

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Division of Health Engineering, Inc.
(207) 287-5672 Fax: (207) 287-3333

PROPERTY LOCATION

City, Town, or Plantation: GOULDSBORO
Street or Road: 1008 WEST BAY ROAD
Subdivision, Lot #:

GOULDSBORO PERMIT # 1328 APPLICANTS COPY

Date Permit Issued: 10/15/08 \$ 1210.00 FEE If Double Fee Charged

Charles S. Peterson L.P.I. # 111918
Local Plumbing Inspector Signature

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/APPLICANT INFORMATION

Name (last, first, MI): HALL CAROLYN Owner Applicant
Mailing Address of Owner/Applicant: 1008 WEST BAY RD GOULDSBORO, ME 04607
Daytime Tel. #: 963-2631

Municipal Tax Map # 61 Lot # 28

OWNER OR APPLICANT STATEMENT

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 Local Plumbing Inspector to deny a permit.

Carolyn Hall 7-10-08
Signature of Owner or 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 Application 7-10-08 (1st) date approved

Charles S. Peterson 7-15-08
Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
 2. Replacement System
Type replaced: TRENCH
Year installed: VNK.
 3. Expanded System
 a. Minor Expansion
 b. Major Expansion
 4. Experimental System
 5. Seasonal Conversion

THIS APPLICATION REQUIRES

1. No Rule Variance,
 2. First Time System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 3. Replacement System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 4. Minimum Lot Size Variance
 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

1. Complete Non-engineered System
 2. Primitive System (graywater & alt. toilet)
 3. Alternative Toilet, specify: _____
 4. Non-engineered Treatment Tank (only)
 5. Holding Tank, _____ gallons
 6. Non-engineered Disposal Field (only)
 7. Separated Laundry System
 8. Complete Engineered System (2000 gpd or more)
 9. Engineered Treatment Tank (only)
 10. Engineered Disposal Field (only)
 11. Pre-treatment, specify: _____
 12. Miscellaneous Components

SIZE OF PROPERTY

+ 20 SQ. FT. ACRES

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: 3
 2. Multiple Family Dwelling, No. of Units: _____
 3. Other: _____ (specify)
Current Use Seasonal Year Round Undeveloped

TYPE OF WATER SUPPLY

1. Drilled Well 2. Dug Well 3. Private
 4. Public 5. Other

SHORELAND ZONING

- Yes No

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. Concrete
 a. Regular
 b. Low Profile
 2. Plastic
 3. Other: _____
CAPACITY: 1000 GAL

DISPOSAL FIELD TYPE & SIZE

1. Stone Bed 2. Stone Trench
 3. Proprietary Device
 a. cluster array c. Linear
 b. regular load d. H-20 load
 4. Other: _____
SIZE: 900 sq. ft. lin. ft.

GARBAGE DISPOSAL UNIT

- No 2. Yes 3. Maybe
If Yes or Maybe, specify one below:
 a. multi-compartment tank
 b. _____ tanks in series
 c. increase in tank capacity
 d. Filter on Tank Outlet

DESIGN FLOW

270 gallons per day
BASED ON:
 1. Table 501.1 (dwelling unit(s))
 2. Table 501.2 (other facilities)
SHOW CALCULATIONS for other facilities

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN: 31C1
at Observation Hole # 1
Depth 18"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Small—2.0 sq. ft./gpd
 2. Medium—2.6 sq. ft./gpd
 3. Medium—Large 3.3 sq. ft./gpd
 4. Large—4.1 sq. ft./gpd
 5. Extra Large—5.0 sq. ft./gpd

EFFLUENT/EJECTOR PUMP

1. Not Required
 2. May Be Required
 3. Required
Specify only for engineered systems:
DOSE: _____ gallons

3. Section 503.0 (meter readings)
ATTACH WATER METER DATA

276 LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44 d 28 m 587 s
Lon. 68 d 07 m 275 s
if g.p.s., state margin of error.

