

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

### PROPERTY LOCATION

Own or Plantation: AUGUSTA

Street Subdivision Lot: WILSON ST.

### PROPERTY OWNER'S NAME

Last: BERLAND First: BRIAN

Applicant's Name: SAME

Mailing Address of Owner: BOX 7630 WILSON ST. AUGUSTA, ME. 04330

**Caution: Permit Required**

The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Daytime Tel. \* \_\_\_\_\_

Municipal Tax Map \* \_\_\_\_\_ Lot \* \_\_\_\_\_

### 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

Brian Berland 5/28/98  
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

[Signature] 9-1-98  
Local Plumbing Inspector Signature Date Approved

### PERMIT INFORMATION

#### TYPE OF APPLICATION:

- First Time System
- Replacement System  
Type Replaced BE0  
Year Installed ?
- Expanded System  
 a. one time exempted  
 b. non exempted
- Experimental System
- Seasonal Conversion

#### THIS APPLICATION REQUIRES:

- No Rule Variance
- First Time System Variance  
 a. Local Plumbing Inspector approval  
 b. State & Local Plumbing Inspector approval
- Replacement System Variance  
 a. Local Plumbing Inspector approval  
 b. State & Local Plumbing Inspector approval
- Minimum Lot Size Variance
- Seasonal Conversion Approval

#### DISPOSAL SYSTEM COMPONENT(S)

- Non-Engineered System
- Primitive System (graywater & all toilet)
- Alternative Toilet \_\_\_\_\_
- 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)
- Pretreatment

#### SIZE OF PROPERTY

5 AC.

#### DISPOSAL SYSTEM TO SERVE:

- Single Family Dwelling Unit
- Multiple Family Dwelling: Number of Units \_\_\_\_\_
- Other \_\_\_\_\_

#### SHORELAND ZONING

Yes  No

#### TYPE OF WATER SUPPLY

PRIVATE

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

#### TREATMENT TANK

- Concrete  
 a. Regular  
 b. Low Profile
  - Plastic EXISTING
  - Other \_\_\_\_\_
- SIZE \_\_\_\_\_ Gallons

#### DISPOSAL AREA TYPE / SIZE

- Bed 1200 Sq. Ft.
- Proprietary Device \_\_\_\_\_ Sq. Ft.  
 Cluster  Linear  
 Regular  H-20
- Trench
- 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)

4 BEDROOM

#### PROFILE & DESIGN CLASS

PROFILE 7 DESIGN C

DEPTH TO MOST LIMITING FACTOR 24"

#### DISPOSAL AREA SIZING

- Small - 2.00
- Medium - 2.60
- Medium-Large - 3.30
- Large - 4.10
- Extra-Large - 5.20

#### PUMPING

- Not required
- May be required
- Required

EXISTING  
DOSE \_\_\_\_\_ Gallons

DESIGN FLOW: 360 GPD.  
(Gallons/Day)

### SITE EVALUATOR'S STATEMENT

On 5/15/98 (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

256

SE \*

5/20/98  
Date

JOHN PHILBAICK

Site Evaluator Name Printed

547-3732

Telephone

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

05178433

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

AUGUSTA

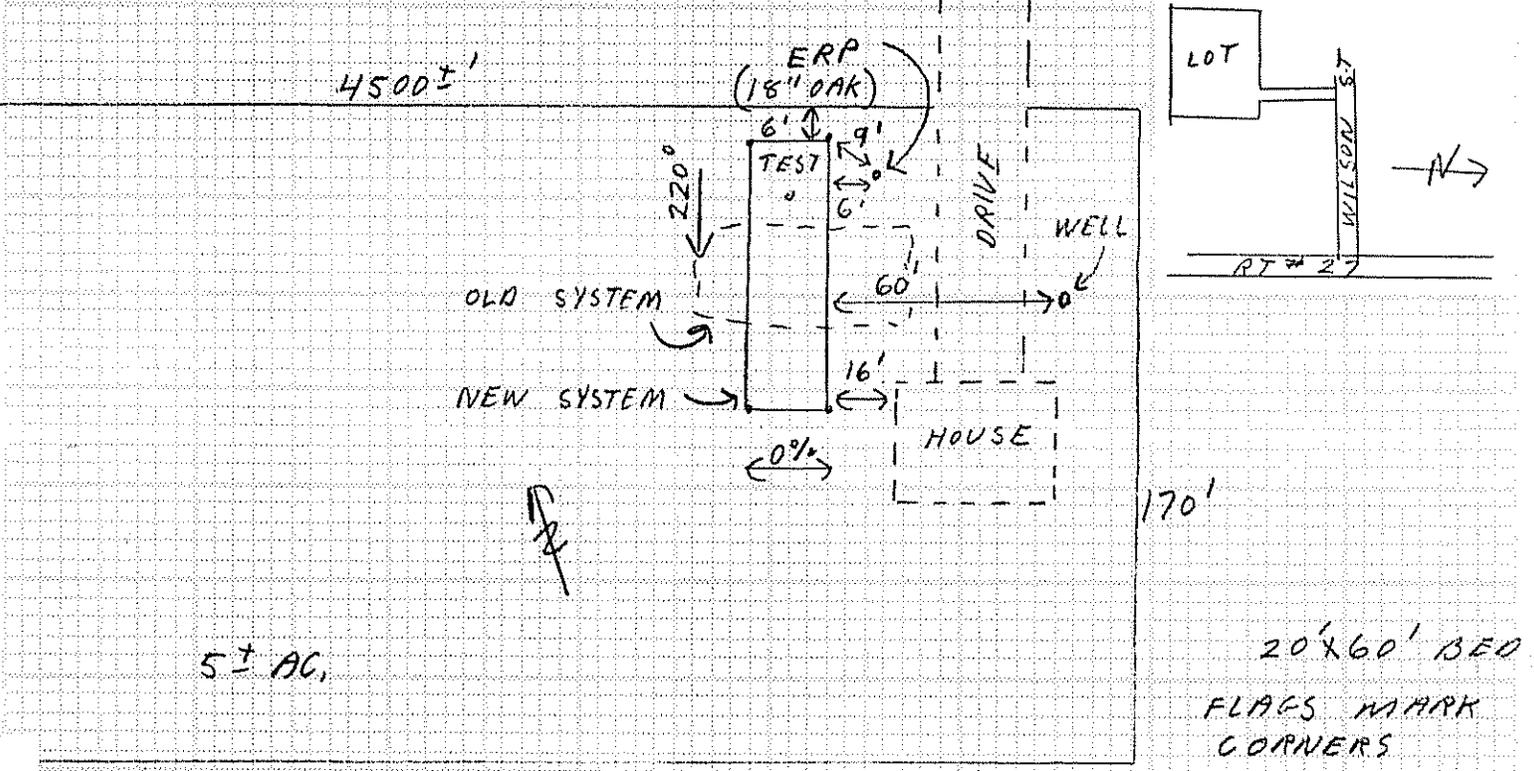
WILSON ST.

