

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision

Street, Road, Subdivision

Owner's Name

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

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

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

	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification _____ Profile Condition	Slope _____ %	Limiting Factor <input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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	Texture	Consistency	Color	Mottling
0				
10				
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30				
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Soil Classification	Slope	Limiting Factor	[] Ground Water
_____ Profile _____ Condition	_____ %	_____ "	[] Restrictive Layer
			[] Bedrock
			[] Pit Depth

 Site Evaluator Signature SE # Date

SE #

Date