New 2012

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

SUMNER PERMIT # 421 TOWN COPY

Date Permit Issued: 8/30/11 $ 115 ☐ If Double Fee Charged

Local Plumbing Insector Signature L.P.I. # 01292

Local Plumbing Inspector Signature

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.

PROPERTY LOCATION

City, Town or Plantation	Sumner
Street or Road	Redding Rd.
Subdivision, Lot #	

Municipal Tax Map # R20 Lot # 41A

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Church, Ben ☒ Owner ☐ Applicant

Mailing Address of Owner / Applicant: c/o Gary Searles, 377 Redding Rd., Sumner, ME. 04292

Daytime Tel. #: 207 - 515 - 3999

Owner 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 of Owner or Applicant 8/30/11 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.

Local Plumbing Inspector Signature (1st) Date Approved 8/30/11 (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

☒ 1. First Time System
☐ 2. Replacement System
Type Replaced _____
Year Installed _____
☐ 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 Variance

DISPOSAL SYSTEM COMPONENT(S)

☒ 1. Complete Non-Engineered System
☐ 2. Primitive System (graywater & Alt. toilet)
☐ 3. Alternitive 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)
☐ 9. Engineered Treatment Tank (only)
☐ 10. Engineered Disposal Field (only)
☐ 11. Pre-treatment, specify:_____
☐ 12. Miscellaneous Components

SIZE OF PROPERTY

40+/- ☐ 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 FUTURE

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

☒ 1. Concrete
☒ a. Regular
☐ b. Low Profile
☐ 2. Plastic
☐ 3. Other

CAPACITY 1000 galllons

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 600 ☒ 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

*see "must read" note on pg 2

DESIGN FLOW

180 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
3 / B
of Observation Hole
Depth 36 "
or of Most Limiting Factor

DISPOSAL AREA 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

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

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 24 m 32.28 s N
Lon. 70 d 29 m 30.24 s W
of gps, state margin of error: 15+/- ft.

SITE EVALUATOR'S STATEMENT

I Certify that on 8 / 11 / 11 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).

Site Evaluator Signature 67 SE # 8 / 12 / 11 Date

W. HORTON Site Evaluator Name Printed

647- 8798 Telephone #

meldrum@megalink.net E-mail Address

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

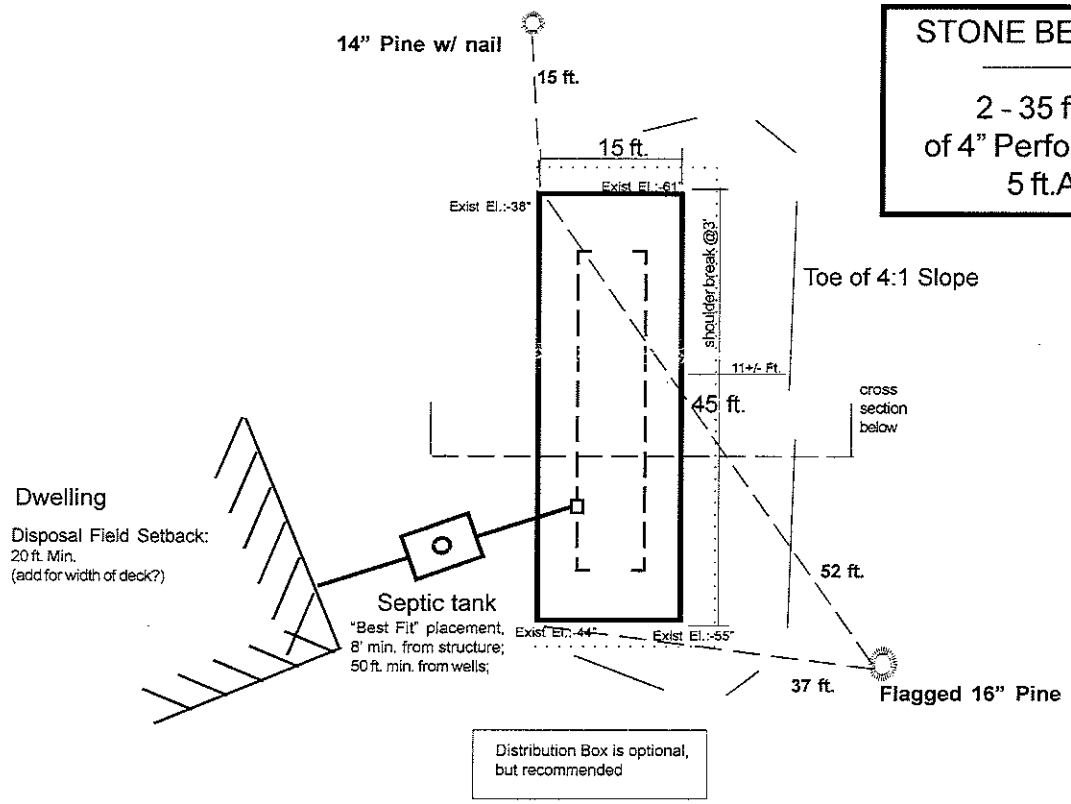
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-3165

