



Reviewed for Code Compliance  
Inspections Division  
Approved with Conditions

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

<b>PROPERTY LOCATION</b>		<b>CAUTION: PERMIT REQUIRED - ATTACH</b>	
City, Town, or Plantation	Portland (Cliff Island)	The Subsurface Wastewater Disposal System shall be installed in accordance with the State of Maine Subsurface Wastewater Disposal Rules. <b>Date:</b> 01/30/14	
Street or Road	43 Church Road		
Subdivision, Lot #	109B F052001		
<b>OWNER/APPLICANT INFORMATION</b>		<b>CAUTION: INSPECTION REQUIRED</b>	
Name (last, first, MI)	Cushing, Carleton & Eleanor	I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	(1st) date approved _____	
Mailing Address of Owner/Applicant	PO Box 35 Cliff Island, Maine 04019	Local Plumbing Inspector Signature _____ (2nd) date approved _____	
Daytime Tel. #	766-2850	Municipal Tax Map # _____ Lot # _____	
<b>OWNER OR APPLICANT STATEMENT</b>		<b>CAUTION: INSPECTION REQUIRED</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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant _____		Local Plumbing Inspector Signature _____	
Date 11-15-13			

PERMIT INFORMATION			
<b>TYPE OF APPLICATION</b>	<b>THIS APPLICATION REQUIRES</b>	<b>DISPOSAL SYSTEM COMPONENTS</b>	<b>TYPE OF WATER SUPPLY</b>
<input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced: <u>Overboard Discharge</u> Year installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. >25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<input 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 checked="" 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	<input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input 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 type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components	<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>SIZE OF PROPERTY</b>	<b>DISPOSAL SYSTEM TO SERVE</b>		
<input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

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>
<input type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input checked="" type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000</u> GAL	<input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>1008</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<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	<u>305</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 4a (dwelling unit(s)) <input type="checkbox"/> 2. Table 4c (other facilities) SHOW CALCULATIONS — for other facilities —
<b>SOIL DATA &amp; DESIGN CLASS</b>	<b>DISPOSAL FIELD SIZING</b>	<b>EFFLUENT/EJECTOR PUMP</b>	<b>ATTACH WATER METER DATA</b>
PROFILE <u>2</u> / CONDITION <u>AIII</u> / DESIGN _____ at Observation Hole # <u>TP-1</u> Depth <u>18</u> " of Most Limiting Soil Factor Bedrock	<input type="checkbox"/> 1. Small—2.0 sq. ft. / gpd <input type="checkbox"/> 2. Medium—2.6 sq. ft. / gpd <input checked="" 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	<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	<input type="checkbox"/> 3. Section 4G (meter readings) LATITUDE AND LONGITUDE at center of disposal area Lat. <u>N43</u> d <u>41</u> m <u>41.12</u> s Lon. <u>W70</u> d <u>06</u> m <u>20.46</u> s if g.p.s. state margin of error: <u>20'</u>

SITE EVALUATOR STATEMENT		
I certify that on <u>7-14-09</u> (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).		
_____ Site Evaluator Signature	<u>034</u> SE #	<u>05/19/12</u> Date
<u>Richard A. Sweet</u> Site Evaluator Name Printed	<u>797-2110</u> Telephone Number	<u>dick@sweetassociates.com</u> Email Address
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.		



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*Strengthening a Remarkable City, Building a Community for Li*

Date: 01/30/14

Jeff Levine, AICP, Director  
Director of Planning and Urban Development

Tammy Munson  
Director, Inspections Division

**Electronic Signature and Fee Payment Confirmation**

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are **paid in full** to the Inspections Office, City of Portland Maine by method noted below:

- Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.
- Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.
- I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature: Robert C Howard

Date: 11/15/13

I have provided digital copies and sent them on:

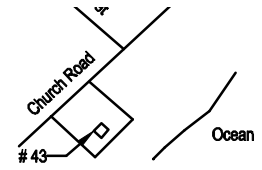
Date: 11/15/13

NOTE: All electronic paperwork must be delivered to [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov) or by physical means ie; a thumb drive or CD to the office.



