

1-778

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

**PROPERTY ADDRESS**

Town Or Plantation: AUGUSTA

Street: SUMMER HAVEN RD.

Subdivision Lot #: \_\_\_\_\_

**PROPERTY OWNERS NAME**

Last: LACROIX First: GERMAINE

Applicant Name: \_\_\_\_\_

Mailing Address of Owner/Applicant (If Different): RFD #4 SUMMER HAVEN RD. AUGUSTA, ME. 04330

AUGUSTA 1-77 PERMIT # 731 TOWN COPY

Date Permit Issued: 5-27-86 FEE \$ 140.00 Double Fee Charged

[Signature] L.P.I. # 188A

Local Plumbing Inspector Signature

By Maine Subsurface Wastewater Disposal Rules

**Owner/Applicant Statement**

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

[Signature] Lacroix

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.

[Signature]

Local Plumbing Inspector Signature Date Approved 6-2-86

## PERMIT INFORMATION

**THIS APPLICATION IS FOR:**

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

**THIS APPLICATION REQUIRES:**

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE  
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE  
Attach Replacement System Variance Form
- Requiring Local Plumbing Inspector Approval
- Requires State and Local Plumbing Inspector Approval

**INSTALLATION IS:**

COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM (Includes Alternative Toilet)
- ENGINEERED (+ 2000 gpd)

**INDIVIDUALLY INSTALLED COMPONENTS:**

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

**IF REPLACEMENT SYSTEM:**

YEAR FAILING SYSTEM INSTALLED 1970

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: \_\_\_\_\_

**DISPOSAL SYSTEM TO SERVE:**

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER \_\_\_\_\_ SPECIFY \_\_\_\_\_

SIZE OF PROPERTY 21,000 ± #

ZONING Res.

**TYPE OF WATER SUPPLY**

DUG WELL

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

**TREATMENT TANK**

- SEPTIC:  Regular  Low Profile
- AEROBIC

SIZE: 1000 GALS.

**WATER CONSERVATION**

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET

SPECIFY: \_\_\_\_\_

**PUMPING**

- NOT REQUIRED
- MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: \_\_\_\_\_ GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

2 BEDROOMS

MIN. PER CODE:

180 G.P.D. (GALLONS/DAY)

MAY 27 1986 RECEIVED DESIGN FLOW

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**

PROFILE 3 CONDITION C

DEPTH TO LIMITING FACTOR: 28

**SIZE RATINGS USED FOR DESIGN PURPOSES**

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRA LARGE

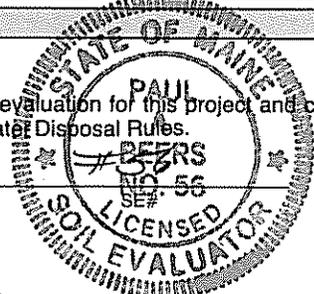
**DISPOSAL AREA TYPE/SIZE**

- BED 560 Sq. Ft.
- CHAMBER \_\_\_\_\_ Sq. Ft.
- TRENCH \_\_\_\_\_ Linear Ft.
- OTHER: \_\_\_\_\_

## SITE EVALUATOR STATEMENT

On 5/20/86 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

[Signature]  
Site Evaluator Signature



5/20/86  
Date

\* Local Plumbing Inspector Signature if a Local Site Evaluation Waiver under a Local Option

