

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

**PROPERTY ADDRESS**

Town Or Plantation: AUGUSTA

Street: 8 Rod Road

Subdivision Lot #: 8 Rod Road

**PROPERTY OWNERS NAME**

Last: DOSTIE Bros. First: \_\_\_\_\_

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

Mailing Address of Owner/Applicant (If Different): RFD #3 Box 899 AUGUSTA, ME. 04330

M2 L 160

AUGUSTA PERMIT # ✓ 210 TOWN COPY

Date Permit Issued: 4 30 84

Local Plumbing Inspector Signature: Robert St Pierre

FEE: \$ 40 (If Double Charged)

L.P.I. # 667

**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 of Owner/Applicant: Arthur Dostie Date: \_\_\_\_\_

**Caution: Inspection Required**

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules.

Local Plumbing Inspector Signature: Robert St Pierre Date Approved: May 2/84

**PERMIT INFORMATION**

<p><b>THIS APPLICATION IS FOR:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NEW SYSTEM</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM</li> <li><input type="checkbox"/> EXPANDED SYSTEM</li> <li><input type="checkbox"/> SEASONAL CONVERSION</li> <li><input type="checkbox"/> EXPERIMENTAL SYSTEM</li> </ol>	<p><b>THIS APPLICATION REQUIRES:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NO RULE VARIANCE REQUIRED</li> <li><input checked="" type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</li> <li><input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</li> <li><input type="checkbox"/> Requires only Local Plumbing Inspector Approval</li> <li><input type="checkbox"/> Requires both State and Local Plumbing Inspector Approval</li> </ol>	<p><b>INSTALLATION IS COMPLETE SYSTEM</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</li> <li><input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</li> <li><input type="checkbox"/> ENGINEERED (+ 2000 gpd)</li> </ol> <p><b>INDIVIDUALLY INSTALLED COMPONENTS:</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> TREATMENT TANK (ONLY)</li> <li><input type="checkbox"/> HOLDING TANK</li> <li><input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</li> <li><input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> </ol>
<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED: _____</p> <p>THE FAILING SYSTEM IS:</p> <ol style="list-style-type: none"> <li><input type="checkbox"/> BED</li> <li><input type="checkbox"/> CHAMBER</li> <li><input type="checkbox"/> TRENCH</li> <li><input type="checkbox"/> OTHER</li> </ol> <p><u>N/A</u></p>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</li> <li><input type="checkbox"/> MODULAR OR MOBILE HOME</li> <li><input type="checkbox"/> MULTIPLE FAMILY DWELLING</li> <li><input type="checkbox"/> OTHER _____ SPECIFY _____</li> </ol>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><u>DRILLED WELL</u></p>
<p>SIZE OF PROPERTY: <u>38,010</u></p> <p>ZONING: <u>NONE</u></p>		

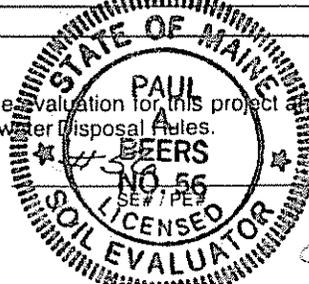
**DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)**

<p><b>TREATMENT TANK</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</li> <li><input type="checkbox"/> AEROBIC</li> </ol> <p>SIZE: <u>1000</u> GALS.</p>	<p><b>WATER CONSERVATION</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> NONE</li> <li><input checked="" type="checkbox"/> LOW VOLUME TOILET</li> <li><input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</li> <li><input type="checkbox"/> ALTERNATIVE TOILET</li> </ol> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> NOT REQUIRED</li> <li><input type="checkbox"/> MAY BE REQUIRED (DEPENDENT ON TREATMENT TANK LOCATION AND ELEVATION)</li> <li><input type="checkbox"/> REQUIRED</li> </ol> <p>DOSE: _____ GALS.</p>	<p><b>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</b></p> <p><u>Low Vol. FLUSH</u></p> <p><u>3 BEDROOMS</u></p> <p><u>MIN. PER. CODE</u></p>				
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>PROFILE: <u>9</u></td> <td>CONDITION: <u>D</u></td> </tr> <tr> <td>DEPTH TO LIMITING FACTOR: <u>152 7/2"</u></td> <td><u>0-3</u></td> </tr> </table>	PROFILE: <u>9</u>	CONDITION: <u>D</u>	DEPTH TO LIMITING FACTOR: <u>152 7/2"</u>	<u>0-3</u>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <ol style="list-style-type: none"> <li><input type="checkbox"/> SMALL</li> <li><input type="checkbox"/> MEDIUM</li> <li><input type="checkbox"/> MEDIUM-LARGE</li> <li><input type="checkbox"/> LARGE</li> <li><input checked="" type="checkbox"/> EXTRA LARGE</li> </ol>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <ol style="list-style-type: none"> <li><input checked="" type="checkbox"/> BED <u>1220</u> Sq. Ft.</li> <li><input type="checkbox"/> CHAMBER _____ Sq. Ft.</li> <li><input type="checkbox"/> TRENCH _____ Linear Ft.</li> <li><input type="checkbox"/> OTHER: _____</li> </ol>	<p><b>DESIGN FLOW:</b> <u>243 GPD</u> (GALLONS/DAY)</p>
PROFILE: <u>9</u>	CONDITION: <u>D</u>						
DEPTH TO LIMITING FACTOR: <u>152 7/2"</u>	<u>0-3</u>						

