

called 9/8 - 1:50

Town Copy \$120

FORMS

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 on 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. 1906.0)
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. 009
Date Permit Issued 9/8/08
Property Owner's Name: KLAFT, RICK
System's Location: 96B WEST RIVER ROAD
Property Owner's Address: AUGUSTA, ME 04830

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.

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:

If 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.

Signature of owner: Amie Kluft

DATE: 9/11/2008

LOCAL PLUMBING INSPECTOR

I, Mary R. Furdth, 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. () 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, the reasons shall be stated in Comments Section below as to why the proposed replacement system is not being recommended.

Comments:

LPI Signature: Mary R. Furdth

DATE: 9/8/08

HHE-204 Rev 08/05

FORMS

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPP'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
	Disposal Fields			Septic Tanks			Disposal Fields	Septic Tanks
SOILS								
Soil Profile	Ground Water Table			to 7"			8	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	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water system wells	300 ft	300 ft	300 ft	150 ft	150 ft	150 ft	/	/
Owner's wells	100 down to 60 ft [a]	200 down to 100 ft	300 down to 150 ft	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	/	/
Neighbor's wells	100 down to 60 ft [f]	200 down to 120 ft [f]	300 down to 180 ft [f]	100 down to 50 ft [f]	100 down to 75 ft [f]	100 down to 75 ft [f]	/	/
Water supply line	10 ft	20 ft	25 ft [h]	10 ft	10 ft	10 ft [h]	/	/
Water course, major -	100 down to 60 ft [d]	200 down to 120 ft [d]	300 down to 180 ft [d]	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	/	/
Water course, minor	50 down to 25 ft [e]	100 down to 50 ft [e]	150 down to 75 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	/	/
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft	/	/
Edge of fill extension -- Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	/	/
Slopes greater than 3:1	10 ft [g]	18 ft [g]	25 ft [g]	N/A	N/A	N/A	/	/
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft	/	/
Full basement [below grade foundation]	20 down to 10 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft	/	/
Property lines	10 down to 5 ft [c]	18 down to 9 ft [c]	20 down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 down to 10 ft [c]	/	/
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft	/	/
OTHER								
1. Fill extension Grade - to 3:1								
2.								
3.								

Footnotes: [a.] Single-family well setbacks may be reduced as prescribed in Section 701.2.
 [b.] This distance may be reduced to 25 feet, if the septic or holding tank is tested in the plumbing inspector's presence and shown to be watertight or of monolithic construction.
 [c.] Additional setbacks may be needed to prevent fill material extensions from encroaching onto abutting property.
 [d.] Additional setbacks may be required by local Shoreland zoning.
 [e.] Natural Resource Protection Act requires a 25 feet setback, on slopes of less than 20%, from the edge of soil disturbance and 100 feet on slopes greater than 20%. See Chapter 15.
 [f.] May not be any closer to neighbors well than the existing disposal field or septic tank unless written permission is granted by the neighbor. This setback may be reduced for single family houses with Department approval. See Section 702.3.
 [g.] The fill extension shall reach the existing ground before the 3:1 slope or within 100 feet of the disposal field.
 [h.] See Section 1402.8 for special procedures when these minimum setbacks cannot be achieved.

[Signature]

 SITE EVALUATOR'S SIGNATURE

9/12/07

 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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION

>> Caution: Permit Required -- Attach in Space Below <<

City, Town, Plantation: AUGUSTA
Street or Road: 968 WEST RIVER ROAD (ROUTE 104)
Subdivision, Lot #: _____

OWNER/APPLICANT INFORMATION

Name (last, first, MI): KLAFT, RICK
 Owner Applicant
Mailing Address of: 968 WEST RIVER ROAD
 Owner Applicant
AUGUSTA, ME, 04330
Daytime Tel. #: _____

AUGUSTA PERMIT # 6209 TOWN COPY
Date Permit Issued: 9/18/07 \$ 1,200.00 Double Fee Charged
Local Plumbing Inspector Signature: [Signature] L.P.I. # 1850

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.
Signature of Owner or Applicant: [Signature] Date: 9-4-07

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.
Local Plumbing Inspector Signature: [Signature] (1st Date Approved) 10/2/07
(2nd Date Approved) _____

