# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Service
Division of Health Engineering, 10 SH
(207) 287-5672 Fax: (207) 287-316

## PROPERTY LOCATION

| | |
|---|---|
| City, Town, or Plantation | CARMEL |
| Street or Road | COOK ROAD |
| Subdivision, Lot # | |

## >> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

CARMEL PERMIT # 1624 TOWN COPY

Date Permit Issued: 08/08/05 $ 110.00 ☐ If FEE Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1289

## OWNER/APPLICANT INFORMATION

| | |
|---|---|
| Name (last, first, MI) | PARTRIDGE, DEREK ■ Owner ☐ Applicant |
| Mailing Address of Owner/Applicant | |
| Daytime Tel. # | |

Municipal Tax Map # _____ Lot # _____

**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 _____ 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. _____ (1st) date approved

Local Plumbing Inspector Signature _____ (2nd) date approved

## PERMIT INFORMATION

### TYPE OF APPLICATION

■ 1. First Time System
☐ 2. Replacement System
Type replaced: _____
Year installed: _____
☐ 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 Disposal Area
☐ 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

2 ☐ SQ. FT. ■ ACRES

### SHORELAND ZONING

☐ Yes ■ No

### 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

## 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: 1050 ■ 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

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

### SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
I I C I I
Pit Observation Hole # 1
Depth 23"
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. f.t / 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

## SITE EVALUATOR STATEMENT

I certify that on AUG 1, 2005 (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 _____ SE # 123 Date 8-3-05

GEORGE A. MCDONALD, JR
Site Evaluator Name Printed

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

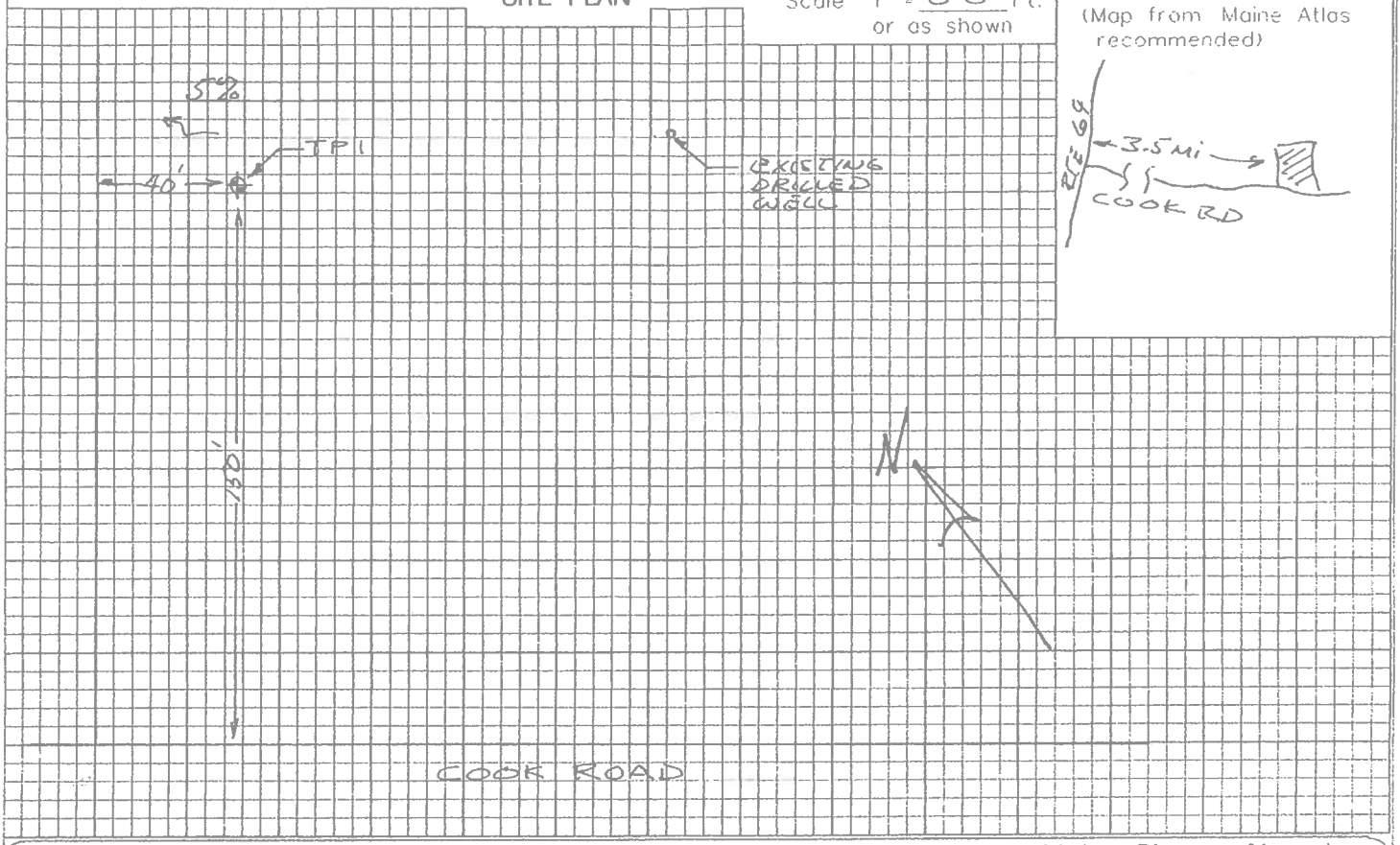
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Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: CARMEL | Street, Road Subdivision: COOK ROAD | Owner's Name: DEREK PARTRIDGE

