

REPLACEMENT SYSTEM VARIANCE REQUEST

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application (HHE-200) for the proposed replacement system which requires a variance to the Rules. The LPI shall review the Replacement System Variance Request an HHE-200 and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 1903)
2. There will be no change in use of the structure except as authorized for one-time exempted expansions outside the shoreland zone of major waterbodies/courses.
3. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
4. The BOD₅ plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION

Town of AUGUSTA

Permit No. 3741

Date Permit Issued _____

Property Owner's Name: TIM HARRIS Tel. No.: (207) 623-9565

System's Location: BOG ROAD AUGUSTA ME 04330

Property Owner's Address: RR 6 Box 731

(if different from above) AUGUSTA ME 04330

SPECIFIC INSTRUCTIONS TO THE: LOCAL PLUMBING INSPECTOR (LPI):

If any of the variances exceed your approval authority and/or do not meet all of the requirements listed under the Limitations Section above, then you are to send this Replacement System Variance Request, along with the Application, to the Department for review and approval consideration before issuing a Permit. (See reverse side for Comments Section and your signature.)

SITE EVALUATOR:

If after completing the Application, you find that a variance for the proposed replacement system is needed, complete the Replacement Variance Request with your signature on reverse side of form.

PROPERTY OWNER:

It has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions and have concluded that a replacement system in total compliance with the Rules is not possible.

PROPERTY OWNER

I understand that the proposed system requires a variance to the Rules. Should the proposed system malfunction, I release all concerned provided they have performed their duties in a reasonable and proper manner, and I will promptly notify the Local Plumbing Inspector and make any corrections required by the Rules. By signing the variance request form, I acknowledge permission for representatives of the Department to enter onto the property to perform such duties as may be necessary to evaluate the variance request.

(P) Tim Harris
SIGNATURE OF OWNER

6/26/97
DATE

LOCAL PLUMBING INSPECTOR

I, George H. Secoy Jr., the undersigned, have visited the above property and have determined to the best of my knowledge that it cannot be installed in compliance with the Rules. As a result of my review of the Replacement Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

a. (I approve, disapprove) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant. —OR—

b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (recommend, do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, she shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: _____

George H. Secoy Jr.
LPI SIGNATURE

7/16/97
DATE

Replacement System Variance Request

VARIANCE CATEGORY	VARIANCE REQUESTED		LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
SOILS						
Soil Profile	Ground Water Table		to 7"		Inches	
Soil Condition	Restrictive Layer		to 7"		Inches	
from HHE-200	Bedrock		to 12"		Inches	
SETBACK DISTANCES (in feet)	Disposal Fields		Septic Tanks		Disposal Fields	Septic Tanks
From	Less than 1000 gpd	1000 to 2000 gpd	Less Than 1000 gpd	1000 to 2000 gpd	To	To
Wells with water usage of 2000 or more gpd	300 ^a ft	300 ft	100 ^a ft	100 ^a ft		
Owner's wells	100 down to 50 ft	200 down to 100 ft	100 ^b down to 50 ft	100 down to 50 ft	75'	60'±
Neighbor's wells	100 ^b down to 60 ft	200 ^b down to 120 ft	100 ^b down to 50 ft	100 ^b down to 75 ft		
Water supply line	10 ft ^d	20 ft ^d	10 ft ^d	10 ft ^a		
Water course, major - for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft	200 down to 120 ft	100 down to 50 ft	100 down to 50 ft		
Water course, minor	50 down to 25 ft	100 down to 50 ft	50 down to 25 ft	50 down to 25 ft		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	25 down to 12 ft	25 down to 12 ft		
Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams (edge of fill extension)	25 ft ^d	25 ft ^d	25 ft ^d	25 ft ^d		
Slopes greater than 3:1	10 ft	18 ft	N/A	N/A		
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Full basement [below grade foundation]	20 down to 10 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Property lines	10 down to 5 ft	18 ft down to 9 ^c ft	10 ft down to 4 ^c ft	15 ft down to 7 ^c ft		
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft		

OTHER

1. Fill extension Grade - to 3:1

2.

