

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
 Div of Environmental Health, 11 SHS
 (207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation		Town/City _____	Permit # _____
Street or Road		Date Permit Issued ___/___/___	Fee: \$ _____ Double Fee Charged []
Subdivision, Lot #			L.P.I. # _____
OWNER/APPLICANT INFORMATION		Local Plumbing Inspector Signature _____ - Owner - Town - State	
Name (last, first, MI)	Owner Applicant	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.	
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.		CAUTION: INSPECTION REQUIRED I have inspected the installation authorized 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 _____	
Signature of Owner or Applicant _____ Date _____			

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 <input type="checkbox"/> SQ. FT. <input type="checkbox"/> ACRES	DISPOSAL SYSTEM TO SERVE 1. Single Family Dwelling Unit, No. of Bedrooms: _____ 2. Multiple Family Dwelling, No. of Units: _____ 3. Other: _____ (specify) Current Use <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY 1. Drilled Well 2. Dug Well 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other
SHORELAND ZONING <input type="checkbox"/> Yes <input type="checkbox"/> No		

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: <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	DESIGN FLOW _____ gallons per day BASED ON: <input 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
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. ft. / gpd 3. Large--4.1 sq. ft. / gpd 4. 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: _____ 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.

Septic System Design Notes

Center Rd
Lebanon ME
Map R2, Lot 5

Garbage disposal units are not allowed with this design. Use of such units will contribute to system failure.

Any water softening system shall not be discharged into the septic system. Discharge into the system will contribute to system failure.

Large volume rapid discharge, such as the emptying of hot tubs, may contribute to system failure by disrupting settling of solids and settling time.

Introduction into the system of anything other than normal domestic wastewater may contribute to system failure.

Tank shall be pumped every 2-3 years, or at an interval recommended by the pumper after the first pumping.

Please notify Site Evaluator of any changes made to this design.

PLUMBING APPLICATION

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PROPERTY ADDRESS

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

PROPERTY OWNERS NAME

Name (last, first, MI) Owner Applicant

The Internal Plumbing Fixtures and Piping 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 plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

Mailing Address of Owner/Applicant
 Daytime Tel. #

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

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.

 Date Approved (Rough-In)

 Signature of Owner or Applicant Date

 Local Plumbing Inspector Signature

 Date Approved (Final)

PERMIT INFORMATION

This Application Is For

- NEW PLUMBING INSTALLATION
- RELOCATED PLUMBING

Type of Structure To Be Served

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER-SPECIFY _____

Plumbing To Be Installed By

- MASTER PLUMBER
- MFG'D HOUSING DEALER/MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up

HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District

OR

HOOK UP: to an existing subsurface wastewater disposal system

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures

OR

TRANSFER FEE
 (\$10.00)

Column 2 Number Type of Fixture

	Hosebibb / Sillcock
	Floor Drain
	Urinal
	Drinking Fountain
	Indirect Waste
	Waste Treatment Softener, Filter, etc.
	Grease / Oil Separator
	Dental Cuspidor
	Bidet
	Other: _____
	Fixtures (Subtotal) Column 2

Column 1 Number Type of Fixture

	Bathtub (and Shower)
	Shower (Separate)
	Sink
	Wash Basin
	Water Closet (Toilet)
	Clothes Washer
	Dish Washer
	Garbage Disposal
	Laundry Tub
	Water Heater
	Fixtures (Subtotal) Column 1
	Fixtures (Subtotal) Column 2

Fixtures (Subtotal) Column 1

Fixtures (Subtotal) Column 2

Total Fixtures

Fixture Fee

Transfer Fee

Hook-Up & Relocation Fee

Permit Fee

(Total)