Portland, Maine | Yes. Life's good here.

Reviewed for Code Compliance
Inspections Division
Approved with Conditions
Date: 10/12/17

# Department of Permitting and Inspections

## ***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 that 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 selections below.

1. Once the complete application package has been received by us, and entered into the system
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

☐ provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment

☐ call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone

☐ hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall

☐ deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland**
**Department of Permitting and Inspections**
**389 Congress Street, Room 315**
**Portland, Maine 04101**

By signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. ***No work shall be started until I have received my permit.***

Applicant Signature: Burleigh Wardwell Date: October 5, 2017

I have provided digital copies and sent them on: Date:_____

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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Heal
Div of Environme
(207) 287-5672

CITY OF PORTLAND, MAINE — RESURGAM

Reviewed for Code Compliance
Inspections Division
Approved with Conditions
Date: 10/12/17

## PROPERTY LOCATION

| | |
|---|---|
| City, Town, or Plantation | |
| Street or Road | |
| Subdivision, Lot # | |

## >> CAUTION: LPI APPROVAL REQUIRED <

Town/City _____ Permit # _____

Date Permit Issued ___/___/___ Fee: $_____ Double Fee Charged [ ]

_____ L.P.I. # _____

Local Plumbing Inspector Signature

☐ Owner ☐ Town ☐ State

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 # _____ Lot # _____

## OWNER/APPLICANT INFORMATION

| | |
|---|---|
| Name (last, first, MI) | ☐ Owner ☐ Applicant |
| Mailing Address of Owner/Applicant | |
| Daytime Tel. # | |

**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 authoirzed above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. _____ (1st) date approved

_____ _____
Local Plumbing Inspector Signature (2nd) date approved

## PERMIT INFORMATION

### TYPE OF APPLICATION

☐ 1. First Time System
☐ 2. Replacement System
Type replaced: _____
Year installed: _____
☐ 3. Expanded System
☐ a. <25% Expansion
☐ b. ≥25% 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 Permit

### 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

### SIZE OF PROPERTY

☐ SQ. FT.
☐ ACRES

### SHORELAND ZONING

☐ Yes ☐ No

### DISPOSAL SYSTEM TO SERVE

☐ 1. Single Family Dwelling Unit, No. of Bedrooms: ____
☐ 2. Multiple Family Dwelling, No. of Units: _____
☐ 3. Other: _____ (specify)
Current Use ☐ Seasonal ☐ Year Round ☐ Undeveloped

### 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: _____ 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: _____ ☐ 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

_____ gallons per day
BASED ON:
☐ 1. Table 4A (dwelling unit(s))
☐ 2. Table 4C(other facilities)
SHOW CALCULATIONS for other facilites

☐ 3. Section 4G (meter readings)
ATTACH WATER METER DATA

### SOIL DATA & DESIGN CLASS

PROFILE CONDITION
_____/_____
at Observation Hole #_____
Depth _____"
of Most Limiting Soil Factor

### DISPOSAL FIELD SIZING

☐ 1. Medium---2.6 sq. ft. / gpd
☐ 2. Medium---Large 3.3 sq. f.t / 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. _____d _____m _____s
Lon. _____d _____m _____s
if g.p.s, state margin of error:_____

## SITE EVALUATOR STATEMENT

I certify that on _____ (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 SE # Date

_____ _____ _____
Site Evaluator Name Printed Telephone Number E-mail Address

Note : Changes to or deviations from the design should be confirmed with the Site Evaluator.

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept.Health & Human S
Division of Environmental H
(207) 287-5672 Fax: (207) 28

Reviewed for Code Compliance
Inspections Division
Approved with Conditions
Date: 10/12/17

Town, City, Plantation | Street, Road, Subdivision | Owner's Name

**SITE PLAN** Scale 1" = _____ ft. or as shown

SITE LOCATION PLAN
(map from Maine Atlas recommended)

SOIL DESCRIPTION AND CLASSIFICATION (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 | | | | |
| 10 | | | | |
| 20 | | | | |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

| Soil Classification | Slope | Limiting Factor | |
|---|---|---|---|
| _____ _____ Profile Condition | _____ % | _____" | [ ] Ground Water<br>[ ] Restrictive Layer<br>[ ] Bedrock<br>[ ] Pit Depth |

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

| Depth Below Mineral Soil Surface (inches) | Texture | Consistency | Color | Mottling |
|---|---|---|---|---|
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| 40 | | | | |
| 50 | | | | |

| Soil Classification | Slope | Limiting Factor | |
|---|---|---|---|
| _____ _____ Profile Condition | _____ % | _____" | [ ] Ground Water<br>[ ] Restrictive Layer<br>[ ] Bedrock<br>[ ] Pit Depth |

_____ _____ _____
Site Evaluator Signature SE # Date

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## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = _____FT.

FILL REQUIREMENTS

Depth of Fill (Upslope) _____

Depth of Fill (Downslope) _____

CONSTRUCTION ELEVATIONS

Finished Grade Elevation _____

Top of Distribution Pipe or Proprietary Device _____

Bottom of Disposal Area _____

ELEVATION REFERENCE POINT

Location & Description:

Reference Elevation: _____

## DISPOSAL AREA CROSS SECTION

Scale

Horizontal 1" = _____ ft.

Vertical 1" = _____ ft.

_____ _____ _____

Site Evaluator Signature | SE # | Date