

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 30
(207) 287-5872 FAX (207) 287-4172

415 4002

PROPERTY LOCATION		>> Caution: Permit Required - Attach In Space Below <<
City, Town, or Plantation	PORTLAND	The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached HERE 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.
Street or Road	LEDGEWOOD ROAD	
Subdivision, Lot *	LOT B	
OWNER/APPLICANT INFORMATION		Caution: Inspections Required I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.
Name (last, first, MI)	N/F FORBES EVERETT	
Mailing Address of <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	1062 OCEAN AVE PORTLAND, ME 04103	
Daytime Tel. #	774-9791	
Owner or Applicant Statement		Municipal Tax Map # _____ Lot # _____
I state 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 _____
Signature of Owner/Applicant _____	Date _____	Local Plumbing Inspector Signature _____
		(2nd) Date Approved _____

PERMIT INFORMATION

TYPE OF APPLICATION 1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	THIS APPLICATION REQUIRES (CEO REVIEW FOR USE OF FILL AS ORIGINAL SOIL- 1. <input checked="" type="checkbox"/> No Rule Variance SECTION 405 SEE LETTER TO 2. <input type="checkbox"/> First Time System Variance CEO DATED 7/19/01 a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	DISPOSAL SYSTEM COMPONENT(S) 1. <input checked="" type="checkbox"/> Complete Non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & old toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, _____ Gallons 6. <input type="checkbox"/> Non-Engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd+) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal field (only) 11. <input type="checkbox"/> Pre-treatment, specify: 12. <input type="checkbox"/> Miscellaneous components
SIZE OF PROPERTY 20,668 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> acres	DISPOSAL SYSTEM TO SERVE 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY _____	TYPE OF WATER SUPPLY 1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other:
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK 1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE 1. <input checked="" type="checkbox"/> Stone Bed 2. Stone Trench 3. <input type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input type="checkbox"/> Linear b. <input type="checkbox"/> Regular d. <input type="checkbox"/> H-20 loaded 4. <input type="checkbox"/> Other: SIZE <u>900</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT 1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment tank b. <input type="checkbox"/> Tank in series c. <input type="checkbox"/> Increase in tank capacity d. <input checked="" type="checkbox"/> Filter on tank outlet RECOMMENDED	DESIGN FLOW <u>270</u> gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS - for other facilities - 3 BEDROOMS AT 90 GALLONS PER DAY EACH 3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA
SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>12 / C /</u> AT Observation Hole * <u>TP 4</u> Depth <u>28</u> " Elevation <u>-50</u> " OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING 1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd	PUMPING 1. <input type="checkbox"/> Not required 2. <input checked="" type="checkbox"/> May be required 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems: DOSE: _____ Gallons	

SITE EVALUATOR STATEMENT

I certify that on 6/25/2001 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature

