

766-2508

200 56006

**SUBSURFACE WASTEWATER DISPOSAL** PORTLAND PERMIT # 9416 APPLICANT COPY

**PROPERTY LOCATION**

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

Street or Road: **TOLMAN ROAD**

Subdivision, Lot #:

Date Permit Issued: **10/17/05**

Local Plumbing Inspector Signature: *Jeannie Bonke*

L.P.I. # **017321**

If Double Fee Charged

**OWNER/APPLICANT INFORMATION**

Name (last, first, MI): **DOUGLASS MARY**

Mailing Address of: **154 MARLBOROUGH OTTOWA, CANADA K1N6G2**

Daytime Tel. #: **766-5058**

THE WORK SPECIFIED IN THIS APPLICATION IS HEREBY AUTHORIZED TO BE INSTALLED IN ACCORDANCE WITH THE RULES. THIS PERMIT EXPIRES AFTER TWO YEARS FROM DATE ISSUED UNLESS WORK HAS COMMENCED.

Municipal Tax Map # **9-1** Lot # **A 3**

**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: *Terrence J. Madigan* LPA 5-2-05

**Caution: Inspections Required**

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

Local Plumbing Inspector Signature: \_\_\_\_\_

**PERMIT INFORMATION**

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

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

<p><b>TREATMENT TANK</b></p> <p>1. <input checked="" type="checkbox"/> Concrete</p> <p>a. <input type="checkbox"/> Regular</p> <p>b. <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> Plastic</p> <p>3. <input type="checkbox"/> Other: _____</p> <p>CAPACITY: <b>1000</b> gallons</p>	<p><b>DISPOSAL FIELD TYPE &amp; SIZE</b></p> <p>1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench</p> <p>3. <input checked="" type="checkbox"/> Proprietary Device</p> <p>a. <input type="checkbox"/> Cluster array c. <input checked="" type="checkbox"/> Linear</p> <p>b. <input checked="" type="checkbox"/> Regular d. <input type="checkbox"/> H-20 loaded</p> <p>4. <input type="checkbox"/> Other: _____</p> <p>SIZE: <b>720</b> sq. ft. <input type="checkbox"/> lin. ft.</p> <p><b>15 W E N IN-DRAIN UNITS</b></p>	<p><b>GARBAGE DISPOSAL UNIT</b></p> <p>1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe</p> <p>2. <input type="checkbox"/> Yes &gt;&gt; Specify one below:</p> <p>a. <input type="checkbox"/> Multi-compartment tank</p> <p>b. <input type="checkbox"/> _____ tanks in series</p> <p>c. <input type="checkbox"/> Increase in tank capacity</p> <p>d. <input type="checkbox"/> Filter on tank outlet</p>	<p><b>DESIGN FLOW</b></p> <p><b>180</b> gallons per day</p> <p>BASED ON:</p> <p>1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s))</p> <p>2. <input type="checkbox"/> Table 501.2 (other facilities)</p> <p>SHOW CALCULATIONS for other facilities -</p> <p><b>2 BEDROOMS AT 90 GALLONS PER DAY EACH</b></p>
<p><b>SOIL DATA &amp; DESIGN CLASS</b></p> <p>PROFILE CONDITION DESIGN: <b>2 A TB 4</b></p> <p>AT Observation Hole # _____</p> <p>Depth <b>24</b> "</p> <p>OF MOST LIMITING SOIL FACTOR</p>	<p><b>DISPOSAL FIELD SIZING</b></p> <p>1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd</p> <p>3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd</p> <p>4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd</p> <p>5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd</p>	<p><b>PUMPING</b></p> <p>1. <input type="checkbox"/> Not required</p> <p>2. <input checked="" type="checkbox"/> May be required</p> <p>3. <input type="checkbox"/> Required &gt;&gt; Specify only for engineered or experimental systems:</p> <p>DOSE: _____ Gallons</p>	<p>3. <input type="checkbox"/> Section 503.0 (meter readings)</p> <p>ATTACH WATER-METER DATA</p>

**SITE EVALUATOR STATEMENT**

I certify that on **9/30/2003** date 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).

Signature: *Albert Frick* SE # **163** Date: **11/14/2003**

ALBERT FRICK (207) 839-5565 ALBERTFRICK@WORLDNET.ATT.NET

Site Evaluator Name Printed Telephone Number E-mail Address

ALBERT FRICK ASSOCIATES - 96A COUNTY ROAD ROAD GORHAM, MAINE 04038 - (207) 839-5563

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator HHE-200 Rev. 8/0

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# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
 Division of Health Engineering Station 10 SMS  
 (207) 287-8872 FAX (207) 287-4172

