

**DRAFT**


**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Maine Department of Human Services  
 Division of Health Engineering, 10 SHS  
 (207) 287-5672 Fax: (207) 287-3165

<b>PROPERTY LOCATION</b>		<b>CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW</b>	
City, Town, or Plantation	North Yarmouth	The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached HERE by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.	
Street or Road	North Road		
Subdivision, Lot #	Redmond Road		
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	Smoe, Joe		
	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant		
Mailing Address of Owner/Applicant	66 Field Rd. Scarborough, ME 04074		
Daytime Tel. #		Municipal Tax Map # _____ Lot # _____	
<b>OWNER OR APPLICANT STATEMENT</b> 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.		<b>CAUTION: INSPECTION REQUIRED</b> I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant _____ Date _____		Local Plumbing Inspector Signature _____ (1st) date approved _____ _____ (2nd) date approved _____	

<b>PERMIT INFORMATION</b>		
<b>TYPE OF APPLICATION</b> <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	<b>THIS APPLICATION REQUIRES</b> <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 <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<b>DISPOSAL SYSTEM COMPONENTS</b> <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
<b>SIZE OF PROPERTY</b> 2 <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	<b>DISPOSAL SYSTEM TO SERVE</b> <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>4</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	<b>TYPE OF WATER SUPPLY</b> <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
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

<b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b>			
<b>TREATMENT TANK</b> <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000</u> GAL	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input 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>1500</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes of 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	<b>DESIGN FLOW</b> <u>366</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.1 (other facilities) SHOW CALCULATIONS — for other facilities — <input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER METER DATA
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN <u>8 / D / 3</u> at Observation Hole # <u>TP-1</u> Depth <u>12</u> " of Most Limiting Soil Factor Groundwater	<b>DISPOSAL FIELD SIZING</b> <input type="checkbox"/> 1. Small—2.0 sq. ft. / gpd <input type="checkbox"/> 2. Medium—2.6 sq. ft. / gpd <input type="checkbox"/> 3. Medium—Large 3.3 sq. ft. / gpd <input checked="" type="checkbox"/> 4. Large—4.1 sq. ft. / gpd <input type="checkbox"/> 5. Extra Large—5.0 sq. ft. / gpd	<b>EFFLUENT/EJECTOR PUMP</b> <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	<b>LATITUDE AND LONGITUDE</b> at center of disposal area Lat. <u>43</u> d <u>50</u> m <u>37.0</u> s Lon. <u>-70</u> d <u>12</u> m <u>39.0</u> s if g.p.s. state margin of error: <u>20'</u>

<b>SITE EVALUATOR STATEMENT</b>		
I certify that on <u>2/13/07</u> (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	<u>384</u> SE #	<u>02/20/07</u> Date
<u>Benjamin McDougal</u> Site Evaluator Name Printed	<u>797-2110</u> Telephone Number	<u>ben@sweetassociates.com</u> Email Address

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**SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Maine Department of Human Services  
 Division of Health Engineering, Station 10  
 (207) 287-5672 Fax: (207) 287-3165

Plantation  
 North Road

Street, Road, Subdivision  
 North Road

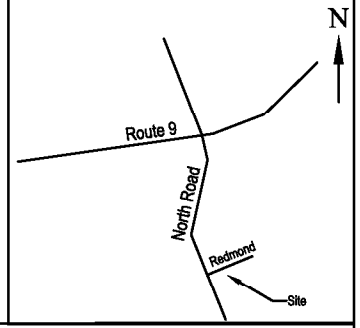
Owner or Applicant Name  
 Smoe, Joe

**SITE PLAN** Scale 1" = 60 ft.

**SITE LOCATION PLAN**

**NOTES:**

1. All property lines and building locations are approximate.
2. Septic tank and disposal field must be located at least 8' and 20' from a full foundation.
3. Proposed well must be located at least 100' from septic tank(s) and disposal field.
4. Scarify all ground to be filled.
5. Insulate the Distribution Box (D-Box).
6. Manifold B (4" dia. Solid PVC Pipe) shall connect into bottom of end plates.
7. Min. 1/4"/ft slope of pipe from building to septic tank.
8. Create transitional horizon beneath disposal field by thoroughly mixing gravelly coarse sand with 6" of the soil beneath system.



North Road

Redmond Road

Property Line

Edge of Pavement

Proposed House

1000 Gallon Septic Tank

Pump Station

ERP: 24" Maple  
 Nail 51" High

30 BioDiffuser Hi-Capacity  
 Plastic Chambers  
 3 rows X 10 units long  
 15' x 63'-4"

Property Line

Railroad Tracks

2" dia. Pressure Line

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

Observation Hole # TP-1  Test Pit  Boring

1 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0	Fine Sandy Loam	Friable	Brown
6		Olive Brown	
12	Silt Loam	Light Olive	Few and Distinct
18			
24	Silty Clay Loam	Firm	Gray
30			
36			
42			
48			

Soil Profile	Classification	Slope	Limiting Factor	<input checked="" type="checkbox"/> Groundwater
<u>8</u>	<u>D</u>	<u>3</u>	<u>12"</u>	<input type="checkbox"/> Restrictive Layer
	Condition	Percent	Depth	<input type="checkbox"/> Bedrock

Observation Hole # \_\_\_\_\_  Test Pit  Boring

\_\_\_\_\_ " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0			
6			
12			
18			
24			
30			
36			
42			
48			