3.

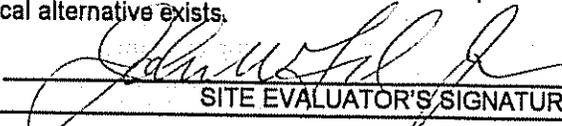
Footnotes:

a. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State variance.

b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 (or 200 ft. for 1000-2000 gpd) feet and closer to that well than the system it is replacing.

c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope or property line.

d. Natural Resources Protection Act requires a 25 foot setback on slopes with less than 20% from the edge of disturbance and 100 feet on slopes greater than 20% except for the repair or installation of a replacement system when no practical alternative exists.


SITE EVALUATOR'S SIGNATURE

6/25/97
DATE

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (does does not) give its approval. Any additional requirements, recommendations, or reasons for the Variance denial, are given in the attached letter.

SIGNATURE OF THE DEPARTMENT

DATE



STATE OF MAINE
 DEPARTMENT OF HUMAN SERVICES
 11 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0011

ANGUS S. KING, JR.
 GOVERNOR

KEVIN W. CONCANNON
 COMMISSIONER

WELL SETBACK RELEASE FORM

We, the undersigned, are the owner(s) of the well and/or property herein described. We have read and understand the following information concerning the proposed separation distance between our well and the subsurface waste water disposal system for which a variance is being requested. We are prepared to accept any risk that the subsurface waste water disposal system may pose to our well.

All wells should be located a safe distance from all possible sources of contamination; in this case a subsurface waste water disposal system. The Maine Subsurface Waste Water Disposal Rules require a minimum of 100 feet between a disposal system and a well.

Since the safety of a well primarily depends on considerations of good well construction, geology and adequate maintenance of the subsurface waste water disposal system, the best means of protecting the well water quality is to maintain the maximum distance between a well and a disposal system. The Department of Human Services suggests that a maximum setback distance should be maintained.

The separation distance between our well and the subsurface wastewater disposal system for which this well release approval is requested is:

component	<u>NSAOSAL FIELD</u>	<u>1</u>	<u>75'</u>	feet.
component	<u>SEPTIC TANK</u>	<u>1</u>	<u>60'±</u>	feet

Address of Property with Disposal System: RR6 BOX 731 - BOG ROAD AUGUSTA, ME 04330
 (Include Municipal Book & Page No. or Map & Lot No.) (X) Tim Harris

Owner(s) of Property with Disposal System: TIM HARRIS

Address of Property with Well: SAME
 (Include Municipal Book & Page No. or Map & Lot No.) (X) Tax Map 1 Lot 15C, Book 4712 Page 338

Owner(s) of Property with Well: SAME

We, the undersigned, release the site evaluator, well driller, the municipality and the State of Maine from liability should our well become contaminated. (Note: If the subject well has more than one owner, all well owner signatures must appear on this document.)

Well Owner(s) Signature (X) Tim Harris / Tim Harris Date 7/17/97
6/26/97
 _____ Date _____

State of Maine

County of Kennebec, ss

Date 7-17-1997

Then personally appeared the above named TIM HARRIS (and _____)

_____) and (severally) acknowledged the foregoing instrument to be his (or their) free act and deed.

Before me, [Signature]
 Justice of the Peace or Notary Public

BK-5404
 Pg. 344



PRINTED ON RECYCLED PAPER

1-15-1999

MI L15C

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION	
Town or P ^l location	AUGUSTA
Street Subdivision Lot #	BOG ROAD

AUGUSTA	3741	TOWN COPY
Date Permit Issued: <u>6/24/97</u>	\$ <u>100</u> FEE	<input type="checkbox"/> Double Fee Charged
Local Plumbing Inspector Signature: <u>[Signature]</u>		L.P.I. # <u>102A</u>

PROPERTY OWNERS NAME	
Last: HARRIS	First: TIM
Mailing Address of Owner	RR 6 Box 731 AUGUSTA ME 04330
Daytime Tel. #	(207) 623-9565

Municipal Tax Map # 1-15C Page # 15C

Owner Statement

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.