PERMIT INFORMATION

TYPE OF APPLICATION 1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>TRENCH</u> Year Installed: <u>UNKNOWN</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion SIZE OF PROPERTY <u>3±</u> <input type="checkbox"/> sq. ft. <input type="checkbox"/> acres SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	THIS APPLICATION REQUIRES 1. <input type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 3. <input checked="" type="checkbox"/> Replacement System Variance a. <input checked="" type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Permit DISPOSAL SYSTEM TO SERVE 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>2</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: (SPECIFY) _____ Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	DISPOSAL SYSTEM COMPONENT(S) 1. <input checked="" type="checkbox"/> Complete Non-engineered System 2. <input type="checkbox"/> Primitive System (graywater & all toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (2000 gpd or more) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components TYPE OF WATER SUPPLY 1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____
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DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK 1. <input checked="" type="checkbox"/> Concrete a. <input type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile c. <input type="checkbox"/> With In-tank lift station 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE 1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device <u>24 HIGH CAPACITY BIODIFFUSERS</u> a. <input type="checkbox"/> Cluster Array c. <input checked="" type="checkbox"/> Linear b. <input checked="" type="checkbox"/> Regular load d. <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE <u>150</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> ln. ft.	GARBAGE DISPOSAL UNIT 1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment Tank b. <input type="checkbox"/> _____ Tanks in Series c. <input type="checkbox"/> Increase in Tank Capacity d. <input type="checkbox"/> Filter on Tank Outlet	DESIGN FLOW <u>150</u> gallons per day BASED ON 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities 3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER RECORDS Lat. <u>44°</u> d <u>22.615</u> m s N Lon. <u>69°</u> d <u>42.466</u> m s W if g.p.s. state margin of error _____
SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>9 1 D 1 3</u> at Observation Hole # <u>TP</u> Depth <u>8"</u> OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING 1. <input type="checkbox"/> Small - 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq. ft./gpd 3. <input type="checkbox"/> Medium-Large - 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq. ft./gpd 5. <input checked="" type="checkbox"/> Extra Large - 5.0 sq. ft./gpd	PUMPING 1. <input type="checkbox"/> Not Required 2. <input checked="" type="checkbox"/> May be Required 3. <input type="checkbox"/> Required Specify only for engineered or experimental systems: DOSE _____ gallons	

SITE EVALUATOR STATEMENT

I certify that on 9/6/07 (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)
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

Site Evaluator Signature: [Signature] SE# 132 Date 9/12/07
TERRY ADAMS (207) 512-5125 adamster@ctel.net
Site Evaluator Name Printed Telephone # E-mail Address

07084

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-3165

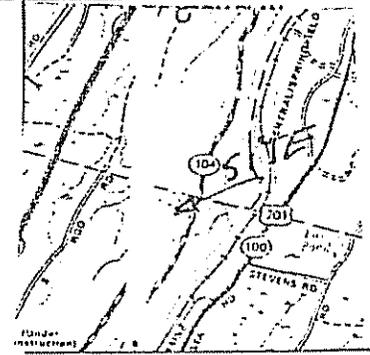
Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
WEST RIVER ROAD

Owner's Name
RICK KLAFT

SITE PLAN

Scale 1" = 40 Ft.



(SEE ATTACHED SITE PLAN)

SEE "NOTES FROM THE SITE EVALUATOR"

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

Observation Hole TP Test Pit Boring

0 " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
LOAM	FRIABLE	BROWN	NO EVIDENT
SILT LOAM	VERY FIRM	OLIVE	EVIDENT
DEPTH OBSERVED			
Soil Classification <u>S</u> <u>D</u> Profile Condition		Slope <u>2-4%</u>	Limiting Factor <u>8</u>

- Ground Water
- Restrictive Layer
- Bedrock
- Pit Depth

Observation Hole _____ Test Pit Boring

_____ " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
(This table is mostly blank with a diagonal line drawn across it from top-left to bottom-right.)			
Soil Classification _____ Profile Condition		Slope _____%	Limiting Factor _____