 163
 SE *

 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation
PORTLAND

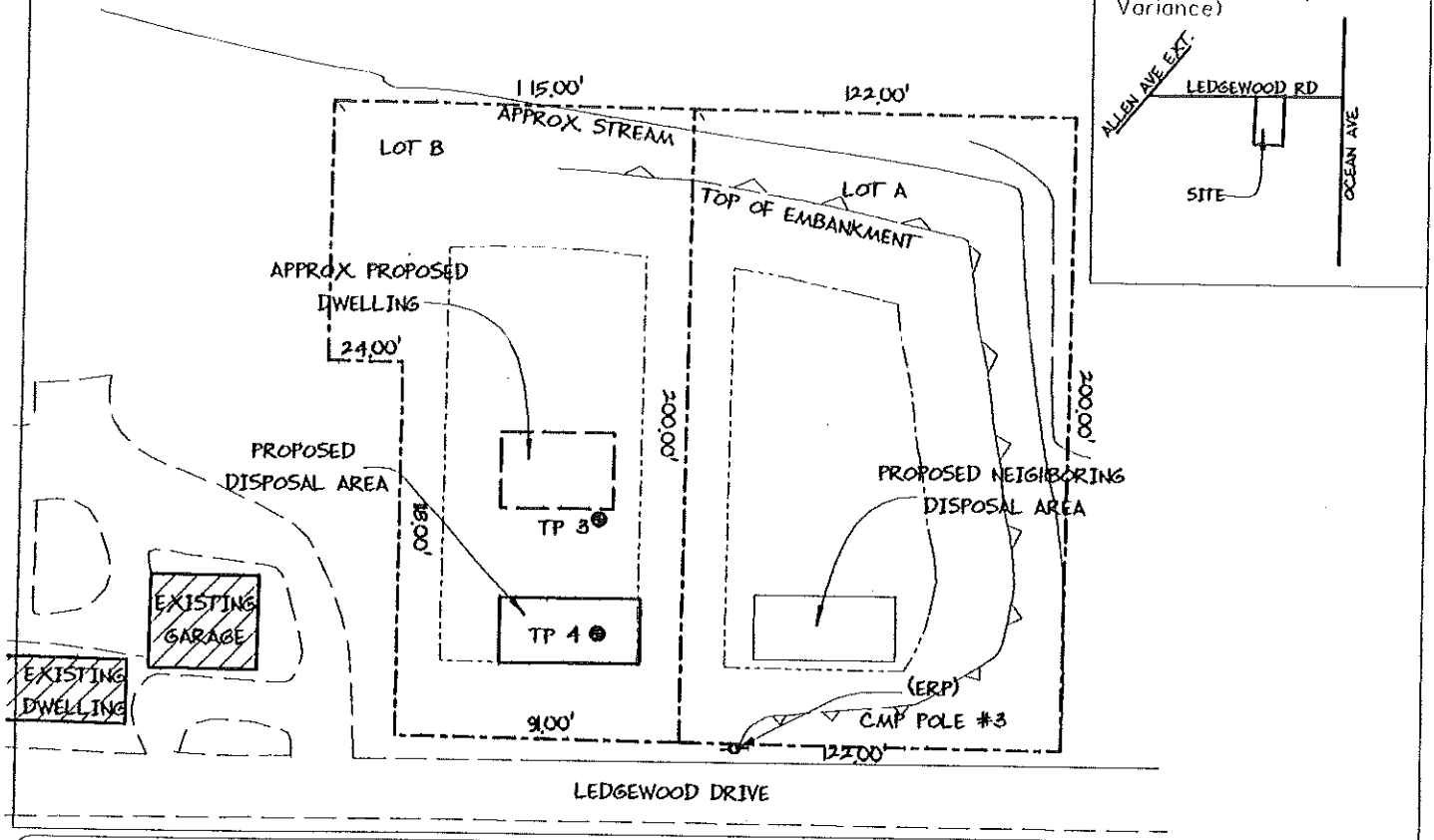
Street, Road Subdivision
LEDGEWOOD ROAD LOT B

Owner's Name
EVERETT FORBES

SITE PLAN

Scale 1" = 60 Ft.
or as shown

SITE LOCATION PLAN
(Attach Map from Maine Atlas for New System Variance)



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

Observation Hole TP 3 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	GRAVELLY		VARIABLE	
	LOAMY		BROWN AND	
	SAND	FRIABLE	OLIVE	
10	(FILL)		BROWN	
	SILTY	SOMEWHAT		
20	CLAY LOAM	FRIABLE	VARIABLE	FEW
	W/FINE	IN PLACES	OLIVE GRAY	DISTINCT
	SANDY		AND	
30	LOAM (FILL)		OLIVE	
	W/ROCKS			
40				
50				

Soil Classification: Profile 12 Condition C
Slope: 18 %
Limiting Factor: Ground Water, Restrictive Layer, Bedrock, Pit Depth

Observation Hole TP 4 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	LOAMY			
	SAND AND	FRIABLE	BROWN	
	SAND			
10	LOAMY			
	SAND W/	FIRM IN	OLIVE	
	SILTY	PLACES	GRAY	
20	CLAY			
	LENSES			
30	GRAVELLY			FEW
	LOAMY			DISTINCT
	SAND AND			
40	SAND			
50				

Soil Classification: Profile 12 Condition C
Slope: 28 %
Limiting Factor: Ground Water, Restrictive Layer, Bedrock, Pit Depth

