SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	FREEPORT
Street Subdivision Lot #	HIGH VIEW ROAD (LOT #10)

PROPERTY OWNERS NAME

THOMAS HENRY
Last First

Applicant Name	
Mailing Address of Owner/Applicant (if Different)	

FREEPORT PERMIT # 2130 STATE LOT

Date Permit Issued: 5/16/96 $ 60.00 FEE Double Fee Charged

L. Reeder
Local Plumbing Inspector Signature

LPI # 255

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
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 - P# ____
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: APPROX. 1½ AC.
ZONING

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
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER ____ 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
(LOCATE WELL AT LEAST 100' FROM SYSTEM)

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC ☒ Regular ☐ Low Profile
2. ☐ AEROBIC
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 (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED
DOSE ____ GALS

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

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
2	A

DEPTH TO LIMITING FACTOR 15

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED ____ Sq. Ft.
2. ☒ CHAMBER 480 Sq. Ft. ☒ REGULAR ☐ H-20
3. ☐ TRENCH ____ Linear Ft.
4. ☐ OTHER ____

DESIGN FLOW 282 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 10-26-93 (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.

Richard Ahmet — Site Evaluator Signature
034 — SE#
HCT 11-17-93 — Date

(Local Plumbing Inspector's Signature

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

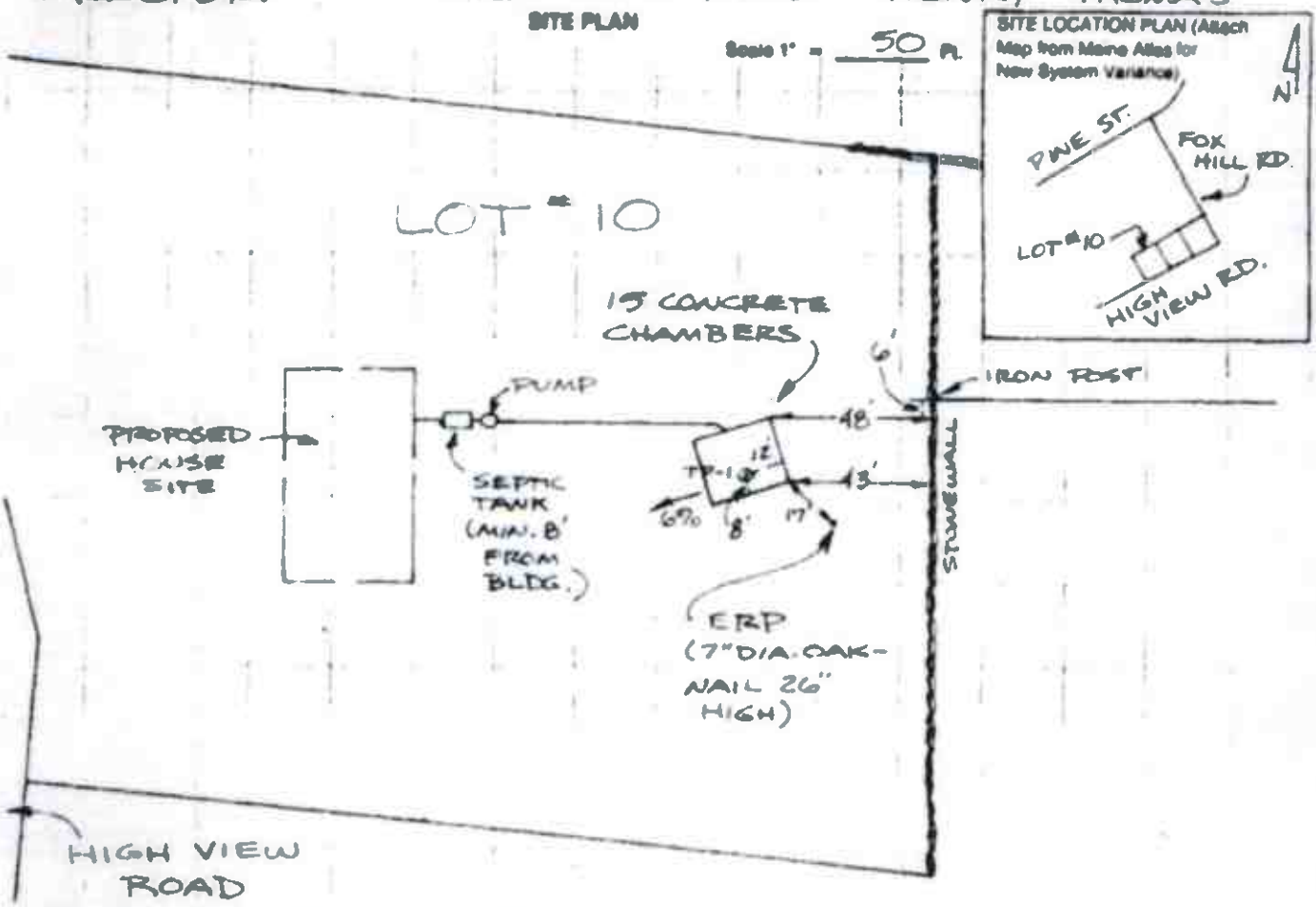
Town, City, Plantation: FREEPORT

Street, Road, Subdivision: HIGH VIEW ROAD

Owner's Name: HENRY THOMAS

SITE PLAN

Scale 1" = 50 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

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

Observation Hole: TP-1 ☒ Test Pit ☐ Boring

3" Depth of Organic Horizon Above Mineral Soil

Depth (Inches) Below Mineral Soil Surface	Texture	Consistency	Color	Mottling
0			GRAY	
8	FINE SANDY LOAM	FRIABLE	RED	
16	BEDROCK			

Soil	Classification	Slope	Limiting Factor	
2	B		15	☐ Ground Water ☐ Restrictive Layer ☐ Ledge

Observation Hole: _____ ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

Depth (Inches) Below Mineral Soil Surface	Texture	Consistency	Color	Mottling
0				
8				
16				

Soil	Classification	Slope	Limiting Factor	
				☐ Ground Water ☐ Restrictive Layer ☐ Ledge

Richard Adams
Site Evaluator Signature

034
SE#

11-17-93
Date

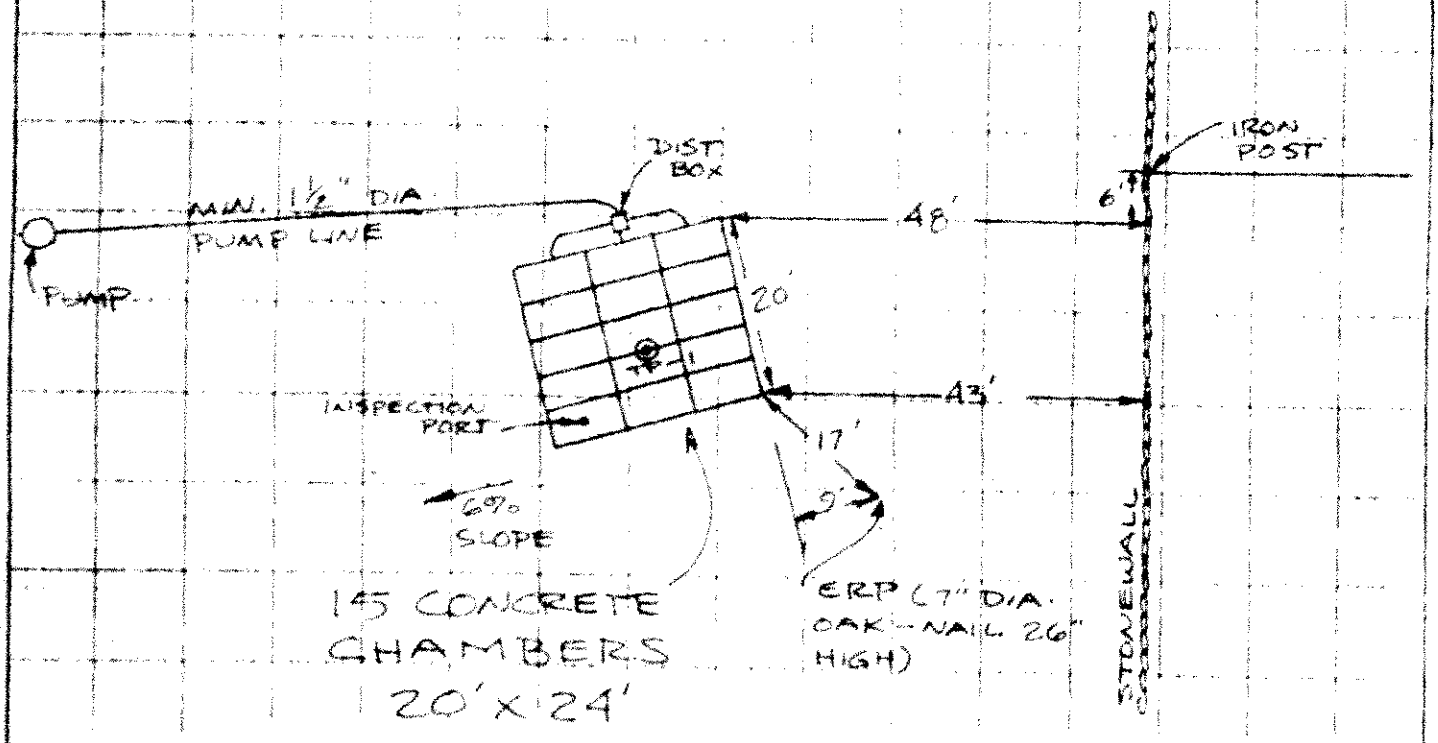
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
FREEPORT	HIGH VIEW ROAD	HENRY THOMAS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