## SITE PLAN

Scale 1" = 50 Ft. or as shown




## SITE LOCATION PLAN

(Map from Maine Atlas recommended)




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

Observation Hole 1 ☒ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0 | LOAM | FRIABLE | MEDIUM BROWN | |
| 10 | LOAM | FRIABLE | RED BROWN | |
| 20 | LOAM TO SILT LOAM | FRIABLE<br>RESTRICTIVE | OLIVE BROWN | COMMON DISTINCT |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

| Soil Classification | Slope | Limiting Factor | |
|---|---|---|---|
| Profile: 1 / Condition: C | 5 % | 23" | ■ Ground Water<br>☐ Restrictive Layer<br>☐ Bedrock<br>☐ Pit Depth |

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
| 0 | | | | |
| 10 | | | | |
| 20 | | | | |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

| Soil Classification | Slope | Limiting Factor | |
|---|---|---|---|
| Profile: _____ / Condition: _____ | _____ % | _____ " | ☐ Ground Water<br>☐ Restrictive Layer<br>☐ Bedrock<br>☐ Pit Depth |

Site Evaluator Signature | 123 SE # | 7-3-05 Date

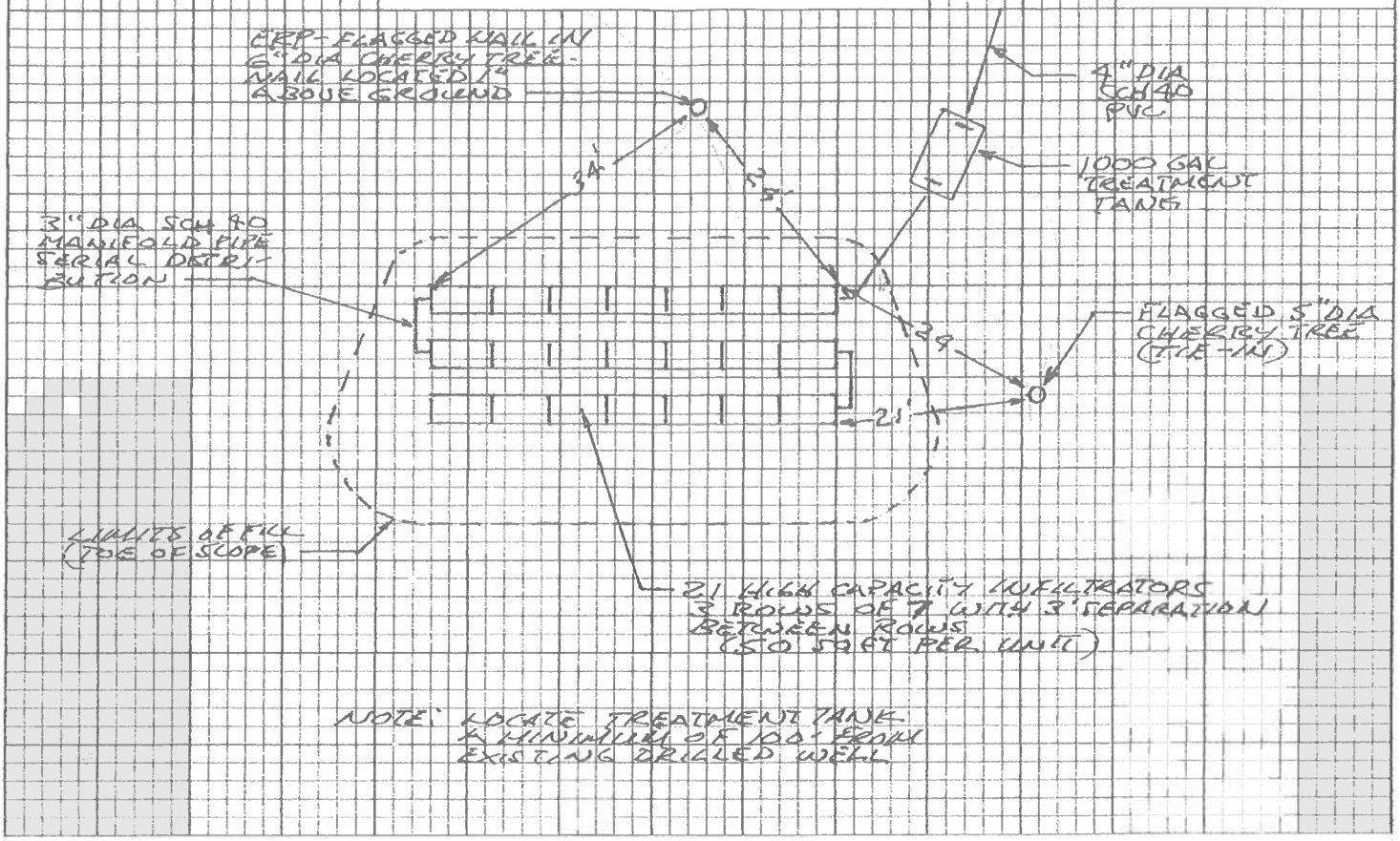
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|---|---|---|
| CARMEL | COOK ROAD | DEREK PARTRIDGE |

