

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

City, Town, or Plantation: **PORTLAND; PEAKS ISLAND**

Street or Road: **30 HIGHLAND AVENUE**

Subdivision, Lot #

OWNER/APPLICANT INFORMATION

Name (last, first, MI): **WEBSTER TIMOTHY** Owner Applicant

Mailing Address of Owner: **P.O. BOX 1054 VINEYARD HAVEN, MA 02568**

Daytime Tel. #: **781-264-3067**

>>CAUTION: LPI APPROVAL REQUIRED<<

Town/City: **Portland, ME** Permit # **2017-07255**

Date Permit Issued: **7/10/17** Fee \$ **270.00** Double Fee Charged []

Timothy Webster L.P.I.# **1188**
Local Plumbing Inspector Signature

Fee \$ _____ State Fee Fee \$ _____ Locally Adopted Fee
Copy: [] Owner [] Town [] State

The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map # **88** Lot # **B-7 & B-25**

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.

Timothy Webster **7/6/17**
Signature of Owner/Applicant Date

RECEIVED CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

JUL 06 2017

Permitting & Inspections
City of Portland Maine Local Plumbing Inspector Signature

(1st) Date Approved _____
(2nd) Date Approved _____

PERMIT INFORMATION

<p>TYPE OF APPLICATION</p> <p><input type="checkbox"/> 1. First Time System</p> <p><input checked="" type="checkbox"/> 2. Replacement System Type Replaced: ELJEN GSF Year Installed: 1993 +/-</p> <p><input type="checkbox"/> 3. Expanded System</p> <p><input type="checkbox"/> a. <25% Expansion</p> <p><input type="checkbox"/> b. >25% Expansion</p> <p><input type="checkbox"/> 4. Experimental System</p> <p><input type="checkbox"/> 5. Seasonal Conversion</p>	<p>THIS APPLICATION REQUIRES</p> <p><input type="checkbox"/> 1. No Rule Variance</p> <p><input type="checkbox"/> 2. First Time System Variance</p> <p><input type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State & Local Plumbing Inspector Approval</p> <p><input checked="" type="checkbox"/> 3. Replacement System Variance</p> <p><input checked="" type="checkbox"/> a. Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> b. State & Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 4. Minimum Lot Size Variance</p> <p><input type="checkbox"/> 5. Seasonal Conversion Permit</p>	<p>DISPOSAL SYSTEM COMPONENTS</p> <p><input type="checkbox"/> 1. Complete Non-Engineered System</p> <p><input type="checkbox"/> 2. Primitive System (graywater & alt toilet)</p> <p><input type="checkbox"/> 3. Alternative Toilet, specify: _____</p> <p><input type="checkbox"/> 4. Non-Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 5. Holding Tank, _____ gallons</p> <p><input checked="" type="checkbox"/> 6. Non-Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 7. Separated Laundry System</p> <p><input type="checkbox"/> 8. Complete Engineered System (2000gpd+)</p> <p><input type="checkbox"/> 9. Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 10. Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 11. Pre-treatment, specify: _____</p> <p><input type="checkbox"/> 12. Miscellaneous components</p>
<p>SIZE OF PROPERTY</p> <p>1.5 +/- <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES</p>	<p>DISPOSAL SYSTEM TO SERVE</p> <p><input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 2</p> <p><input type="checkbox"/> 2. Multiple Family Dwelling, No of Units: _____</p> <p><input type="checkbox"/> 3. Other: _____ (specify)</p> <p>Current Use <input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	<p>EXISTING TYPE OF WATER SUPPLY</p> <p><input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private</p> <p><input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____</p>
<p>SHORELAND ZONING</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK EXISTING</p> <p><input checked="" type="checkbox"/> 1. Concrete</p> <p><input checked="" type="checkbox"/> a. Regular</p> <p><input type="checkbox"/> b. Low Profile</p> <p><input type="checkbox"/> 2. Plastic</p> <p><input type="checkbox"/> 3. Other: _____</p> <p>CAPACITY: 1000 GAL. SEE NOTE ON PAGE 3</p>	<p>DISPOSAL FIELD TYPE & SIZE</p> <p><input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench</p> <p><input checked="" type="checkbox"/> 3. Proprietary Device</p> <p><input type="checkbox"/> a. Cluster array <input checked="" type="checkbox"/> c. Linear</p> <p><input checked="" type="checkbox"/> b. Regular <input type="checkbox"/> d. H-20 loaded</p> <p><input type="checkbox"/> 4. Other: _____</p> <p>SIZE: 672 sq. ft. <input type="checkbox"/> lin. ft. 14 ELJEN GSF UNITS</p>	<p>GARBAGE DISPOSAL UNIT</p> <p><input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe</p> <p>If Yes or Maybe, specify one below:</p> <p><input type="checkbox"/> a. Multi-compartment tank</p> <p><input type="checkbox"/> b. _____ tanks in series</p> <p><input type="checkbox"/> c. Increase in tank capacity</p> <p><input type="checkbox"/> d. Filter on tank outlet</p>	<p>DESIGN FLOW</p> <p>180 gallons per day BASED ON:</p> <p><input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s))</p> <p><input type="checkbox"/> 2. Table 4C (other facilities)</p> <p>SHOW CALCULATIONS for other facilities</p> <p>2 BEDROOMS AT 90 GALLONS PER DAY EACH</p> <p><input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER-METER DATA</p> <p>LATITUDE AND LONGITUDE at center of disposal area</p> <p>Lat. N43 d 39 m 46.11 s Lon. W70 d 11 m 17.60 s If g.p.s., state margin of error _____</p>
<p>SOIL DATA & DESIGN CLASS</p> <p>PROFILE CONDITION: 12 / B</p> <p>FILL OVER (2 AIII/C)</p> <p>at Observation Hole # TP 1</p> <p>Depth _____ "</p> <p>of Most Limiting Soil Factor</p>	<p>DISPOSAL FIELD SIZING</p> <p><input type="checkbox"/> 1. Medium - 2.6 sq.ft./gpd</p> <p><input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq.ft./gpd</p> <p><input type="checkbox"/> 3. Large - 4.1 sq.ft./gpd</p> <p><input type="checkbox"/> 4. Extra-Large - 5.0 sq.ft./gpd</p>	<p>EFFLUENT/EJECTOR PUMP</p> <p><input checked="" type="checkbox"/> 1. Not required</p> <p><input type="checkbox"/> 2. May be required</p> <p><input type="checkbox"/> 3. Required</p> <p>Specify only for engineered systems: SEE NOTE ON PAGE 3 DOSE: _____ gallons</p>	