Soil Profile	Classification	Slope	Limiting Factor	<input type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
	Condition	Percent	Depth	<input type="checkbox"/> Bedrock

*Bay Mc...*  
 Site Evaluator Signature

384  
 SE #

02/20/07  
 Date

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**GROUND SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Maine Department of Human Services  
Division of Health Engineering, Station 10  
(207) 287-5672 Fax: (207) 287-3165

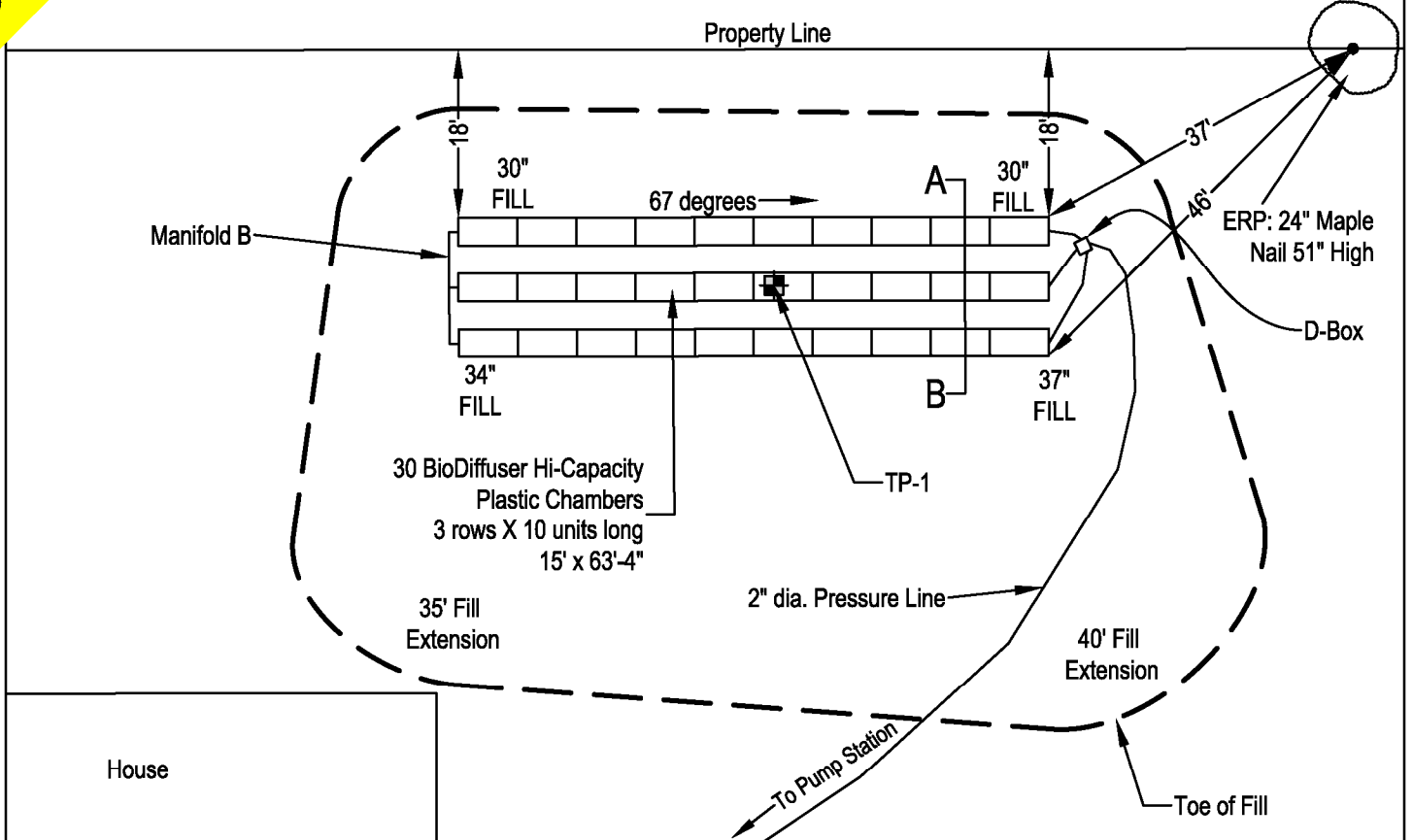
Plantation  
Barnmouth

Street, Road, Subdivision  
North Road

Owner or Applicant Name  
Smoe, Joe

**SUBSURFACE WASTEWATER DISPOSAL PLAN**

Scale: 1" = 20' ft



BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Backfill (upslope) <u>30"</u>	Finished Grade Elevation (at Row 1) <u>-21.7"</u>	Location & Description: <u>24" Maple</u>
Depth of Backfill (downslope) <u>34-37"</u>	Top of Proprietary Device (at Row 1) <u>-34"</u>	<u>Nail 51" High</u>
	Bottom of Disposal Field (at Row 1) <u>-50"</u>	Reference Elevation is or: _____

NOTE: SCARIFY ALL GROUND SURFACE TO BE FILLED. USE GRAVELLY COARSE SAND WITHIN 3' OF CHAMBERS. REMAINING FILL: LOAMY SAND (no clay)

**DISPOSAL FIELD CROSS SECTION**

ROW #	1	2	3
TOP	-34"	-34"	-34"
BOTTOM	-50"	-50"	-50"

Scales:  
Vertical: 1" = 5'  
Horizontal: 1" = 5'

