5480

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div. Environmental Health, 11SHS
(207) 287-2070 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation	Yarmouth
Street or Road	104 Spruce Point Road
Subdivision, Lot #	

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	Wright - Ryan Homes (Owner / Applicant)
Mailing Address of Owner/Applicant	10 Danforth Street
	Portland 04101
Daytime Tel. #	773-3625

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: 9/7/18

>> CAUTION: LPI APPROVAL REQUIRED <<

STATE

Town of Yarmouth Permit # **4455**

Date Permit Issued 9/20/18 Fee: $ 250

☐ Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 11271

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: Chamber/Plastic
   Year installed: 2009
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

2.69 ac (SQ. FT. / ACRES)

SHORELAND ZONING

Yes / No

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: 6
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: 2000 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: 1920 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

540 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 / C

at Observation Hole # TP1

Depth 20 "

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
4. Extra Large---5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

1. Not Required
2. May Be Required
3. Required

Specify only for engineered systems:

DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 43 d 43 m 04 s

Lon. 70 d 04 m 43 s

if g.p.s, state margin of error: 15

SITE EVALUATOR STATEMENT

I certify that on 8/22/18 (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).

Mark Hampton — Site Evaluator Signature

263 — SE #

8/22/18 — Date

Mark J. Hampton — Site Evaluator Name Printed

756-2900 — Telephone Number

E-mail Address

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

5450

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

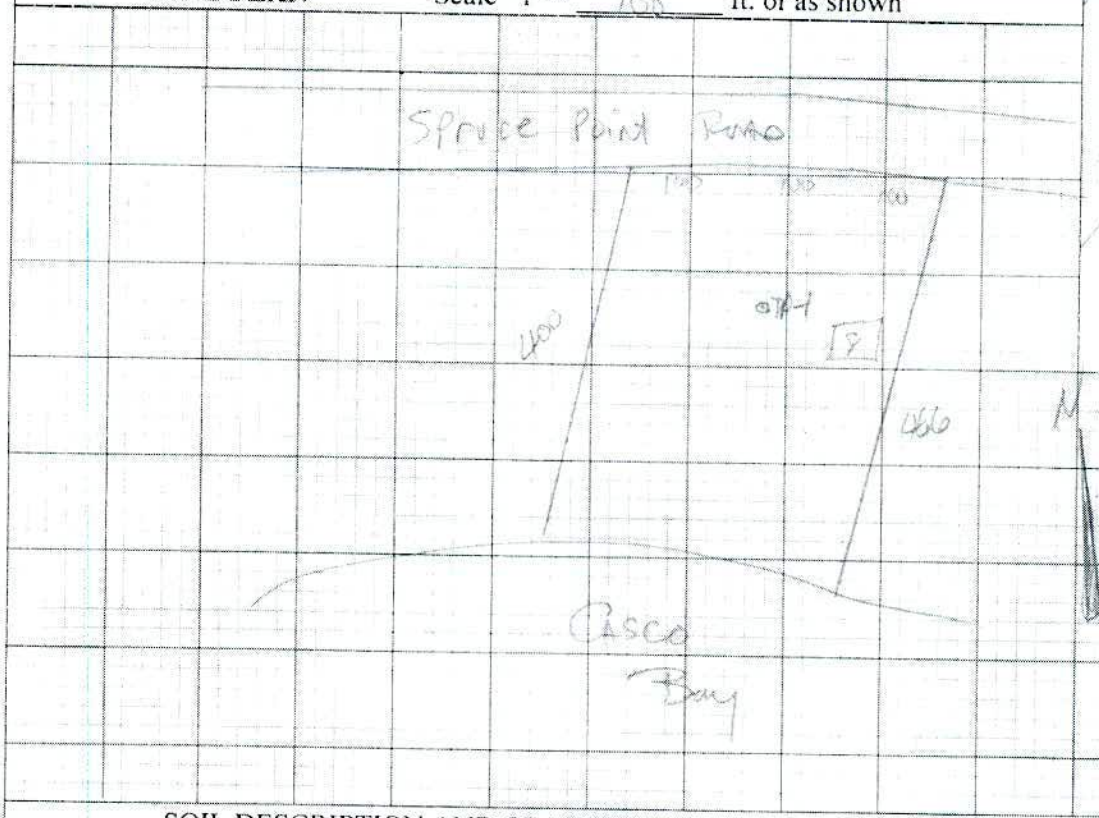
Town, City, Plantation: Yarmouth

Street, Road, Subdivision: 104 Space Point Road

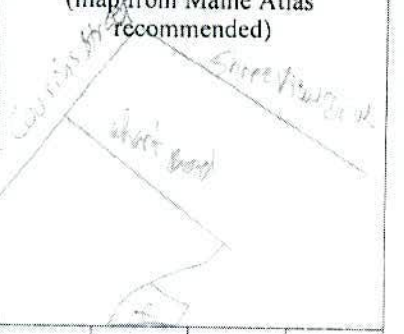
Owner's Name: Craig & Denise Benson

SITE PLAN

Scale 1" = 100 ft. or as shown



SITE LOCATION PLAN
(map from Maine Atlas recommended)



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
0–10	Sandy loam	Friable	Dark brown	
10–20	Sandy loam	Friable	Brown	
20–30	Sandy loam	Firm	Olive	Common distinct
30–40				
40–50				

Soil Classification	Slope	Limiting Factor	
Profile: 3 Condition: C	2 %	20 "	☒ 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				

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

Site Evaluator Signature: [signature] SE #: 223 Date: 8/29/18

5480

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

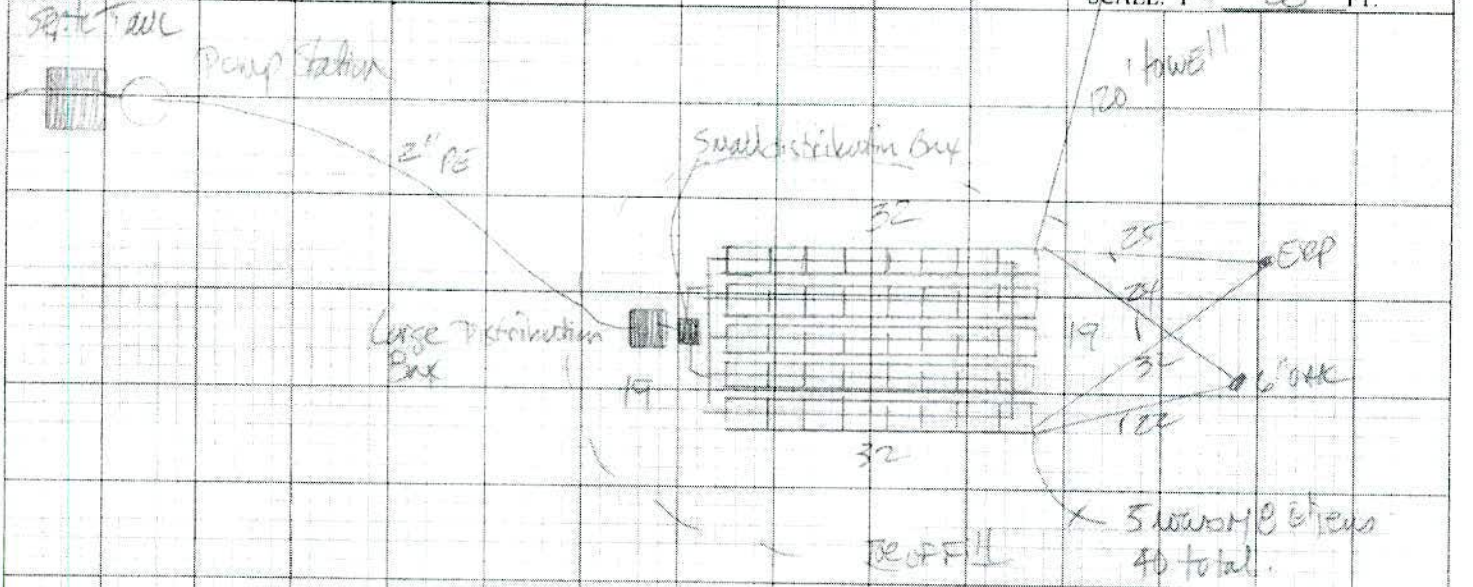
Department of Health & Human Services
Division of Environmental Health
(207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation	Street, Road, Subdivision	Owner's Name
Yarmouth	104 Spruce Point Road	Craig & Denise Benson

