10207

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div. Environmental Health, 11SHS
(207) 287-2070 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation: OLD ORCHARD BEACH
Street or Road: 11 CHESTNUT STREET
Subdivision, Lot #:

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: OLD ORCHARD BEACH Permit #: 5760
Date Permit Issued: 4/27/26 Fee: $265.00 Double Fee Charged [ ]
Local Plumbing Inspector Signature L.P.I. #: 1262
Fee: $ 62.50 state min fee $ 187.50 Locally adopted fee
Copy: [ ] Owner [X] Town [ ] State

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 # 403 Lot # 1 Block B

OWNER/APPLICANT INFORMATION

Name (last, first, MI): LOVEJOY, PETER (Owner/Applicant)
Mailing Address of Owner/Applicant: 6 Hemlock BLVD. O.O.B. ME. 04064
Daytime Tel. #: 468-0570

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

RECEIVED APR 27 2026 By

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 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
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: 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 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
5 / B
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. f.t / 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. _____ d _____ m _____ s
Lon. _____ d _____ m _____ s
if g.p.s, state margin of error:

SITE EVALUATOR STATEMENT

I certify that on 12/7/25 (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).

James G. Hancill — 247 — DEC. 7, 2025
Site Evaluator Signature — SE # — Date

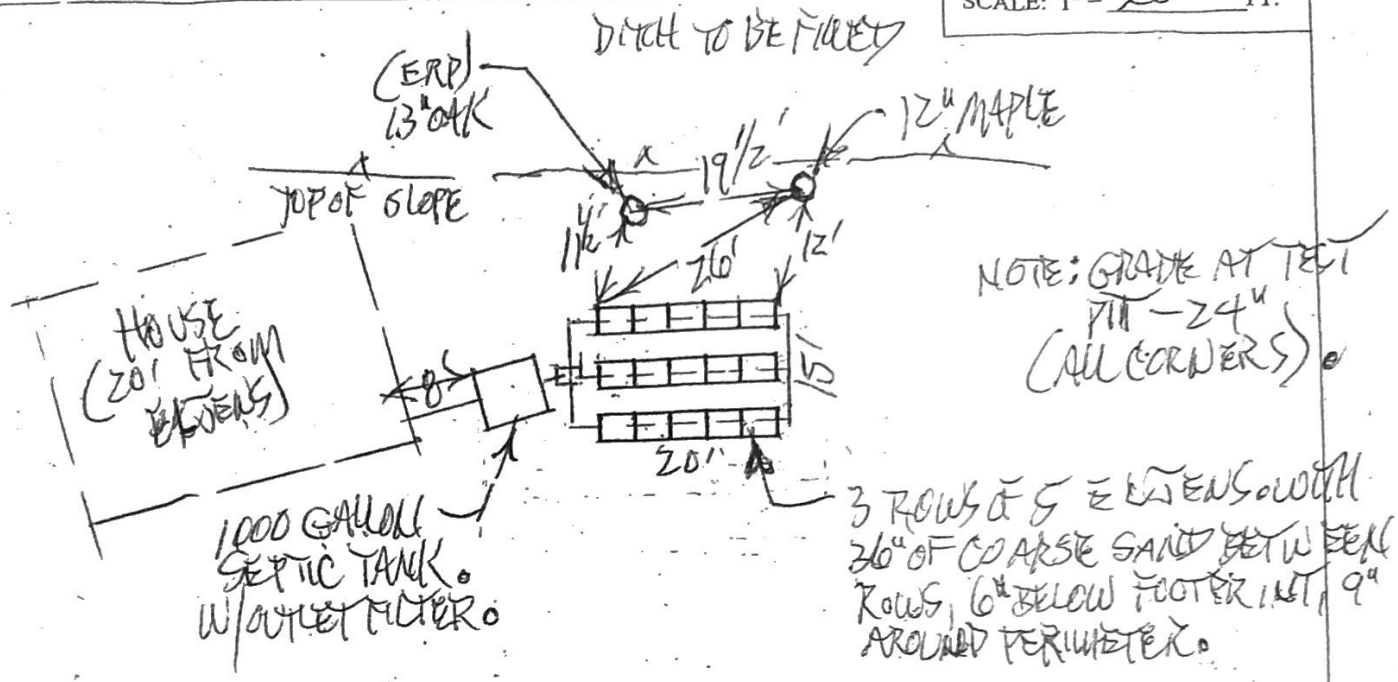
JAMES G. HANCILL — 712-8173 —
Site Evaluator Name Printed — Telephone Number — E-mail Address

