

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, SHB 11
(207) 287-5338 Fax (207) 287-3181

PROPERTY LOCATION		>> Caution Permit Required -- Attach in Space Below <<	
City, Town, or Plantation	BRISTOL	BRISTOL Permit Issued: 6/15/10	PERMIT # 3733 STATE COPY \$ 10.00 FEE Double Fee Charge
Street or Road	LALEDONIA DR		
Subdivision, Lot #			
OWNER/APPLICANT INFORMATION		L.P.I. # 1412	
Name (last, first, MI)	Habitat for Humanity	Local Plumbing Inspector Signature	
Mailing Address of Owner/Applicant			
Daytime Tel #		Municipal Tax Map # 6 Lot # 47E	
Owner or Applicant Statement I state and acknowledge that the information submitted is correct to the best of my knowledge and I understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.		Caution: Inspection Required I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant: <u>Peter M. McCreedy</u> Date: <u>6/15/10</u>		Local Plumbing Inspector Signature: _____ (2nd) Date Approved: _____	

PERMIT INFORMATION

TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENTS
☒ 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	☒ 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 Approval	☒ 1. Complete Non-engineered System ☐ 2. Primitive System (greywater & all 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 1 sq. ft. ☒ acres	DISPOSAL SYSTEM TO SERVE ☒ 1. Single Family Dwelling Unit, No. of bedrooms: <u>4</u> ☐ 2. Multiple Family Dwelling, No. of Units: _____ ☐ 3. Other: _____ (specify) Current Use: ☐ Seasonal ☐ Year Round ☒ Undeveloped	PROPOSED TYPE OF WATER SUPPLY ☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other: _____
SHORELAND ZONING ☐ Yes ☒ No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK ☒ 1. Concrete ☒ a. Regular ☐ b. Low profile ☐ 2. Plastic ☐ 3. Other: _____ CAPACITY <u>1000</u> gallons	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 <u>124</u> sq. ft. ☒ in. 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 <u>360</u> gallons per day BASED ON: ☒ 1. Table 501.1 (dwelling unit) ☐ 2. Table 502.2 (other facilities) SHOW CALCULATIONS - for other facilities: ☐ 3. Section 503.0 (meter reading) ATTACH WATER-METER DATA
SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>8</u> <u>C</u> <u>1</u> at Observation Hole # <u>1</u> Depth <u>15</u> " Elevation _____" 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. ft./gpd ☒ 4. Large - 4.1 sq. ft./gpd ☐ 5. Extra-Large - 5.0 sq. ft./gpd	EFFLUENT/JECTOR 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 <u>43</u> d <u>55</u> m <u>03</u> Lon <u>69</u> d <u>31</u> m <u>11</u> If GPS, state margin of error: <u>26'</u>

SITE EVALUATOR STATEMENT

I certify that on 6/4/10 (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: Peter M. McCreedy SE # 357 Date: 6/6/10
 Site Evaluator Name Printed: PETER M. MCCREEDY Telephone # 644 8647 Email Address: _____

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HHF-200 Rev 4/05

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

10-144 CMR 241

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\$100. - Permit Fee & \$15- DEP Surcharge

ck. # 6568 mcw

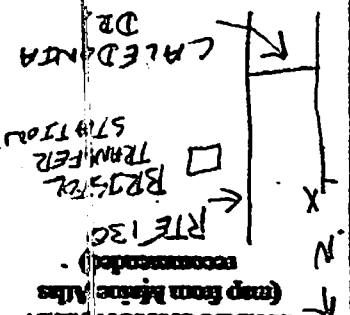
BRISTOL

CALEDONIA LANE

SITE PLAN

Scale 1" = 20' or as shown

SITE LOCATION PLAN



DISPOSAL FIELD 11'x42'

ALERT- 2 Purple-Red FLAGGING

B= BOUNDARY PIN- PINK FLAGGING

NE CORNER TO A 37 1/2'

NE CORNER TO B 54'

SE CORNER TO A 38 1/2'

SE CORNER TO B 51 1/2'

Original Grade at corners:

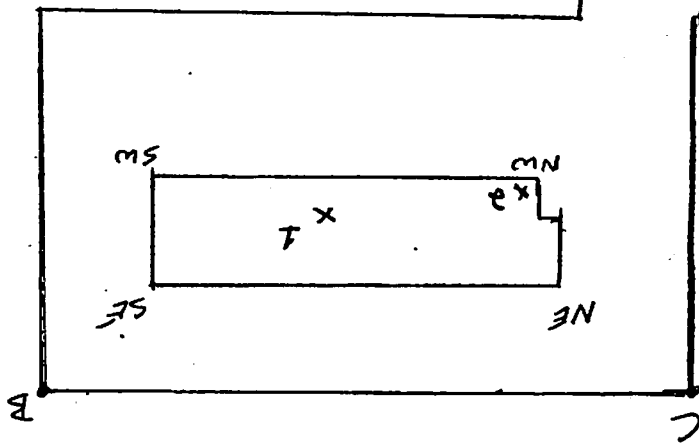
NW - 65"