SUBSURFACE WASTEWATER DISPOSAL PLAN

0 _____

SCALE: 1" = 20 FT.

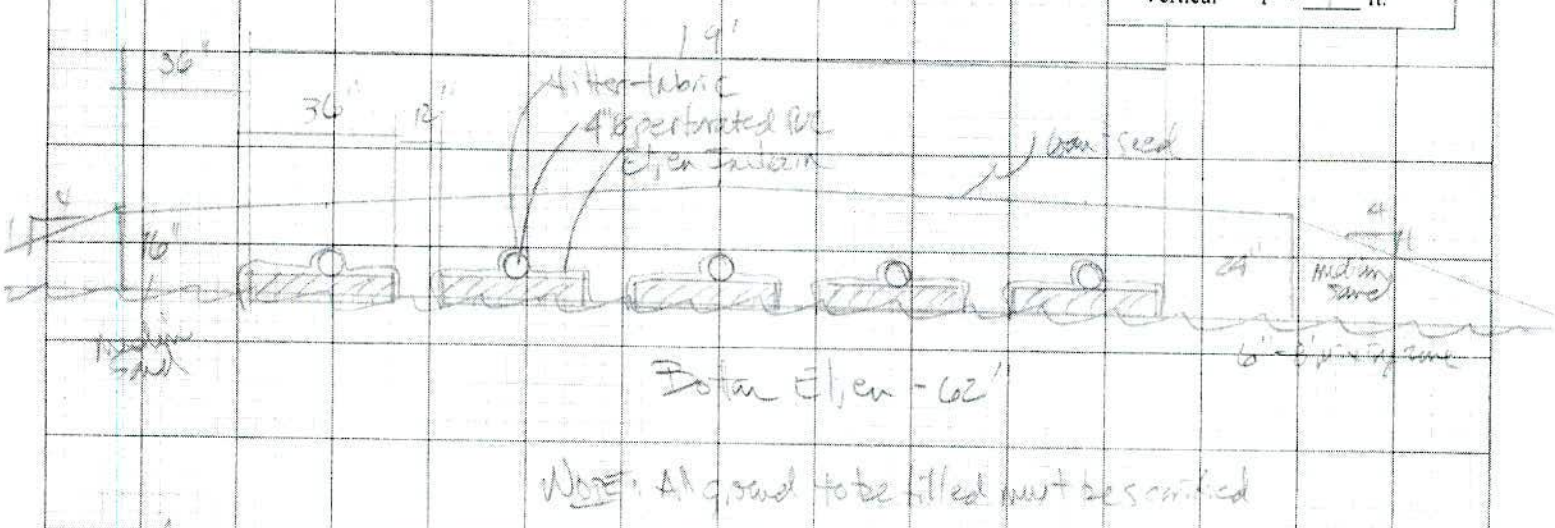


Note: Materials and installation shall be in accordance with Maine Subsurface Wastewater Disposal Rules dated 08/15 as amended.

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	16	Finished Grade Elevation	-41	Location & Description: Nail 50' up 8 @ Balsam
Depth of Fill (Downslope)	24	Top of Distribution Pipe or Proprietary Device	-51	Reference Elevation: 0'
		Bottom of Disposal Area	-62	

DISPOSAL AREA CROSS SECTION

Scale
Horizontal 1" = 4 ft.
Vertical 1" = 4 ft.



Mary Hampton 263 8/29/18

Site Evaluator Signature SE # Date