

PIE 7/2/13

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept Health & Human Services
Div. of Environmental Health, 11SHS
(207)287-5672 FAX (207)287-3165

PROPERTY LOCATION		CAUTION: LPI APPROVAL REQUIRED AUGUSTA PERMIT #6795 TOWN COPY Date Permit Issued: 5/28/13 \$ 250.00 fee <i>May R. Fulk</i> LPI # 850
City, Town, or Plantation	AUGUSTA	
Street or Road	612 CIVIC CENTER DRIVE	
Subdivision, Lot #	191 / Lot 40A	
OWNER/APPLICANT INFORMATION		
Name (last, first, MI)	MATHEWS, MANFRED <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	
Mailing Address of Owner/Applicant	612 CIVIC CENTER DRIVE AUGUSTA, ME 04330	
Daytime Tel. #	207/441-2291	Municipal Tax Map # 1 Lot # 40A

OWNER OR APPLICANT 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.	CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.
<i>Manfred Mathews</i> 5/17/13 Signature of Owner/Applicant Date	<i>May R. Fulk</i> 7/19/13 Local Plumbing Inspector Signature (1st) Date Approved 7/10/13 (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced <u>TRENCH</u> Year installed <u>1960'S</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. >25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector approval <input type="checkbox"/> b. State & Local Plumbing Inspector approval <input checked="" type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector approval <input checked="" type="checkbox"/> b. State & Local Plumbing Inspector approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENTS <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify _____ <input type="checkbox"/> 4. Non-Engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pretreatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components
SIZE OF PROPERTY 2+ <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES	DISPOSAL SYSTEM TO SERVE: <input type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: _____ <input checked="" type="checkbox"/> 2. Multiple Family Dwelling Unit, No. of Units: <u>3</u> <input type="checkbox"/> 3. Other _____ (specify) _____ Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)	

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other _____ CAPACITY <u>2500</u> GAL.	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other _____ SIZE <u>1900</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 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 <u>570</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities 1-1 BDRM APT @ 120 GPD 1-2 BDRM APT @ 180 GPD 1-3 BDRM APT @ 270 GPD TOTAL 570 GPD <input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA
SOIL DATA & DESIGN CLASS PROFILE <u>3</u> / <u>C</u> at Observation Hole # <u>TP-1</u> Depth <u>21</u> " of Most Limiting Soil Factor	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra-Large - 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE _____ gallons	LATITUDE AND LONGITUDE at center of disposal area Lat. <u>44</u> d <u>22</u> m <u>15</u> s Lon. <u>69</u> d <u>47</u> m <u>37</u> s if gps, state margin of error: <u>30</u> ft.

SITE EVALUATOR'S STATEMENT

I certify that on 5/8/13 (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).

William P Brown
Site Evaluator Signature

188
SE#

5/8/2013
Date

WILLIAM P BROWN
Site Evaluator Name Printed

293-2110
Telephone Number

E-mail Address

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.



Maine Center for Disease Control and Prevention
 An Office of the
 Department of Health and Human Services

Department of Health and Human Services
 Maine Center for Disease Control and Prevention
 286 Water Street
 # 11 State House Station
 Augusta, Maine 04333-0011
 Tel: (207) 287-5672
 Fax: (207) 287-4172; TTY: 1-800-606-0215

RECEIVED
 MAY 21 2013

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION Town of Augusta

Property Owner's Name: MANFRED MATHEWS Tel. No.: 441-2291

System's Location: 612 CIVIC CENTER DRIVE

Property Owner's Address: 612 CIVIC CENTER DRIVE, AUGUSTA, ME Zip Code: 04330

e-mail address: _____

The subsurface wastewater disposal system design for this property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)

1. REDUCE DISPOSAL FIELD SETBACK DISTANCE FROM PUBLIC WATER SUPPLY- DANNY D'S RESTAURANT WELL (151 FT)	SECTION OF RULE <u>TABLE 8A</u>
REDUCE SEPTIC TANK SETBACK FROM PUBLIC WATER SUPPLY (210 FT)	_____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.

