

REPLACEMENT VARIANCE FORM—FOR THE TOWN/CITY OF Augusta

THE PURPOSE OF THIS AGREEMENT IS TO ASSIST INDIVIDUALS IN REPLACING EXISTING SUBSURFACE WASTEWATER SYSTEMS OR CORRECTING EXISTING DIRECT OVERBOARD DISCHARGE SYSTEMS.

TOWN/CITY CODE AUGUSTA LPI NUMBER 360 DATE PERMIT ISSUED 9 21 79 EVALUATOR NUMBER 79
11070 MONTH DAY YEAR PERMIT NUMBER 13966 ER

ADDRESS OF SYSTEM'S LOCATION GAYNE ST Augusta Me 04330
 ST/LOT NUMBER STREET, ROAD/SUBDIVISION ZIP CODE
Chris Duffy
 NAME OF OWNER

Owner Proposes	1. Repair 2. Expand 3. Replace Malfunction 4. Replace Overboard Discharge	CODE	<u>3</u>
	1. Seasonal 2. Year-Round..... Date old system was installed _____ Soils Category _____		<u>2</u>
	Size of lot in square footage		<u>40000</u> SQ. FT.
Section 4.4 Soils	1. Bedrock 2. Impervious Layer	CODE IN	<input type="checkbox"/> <input type="checkbox"/>
Section 4.7 Distances Disposal Area From	1. Waterbody [A. Tidal Water B. Swamp C. Bog D. Marsh E. Lake F. Pond G. River H. Stream I. Similar Watercourse]	CODE FEET	<input type="checkbox"/> <input type="checkbox"/>
	2. Owner's Well 4. Intermittent Waterbody 6. Slope >33 1/3% 3. Building 5. Property Line 7. Drainage Ditch.....	# LET. CODE FEET	<u>3</u> <u>15</u>
	If (1. and/or 2.) is coded, nothing closer than 60 feet is to be allowed. If (3.) is coded, nothing closer than 15 feet in the case of a full basement and 10 feet in the case of a slab is to be allowed.		<u>2</u> <u>75</u>
	If (4.) is coded, nothing closer than 25 feet is to be allowed. If (5.) is coded, nothing closer than 5 feet is to be allowed. If (6.) is coded, nothing closer than 25 feet is to be allowed. If (7.) is coded, nothing closer than 15 feet is to be allowed.		<input type="checkbox"/> <input type="checkbox"/>
Sec. 4.7 Distances —Septic Tank From	1. Owner's Well	CODE FEET	<input type="checkbox"/> <input type="checkbox"/>
Section 7.6 Holding Tank for Seasonal Dwellings	1. Requesting permission to install a 1500 gallon holding tank..... Holding tanks shall have float alarms. Flow reducing valves for showers and sinks, and low volume toilets must also be installed.	CODE	<input type="checkbox"/>
Section 9.3 System Size	1. Reduction in size of disposal area	CODE SQUARE FEET	<input type="checkbox"/> <input type="checkbox"/>
Section 9.3 (b) Fill Extension	1. Increase of the 4:1 slope extension to 3:1.....	CODE	<input type="checkbox"/>
Section 9.3 (c) Bed Width	1. Bed Width	CODE FEET	<input type="checkbox"/> <input type="checkbox"/>

STATEMENTS

STATEMENT OF OWNER

Christopher D. Duffly, the undersigned, am the owner of the property indicated in the application and state that the property is not for sale in the foreseeable future. I understand that the installation explained above and illustrated on the HHE-200 FORM accompanying this request is not in total compliance with the Maine State Plumbing Code. This system is to replace an existing direct discharge or subsurface wastewater disposal system. Should the proposed replacement system malfunction or create any nuisance or environmental problems or affect my water supply, I release all concerned with this waiver provided they have performed their duties in a reasonable and proper manner. Further, should a malfunction occur, I will take every step possible to correct it.

Christopher D. Duffly 9-24-79
Signature of Owner Date

STATEMENT OF SOIL EVALUATOR

I, Gerald C. Powell, the undersigned certify that the information I have submitted on the HHE-200 FORM accurately represents the conditions that exist on the applicant's property. A waiver to the Maine State Plumbing Code is necessary since no system can be installed which will completely satisfy all Code provisions.