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

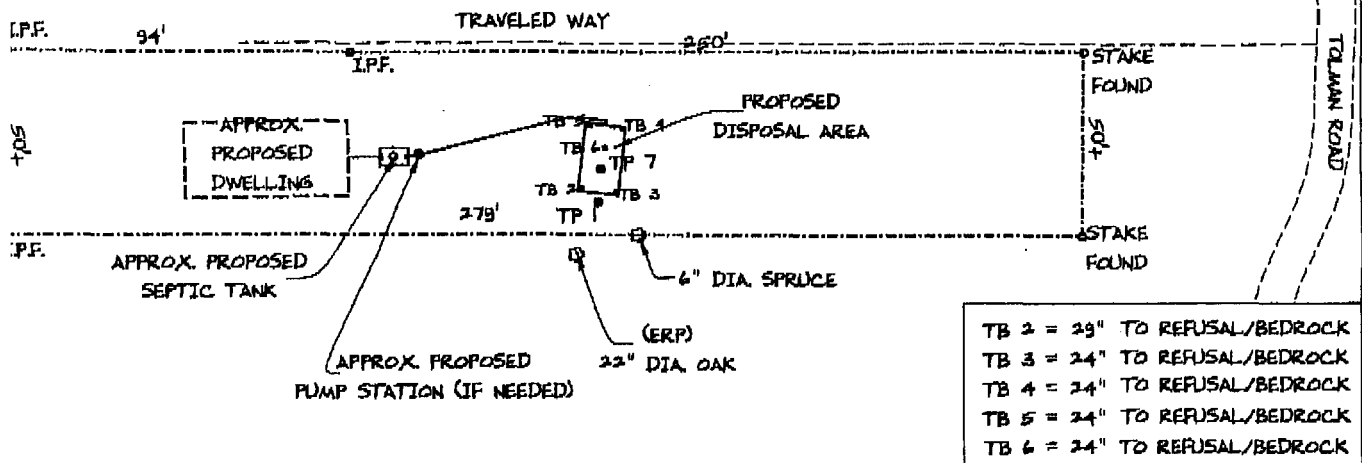
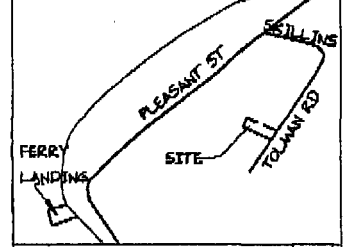
Street, Road, Subdivision  
**TOLMAN ROAD**

Owner's Name  
**MARY DOUGLASS**

**SITE PLAN**

Scale 1" = 50 Ft.  
 or as shown

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



- TB 2 = 29" TO REFUSAL/BEDROCK
- TB 3 = 24" TO REFUSAL/BEDROCK
- TB 4 = 24" TO REFUSAL/BEDROCK
- TB 5 = 24" TO REFUSAL/BEDROCK
- TB 6 = 24" TO REFUSAL/BEDROCK

Above)

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

Texture	Consistency	Color	Mottling
		DARK	
SANDY		BROWN	
LOAM			
	FRIABLE	YELLOW	NONE
		BROWN	EVIDENT
BEDROCK			

Soil Classification: 2 Profile, A Condition  
 Slope: \_\_\_\_\_%  
 Limiting Factor: 25"  
 Ground Water  
 Restrictive Layer  
 Bedrock  
 Pit Depth

Observation Hole TP 7  Test Pit  Boring  
 Depth of Organic Horizon Above Mineral Soil \_\_\_\_\_"

Texture	Consistency	Color	Mottling
		DARK	
SANDY		BROWN	
LOAM			
	FRIABLE	YELLOW	NONE
		BROWN	EVIDENT
BEDROCK			

Soil Classification: 2 Profile, A Condition  
 Slope: \_\_\_\_\_%  
 Limiting Factor: 24"  
 Ground Water  
 Restrictive Layer  
 Bedrock  
 Pit Depth

