

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 269-3828

| PROPERTY ADDRESS | |
|---|--|
| Town Or Plantation | PORTLAND PEAKS ISLAND |
| Street | PLEASANT AVENUE |
| Subdivision Lot # | TAX MAP 87 BLOCKA LOT 3 |
| PROPERTY OWNERS NAME | |
| Last: | HAROLD & PAT |
| First: | |
| Applicant Name: | DONALD GROEGER |
| Mailing Address of Owner/Applicant (If Different) | 65 VAUGHN HILL RD BOLTON MASS 01740 |

PORTLAND

Date Permit Issued: 12/13/94 \$ 100 L.P.I. # 0124

5270 TOWN COPY

Double Fee Charged

Local Plumbing Inspector Signature

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and I understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

[Signature] 12/15
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.

[Signature] 12-15-94
Local Plumbing Inspector Signature Date Approved

| PERMIT INFORMATION | | |
|--|--|---|
| <p>THIS APPLICATION IS FOR:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NEW SYSTEM <input type="checkbox"/> REPLACEMENT SYSTEM <input type="checkbox"/> EXPANDED SYSTEM <input type="checkbox"/> SEASONAL CONVERSION <input type="checkbox"/> EXPERIMENTAL SYSTEM | <p>THIS APPLICATION REQUIRES:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NO RULE VARIANCE REQUIRED <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form <input type="checkbox"/> Requires only Local Plumbing Inspector Approval <input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval | <p>INSTALLATION IS COMPLETE SYSTEM</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet) <input type="checkbox"/> ENGINEERED (+2000 gpd) <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <ol style="list-style-type: none"> <input type="checkbox"/> TREATMENT TANK (ONLY) <input type="checkbox"/> HOLDING TANK <input type="checkbox"/> ALTERNATIVE TOILET (ONLY) <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY) <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY) <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM |
| <p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> <input type="checkbox"/> BED <input type="checkbox"/> CHAMBER <input type="checkbox"/> TRENCH <input type="checkbox"/> OTHER: _____ | <p>DISPOSAL SYSTEM TO SERVE:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING <input type="checkbox"/> MODULAR OR MOBILE HOME <input type="checkbox"/> MULTIPLE FAMILY DWELLING <input type="checkbox"/> OTHER _____ SPECIFY _____ | <p>TYPE OF WATER SUPPLY</p> <p>PUBLIC WATER</p> |
| <p>SIZE OF PROPERTY: <u>34,592 SF</u></p> | <p>ZONING: <u>IR2</u></p> | |

| DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3) | | | |
|--|---|---|--|
| <p>TREATMENT TANK</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile <input type="checkbox"/> AEROBIC <p>SIZE: <u>1000</u> GALS.</p> | <p>WATER CONSERVATION</p> <ol style="list-style-type: none"> <input type="checkbox"/> NONE <input checked="" type="checkbox"/> LOW VOLUME TOILET <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM <input type="checkbox"/> ALTERNATIVE TOILET <p>SPECIFY: _____</p> | <p>PUMPING</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> NOT REQUIRED <input type="checkbox"/> MAY BE REQUIRED (DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION) <input type="checkbox"/> REQUIRED <p>DOSE: _____ GALS.</p> | <p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p><u>3</u> BEDROOM CONSERVATIVE <u>450</u></p> |
| <p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <p>PROFILE: <u>5</u> CONDITION: <u>C</u></p> <p>DEPTH TO LIMITING FACTOR: <u>25</u></p> | <p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <ol style="list-style-type: none"> <input type="checkbox"/> SMALL <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> MEDIUM-LARGE <input type="checkbox"/> LARGE <input type="checkbox"/> EXTRA LARGE | <p>DISPOSAL AREA TYPE/SIZE</p> <ol style="list-style-type: none"> <input type="checkbox"/> BED _____ Sq. Ft. <input checked="" type="checkbox"/> CHAMBER <u>525</u> * Sq. Ft. <input type="checkbox"/> TRENCH _____ Linear Ft. <input type="checkbox"/> OTHER: _____ | <p>LOW VOLUME TOILET <u>45</u></p> <p>DESIGN FLOW: <u>405</u> (GALLONS/DAY)</p> |

SITE EVALUATOR STATEMENT * USED 21 INFILTRATOR POLYETHYLENE CHAMBERS IN TRENCH CONFIGURATION

On July 27 1985 (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.

