90-185DS

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY ADDRESS

Town Or Plantation	BROWNFIELD
Street Subdivision Lot #	W/S ROUTE 160 LOT OF RECORD

BROWNFIELD PERMIT # 332 STATE COPY

Date Permit Issued: 8/2/90 $ 140.00 FEE ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 132

PROPERTY OWNERS NAME

Last: BARNES First: RUSSELL

Applicant Name:	BILL JOHNSON
Mailing Address of Owner/Applicant (If Different)	RR1 BOX 498D BROWNFIELD, ME.

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.

William A Johnson 8-7-90

Signature of Owner/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.

Local Plumbing Inspector Signature — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☑ NEW SYSTEM
2. ☐ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION NA
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM: NA
YEAR FAILING SYSTEM INSTALLED _____
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY: 2 AC ±

ZONING: GEN. DEV.

THIS APPLICATION REQUIRES:
1. ☑ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☐ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☐ Requiring Local Plumbing Inspector Approval
   b. ☐ Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☑ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☑ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY: PROPOSED DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☑ SEPTIC: ☑ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1000 GALS.

WATER CONSERVATION
1. ☑ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING
1. ☑ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: _____ GALS.

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

3 BEDROOMS

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
5	B

DEPTH TO LIMITING FACTOR: —

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☑ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED 700 Sq. Ft.
2. ☐ CHAMBER _____ Sq. Ft.
   ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On 8/3/90 (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.

Site Evaluator Signature — SE# 225 — Date 8/3/90

STEVENS & SMITH & ASSOC.
P.O. BOX 113
LOVELL, ME 04051

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

HHE-200 Rev. 11/86

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

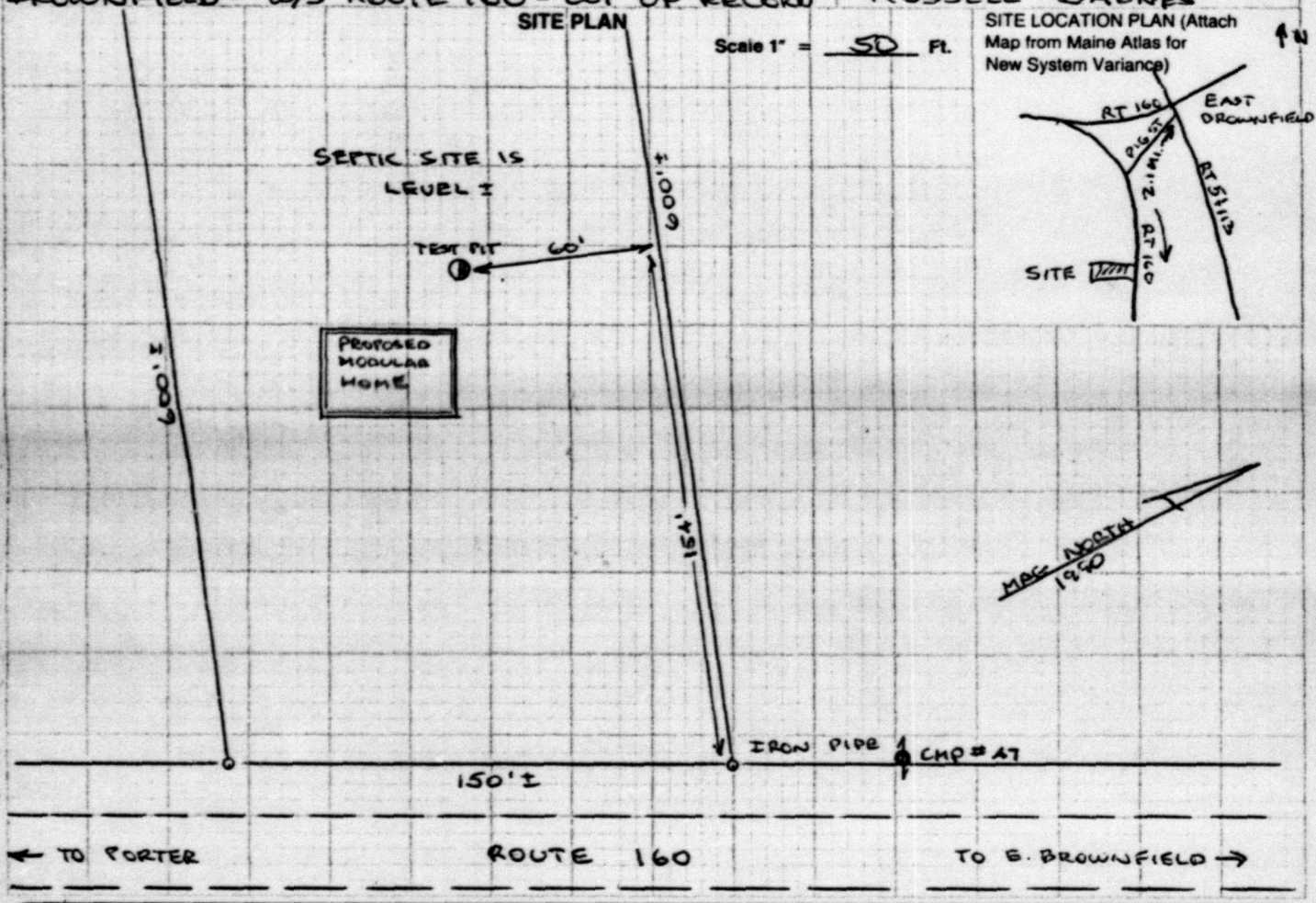
Town, City, Plantation: BROWNFIELD - W/S ROUTE 160 - LOT OF RECORD