**SITE EVALUATOR STATEMENT**

On 10/7/83 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system proposed is in accordance with the Subsurface Wastewater Disposal Rules.

Signature: Paul A. Beers  
Site Evaluator or Professional Engineer's Signature



( ) SITE EVALUATION WAIVED BY LOCAL OPTION)

Date: 10/10/83

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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City: Plantation  
**Augusta**

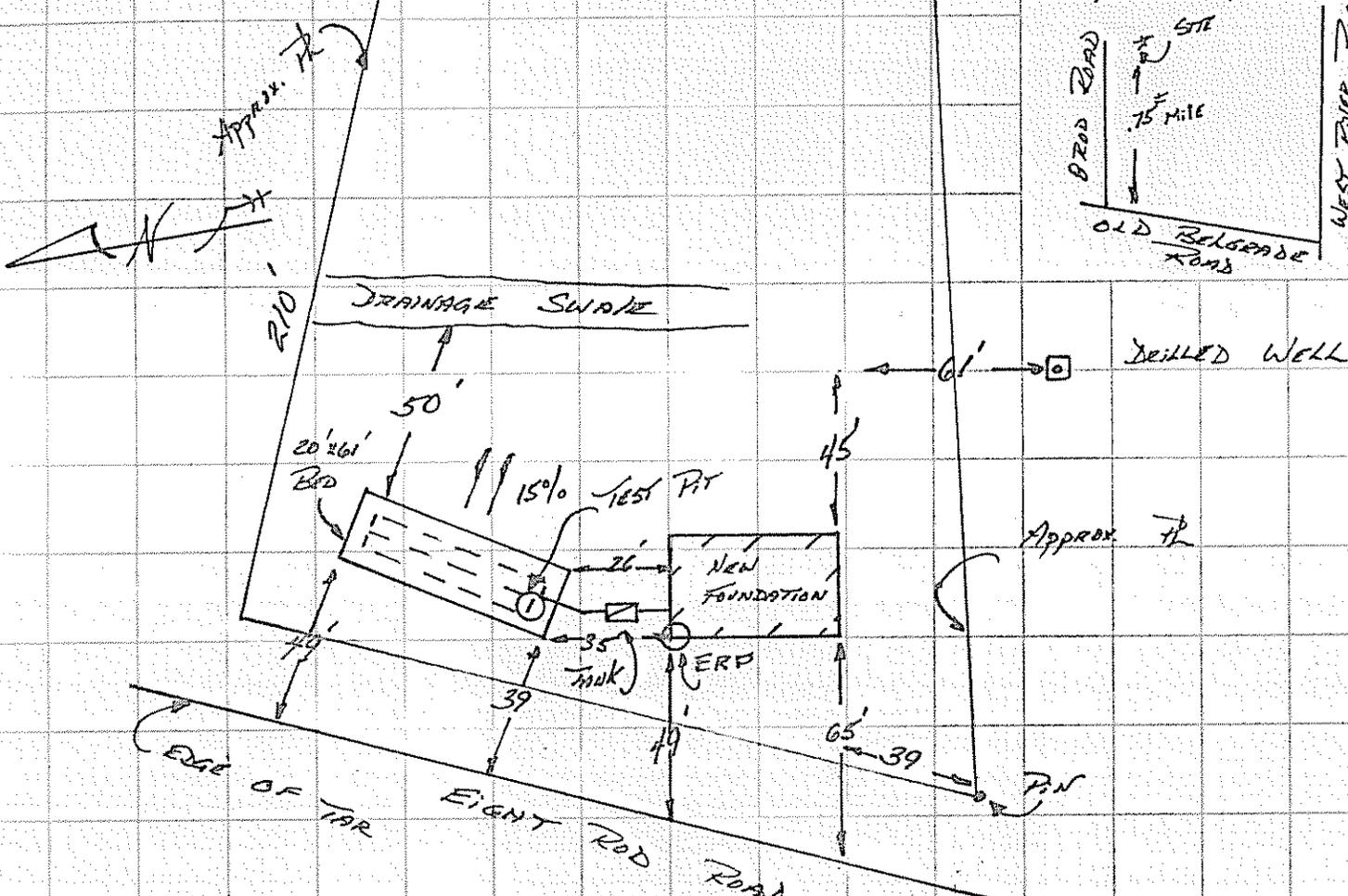
Street, Road, Subdivision  
**8 Rod Road Josie Bros. S.D. #14**

