

2016-02120
414-A018001

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION		Maine Department of Human Services Division of Health Engineering, 10 SHS (207) 287-5672 Fax: (207) 287-3165	
PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	Portland	Town/City	Portland
Street or Road	Ice Pond Drive	Date Permit Issued	11/11
Subdivision, Lot #	Lot 8 414-A018001	Fee: \$	265.00
OWNER/APPLICANT INFORMATION		L.P.I. # 1081	
Name (last, first, MI)	Stoddard, Eric	<input type="checkbox"/> Owner <input checked="" type="checkbox"/> Town <input type="checkbox"/> State The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. This Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.	
Mailing Address of Owner/Applicant	PO Box 10 South Paris ME 04281	Municipal Tax Map # 414 Lot # A018-001	
Daytime Tel. #	890-8800	CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
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.		(1st) date approved _____ (2nd) date approved _____	
Signature of Owner or Applicant: <u>[Signature]</u> Date: <u>8/8/16</u>		Local Plumbing Inspector Signature: _____ Date: _____	
PERMIT INFORMATION			
TYPE OF APPLICATION <input checked="" 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. <25% Expansion <input type="checkbox"/> b. >= 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion		THIS APPLICATION REQUIRES <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	
SIZE OF PROPERTY 0.50 <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES		DISPOSAL SYSTEM TO SERVE <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 type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		DISPOSAL SYSTEM COMPONENTS <input 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	
		TYPE OF WATER SUPPLY <input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other	
DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1,000</u> GAL		DISPOSAL FIELD TYPE & SIZE <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 type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>1152</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	
SOIL DATA PROFILE <u>8</u> CONDITION <u>D</u> at Observation Hole # <u>TP-1</u> Depth <u>9</u> " of Most Limiting Soil Factor Groundwater		DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium---2.6 sq. ft. / gpd <input type="checkbox"/> 2. Medium---Large 3.3 sq. ft. / gpd <input checked="" type="checkbox"/> 3. Large---4.1 sq. ft. / gpd <input type="checkbox"/> 4. Extra Large---5.0 sq. ft. / gpd	
		GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or 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	
		EFFLUENT/EJECTOR PUMP <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	
		DESIGN FLOW <u>281</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 _____ <input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. <u>N43</u> <u>d</u> <u>42</u> <u>m</u> <u>06.19</u> <u>s</u> Lon. <u>W70</u> <u>d</u> <u>15</u> <u>m</u> <u>58.90</u> <u>s</u> if g.p.s. state margin of error: <u>20'</u>	
SITE EVALUATOR STATEMENT			
I certify that on <u>04-17-14</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).			
<u>[Signature]</u> Site Evaluator Signature		<u>034</u> SE #	
<u>Richard A. Sweet</u> Site Evaluator Name Printed		<u>08/05/16</u> Date	
		<u>797-2110</u> Telephone Number	
		<u>dick@sweetassociates.com</u> Email Address	