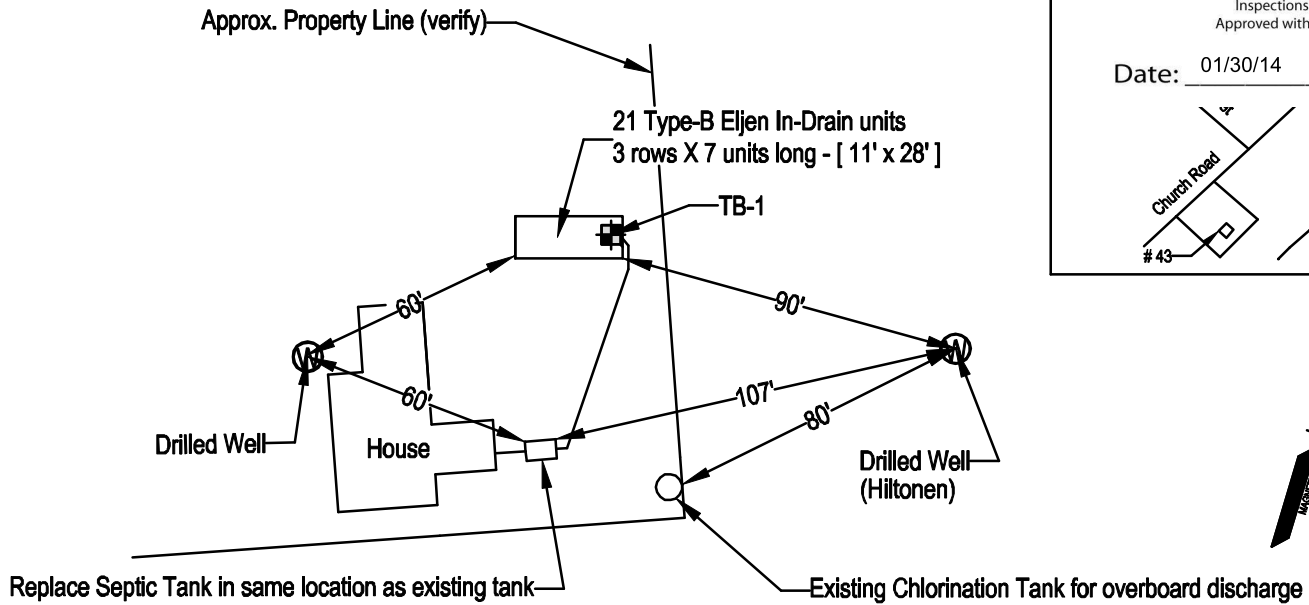
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SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION		Maine Dept Division of (207) 287
Town, City, Plantation Portland (Cliff Island)	Street, Road, Subdivision 43 Church Road	Owner or Applicant Carleton & Eleano

SITE PLAN Scale 1" = 50 ft.



**NOTES:**

1. All property lines are approximate.
2. Septic tank must be located at least 8' from a full foundation.
3. Scarify all ground to be filled.
4. Min. 1/4"/ft slope of pipe from building to septic tank.
5. Min. 1/8"/ft slope of pipe from septic tank to disposal field.
6. Create transitional horizon beneath disposal field by thoroughly mixing gravelly coarse sand with 6" of the soil beneath system.

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

Observation Hole # TB-1  Test Pit  Boring

\_\_\_\_\_ " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0	Sandy Loam	Friable	Brown
6			
12	Sandy Loam	Friable	Reddish Brown
18			
24			
30			
36			
42			
48			

Bedrock at 18 inches

Soil Profile	Classification	Slope	Limiting Factor	<input type="checkbox"/> Groundwater
<u>2</u>	<u>All</u>	<u>9</u>	<u>18"</u>	<input type="checkbox"/> Restrictive Layer
	Condition	Percent	Depth	<input checked="" type="checkbox"/> Bedrock

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

\_\_\_\_\_ " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
0			
6			
12			
18			
24			
30			
36			
42			
48			

