

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
 Div. of Environmental Health, 11 SHS
 (207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION >> Caution: Permit Required - Attach In Space Below <<

City, Town, or Plantation: PORTLAND

Street or Road: #21 LEIGHTON AVE.

Subdivision, Lot: [blank]

OWNER/APPLICANT INFORMATION

Name (last, first, MI): VICKERSON CARL Owner Applicant

Mailing Address of Owner/Applicant: #62 SULLIVAN STREET PORTLAND, ME 04103

Daytime Tel.: 653-8165

PORTLAND PERMIT # 11237 TOWN COPY

Date Permit Issued: 3/30/10 \$ 1110.00 FEE Charged Double Fee

Local Plumbing Inspector Signature: *Jeanne Bouke* L.P.I. # 0732

Municipal Tax Map # 306 A Lot # 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 of Owner or Applicant: *[Signature]* Date: 3/17/10

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

Caution: Inspection Required

Local Plumbing Inspector Signature: *[Signature]* Date: MAR 17 2010

(1st) Date Approved: _____ (2nd) Date Approved: _____

PERMIT INFORMATION

TYPE OF APPLICATION

1. First Time System
 2. Replacement System
 Type Replaced: CESSPOOL
 Year Installed: UNK.
 3. Expanded System
 a. Minor Expansion
 b. Major Expansion
 4. Experimental System
 5. Seasonal Conversion

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 Approval

DISPOSAL SYSTEM COMPONENTS

1. Complete Non-engineered System
 2. Primitive System (graywater & old 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)
 9. Engineered Treatment Tank (only)
 10. Engineered Disposal field (only)
 11. Pre-treatment, specify: _____
 12. Miscellaneous Components

SIZE OF PROPERTY

10,000 sq. ft. acres

SHORELAND ZONING

Yes No

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: 3
 2. Multiple Family Dwelling, No. of Units: _____
 3. Other: _____ (SPECIFY)

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 gallons

DISPOSAL FIELD TYPE & SIZE

1. Stone Bed 2. Stone Trench
 3. Proprietary Device
 a. cluster array c. Linear
 b. regular load d. H-20 loaded
 4. Other: _____
 SIZE: 1200 sq. ft. lin. ft.

GARBAGE DISPOSAL UNIT

1. No 3. Maybe
 2. Yes >> Specify one below:
 a. multi-compartment tank
 b. _____ tanks in series
 c. increase in tank capacity
 d. Filter on tank outlet

DESIGN FLOW

300 gallons per day
 BASED ON:
 1. Table 501.1 (dwelling unit(s))
 2. Table 501.2 (other facilities)
 SHOW CALCULATIONS
 - for other facilities -
 3 BEDROOMS AT
 100 GALLONS PER
 DAY EACH
 3. Section 503.0 (meter readings)
 ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
 B / D / 3

at Observation Hole # TP-1
 Depth 10"

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

1. Small - 2.0 sq.ft./gpd
 2. Medium - 2.6 sq.ft./gpd
 3. Medium-Large - 3.3 sq.ft./gpd
 4. Large - 4.1 sq.ft./gpd
 5. Extra-Large - 5.0 sq.ft./gpd

EFFLUENT/EJECTOR PUMP

1. Not required
 2. May be required
 3. Required
 Specify only for engineered systems:
 DOSE: 75-150 Gallons

LATITUDE AND LONGITUDE at center of disposal area

Lat. 43 d 41 m 32 s
 Lon. 70 d 19 m 15 s
 if g.p.s. state margin of error 32'

SITE EVALUATOR STATEMENT

I certify that on 2/18/10 (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: *[Signature]* #348 SE • Date: 2/20/10

NORMAN "BUD" HARRIS (HARRIS LAND SOLUTIONS, INC.) (207) 892-2435 hlsinc2@msn.com Page 1 of 3
 Note: Changes to or deviations from the design should be confirmed with the Site Evaluator. HHE-200 Rev. 8/01

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
 Div of Environmental Health, 11 SHS
 (207) 287-5672 FAX (207) 287-3165