SITE EVALUATOR STATEMENT

I certify that on 5-28-08 (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).

Jojo Brach
Site Evaluator Signature

227

SE #

6-13-08

Date

Jojo Brach
Site Evaluator Name Printed

667-5025

Telephone Number

E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4772

Town, City, Plantation
Gouldsboro

Street: Food Subdivision
1008 WEST BAY ROAD

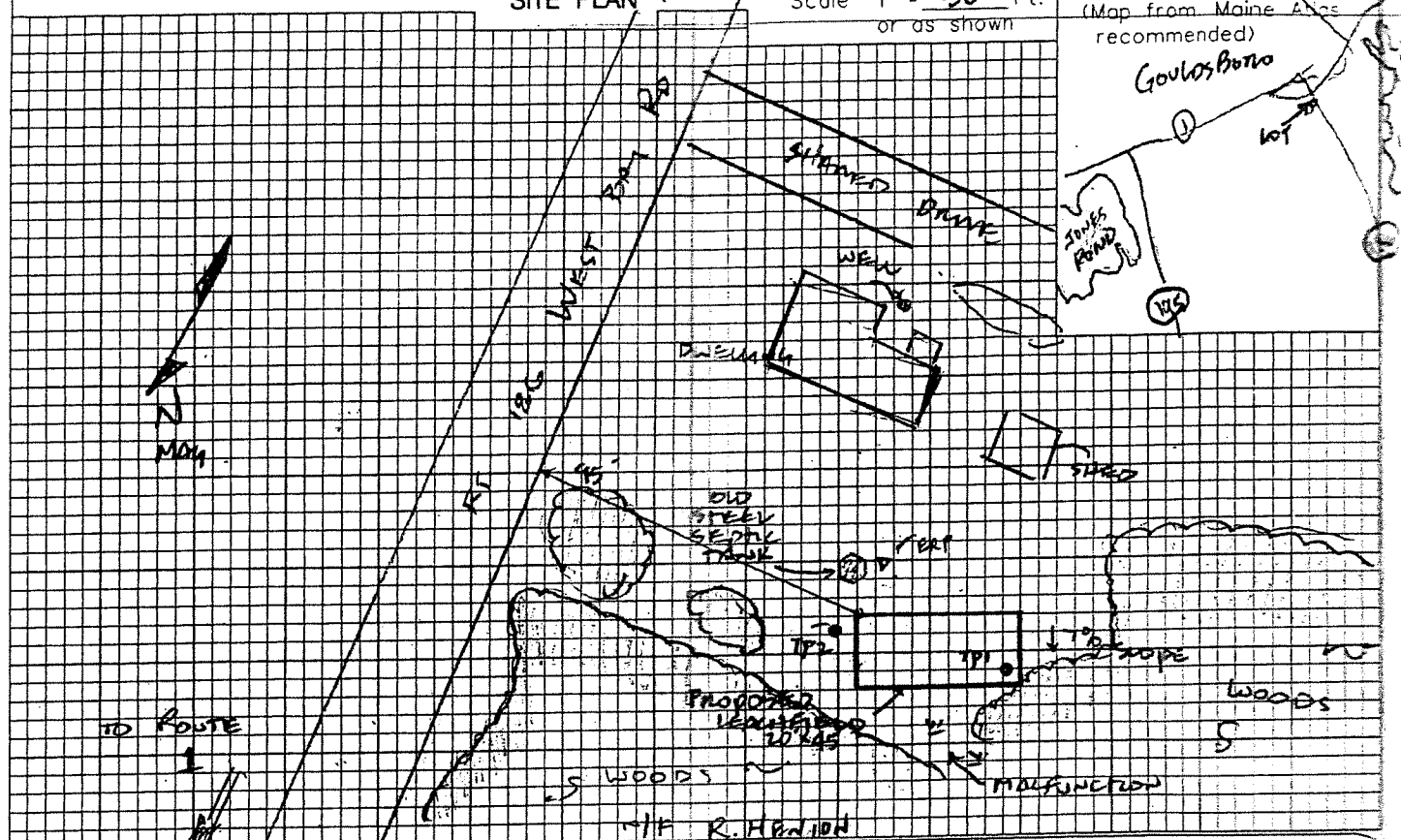
Owner's Name
Carolyn Hall

SITE PLAN

Scale 1" = 50 Ft.
or as shown

SITE LOCATION PLAN
(Map from Maine Atlas recommended)