SITE EVALUATOR STATEMENT

I certify that on **6/17** (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 Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Brady A. Frick **352** **6/23/17**
Site Evaluator Signature SE # Date

BRADY A. FRICK **(207) 839-5563** **BRADY@ALBERTFRICK.COM**
Site Evaluator Name Printed Telephone Number E-mail Address

ALBERT FRICK ASSOCIATES - 95A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

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

RECEIVED

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Town, City, Plantation
PORTLAND; PEAKS ISLAND

Street, Road Subdivision
30 HIGHLAND AVENUE

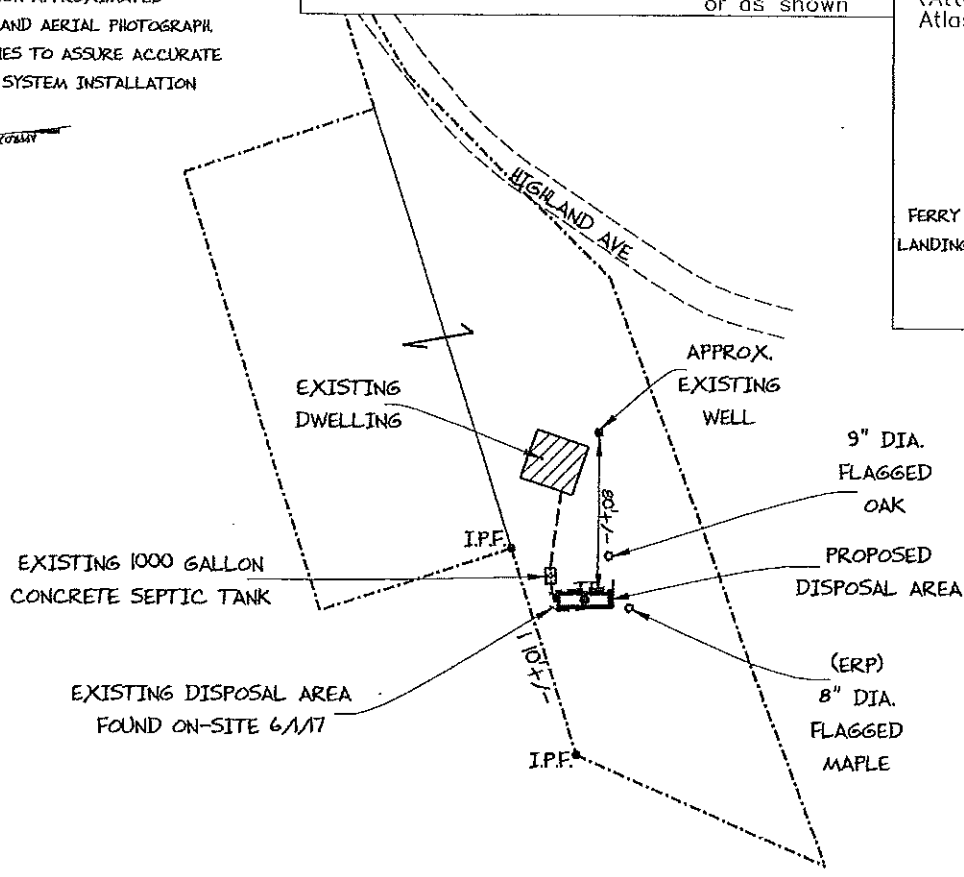
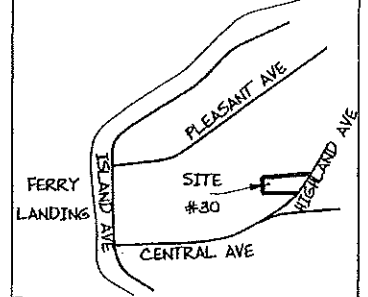
Owner's Name
TIMOTHY WEBSTER

