

Judith MacVane  
Earl MacVane

7665533

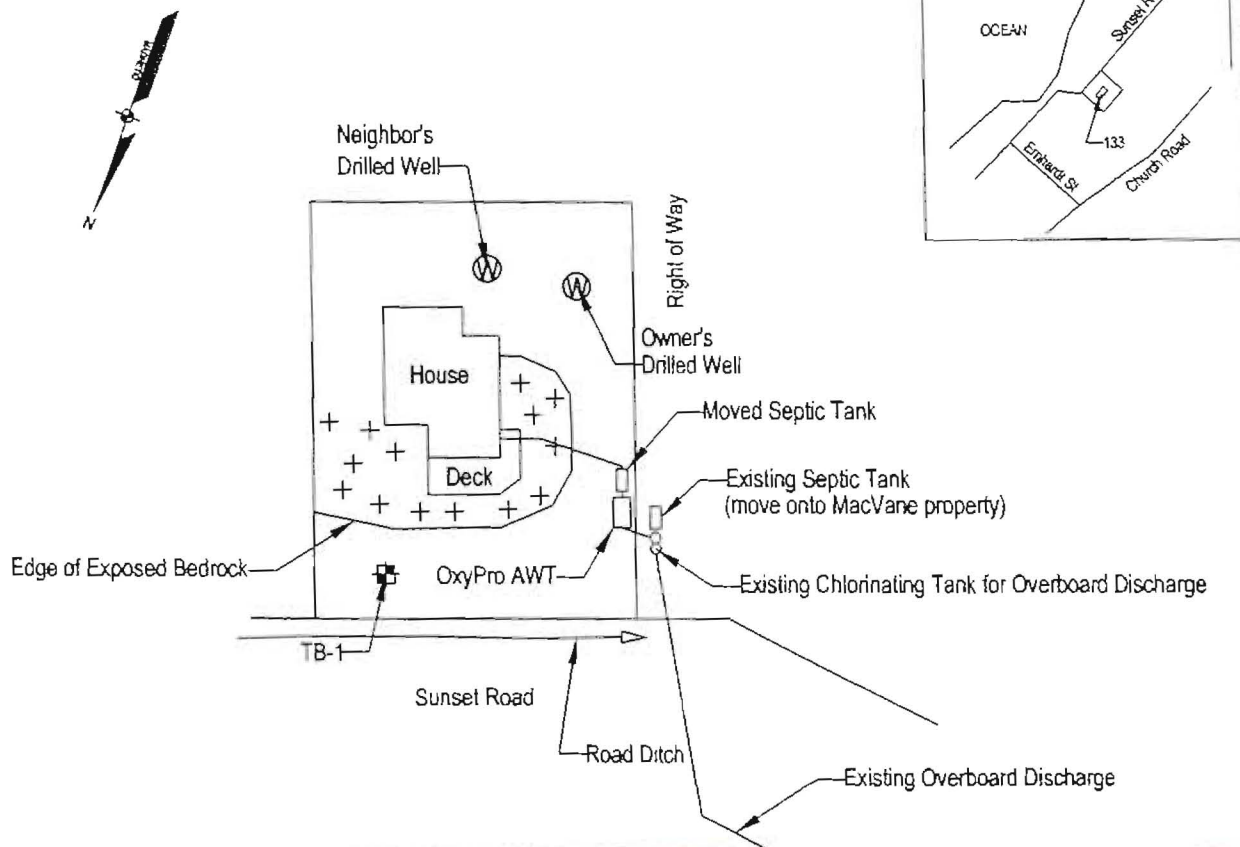
# 20106008

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION			Maine Department of Human Services Division of Health Engineering, 10 SHS (207) 287-5672 Fax: (207) 287-3165	
<b>PROPERTY LOCATION</b>			<b>CAUTION. PERMIT REQUIRED - ATTACH IN SPACE BELOW</b>	
City, Town, or Plantation	Portland (Cliff Island)		<div>PORTLAND</div> <div>Date Permit Issued: 4/16/10</div> <div>PERMIT # 11251 TOWN COPY</div> <div>\$ 11,140 FEE</div> <div>L.P.I. # 3162</div> <div>Local Plumbing Inspector Signature</div> <div>Municipal Tax Map # Lot #</div>	
Street or Road	133 Sunset Road			
Subdivision, Lot #				
<b>OWNER/APPLICANT INFORMATION</b>				
Name (last, first, MI) MacVane, Earl & Judith				
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant				
Mailing Address of Owner/Applicant				
Daytime Tel. #				
<b>OWNER OR APPLICANT STATEMENT</b> 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.			<b>CAUTION: INSPECTION REQUIRED</b> I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. (1st) date approved (2nd) date approved	
Signature of Owner or Applicant Date			Local Plumbing Inspector Signature	
<b>PERMIT INFORMATION</b>				
<b>TYPE OF APPLICATION</b>		<b>THIS APPLICATION REQUIRES</b>		
<input type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type replaced: _____ Year installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion		<input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit		
<b>SIZE OF PROPERTY</b> 0.233 <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES		<b>DISPOSAL SYSTEM TO SERVE</b> <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped		
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>DISPOSAL SYSTEM COMPONENTS</b> <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input checked="" type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input checked="" type="checkbox"/> 11. Engineered Disposal Field (only) Main pre-treatment, specify: OxyPro <input type="checkbox"/> 12. Miscellaneous Components		
		<b>TYPE OF WATER SUPPLY</b> <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other		
<b>DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)</b>				
<b>TREATMENT TANK</b> <input type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input checked="" type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: 500 GAL		<b>DISPOSAL FIELD TYPE &amp; SIZE</b> <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: N/A <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.		<b>GARBAGE DISPOSAL UNIT</b> <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes of Maybe, specify one below. <input type="checkbox"/> a. multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet
<b>SDIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN 9 / E / 5 a) Observation Hole # TP-1 Depth 0" - of Most Limiting Soil Factor Groundwater		<b>DISPOSAL FIELD SIZING</b> <input type="checkbox"/> 1. Small—2.0 sq. ft. / gpd <input type="checkbox"/> 2. Medium—2.6 sq. ft. / gpd <input type="checkbox"/> 3. Medium—Large 3.3 sq. ft. / gpd <input type="checkbox"/> 4. Large—4.1 sq. ft. / gpd <input type="checkbox"/> 5. Extra Large—5.0 sq. ft. / gpd		<b>EFFLUENT/EJECTOR PUMP</b> <input checked="" type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons
		<b>DESIGN FLOW</b> 270 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.1 (other facilities) SHOW CALCULATIONS — for other facilities — <input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. N43 d 41 m 52.19 s Lon. W70 d 06 m 18.87 s If g.p.s. state margin of error: 20'		
<b>SITE EVALUATOR STATEMENT</b>				
I certify that on 7-28-09 (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).				
Richard A. Sweet Site Evaluator Signature		034 SE #		01/11/10 Date
Richard A. Sweet Site Evaluator Name Printed		797-2110 Telephone Number		dick@sweetassociates.com Email Address
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator				