- Ground Water
- Restrictive Layer
- Bedrock
- Pit Depth

Tim Colvers
Site Evaluator's Signature

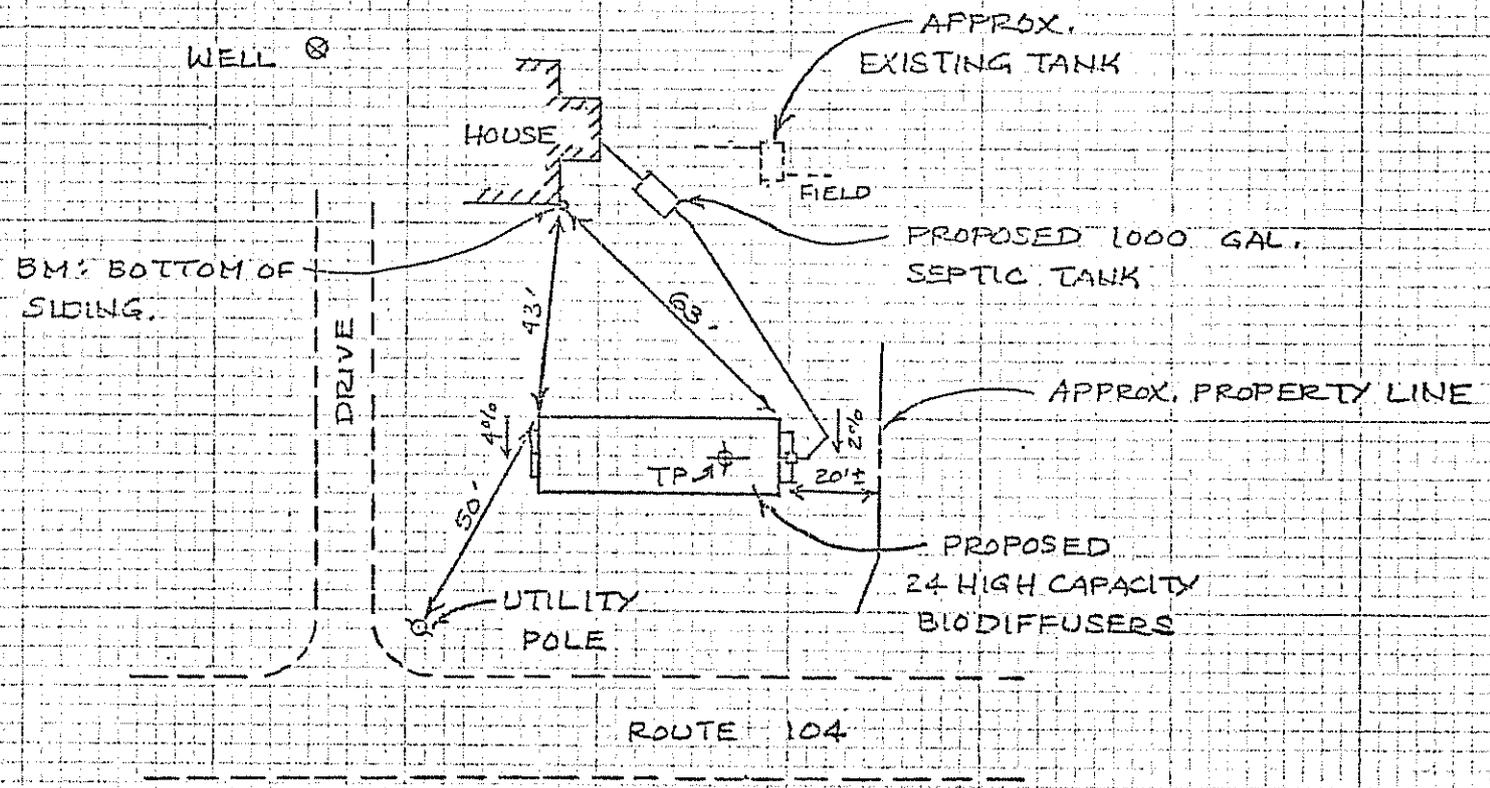
132
S. E. #

9/12/07
Date

SITE PLAN:

SCALE: 1" = 40'

