SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human Services
Div of Environmental Health , 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation: Stockton Springs
Street or Road: Pirate's Cove
Subdivision, Lot #:

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Flynn Mary + Larry (Owner / Applicant)
Mailing Address of Owner/Applicant: Mike Tripp - 18 Lake Rd. Frankfort, Me. 04438
Daytime Tel. #:

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: LPI APPROVAL REQUIRED <<

Town/City ____ Permit # ____
Date Permit Issued __/__/__ Fee: $____ Double Fee Charged [ ]
Local Plumbing Inspector Signature ____ L.P.I. # ____
- Owner - 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 # ____ 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. ____ (1st) date approved
Local Plumbing Inspector Signature ____ (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION
- [ ] 1. First Time System
- [x] 2. Replacement System
  Type replaced: Trench ?
  Year installed: ?
- [ ] 3. Expanded System
  - a. <25% Expansion
  - b. >25% Expansion
- [ ] 4. Experimental System
- [ ] 5. Seasonal Conversion

SIZE OF PROPERTY
1.2 [ ] SQ. FT. [x] ACRES

SHORELAND ZONING
[x] Yes [ ] No

THIS APPLICATION REQUIRES
- [ ] 1. No Rule Variance
- [ ] 2. First Time System Variance
  - [ ] a. Local Plumbing Inspector Approval
  - [ ] b. State & Local Plumbing Inspector Approval
- [x] 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 TO SERVE
- [x] 1. Single Family Dwelling Unit, No. of Bedrooms: 4
- [ ] 2. Multiple Family Dwelling, No. of Units: ____
- [ ] 3. Other: ____ (specify)

Current Use [x] Seasonal [ ] Year Round [ ] Undeveloped

DISPOSAL SYSTEM COMPONENTS
- [x] 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

TYPE OF WATER SUPPLY
[x] 1. Drilled Well [ ] 2. Dug Well [ ] 3. Private
[ ] 4. Public [ ] 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
- [x] 1. Concrete
  - [x] a. Regular
  - [ ] b. Low Profile
- [ ] 2. Plastic
- [ ] 3. Other: ____
  CAPACITY: 1000 GAL.
  LIFT STATION

DISPOSAL FIELD TYPE & SIZE
- [ ] 1. Stone Bed ; 2. Stone Trench
- [x] 3. Proprietary Device
  - [x] a. cluster array [ ] c. Linear
  - [x] b. regular load [ ] d. H-20 load
- [ ] 4. Other: ____
  SIZE: 1,920 [x] sq. ft. [ ] lin. ft.

GARBAGE DISPOSAL UNIT
[x] 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:
- [x] 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: 1 D
at Observation Hole # 1
Depth 9 "
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
- [x] 4. Extra Large---5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP
- [ ] 1. Not Required
- [ ] 2. May Be Required
- [x] 3. Required

Specify only for engineered systems:
DOSE: ____ gallons

LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44 d 29 m 55.7 s
Lon. 068 d 49 m 11.1 s
if g.p.s, state margin of error: ±8'
NAD 27

SITE EVALUATOR STATEMENT

I certify that on 3-25-21 (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).