stoddardenterprises.eric@gmail.com

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 Fax: (207) 287-3165

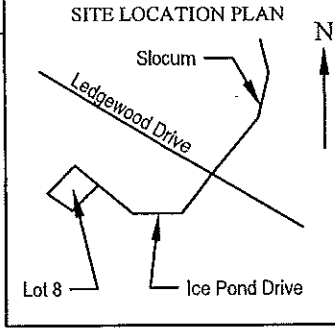
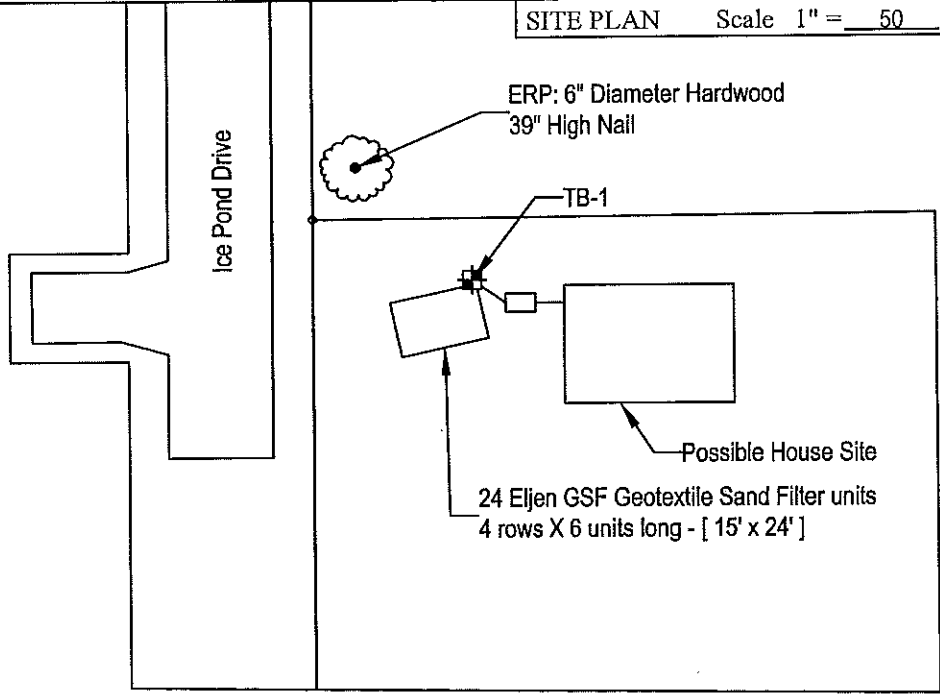
Town, City, Plantation
 Portland

Street, Road, Subdivision
 Ice Pond Drive

Owner or Applicant Name
 Eric Stoddard

SITE PLAN Scale 1" = 50 ft.

SITE LOCATION PLAN



NOTES:

1. Septic tank and disposal field must be located at least 8' and 20' from a full foundation.
2. Scarify all ground to be filled.
3. Insulate the Distribution Box (D-Box).
4. Min. 1/4"/ft (2%) pitch of pipe from building to septic tank.
5. Min. 1/8"/ft (1%) pitch of pipe from septic tank to disposal field.
6. Review the Eljen Geotextile Sand Filter (GSF) Design and Installation Manual before installing this 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
Silt Loam	Friable	Brown	
Silt Loam	Friable	Olive Brown	
Silt Loam	Firm	Olive Brown	Common & Faint
Limit of Excavation at 18 inches			

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	<input checked="" type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
8	D	7	9"	

Observation Hole # _____ □ Test Pit □ Boring

_____ " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling

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

Richard Stoddard
 Site Evaluator Signature

034
 SE #

08/05/16
 Date

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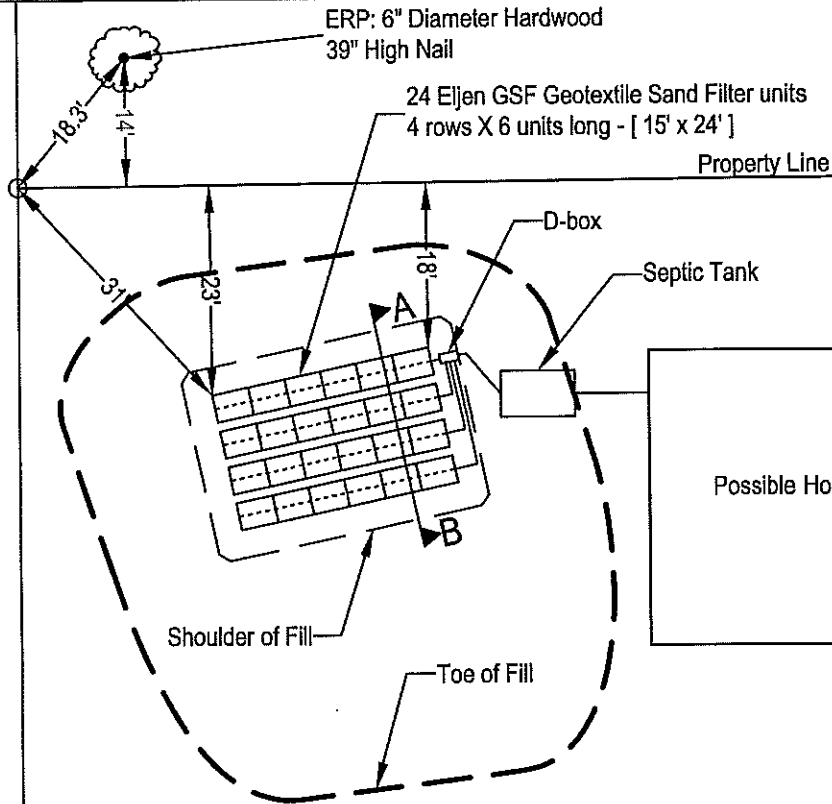
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SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft

Existing Grade Elevations
 -39" -35"
 -47" -47"
 FIELD CORNERS



BACKFILL REQUIREMENTS

Depth of Backfill (upslope) 32-28"
 Depth of Backfill (downslope) 30-30"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation (at Row 1) -5"
 Top of Proprietary Device (at Row 1) -13"
 Bottom of Disposal Field (at Row 1) -24"

ELEVATION REFERENCE POINT
 Location & Description: 6" Diameter Maple

13" High Nail
 Reference Elevation is 0.0" or: _____

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

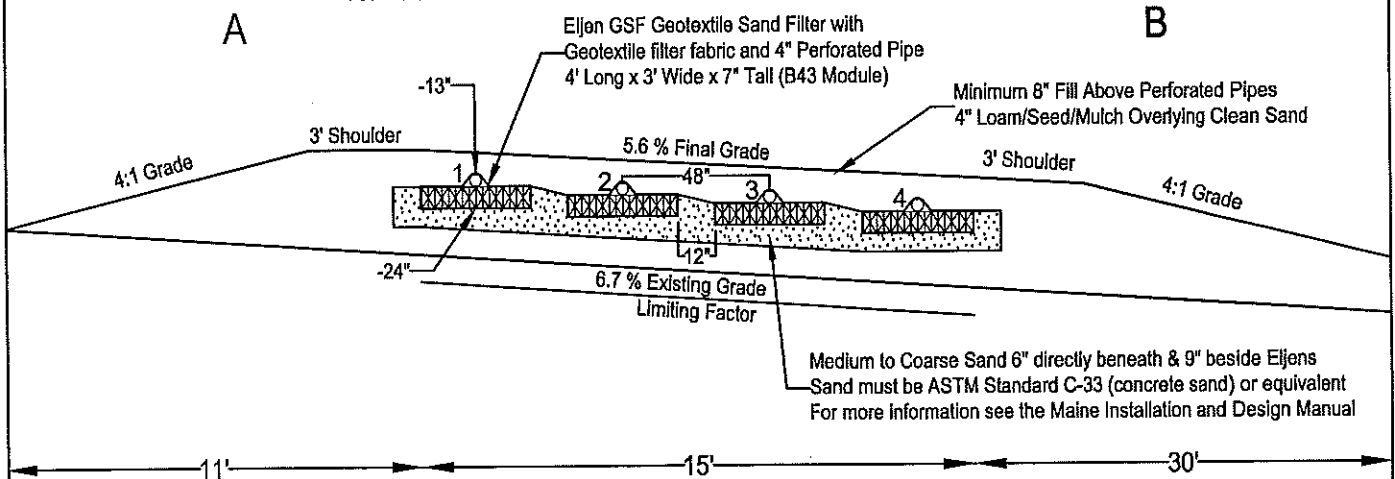
DISPOSAL FIELD CROSS SECTION

ROW #	1	2	3	4
TOP	-13"	-16"	-19"	-23"
BOTTOM	-24"	-27"	-30"	-34"

TOP OF ROW #1 INLET AT -9"

APPROXIMATE ABOVE GRADE FILL REQUIRED
 50 cubic yards of LOAM
 225 cubic yards of SAND
 Compaction: +20% Loam & +15% Sand
 Volume of chambers not considered

Scales:
 Vertical: 1" = 5'
 Horizontal: 1" = 5'



Richard O. Stoddard
 Site Evaluator Signature

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