

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

**NEW ENGLAND WATER SUPPLY**  
**ENGINEERS & ARCHITECTS**

<b>PROPERTY LOCATION</b>		>> <b>Caution: Permit Required - Attach in Space Below</b> <<	
City, Town or Plantation	PORTLAND (PEAKS ISLAND)	The Subsurface Wastewater Disposal System shall not be installed until a Permit is obtained HERE 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.	
Street or Road	287 PLEASANT AVENUE		
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	SULLIVAN JIM & JEAN	Owner Applicant	
Mailing Address of	287 PLEASANT AVENUE		
<input checked="" type="checkbox"/> Owner Applicant	PEAKS ISLAND, ME 04850		
Daytime Tel. #	766-2466	Municipal Tax Map #	90 Lot # 3
<b>Owner or Applicant Statement</b>		<b>Caution: Inspections Required</b>	
I state 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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
<i>James Sullivan</i> Signature of Owner/Applicant		_____ Local Plumbing Inspector Signature	
6-13-00 Date		(1st) Date Approved  (2nd) Date Approved	

<b>PERMIT INFORMATION</b>			
<b>TYPE OF APPLICATION</b>	<b>THIS APPLICATION REQUIRES</b>	<b>DISPOSAL SYSTEM COMPONENT(S)</b>	
1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	1. <input type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input checked="" type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	1. <input checked="" type="checkbox"/> Complete Non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & all toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank _____ Gallons 6. <input type="checkbox"/> Non-Engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous component(s)	
<b>SIZE OF PROPERTY</b>	<b>DISPOSAL SYSTEM TO SERVE</b>	<b>TYPE OF WATER SUPPLY</b>	
4500 ± sq. ft.	1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: 3	1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> dug Well 3. <input type="checkbox"/> Private	
<b>SHORELAND ZONING</b>	2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____	4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3. <input type="checkbox"/> Other: _____ SPECIFY		

**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<b>TREATMENT TANK</b>	<b>DISPOSAL FIELD TYPE &amp; SIZE</b>	<b>GARBAGE DISPOSAL UNIT</b>	<b>DESIGN FLOW</b>
1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY 1000 gallons	1. <input type="checkbox"/> Stone Bed 2. Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input type="checkbox"/> Linear b. <input checked="" type="checkbox"/> Regular d. <input type="checkbox"/> H-20 loaded 4. <input type="checkbox"/> Other: _____ SIZE 162 sq. ft. 24 ELVEN IN-DRAINS	1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment tank b. <input type="checkbox"/> Tank in series c. <input type="checkbox"/> Increase in tank capacity d. <input type="checkbox"/> Filter on tank outlet	270 gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS - for other facilities -  3 BEDROOMS AT 90 GALLONS PER DAY EACH
<b>SOIL DATA &amp; DESIGN CLASS</b>	<b>DISPOSAL FIELD SIZING</b>	<b>PUMPING</b>	<b>ATTACH WATER-METER DATA</b>
PROFILE A / C / AT Observation Hole = TP1 Depth 25" Elevation _____ OF MOST LIMITING SOIL FACTOR	1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd	1. <input checked="" type="checkbox"/> Not required SEE NOTE 2. <input type="checkbox"/> May be required PG 3 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems:  DOSE: _____ Gallons	3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA