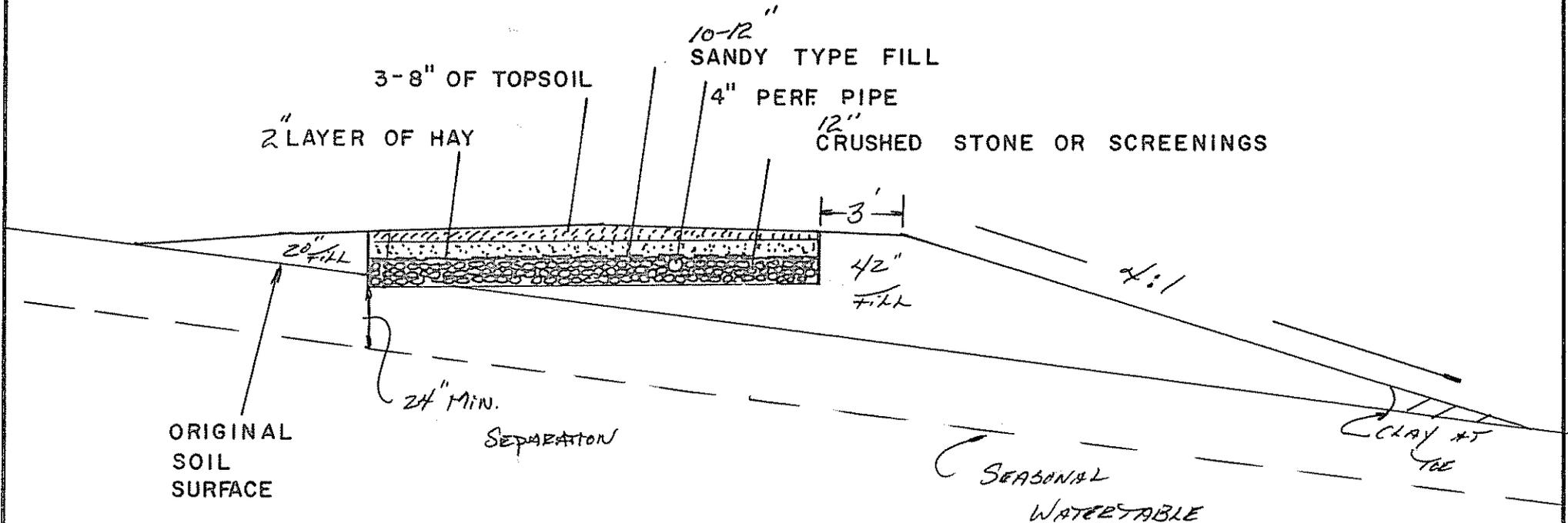
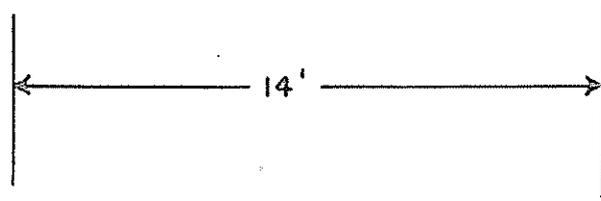
6-2-86

I spoke with Russ Martin today about this system.  
He states that the system is on the border line but  
can be accepted that Martin should watch to  
make sure the stone is  $3\frac{1}{4}$ " to 3" even size.

George Lewis Jr.







% SLOPE 13%

DIRECTION OF SLOPE →

|   |                          |                                  |
|---|--------------------------|----------------------------------|
| <b>PAUL A. BEERS<br/>SOILS CONSULTANT</b> |                          |                                  |
| DATE <u>5/20/80</u>                       | DRAWN BY <u>P. BEERS</u> | APPROVED BY                      |
| SCALE <u>1" = 5'</u>                      | REVISED                  |                                  |
| <b>CROSS SECTION = BED SYSTEM</b>         |                          |                                  |
| NAME <u>GERMAINE LACROIX</u>              |                          | DRAWING NUMBER                   |
| TOWN <u>AVGUSTA</u>                       |                          | ATTACHMENT<br>TO: <u>H4E-200</u> |

# Replacement System Variance Request

## THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an Application for the proposed replacement system which is in noncompliance with the Rules. The LPI shall review the Replacement System Variance Request and Application and may approve the Request if all of the following requirements with LPI approval limitations can be met.

1. The replacement system is correcting a malfunction or an unlicensed wastewater discharge system.
2. A replacement system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system does not conflict with Seasonal Conversion Permit (30 MRSA § 3223) or with Mandatory Shoreland Zoning (12 MRSA § 4811).
6. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
7. Soil and setback distances are within approval authority of the LPI.

## GENERAL INFORMATION

Town of AUGUSTA

Permit No.