NE - 61"

SW - 54"

SE - 54"

HIGH SPOTS



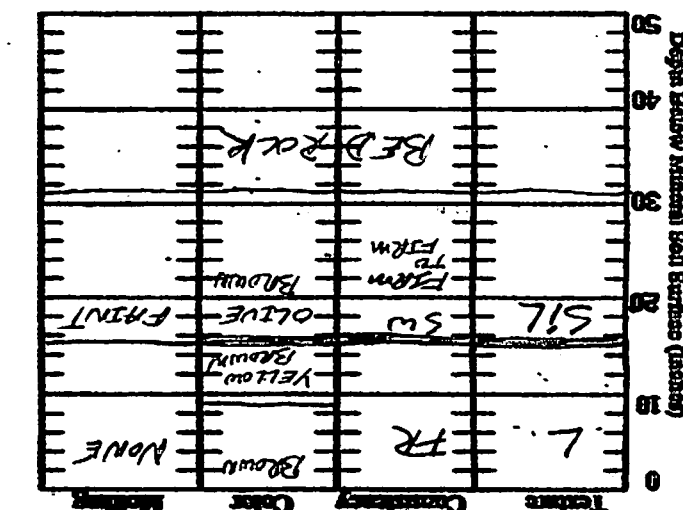
C = BOUNDARY IN w/ PINK FLAGGING

NE TO C = 18'

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

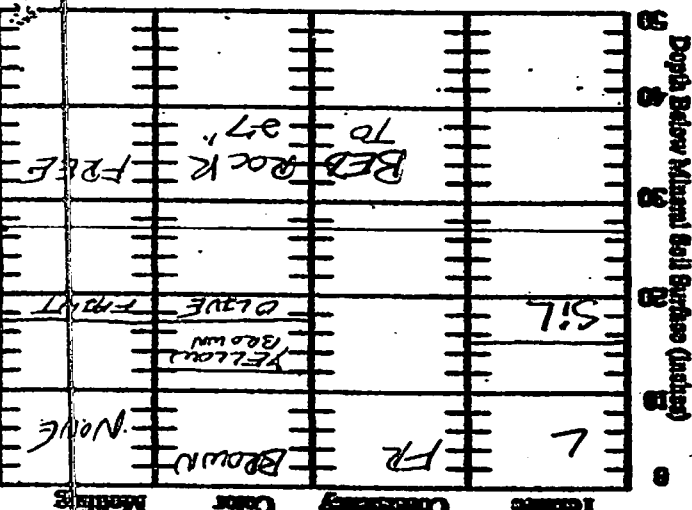
Observation Hole 1 ☒ Test Pit ☐ Boring

Depth of Organic Horizon Above Mineral Soil



Observation Hole 2 ☒ Test Pit ☐ Boring

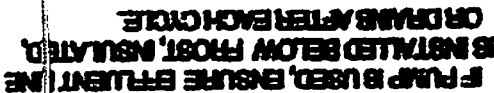
Depth of Organic Horizon Above Mineral Soil



Soil Classification	Profile	Depth	Moisture	Color	Texture
B	C	0-3"	15%	FR. (15-20)	FR. (15-20)
				FR. (20-25)	FR. (20-25)
				FR. (25-30)	FR. (25-30)
				FR. (30-35)	FR. (30-35)
				FR. (35-40)	FR. (35-40)
				FR. (40-45)	FR. (40-45)
				FR. (45-50)	FR. (45-50)

Soil Classification	Profile	Depth	Moisture	Color	Texture
B	C	0-3"	17%	FR. (17-20)	FR. (17-20)
				FR. (20-25)	FR. (20-25)
				FR. (25-30)	FR. (25-30)
				FR. (30-35)	FR. (30-35)
				FR. (35-40)	FR. (35-40)
				FR. (40-45)	FR. (40-45)
				FR. (45-50)	FR. (45-50)

1000
GALTON SEPTIC TANK TO BE EQUIPPED WITH ZABEL A-1800 FILTER OR EQUIVALENT.



TOWN CITY PLANTATION
BRISTOL

STREET, ROAD, SUBDIVISION
CALEDONIA LANE

OWNER'S NAME

SCALE:
VERT: 1"=5'
HORIZ: 1"=5'

NOTES:

