MacDonald Excavation
207-590-4202

FOUNDATIONS
SEPTIC SYSTEMS
WATERLINES
LAND CLEARING
SITE WORK
DRIVEWAYS
DRAINAGE
FARM PONDS

169 Portland Ave., Old Orchard Beach, ME 04064

SYSTEM APPLICATION

Maine Dept Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5672 Fax: (207) 287-4172

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City Lyman Permit # 4027
Date Permit Issued 11/7/19 Fee: $ 150 Double Fee Charged [ ]
Patti McKenna LPI. #
Local Plumbing Inspector Signature
☐ Owner ☐ Town ☐ State

OWNER/APPLICANT INFORMATION

Name (last, first, MI) HOULE-COLLARD, SANDRA ■ Owner ☐ Applicant
Mailing Address of Owner/Applicant
04002
Daytime Tel. # 499-2032

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 this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map # 21 Lot # 11

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/or Local Plumbing Inspector to deny a Permit.
Signature of Owner or Applicant 11-7-19 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. Waived (1st) date approved
Patti McKenna 11/25/19
Local Plumbing Inspector Signature (2nd) date approved

207-590-4202

PERMIT INFORMATION

TYPE OF APPLICATION
☐ 1. First Time System
■ 2. Replacement System
Type replaced: ELJEN
Year installed: 2000
☐ 3. Expanded System
☐ a. ≤25% Expansion
☐ b. >25% 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
20,000 ± ■ SQ. FT. ☐ ACRES

SHORELAND ZONING
☐ Yes ■ No

DISPOSAL SYSTEM TO SERVE
■ 1. Single Family Dwelling Unit, No. of Bedrooms: 2
☐ 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

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
☐ 1. Concrete
☐ a. Regular
☐ b. Low Profile
☐ 2. Plastic Existing
☐ 3. Other:
CAPACITY: 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: ELJEN GSF (15)
SIZE: 180 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT
■ 1. 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
180 gallons per day
BASED ON:
■ 1. Table 4A (dwelling unit(s))
☐ 2. Table 4C(other facilities)
SHOW CALCULATIONS for other facilites
☐ 3. Section 4G (meter readings)
ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS
PROFILE CONDITION
3 C
at Observation Hole # TP1
Depth 24"
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
☐ 1. Medium—2.6 sq. ft. / gpd
■ 2. Medium—Large 3.3 sq. ft / gpd
☐ 3. Large—4.1 sq. ft. / gpd
☐ 4. 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

LATITUDE AND LONGITUDE
at center of disposal area
Lat. 43 d 31 m 0.62 s
Lon. 70 d 39 m 10.2 s
if g.p.s, state margin of error: —

SITE EVALUATOR STATEMENT

I certify that on 10-1-19 (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).

Mark A Truman
Site Evaluator Signature
121
SE #
10-17-19
Date

MARK A. TRUMAN
Site Evaluator Name Printed
207-229-7482
Telephone Number
MARKATRUMAN@MAINESITEEVALUATIONS.COM
E-mail Address