Date Permit Issued  / /  
month/day/year

Property Owner's Name: GERMAINE LACROIX Tel. No. \_\_\_\_\_

System's Location: TRD # 4 SUMMER HAVEN EB.  
Street

AUGUSTA Town MAINE 04330 Zip

Property Owner's Address:  
(if different from above) \_\_\_\_\_  
Street

\_\_\_\_\_ Town State \_\_\_\_\_ Zip

## Specific Instructions to the:

**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, then complete the Replacement Variance Request with your signature on reverse side of form.

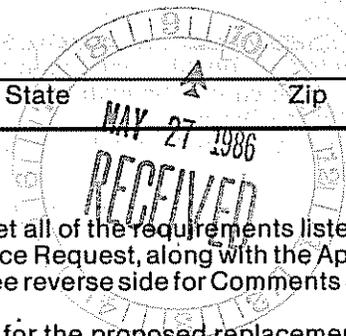
**Property Owner:** It has been determined by the Site Evaluator that a variance to the Rules is required for the proposed replacement system. This variance request is due to physical limitations of the site and/or soil conditions. Both the Site Evaluator and the LPI have considered the site/soil restrictions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

## 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



| Variance Category                     | Variance Requested        | Limit of LPI's Approval Authority |                  | Variance Requested to: |               |
|---------------------------------------|---------------------------|-----------------------------------|------------------|------------------------|---------------|
| Soils                                 |                           |                                   |                  |                        |               |
| Soil Profile                          | Ground Water Table        | to 6"                             |                  | inches                 |               |
| Soil Condition                        | Restrictive Layer         | to 6"                             |                  | inches                 |               |
| from HHE-200                          | Bedrock                   | to 10"                            |                  | inches                 |               |
| <b>Setback Distances</b><br>(in feet) | From:                     | Treatment Tank                    | Disposal Area    | Treatment Tank         | Disposal Area |
| Potable Water Supplies                | 1. Well:>2000 gal/day     | 100                               | 300              |                        |               |
|                                       | 2. Well:<2000 gal/day     |                                   |                  |                        |               |
|                                       | a. Neighbor's             | 100 <sup>Ⓐ</sup>                  | 100 <sup>Ⓐ</sup> |                        |               |
|                                       | b. Property Owner's       | 50'                               | 60'              | 80'                    | 92'           |
|                                       | 3. Water Supply Line      | 10'                               | 10'              |                        |               |
| Waterbodies                           | 1. Perennial              | 60' <sup>Ⓒ</sup>                  | 60'              |                        |               |
|                                       | 2. Intermittent           | 25'                               | 25'              |                        |               |
|                                       | 3. Manmade drainage ditch | 15'                               | 15'              |                        |               |
| Downhill Slope                        | Greater than 3:1 (33%)    | 5'                                | 10' <sup>Ⓒ</sup> |                        |               |
| Buildings                             | 1. With basement          | 8'                                | 15'              |                        |               |
|                                       | 2. Without basement       | 8'                                | 10'              |                        |               |
| Property Line                         |                           | 5'                                | 5' <sup>Ⓒ</sup>  |                        |               |

Other Specify:

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**Footnotes:**

- A variance to reduce the 100 foot setback distance to a minimum of 80 feet may be granted only with the neighbor's written permission.
- Sufficient distance shall be maintained to assure that the toe of the fill does not extend beyond the 3:1 slope or property line.
- May be reduced to 25' provided treatment tank is tested to be water tight in the presence of the Local Plumbing Inspector.

Paul C. Beard  
Site Evaluator's Signature

5/20/86  
Date

**LPI Statement**

I, George Soucy Jr., LPI for Town of Augusta have conducted an on-site inspection for the proposed replacement system and have determined, to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

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

Comments: \_\_\_\_\_

George H. Soucy Jr.  
LPI's Signature

5-27-86  
Date

The **Owner** shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached Application, I understand that the proposed system is not in **total** compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

Guillaume La Croix  
Property Owner's Signature

\_\_\_\_\_  
Date