Maine Dept. Health & Human Services Div. Environmental Health, 11SHS (207) 287-2070 Fax: (207) 287-4172 >> CAUTION: LPI APPROVAL REQUIRED << PROPERTY LOCATION Permit # 6375 City, Town, Waterhoro or Plantation Fee: \$ 165.00 Double Fee Charged [] Street or Road 1 Leona Drive Subdivision, Lot# Local Plumbing Inspector Signature Fee: \$ state min fee \$ Copy: [] Owner M Town [] State Locally adopted fee OWNER/APPLICANT INFORMATION Name (last, first, MI) The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall Mailing Address authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules. Owner/Applicant Daytime Tel. # CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance I state and exchowing that the information submitted is correct to the best of my knowledge and understand that any respification is reason for the Department with the Subsyrface Wastewater Disposal Rules Application. 12-13-19 PERMIT INFORMATION DISPOSAL SYSTEM COMPONENTS TYPE OF APPLICATION THIS APPLICATION REQUIRES 1. Complete Non-engineered System 1. No Rule Variance ✓ T. First Time System 2. Primitive System (graywater & alt. toilet) 2. First Time System Variance 2. Replacement System 3. Alternative Toilet, specify: a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval Type replaced: 4. Non-engineered Treatment Tank (only) Holding Tank, _____ gallons
 Non-engineered Disposal Field (only) Year installed: 3. Replacement System Variance Expanded System a. <25% Expansion b. ≥25% Expansion a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval 7. Separated Laundry System 8. Complete Engineered System (2000 gpd or more) 9. Engineered Treatment Tank (only) 4. Experimental System 4. Minimum Lot Size Variance 10. Engineered Disposal Field (only) 5. Seasonal Conversion 5. Seasonal Conversion Permit 11. Pre-treatment, specify: SIZE OF PROPERTY DISPOSAL SYSTEM TO SERVE 12. Miscellaneous Components ✓1. Single Family Dwelling Unit, No. of Bedrooms: 3 TYPE OF WATER SUPPLY 2. Multiple Family Dwelling, No. of Units: 1.8 ACRES 1. Drilled Well 2. Dug Well 3. Other. SHORELAND ZONING (specify) Current Use Seasonal Year Round Undeveloped DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3) DISPOSAL FIELD TYPE & SIZE GARBAGE DISPOSAL UNIT TREATMENT TANK **DESIGN FLOW** 1. Concrete 1. Stone Bed 2. Stone Trench 1. No 2. Yes 3. Maybe ✓a. Regular gallons per day 3. Proprietary Device If Yes or Maybe, specify one below: b. Low Profile BASED ON: a. cluster array c. Linear a. multi-compartment tank 1. Table 4A (dwelling unit(s)) 2. Plastic d. H-20 load b. regular load b. tanks in series 2. Table 4C(other facilities) 3. Other. SHOW CALCULATIONS for other facilities 4. Other CAPACITY: 1000 GAL. c. increase in tank capacity SIZE: 700 sq. ft. lin. ft. d. Filter on Tank Outlet SOIL DATA & DESIGN CLASS DISPOSAL FIELD SIZING 3. Section 4G (meter readings) EFFLUENT/EJECTOR PUMP ATTACH WATER METER DATA PROFILE CONDITION 1. Not Required 1. Medium—2.6 sq. ft. / gpd 2. May Be Required LATITUDE AND LONGITUDE at center of disposal area
43 d 37 m 2
70 d 41 m 34 at Observation Hole # 771 2. Medium-Large 3.3 sq. f.t / gpd 3. Required Depth TP 3. Large 4.1 sq. ft. / gpd Specify only for engineered systems: of Most Limiting Soil Factor if g.p.s, state margin of error. + 4. Extra Large-5.0 sq. ft. / gpd SITE EVALUATOR STATEMENT (date) I completed a site evaluation on this property and state that the data reported are accurate and poliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241). E-mail Address

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

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| SUBSURFACE WASTEWATER DI | Division of Er | ealth & Human Services avironmental Health Fax: (207) 287-3165 | | |
|------------------------------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| Town, City, Plantation | tion LoT Street, Road, Subdivision Coll | | Owner's Name | |
| Waterboro | Subdivisian | | Family | |
| SITE PLAN Scale | 1"= 30° | t. or as shown | Fome | • |
| Seal Seal Seal Seal Seal Seal Seal Seal | 24 | or as shown | (ma | E LOCATION PLAN p from Maine Atlas recommended) |
| | Liver 24 | | <u> </u> | Knoll Sub Drivery |
| Proposed | 100 | | Francisco de la compansa de la compa | room roll |
| House | | | | Town rouse De |
| 20 | | | | |
| Proposed Zox35 39' | R | | | |
| Bred | 35 | 05 | | 000 |
| <0> 10 < 10 < 10 < 10 < 10 < 10 < 10 < 1 | | | ,00 | |
| | | | V | |
| SOIL DESCRIPTION AND | CLASSIFICATIO | V(Location of Obser | vation Holes Show | wn Above) |
| Observation Hole TP1 Test Pit Z "Depth of Organic Horizon Al | □ Boring | Observation Hole | Test | |
| Texture Consistency Color | Mottling | Texture | Consistency Co | olor Mottling |
| Loam Rroun | | | + | + 1 |
| Depth Below Mineral Soil Surface (inches) Sand Joose Light Joose Light Brown Brown 2.55/4 | | thes) | <u> </u> | + 1 |
| E Loamy | | Surface (inches) | | \pm |
| Sand 100 500 100 100 100 100 100 100 100 100 | None - | L L Lace | + | ± ± |
| 520 | - | \$20 | - + | |
| S Toost Light | | Depth Below Mineral Soil | = ‡ | + + |
| = 1/00SC 12:gh+ | | Deriver a | | |
| E Sand Tyellow | = = | N N N N N N N N N N N N N N N N N N N | = ‡ | ‡ ‡ |
| Brown | | elow | + | ‡ = |
| = +2.55/4 | | <u>\$40</u> — + | - + | |
| | | | | 王 |
| 50 | | 50 | | |
| 5 B 6-1 % Factor [] Re | ound Water strictive Layer drock t Depth 48 " | Soil Classification Profile Condition | Slope Limiting Factor | [] Ground Water [] Restrictive Layer [] Bedrock [] Pit Depth |
| Vafily 1 | | | | |