BRIAN BEALAND

## SITE PLAN

Scale: 1" = 50 Ft.  
or as shown

SITE LOCATION PLAN  
(Attach Map from Maine Atlas  
for New System Variance)



## SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole 1  Test Pit  Boring  
" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0	SANDY LOAM	FRIABLE	TAN	NONE
6				
10	FINE LOAMY SAND		YELLOW BR.	
15				
20				
30	SILTY CLAY	FIRM	GRAY	COMMON DISTINCT
40				
50				

Soil Classification: 7C Profile Condition: 0% Slope: 0% Limiting Factor: 24"  Ground Water  Restr. Layer  Bedrock

Observation Hole \_\_\_\_\_  Test Pit  Boring  
" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Classification \_\_\_\_\_ Slope \_\_\_\_\_ Limiting Factor \_\_\_\_\_  Ground Water  Restr. Layer  Bedrock

*[Signature]*  
Site Evaluator Signature

256  
SE#

5/20/98  
Date

Approved for use as  
HHE 200 by Division of  
Health Engineering 9/87

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

05067453

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

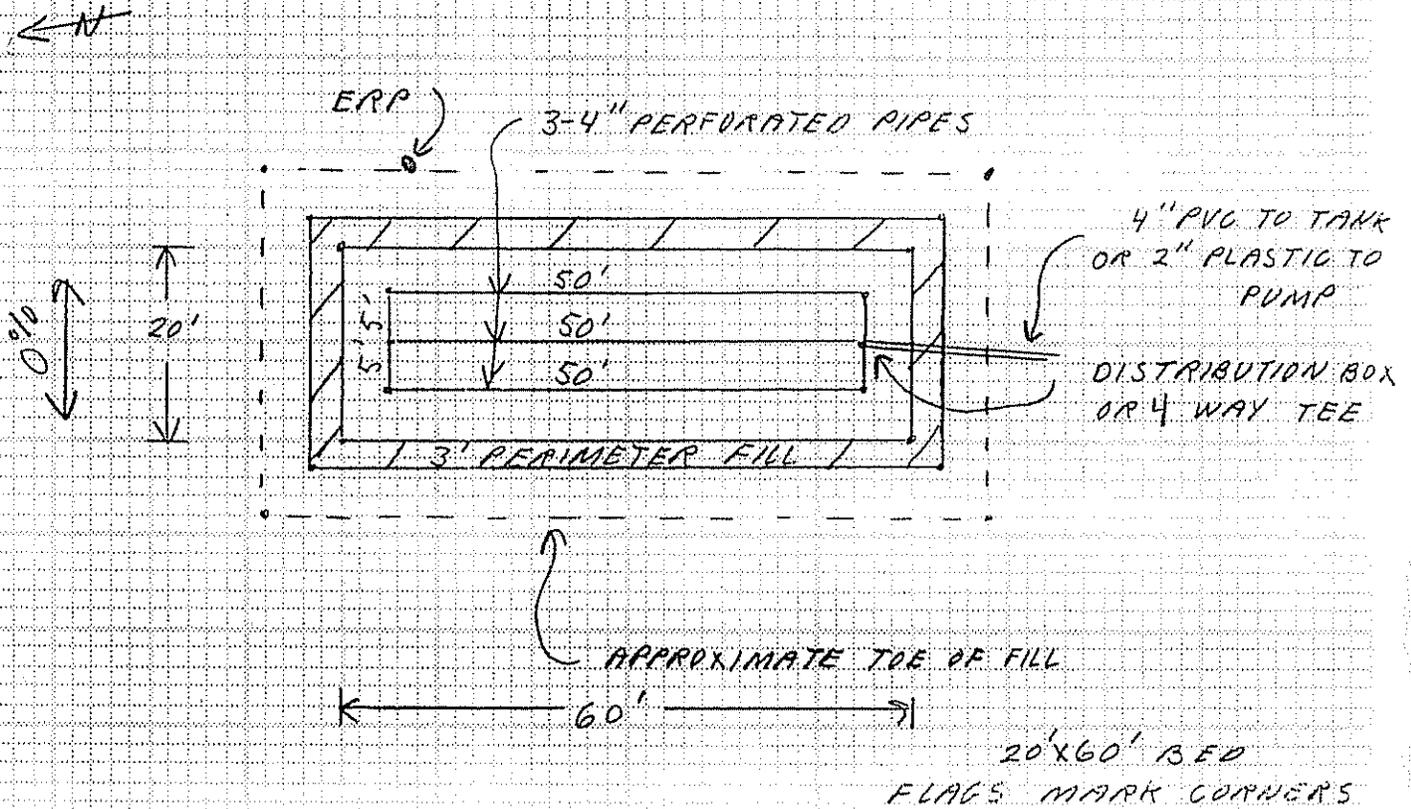
AUGUSTA

WILSON ST.

BRIAN BEALAND

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 Ft.  
or as shown



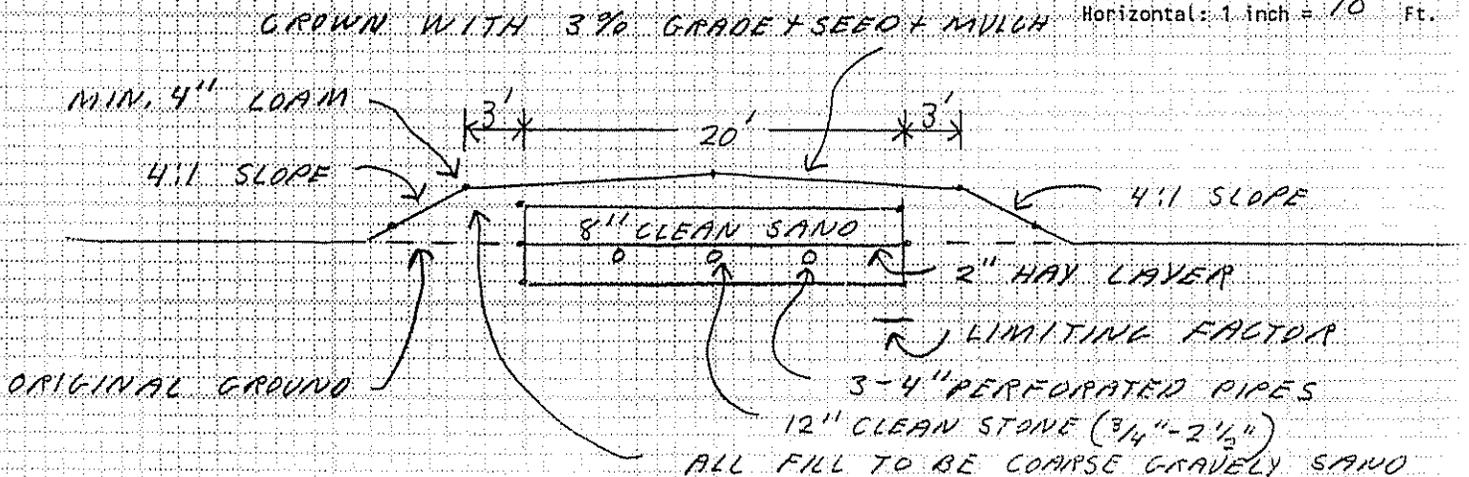
**FILL REQUIREMENTS**  
 Depth of Fill (Upslope) 12"  
 Depth of Fill (Downslope) 12"

**CONSTRUCTION ELEVATION**  
 Reference Elevation is 12"  
 Bottom of Disposal Area 12"  
 Top of Distribution Lines or Chambers

**ELEVATION REFERENCE POINT**  
0" ERP IS IN 18" OAK 8'  
-41" EAST OF SYSTEM, 20" ABOVE  
-30" GROUND

### DISPOSAL AREA CROSS SECTION

Scale:  
 Vertical: 1 inch = 5 Ft.  
 Horizontal: 1 inch = 10 Ft.



*[Signature]*  
 Site Evaluator Signature

256  
SE#

5/20/98  
Date

Approved for use as  
 HHE 200 by Division of  
 Health Engineering 9/87

# 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 does not comply 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 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 from the rules.
2. A 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 is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

## GENERAL INFORMATION

Town of AUGUSTA

Permit No. \_\_\_\_\_ E

Date Permit Issued \_\_\_\_\_  
MONTH/DAY/YEAR

Property Owner's Name: BRIAN BEALAND

Tel. No. \_\_\_\_\_

System's Location: 7630 WILSON ST

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, they 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.

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.

