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7203

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation	Biddeford
Street or Road	Pool Street
Subdivision, Lot #	Lot 1 44 - 21

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Brown, Shawn — Owner [ ] Applicant [✓]
Mailing Address of Owner/Applicant	5 Buckthorn Circle Saco 04072
Daytime Tel. #	229-2985

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: 11-28-22

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City _____ Permit # _____

Date Permit Issued _____

Biddeford Permit # 8003 City Copy
Date 12/13/22 Fee: $ 265-
LPI 1225 Sig _____

Local Plumbing Fee: $ _____
Copy: [ ] Owner

The Subsurface W... 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 # _____ Lot # _____

CAUTION: INSPECTION REQUIRED
I have inspected the installation authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Local Plumbing Inspector Signature — (1st) date approved — (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 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
50000 (SQ FT) ACRES

SHORELAND ZONING
(Yes) No

DISPOSAL SYSTEM TO SERVE
(1. Single Family Dwelling Unit) No. of Bedrooms: 4
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: 1,000 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: 1200 (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
360 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
7 / C
at Observation Hole # TP1
Depth 18 "
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. 43 d 28 m 46 s
Lon. 70 d 25 m 17 s
if g.p.s, state margin of error: 15

SITE EVALUATOR STATEMENT

I certify that on 10/14/22 (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 #	Date
Hope Hampton	427	10/14/22
Site Evaluator Name Printed	Telephone Number	E-mail Address
	207-632-8125	hamptonsiteeval@gmail.com

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

Initial Initial

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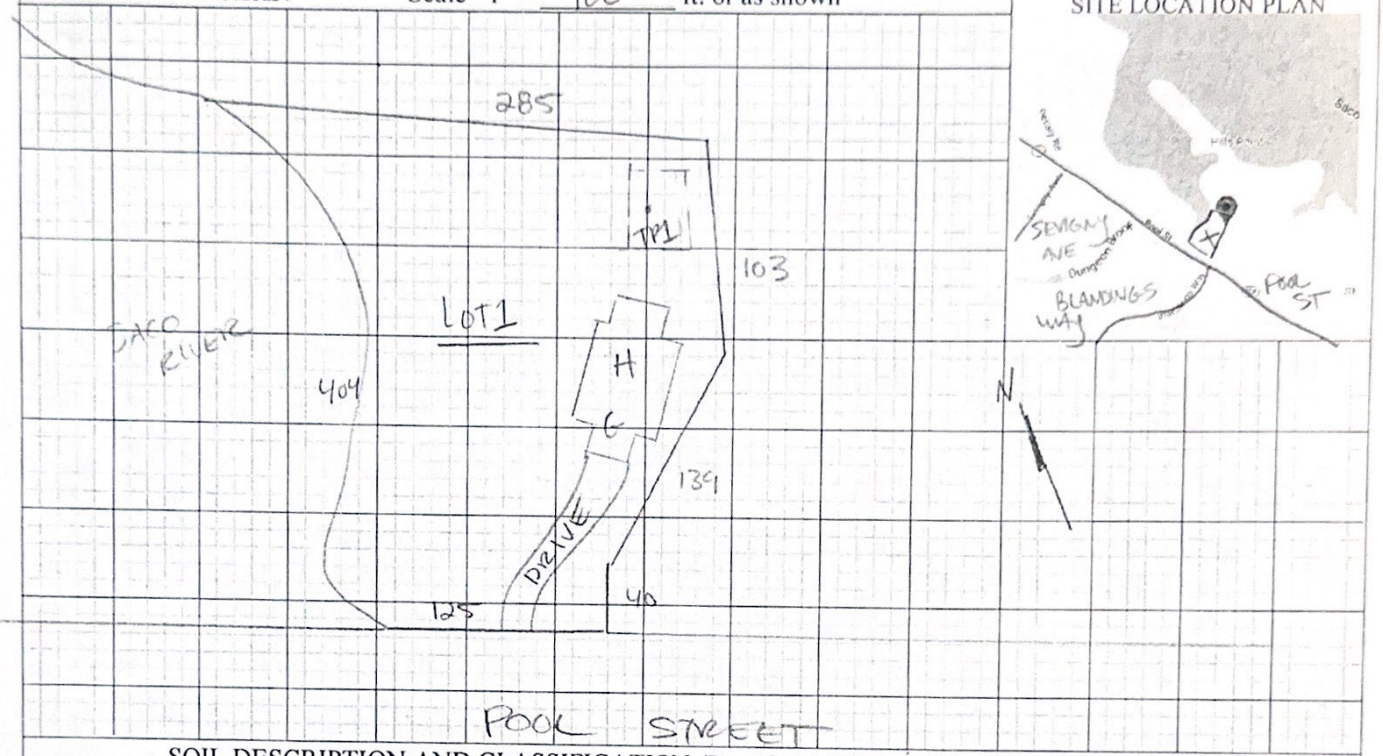
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Biddeford	Pool Street Lot 1	Brown, Shawn

SITE PLAN

Scale 1" = 100 ft. or as shown



SITE LOCATION PLAN

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
0–10	Loamy Sand	Friable	Dark Brown	
10–20	Loamy Sand	Friable	Yellow Brown	
20–30	Silty Clay Loam	Firm	Gray	Common and Distinct
30–40				
40–50				