RICK KLAFT
AUGUSTA
PAGE 2A

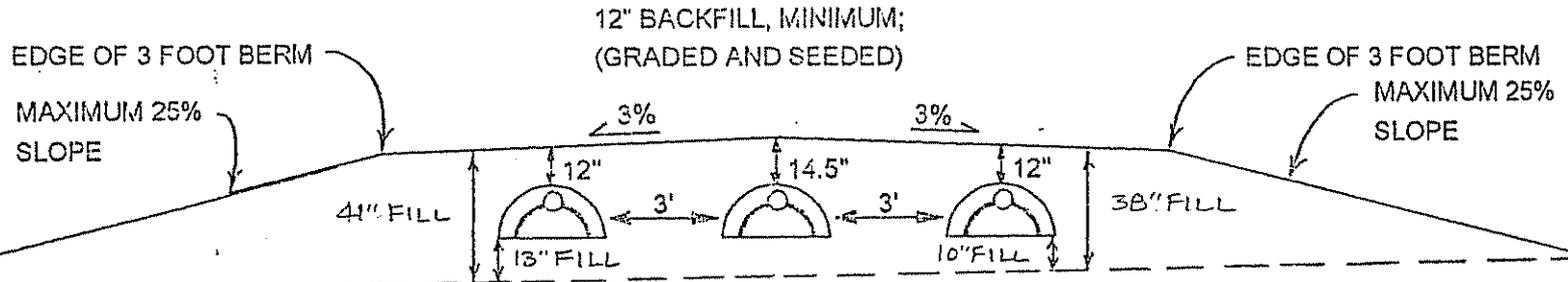
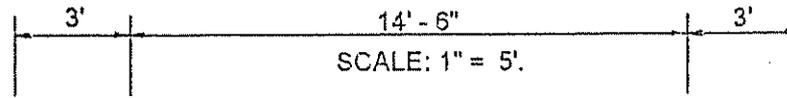


Tony Collins
SITE EVALUATOR'S SIGNATURE

132
S.E.#

9/12/02
DATE

PLASTIC CHAMBER CROSS SECTION SECTION A - A



APPROXIMATE ORIGINAL GRADE
2 % SLOPE

FINISHED GRADE:	-13"
TOP OF PLASTIC CHAMBERS:	-25"
BOTTOM OF PLASTIC CHAMBERS:	-41"

OWNER: RICK KLAFT

LOCATION: ALBUSTA

Terry Adams
TERRY ADAMS

132
S.E.#

9/12/17
DATE

NOTES FROM THE SITE EVALUATOR

1. Systems shall be installed in accordance with the Maine State Plumbing Code.
2. Remove vegetation from the proposed disposal area and scarify original ground before placing fill.
3. Fill shall be clean, coarse sand to gravelly sand. See section 804.2 of the Maine Subsurface Waste Water Disposal rules.
4. All stone shall be uniform size and free of fines.
5. Site shall be graded in a manner, which will divert surface water from the bed.
6. Grass, clover, trefoil, vetch, perennial wild flowers or other herbaceous perennials may be planted on disposal area surfaces. Woody shrubs in conjunction with a hardy perennial ground cover may only be used on fill extensions.
7. If this application includes a new system variance request, it is assumed that this site is not part of a proposed subdivision.
8. "Permit By Rule" – When the toe of fill for a system extends closer than 100' to a wetland or water body, even though the system itself is 100' or more from the wetland or water body; or, when a system requires a Replacement System Variance, the applicant may be required to file a "Permit By Rule" notification form or a complete application form with the Department of Environmental Protection. "Permit by Rule" does not take the place of any other local, state or federal approvals, which may be needed for the proposed activity. In specific instances, the activity may require a shoreland zoning permit from the town, a lease from the Bureau of Public Lands, if the work extends onto state owned submerged lands or a permit from the U.S. Army Corps of Engineering.
9. If a system requires a pump, it shall be vented in accordance with standard practice. It is recommended that the required audible high water alarm be installed on the premises on a different electrical circuit from the pump.
10. As a general rule, a septic tank should be cleaned every two years. It is recommended that no commercial septic tank additives be used.
11. Unless otherwise stated this design does not provide for the use of a garbage disposal. If one is to be added, contact the site evaluator in order that they may alter the design to accommodate the change.
12. This site evaluation and design has been done in compliance with the Maine State Plumbing Code. The approval and/or design may be subject to more restrictive local ordinances. The Local Plumbing Inspector is to be contacted for final review approval.
13. By signature on this application, the client agrees with the location of lot lines, wells and other physical features shown and further agrees to limit the liability of the site evaluator to the original cost of installation of the system or the total fee for services rendered on this project, whichever is greater.
14. This site evaluation and septic design has been done for the owner or applicant shown on page 1 and for the structure as described to the site evaluator. Any change in ownership, house location or other data shown on the HHE 200 form will make this design null and void.