Brian Bealand

PROPERTY OWNER'S SIGNATURE

5/28/98

DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
SOILS Soil Profile <u>7</u> Soil Condition <u>C</u> from HHE-200	Ground Water Table	to 6"		inches	
	Restrictive Layer	to 6"		inches	
	Bedrock	to 10"		inches	
SETBACK DISTANCES (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	50'	60'		
	b. Property Owner's	25'	50'		60'
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Perennial	50'	60'		
	2. Intermittent	15'	20'		
	3. Manmade drainage ditch	10'	15'		
Downhill Slope	Greater than 3:1 (33%)	5"	10"		
Buildings	1. With Basement	5'	10'		16'
	2. Without Basement	5'	10'		
Property Line		4'	5'		6'

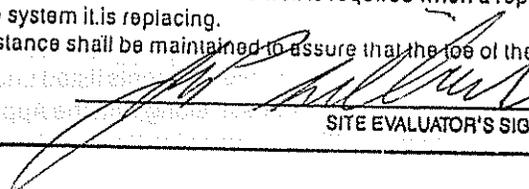
**OTHER**

1. Fill extension Grade—to 3:1

2. \_\_\_\_\_  
 3. \_\_\_\_\_

**Footnotes:**

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but 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.

  
 SITE EVALUATOR'S SIGNATURE

5/20/98  
 DATE

**LPI STATEMENT**

I, \_\_\_\_\_, LPI for the Town of \_\_\_\_\_ 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 Wastewater Disposal 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):

a. (  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, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

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

\_\_\_\_\_  
 LPI'S SIGNATURE

\_\_\_\_\_  
 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.

626-2816 called 6-24-97 9:50

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION		AUGUSTA 3723 TOWN COPY	
Town or station	AUGUSTA	Date Permit Issued	6/24/97
Street	WILSON STREET	Local Plumbing Inspector Signature	<i>[Signature]</i>
Subdivision Lot #		FEE	\$ 8.50
PROPERTY OWNERS NAME		L.P.I. # 850	
Last: BELAND	First: BRIAN	Municipal Tax Map # 1 Page # 203	
Mailing Address of Owner	BOX 7630 WILSON ST AUGUSTA, ME 04330	<b>Owner Statement</b> 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. <i>[Signature]</i> 6/24/97 Signature of Owner/Applicant Date	
Daytime Tel. #	626-2816	<b>Caution: Inspection Required</b> 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		
<b>THIS APPLICATION IS FOR:</b> 1. <input type="checkbox"/> First Time System 2. <input type="checkbox"/> Multi-User System 3. <input type="checkbox"/> Replacement System 4. <input checked="" type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input checked="" type="checkbox"/> Non-exempted 5. <input type="checkbox"/> Experimental System <input type="checkbox"/> Seasonal Conversion	<b>THIS APPLICATION REQUIRES:</b> 1. <input checked="" type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance (Municipal) 3. <input type="checkbox"/> First Time System Variance (State) 4. <input type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 5. <input type="checkbox"/> Minimum Lot Size Variance 6. <input type="checkbox"/> Seasonal Conversion Variance	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 1. <input checked="" type="checkbox"/> Non-Engineered System 2. <input type="checkbox"/> Primitive System 3. <input type="checkbox"/> Alternative Toilet Specify <u>N/A</u> 4. <input type="checkbox"/> Non-Engineered Treatment Tank 5. <input type="checkbox"/> Holding Tank <u>N/A</u> Gallons 6. <input type="checkbox"/> Non-Engineered Disposal Area (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Engineered System (+2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Area (only)
<b>SIZE OF PROPERTY</b> 5+/- ACRE	<b>DISPOSAL SYSTEM TO SERVE:</b> 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit 2. <input type="checkbox"/> Multiple Family Dwelling Unit Number of Units _____ 3. <input checked="" type="checkbox"/> Other <u>DAYCARE</u> SPECIFY _____	<b>TYPE OF WATER SUPPLY</b> DRILLED WELL
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
<b>TREATMENT TANK</b> 1. <input type="checkbox"/> Concrete <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic SIZE <u>EXISTING 1000</u> NEW <u>1000</u> Gallons	<b>DISPOSAL AREA TYPE/SIZE</b> 1. <input type="checkbox"/> Stone Bed <u>N/A</u> Sq. Ft. 2. <input checked="" type="checkbox"/> Proprietary Device <u>2000</u> Sq. Ft. <input type="checkbox"/> Clustered <input checked="" type="checkbox"/> Linear <input checked="" type="checkbox"/> Regular <input type="checkbox"/> H-20 3. <input type="checkbox"/> Trench <u>N/A</u> Lin. Ft. 4. <input type="checkbox"/> Other <u>N/A</u>	<b>GARBAGE DISPOSAL UNIT</b> 1. <input type="checkbox"/> No 2. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Multi-compartment tank <input checked="" type="checkbox"/> Tank in series <input type="checkbox"/> Increase in tank capacity <input checked="" type="checkbox"/> Filter on tank outlet	<b>CRITERIA USED FOR DESIGN FLOW</b> (Show Calculations) EXISTING 3 BEDROOM HOUSE @ 270GPD + PROPOSED DAYCARE 12 CHILDREN W/ MEALS @ 15GPD/CHILD 2 ADULTS @ 15GPD/ADULT DESIGN FLOW: 480 (Gallons/Day)
<b>PROFILE &amp; DESIGN CLASS</b> PROFILE <u>8</u> DESIGN <u>C/D</u> DEPTH TO MOST LIMITING FACTOR <u>12-15"</u>	<b>DISPOSAL AREA SIZING</b> 1. <input type="checkbox"/> Small 2.0 2. <input type="checkbox"/> Medium 2.60 3. <input type="checkbox"/> Medium-Large 3.30 4. <input checked="" type="checkbox"/> Large 4.10 5. <input type="checkbox"/> Extra-Large 5.00	<b>PUMPING</b> 1. <input checked="" type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input type="checkbox"/> Required DOSE <u>N/A</u> Gallons	

## SITE EVALUATOR'S STATEMENT

On 5 / 27 / 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.