Gouldsboro



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

Observation Hole TP#1 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	GRAVELLY SAND	FRIABLE MOD FIRM	Brown	NONE
10	FINE SANDY LOAM	FRIABLE	BROWN STRONG BROWN	NONE
20				
30				
40				
50				

Soil Classification: 3 C
Profile Condition
Slope: 7 %
Limiting Factor: 18"
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Observation Hole TP#2 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	NONE
10			STRONG BROWN RED BROWN	
20		FIRM		
30				
40				
50				

Soil Classification: 3 C
Profile Condition
Slope: 7 %
Limiting Factor: 20"
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

John Barber
Site Evaluator Signature

227
SE

6-13-08
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4072

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

GOULDSBORO

1008 WEST BAY ROAD

CAROLYN HALL

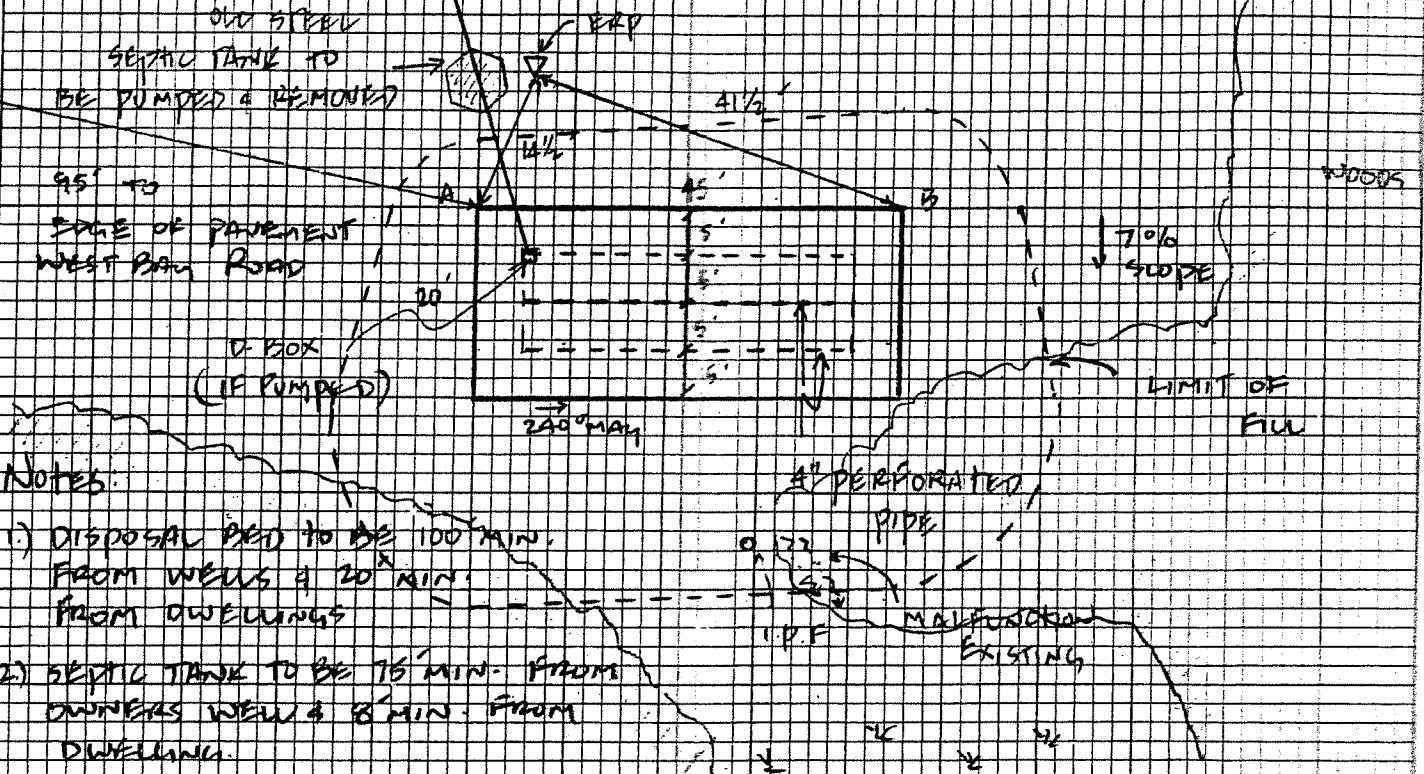
4" SUB 40 (IF GRAVITY FLOW)