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

*Richard O'Connell*  
Site Evaluator Signature

034  
SE #

05/19/12  
Date

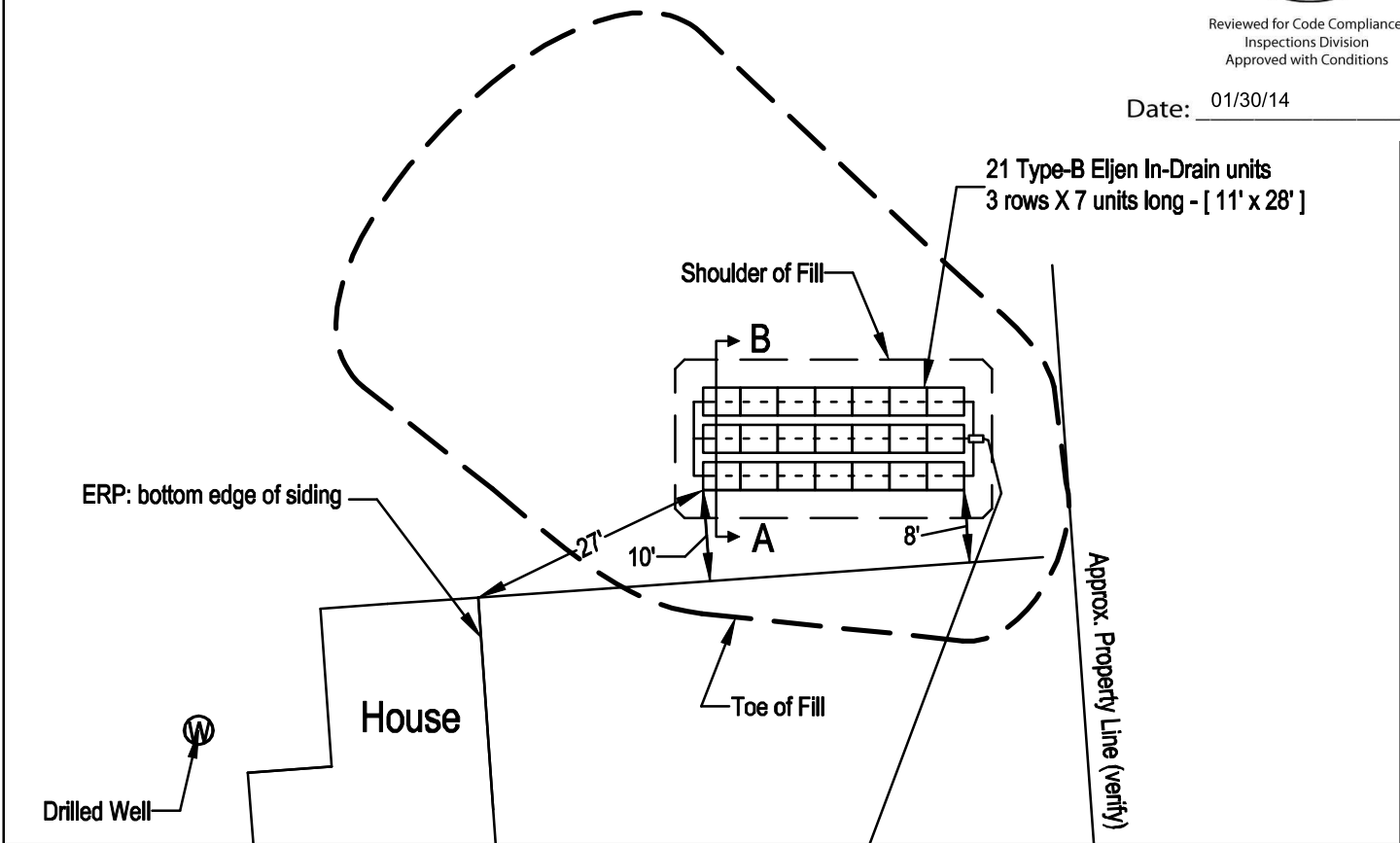


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SUBSURFACE WASTEWATER DISPOSAL PLAN



BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT Location & Description: <u>bottom edge of siding</u>
Depth of Backfill (upslope) <u>35-48"</u>	Finished Grade Elevation (at Row 1) <u>-11"</u>	
Depth of Backfill (downslope) <u>31-61"</u>	Top of Proprietary Device (at Row 1) <u>-19"</u>	
	Bottom of Disposal Field (at Row 1) <u>-36"</u>	Reference Elevation is 0.0" or: _____

NOTE: SCARIFY ALL GROUND SURFACE TO BE FILLED. USE GRAVELLY COARSE SAND WITHIN 3' OF IN-DRAINS. REMAINING FILL: LOAMY SAND (no clay)

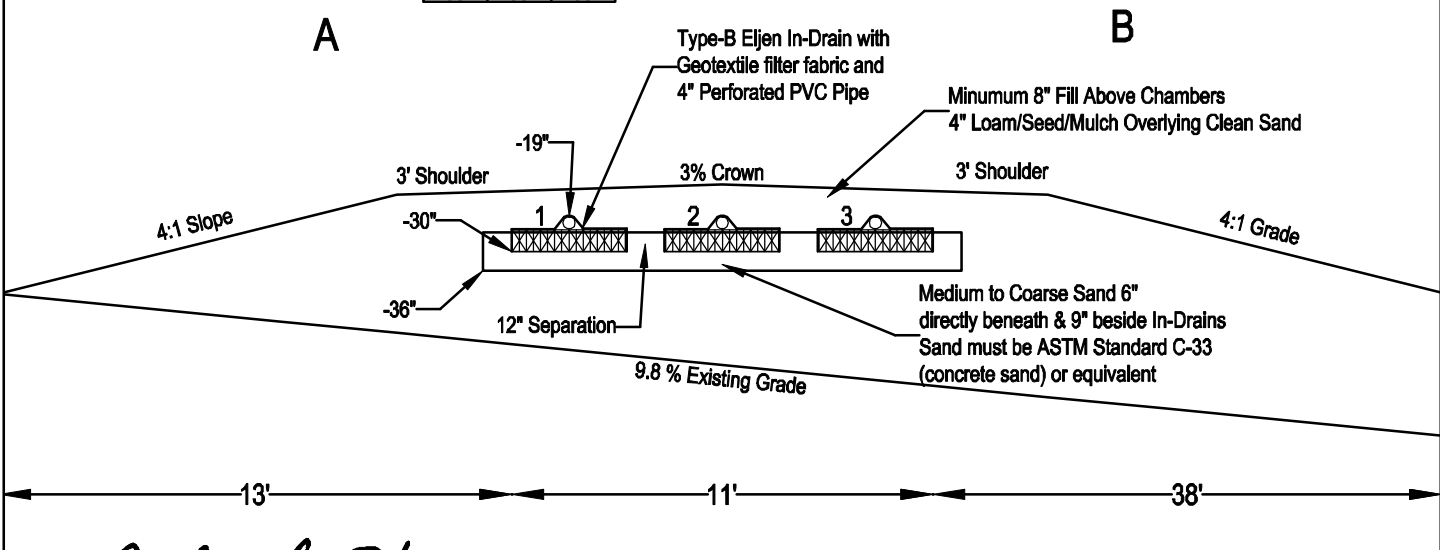
DISPOSAL FIELD CROSS SECTION

Scales:

Verticle: 1" = 5

Horizontal: 1" = 5

ROW #	1	2	3
TOP	-19"	-19"	-19"
BOTTOM	-36"	-36"	-36"





Department of Health  
Maine Center for Disease



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#  
Aug  
Fax: (207) 287-41  
Date: 01/30/14

## SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

<b>GENERAL INFORMATION</b>		Town of	<u>Portland (Cliff Island)</u>
Property Owner's Name:	<u>Carleton &amp; Eleanor Cushing</u>	Tel. No.:	<u>766-2850</u>
System's Location:	<u>43 Church Road</u>		
Property Owner's Address:	<u>P.O. Box 43 Cliff Island, ME</u>	Zip Code:	<u>04019</u>
e-mail address:	<u>bob@cliffisland.com</u>		

The subsurface wastewater disposal system design for the subject property requires a  replacement system variance  first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires  local approval  local and state approval.