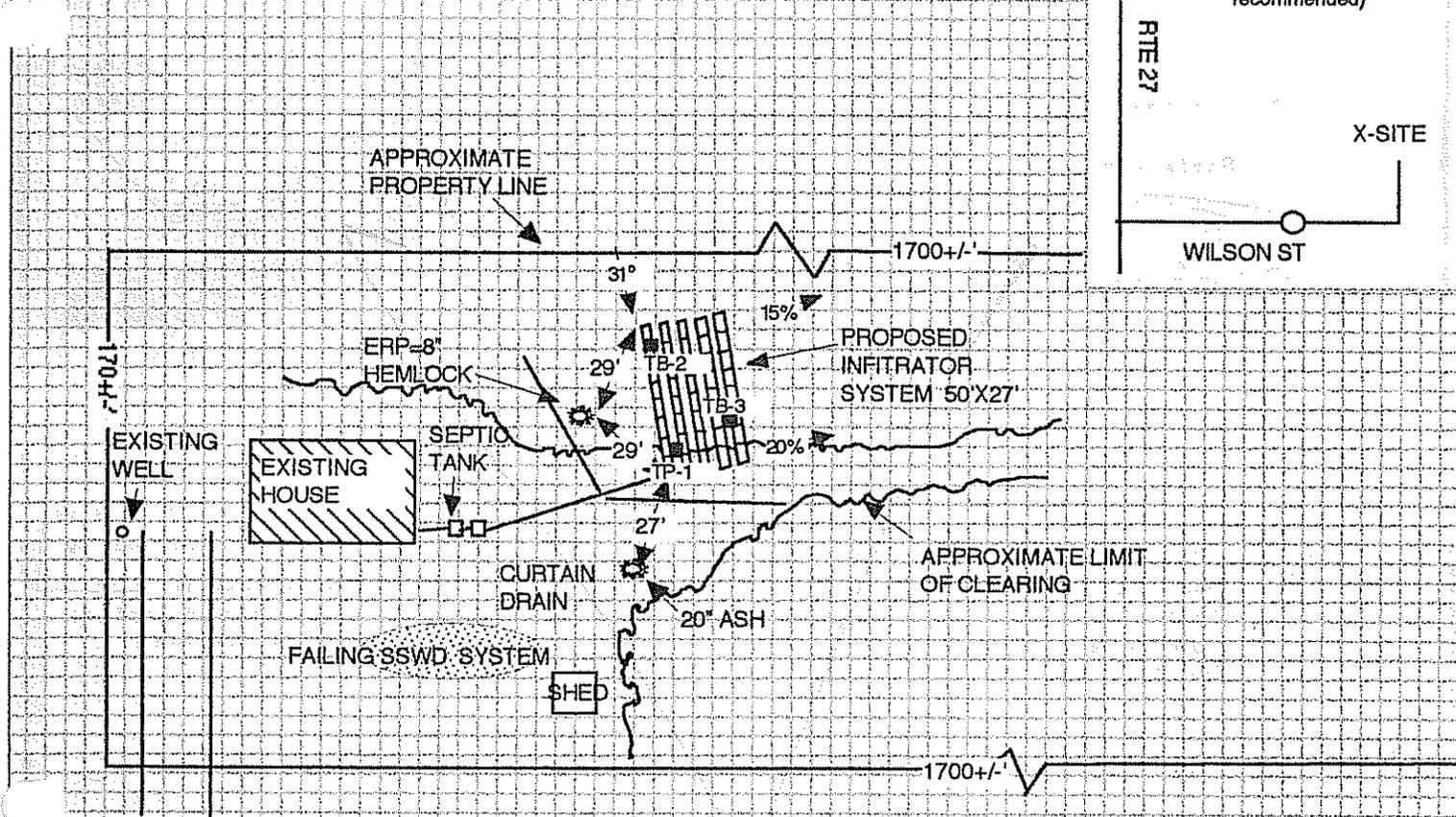
<i>[Signature]</i>	181	5/30/97	
Site Evaluator Signature	SE #	Date	
JOHN ARCHARD	(207) 293-2674		Page 1 of 3
Print Name	Telephone		HHE-200 Rev. 5/95

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation **AUGUSTA** Street, Road, Subdivision **WILSON STREET** Name of Owner **BELAND**

**SITE PLAN** Scale 1" = 60' Ft.  
or as shown

**SITE LOCATION PLAN**  
(Map from *The Maine Atlas* recommended)



## SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP-1/TB-2  Test Pit  Boring  
N/A " Depth of Organic Horizon above Mineral Soil

DEPTH BELOW MINERAL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SILT LOAM	FRIABLE	BROWN	NONE EVIDENT
6			REDDISH BROWN	
10			OLIVE BROWN	FEW TO COMMON DISTINCT
15	SILTY CLAY LOAM	FIRM	OLIVE BROWN	
20			OLIVE	
30	SILTY CLAY			
40				
50				

Soil Profile **8** CLASS **C** Slope **15-20** % Limiting Factor **15** "  Ground Water  Restrictive Layer  Bedrock