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT

2" PLASTIC FORCE MAIN (IF PUMPED)

PROPOSED 20' X 45' LEACH FIELD



NOTES:

- DISPOSAL BED TO BE 100' MIN. FROM WELLS & 20' MIN. FROM DWELLINGS
- SEPTIC TANK TO BE 75' MIN. FROM OWNERS WELL & 8' MIN. FROM DWELLINGS.

FILL REQUIREMENTS

Depth of Fill (Upslope)	A/B	18" - 26"
Depth of Fill (Downslope)		37" - 39"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation	-19"
Top of Distribution Pipe or Proprietary Device	-32"
Bottom of Dispose Area	-43"

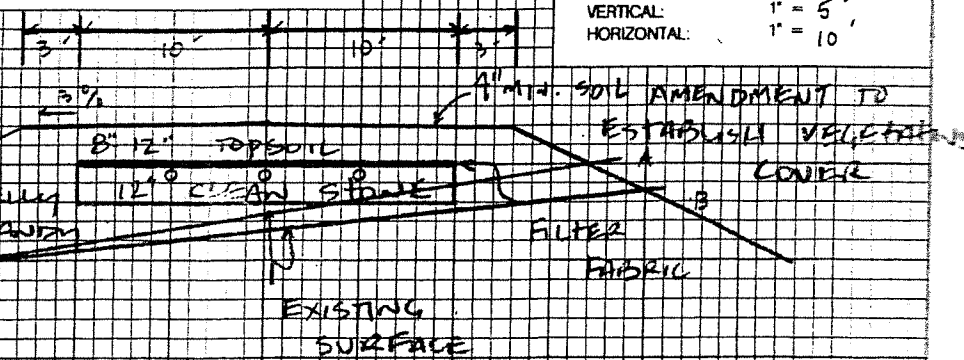
ELEVATION REFERENCE POINT

Location & Description	DAIRY ROAD
	18" UP A B" DIA. PINE
Reference Elevation	0"

NOTES:

- LIME FERTILIZER SEEDS MULCH TOP & SIDES OF BED & ALL DISTURBED AREAS TO HELP PREVENT EROSION
- PLACE & COMPACT FILL IN 8" LIFTS
- BOTTOM OF BED TO BE INSTALLED LEVEL W/ A MAX GRADE TOLERANCE OF 1"/100'

DISPOSAL AREA CROSS SECTION



SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 10'