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

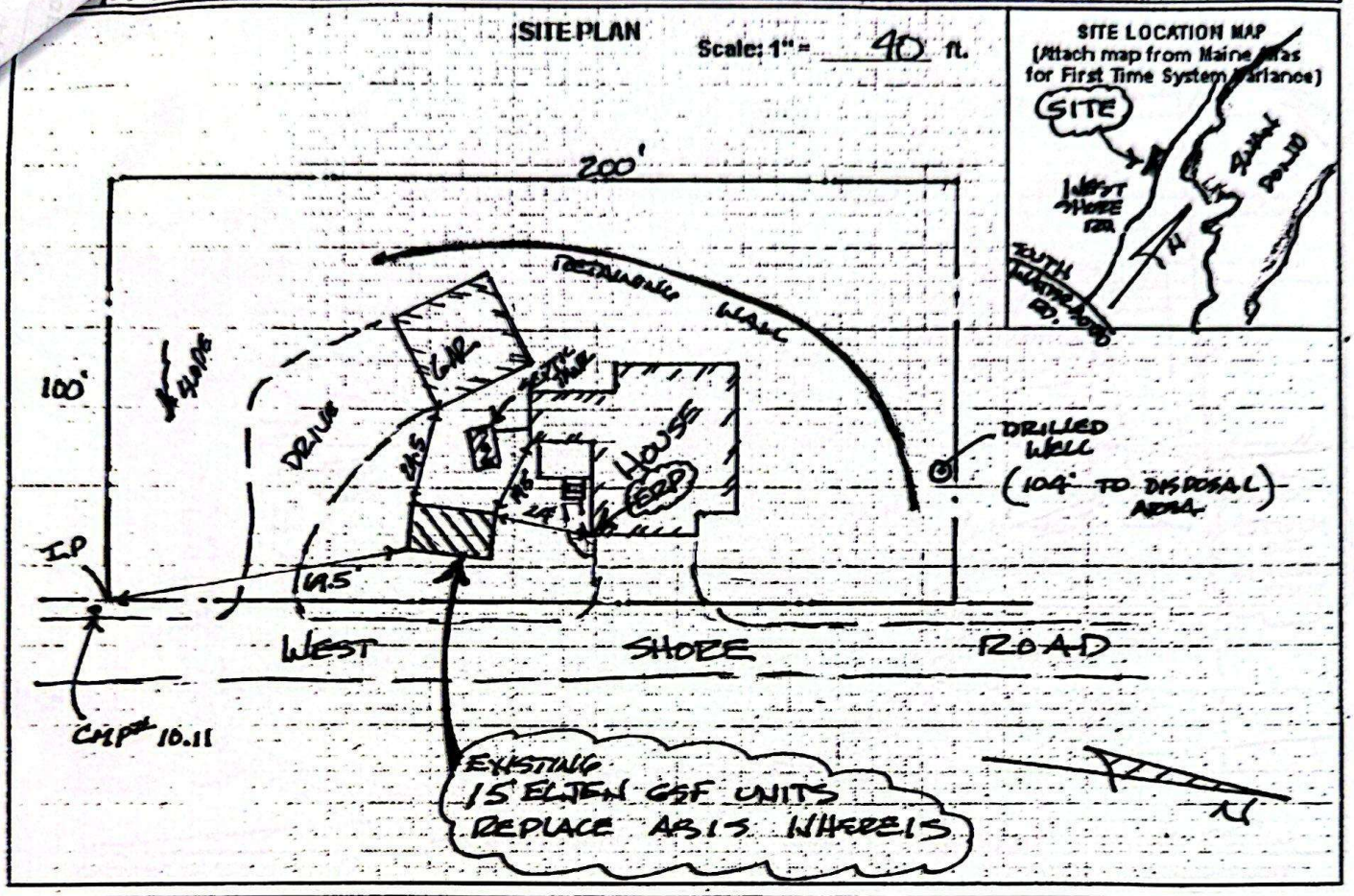
ACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Plantation	Street, Road, Subdivision	Owner or Applicant Name
YMAN	72 WEST SHORE RD.	SANDRA HOULE-COLLARD

SITE PLAN

Scale: 1" = 40 ft.



SITE LOCATION MAP

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

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

Observation Hole # TP1 ■ Test Pit ☐ Boring

____" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	SANDY LOAM		DARK BROWN	
6			DARK YELLOW BROWN	
12	LOAMY SAND	FRIABLE		
18	LOAMY SAND & SAND		YELLOW BROWN	FEW FAINT
24				
30				
36		SOMEWHAT FIRM	LIGHT OLIVE BROWN	FEW DISTINCT
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	C		24"	■ Groundwater ☐ Restrictive Layer ☐ Bedrock

Observation Hole # ____ ☐ Test Pit ☐ Boring

____" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0				
6				
12				
18	*NOTE: TEST PIT INFO BY ALBERT FRICK ASSOCIATES PLAN DATED 11-3-2000			
24				
30				
36				
42				
48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
				☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Mark A. Tolman — Site Evaluator Signature

171 — SE#

10-17-19 — Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY LOCATION

City, Town, or Plantation: LYMAN

Street or Road: WEST SHORE ROAD

Subdivision Lot #:

>> Caution: Permit Required – Attach in Space Below <<

LYMAN 2143 TOWN COPY

Date Permit Issued: 11/5/00

$ 100.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature

L.P.I. # 329.6

OWNER/APPLICANT INFORMATION

Name (last, first, MI): MOULE PAUL (Owner)

Mailing Address of ■ Owner ☐ Applicant: 454 WEST KIMBERLY WAY GLENDALE, AZ 85308

Daytime Tel. #: 1 (623) 561-8402

Municipal Tax Map # 21 Lot # 11

Owner or Applicant Statement

I state 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.