Owners Name  
**JUSTIE BEOS.**

## SITE PLAN

Scale 1" = 50' Ft.

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  
0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0-6	SILT LOAM	FRIBLE	DK. BROWN	MANY
6-10			MOTTLED	PROMINANT
10-15	SILT CLAY		GREY +	@
15-20	LOAM	FIRM	BROWN	0-3"
20-40				
40-50	BOTTOM OF PIT			

Soil Profile <b>9</b>	Classification <b>3</b>	Slope <b>15%</b>	Limiting Factor <b>0-3"</b>	<input checked="" type="checkbox"/> Ground Water
	Condition			<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0-6	<u>TEST PIT NOTES:</u> MOST OF			
6-10	" HORIZON HAS BEEN STRIPPED			
10-15	LEAVING AT MOST, 3 INCHES;			
15-20	ORIGINAL SOIL WOULD HAVE			
20-40	BEEN 9B TYPE SOIL....			
40-50				

Soil Profile _____	Classification _____	Slope _____%	Limiting Factor _____	<input type="checkbox"/> Ground Water
	Condition _____			<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

*Paul A. Beau*  
Site Evaluator or Professional Engineer's Signature

#56  
SE# / PE#

10/10/83  
Date

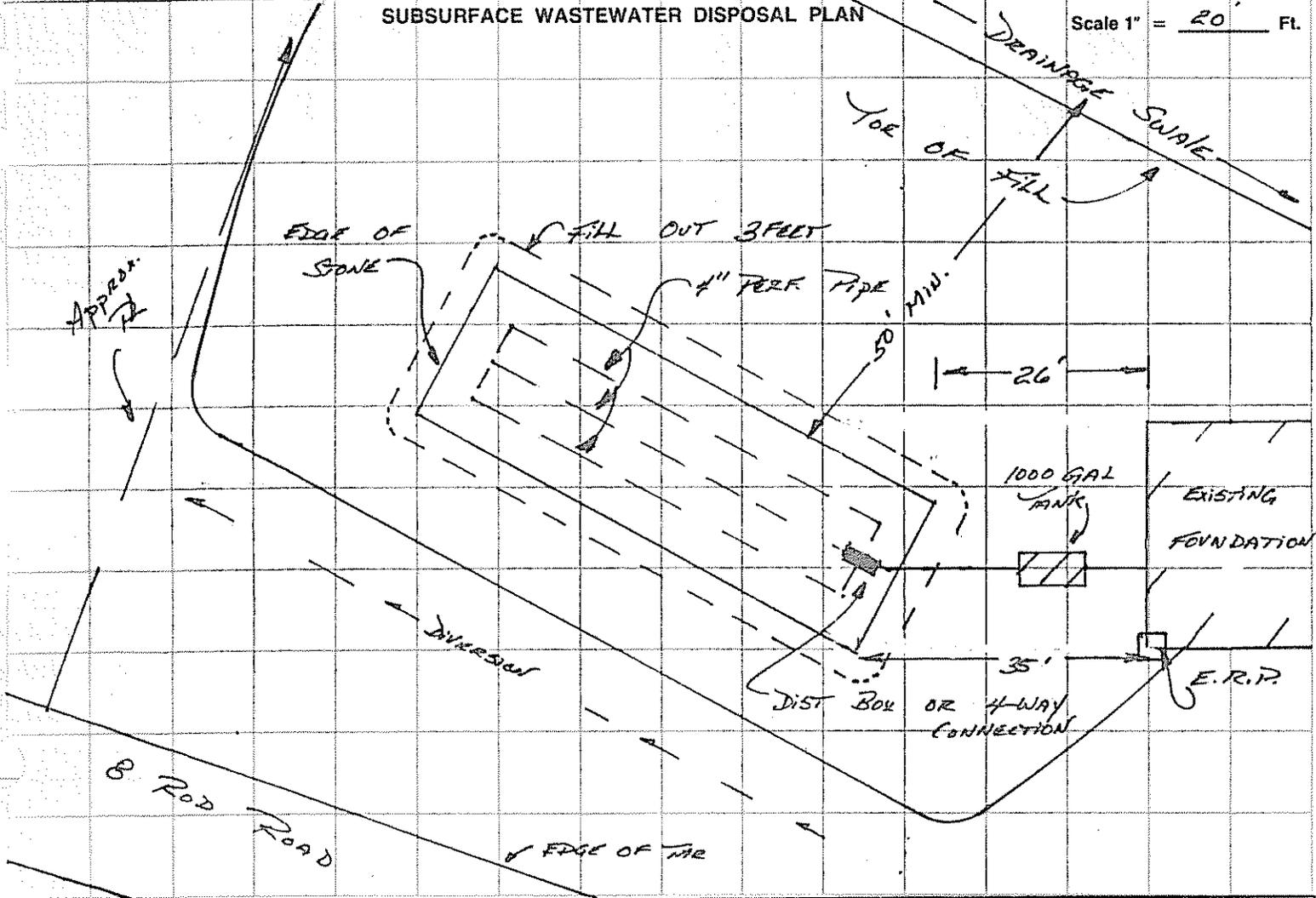
# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation: **ANGUSTA** Street, Road, Subdivision: **8 ROD ROAD JUSTIE S-D #14** Owners Name: **JUSTIE BROS.**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	36"	Reference Elevation is	24"	
Depth of Fill (Downslope)	72"	Bottom of Disposal Area	0"	
	(VARIES)	Top of Distribution Lines or Chambers	11"	

### DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = Ft.  
Horizontal: 1 inch = Ft.

### INSTALLATION NOTES:

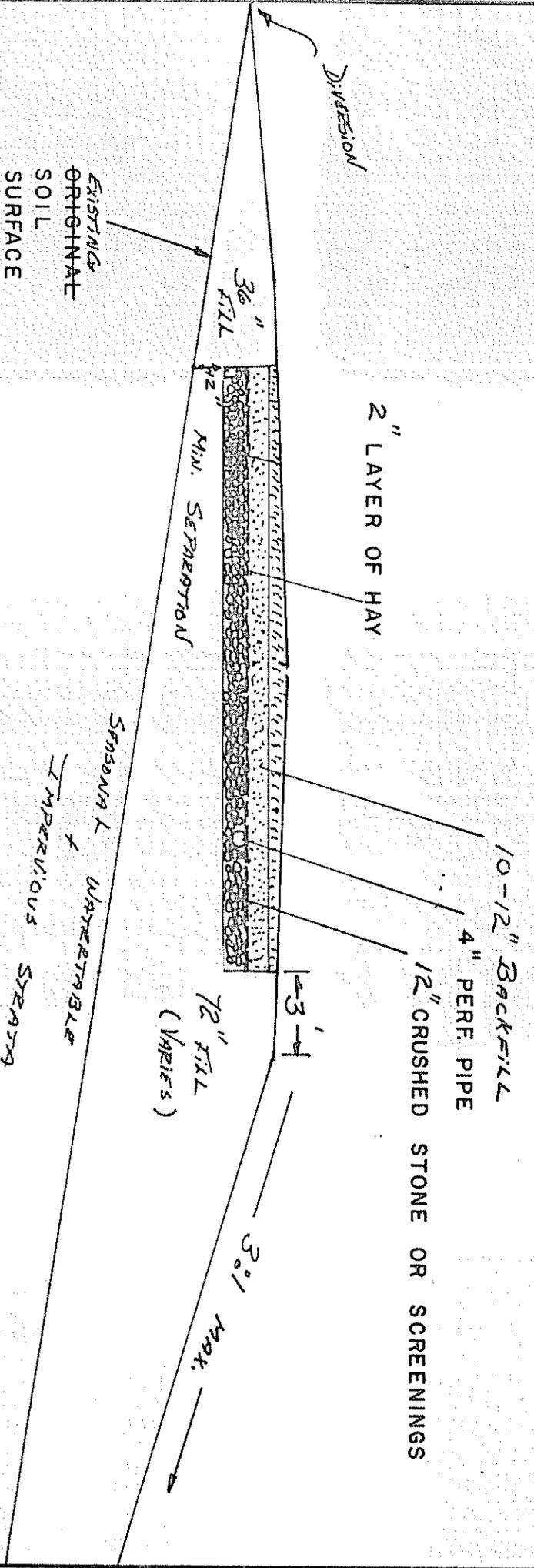
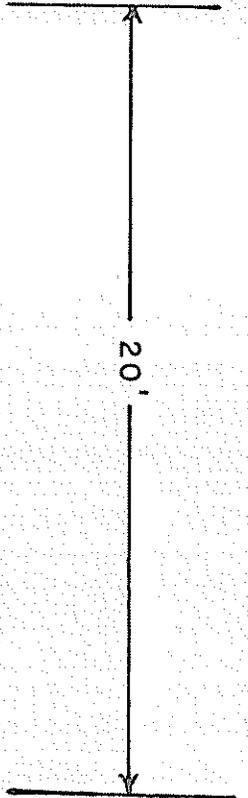
- REMOVE ORGANIC MATERIAL BENEATH BED + FILL EXTENSIONS
- DIVERT SURFACE WATER AWAY FROM BED
- BED MUST BE 50' MIN. FROM SWALE
- STATE VARIANCE REQ'D FOR INSTALLATION OF SYSTEM
- STABILIZE BED + FILL BY SEED + MULCH
- ROTOTILL EXISTING SOIL SURFACE, ADD 4" FILL + ROTOTILL AGAIN, ADD FILL + BRING TO ESTABLISHED ELEVATION.

