REPLACEMENT SYSTEM VARIANCE REQUEST

Town 95.00

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 an 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. 2006)
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. 519 Date Permit Issued 7-14-03

Property Owner's Name: ROBERT WHEELOCK Tel. No.: 622-4618

System's Location: 899 NORTH RIVER ROAD

Property Owner's Address: _____

(if different from above) _____

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. (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, 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. 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.

Robert E. Wheelock
SIGNATURE OF OWNER

DATE

LOCAL PLUMBING INSPECTOR

I, Gary R. Smith, 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: _____

Gary R. Smith
LPI SIGNATURE

7/14/03
DATE

HHE-204 Rev 6/00

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
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 supply wells	300 ft [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]	—	—
Owner's wells	100 down to 60 ft	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 [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]	—	—
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]	—	—
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	—	—
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft	—	—
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 [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	25 ft [d]	—	—
Slopes greater than 3:1	10 ft	18 ft	25 ft	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. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State variance.
b. May not be any closer to neighbor's well than the existing disposal field or septic tank unless written permission is granted by the neighbor.
c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope or property line.
d. Natural Resources Protection Act requires a 25 foot setback on slopes with less than 20% from the edge of disturbance and 100 feet on slopes greater than 20% except for the repair or installation of a replacement system when no practical alternative exists.

Vaughn L. Smith — SITE EVALUATOR'S SIGNATURE — 6/30/03 DATE

VAUGHN L. SMITH 226 LICENSED SITE EVALUATOR

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

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FORMS

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-8672 FAX (207) 287-4172

PROPERTY LOCATION

Town, ntation	AUGUSTA
Street or Road	899 West RIVER ROAD
Subdivision, Lot #	A.K.A. ROUTE 104

>> Caution: Permit Required – Attach In Space Below <<

AUGUSTA 5119 TOWN COPY
Date Permit Issued: 7/14/03 $ 195.80 ☐ # Double Fee Charged
Local Plumbing Inspector Signature L.P.I. # 850

OWNER/APPLICANT INFORMATION

Name (last, first, MI)	WHEELOCK, ROBERT (Owner) Applicant
Mailing Address of ☒ Owner ☐ Applicant	899 RIVER ROAD AUGUSTA, ME 04330
Daytime Tel. #	622-4618

Municipal Tax Map # 2 Lot # 73

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 — Date 7/8/03

Caution: Inspections Required

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 — (1st) Date Approved 8/14/03 — (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

1. ☐ First Time System
2. ☒ Replacement System
   Type Replaced: ____
   Year Installed: ____
3. ☐ Expanded System
   1. ☐ One-time exempted
   2. ☐ Non-exempted
4. ☐ Experimental System
5. ☐ Seasonal Conversion

THIS APPLICATION REQUIRES

1. ☐ No Rule Variance
2. ☐ First Time System Variance
   a. ☐ Local Plumbing Inspector Approval
   b. ☐ State & Local Plumbing Inspector Approval
3. Replacement System Variance
   a. ☒ Local Plumbing Inspector Approval
   b. ☐ State & Local Plumbing Inspector Approval
4. ☐ Minimum Lot Size Variance
5. ☐ Seasonal Conversion Approval

DISPOSAL SYSTEM COMPONENT(S)

1. ☐ Complete Non-engineered System
2. ☐ Primitive System (graywater & alt toilet)
3. ☐ Alternative Toilet, specify: ____
4. ☐ Non-Engineered Treatment Tank (only)
5. ☐ Holding Tank, ____ gallons
6. ☒ Non-engineered Disposal Field (only)
7. ☐ Separated Laundry System
8. ☐ Complete Engineered System (2000 gpd or more)
9. ☐ Engineered Treatment Tank (only)
10. ☐ Engineered Disposal Field (only)
11. ☐ Pre-treatment, specify:
12. ☐ Miscellaneous components

SIZE OF PROPERTY

± 55 ☐ sq. ft. ☒ acres

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE

1. ☒ Single Family Dwelling Unit, No. of Bedrooms: 4
2. ☐ Multiple Family Dwelling, No. of Units: ____
3. ☐ Other: ____ SPECIFY

EXISTING TYPE OF WATER SUPPLY

1. ☒ Drilled Well 2. ☐ Dug Well 3. ☐ Private
4. ☐ Public 5. ☐ Other:

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ Concrete
   a. ☒ Regular
   b. ☐ Low Profile
2. ☐ Plastic
3. ☐ Other: ____

CAPACITY 1000 gallons

DISPOSAL FIELD TYPE & SIZE

1. ☒ Stone Bed 2. ☐ Stone Trench
3. ☐ Proprietary Device
   a. ☐ Cluster array c. ☐ Linear
   b. ☐ Regular load. d. ☐ H-20 load
4. ☐ Other: ____