Gerald C. Powell 6-21-79
Signature of Soil Evaluator Date

Municipality's Findings

The proposed system (~~does~~) (does not) conflict with any municipal or shoreland zoning ordinances, and has been shown to the Code enforcement Officer.

CONCLUSIONS

I, Richard P. Baker, the undersigned, have visited the above property and find that it is not possible to conform to certain provisions of the Plumbing Code. The waiver request submitted by the applicant is the best alternative for a replacement subsurface wastewater disposal system on this property.

Based upon my conclusions, I permit the installation of the sewage disposal system as proposed and shown on the HHE-200 FORM.

Richard P. Baker 9-24-78
Signature of Local Plumbing Inspector Date

WAIVER CONDITIONS

- A. **APPLICABILITY.** These variances relate to existing single family dwellings only. Any variances requested on the reverse side of this application must maintain as near as possible the requirements of the Part II, Plumbing Code on "Subsurface Wastewater Disposal Regulations". For example, if a disposal area can be 90 feet from the owner's well then the 90 feet is to be allowed; not the bare minimum of 60 feet. If the restriction is such that it is less than the requirements here given, then a state variance is required. Any variances or waiver requests not covered in this agreement involving other types of structures or other conditions require submission to the Division for review. All local ordinances must be complied with.
- B. **SOIL EVALUATOR'S RESPONSIBILITIES.** The property shall be visited by a qualified soil evaluator who shall investigate the site and complete the HHE-200 FORM recommending a wastewater disposal system which can best conform with the requirements of the Code. The investigator shall inform his client that a waiver is required and indicate so on the HHE-200 FORM. He should then refer his client to the local Plumbing Inspector.
- C. **LOCAL PLUMBING INSPECTOR'S RESPONSIBILITIES.** The Local Plumbing Inspector shall review the soil evaluation HHE-200 FORM and complete the waiver request form attached. Once it is determined that the waiver request is the most practical approach to correcting the applicant's problem, the Local Plumbing Inspector shall see that the statement portions of the waiver form are completed by the homeowner and the soil evaluator before giving final approval.
- D. **RECORDS.** A copy of the waiver request forms and the associated HHE-200 FORMS shall be provided to the homeowner, the soil evaluator, the L.P.I. for the municipal files, and other copies determined to be necessary, with the original copy forwarded to the Division with a copy of the plumbing permit.
- E. **LOG OF WAIVERS ISSUED.** The plumbing inspector shall maintain a chronological log of all waivers granted. The total of the waivers granted for each calendar year shall be noted in the annual report which is submitted to the town and to the Division.
- F. **SECTION OF THE CODE WHICH CAN BE WAIVED.** The authority of issuing waivers at the municipal level is restricted to those sections specifically identified on the check-off portion of the waiver request form.
- G. **RESCINDING OF WAIVER RIGHTS.** If the Division, in its review of these waivers, finds that a local plumbing inspector or soil evaluator exceeds the limits and limitations spelled out in this agreement, the Division will remove this privilege from that individual.
- H. **HOLDING TANKS.** The Local Plumbing Inspector is authorized to permit the use of holding tanks in replacement situations (not to include privies) where this is the most practical alternative to serve an EXISTING SEASONAL, SINGLE FAMILY DWELLING. A minimum of 1500 gallon holding tank, along with associated alarms, may be permitted by the local plumbing inspector.

This Application Is For: New System Conversion Permit Experimental System Replacement Of Entire System Disposal Area Only

An Application For Subsurface Wastewater Disposal Permit This Is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Town: Augusta Street, Road, Etc.: GAGNE ST Plumbing Permit No.: 23 966 Date Of Plumbing Permit: 9-24-79

Owner Of Property: Chais Duffy Tel. No.: 622-0086 Name Of Applicant Owner's Agent: _____ Tel. No.: _____

Street: GAGNE ST

Town: Augusta State: MAINE Zip Code: 04330

Owner's Signature: H. Christopher Duffy Date: 9-24-79 Applicants Signature: _____ Date: _____

Size Of Lot: 1 ± Sq. Feet Acres Yes No No

The Water Supply For This Property Is: Dug Well, depth _____; Drilled Well, depth _____; Spring, depth _____; Surface water Body Course— with disinfection, without disinfection. Public Utility, name _____