<b>SPECIFIC VARIANCE REQUESTED</b> (To be filled in by Site Evaluator. Use additional sheets if needed.)	<b>SECTION OF RULE</b>
1. <u>Disposal Field 60 feet from owner's well and 90 feet from neighbor's well.</u>	<u>8A</u>
2. <u>Septic Tank 60 feet from owner's well.</u>	<u>8A</u>
3. _____	_____

**SITE EVALUATOR**

When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.

The disposal field will be located downslope from both wells and the septic tank is being replaced in the same location as the current tank.

I, Richard A. Sweet, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available; enhances the potential of the site for subsurface wastewater disposal; and that the system should function properly.

Richard A. Sweet \_\_\_\_\_ DATE 5-19-12

SIGNATURE OF SITE EVALUATOR

**PROPERTY OWNER**

I, Robert C Howard, am the  owner  agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

Robert C Howard \_\_\_\_\_ DATE 11/15/13

SIGNATURE OF OWNER  
 AGENT FOR THE OWNER



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**LOCAL PLUMBING INSPECTOR - Approval at local level**

The local plumbing inspector shall review all variance requests prior to rendering a decision. I, \_\_\_\_\_, the undersigned, have visited the above property and find that the variance applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (  does  does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (  do  do not) approve the requested variance and issue a permit for the system's installation as proposed by the application.

Date: 01/30/14

\_\_\_\_\_  
 LPI Signature

\_\_\_\_\_  
 Date

**LOCAL PLUMBING INSPECTOR - Referral to the Department**

The local plumbing inspector shall review all variance requests prior to forwarding to the Division of Environmental Health. I, \_\_\_\_\_, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (  does  does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (  do  do not) recommend the issuance of a permit for the system's installation as proposed by the application.

\_\_\_\_\_  
 LPI Signature

\_\_\_\_\_  
 Date

**FOR USE BY THE DEPARTMENT ONLY**

The Department has reviewed the variance(s) and (  does  does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

\_\_\_\_\_  
 SIGNATURE OF THE DEPARTMENT

\_\_\_\_\_  
 DATE

- Notes: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)
2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

**SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).**

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Distance		
Additional Treatment		
<b>TOTAL POINT ASSESSMENT:</b>		

Minimum Points (Check One):  Outside Shoreland Zone-50  Inside Shoreland Zone-65  Subdivision-65

SUBSURFACE INSPECTION PROCEDURES  
Please call 874-8703 or 874-8693 (ONLY)  
or email: [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov)

**Check the Status or Schedule an Inspection On-Line at  
<http://www.portlandmaine.gov/planning/permitstatus.asp>**

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested at least 24 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 24 months of the date of issuance.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue with construction.**

### **REQUIRED INSPECTIONS SEPTIC FIELD:**

1. After Site Preparation: Septic field and extension inspection for bottom preparation/scarification to verify removal of vegetation and roughened surface, established transitional horizon and erosion and sedimentation control measures.
2. Prior to covering the system: Inspection of system components including stone, pipes or proprietary devices, tanks, hay, filter fabric, and fill beneath and beside the disposal area before backfill. Also included are curtain drains, diversion ditches, berms or other measures outlined in the design.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.

<b>City of Portland, Maine - Building or Use Permit</b> 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716		<b>Permit No:</b> 2013-02562	<b>Date Applied For:</b> 11/18/2013	<b>CBL:</b> 109B F052001
<b>Proposed Use:</b>		<b>Proposed Project Description:</b>		
<b>Dept:</b> Building	<b>Status:</b> Approved	<b>Reviewer:</b> Tammy Munson	<b>Approval Date:</b> 01/30/2014	
<b>Note:</b>				<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Conditions:</b>				