SYSTEM CONSISTS OF 2 SEPTIC TANKS AND A 25 FT X 76 FT CRUSHED STONE DISPOSAL SYSTEM.
THE NEW SYSTEM IS IN THE SAME LOCATION AS THE EXISTING TRENCH SYSTEM

I, WILLIAM P BROWN S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available, enhances the potential of the site for subsurface wastewater disposal, and that the system should function properly.

William P Brown
 SIGNATURE OF SITE EVALUATOR

5/8/2013
 DATE

PROPERTY OWNER

I, MANFRED MATHEWS am the owner agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with 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.

Manfred Mathews
 SIGNATURE OF OWNER
 AGENT FOR THE OWNER

5/17/13
 DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all variance requests prior to rendering a decision. I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) approve the requested variance. I (will will not) issue a permit for the system's installation as proposed by the application.

LPI Signature

Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all variance requests prior to rendering a decision. I, Gay R. Fuller, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) approve the requested variance. I (will will not) issue a permit for the system's installation as proposed by the application.

Gay R. Fuller
LPI Signature

5/17/13
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.

Steve Johnson
SIGNATURE OF THE DEPARTMENT

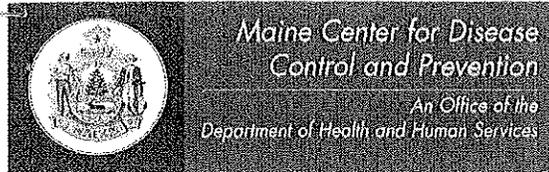
5/21/13
DATE

- Notes: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)
2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).

	CHARACTERISTICS	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Distance		
Additional Treatment		
TOTAL POINT ASSESSMENT:		

Minimum Points (Check One): Outside Shoreland Zone-50 Inside Shoreland Zone-65 Subdivision-65



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel. (207) 287-8016
Fax (207) 287-9058; TTY (800) 606-0215

Tel. (207) 287-5672

Subsurface Wastewater Unit

Fax (207) 287-4172

May 21, 2013



Town of Augusta
Garry Fuller
16 Cony Street
Augusta, Maine 04330

Subject: Approval, Replacement System Variance Request, Manfred Mathews Property, 612 civic Center Drive, Augusta, Maine, 03906. Mailing Address Of: Owner/Applicant: Same

Gary;

We have completed our review of an HHE-200 Form dated 05-08-2013 for the property 612 civic Center Drive, Augusta, Maine.

The variance requested which is not within the LPI's authority is from the disposal area to a Public water supply, Danny D's Restaurant of 151 feet which is no closer than the existing disposal field, in addition, Civic Center Drive is in between the disposal field and the Public Water Supply.

The variances requested that is within the LPI's authority is from the septic tank to a Public water supply, Danny D's Restaurant of 210 feet which is no closer than the existing septic tank, in addition, Civic Center Drive is in between the disposal field and the Public Water Supply.

The variance request has been submitted because topography and existing development limit the potential of the system location and the system design prepared by William Brown, SE # 188 on 05-08-2013 is otherwise found to be in compliance with the Maine Subsurface Wastewater Disposal Rules.

We approve the local requested variance with the following requirements:

1. A permit for system installation is to be obtained from the Local Plumbing Inspector in advance of the start of system construction.
2. The system is to be installed in accordance with the submitted and approved system design. Should alterations to the design be required at the time of construction, the site evaluator is to be notified prior to making any changes.
3. The contractor is to scarify the soils under the fill extensions to create a transitional zone more compatible with the disposal field area.

By accepting this approval and the associated plumbing permit, the owner agrees to comply fully with the conditions of approval and the Subsurface Wastewater Rules.

Because installation and owner maintenance has a significant effect on the working order of onsite sewage disposal systems, including their components, the Division makes no representation or guarantee as to the efficiency and/or operation of the system.

Should you or others have any questions, please feel free to contact me at 592-7376.

Sincerely,

A handwritten signature in cursive script, appearing to read "Brent Lawson".

Brent Lawson, State Plumbing Inspector
Subsurface Wastewater Program
Division of Environmental Health
e-mail: brent.lawson@maine.gov

/BML

xc: File

Manfred Mathews, Owner/Applicant.

William Brown, SE