Tim Harris 6/24/97
Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Local Plumbing Inspector Signature _____ Date Approved _____

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- First Time System
- Multi-User System
- Replacement System
- Expanded System
 - One-time exempted
 - Non-exempted
- Experimental System
- Seasonal Conversion

THIS APPLICATION REQUIRES:

- No Rule Variance
- First Time System Variance (Municipal)
- First Time System Variance (State)
- Replacement System Variance
 - Local Plumbing Inspector approval
 - State & Local Plumbing Inspector approval
- Minimum Lot Size Variance
- Seasonal Conversion Variance

DISPOSAL SYSTEM COMPONENT(S)

- Non-Engineered System
- Primitive System
- Alternative Toilet
Specify _____
- Non-Engineered Treatment Tank
- Holding Tank _____ Gallons
- Non-Engineered Disposal Area (only)
- Separated Laundry System
- Engineered System (+2000 gpd)
- Engineered Treatment Tank (only)
- Engineered Disposal Area (only)

SIZE OF PROPERTY

2 1/2 ± ACRES

DISPOSAL SYSTEM TO SERVE:

- Single Family Dwelling Unit
- Multiple Family Dwelling Unit
Number of Units _____
- Other _____
SPECIFY _____

TYPE OF WATER SUPPLY

EXISTING DRILLED WELL

SHORELAND ZONING

Yes No

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- Concrete
 - Regular
 - OK Low Profile
- Plastic

SIZE 1000 Gallons

DISPOSAL AREA TYPE/SIZE

- Stone Bed _____ Sq. Ft.
- Proprietary Device 891 Sq. Ft.
 - Clustered Linear
 - Regular H-20
- Trench _____ Lin. Ft.
- Other _____

GARBAGE DISPOSAL UNIT

- No
- Yes
 - Multi-compartment tank
 - Tank in series
 - Increase in tank capacity
 - Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW
(Show Calculations)

THREE BEDROOM SINGLE FAMILY DWELLING

3 BR x 90 GPD = 270 GPD

DESIGN FLOW: 270
(Gallons/Day)

PROFILE & DESIGN CLASS

PROFILE	DESIGN
<u>2</u>	<u>C</u>

DEPTH TO MOST LIMITING FACTOR 15"

DISPOSAL AREA SIZING

- Small 2.0
- Medium 2.60
- Medium-Large 3.30
- Large 4.10
- Extra-Large 5.00

PUMPING

- Not required
- May be required
- Required

DOSE _____ Gallons

SITE EVALUATOR'S STATEMENT

6/11/97 (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.