**SITE EVALUATOR STATEMENT**

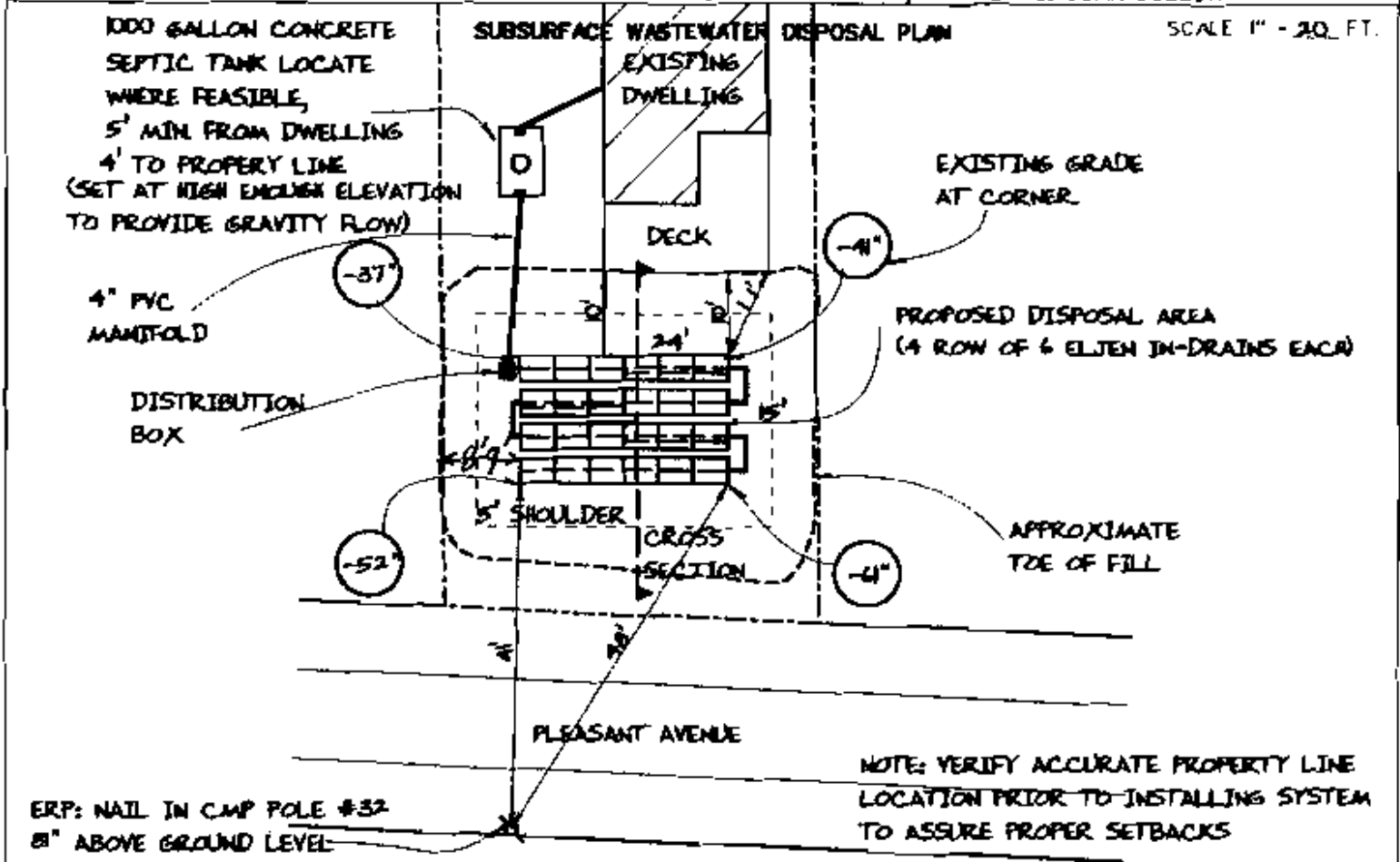
I certify that on 5/23/2000 (e) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).

*Albert Frick*  
 Site Evaluator Signature  
 6/2/2000  
 Date  
 Page 1 of 3  
 NHE-200 Rev. 1/95

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation: **PORTLAND (PEAKS ISLAND)** Street, Road, Subdivision: **287 PLEASANT AVENUE** Owner's Name: **JIM & JEAN SULLIVAN**



**FILL REQUIREMENTS**

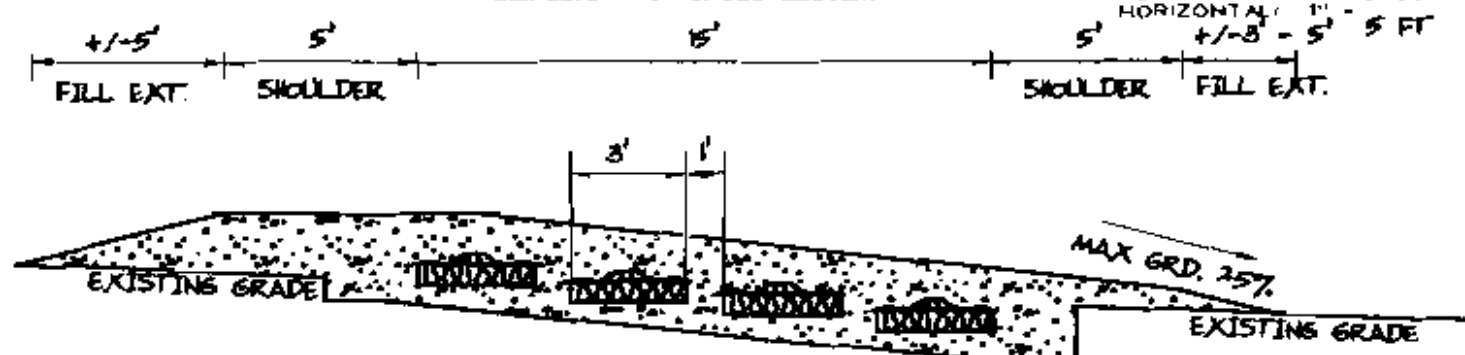
Depth of Fill (Topsoil) ± 6" - 20"  
Depth of Fill (Downsoil) ± 11" - 20"

**CONSTRUCTION ELEVATIONS**

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

**ELEVATION REFERENCE POINT**  
SEE **DETAIL BELOW**  
Location of Survey Pole #32  
NAIL 28" ABOVE BASE  
Reference Elevation 00"