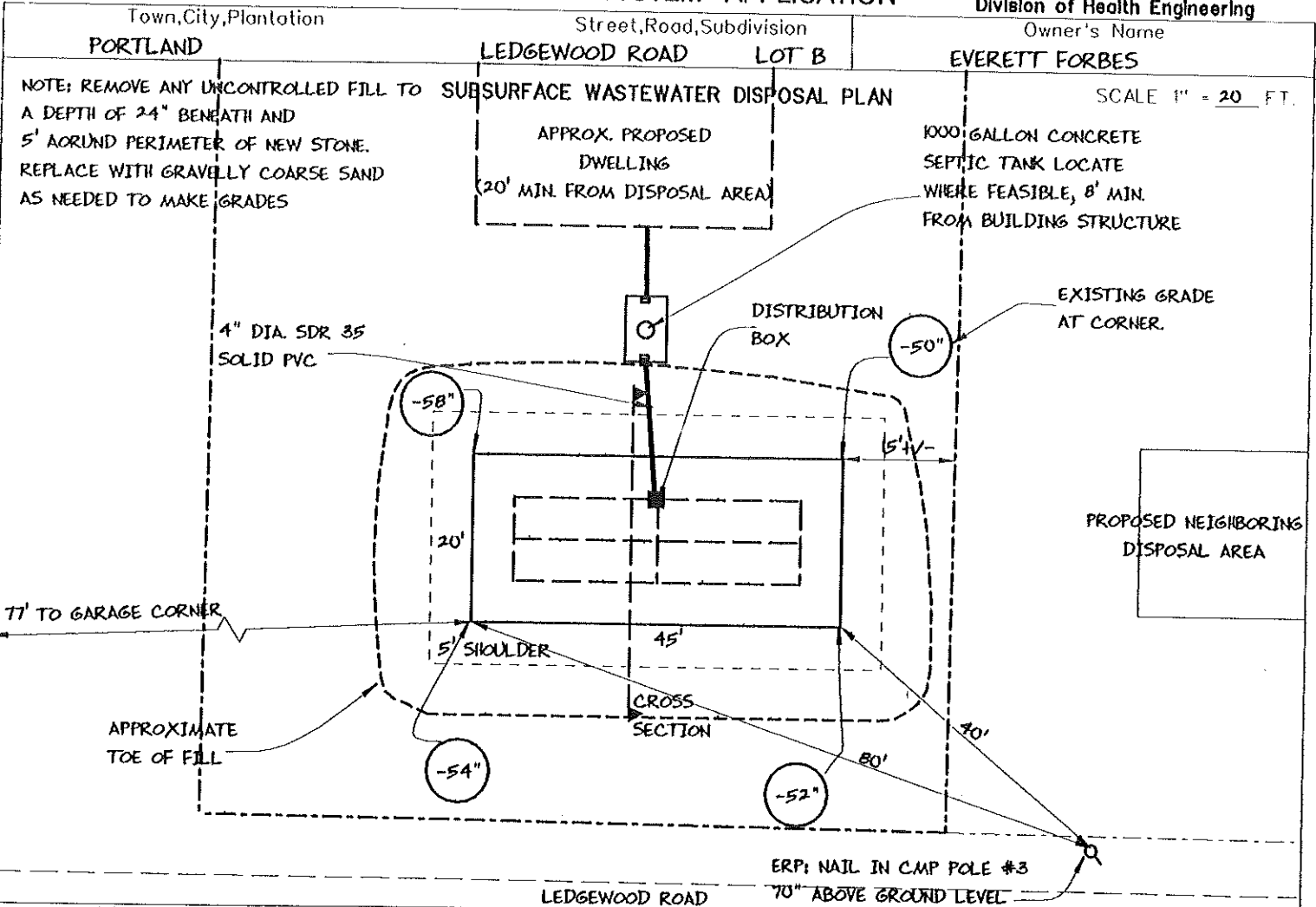
Albert Frick
Site Evaluator, Signature

163
SE *

7/20/2001
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering



FILL REQUIREMENTS

Depth of Fill (Upslope) ± 8" - 16"
 Depth of Fill (Downslope) ± 10" - 12"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation
 Top of Distribution Pipe or Proprietary Device
 Bottom of Disposal Area