[Signature]
Site Evaluator Signature
JOHN W. LORD JR
Print Name

168
SE #
(207) 445-3402
Telephone

6-24-97
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City or Plantation

Street, Road or Subdivision

Name of Owner

AUGUSTA

BOG ROAD

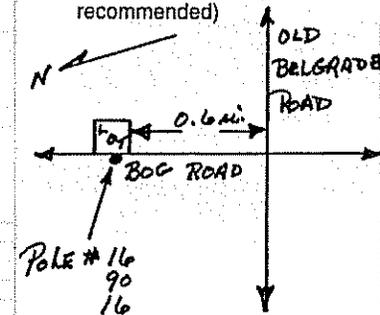
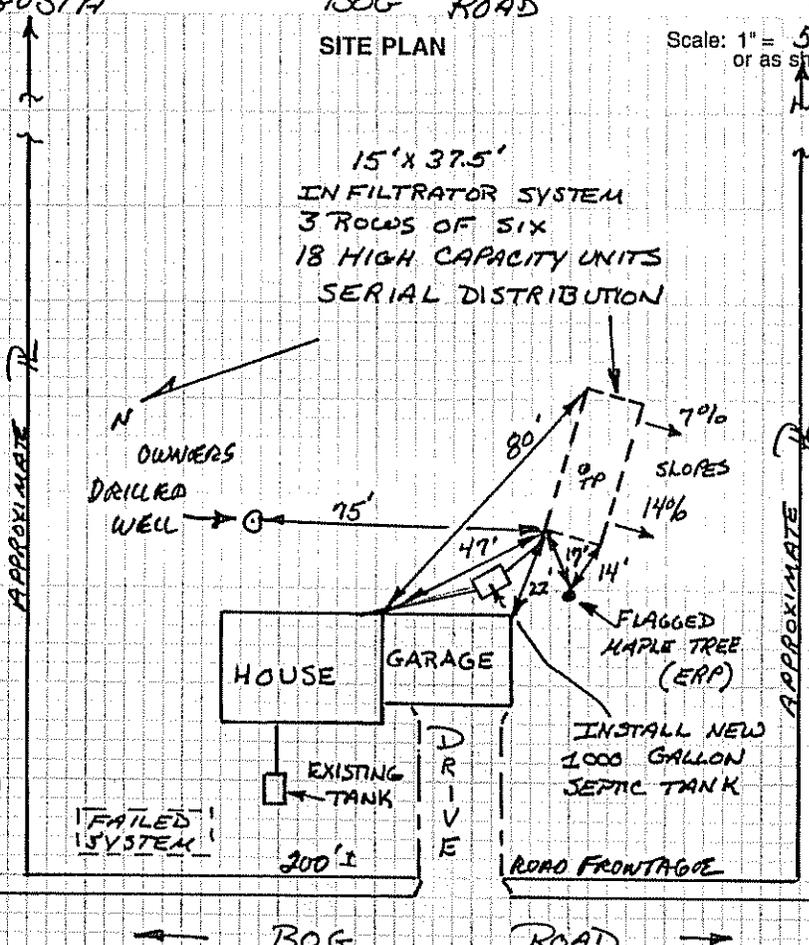
TIM HARRIS

SITE PLAN

Scale: 1" = 50
or as shown

Ft.

SITE LOCATION PLAN
(Map from The Maine Atlas
recommended)



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP 1 Test Pit Boring

ONE " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0			BROWN	
6			YELLOW BROWN	
10	SANDY			
15		FRABLE		
20			GRAY	COMMON
30	LOAM		BROWN	DISTINCT
40				
50				

Soil Profile 2 Class C Slope 7.2%± Limiting Factor 15" Ground Water Restrictive Layer Bedrock

Observation Hole _____ Test Pit Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile _____ Class _____ Slope _____% Limiting Factor _____" Ground Water Restrictive Layer Bedrock