Robert G Vile jr
Site Evaluator Signature

204
SE #

3-27-21
Date

Robert G. Vile jr.
Site Evaluator Name Printed

234-2451
Telephone Number

robertvilesoilconsultant@gmail.com
E-mail Address

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

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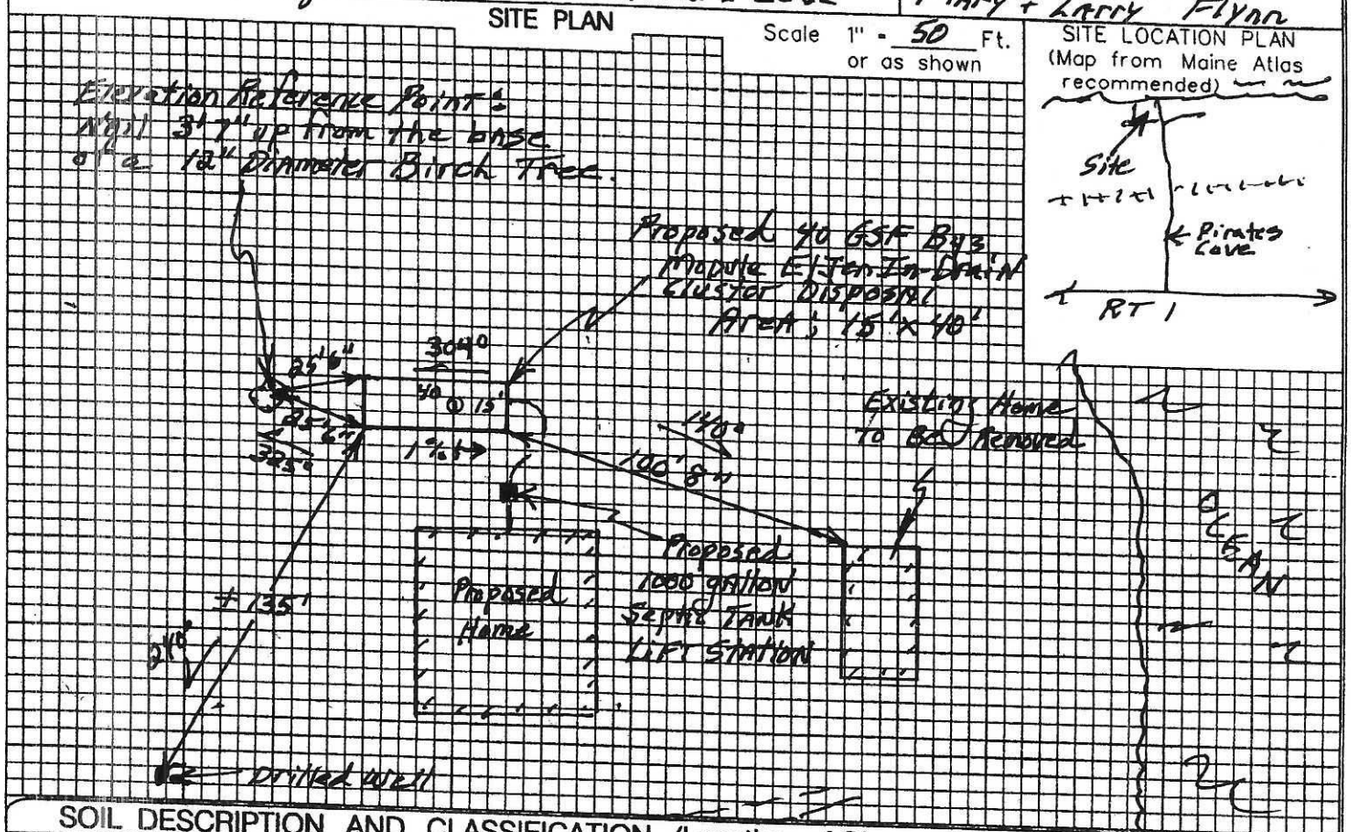
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation: Stockton Springs | Street, Road Subdivision: Pirates Cove | Owner's Name: Mary + Larry Flynn

SITE PLAN

Scale 1" = 50 Ft. or as shown



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

Observation Hole # 1 ☒ Test Pit ☐ Boring
2 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0–10	Very Fine Sandy Loam	Friable	Grey Yellowish Brown	None
10–20	Silt Loam		Light olive Brown	Common Distinct
20–30	Silty Clay Loam	Firm	olive grey	Many Prominent
30–40				
40–50				

Soil Classification	Slope	Limiting Factor	
Profile: 9 Condition: D	1 %	9 "	■ 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				

NOTE:

ALL PERMITS AND OR NOTIFICATIONS REQUIRED PRIOR TO CONSTRUCTION ARE THE RESPONSIBILITY OF THE OWNER.

