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	NAPLES
Street or Road	ESCOPT WAY
Subdivision, Lot #	(LOT 7)

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City _____ Permit # _____

Date Permit Issued __/__/__ Fee: $_____ Double Fee Charged [ ]

_____ L.P.I. # _____

Local Plumbing Inspector Signature

u Owner u Town u 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 # _____

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	JORDAN, JOANNE (Owner / Applicant)
Mailing Address of Owner/Applicant	254 BLACK ISLAND RD. OXFORD, ME. 04070
Daytime Tel. #	671-2368

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

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

1.60 (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: 900 (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

272.72 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
3 1 C
at Observation Hole # TP1
Depth 30
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Medium—2.6 sq. ft. / gpd
(2) Medium—Large 3.3 sq. ft. / gpd
3. Large—4.1 sq. ft. / gpd
4. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

(1) Not Required "ELEVATE DRAIN"
2. May Be Required
3. Required
Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE

(at center of disposal area)
Lat. 43 d 56 m 26.9 s
Lon. 70 d 34 m 26.5 s
If g.p.s, state margin of error: 10'

SITE EVALUATOR STATEMENT

I certify that on 7/12/16 (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. Mancini — Site Evaluator Signature
247 — SE #
July 18, 2016 — Date
JAMES G. MANCINI — Site Evaluator Name Printed
892-9498 — 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

Department of Human Services
Division of Health Engineering
(207) 287-8672 FAX (207) 287-4172