SIZE 1500 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

1. ☒ No 3. ☐ Maybe
2. ☐ Yes >> Specify one below:
   a. ☐ Multi-compartment Tank
   b. ☐ Tanks in Series
   c. ☐ Increase in Tank Capacity
   d. ☐ Filter on Tank Outlet

DESIGN FLOW

360 gallons per day

BASED ON:

1. ☒ Table 501.1 (dwelling unit(s)
2. ☐ Table 501.2 (other facilities)

SHOW CALCULATIONS – for other facilities –

3. ☐ Section 503.0 (meter readings)

ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
S / D / ____
at Observation Hole # 1
Depth 8" Elevation ____
OF MOST LIMITING SOIL FACTOR

DISPOSAL FIELD SIZING

1. ☐ Small – 2.0 sq. ft./gpd
2. ☐ Medium – 2.6 sq. ft./gpd
3. ☐ Medium-Large – 3.3 sq. ft./gpd
4. ☒ Large – 4.1 sq. ft./gpd
5. ☐ Extra Large – 5.0 sq. ft./gpd

PUMPING

1. ☐ Not Required
2. ☒ May Be Required
3. ☐ Required >> Specify only for engineered or experimental systems:
   DOSE: ____ gallons

SITE EVALUATOR STATEMENT

I Certify that on 6/18/03 (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).

Site Evaluator Signature — SE # 226 — Date 6/30/03

VAUGHN L. SMITH — Site Evaluator Name Printed — 724-5635 Telephone #

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

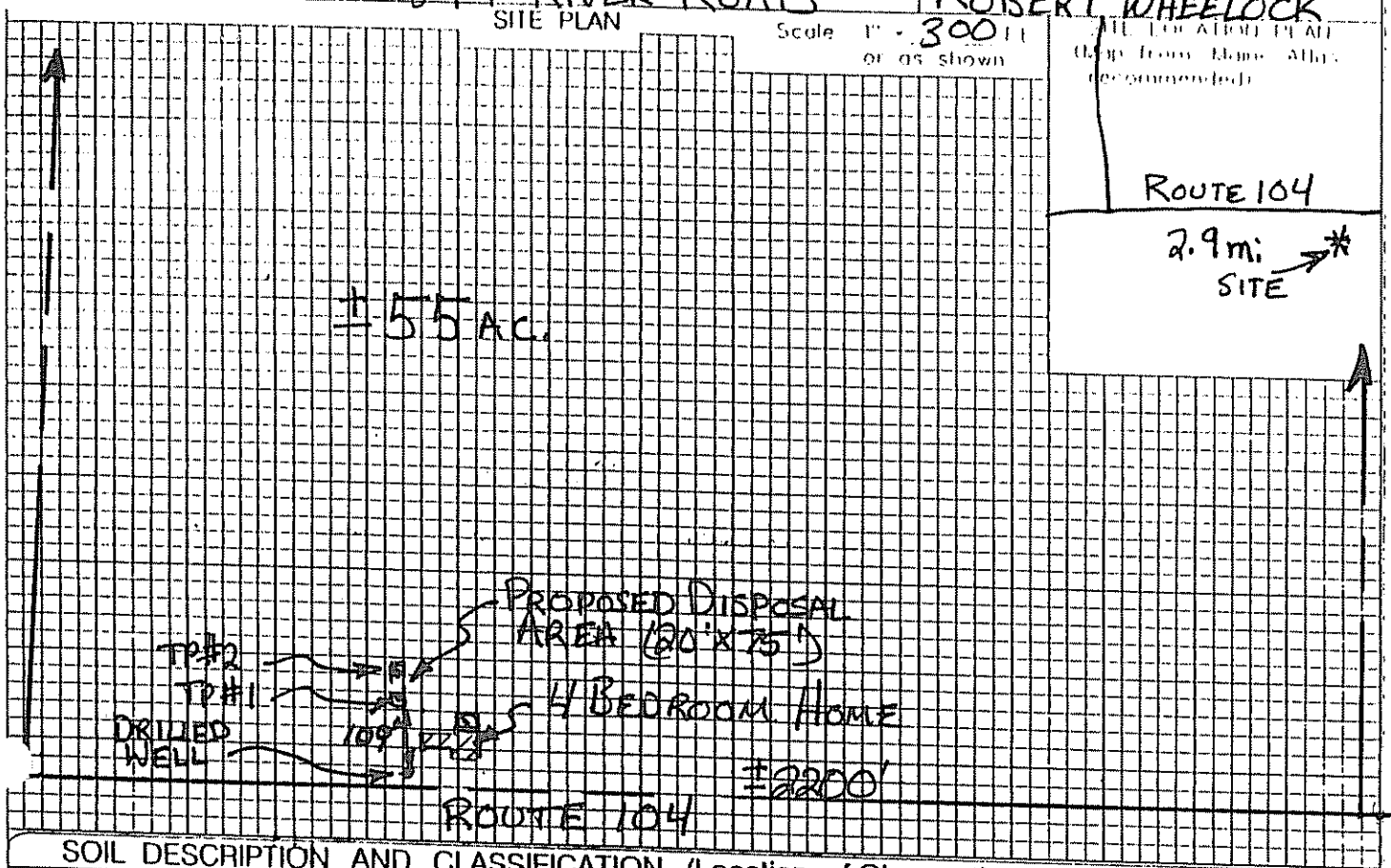
Department of Human Services
Division of Health Engineering
(207) 287 5672 FAX (207) 287 4172