SCARIFY ORIGINAL SURFACE UNDER BED

REPLACEMENT SYSTEM VARIANCE REQUEST

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application (HHE-200) for the proposed replacement system which requires a variance to the Rules. The LPI shall review the Replacement System Variance Request an HHE-200 and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 2006)
2. There will be no change in use of the structure except as authorized for one-time exempted expansions outside the shoreland zone of major waterbodies/courses.
3. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
4. The BOD5 plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION	Town of <u>Gouldsboro</u>
Permit No. _____	Date Permit Issued _____
Property Owner's Name: <u>Carolyn Hau</u>	Tel. No.: <u>963-2631</u>
System's Location: <u>1008 WEST BAY ROAD, GOULDSBORO, ME 04607</u>	
Property Owner's Address: <u>SAME</u>	
(if different from above) _____	

SPECIFIC INSTRUCTIONS TO THE:

LOCAL PLUMBING INSPECTOR (LPI):
If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, then you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

SITE EVALUATOR:
If after completing the Application, you find that a variance for the proposed replacement system is needed; complete the Replacement Variance Request with your signature on reverse side of form.

PROPERTY OWNER:
If has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

PROPERTY OWNER

I understand that the proposed system requires a variance to the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

SIGNATURE OF OWNER

DATE

LOCAL PLUMBING INSPECTOR

I, Charles S. Pitman, the undersigned, have visited the above property and have determined to the best of my knowledge that it cannot be installed in compliance with the Rules. As a result of my review of the Replacement Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

a. (Approve, ~~disapprove~~) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in **Comments** Section below and return to the applicant. **--OR--**

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (recommend, do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, the reasons shall be stated in **Comments** Section below as to why the proposed replacement system is not being recommended.

Comments: _____

LPI SIGNATURE

DATE 7-15-08

FORMS

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
	SOILS							
Soil Profile	Ground Water Table			to 7"			- inches	
Soil Condition	Restrictive Layer			to 7"			- inches	
from HHE-200	Bedrock			to 12"			- inches	
SETBACK DISTANCES (in feet)	Disposal Fields			Septic Tanks			Disposal Fields	Septic Tanks
From	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water supply wells	300 ft [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]	-	-
Owner's wells	100 down to 60 ft	200 down to 100 ft	300 down to 150 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	+ 80'	- 40'
Neighbor's wells	100 down to 60 ft [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]	-	-
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]	-	-
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	-	-
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft	-	-
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft	-	-
Edge of fill extension -- Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	-	-
Slopes greater than 3:1	10 ft	18 ft	25 ft	N/A	N/A	N/A	-	-
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft	-	-
Full basement [below grade foundation]	20 down to 10 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft	-	-
Property lines	10 down to 5 ft [c]	18 down to 9 ft [c]	20 down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 down to 10 ft [c]	SEE BELOW	-
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft	-	-

OTHER

- Fill extension Grade - to 3:1 ↓ I spoke w/ Rick Henion about property line
- Proximity and he stated that the proposed system location was O.K. 6-12-08
-

Footnotes: [a.] Single-family well setbacks may be reduced as prescribed in Section 701.2.
 [b.] This distance may be reduced to 25 feet, if the septic or holding tank is tested in the plumbing inspector's presence and shown to be watertight or of monolithic construction.
 [c.] Additional setbacks may be needed to prevent fill material extensions from encroaching onto abutting property.
 [d.] Additional setbacks may be required by local Shoreland zoning.
 [e.] Natural Resource Protection Act requires a 25 feet setback, on slopes of less than 20%, from the edge of soil disturbance and 100 feet on slopes greater than 20%. See Chapter 15.
 [f.] May not be any closer to neighbors well than the existing disposal field or septic tank unless written permission is granted by the neighbor. This setback may be reduced for single family houses with Department approval. See Section 702.3.
 [g.] The fill extension shall reach the existing ground before the 3:1 slope or within 100 feet of the disposal field.
 [h.] See Section 1402.10 for special procedures when these minimum setbacks cannot be achieved.

John Ambler

 SITE EVALUATOR'S SIGNATURE

6-13-08

 DATE

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and () does () does not) give its approval. Any additional requirements, recommendations, or reasons for the variance denial, are given in the attached letter.

 SIGNATURE OF THE DEPARTMENT

 DATE