Soil Classification	Slope	Limiting Factor	
7 Profile / C Condition	2 %	18"	[ ] Ground Water [ ] Restrictive Layer [ ] Bedrock [ ] 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				
10–20				
20–30				
30–40				
40–50				

Soil Classification	Slope	Limiting Factor	
_____ Profile / _____ Condition	_____ %	_____"	[ ] Ground Water [ ] Restrictive Layer [ ] Bedrock [ ] Pit Depth

Site Evaluator Signature | 427 SE # | 10/14/22 Date

Initial Initial

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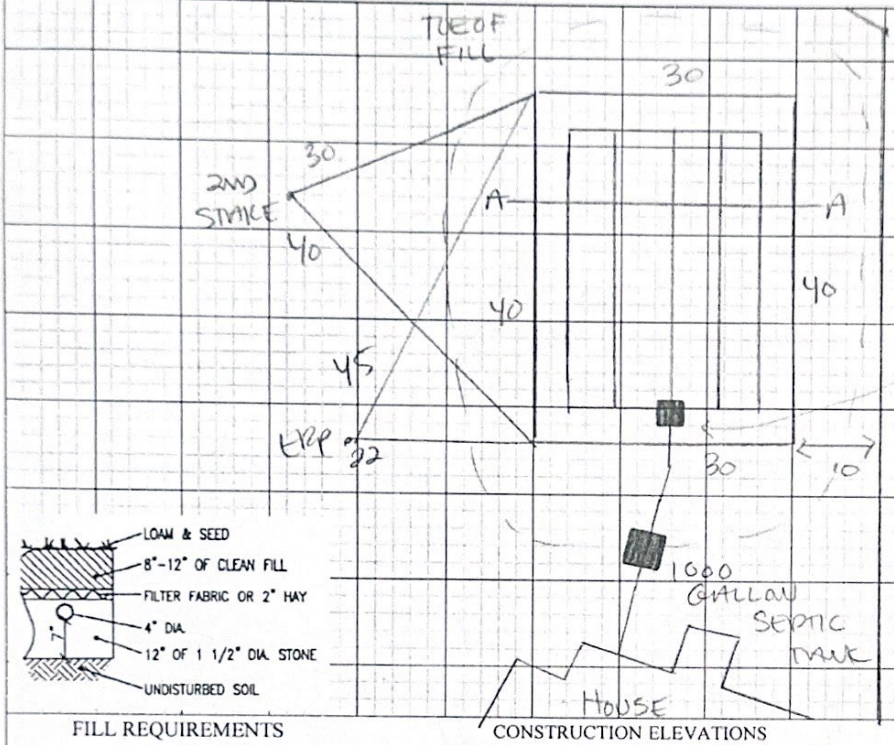
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(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision		Owner's Name
Biddeford	Pool Street	Lot 1	Brown, Shawn

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.



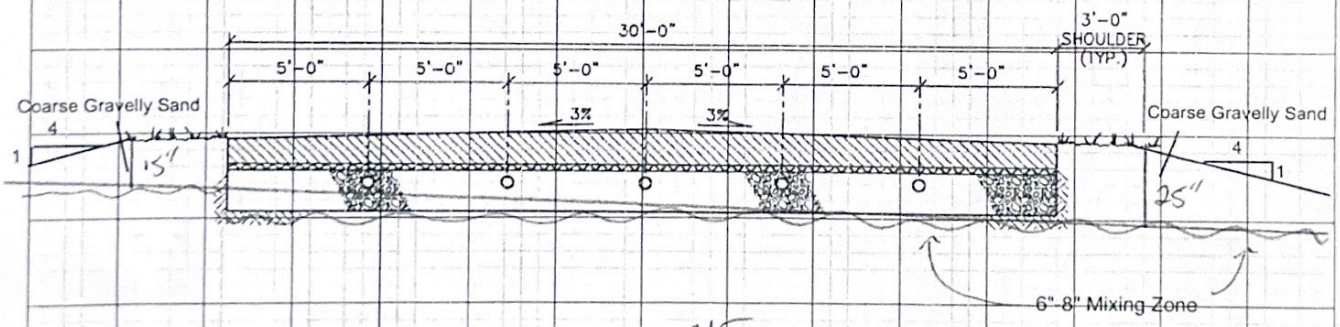
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	15	Finished Grade Elevation	-24	Location & Description:	Top of grade stake, 40" above grade
Depth of Fill (Downslope)	25	Top of Distribution Pipe or Proprietary Device	-34	Reference Elevation:	0
		Bottom of Disposal Area	-45		

Note: Materials and installation shall be in accordance with Maine Subsurface Wastewater Disposal Rules dated 08/15 as amended.

DISPOSAL AREA CROSS SECTION

Scale
Horizontal 1" = 6 ft.
Vertical 1" = 4 ft.

Note: All ground to be filled must be scarified



Bottom of Bed: -45

Jaya Lloyd — Site Evaluator Signature
427 — SE #
10/14/22 — Date

Initial Initial