ Ground Water	☐ Fractured Layer	☐ Bedrock
3	B/C	~8%	19			

ALL E. C. C. 24
Site Investigator Signature

12/1
SE#

7/13/80
Date

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

City, Plantation

Street, Road, Subdivision

Owners Name

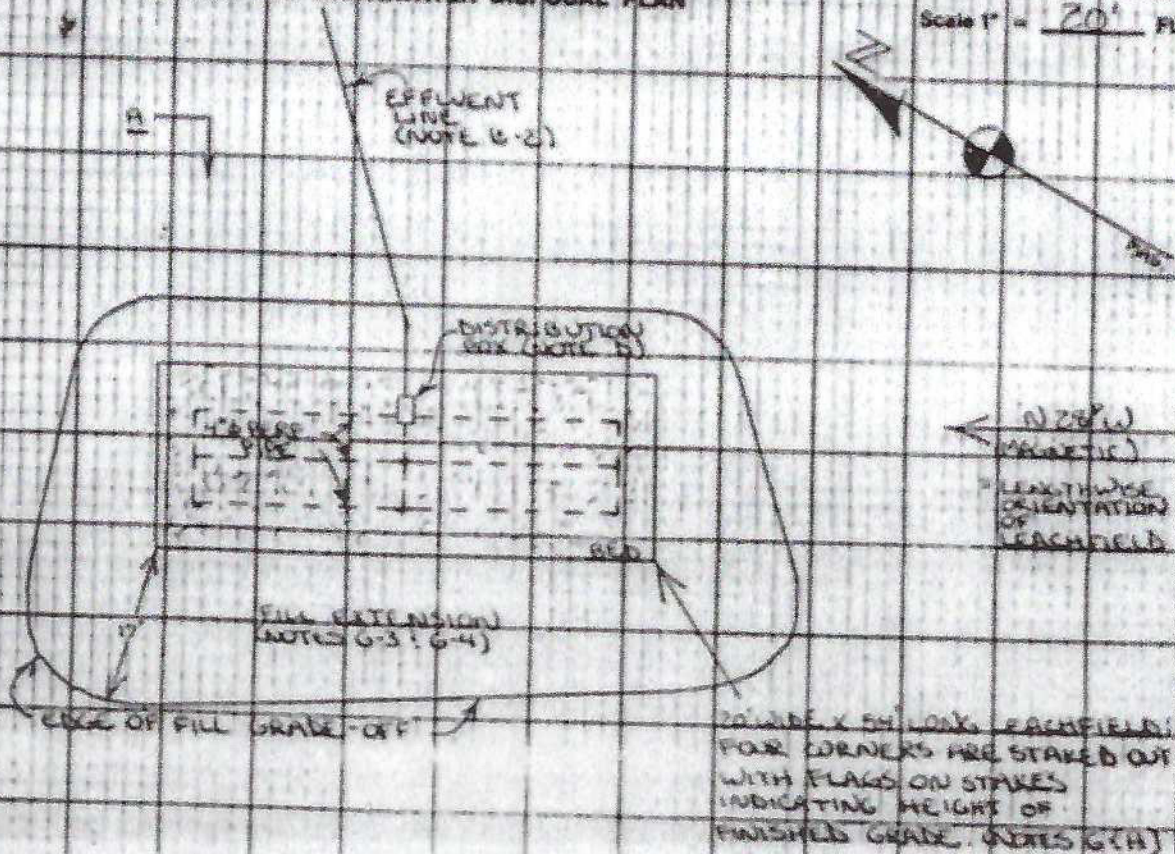
MANBERRY ISLES

MAIN RD

JOHN TOWNS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' PL



FILL REQUIREMENTS

- Fill (Upland) 19"
- Fill (Downslope) 32-36"

CONSTRUCTION ELEVATIONS (NOTE A)

Reference Elevation is 0'
Bottom of Disposal Area -64"
Top of Distribution Lines or Chambers -72"

ELEVATION REFERENCE POINT (E.R.P.) LOCATION & DESCRIPTION

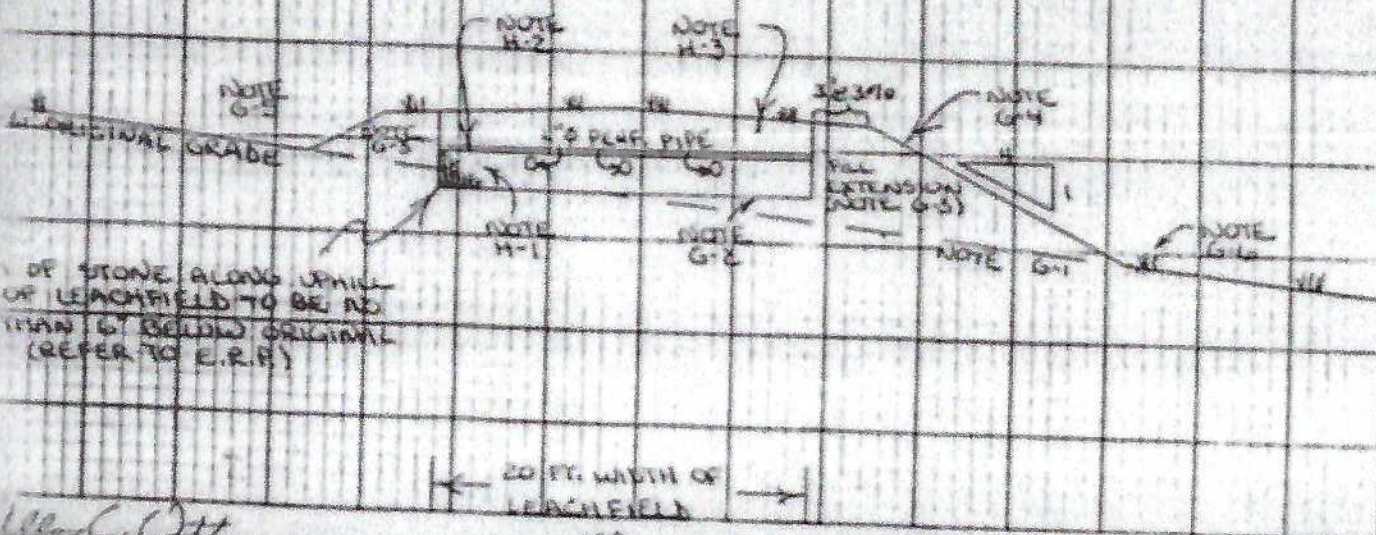
BOTTOM OF BEICE TRIM BOARD @ S.W. CORNER OF HOUSE (25' ABOVE GRADE); S.E. CORNER OF PORCH; LEACHFIELD IN 7' x 8' x 30\"/>

Scale:

Vertical: 1 inch = 5' PL
Horizontal: 1 inch = 10' PL

DISPOSAL AREA CROSS SECTION (ACROSS A-A' ABOVE)

10 W. HDS OF STONE REQUIRED (NOTE H-1)



OF STONE ALONG UPHILL OF LEACHFIELD TO BE NO MORE THAN 6\"/>

W.C. City
San Engineer Signature

187

7/19/88