SITE INVESTIGATION Show Location Of Pits on Site Plan on Page 2

Thickness and Description of strata encountered	Soil Profile No.	Soil Profile No.	Soil Profile No.	Soil Profile No.
	<input type="checkbox"/> Pit <input type="checkbox"/> Boring			
Organic Strata	Organic Strata	Organic Strata	Organic Strata	Organic Strata
1st Strata	1st Strata	1st Strata	1st Strata	1st Strata
Inches <u>28" M.L.</u>	Inches	Inches	Inches	Inches
2nd Strata	2nd Strata	2nd Strata	2nd Strata	2nd Strata
Inches <u>OLIVE BROWN SAND 28 SM</u>	Inches	Inches	Inches	Inches
3rd Strata	3rd Strata	3rd Strata	3rd Strata	3rd Strata
Inches	Inches	Inches	Inches	Inches
4th Strata	4th Strata	4th Strata	4th Strata	4th Strata
Inches	Inches	Inches	Inches	Inches
Total Depth of Observation Hole	Total Depth of Observation Hole	Total Depth of Observation Hole	Total Depth of Observation Hole	Total Depth of Observation Hole
Inches <u>56</u>	Inches	Inches	Inches	Inches
Max. Seasonal Water Table Mottling	Max. Seasonal Water Table Mottling	Max. Seasonal Water Table Mottling	Max. Seasonal Water Table Mottling	Max. Seasonal Water Table Mottling
<input checked="" type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident
Inches	Inches	Inches	Inches	Inches
Impervious Layer Clay, Etc.	Impervious Layer Clay, Etc.	Impervious Layer Clay, Etc.	Impervious Layer Clay, Etc.	Impervious Layer Clay, Etc.
<input checked="" type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident
Inches	Inches	Inches	Inches	Inches
Bedrock	Bedrock	Bedrock	Bedrock	Bedrock
<input checked="" type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident	<input type="radio"/> None Evident
Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock	Type of Bedrock
Surface Slope <u>0</u> %	Surface Slope %	Surface Slope %	Surface Slope %	Surface Slope %
Soil Group <u>6</u> Soil Condition <u>B</u>	Soil Group Soil Condition			
Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II	Per Table 9-1 Code II

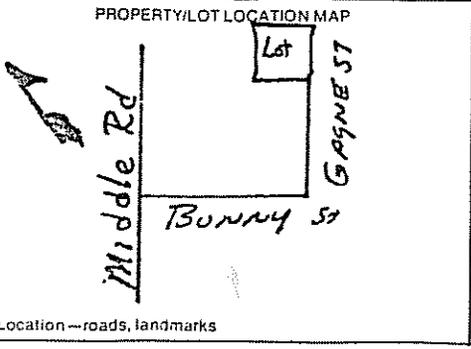
On 9-28-77 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: Gerald C Poellin Site Evaluator License Number: 79

Date Signed: 6-21-79

DISPOSAL SYSTEM PROPOSED Show Location of System and Details on Disposal Plan on Page 2

SYSTEM: <input checked="" type="radio"/> Combined System <input type="radio"/> Separated System If separated system—type of human waste disposal system to be used: <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Incinerator Toilet	TREATMENT TANK <input type="radio"/> Aerobic Tank <input type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Size in Gallons _____ Gal. Number of Bedrooms <u>3</u>	SUBSURFACE ABSORPTION AREA/TYPE <input type="radio"/> Bed System No. of Beds <u>1</u> Length <u>44</u> ft Width <u>20</u> ft <input type="radio"/> Chamber System Number _____ <input type="radio"/> Type A <input type="radio"/> Single File <input type="radio"/> Type B <input type="radio"/> Cluster <input type="radio"/> Special System Length _____ ft Width _____ ft <input type="radio"/> Laundry System Type A _____ No. of Chambers: Type B _____	SIZE <input checked="" type="radio"/> Small <input type="radio"/> Medium <input checked="" type="radio"/> Med.-Large <input type="radio"/> Large <input type="radio"/> Extra-Large Design Flow <u>264</u> GPD	SITE MODIFICATION Fill will be: <u>0</u> in. uphill <u>0</u> in. downhill
				DETAILS <input type="radio"/> A Distribution Box is required Pumping is— <input type="radio"/> required <input checked="" type="radio"/> is not required The dose will be _____ Gallons
DISTANCES <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells, springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs. <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day, and any public water supplies.				