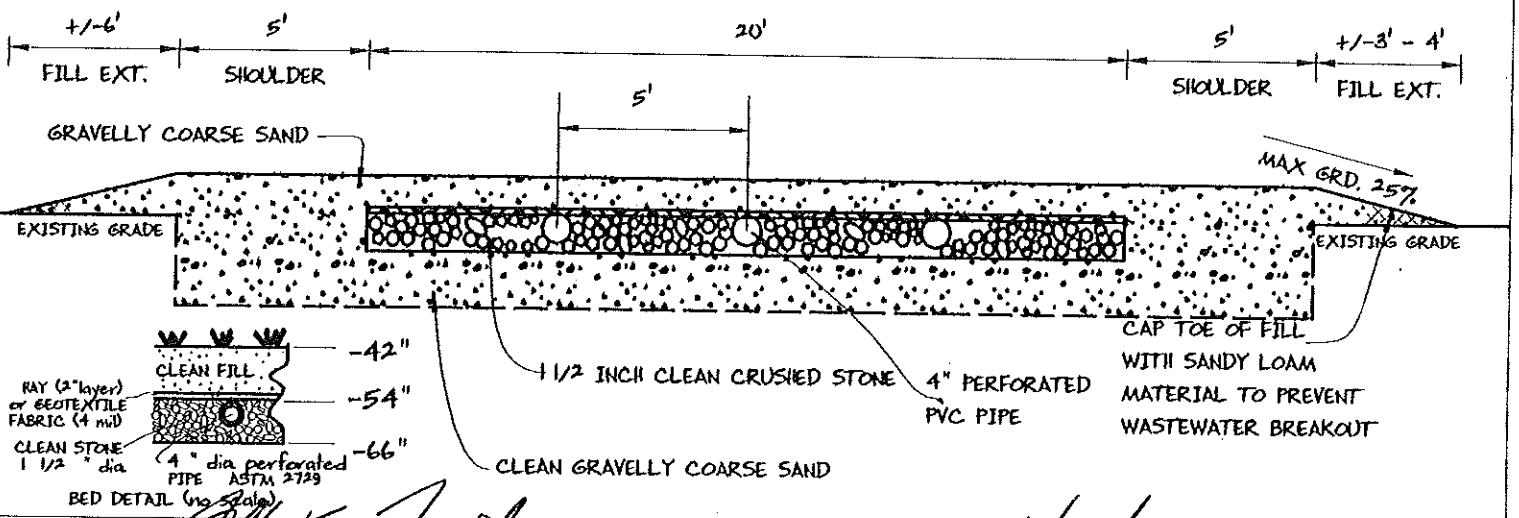
SEE
 DETAIL
 BELOW

ELEVATION REFERENCE POINT

Location & Description CMP POLE #3
 NAIL 70" ABOVE BASE
 Reference Elevation 00"

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

DISPOSAL AREA CROSS SECTION



Albert Frick
 Site Evaluator Signature

163
 SE *

7/20/2001
 Date

ATTACHMENT TO SUBSURFACE WASTEWATER DISPOSAL APPLICATION

PORTLAND
TOWN

LEDGEWOOD ROAD
LOCATION

SUSAN FORBES
APPLICANT'S NAME

- 6) The septic tank should be pumped within two years of installation and subsequently as recommended by the pump service, but in no event should the septic tank be pumped less often than once every three years.
- 7) The actual water flow or number of bedrooms shall not exceed the design criteria indicated on this application without a re-evaluation of the system as proposed. If the system is supplied by public water or a private service with a water meter, the water consumption per period should be divided by the number of days to calculate the average daily water consumption (water usage (cu.ft.) \times 7.48 cu.ft.(gallons per cu.ft.) \div # of days in period).
- 8) The general minimum setbacks between a well and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.
- 9) When a gravity system is proposed: **BEFORE CONSTRUCTION/INSTALLATION BEGINS**, the system installer or building contractor shall review the elevations of all points given in this application and the elevation of the existing and/or proposed building drain and septic tank inverts for compatibility to minimum slope requirements. In gravity systems, the invert of the septic tank(s) outlet(s) shall be at least 4 inches above the invert of the distribution box outlet at the disposal area. When an effluent pump is required, provisions shall be made to make certain that surface ground water does not enter the septic tank or pump station. An alarm device warning of a pump failure shall be installed. Also, when pumping is required to a chamber system, install a "T" connection in the distribution box and place 3 inches of stone or a splash plate in the first chamber. Insulate gravity pipes, pump lines and the distribution box as necessary to prevent freezing.
- 10) On all systems, remove the vegetation, organic duff and old fill material from under the disposal area and any fill extension. On sites where the proposed system is to be installed in natural soil, scarify the bottom and sides of the excavated disposal area with a rake. Do not use wheeled equipment on the scarified soil surface. For systems installed in fill, scarify the native soil by roto-tilling to a depth of at least 8 inches over the entire disposal and fill extension area to prevent glazing and to promote fill bonding. Place fill in loose layers no deeper than 8 inches and compact thoroughly before placing more fill (this ensures that voids and loose pockets are eliminated to minimize the chance of leakage). Do not use wheeled equipment on the scarified soil area until after 12 inches of fill is in place. Keep equipment off the chambers. Divert the surface water away from the disposal area by ditching or shallow swales.
- 11) Unless noted otherwise, fill shall be gravelly coarse sand which contains no more than 5% fines (silt and clay).
- 12) Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 13) Seed all filled and disturbed surfaces with perennial grass seed, then mulch with hay or equivalent material to prevent erosion.