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION	Maine Dept. Health & Human Services Division of Environmental Health (207) 287-5672 Fax: (207) 287-3165
Town, City, Plantation: OLD ORCHARD BEACH Street, Road, Subdivision: CHESTNUT AVE.	Owner's Name: LOVEJOY, PETER

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



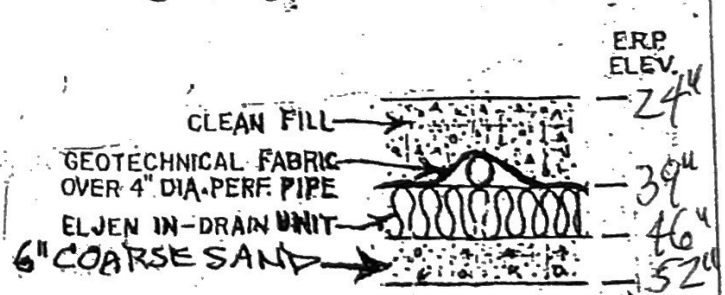
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
(ABOVE GRADE) Depth of Fill (Upslope)	0"	Finished Grade Elevation	-24"	Location & Description: NAILING 13" OAK, 30" OFF GRADE.
		Top of Distribution Pipe or Proprietary Device	-35"	
Depth of Fill (Downslope)	0"	Bottom of Disposal Area (6" SAND BASE)	-52"	Reference Elevation: AT 00"

DISPOSAL AREA CROSS SECTION

Scale
Horizontal 1" = 5 ft.
Vertical 1" = 10 ft.



EXCAVATE 12" BELOW 6" COARSE SAND BASE. BLEND GRAVELLY COARSE SAND 4" INTO SOIL.



DETAIL (NO SCALE)

[signature] 247 DEC. 7, 2025

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation: OLD ORCHARD BEACH
Street, Road, Subdivision: CHESTNUT AVE.
Owner's Name: LOVEJOY, PETER

SITE PLAN Scale 1" = _____ ft. or as shown

SEE ATTACHED SURVEY

SITE LOCATION PLAN
(map from Maine Atlas recommended)



SOIL 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	LOAMY SAND	FRIABLE	YELLOWISH BROWN 10YR 5/4	
10	TO		TO	
20	SAND		YELLOW BROWN	NONE EVIDENT TO 48
30				
40				
50				