## SUBSURFACE WASTEWATER DISPOSAL PLAN

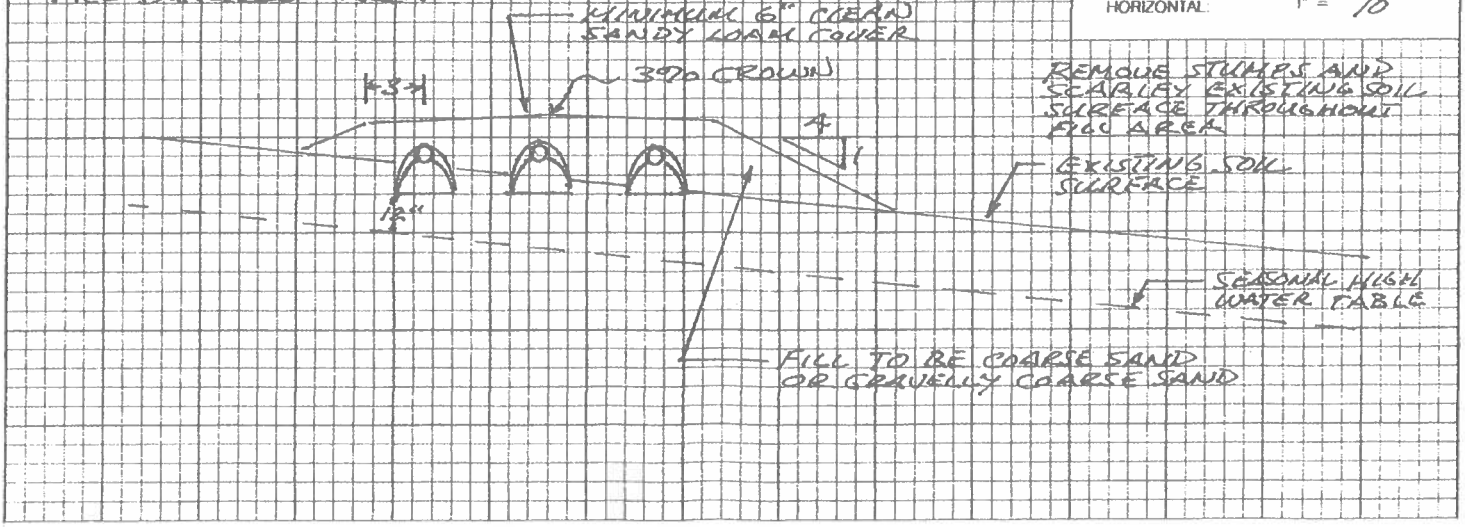
SCALE 1" = 20 FT.




| FILL REQUIREMENTS | | CONSTRUCTION ELEVATIONS | | ELEVATION REFERENCE POINT |
|---|---|---|---|---|
| Depth of Fill (Upslope) | 13" | Finished Grade Elevation | Mean - 28" | Location & Description FLAGGED NAIL IN 6" DIA CHERRY TREE |
| Depth of Fill (Downslope) | 24" | Top of Distribution Pipe or Proprietary Device | -34" | |
| | | Bottom of Disposal Area | -50" | Reference Elevation 100" |

## DISPOSAL AREA CROSS SECTION

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




Site Evaluator Signature | 123 SE # | 7-3-05 Date