[signature] 11/15/00

Signature of Owner/Applicant Date

Caution: Inspections Required

I have inspected the installation of the approved treatment tank and find it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

[signature] 6-12-01

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

1. ☐ First Time System
2. ■ Replacement System
   Type Replaced: PIT PRIVY
   Year Installed:
3. ☐ Expanded System
   a. ☐ One time exempted
   b. ☐ Not exempted
4. ☐ Experimental System
5. ☐ Seasonal Conversion

SIZE OF PROPERTY

20,000 ■ sq ft ☐ acres

SHORELAND ZONING

☐ Yes ■ No

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 Approval

DISPOSAL SYSTEM TO SERVE

1. ■ Single Family Dwelling Unit, No. of Bedrooms: 2
2. ☐ Multiple Family Dwelling, No. of Units:
3. ☐ Other SPECIFY

DISPOSAL SYSTEM COMPONENT(S)

1. ■ Complete Non Engineered System
2. ☐ Primitive System(graywater & pit 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(2000gpd)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal field (only)
11. ☐ Pre-treatment, specify:
12. ☐ Miscellaneous components

PROPOSED TYPE OF WATER SUPPLY

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

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

a. ■ Concrete
b. ■ Regular
c. ☐ Low Profile
2. ☐ Plastic
3. ☐ Other

APAC Tank 1000 gallons

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN

B C 1

At Observation Hole # TP 1

Depth 24" Elevation

OF MOST LIMITING SOIL FACTOR

DISPOSAL FIELD TYPE & SIZE

1. ☐ Stone Bed 2. Stone Trench
3. ■ Proprietary Device
   a. ☐ Cluster array c. ■ Linear
   b. ■ Regular d. ☐ H-2C loader
4. ☐ Other:

SIZE 720 ■ sq. ft. ☐ lin. ft.

15 ELJEN IN-DRAIN UNITS

DISPOSAL FIELD SIZING

1. ☐ Small - 3.0 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

GARBAGE DISPOSAL UNIT

1. ■ No 3. ☐ Maybe
2. ☐ Yes >> Specify one below:
   a. ☐ Multi-compartment tank
   b. ☐ Tank in series
   c. ☐ Increase in tank capacity
   d. ☐ Filter on tank outlet

PUMPING

1. ☐ Not required
2. ■ May be required
3. ☐ Required >>Specify only for engineered or experimental systems:

DOSE: Gallons

DESIGN FLOW

180 gallons per day

BASED ON:

1. ■ Table 501.1 (dwelling units)
2. ☐ Table 501.2 (other facilities)

SHOW CALCULATIONS for these facilities:

2 BEDROOMS AT 90 GALLONS PER DAY EACH

3. ☐ Section 503.0 (water readings) ATTACH WATER METER DATA

SITE EVALUATOR STATEMENT

I Certify that on 10/18/00 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10 144A CMR 241).

Albert Frick CSE 11/2/2000

Site Evaluator Signature Date

ALBERT FRICK ASSOCIATES - 864 COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

Page 1 of 3

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COPY to TED POIRIER..
229-8100.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