Observation Hole TB-3  Test Pit  Boring  
N/A " Depth of Organic Horizon above Mineral Soil

DEPTH BELOW MINERAL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SILT LOAM	FRIABLE	BROWN	NONE EVIDENT
6			REDDISH BROWN	
10			OLIVE BROWN	FEW TO COMMON DISTINCT
15	SILTY CLAY LOAM	FIRM	OLIVE BROWN	
20			OLIVE	
30	SILTY CLAY			
40				
50				

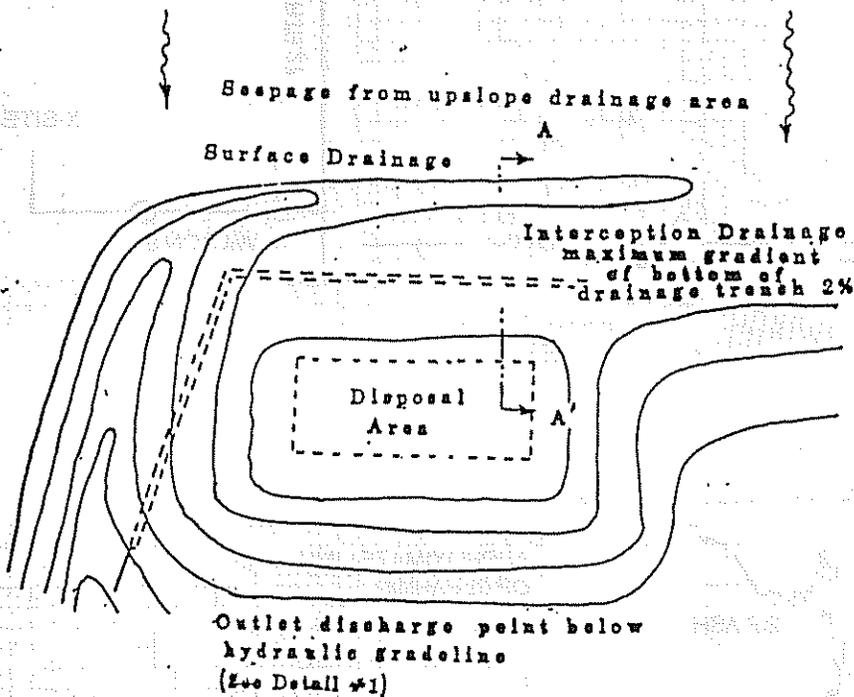
Soil Profile **8** CLASS **C** Slope **20** % Limiting Factor **10** "  Ground Water  Restrictive Layer  Bedrock