1. FILL REQUIREMENTS VARY GREATLY BECAUSE OF BED LOCATION. CONTRACTOR SHALL FIELD CHECK ALL SLOPES BEFORE DETERMINING ACTUAL FILL REQUIREMENTS.
2. NOTES ON PAGE OF ARE HEREBY MADE PART OF THIS / H-E-200 FORM.
3. THE FIRST 6" DIRECTLY BENEATH THE IN-DRAINS SHALL BE MEDIUM TO COARSE TEXTURED SAND, WITH AN EFFECTIVE SIZE OF 0.25 TO 2.0 MM. NO GREATER THAN 5% PASSING A #200 SIEVE, AND NO PARTICLES LARGER THAN 3/4 INCH OR MATERIALS MEETING THE ASTM C-33 SPECIFICATION. CONCRETE OR WASHED SAND IS A RELIABLE CHOICE. SUITABILITY OF BANK RUN SAND OR SITE DISPOSAL AREA SOIL MUST BE VERIFIED.
4. ROTO-TILL ORIGINAL SURFACE THOROUGHLY IN ALL AREAS OF THE SYSTEM INCLUDING FILL EXTENSIONS BEFORE PLACING FILL. REMOVE ALL ORGANIC LAYER IN AREA OF SYSTEM.
5. ROWS SHOULD BE LEVEL WITH A TOLERANCE OF 1/100FT.
6. SECTION SHOWN IS BASED ON AN AVERAGE EXISTING GROUND SLOPE OF X.

FILL REQUIREMENTS AT SECTION:

DEPTH OF FILL (UPSLOPE) $29\frac{1}{2}"$

DEPTH OF FILL (DOWNSLOPE) $33\frac{1}{2}"$

CONSTRUCTION ELEVATIONS:

ERP. REFERENCE ELEVATION IS $0'$

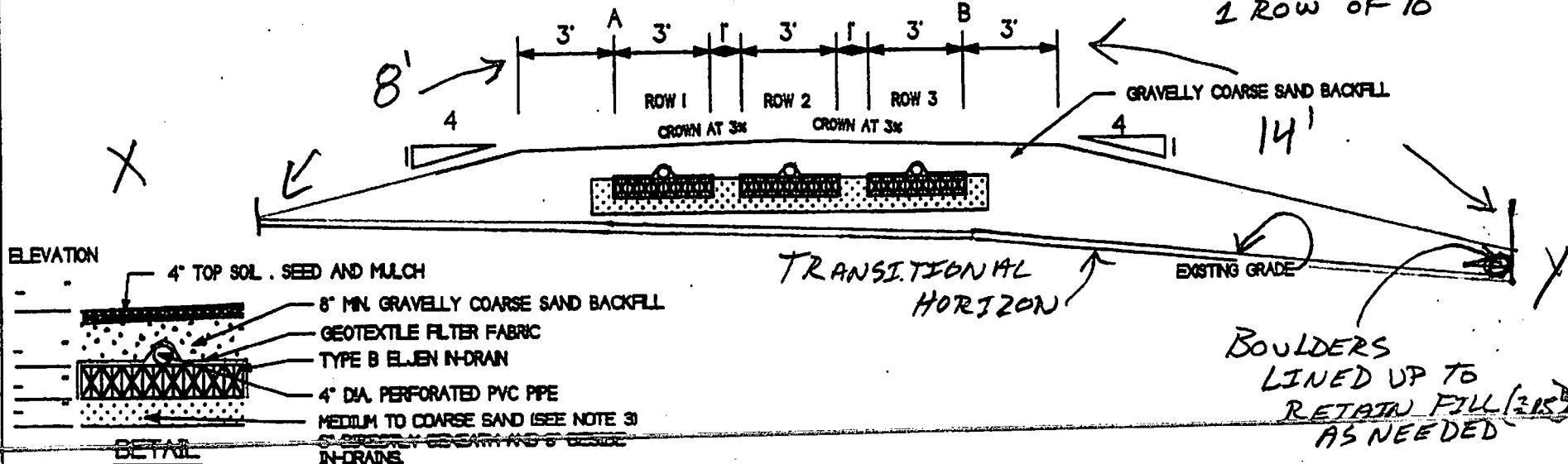
ROW $1, 2, 3$

FINISH GRADE $-3\frac{1}{2}"$

TOP OF DISTRIBUTION PIPE $-40"$

BOTTOM OF IN-DRAINS $-51"$

31 - TYPE B IN-DRAINS 2 ROWS OF $10\frac{1}{2}'$ EACH ROW
1 ROW OF 10



ELEVATION

4" TOP SOIL, SEED AND MULCH

8" MIN. GRAVELLY COARSE SAND BACKFILL

GEOTEXTILE FILTER FABRIC

TYPE B ELJEN IN-DRAIN

4" DIA. PERFORATED PVC PIPE

MEDIUM TO COARSE SAND (SEE NOTE 3)

6" DEEPLY BEDDED SAND AND 6" DEEP
IN-DRAINS.

DETAIL
N.T.S.

TRANSITIONAL
HORIZON

EXISTING GRADE

BOULDERS
LINED UP TO
RETAIN FILL (315)
AS NEEDED

Peter Maschewsky
SITE EVALUATOR SIGNATURE

357
SEA

6/6/10
DATE

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SRILEV.GCD