Albert Frick Associates, Inc.
Soil Scientists & Site Evaluators
95A County Road Gorham, Maine 04038
(207) 839-5583

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 515 State St.
(207) 287-6672 FAX (207) 287-4772

PROPERTY LOCATION		>> Caution: Permit Required - Attach in Space Below <<	
City, Town, or Plantation	PORTLAND	Th Pe or wit	PORTLAND 7851 TOWN COPY
Street or Road	LEDGEWOOD ROAD		Date Permit Issued: 9/24/01
Subdivision, Lot *	LOT B		\$ 11010014 FEE <input type="checkbox"/> Double Fee Charged
OWNER/APPLICANT INFORMATION		Local Plumbing Inspector Signature	
Name (last, first, MI) N/F FORBES EVERETT Owner		L.P.I. # 01124	
Mailing Address of <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	1062 OCEAN AVE PORTLAND, ME 04103	Municipal Tax Map * Lot *	
Daytime Tel. *	774-9791	Caution: Inspections Required	
Owner or Applicant Statement		Caution: Inspections Required	
I state 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/Applicant _____ Date _____		Local Plumbing Inspector Signature _____ (1st) Date Approved _____	
		Local Plumbing Inspector Signature _____ (2nd) Date Approved _____	

PERMIT INFORMATION

TYPE OF APPLICATION 1. <input checked="" type="checkbox"/> First Time System 2. <input type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion	THIS APPLICATION REQUIRES (CEO REVIEW FOR USE OF FILL AS ORIGINAL SOIL- SECTION 405) SEE LETTER TO 1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance CEO DATED 7/19/01 a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	DISPOSAL SYSTEM COMPONENT(S) 1. <input checked="" type="checkbox"/> Complete Non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-Engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, _____ Gallons 6. <input type="checkbox"/> Non-Engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd+) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components
SIZE OF PROPERTY 20,68 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> acres	DISPOSAL SYSTEM TO SERVE 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY _____	TYPE OF WATER SUPPLY 1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

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SOIL DATA & DESIGN CLASS PROFILE <u>12</u> / CONDITION <u>C</u> / DESIGN _____ AT Observation Hole * <u>TP 4</u> Depth <u>28</u> " Elevation <u>-50</u> " OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING 1. <input type="checkbox"/> Small - 2.0 sq.ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq.ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd	PUMPING 1. <input type="checkbox"/> Not required 2. <input checked="" type="checkbox"/> May be required 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems: DOSE: _____ Gallons	

SITE EVALUATOR STATEMENT

I certify that on 6/25/2001 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Albert Frick

Site Evaluator Signature

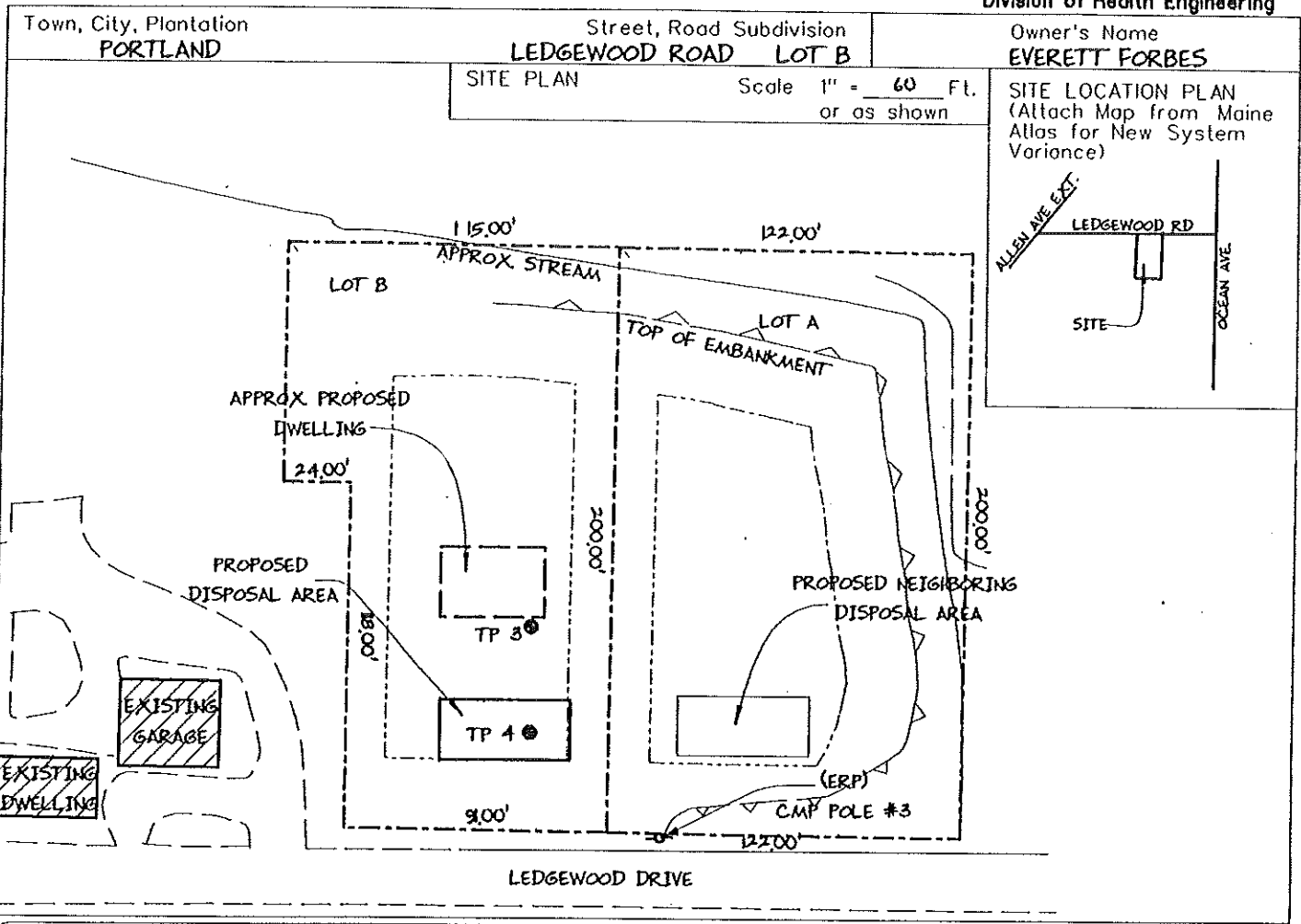
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7/20/2001

Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering



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

Observation Hole TP 3 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	GRAVELLY		VARIABLE	
	LOAMY		BROWN AND	
	SAND	FRIABLE	CLIVE	
10	(FILL)		BROWN	
	SILTY	SOMEWHAT		
20	CLAY LOAM	FRIABLE	VARIABLE	FEW,
	W/FINE	IN PLACES	OLIVE GRAY	DISTINCT
	SANDY		AND	
30	LOAM (FILL)		OLIVE	
	W/BROCKS			
40				
50				

Soil Classification: **12** Profile, **C** Condition
Slope: **18** %
Limiting Factor: **18** #
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Observation Hole TP 4 Test Pit Boring
" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	LOAMY			
	SAND AND	FRIABLE	BROWN	
	SAND			
10	LOAMY			
	SAND W/	FIRM IN	OLIVE	
	SILTY	PLACES	GRAY	
20	CLAY			
	LENSES			
30	GRAVELLY			FEW,
	LOAMY			DISTINCT
	SAND AND			
40	SAND			
50				

Soil Classification: **12** Profile, **C** Condition
Slope: **28** %
Limiting Factor: **28** #
 Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

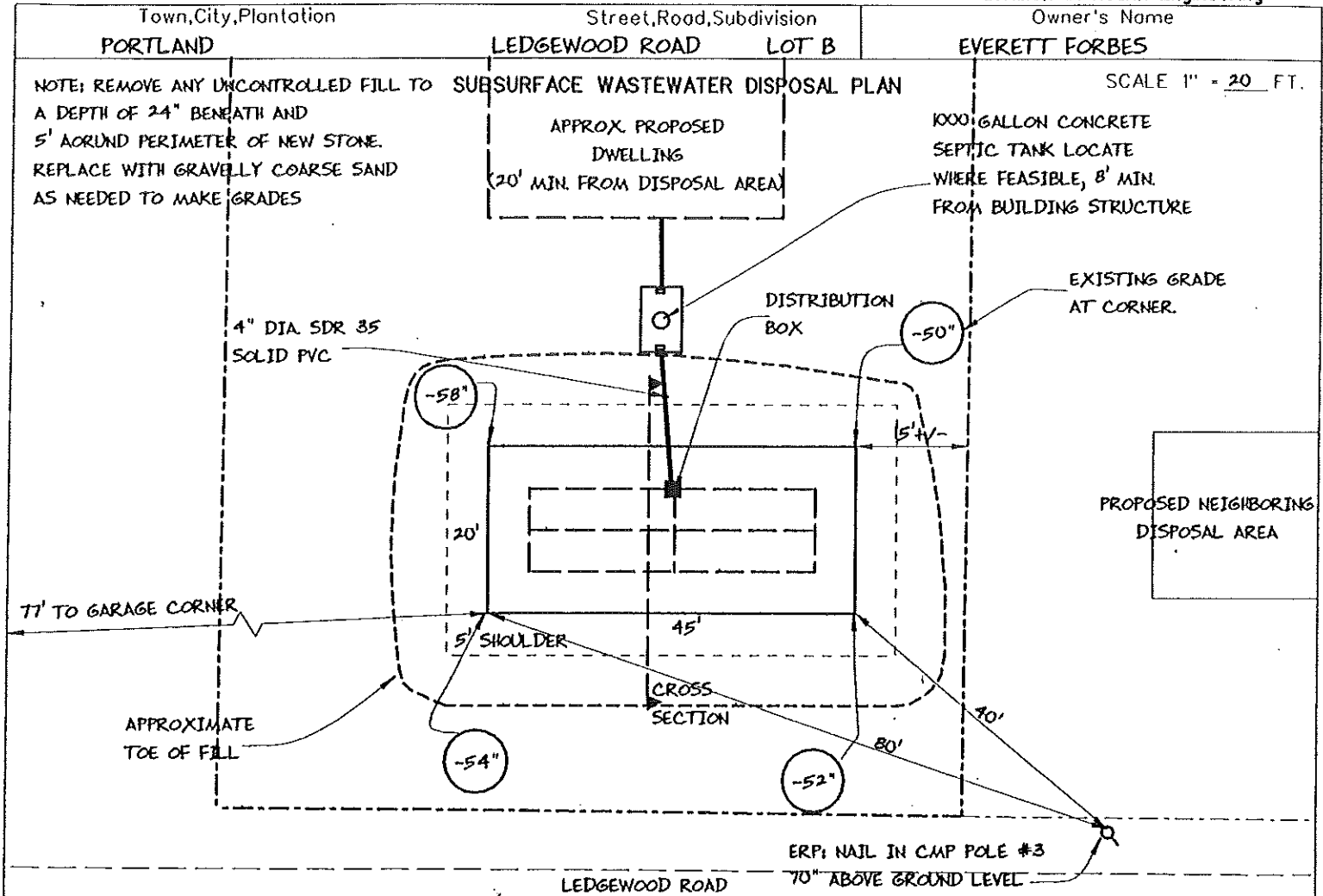
Site Evaluator, Signature

63 SE #

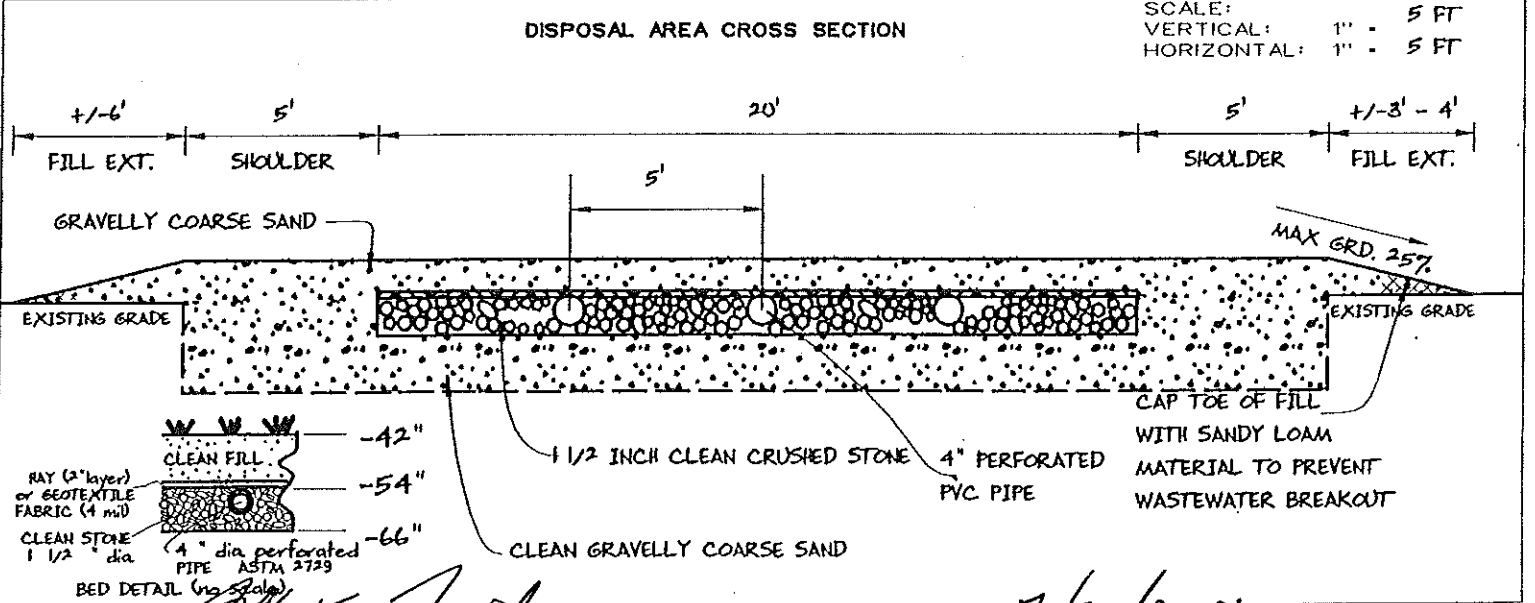
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	± 8" - 16"	Finished Grade Elevation	SEE	Location & Description	CMP POLE #3
Depth of Fill (Downslope)	± 10" - 12"	Top of Distribution Pipe or Proprietary Device	DETAIL	NAIL 70" ABOVE BASE	
		Bottom of Disposal Area	BELOW	Reference Elevation	00"