**DISPOSAL AREA CROSS SECTION**



	ROW 1	2	3	4
CLEAN FILL	-34"	-36"	-38"	-36"
GEOTEXTILE FABRIC	-35"	-38"	-43"	-40"
OVER 4" DIA. PERFOR. PIPE	-37"	-43"	-47"	-52"
ELTEN IN-DRAIN UNIT	-44"	-49"	-54"	-59"
	-50"	-55"	-60"	-65"

*Albert Frick*  
Site Evaluator Signature

K3  
SE \*

6/2/2000  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation  
**PORTLAND (PEAKS ISLAND)**

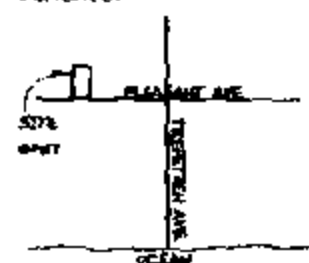
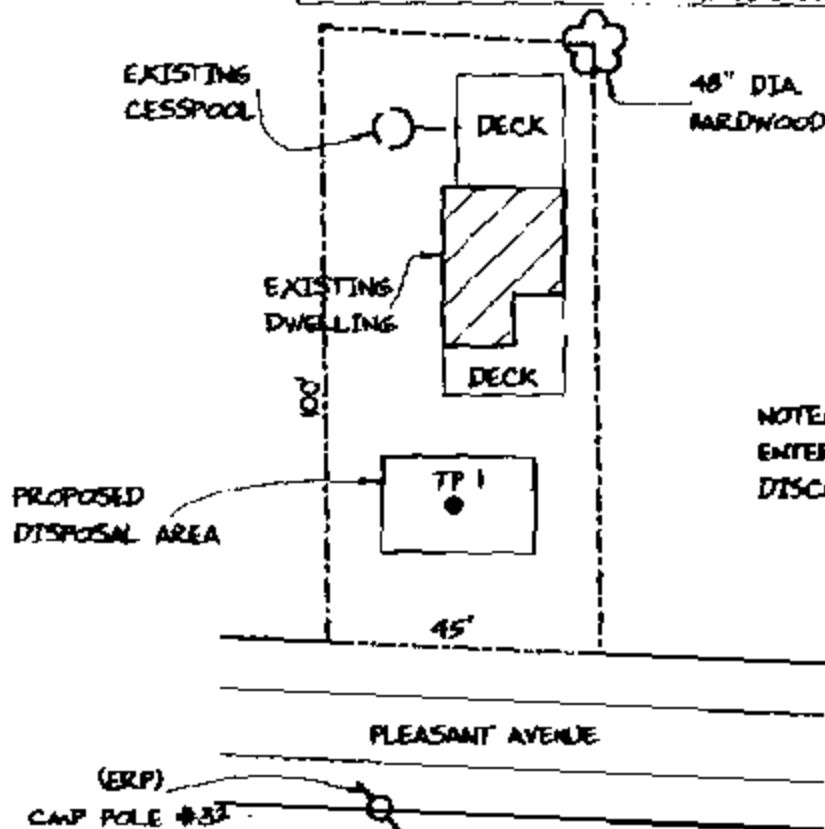
Street, Road Subdivision  
**287 PLEASANT AVENUE**

Owner's Name  
**JIM & JEAN SULLIVAN**

SITE PLAN

Scale 1" = 30 Ft.  
or as shown

SITE LOCATION PLAN  
(Attach Map from Maine Atlas for New System Variance)



NOTE: PUBLIC WATER SUPPLY ENTERS HOUSE FROM REAR PER DISCUSSION WITH OWNER

## 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 SURFACE (feet)	Texture	Consistency	Color	Mottling
0	SANDY		DARK	
0	LOAM		BROWN	
0	SANDY		DARK	
0	LOAM AND FRITABLE		YELLOW	
20	LOAMY SAND		BROWN LIGHT OLIVE BROWN	
30	LOAMY SAND	FIRM	OLIVE GRAY	COMMON FATIG
40	SAND			
50	SAND			

Soil Classification: **S** **C**  
Profile: **C** Condition: **25**  
Slope: **25**%  
Limiting Factor: **25**%  
Ground Water:   
Restrictive Layer:   
Bedrock:   
Pit Depth:

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

DEPTH BELOW SURFACE (feet)	Texture	Consistency	Color	Mottling
0				
0				
0				
0				
20				
30				
40				
50				

Soil Classification:    
Profile:  Condition:   
Slope: %  
Limiting Factor: %  
Ground Water:   
Restrictive Layer:   
Bedrock:   
Pit Depth:

*Albert Frick*  
Site Evaluator Signature

63  
SE \*

6/2/2000  
Date