Town, City or Plantation	Street, Road, Subdivision	Owner or Applicant Name
Sumner	Redding Rd.	B. Church

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = **20** Ft.



FILL REQUIREMENTS

Depth of Backfill (Upslope) 0 "
Depth of Backfill (Downslope) 13+/- "
DEPTH AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation	-38 "
Top of Distribution Pipe or Proprietary Devices	-51 "
Bottom of Disposal Area	-62 "

ELEVATION REFERENCE POINT

Location & Description nail in 14" Pine

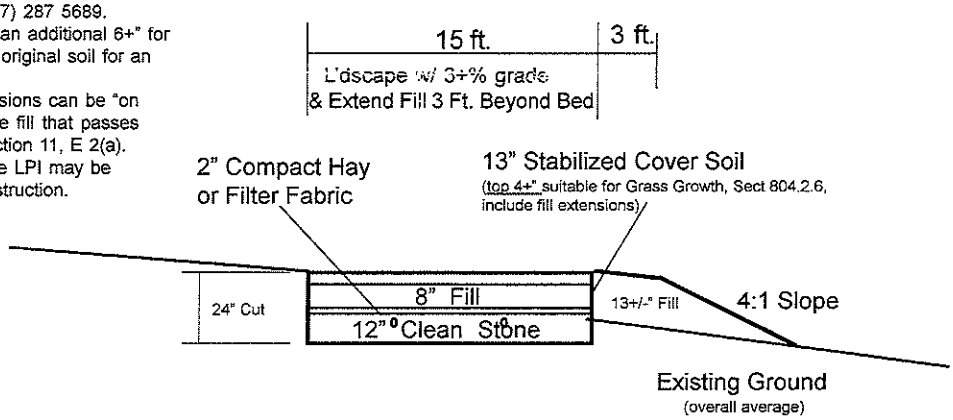
Reference Elevation is **0.0"** or: 20"+/- above ground

Construction Notes:

1. General Installation procedure shall follow CODE Section II. Available from State: (207) 287 5689.
2. Beneath disposal field, excavate an additional 6+" for gravelly or coarse sand, mixed into original soil for an interface transitional zone.
3. Fill above stone and for fill extensions can be "on site" soils, if sandy materials, or use fill that passes field test as described in CODE Section 11, E 2(a).
4. Site Preparation Inspection by the LPI may be required prior to Disposal Field construction.

DISPOSAL AREA CROSS SECTION

Scales:
Vertical: 1" = **5** Ft.
Horizontal: 1" = **10** Ft.



Actual ground is irregular and the fill requirements, as shown, are approximate. Installer shall review site for his estimate.

Site Evaluator Signature	SE #	Date
	67	8 / 12 / 11