WAIVER State Variance Required Replacement Variance Required None Required

FOR THE USE OF LPI ONLY

Denial: Application is denied for the following reasons; portions of the Code II are cited. Form is incomplete (____ pg.) as to General info., Site Investigation, System Proposed, Site Plan, Disposal System Plan, Cross-Section, Statement. See section 4.1

Site Investigation indicates site is unsuitable for disposal system. Unsuitable for system proposed.

System Proposed does not conform to Code _____

Site Investigation indicates site modifications are necessary.

Acceptance: Application for permit is approved with condition specified, comply with Section 4.7 CODES
 without condition.

Signed LPI: Richard B. Baber Date: 9-21-79 HHE-200 1/78

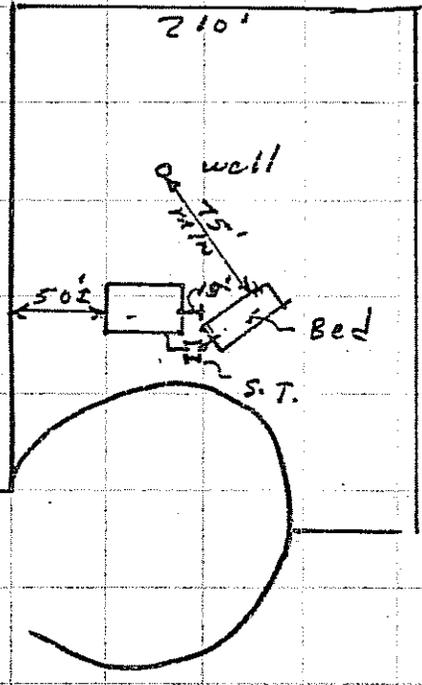
APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Town: **AUGUSTA** Street, Road, etc.: ~~CHERRY ST~~ **GAGNE ST** Owner of Property: **Chris Duffy**
 If on water body, give name: **GAGNE ST** Scale 1" = _____ ft.

Site Plan

Called North

Note
 Completely remove old
 BED BEFORE INSTALLING
 NEW BED



GAGNE ST

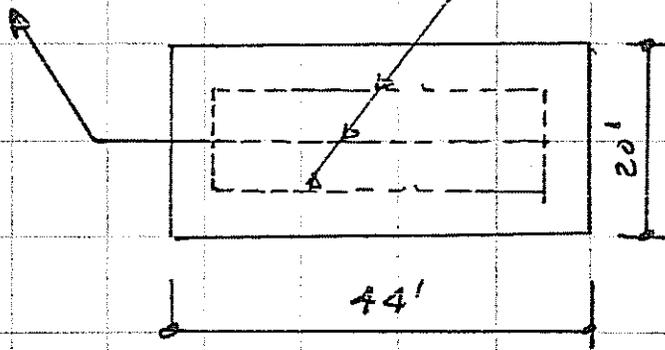
● Designates Elevation Reference Point ○ Designates Test Pit

Private Sewage Disposal Plan

Scale 1" = 20' or _____

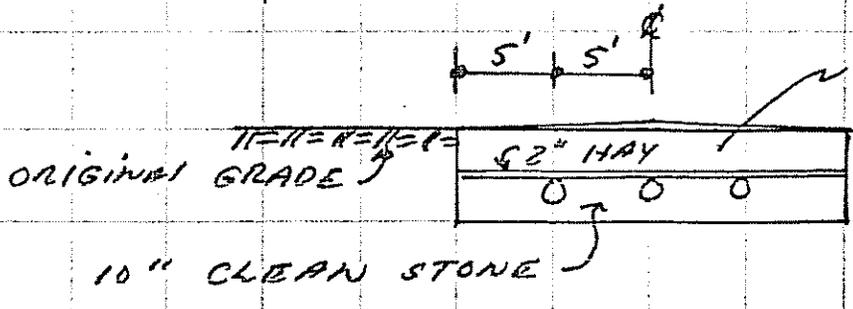
To SEPTIC TANK

4" PERF PIPE



Subsurface Absorption Area Cross-section

Scale: Vertical—1" = 4' or _____
 Horizontal—1" = 20' or 10'



Site Evaluators Signature: **Gerald Coulin** Date: **6-21-79** License Number: **79**

Statement: (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

Signature Required: _____
 Date: **9-24-79**
 Applicant: _____
 Owner: **Christopher Duffy**