[Signature]
Site Evaluator Signature

168
SE #

6-24-97
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City or Plantation

Street, Road or Subdivision

Name of Owner

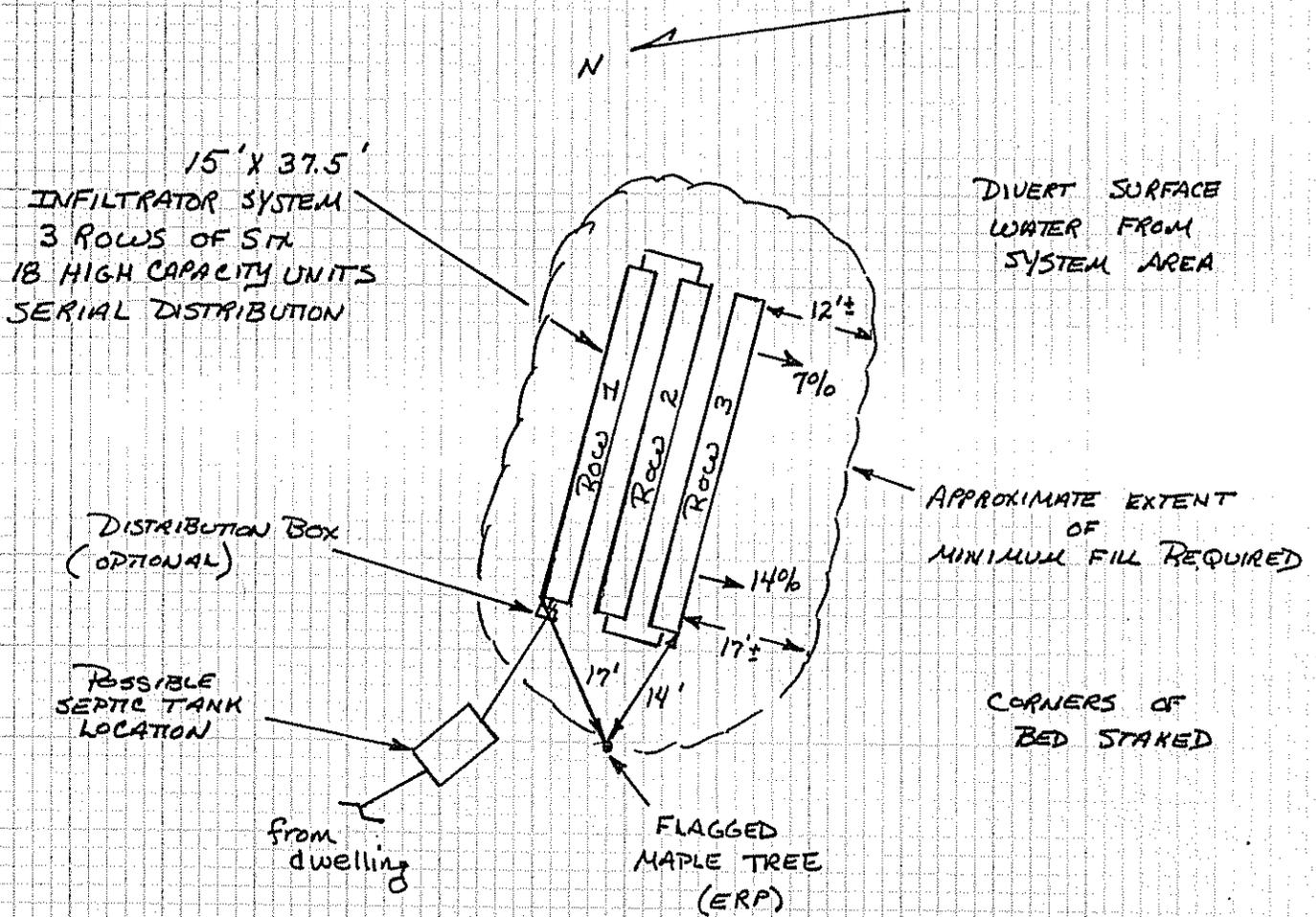
AUGUSTA

BOG ROAD

TIM HARRIS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 Ft.



FILL REQUIREMENTS

Depth of Fill (Upslope) $\frac{24}{1}$ "
Depth of Fill (Downslope) $24\frac{1}{2}$ " to $34\frac{1}{2}$ "

CONSTRUCTION ELEVATIONS

Finished Grade Elevation - ERP IS AT $\rightarrow 0$
Top of Distribution Pipe or Proprietary Device - SEE ATTACHED
Bottom of Disposal Area - DIAGRAM + BELOW

ELEVATION REFERENCE POINT (ERP)

Location & Description FLAGGED NAIL IN
FLAGGED MAPLE TREE 39"
Reference & Elevation ABOVE EXISTING

DISPOSAL AREA CROSS SECTION

Scale: GRADE AT TREE.
Vertical: 1" = Ft.
Scale: 1" = Ft.