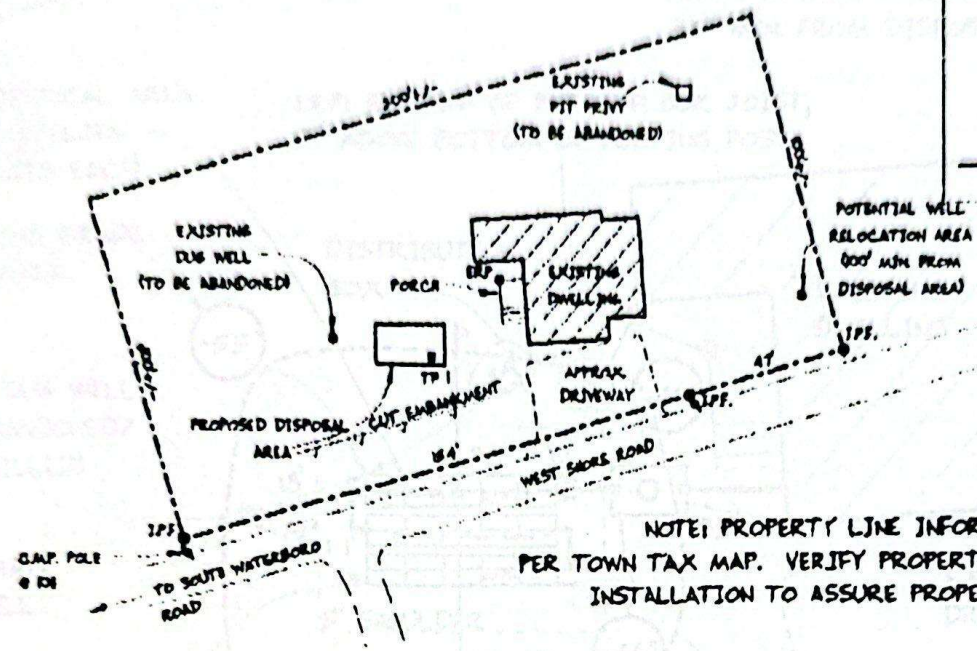
Department of Human Services
Division of Health Engineering

Town, City, Plantation: LYMAN

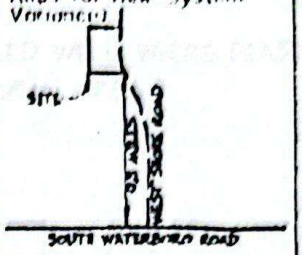
Street, Road, Subdivision: WEST SHORE ROAD

Owner's Name: PAUL POULE

SITE PLAN — Scale 1" = 50 ft. or as shown



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



NOTE: PROPERTY LINE INFORMATION PER TOWN TAX MAP. VERIFY PROPERTY LINES PRIOR TO INSTALLATION TO ASSURE PROPER SETBACKS

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	Texture	Consistency	Color	Mottling
0	SANDY LOAM		DARK BROWN	
10	LOAMY SAND	FRIABLE	DARK YELLOW BROWN	
20	LOAMY SAND AND SAND		YELLOW BROWN	FEW, FAINT
40		SOMEWHAT FIRM	LIGHT OLIVE BROWN	FEW, DISTINCT
50	LIMIT OF EXCAVATION			

Soil Classification	Slope	Limiting Factor	■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth
Profile: B Condition: C	%	24"	

Observation Hole: ☐ Test Pit ☐ Boring
Depth of Organic Horizon Above Mineral Soil:

Depth Below Mineral Soil Surface	Texture	Consistency	Color	Mottling
0				
10				
20				
40				
50				

Soil Classification	Slope	Limiting Factor	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth
Profile: Condition:	%		

Albert Frick
Evaluator Signature

K-8
Soil

11/2/2000
Date

ALBERT FRICK ASSOCIATES - 96A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-6563

