

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3826

PROPERTY ADDRESS	
Town Or Plantation	Kennebunk
Street	Lot 10 Falls Settlement
Subdivision Lot #	
PROPERTY OWNERS NAME	

Last: Kasprzak	First: INC
Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	No. Waterboro Maine

KENNEBUNK	PERMIT # 871	TOWN COPY
Permit Issued: 18-29-86	\$ 40	FEE Double Fee Charged
Local Plumbing Inspector Signature	L.P.I. # 0680	

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

Signature of Owner/Applicant: David J. P. 8/25/86

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- ☒ NEW SYSTEM
- ☐ REPLACEMENT SYSTEM
- ☐ EXPANDED SYSTEM
- ☐ SEASONAL CONVERSION
- ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- ☒ NO RULE VARIANCE REQUIRED
- ☐ NEW SYSTEM VARIANCE
Attach New System Variance Form
- ☐ REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- ☐ Requiring Local Plumbing Inspector Approval
- ☐ Requires State and Local Plumbing Inspector Approval

INSTALLATION IS:
COMPLETE SYSTEM

- ☒ NON-ENGINEERED SYSTEM
- ☐ PRIMITIVE SYSTEM
(Includes Alternative Toilet)
- ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- ☐ TREATMENT TANK (ONLY)
- ☐ HOLDING TANK
- ☐ ALTERNATIVE TOILET (ONLY)
- ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
- ☐ ENGINEERED DISPOSAL AREA (ONLY)
- ☐ SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- ☐ BED
- ☐ CHAMBER
- ☐ TRENCH
- ☐ OTHER: _____

DISPOSAL SYSTEM TO SERVE:

- ☒ SINGLE FAMILY DWELLING
- ☐ MODULAR OR MOBILE HOME
- ☐ MULTIPLE FAMILY DWELLING
- ☐ OTHER _____ SPECIFY _____

SIZE OF PROPERTY

ZONING

3.1 AC

YES

TYPE OF WATER SUPPLY

Well

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☒ SEPTIC: ☒ Regular ☐ Low Profile
- ☒ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION

- ☒ NONE
- ☐ LOW VOLUME TOILET
- ☐ SEPARATED LAUNDRY SYSTEM
- ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

- ☒ NOT REQUIRED
- ☐ MAY BE REQUIRED
(DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)
- ☐ REQUIRED

DOSE: _____ GALS.

CRITERIA USED FOR
DESIGN FLOW (BEDROOMS, SEATING,
EMPLOYEES, WATER RECORDS, ETC.)

3 Bedroom

SOIL CONDITIONS USED FOR
DESIGN PURPOSES

PROFILE: 5 CONDITION: B

DEPTH TO
LIMITING
FACTOR: 0000SIZE RATINGS USED FOR
DESIGN PURPOSES

- ☐ SMALL
- ☒ MEDIUM
- ☐ MEDIUM-LARGE
- ☐ LARGE
- ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

- ☐ BED 800 Sq. Ft.
- ☐ CHAMBER _____ Sq. Ft.
- ☐ TRENCH _____ Linear Ft.
- ☐ OTHER: _____

DESIGN
FLOW: 270

(GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 7-21-86 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

Signature: Kenneth Gaden

Site Evaluator Signature

06073

SE#

7-21-86

Date

Page 1 of 3

HHE-200 Rev.1/84

* Local Plumbing Inspector Signature if a Local Site Evaluation Waiver under a Local Option

**Department of Human Services
Division of Health Engineering**

Any. Plantation

Кеннебанк

Street, Road, Subdivision

LOT 10 ~~2~~ old Falls settlement

Owners Name

Owners Name
Kasprzak INC.

SITE PLAN

Scale 1" = 100 Ft.

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

old Falls Settlement

Portage wa

LOT 10

Portage Way

33

Druck

154

TR. 5B.
SOIL
00%

334

254

(Location of Observation Holes Shown Above)