Soil Classification	Slope	Limiting Factor	
Profile: _____ Condition: _____	_____ %	_____ "	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Site Evaluator Signature: [signature] | 204 SE • | 3-27-21 Date

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Division of Health Engineering
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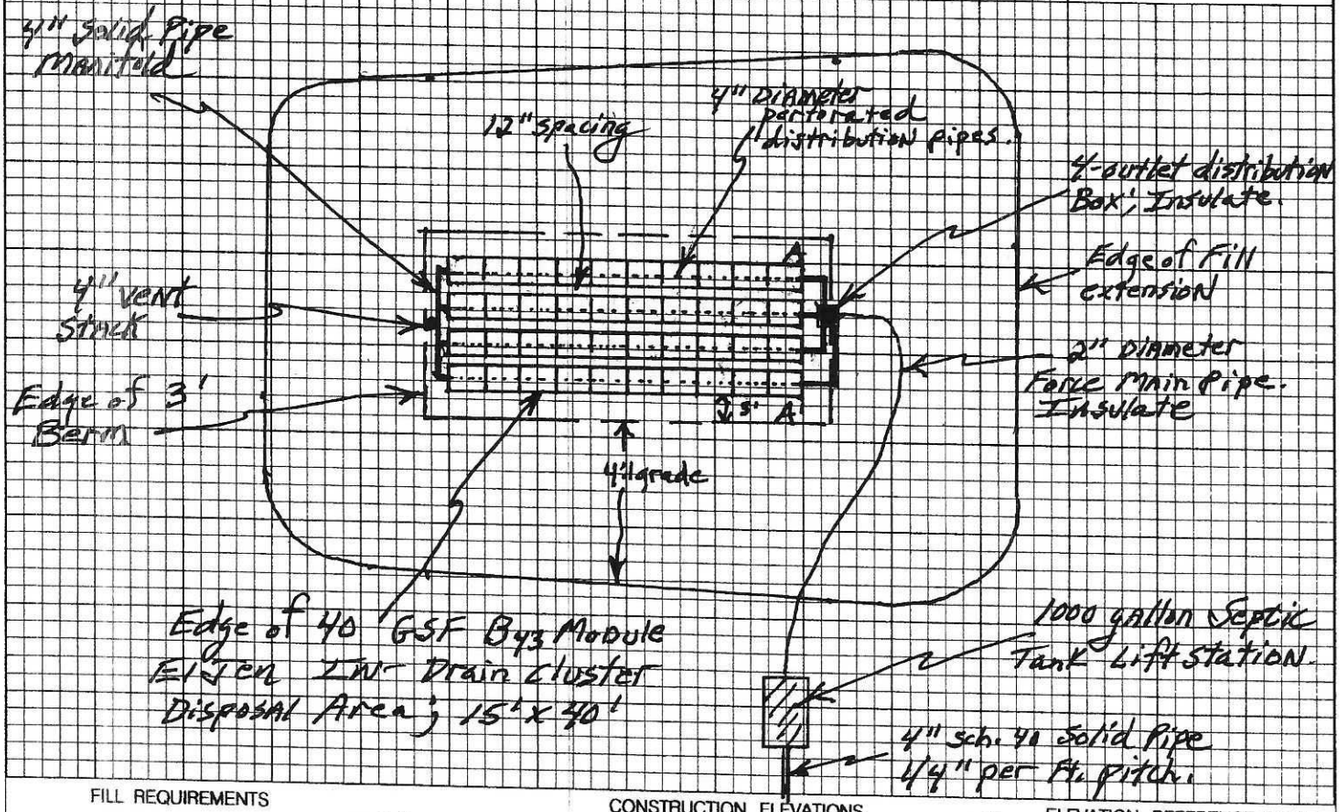
SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	39"	Finished Grade Elevation	-15"	Location & Description: Nail 43" up in 12" Birch Tree.
Depth of Fill (Downslope)	A 46" A'	Top of Distribution Pipe ~~or Proprietary Device~~	-26"	
		Bottom of Disposal Area	-37"	Reference Elevation = 0"