Town, City, Plantation
 PORTLAND

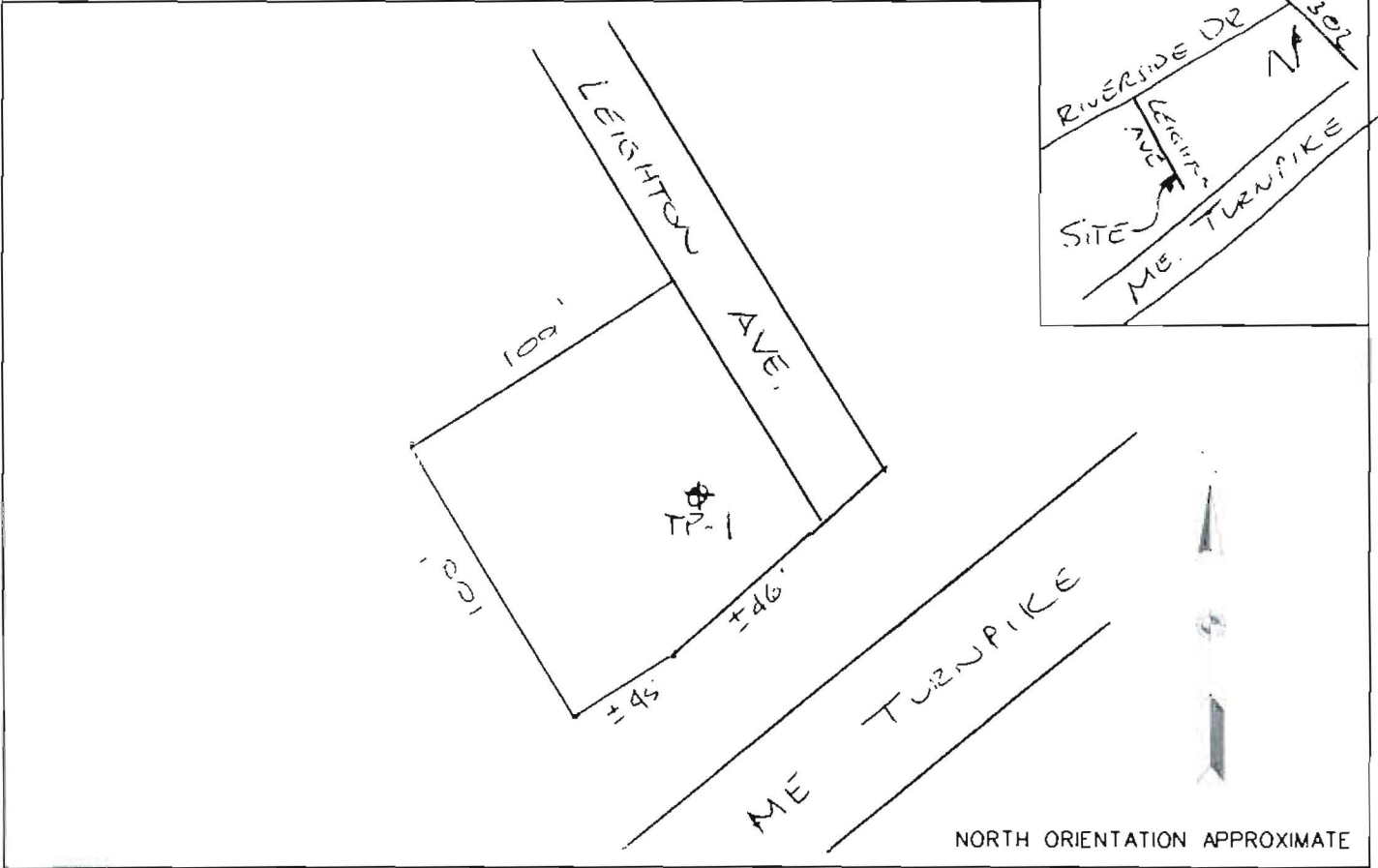
Street, Road, Subdivision
 #21 LEIGHTON AVE.