****ALBERT FRICK ASSOCIATES ARE NOT SURVEYORS****
PROPERTY INFORMATION APPROXIMATED
PER TOWN TAX MAP AND AERIAL PHOTOGRAPH
VERIFY PROPERTY LINES TO ASSURE ACCURATE
LOCATION PRIOR TO SYSTEM INSTALLATION

SITE PLAN

Scale 1" = 100 Ft.
or as shown

SITE LOCATION PLAN
(Attach Map from Maine
Atlas Recommended)



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

Observation Hole TP 1 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SANDY		DARK	
	LOAM		BROWN	
	(FILL)			
10	GRAVELLY			
	COARSE SAND	FRIABLE	YELLOW BROWN	NONE
20				EVDIENT
	ELJEN			
	GSF UNIT			
30				
40				
50				

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
<u>12</u> <u>B</u>	<u>0-3 %</u>	<u>-</u>	<input type="checkbox"/> Restrictive Layer
Profile Condition			<input type="checkbox"/> Bedrock
<u>FILL OVER (2' AT/17C)</u>			<input type="checkbox"/> 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				
20				
30				
40				
50				

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
Profile Condition	<u> </u> %	<u> </u>	<input type="checkbox"/> Restrictive Layer
			<input type="checkbox"/> Bedrock
			<input type="checkbox"/> Pit Depth