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" =
HORIZONTAL: 1" =

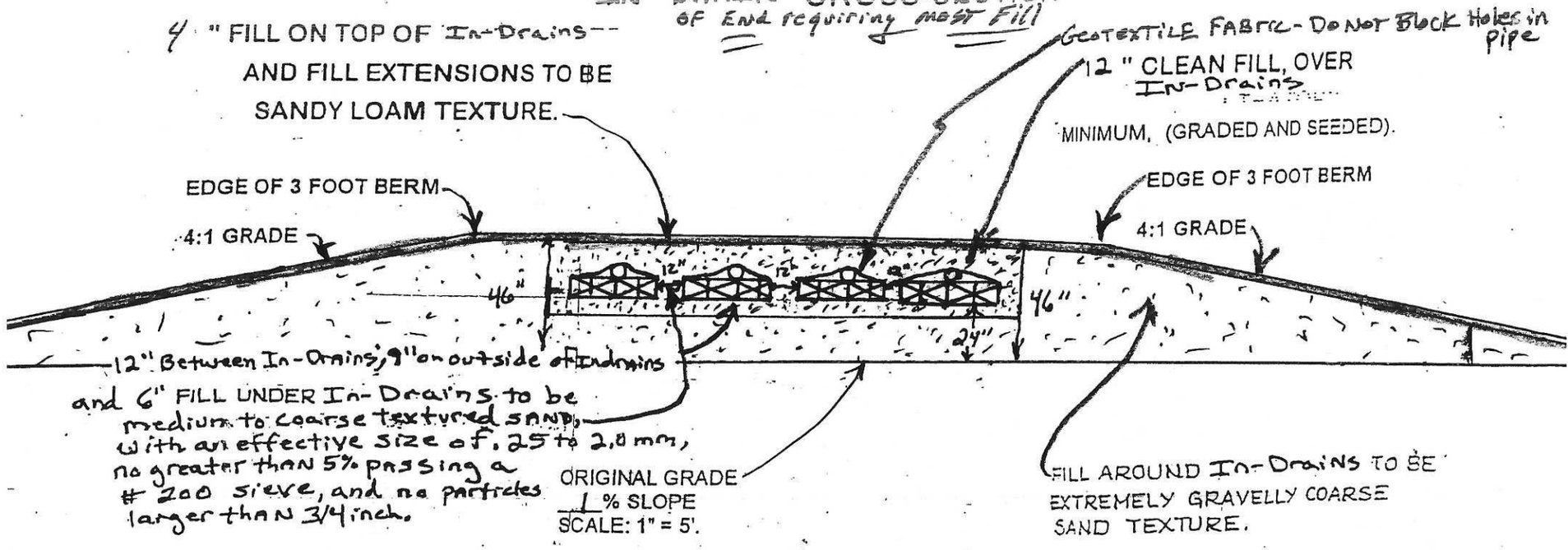
(See attached cross Section)

Site Evaluator Signature | 204 SE # | 3-27-21 Date

A ← 15 → A'

IN-DRAIN CROSS-SECTION

of End requiring most Fill



NOTES:

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER IN-DRAINS AND FILL EXTENSIONS.
2. BOTTOM OF In-Drains TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM In-Drain AREA.
4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.
5. MIX FILL TO BE USED UNDER In-Drains WITH TOP 4" OF ORIGINAL SOIL. and Fill Extensions.