Owner's Name
 CARL VICKERSON

SITE PLAN

Scale 1" = 60 ft. or as shown

SITE LOCATION PLAN



NORTH ORIENTATION APPROXIMATE

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

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

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|-------------------------------------------|-----------------|--------------------------|-----------------|------------------|
| 0 | SANDY LOAM | FRIABLE | VERY DARK BROWN | |
| 10 | LOAMY FINE SAND | FRIABLE | DARK BROWN | MANY & PROMINENT |
| 20 | SILTY FINE SAND | FRIABLE TO SOMEWHAT FIRM | OLIVE GRAY | |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

Soil Classification: A Profile, D Condition
 Slope: 0-3%
 Limiting Factor: 10"
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

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

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|-------------------------------------------|---------|-------------|-------|----------|
| 0 | | | | |
| 10 | | | | |
| 20 | | | | |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

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

Norman Harris
 Site Evaluator Signature

#348
 SE

2/20/10
 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation
PORTLAND

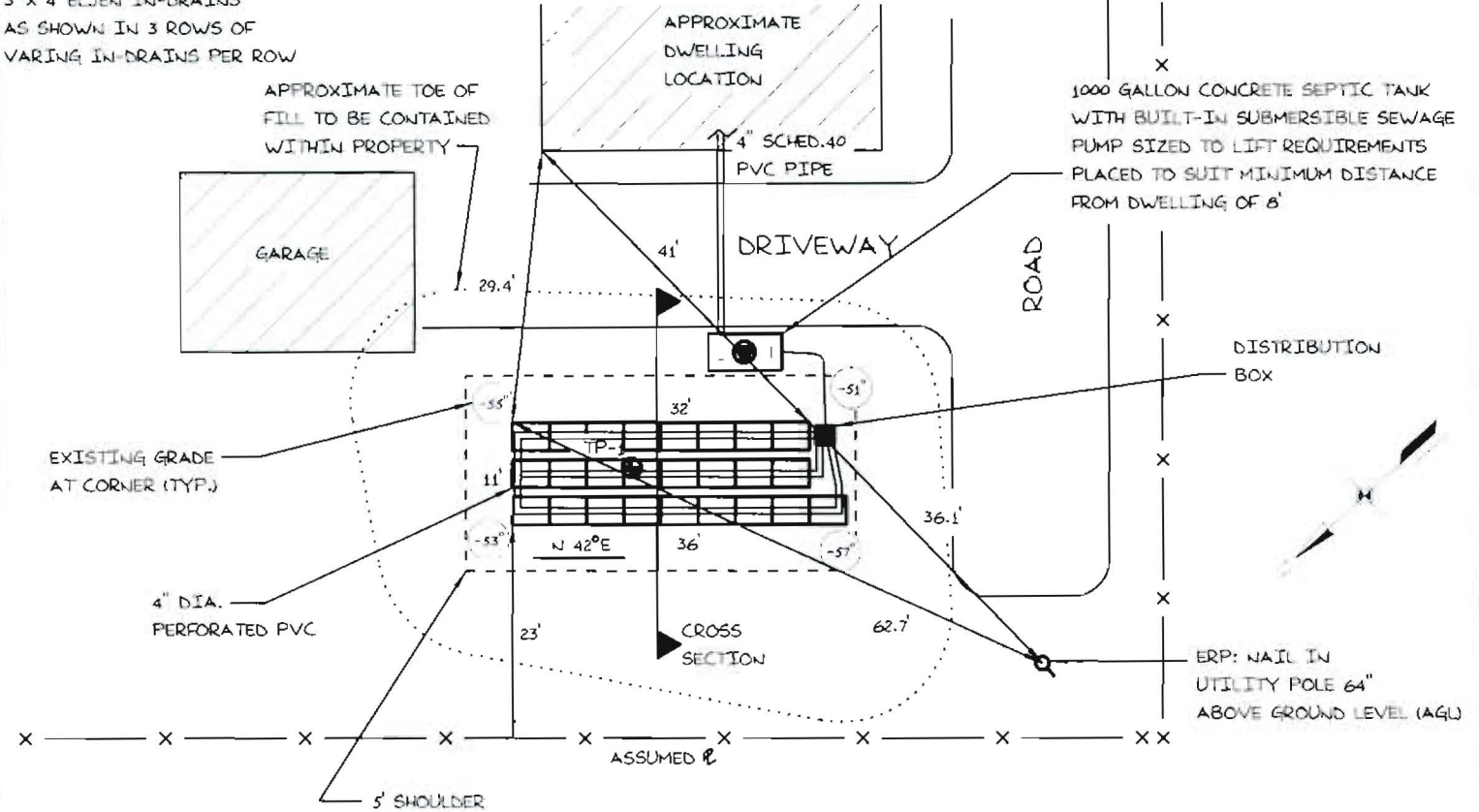
Street, Road, Subdivision
#21 LEIGHTON AVE.

