

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services  
 Division of Environmental Health  
 (207) 287-5672 Fax: (207) 287-3165

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				
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Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
_____	_____ %	_____ "	<input type="checkbox"/> Restrictive Layer
Profile Condition			<input type="checkbox"/> Bedrock
			<input type="checkbox"/> Pit Depth

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Site Evaluator Signature

SE #

Date