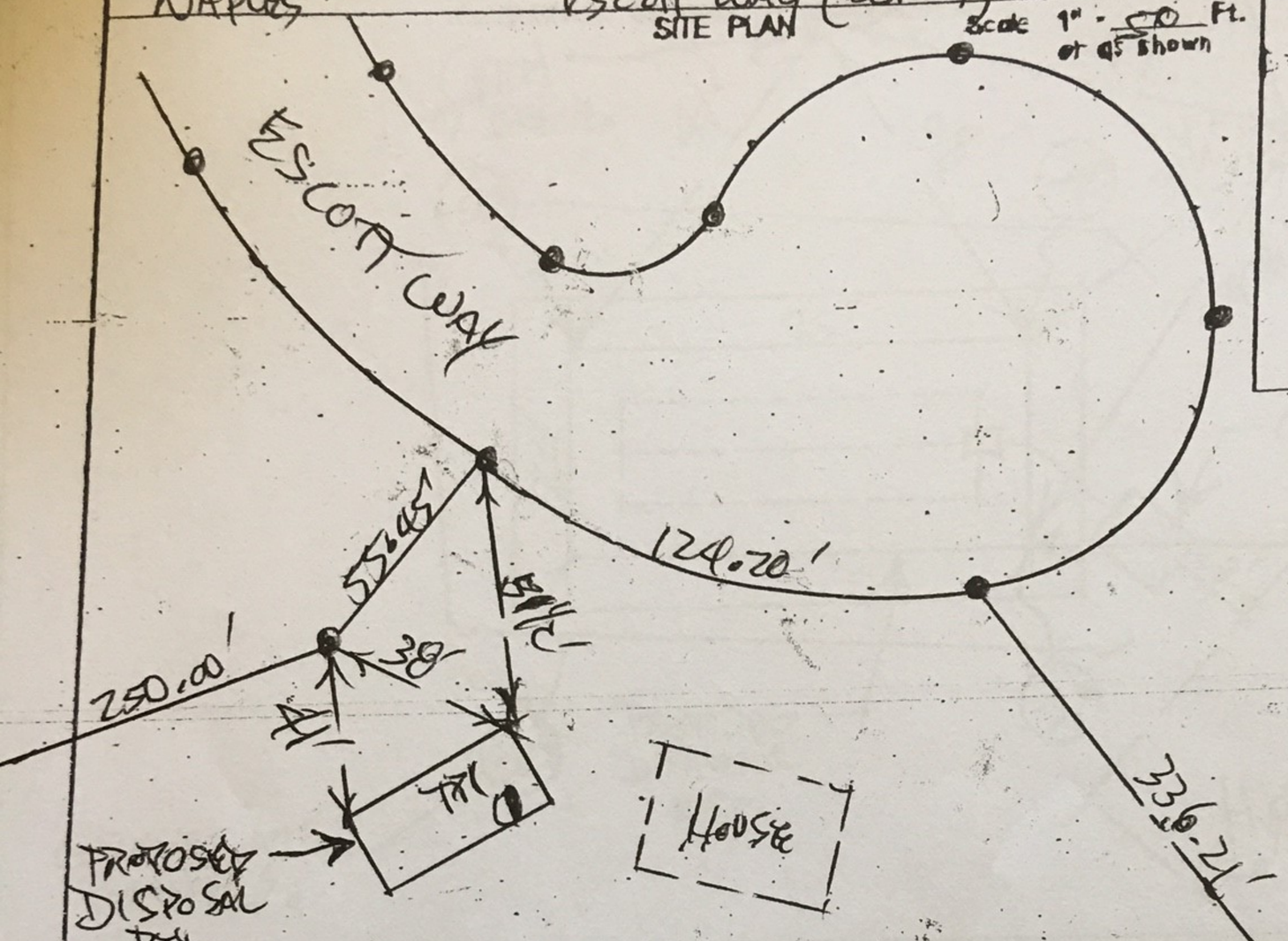
Town, City, Plantation: NAPLES

Street, Road, Subdivision: ESCOTT WAY (LOT 7)

Owner's Name: JORDAN JOANNE

SITE PLAN

Scale 1" = 50 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	LOAMY FINE SAND	FRIABLE	YELLOWISH BROWN	
10				
20				
30		FIRM	LIGHT OLIVE BROWN	
40				
50				

Soil Classification		Slope	Limiting Factor	
3	C	___ %	30"	☐ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth
Profile	Condition			

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	
		___ %	___ "	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth
Profile	Condition			