Owner or Applicant Name
CARL VICKERSON

SET 25 STATE APPROVED
3' X 4' ELJEN IN-DRAINS
AS SHOWN IN 3 ROWS OF
VARYING IN-DRAINS PER ROW

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20' FT.



* IT IS THE OWNER'S RESPONSIBILITY TO VERIFY THAT THERE ARE NO UNIDENTIFIED WELLS LOCATED WITHIN 100' OF DISPOSAL SYSTEM.
* ALL INFORMATION CONTAINED WITHIN THIS APPLICATION IS AS REPRESENTED BY OWNER, APPLICANT OR OWNER'S/APPLICANT'S REPRESENTATIVE. THE SITE EVALUATOR WILL NOT BE HELD RESPONSIBLE FOR ANY PERTINENT FACTORS NOT IDENTIFIED, DISCLOSED OR INACCURATELY DISCLOSED.

FILL REQUIREMENTS

CONSTRUCTION ELEVATIONS

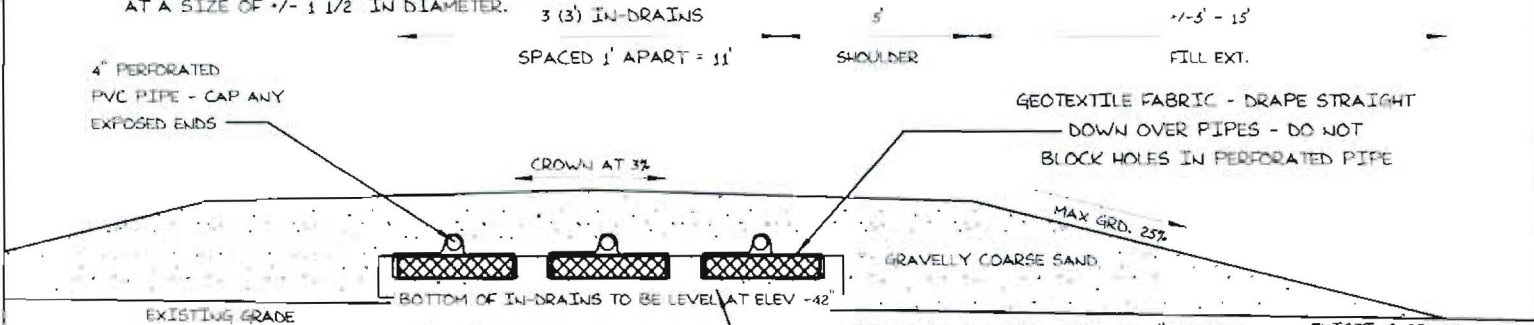
ELEVATION REFERENCE POINT

| | | | | | |
|---------------------------|-------------|------------------------------------------------|------|------------------------|---------|
| Depth of Fill (Upslope) | : 32" - 36" | Finished Grade Elevation | -19" | Location & Description | NAIL IN |
| Depth of Fill (Downslope) | : 34" - 38" | Top of Distribution Pipe or Proprietary Device | -31" | UTILITY POLE 64" AGL | |
| | | Bottom of Disposal Area | -42" | Reference Elevation | -0" |

DISPOSAL FIELD CROSS-SECTION

- NOTES:
- * IN-DRAINS TO BE INSTALLED PER MANUFACTURER'S RECOMMENDATIONS
 - * BACKFILL TO BE GRAVELLY COARSE SAND FREE OF FINES AND ORGANIC DEBRIS
 - * FINAL GRADES SHALL BE LOAMED, SEEDED AND OR MULCHED TO PREVENT EROSION
 - * ANY STONE REQUIRED TO BE FREE OF FINES AND ORGANIC DEBRIS AT A SIZE OF +/- 1 1/2" IN DIAMETER.