[Signature] 0003/4814 12/6/94
Site Evaluator or Professional Engineer's Signature SE # / PE # Date

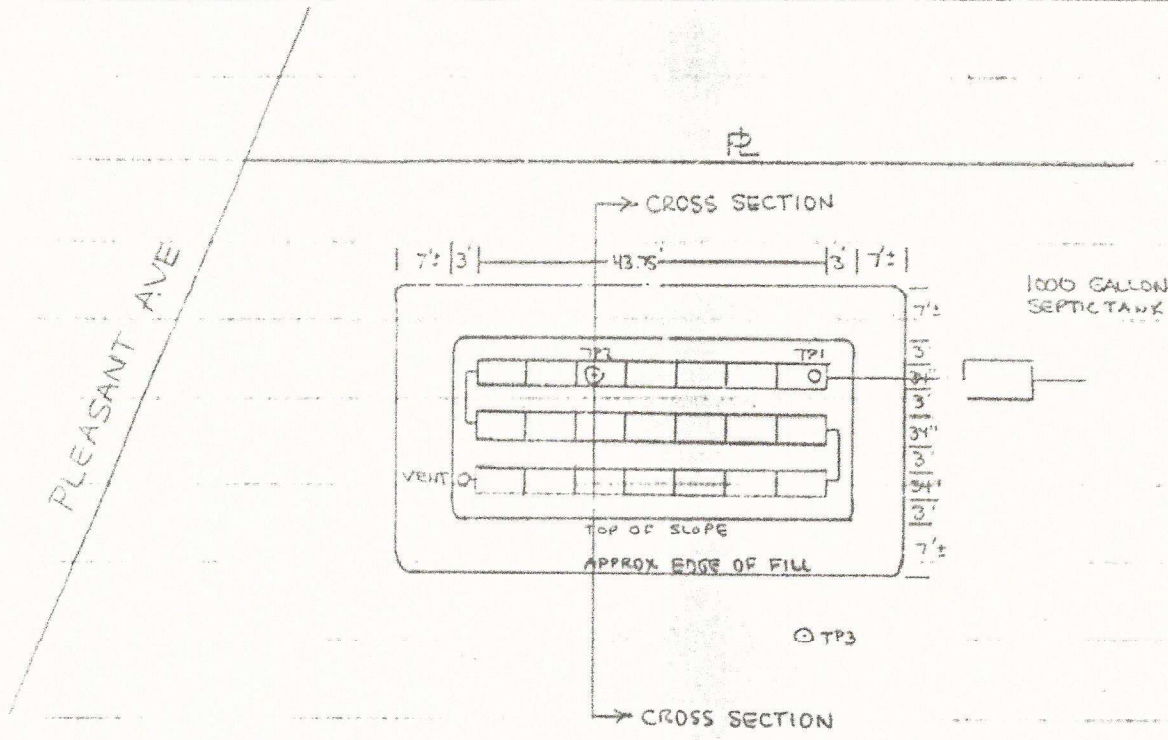
Page 1 of 3
HHE - 200 Rev. 4/83

NOTE: THESE NEW HHE-200 FORMS ARE A MODIFICATION OF THE ORIGINAL DESIGN PREPARED IN 1985 AND WERE PREPARED AND "DESIGNED" BY NORMAN V. TWADDLE. *[Signature]* 12/06/94