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: 899 RIVER ROAD
Owner's Name: ROBERT WHEELOCK

SITE PLAN

Scale 1" = 300 ft or as shown

SITE LOCATION PLAN
(Map from Maine Atlas recommended)



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

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

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10	LOAM	FRIABLE	DARK BROWN	NONE
10–50		FIRM	OLIVE	FEW DISTINCT

Soil Classification: Profile 8, Condition D
Slope: 3%
Limiting Factor: 8"
☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 ☒ Test Pit ☐ Boring
1" Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–10	LOAM	FRIABLE	DARK BROWN	NONE
10–50		FIRM	PALE OLIVE	FEW DISTINCT

Soil Classification: Profile 8, Condition D
Slope: 3%
Limiting Factor: 9"
☒ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Vaughn L. Smith
Site Evaluator Signature

226
SE #

6/30/03
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

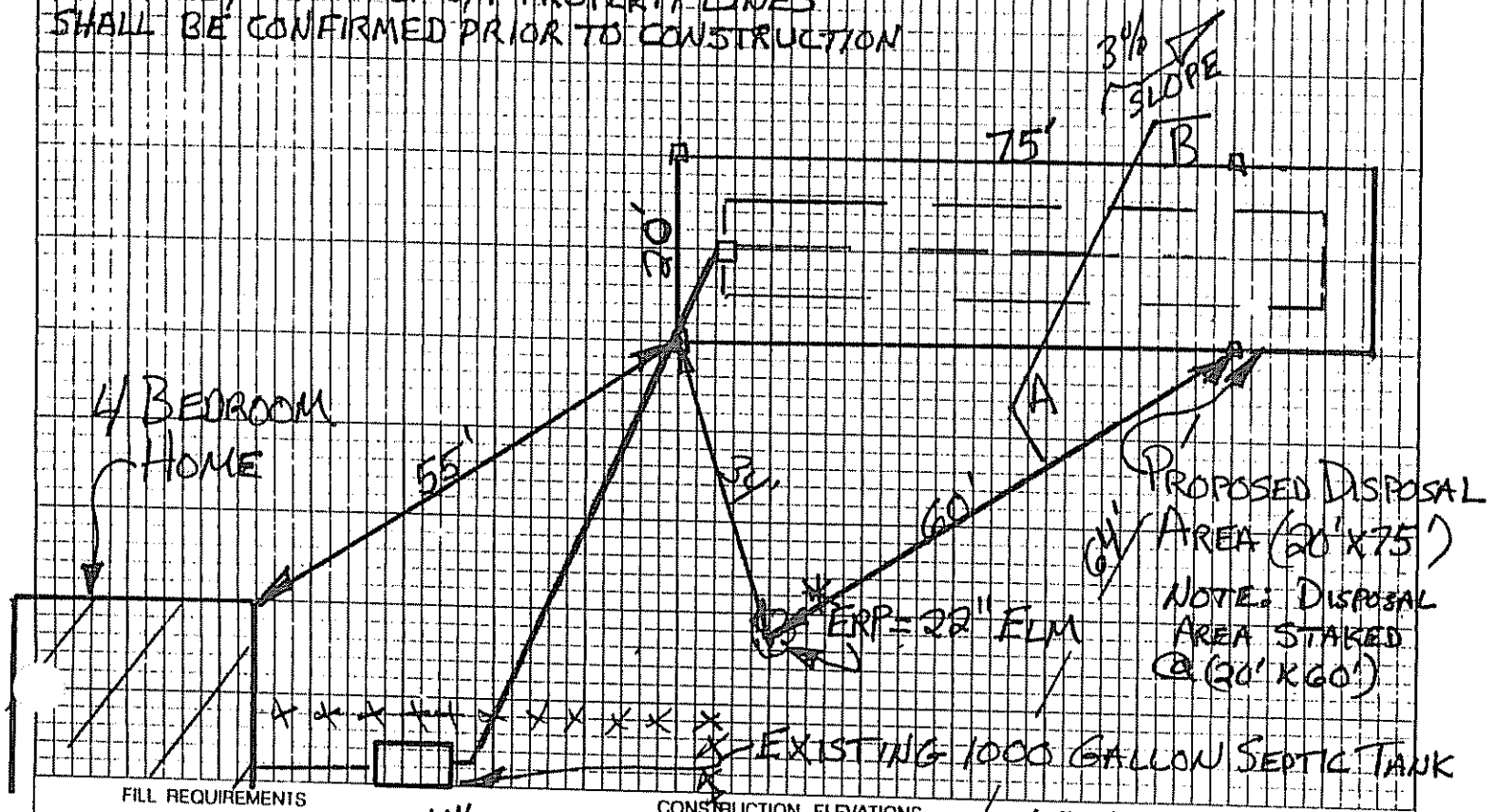
Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