James H. Mancini — Site Evaluator Signature

247 — SE #

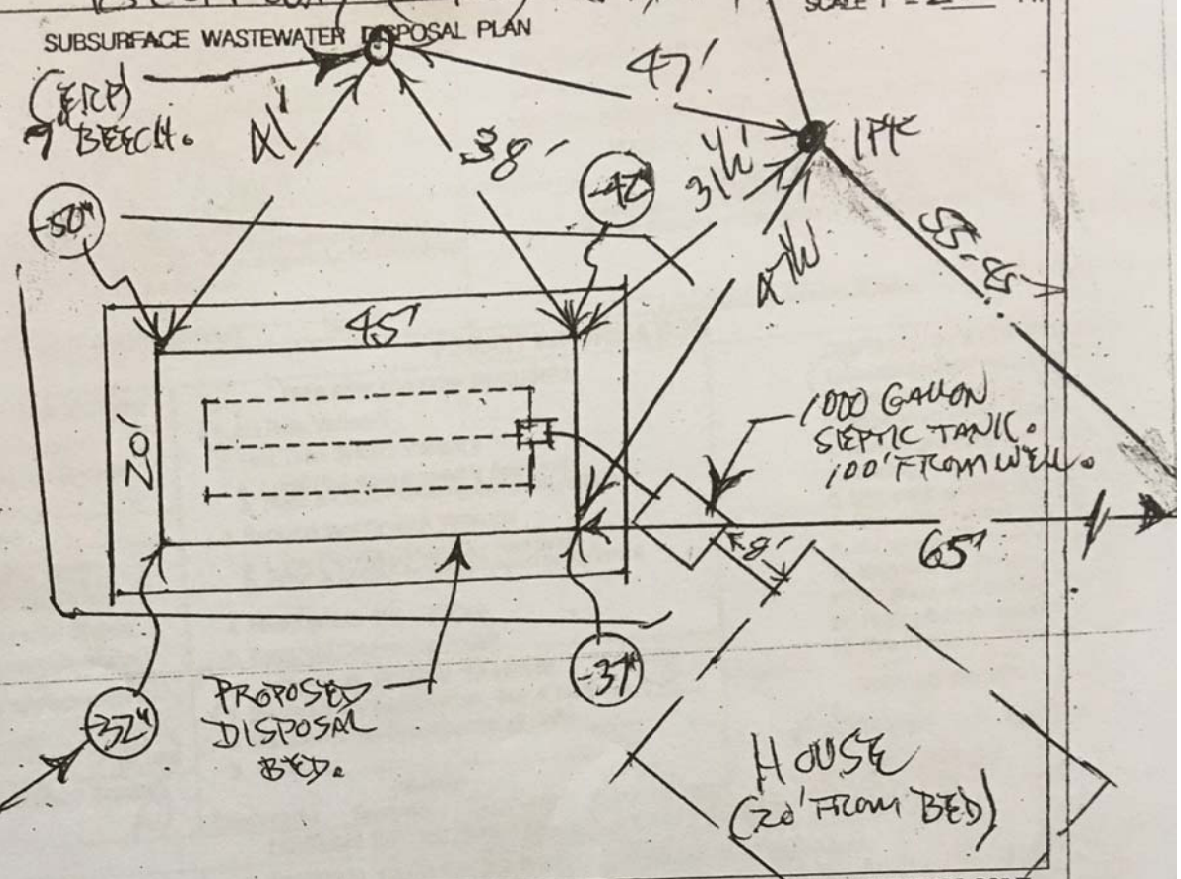
July 19, 2016 — Date

Town, City, Plantation: NAPLES

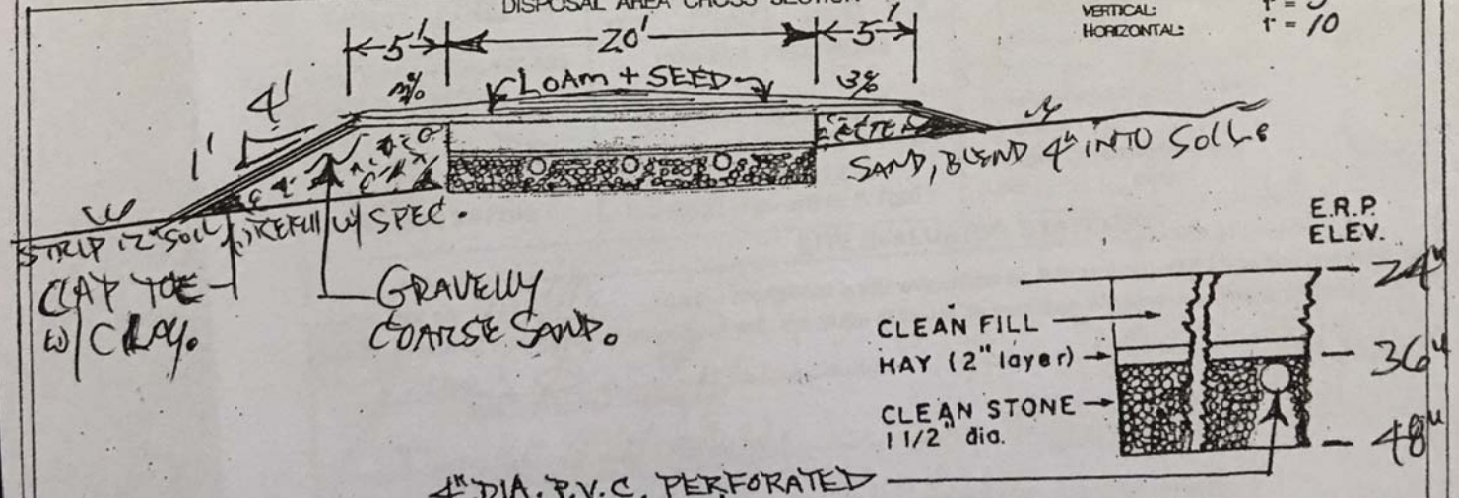
Street, Road, Subdivision: ESCOTT WAY (Lot 7) JORDAN LANE

SCALE 1" = 20 FT.

SUBSURFACE WASTEWATER DISPOSAL PLAN



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	8-13"	Finished Grade Elevation	-24"	Location & Description	NAIL IN 7" BEECH, 58" AT GRADE.
Depth of Fill (Downslope)	18-26"	Top of (Distribution Pipe) or Proprietary Device	-37"	Reference Elevation	AT 00".
		Bottom of Disposal Area	-48"		

DISPOSAL AREA CROSS SECTION

SCALE: VERTICAL: 1" = 5 HORIZONTAL: 1" = 10