

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION		>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<	
City, Town, or Plantation	GRAY	GRAY 3774 TOWN COPY Date Permit Issued: <u>8-27-03</u> Local Plumbing Inspector Signature: _____ Fee: <u>200.00</u> + <u>20.00</u> = <u>220.00</u> #028#	
Street or Road	AMBROSE CIRCLE		
Subdivision, Lot #	MAY MEADOW LOT 67		
OWNER/APPLICANT INFORMATION		CAUTION: INSPECTION REQUIRED	
Name (last, first, MI) MAY MEADOW BUILDERS ☒ Owner ☐ Applicant			
Mailing Address of Owner/Applicant P.O. Box 905 GRAY, MAINE			
Daytime Tel. #	657-3333	Municipal Tax Map # <u>10</u> Lot # <u>10-67</u>	
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understanding that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.		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>Michelle Goff</u> Date: <u>9.2.03</u>		Local Plumbing Inspector Signature: _____ (1st) 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 Permit	☒ 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	DISPOSAL SYSTEM TO SERVE	TYPE OF WATER SUPPLY	
3/4 ☐ SQ. FT. ☒ ACRES	☒ 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> ☐ 2. Multiple Family Dwelling, No. of Units: _____ ☐ 3. Other: _____ (specify) Current Use ☐ Seasonal ☐ Year Round ☒ Undeveloped	☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other	
SHORELAND ZONING	DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)		
TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
☒ 1. Concrete ☒ a. Regular ☐ b. Low Profile ☐ 2. Plastic ☐ 3. Other: _____ CAPACITY: <u>1000</u> GAL.	☒ 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>965</u> ☒ sq. ft. ☐ lin. ft.	☒ 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	<u>290</u> gallons per day BASED ON: ☒ 1. Table 501.1 (dwelling unit(s)) ☐ 2. Table 501.2 (other facilities) SHOW CALCULATIONS --- for other facilities ---
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	ATTACH WATER METER DATA
PROFILE CONDITION DESIGN <u>3 / C</u> at Observation Hole # <u>TB-1</u> Depth <u>30</u> " of Most Limiting Soil Factor	☐ 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	☒ 1. Not Required ☐ 2. May Be Required ☐ 3. Required Specify only for engineered systems: DOSE: _____ gallons	
SITE EVALUATOR STATEMENT			
I certify that on <u>8-27-03</u> (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: <u>Mark Cenci</u>		SE #: <u>262</u>	Date: <u>8-27-03</u>
Site Evaluator Name Printed: <u>MARK CENCI</u>		Telephone Number: <u>797-2110</u>	E-mail Address: _____
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.			

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Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5872 Fax: (207) 287-3165

Town, City, Plantation

GRAY

Street, Road, Subdivision

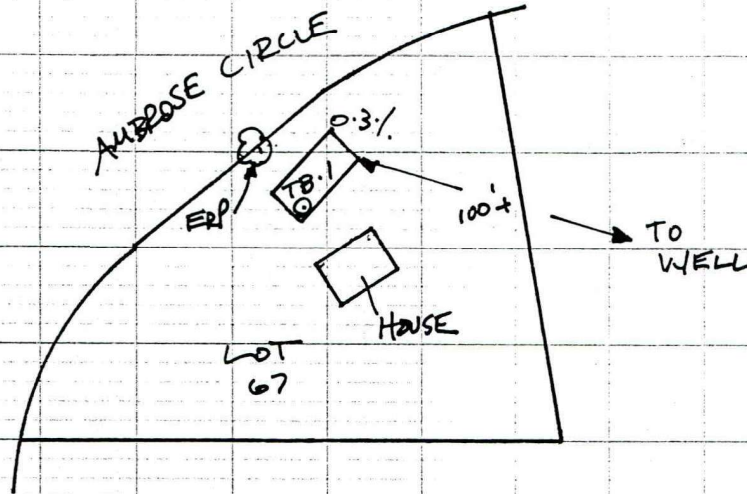
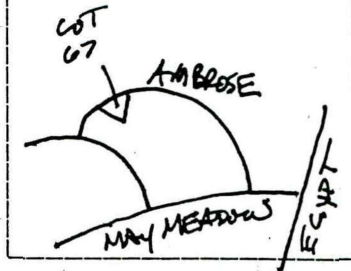
AMBROSE CIRCLE LOT 67

Owner or Applicant Name

MAY MEADOW BUILDERS

SITE PLAN Scale 1" = 100 ft.

SITE LOCATION PLAN
(map from Maine Atlas recommended)



SOIL PROFILE DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole # ☐ Test Pit ☐ Boring

 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0			
6			
12			
18			
24			
30			
36			
42			
48			
Soil	Classification	Slope	Limiting Factor
3	C	0.3	30
Profile	Condition	Percent	Depth

Observation Hole # ☐ Test Pit ☐ Boring

 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0			
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Site Evaluator Signature