Observation Hole _____ ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

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

Kenneth J. Guden
Site Evaluator Signature

20073
SE#

7-29-84
Date

Granted *[Signature]*

Application No. *86-422*

FACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Kennebunk, ME

Street, Road, Subdivision

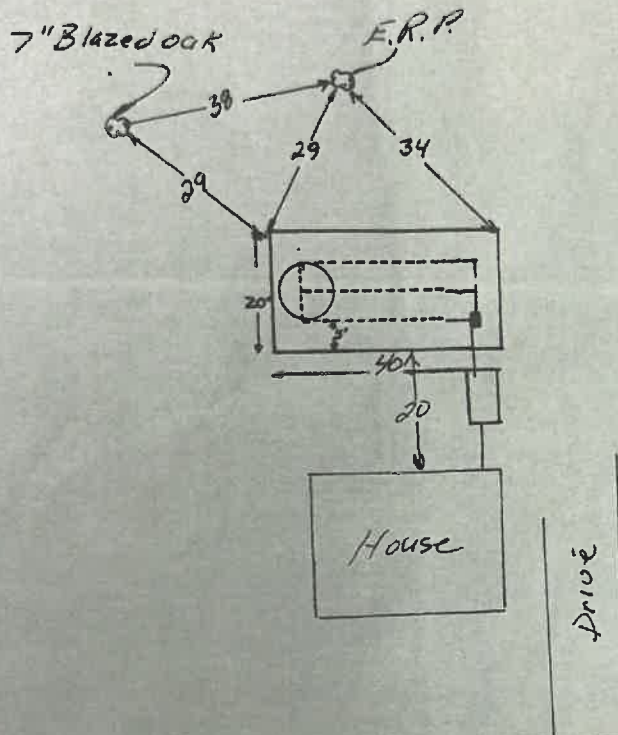
LOT 10 Old Falls Settlement

Owners Name

Kaspitz, Inc

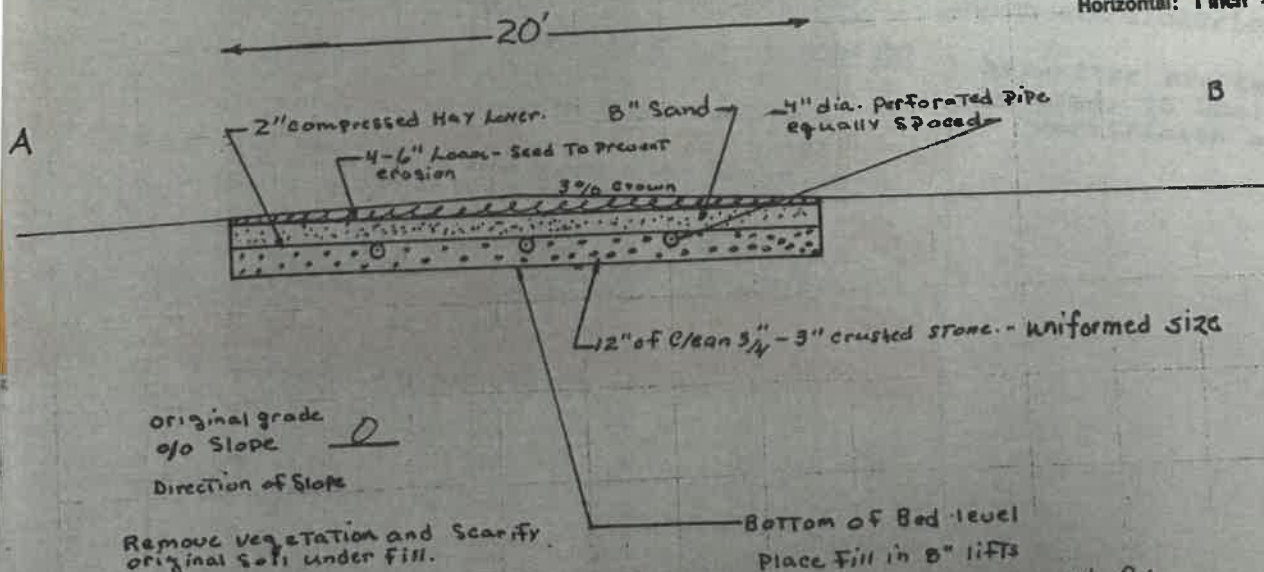
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = *30'* Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	<u>0</u>	Reference Elevation is	<u>100</u>	6" white oak with a nail 38" above The ground at the base of the tree and at Elev. 100" Scale:	
Depth of Fill (Downslope)	<u>0</u>	Bottom of Disposal Area	<u>20</u>		
		Top of Distribution Lines or Chambers	<u>31</u>		
DISPOSAL AREA CROSS SECTION					

Scale:
Vertical: 1 inch = 6 Ft.
Horizontal: 1 inch = 6 Ft.



Original grade
0% Slope *0*
Direction of Slope

Remove vegetation and Scarify original soil under fill.

Bottom of Bed level
Place fill in 8" lifts

Kenneth Jordan, Soil Search
Site Evaluator Signature

00073
SE#

7-21-86
Date