Albert Frick
Site Evaluator Signature

163
SE *

7/20/2001
Date



Albert Frick Associates, Inc.

Soil Scientists & Site Evaluators

95A County Road Gorham, Maine 04038

(207) 839-5563

PORTLAND
TOWN

LEDGENOOD ROAD
LOCATION

SUSAN FORBES
APPLICANT'S NAME

- 1) The Plumbing and Subsurface Wastewater Disposal Rules adopted by the State of Maine, Department of Human Services pursuant to 22 M.R.S.A. § 42 (the "Rules") are incorporated herein by reference and made a part of this application and shall be consulted by the owner/applicant, the system installer and/or building contractor for further construction details and material specifications. The system installer should contact Albert Frick Associates, Inc. 839-5563, if there are any questions concerning materials, procedures or designs. The system installer and/or building contractor installing the system shall be solely responsible for compliance with the Rules and with all state and municipal laws and ordinances pertaining to the permitting, inspection and construction of subsurface wastewater disposal systems.
- 2) This application is intended to represent facts pertinent to the Rules only. It shall be the responsibility of the owner/applicant, system installer and/or building contractor to determine compliance with and to obtain permits under all applicable local, state and/or federal laws and regulations (including, without limitation, Natural Resources Protection Act, wetland regulations, zoning ordinances, subdivision regulations, Site Location of Development Act and minimum lot size laws) before installing this system or considering the property on which the system is to be installed on a "buildable" lot. It is recommended that a wetland scientist be consulted regarding wetland regulations.

Prior to the commencement of construction/installation, the local plumbing inspector shall inform the owner/applicant and Albert Frick Associates, Inc. of any local ordinances which are more restrictive than the Rules in order that the design may be amended. All designs are subject to review by local, state and/or federal authorities. Albert Frick Associates, Inc.'s liability shall be limited to revisions required by regulatory agencies pursuant to laws or regulations in effect at the time of preparation of this application.
- 3) All information shown on this application relating to property lines, well locations, subsurface structures and underground facilities (such as, utility lines, drains, septic systems, water lines, etc.) are based solely upon information provided by the owner/applicant and has been relied upon by Albert Frick Associates, Inc. in preparing this application. The owner/applicant shall review this application prior to the start of construction and confirm this information.
- 4) Installation of a garbage (grinder) disposal is not recommended. If one is installed, an additional 1000 gallon septic tank or a septic tank filter should be connected in series to the proposed septic tank.
- 5) The system user shall avoid introducing kitchen grease or fats into this system. Chemicals such as septic tank cleaners and/or chlorine (such as from water treatment) and controlled or hazardous substances shall not be disposed of in this system.

ATTACHMENT TO SUBSURFACE WASTEWATER DISPOSAL APPLICATION

PORTLAND
TOWN

LEDGEWOOD ROAD
LOCATION

SUSAN FORBES
APPLICANT'S NAME

- 6) The septic tank should be pumped within two years of installation and subsequently as recommended by the pump service, but in no event should the septic tank be pumped less often than once every three years.
- 7) The actual water flow or number of bedrooms shall not exceed the design criteria indicated on this application without a re-evaluation of the system as proposed. If the system is supplied by public water or a private service with a water meter, the water consumption per period should be divided by the number of days to calculate the average daily water consumption (water usage (cu.ft.) x 7.48 cu.ft.(gallons per cu.ft.) + # of days in period).
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- 12) Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 13) Seed all filled and disturbed surfaces with perennial grass seed, then mulch with hay or equivalent material to prevent erosion.



Albert Erick Associates, Inc.
Soil Scientists & Site Evaluators
95A County Road Corham, Maine 04036
(207) 839-5563