Site Evaluator Signature

352
SE #

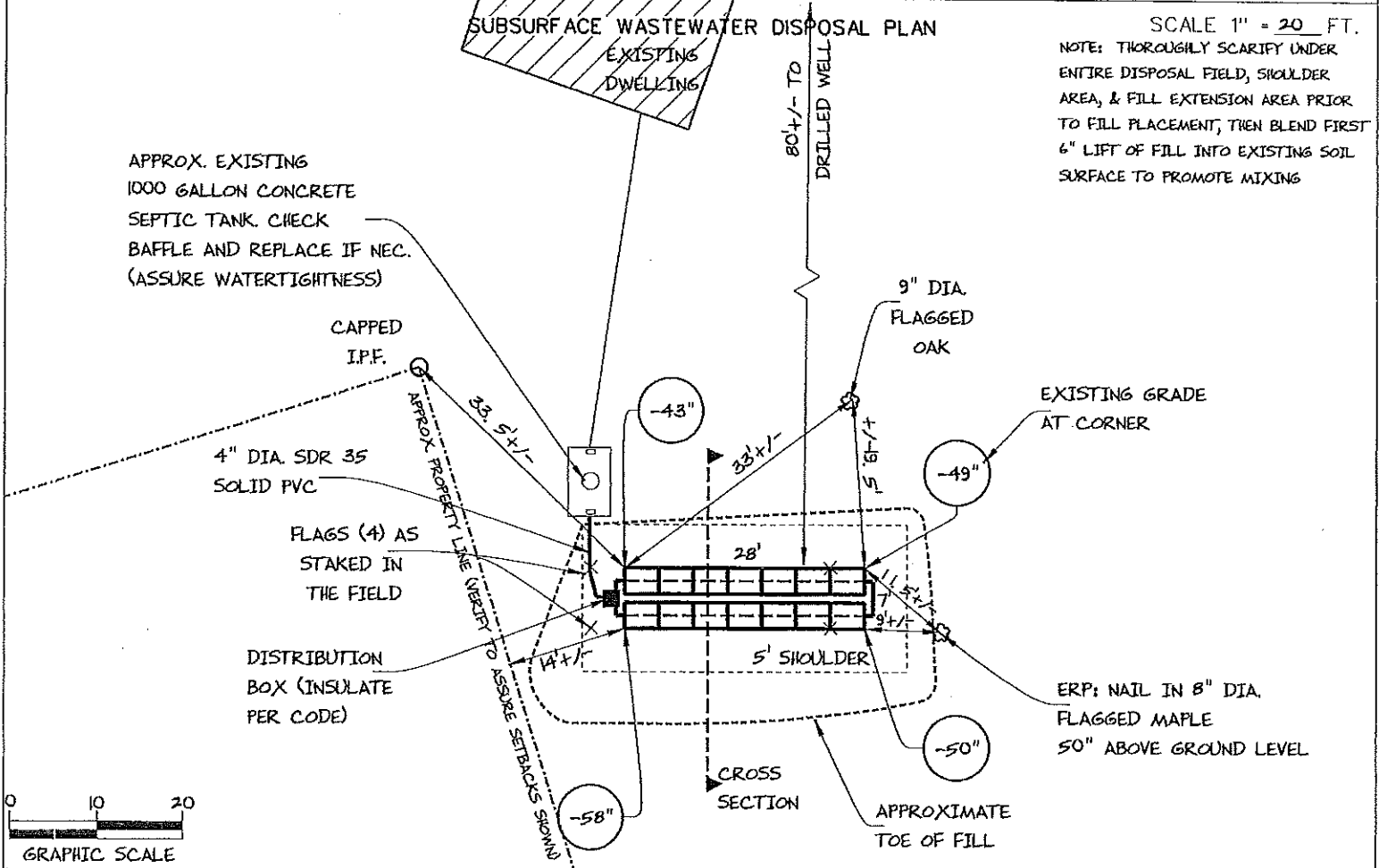
6/23/17
Date

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FILL REQUIREMENTS

Depth of Fill (Upslope) : 0" - 6"
 Depth of Fill (Downslope) : 7" - 15"
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

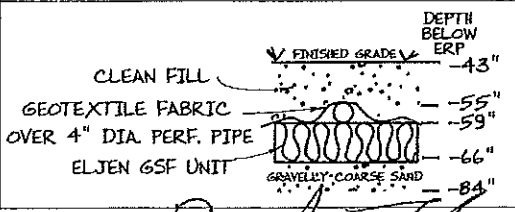
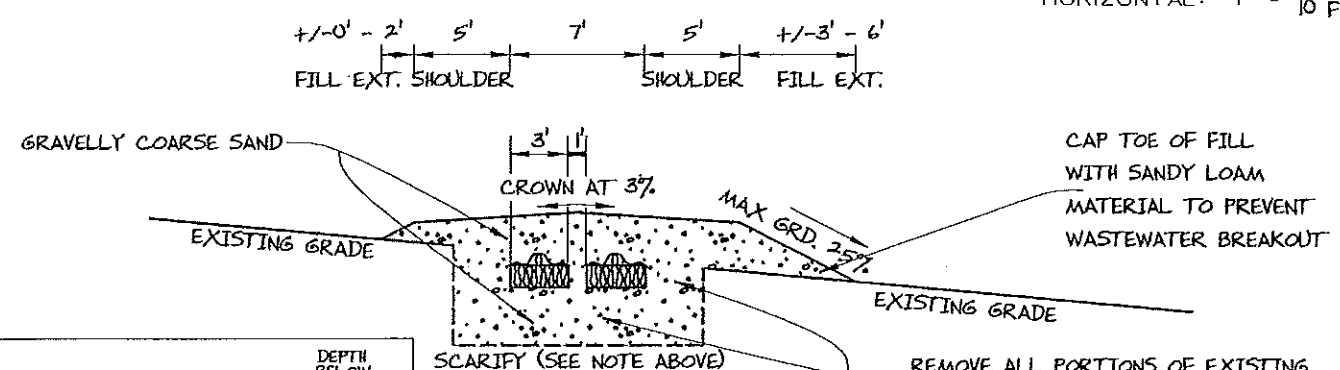
Finished Grade Elevation
 Top of Distribution Pipe or Proprietary Device
 Bottom of Disposal Area

ELEVATION REFERENCE POINT

Location & Description: 8" DIA. FLAGGED MAPLE, NAIL 50" ABOVE BASE
 Reference Elevation is: 0.0' or -----

DISPOSAL AREA CROSS SECTION

SCALE:
 VERTICAL: 1" = 5 FT
 HORIZONTAL: 1" = 10 FT



REMOVE ALL PORTIONS OF EXISTING DISPOSAL AREA AND UNCONTROLLED FILL MATERIAL ENCOUNTERED TO A MINIMUM DEPTH OF 18" UNDERNEATH AND 3' ALONGSIDE DISPOSAL AREA AND REPLACE WITH CLEAN GRAVELLY COARSE SAND FILL

BA
 Site Evaluator Signature

352
 SE #

6/23/12
 Date
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