SE #

Date

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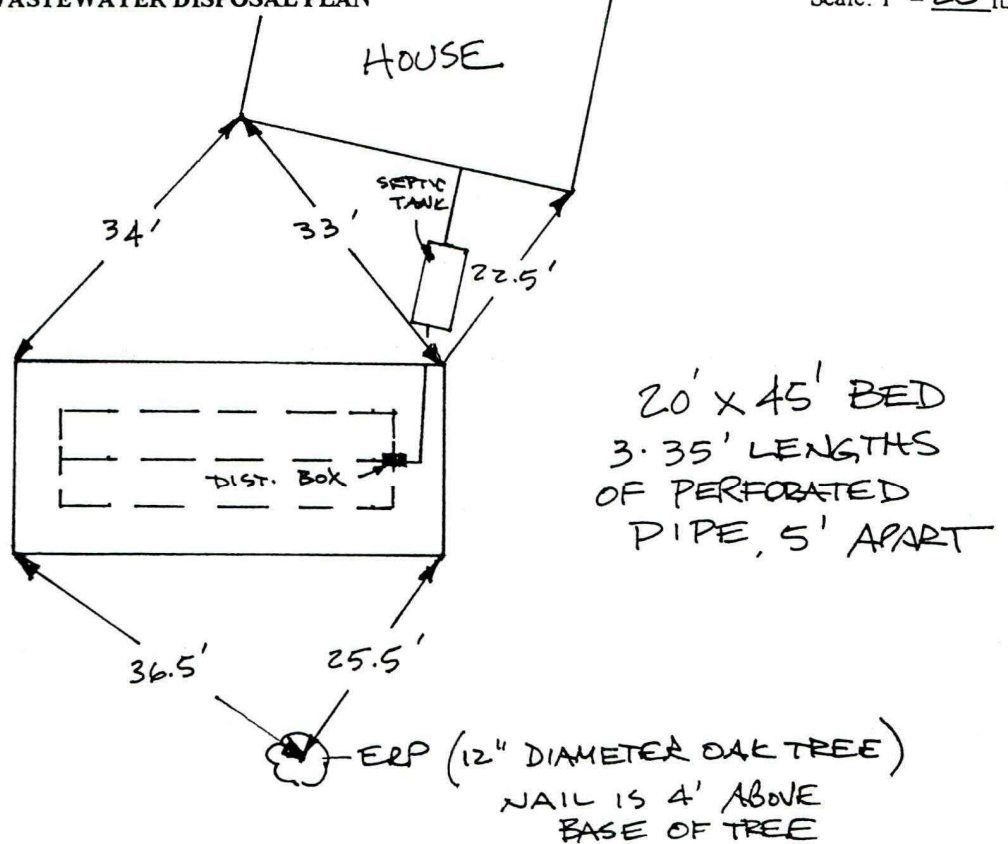
Town, City, Plantation
GRAY

Street, Road, Subdivision
AMBROSE CIRCLE LOT 67

Owner or Applicant Name
MAY MEADOW BUILDERS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS

CONSTRUCTION ELEVATIONS

ELEVATION REFERENCE POINT

Depth of Backfill (upslope) 10"
Depth of Backfill (downslope) 0"
DEPTHS AT CROSS-SECTION (shown below)

Finished Grade Elevation -42"
Top of Proprietary Device -52"
Bottom of Disposal Field -63"

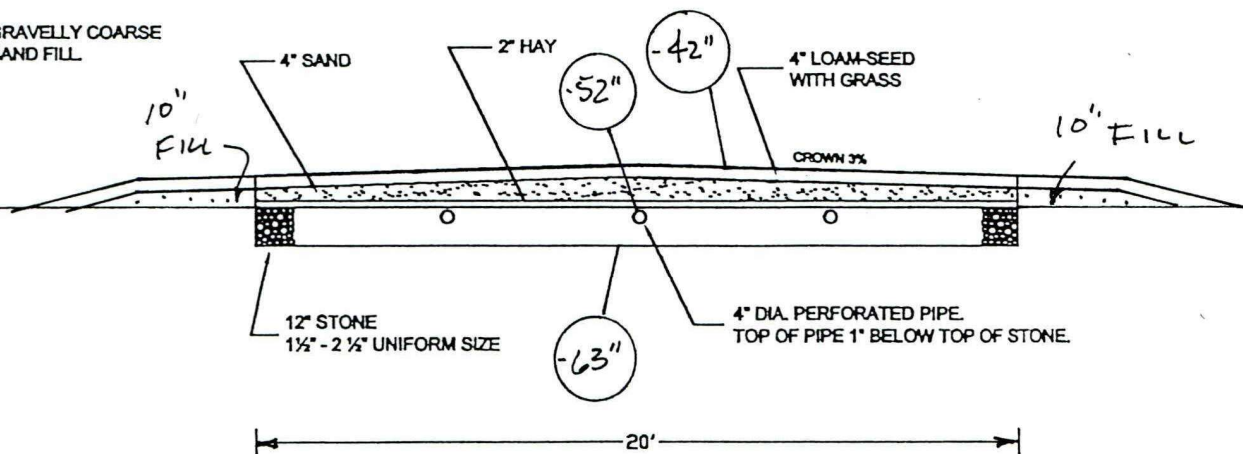
Location & Description: NAIL IN 12" DIAMETER OAK TREE
Reference Elevation is: 0.0" or: _____

NOTE: SCARIFY GROUND SURFACE BELOW FILL. BED THICKNESS FROM BASE OF STONE TO TOP OF LOAM: 22"

DISPOSAL FIELD CROSS SECTION

Scales:
Vertical: 1" = 5 ft.
Horizontal: 1" = 5 ft.

GRAVELLY COARSE SAND FILL



Site Evaluator Signature

SE #

Date