OWNER: Mary + Larry Flynn
LOCATION: Pirate's Cove - Stockton
NUMBER OF In-Drains 40
ELEVATIONS:
ELEVATION REFERENCE POINT: 0"
BOTTOM OF IN-DRAINS -37"
Top of Distribution pipes -26"
Finished Grade -15"
SITE EVALUATOR Robert G. Vile Jr.
ROBERT G. VILE JR. # 204
DATE: 3-27-21

Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services

Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION Town of Stockton Springs

Property Owner's Name: Mary + Larry Flynn Tel. No.: _____

System's Location: Pirate's Cove

Property Owner's Address: c/o Mike Tripp - 18 Lake Rd. Frankfort Zip Code 04438

e-mail address: _____

The subsurface wastewater disposal system design for the subject property requires a ■ replacement system variance ☐ first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires ■ local approval ☐ local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)

	SECTION OF RULE
1. System to be installed on 9D Soils	Table 4F
2.	
3.	

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.

Poor Soil Conditions on entire lot, Proposed System will function properly and more environmentally safe than existing Septic System

I, Robert G. Vile jr., S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available; enhances the potential of the site for subsurface wastewater disposal; and that the system should function properly.

Robert G Vile jr. 3-27-21

SIGNATURE OF SITE EVALUATOR — DATE

PROPERTY OWNER

I, _____, am the ☐ owner ☐ agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

_____ _____

☐ SIGNATURE OF OWNER
☐ AGENT FOR THE OWNER — DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests prior to rendering a decision.
I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (☐ does ☐ does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (☐ do ☐ do not) approve the requested variance. I (☐ will ☐ will not) issue a permit for the system's installation as proposed by the application.

_____ _____
LPI Signature Date

LOCAL PLUMBING INSPECTOR - Referral to the Department of Health and Human Services

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Environmental Health.
I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (☐ does ☐ does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone or local ordinances controlling such disposal.
Therefore, I (☐ do ☐ do not) recommend the issuance of a permit for the system's installation as proposed by the application.

_____ _____
LPI Signature Date

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (☐ does ☐ does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

_____ _____
SIGNATURE OF THE DEPARTMENT DATE

Note: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 701.2 for Municipal Review.)

2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 701.1 for Department Review.) The LPI's signature is required on these variance requests prior to submission to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINIANGE CONDITIONS (SEE TABLES 700.3 to 700.13)

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Adjustment		
Additional Treatment		
	TOTAL POINT ASSESSMENT:	

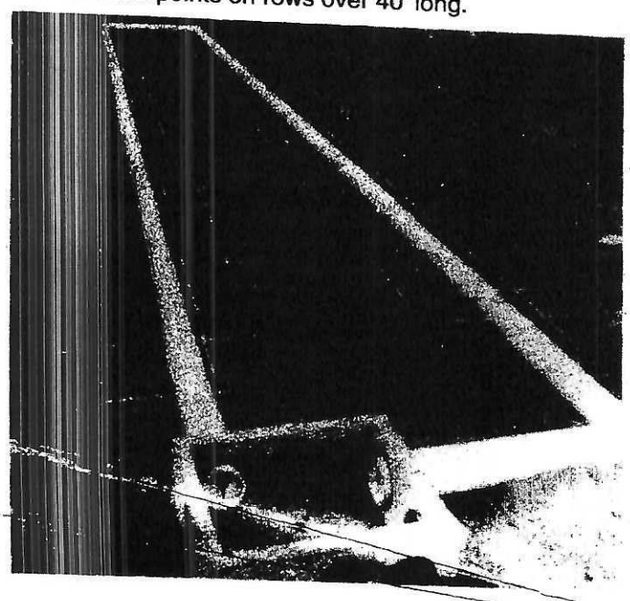
Minimum Points (Check one): Outside Shoreland 50 ☐ Inside Shoreland-65 ☐ Subdivision-65 ☐