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HHE-200 Rev. 2/97

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

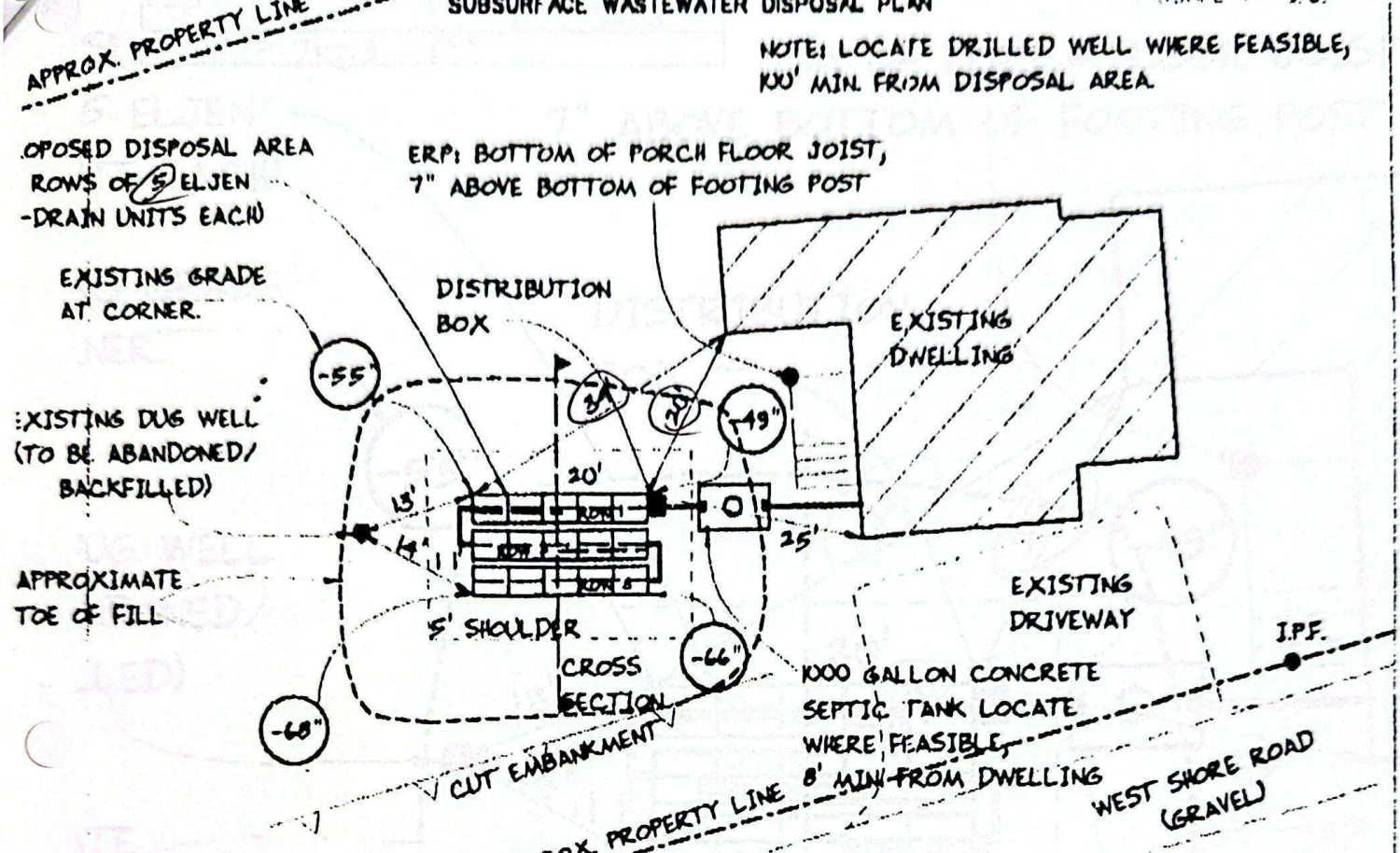
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
LYMAN	WEST SHORE ROAD	PAUL HOULE

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20.5'

NOTE: LOCATE DRILLED WELL WHERE FEASIBLE, XXX' MIN. FROM DISPOSAL AREA



FILL REQUIREMENTS

Depth of Fill (Upslope): ± 17" - 25"
Depth of Fill (Downslope): ± 26" - 28"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation
Top of Distribution Pipe or Proprietary Device
Bottom of Disposal Area