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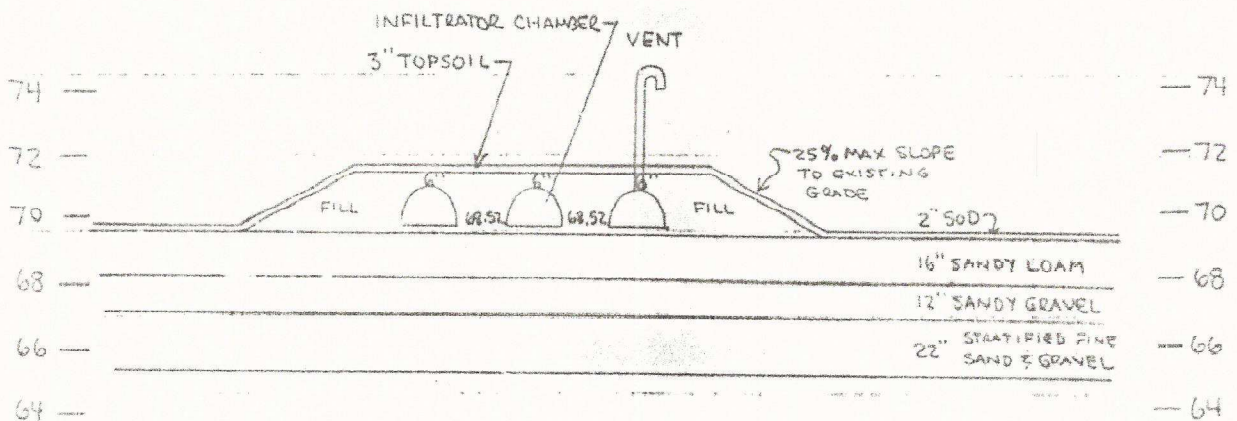
Department of Human Services
Division of Health Engineering

| | | |
|---|--|----------------------------------|
| Town, City, Plantation PORTLAND PEAKS ISLAND | Street, Road, Subdivision PLEASANT AVE 87-A-3 | Owners Name HAROLD & PAT ANOS |
| SURFACE WASTEWATER DISPOSAL PLAN | | Scale 1" = 20 Ft. |



| FILL REQUIREMENTS | CONSTRUCTION ELEVATIONS | ELEVATION REFERENCE POINT LOCATION & DESCRIPTION |
|--------------------------------------|--|--|
| Depth of Fill (Upslope) <u>EL.</u> | Reference Elevation is <u>73.05</u> | PK NAIL IN CMP POLE #11 |
| Depth of Fill (Downslope) <u>22.</u> | Bottom of Disposal Area <u>68.52</u> | |
| | Top of Distribution Lines or Chambers <u>69.77</u> | |

| DISPOSAL AREA CROSS SECTION | Scale: |
|-----------------------------|-----------------------------|
| | Vertical: 1 inch = 5 Ft. |
| | Horizontal: 1 inch = 10 Ft. |



William B. Goodwin
Site Evaluator or Professional Engineer's Signature

000374814
SE # / PE #

12/6/94
Date

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Department of Human Services
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Town, City, Plantation

Street, Road, Subdivision

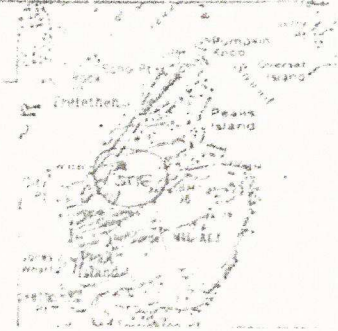
Owner's Name

PORTLAND PEAKS ISLAND PLEASANT AVE 87-A-3

HAROLD & PAT ANOS

SITE PLAN

Scale 1" = 60' Ft.



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 1 Test Pit Boring

Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|----------------|---------------------|-----------------|----------|
| CLAY GRAVEL | | BROWN | |
| | LOOSE | YELLOW | NONE |
| SAND | | YELLOW | |
| CLAY GRAVEL | CEMENTED HARDPAN | YELLOW BROWN | FEW |

Soil Classification: C
 Slope: 1%
 Limiting Factor: 34'

Ground Water
 Rock Cover Layer
 Bedrock

Observation Hole 2 Test Pit Boring

Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|---|-------------|-----------------------|----------|
| SANDY LOAM | | BROWN | NONE |
| SANDY GRAVEL | LOOSE | RED YELLOW | COMMON |
| STRATIFIED FINE SAND & GRAVEL LAYERS | | SANDY YELLOW | FEW |
| | | GRAY-RED RED BROWN | |

Soil Classification: C
 Slope: 1%
 Limiting Factor: 25'

Ground Water
 Rock Cover Layer
 Bedrock

Richard D. ... 0002/10/94

12/6/94