Site Evaluator Signature

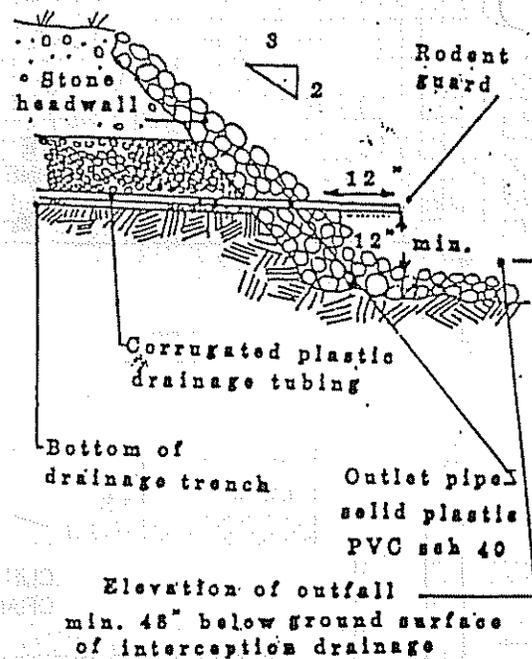
181  
SE#

5/30/97  
Date

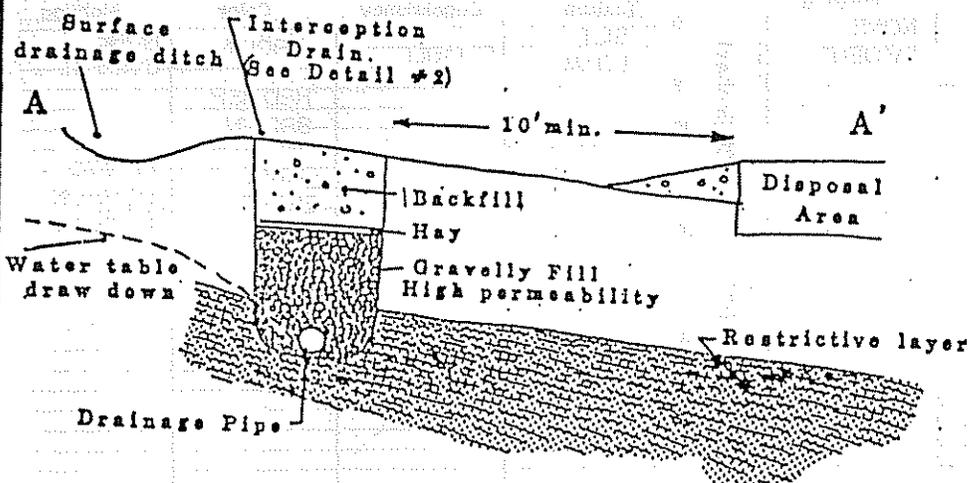
### PLAN VIEW



### DETAIL #1



### CROSS-SECTION



### DETAIL #2

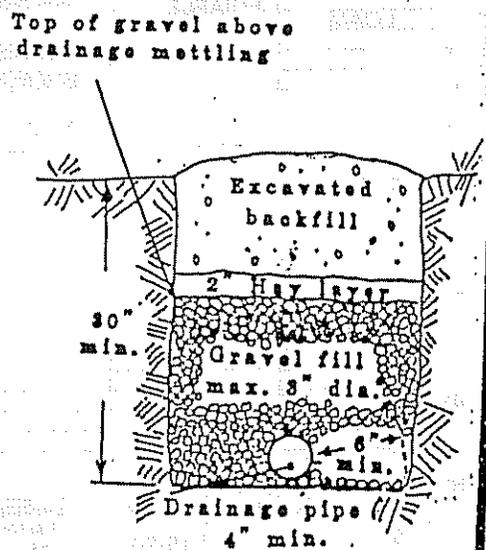


FIGURE H.1 Curtain Drain

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

**AUGUSTA**

Street, Road, Subdivision

**WILSON STREET**

Owner's Name

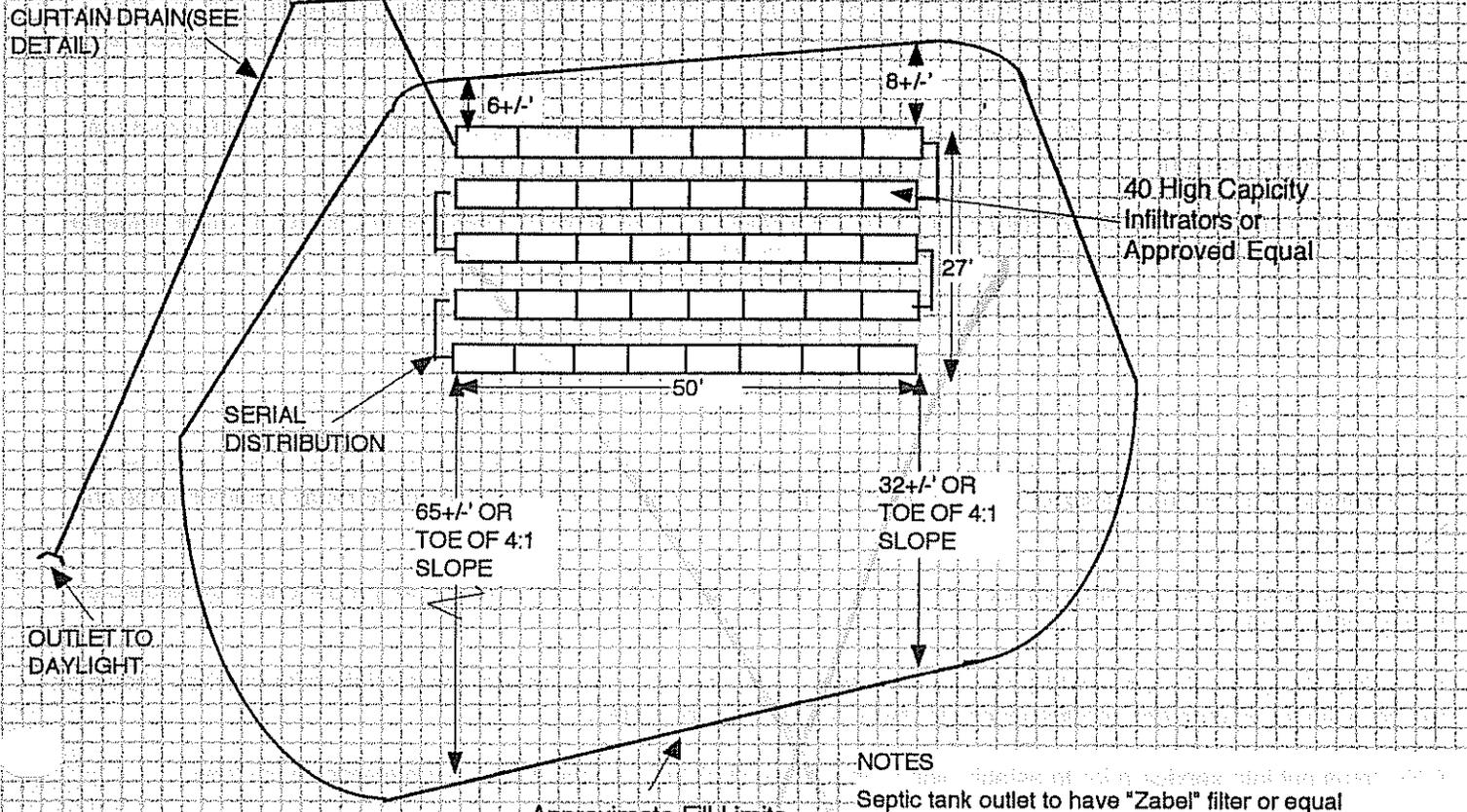
**BELAND**

Effluent Line

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

CURTAIN DRAIN (SEE DETAIL)