ELJEN™ IN-DRAIN™ LEACHING SYSTEM

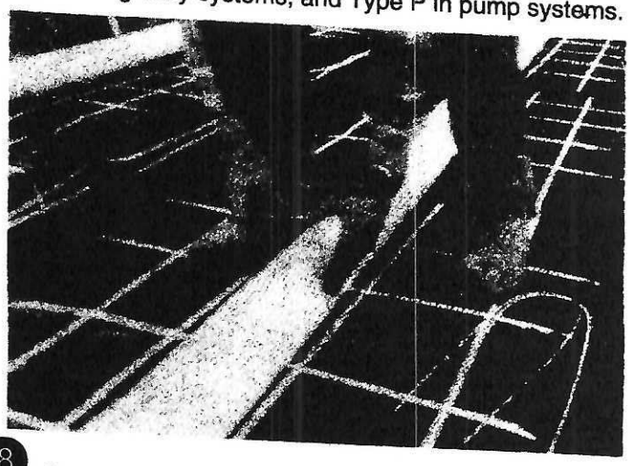
Trench and In-Ground Cluster Installation

1. Prepare site according to local and state regulations. **Do not install system on frozen or saturated ground.**
2. Remove all organic soil and roots at disposal and fill extension areas.
3. Scarify receiving layer to eliminate smearing.
4. Place 6" of D.O.T. or state highway specification **washed concrete sand** or sand known to be "medium to coarse with an effective size of .25 to 2.0 mm and no more than 5% passing a #200 sieve."
5. Avoiding footprints, place In-Drains with **painted stripe facing up**, end to end on sand in trench or bed. **Caution: Spacer cores can have sharp edges.**

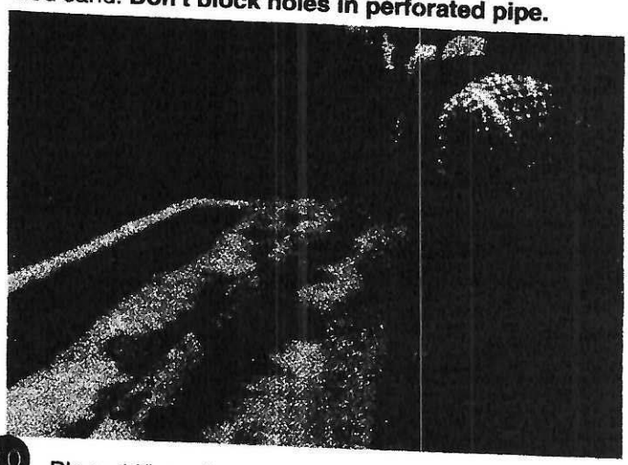
6. Center 4" **perforated** distribution pipe over In-Drains. Use **solid pipe** over compacted sand from D-Box to In-Drains and to connect distribution lines at far end. Connect mid-points on rows over 40' long.



7. Install SSI Inc. flow equalizers or equal in D-Box. Use Type 1 in gravity systems, and Type P in pump systems.



8. Secure pipe with one Eljen clamp per In-Drain. Slide clamp into upfacing core. Force through fabric into sand.
9. Install Eljen cover fabric over rows of In-Drains. **Drape fabric straight down over pipe**. Secure with hand shoveled sand. **Don't block holes in perforated pipe.**



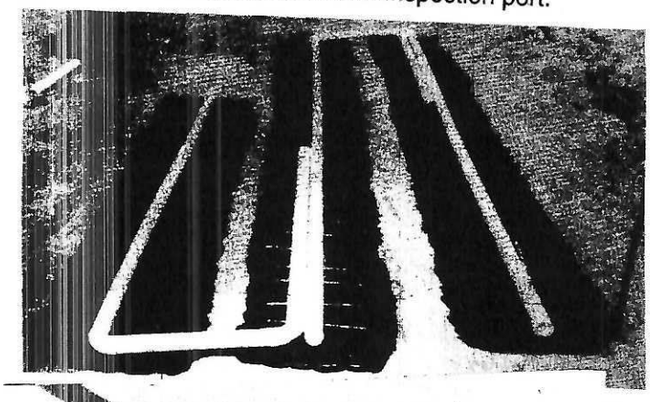
10. Place 12" medium to coarse sand (see step #4) between rows and 6" min. at the sides in trench or bed.
11. Complete backfill and loam to 12" min. over In-Drains. Fill should be clean, porous and devoid of large rocks. Use well graded sandy fill with a maximum 10% passing a #200 seive. **Do not use wheeled equipment over system.** A light track machine may be used with caution, **avoiding crushing or shifting of pipe assembly.** Backfill in direction of perforated pipe.
12. Divert surface runoff. Finish grade to prevent surface ponding. Seed loam and protect from erosion.