Street, Road, Subdivision:

Owners Name: RUSSELL BARNES

SITE PLAN

Scale 1" = 50 Ft.



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

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

Observation Hole 1 ☑ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0–6	LOAMY SAND	FRIABLE	DARK BROWN	
6–10				
10–15			ORANGE	
15–20	MEDIUM			
20–30	SAND	LOOSE	YELLOW BROWN	NONE
30–40				
40–50				

Soil Profile	Classification Condition	Slope	Limiting Factor	
5	B	0 %	—	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0–50				

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

Site Evaluator Signature

225
SE#

8/3/90
Date

HHE-200 Rev. 1/84

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

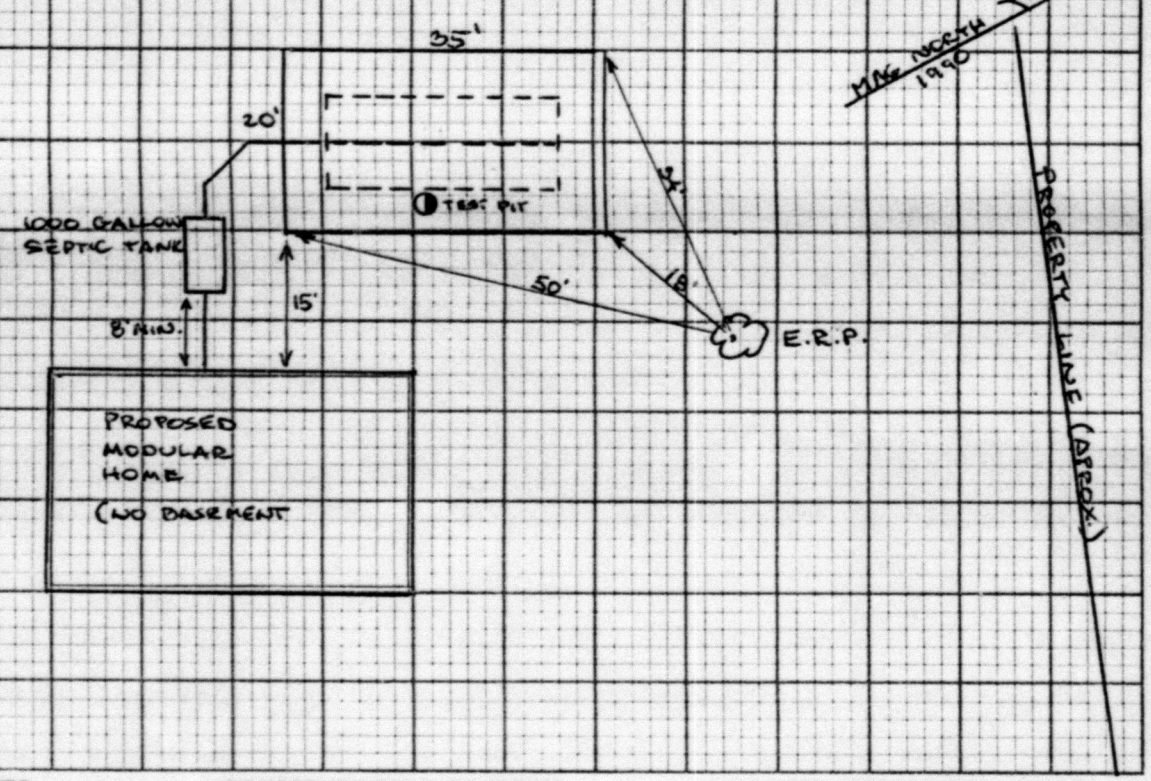
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
BROWNFIELD	W/S ROUTE 160 - LOT OF RECORD	RUSSELL BARNES