SCALES:
VERTICAL: 1" = 5 FT
HORIZONTAL: 1" = 5 FT



NOTE: OVEREXCAVATE AT LEAST 6" BELOW AND AROUND THE ENTIRE PERIMETER OF EACH ROW AND FILL WITH MATERIALS AS SPECIFIED BY ELJEN IN-DRAIN STANDARDS.

* WHERE POSSIBLE, THE AREA UNDER THE DISPOSAL FIELD AND EXTENSIONS SHALL BE SCARIFIED 6 TO 8 INCHES TO CREATE A TRANSITION ZONE

Norman Bud Harris
Site Evaluator Signature
NORMAN "BUD" HARRIS (HARRIS LAND SOLUTIONS, INC) (207) 892-2435

#348
SE *

2/20/10
Date

STATEMENT TO OWNER/APPLICANT

(attachment to HHE-200)

A Site Evaluation as defined in The Maine Subsurface Wastewater Disposal Rules (April 1, 2009) is:

“ The practice of investigating, evaluating, and reporting the basic soil and site conditions that apply to wastewater treatment and disposal along with a system design in compliance with this code.”

All reported site features are interpreted from information supplied by the owner, applicant or representative. This information in turn is utilized as means to design a disposal system that complies with the Maine Subsurface Wastewater Disposal Rules. The owner, applicant, and/or representative prior to signing of this application must verify this information as correct.

Minimum separation distances required for disposal systems less than 1000 gpd (unless reduced by variance)

Well (owner or neighbor) to any disposal component 100'
Location of neighbor's wells is often difficult to observe. Many wells may be buried or hidden, making them unidentifiable. Confirmation from neighbor that their well is greater than 100' must be obtained prior to installation.

- Water supply line to any disposal component 10'
- Building (full basement) to disposal area 20'
- Building (no full basement) to disposal area 15'
- Building to Septic Tank 8'
- Waterbody (major) to any septic component 100'
- Waterbody (minor) to any septic component 50'
- Property line to any septic component 10'*

* All fill material (fill extension) to be contained within property with 4:1 slope

If after review it is agreed that all information is accurate, the following steps should be taken.

1. Sign the Owner or Applicant Statement section on page 1 of the application
2. Sign any Variance forms or any special circumstance forms that may be attached
3. If required, secure any neighbor variance/release form signatures
4. Repeat signatures on all copies
5. Submit 3 copies to your local Code Enforcement for review and approval

Prior to installation it is recommended that all abutting property owners be notified.

Harris Land Solutions, Inc.
(207) 892-2435

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 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 6 months, if the project is not started or ceases for 6 months.**
- **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.**

 X **Exposed septic field preparation and tank location inspection to check elevations, dimensions, piping, pumping station and system design prior to covering.**

 X **Backfill inspection of septic field for approved materials, stabilization, slopes and extensions**

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

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

| | | |
|------------------------|---------------------------------|---------------------|
| Permit No: 20106003 | Date Applied For: 03/17/2010 | CBL: 306 A003001 |
|------------------------|---------------------------------|---------------------|

| | | | |
|---------------------------------------------|-------------------------------------|------------------------------------|--------|
| Location of Construction: 0 LEIGHTON AVE | Owner Name: BENWELL JOHN H HEIRS | Owner Address: 21 LEIGHTON AVE | Phone: |
| Business Name: | Contractor Name: Carl Vickerson | Contractor Address: | Phone |
| Lessee/Buyer's Name | Phone: | Permit Type: Replacement System | |

| | |
|---------------|-------------------------------|
| Proposed Use: | Proposed Project Description: |
|---------------|-------------------------------|

Dept: Building Status: Approved with Conditions Reviewer: Jeanine Bourke Approval Date: 03/30/2010

Note: Ok to Issue:

- 1) Ejector pump to be installed per code including alarm system.
- 2) Separate permits are required for any electrical installation.
- 3) Application approval based upon information provided by applicant. Any deviation from approved plans requires separate review and approval prior to work.
- 4) Equipment must be installed in compliance per the manufacturer's specifications