



29

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Hum.
Div of Environmental Health
(207) 287-5672 Fax: (207) _____

PROPERTY LOCATION

City, Town, or Plantation: Portland

Street or Road: 151 South Road

Subdivision, Lot #: _____

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: _____ Permit # 2017-07227

Date Permit Issued 6/9/17 Fee: \$ 150 Double Fee Charged []

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

Owner Town State

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Struble Tom Owner Applicant

Mailing Address of Owner/Applicant: 1065 King Row Oxford PA 09363

Daytime Tel. #: 610-932-5450

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 # 109-A Lot # B-003

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 _____

CAUTION: INSPECTION 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 _____ (1st) date approved _____

_____ (2nd) date approved _____

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System

2. Replacement System
Type replaced: Overhead
Year installed: _____

3. Expanded System
a. <25% Expansion
b. >25% Expansion

4. Experimental System

5. Seasonal Conversion

SIZE OF PROPERTY

38,000 SQ. FT. SQ. FT. ACRES

SHORELAND ZONING

Yes No

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 TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: 3

2. Multiple Family Dwelling, No. of Units: _____

3. Other: _____ (specify)

Current Use Seasonal Year Round Undeveloped

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

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: 1000 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: 260 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

270 gallons per day

BASED ON:

1. Table 4A (dwelling unit(s))

2. Table 4C (other facilities)

SHOW CALCULATIONS for other facilities

3. Section 4G (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION: Z.M.H.

at Observation Hole # TD1

Depth 28"

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Medium---2.6 sq. ft. / gpd

2. Medium---Large 3.3 sq. ft. / gpd

3. Large---4.1 sq. ft. / gpd

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

EFFLUENT/EJECTOR PUMP

Not Required

May Be Required

Required

Specify only for engineered systems:

DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 43 d 4 m 26 s

Lon. 70 d 06 m 49 s

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

SITE EVALUATOR STATEMENT

I certify that on 10/2/15 (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 J. Hampton Site Evaluator Signature 263 SE # 10/26/15 Date PO 5/10/17

MARK J. HAMPTON Site Evaluator Name Printed 756-2900 Telephone Number MM E-mail Address