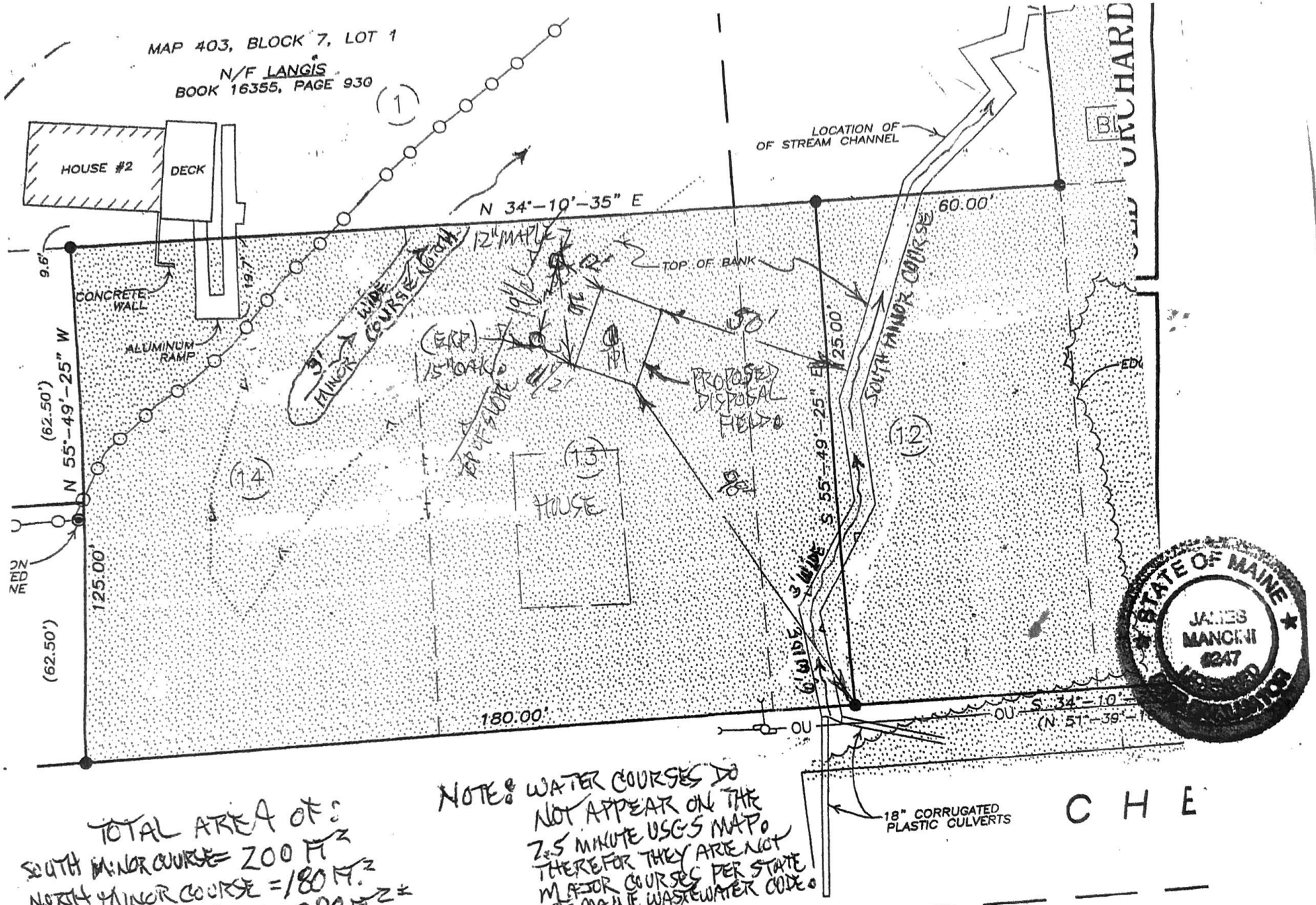
Soil Classification	Slope	Limiting Factor	
Profile: S / Condition: B	____%	48"	[ ] Ground Water [ ] Restrictive Layer [ ] Bedrock [X] Pit Depth

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 [ ] Restrictive Layer [ ] Bedrock [ ] Pit Depth

James H. Marcum — Site Evaluator Signature
247 — SE #
Dec. 7, 2025 — Date



TOTAL AREA OF:
SOUTH MINOR COURSE = 200 FT.²
NORTH MINOR COURSE = 180 FT.²
TOTAL WET AREA = 380 FT.² ±

NOTE: WATER COURSES DO NOT APPEAR ON THE 7.5 MINUTE USGS MAP. THEREFOR THEY ARE NOT MAJOR COURSES PER STATE OF MAINE WASTEWATER CODE.

May 1, 2025

James M. Mancini
S.E. # 247