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

NOTE: PROPOSED WELL SHALL BE LOCATED A MINIMUM OF 100' FROM SEPTIC TANK AND LEACHFIELD.



FILL REQUIREMENTS

Depth of Fill (Upslope)	0"
Depth of Fill (Downslope)	0"

CONSTRUCTION ELEVATIONS

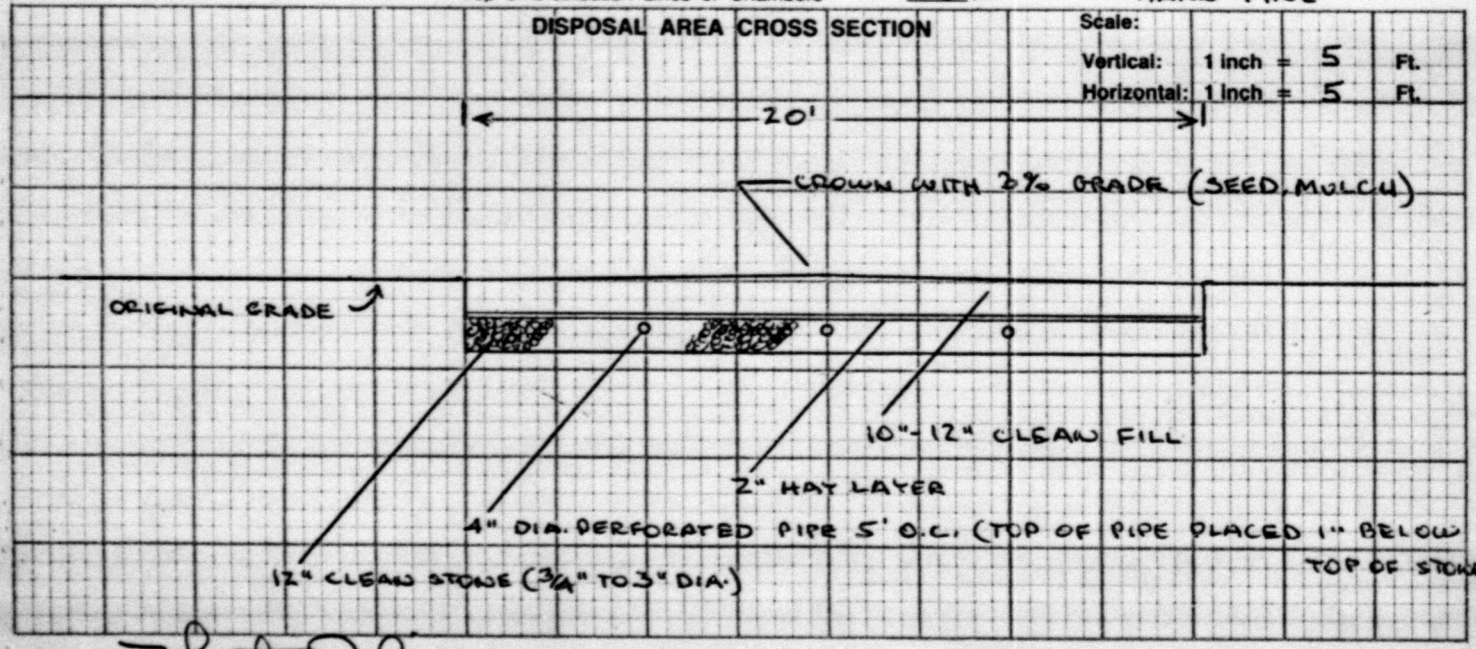
Reference Elevation is	100.00
Bottom of Disposal Area	97.50
Top of Distribution Lines or Chambers	98.42

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

NAIL IN 8" DIA. HARD PINE

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 5 Ft.



Site Evaluator Signature

225
SE#

8/3/90
Date