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| SUBSURFACE WASTEWATER | DISPOSAL SYSTEM APPLICATION | Department of Health & Human Services Division of Environmental Health (207) 287-5672 Fax: (207) 287-3165 |
|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Town, City, Plantation | Owner's Name | |
| Waterboro | Subdivision | Forcz Development |
| SUBSURFACE WAST | EWATER DISPOSAL PLAN | 0 |
| | | SCALE: 1" = 30 FT. |
| | | Bed Comers |
| | 18 | Eleo Fill |
| | | ८-१ ठ |
| 30 Prop | osed Eutore 24+24 House Garage | D-40 0" |
| | | E-41 0 |
| | 1 | E-42 0" |
| 50 ERP 39 20 A 10 | me di di | |
| 21.75 | Box 2 | |
| F-73 35 | EUP | |
| Z65 / 275 SS | - Y W | |
| 10 Oak | و | |
| Note Insulate DBax | | <u> </u> |
| Install Per The maine water | water Disposal Rules | |
| Depth of Fill (Upslope) Top of I | CONSTRUCTION ELEVATIONS Grade Elevation Obstribution Pipe or Proprietary Device of Disposal Area CONSTRUCTION ELEVATIONS -42" -55" 76 | |
| DISP | OSAL AREA CROSS SECTION | Scale |
| | | Horizontal 1" = 6 ft. |
| 2'Compressed Hay or | 20 - 4"-8" Loam + Seed | Vertical 1" = 6 ft. |
| Filter Fabric - Overlapo" | To Prevent Erosion | |
| 19 San | | |
| | 13% crown | 5 |
| | | MILLION DE LA CONTRACTION DEL CONTRACTION DE LA |
| 0000 0000000000000000000000000000000000 | 0 0 0 0 70 70 0 0 0 | |
| | 145 | |
| Original Surface > % Slope 0-1% | 12" of Clean 1/2" | crushed Stone z Level Botton |
| 70 Slope 0-1/6 | | |
| | 4"Diameter Perforated Pi | |
| | Level and Equally 5 | pacea |
| | | |
| 2 | | |
| | | |
| | | |
| Junit Harde | | Page 3 of 3 HHE-200 Rev. 02/11 |
| Site Evaluator Signature | SE # Date | |



Paul R. LePage, Governor Tel. (207) 287-2070 Mary C. Mayhew, Commissioner

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) 287-8016 Fax (207) 287-9058; TTY (800) 606-0215 Subsurface Wastewater Team Fax (207) 287-4172

AFFIDAVIT OF SITE PREPARATION

This affidavit is to be completed by a certified system installer and submitted to the Local Plumbing Inspector to document compliance with Section 111.5.1 of the Maine Subsurface Wastewater Disposal Rules, 144 CMR 241. Permission to utilize this document in lieu of a site preparation inspection by the Local Plumbing Inspector must be verified when the permit is issued. This affidavit is not to be utilized in place of the system inspection described in Section 111.5.2 of the Rules.

| INSTALLER NAME: | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|--|--|
| CERTIFICATION NUMBER: | (Please Print) | | | |
| SSWD PERMIT NUMBER: | 6375 | | | |
| PERMIT ISSUE DATE: | 9/27/19 | | | |
| PROPERTY OWNER NAME: | | | | |
| PROPERTY ADDRESS: | 1 LEONA DRIVE | | | |
| MUNICIPALITY: | WATERBORD | | | |
| By signing and submitting this document to the Local Plumbing Inspector, I certify that all construction activities noted in Section 111.5.1 including removal of all vegetation from the disposal field area and fill extensions as specified in Section 801.3; roughening of the ground surface as specified in Section 801.4; establishment of a transitional horizon as specified in Section 801.5; and placement of erosion control devices as specified in Section 801.2 have been completed in full compliance with the Maine Subsurface Wastewater Disposal Rules, 144 CMR 241 for the referenced SSWD permit. | | | | |
| INSTALLER SIGNATURE: | Druly this | | | |
| DATE SUBMITTED: | 12/12/19 | | | |
| By signing and accepting this document from conducted for the referenced SSWD permit. | the Certified Installer, I acknowledge that a site preparation inspection was not | | | |
| LPI SIGNATURE: | l. Chent | | | |
| ACCEPTANCE DATE: | Dec. 13 2014 | | | |
| | | | | |

HHE-238-B (Revision 01/2008)