Town/City/Plantation: AUGUSTA
Street/Road/Subdivision: 899 RIVER ROAD
Owner's Name: ROBERT WHEELOCK

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT

NOTE:
ALL TIES, ELEVATIONS, + PROPERTY LINES SHALL BE CONFIRMED PRIOR TO CONSTRUCTION



FILL REQUIREMENTS

Depth of Fill (Upslope)	34"
Depth of Fill (Downslope)	44"

FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

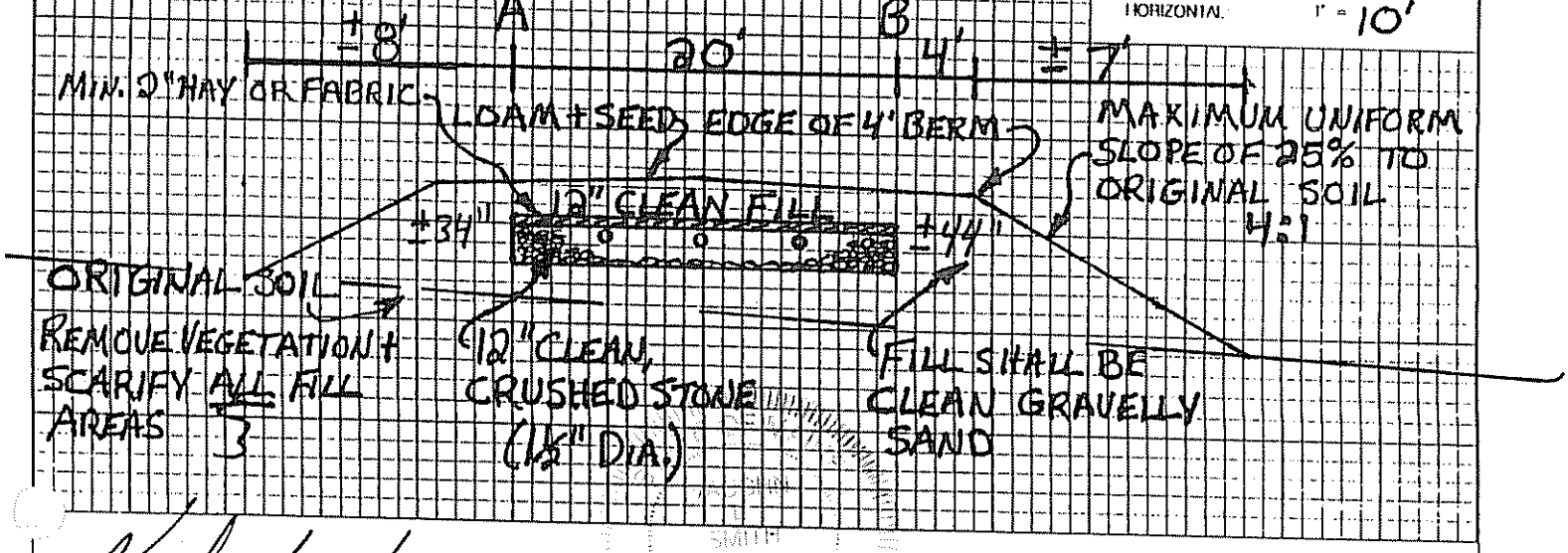
Finished Grade Elevation	POST
Top of Distribution Pipe or Proprietary Device	-42"
Bottom of Disposal Area	-54"
	-66"

ELEVATION REFERENCE POINT

Location & Description: 22" ELM W/ NAIL 16" ABOVE GROUND
Reference Elevation: 0"

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL: 1" = 5'
HORIZONTAL: 1" = 10'



Vaughn L. Ghost
Site Evaluator Signature

226
SE #

6/30/03
Date