CONSTRUCTION ELEVATIONS:

BOTTOM OF TRENCH: TOP OF INFILTRATOR:

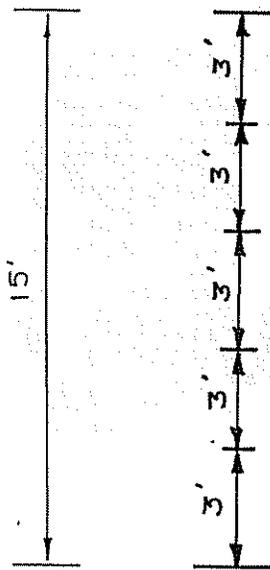
Row 1:	-36"	-20"
Row 2:	-41"	-25"
Row 3:	-46"	-30"

John Wood
Site Evaluator Signature

168
SE #

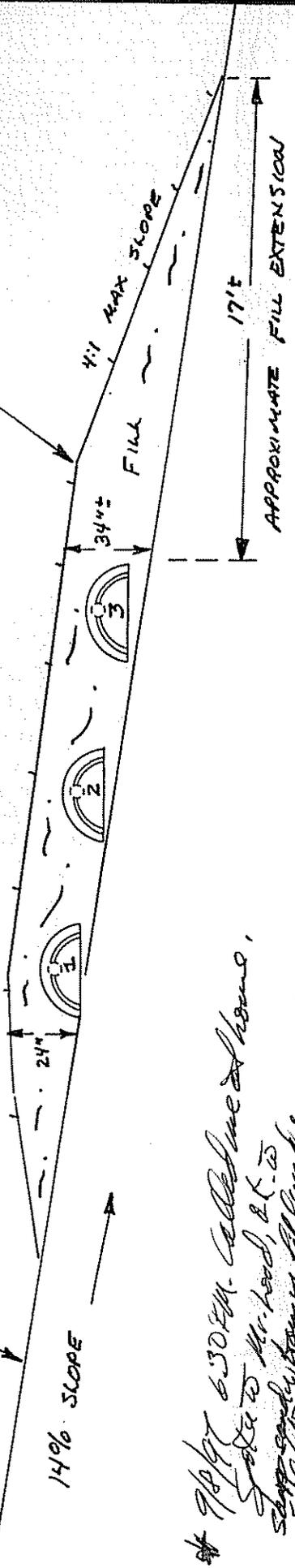
6-24-97
Date

INFILTRATOR CROSS SECTION 13-14%



*9/12/97 system filled
with gravel like gravel course
and placed on bottom of
trench. J.H.*

EDGE OF 3 FT. BERM



6" CLEAN FILL OVER INFILTRATORS (MINIMUM)

ORIGINAL GRADE

14% SLOPE

34"± FILL

4:1 MAX SLOPE

17'±

APPROXIMATE FILL EXTENSION

** 9/12/97 6:30 PM. called me & hours.
Spoke to Mr. hood, & t. to
stop sand & stone fill from
being placed in and extend this
fill around and over
NOTES:*

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER INFILTRATORS AND FILL EXTENSION AREAS.
2. BOTTOM OF INFILTRATORS TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM INFILTRATOR AREA.
4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

ORIGINAL GRADE
FILL UNDER INFILTRATORS TO BE GRAVELLY SAND TEXTURE.
FILL AROUND INFILTRATORS TO BE GRAVELLY SAND TEXTURE.

SITE EVALUATOR: <i>John W. Lord Jr</i>		SE # 168
OWNER: <u>TIM HARRIS</u>	NUMBER OF INFILTRATORS: <u>3</u>	PERCENT SLOPE: <u>7% TO 14%</u>
LOCATION: <u>AUGUSTA</u>	<u>3</u> BAYS OF SIX ELEVATIONS:	
DATE: <u>6-24-97</u>	REFERENCE PT. <u>0</u>	BOTTOM TRENCH #1 <u>-36"</u>
	SCALE: <u>1 INCH = 5 FEET</u>	BOTTOM TRENCH #2 <u>-41"</u>
		BOTTOM TRENCH #3 <u>-46"</u>