Mail: Department of Human Services  
Division of Health Engineering, Station 10  
QUT 287-5672 Fax: (287) 287-3165

Owner or Applicant Name	Earl & Judith Mac Vane
-------------------------	------------------------

### SITE LOCATION PLAN



(Location of Observation Holes Shown Above)

Observation Hole # \_\_\_\_\_ ☐ Test Pit ☐ Boring

" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0				
6				
12				
18				
24				
30				
36				
42				
48				

Soil	Classification	Slope	Limiting Factor	<input type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
Profile	Condition	Percent	Depth	<input type="checkbox"/> Bedrock

Page 2 of 3  
HHE-200 Rev. 10/02



# Sweet Associates

155 GRAY ROAD

FALMOUTH, MAINE 04105

HYDROGEOLOGY

SITE EVALUATIONS

(207) 797-2110

FAX (207) 878-2364

January 11, 2010

Michael Demarest  
Maine Dept. of Environmental Protection  
State House Station 17  
Augusta, ME 04333-0017

RE: Earl & Judith MacVane OBD, 133 Sunset Road, Cliff Island

Dear Mike:

Attached is a site plan proposing continued use of the existing overboard discharge system with the addition of an OxyPro advanced wastewater treatment system

An on-site investigation revealed the following.

1. The two wells in the rear of this lot prevent any disposal field from being installed in that portion of the lot.
2. The front of the lot is low with a slight slope in the direction of the road ditch flow. This area is underlain by silty clay loam soils with a seasonal high water table at 0-inches below the surface. The location of a disposal field here runs a high risk of draining into the road ditch, which drains into the ocean.
3. The owner checked with both Michael Thoma, the property owner to the west, and Bruce Dyer, the property owner to the east and south. Neither owner would allow an easement for a septic system on their property.
4. Because of the above conditions, it is recommended that the existing overboard discharge system remain with the addition of an OxyPro, or equivalent, advanced wastewater treatment system as shown. The existing septic tank should be moved onto the MacVane property.

Sincerely,



Richard A. Sweet  
Site Evaluator #034

Attachment

RAS/smh



# PUBLIC NOTICE OF INTENT TO FILE

## MAINE WASTE DISCHARGE PERMIT APPLICATION WITH THE MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION Waste Discharge License #W0067285ABR

☐ Initial Application ☐ Renewal ☐ Renewal & Transfer ☐ Amendment ☐ Other

Please take notice that Earl MacVane  
(applicant)

P.O. Box 7, Cliff Island ME 04019  
(applicant's address)

of 133 Sunset Road Portland, Maine  
(facility E-911 street address) (municipality)

is intending to file application #W0067285ABR with the Maine Department of Environmental Protection for a Maine Waste Discharge License pursuant to 38 MRSA Sections 413 and 414-A.

The application is for the year-round discharge of 300 gallons per day  
(duration) (flow)

of treated sanitary wastewater to Luckse Sound in the town/city of Portland, Maine.  
(receiving waterbody) (municipality)

The application will be filed on or about \_\_\_\_\_ for public inspection at the DEP's offices  
(anticipated filing date)  
in Augusta during normal working hours. A copy of the application may also be seen at the municipal offices in Portland, Maine.  
(municipality)

A request for a public hearing or request that the Board of Environmental Protection assume jurisdiction over this application must be received by the DEP, in writing, no later than 20 days after the application is found acceptable for processing, or 30 days from the date of this notice, whichever is longer. Requests shall state the nature of the issue(s) to be raised. Unless otherwise provided by law, a hearing is discretionary and may be held if the Commissioner or the Board finds significant public interest or if there is conflicting technical information.

During the time specified above, persons wishing to receive copies of draft permits and supporting documents, when available, may request them from the DEP. Persons receiving a draft permit shall have 30 days in which to submit comments or to request a public hearing on the draft.

Public comment will be accepted until a final administrative action is taken to approve, approve with conditions or deny this application. Written public comments or requests for information may be made to the Overboard Discharge Unit, Division of Water Resource Regulation, Department of Environmental Protection, State House Station #17, Augusta, Maine 04333. Telephone (207) 287-3901