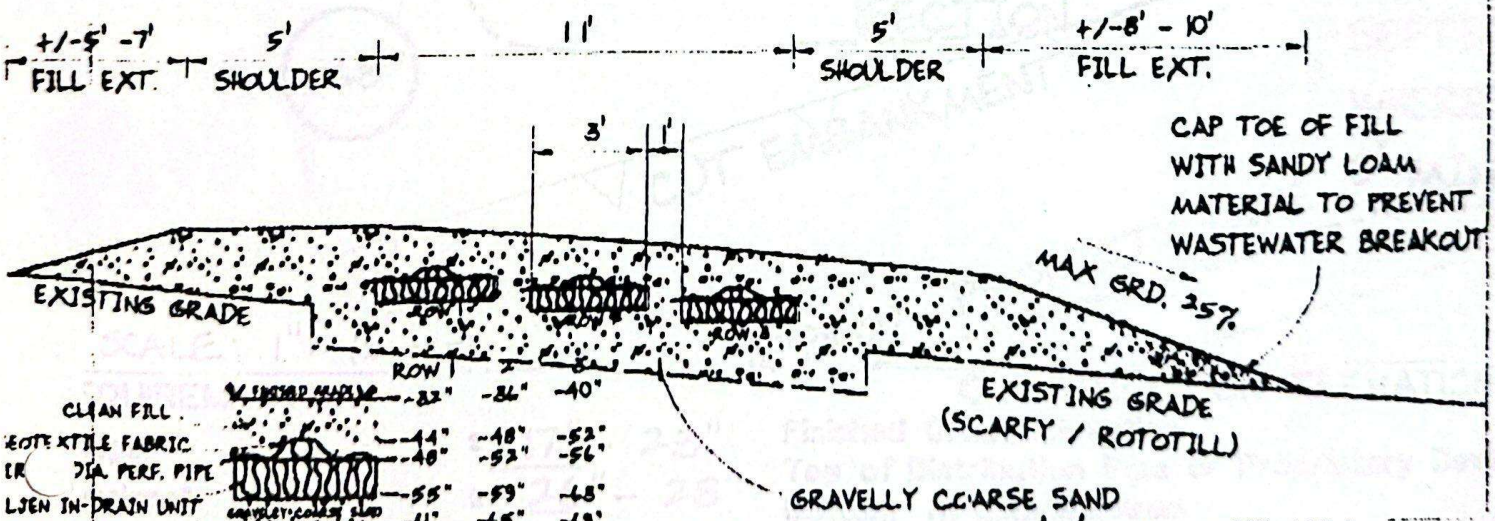
SEE DETAIL BELOW

ELEVATION REFERENCE POINT

Location & Description: BOTTOM OF PORCH FLOOR JOIST, 7" ABOVE BOTTOM OF FOOTING POST
Reference Elevation: 00"

SCALE:
VERTICAL: 1" = 5 FT
HORIZONTAL: 1" = 5 FT

DISPOSAL AREA CROSS SECTION



Albert Frick — 11/2/2000

Site Evaluator Signature — Date

Page 3 of 3
HHE-200 Rev. 7/97

ALBERT FRICK ASSOCIATES - 95A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

Post-it® Fax Note 7671	Date 6/12/01	# of pages ▶
To DON LAGRANGE	From MATT LOGAN	
Co./Dept. TOWN OF LYMAN	Co. ALBERT FRICK ASSOC.	
Phone #	Phone # 839-5563	
Fax # 499-7563	Fax #	

NOTE: LOC
100' MIN. F

SF

FOM OF PORCH FLOOR JOIST,
7" ABOVE BOTTOM OF FOOTING POST

S ELJEN
ITS EACH)

NG GRADE
NER.

DISTRIBUTION
BOX

UG WELL
NDONED/
LED)

ATE
L

-55"

34"

20"

49"

20'

13'

14'

ROW 1

ROW 2

ROW 3

25'

*1 — 44
*2 — 481
*3 — 524

5' SHOULDER

CROSS
SECTION

-66"

-68"

1000 G
SEPTIC
WHERE
8' MIN

CUT EMBANKMENT

APPROX. PROPERTY LINE

SCALE: 1" = 10' +-

EQUIREMENTS

		CONSTRUCTION ELEVATION
lope)	± 17" - 23"	Finished Grade Elevation
nslope)	± 26" - 28"	Top of Distribution Pipe or Proprietary Devi
		Bottom of Disposal Area

DISPOSAL AREA CROSS SECTION