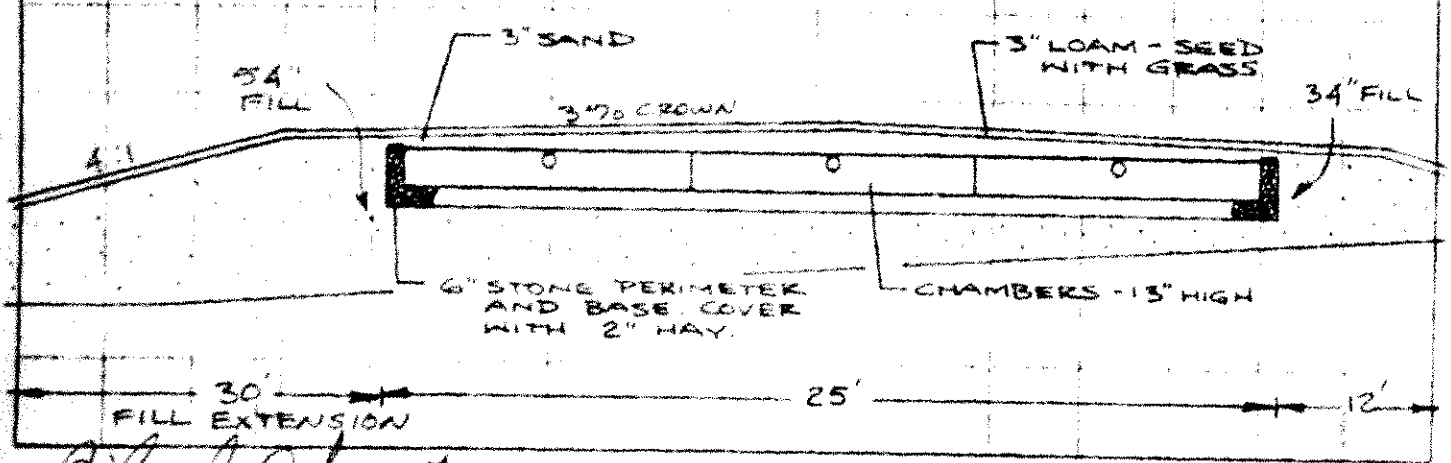


FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	34"	Reference Elevation is	0	NAIL IN PINK SQUARE IN OAK
Depth of Fill (Downslope)	54"	Bottom of Disposal Area	-33"	
		Top of Distribution Lines or Chambers	-14"	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 5 Ft.

NOTE: SCARIFY GROUND SURFACE BELOW FILL. CHAMBER SYSTEM THICKNESS 25"



Richard Adams — Site Evaluator Signature
034 — SE#
11-17-93 — Date