*Albert Frick*  
 Site Evaluator Signature

163  
 SE

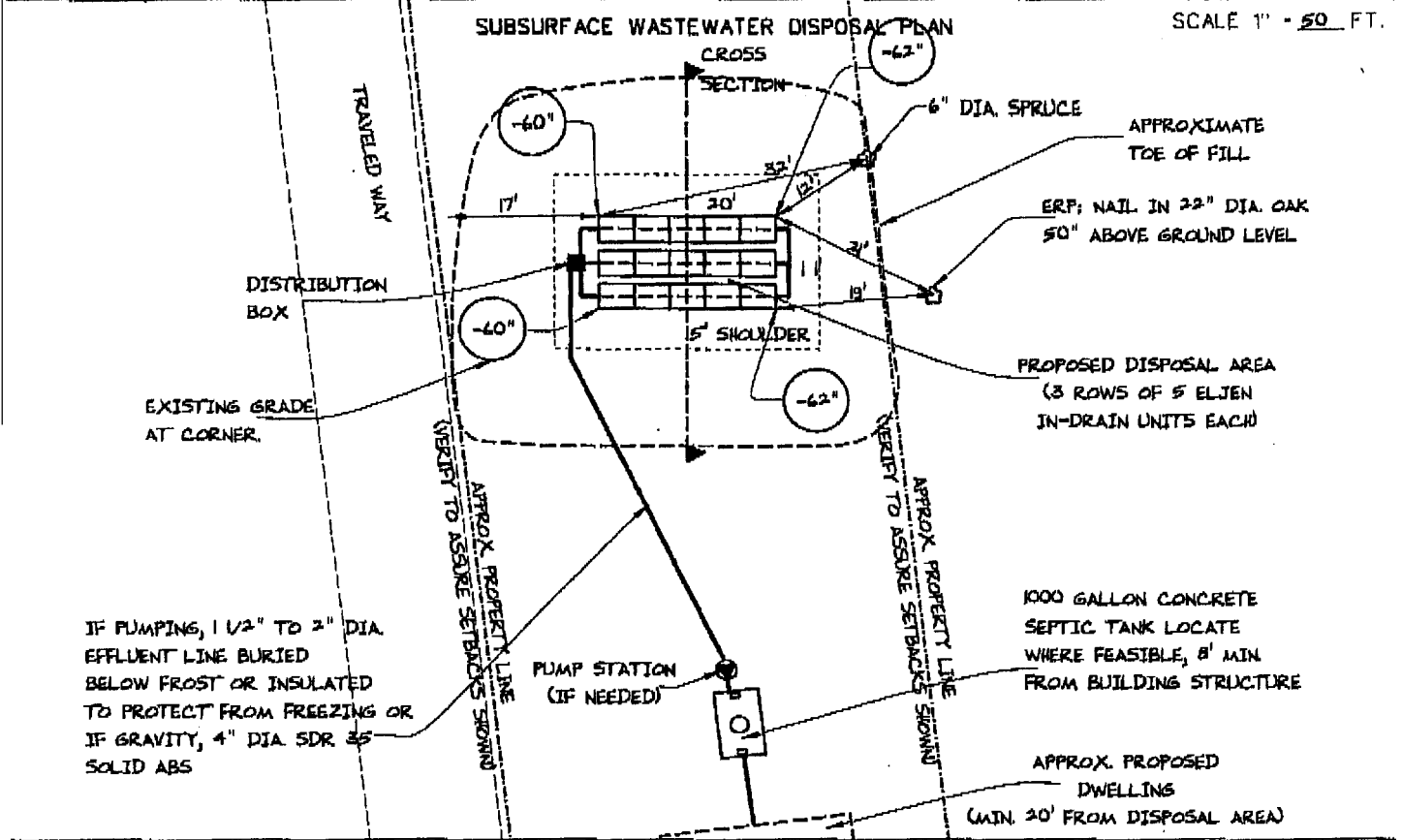
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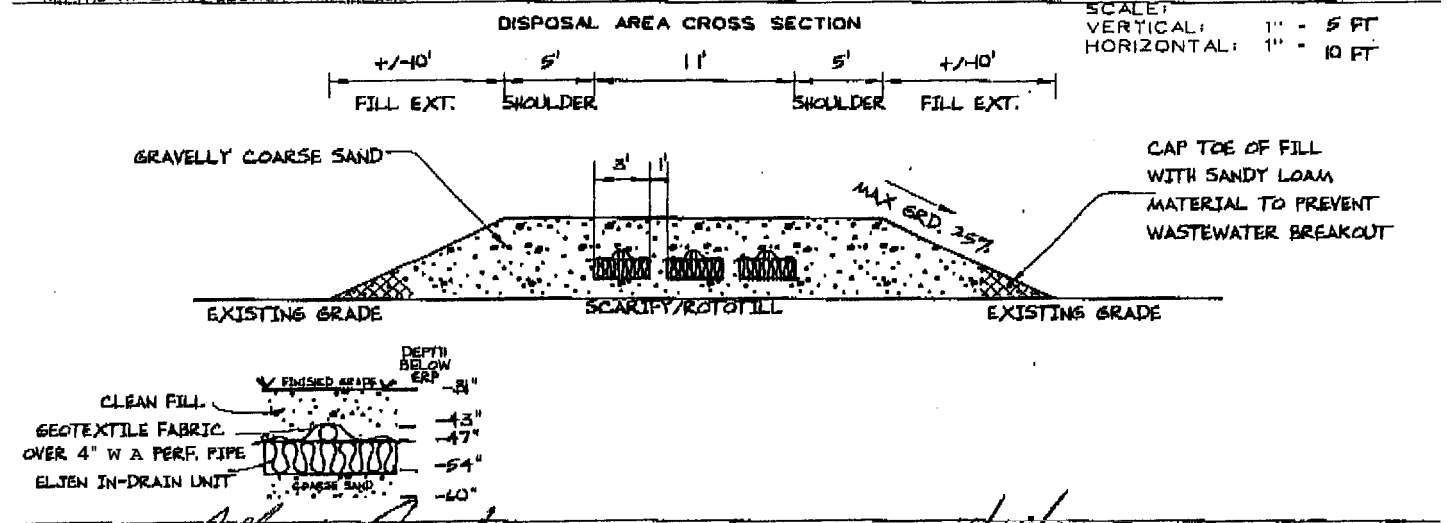
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FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	= 29" - 31"	Finished Grade Elevation	SEE	Location & Description	22" DIA OAK
Depth of Fill (Downslope)	= 29" - 31"	Top of Distribution Pipe or Proprietary Device	DETAIL	NAIL 50" ABOVE BASE	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Area	BELOW	Reference Elevation is: 0.0" or -----	



*Albert Frick*  
Site Evaluator Signature

163  
SE •

11/14/2003  
Date

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