Raised or Fill Systems

1. Follow steps #1-3 for trench installation.
2. Compact fill, in max. 6" lifts, with a light tracked machine. Use clean soil free of organic material, clay, construction debris, stones larger than 6" and no more than 10% passing a #200 sieve.
3. Provide 6" sand bed, per trench step #4, directly under the In-Drains.
4. Complete system per trench steps #5-12.

Serial Distribution on Slopes

1. Site preparation is the same as for trench and fill systems. Groove receiving layer by raking or contour plowing at right angle to slope before placing fill or sand.
2. Install rows of In-Drains at design elevations.
3. Provide a well anchored D-Box with velocity reduction tee or baffle. D-Box serves as an inspection port.



Distributed By:
Construction Consultants
483 Roosevelt
Windham, ME 04062
Tel: 207-894-7141
Fax: 207-894-7143

April 2018

www.eljen.com

4. Install a line of 4" **perforated** pipe on first row of In-Drains. Cap pipe at far end.
5. Place at least 10' of capped **perforated** overflow pipe at the far end and downhill side of the above pipe.
6. Connect overflow pipe to a line of **perforated** pipe on the next row of In-Drains with 2 elbows and a short length of **solid** pipe. Cap perforated pipe on opposite end.
7. Continue this procedure until the last row of In-Drains has an end capped line of **perforated** pipe.
8. Complete assembly by following steps #8-12 at trench installation.

Pumped Systems

1. Prepare disposal site as described above.
2. Provide a well anchored D-Box with a velocity reduction tee or baffle. Use SSI Inc. Type P flow equalizers or equal in the D-Box, one for each distribution line.
3. System assembly is the same as for gravity designs.
4. Pressure distribution does not result in reduced system size and is therefore not generally used for In-Drain disposal systems.

Design Manual Available

Effluent pretreatment offered by In-Drain technology generally allows **substantial reductions** in leach field size **compared to conventional stone or chamber systems**. Sizing formula conforms with code variations from state to state. Consult your area distributor for a state specific Design and Installation Manual.

LIMITED WARRANTY

ch In-Drain™ unit is warranted to the original purchaser against defects in materi- nd workmanship for one year from the date of manufacture when installed in dance with manufacturer's instructions. Eljen Corp. must be notified within fif- 15) days of the appearance of any defect during this period. Eljen Corp. will sup- replacement unit. Eljen Corp.'s liability specifically excludes the cost of removal or installation of the units.

ne warranty does not extend to incidental, consequential, special or indirect dam- Specifically excluded from warranty coverage are: damage due to ordinary wear tear, alteration, abuse or misuse, subjection to stresses or effluent loading greater those prescribed in the design and installation instructions, the placement of roper materials by buyer into buyer's system, any event not caused by or under the trol of Eljen Corp. In no event will Eljen Corp. be responsible for loss or damage to buyer, the units, or any 3rd party resulting from its installation or shipment.

Buyer shall be solely responsible for insuring that installation of the system is com- ted in accordance with all applicable laws, codes, rules and regulations.

No warranties or representations at any time made by any representative of Eljen rp. shall vary or expand the provisions hereof. No warranty applies to any party ner than the original purchaser.

EXTENDED WARRANTY

jen offers a 10 year warranty for 1 and 2 family residential In-Drain systems. onditions of system design, installation and maintenance apply. Please refer to etailed warranty available from Eljen or an authorized representative.

a clean, healthy environment

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