### NOTES

Septic tank outlet to have "Zabel" filter or equal

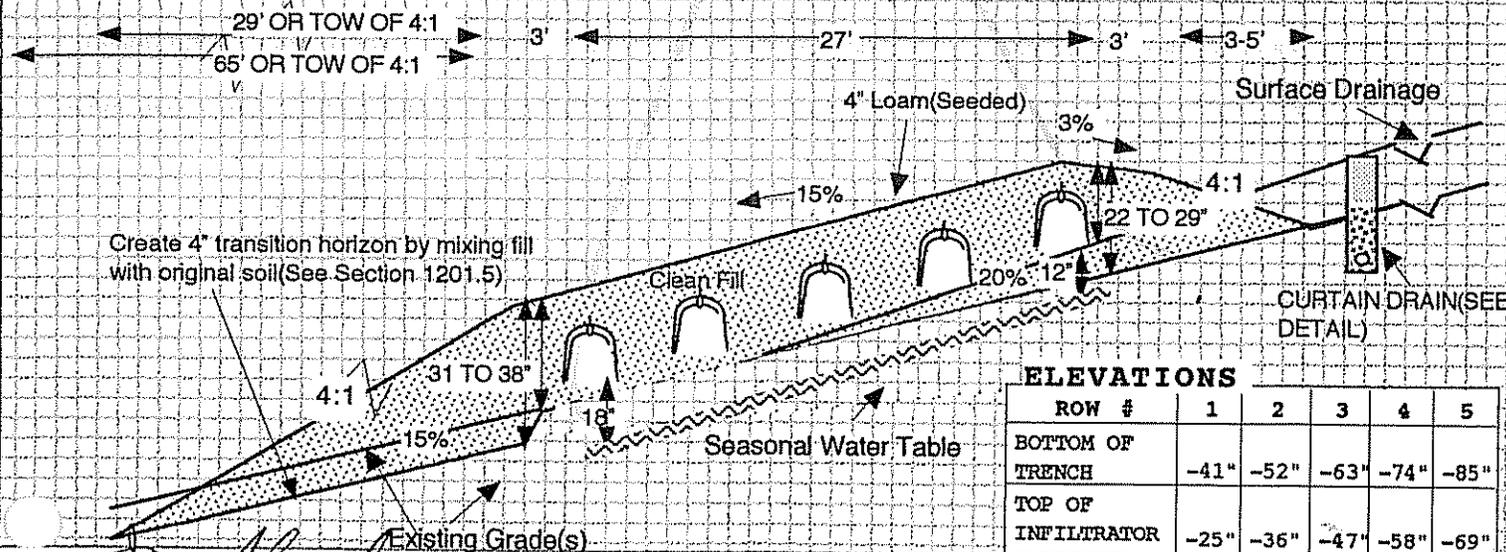
Approximate Fill Limits

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	22" to 29"	Finished Grade Elevation	-17"	Location & Description	FLAGGED NAIL IN 8"
Depth of Fill (Downslope)	31 TO 38"	Top of Distribution Pipe or Proprietary Device	SEE ABOVE		HEMLOCK TREE 14" ABOVE GROUND
		Bottom of Disposal Area	SEE ABOVE	Reference Elevation	00"

### DISPOSAL AREA CROSS SECTION

Note: All fill to be coarse, gravelly, sharp, clean, loamy sand. (See section 1205.4 of "Rules")

Scale:  
Vertical: 1" = 4' Ft.  
Horizontal: 1" = 10' Ft.



ELEVATIONS					
ROW #	1	2	3	4	5
BOTTOM OF TRENCH	-41"	-52"	-63"	-74"	-85"
TOP OF INFILTRATOR	-25"	-36"	-47"	-58"	-69"

*John H. ...*  
Site Evaluator Signature

181  
SE#

5/30/97  
Date

GENERAL NOTES

1. Site evaluations conform to the criteria of the "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241" latest revision. Other environmental concerns are not evaluated and may require additional professional opinions. the delineation of wetlands, when required, is to be performed by competent consultants experienced in such practice and may affect the suitability of particular sites.
2. All construction to conform to the specifications in the "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241" latest revision.
3. Wells & structures must maintain setbacks from the disposal system as allowed or required in Chapter 4 "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241" latest revision.
4. Property lines as shown are as provided by owner/owner's agent no guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
5. A septic tank filter is required when installing a mechanical garbage disposal or solids handling grinder pump.
6. Septic tanks and pump stations, when required, shall be installed watertight to prevent the infiltration of ground or surface water. Pumps shall be sized for actual installed T.D.H.. For uninterrupted service during repair duplex pumps are recommended.
7. Force mains and pressure lines shall be flushed of foreign material and pumps checked for proper on/off cycle before being put in service.
8. Applicability of the design must be reevaluated when the location of structures are substantially different than shown on the site plan, or when other appurtenances(ie: swimming pools) are added.
9. Systems put into service prior to establishing proper cover shall be provided with adequate erosion controls.
10. Provide low profile tanks when determined as needed in the field. All tanks may be field located and meet the setback requirements of Chapt. 4 "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241" latest revision.
11. All components subject to freezing must be adequately insulated.
12. The LPI shall inform the owner and designer of any local ordinances exceeding the "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241" prior to issuing a permit so that necessary amendments can be made to the design.
13. Systems must be maintained as outlined in "Septic Systems-How They Work & How to Keep Them Working"-MDEP
14. All designs are subject to Local, State, or Federal review. Designers liability shall be limited to required revisions. In no case shall liability exceed designers fee.

The owner/applicants signature on page one acknowledges their understanding of the "General Notes"