SEE ATTACHED SHEET FOR X-SECTION

*Paul C. Beers*  
Site Evaluator or Professional Engineer's Signature

#56  
SE # / PE #

10/10/83  
Date



% SLOPE 15%  
 DIRECTION ←  
 OF SLOPE

Seasonal & Waterable  
 Imperious Steady

<b>PAUL A. BEERS</b> <b>SOILS CONSULTANT</b>	
DATE <u>10/10/85</u>	DRAWN BY <u>Baras</u>
SCALE <u>1" = 5'</u>	REVISED
<b>CROSS SECTION = BED SYSTEM</b>	
NAME <u>JUSTICE</u>	TOWN <u>MUSKOGEE</u>
DRAWING NUMBER ATTACHMENT TO: HHF 200	

**STATEMENTS, JUSTIFICATIONS and RESPONSIBILITIES**

**PROPERTY OWNER:** The property owner shall provide accurate information to the Site Evaluator, the LPI, and the Department and elaborate below the reasons for requesting the variance(s).

DOSTIE BROS DENIED DISPOSAL PERMIT WHICH WAS APPROVED 1-3-75 BY PAUL LINDBERG FOR LOT 1X AND NOW WE HAD PAUL BEER LAY OUT A NEW SYSTEM WHICH WE DOSTIE BROS SHOULD HAVE APPROVED

(Attach additional sheets, if needed)

I, Subir Datta, am the  owner  prospective owner of the subject property. I understand that the installation illustrated on the Application is not in total compliance with the Rules. I have indicated my reasons for requesting the variance(s). 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 Department of Human Services and make any corrections the Department finds necessary. By signing this 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.

Subir Datta 10/21/83  
 Signature of Owner Date  
 Signature of Prospective Purchaser

HAS REVIEW FEE BEEN ENCLOSED

**SITE EVALUATOR:**

When an undeveloped property is found to be unsuitable for subsurface wastewater disposal by a Licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a Variance to the requirements of the Rules, and the Evaluator in his professional opinion feels the variance request is justified and that the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department.

THIS LOT WAS ORIGINALLY APPROVED FOR SUBSURFACE SEWAGE DISPOSAL BY LIN-MAR ASSOCIATES AND A MOUND SYSTEM WAS DESIGNED. OWNER OBTAINED BUILDING PERMIT BASED ON LIN-MAR REPORT BUT WAS INFORMED THAT MOUNDS WERE NO LONGER AN APPROVED SYSTEM. OWNERS CONTACTED UNDERSIGNED TO DESIGN A SYSTEM WITHIN CURRENT CODE REQUIREMENTS. UNDER SIGNED FOUND SITE NOT TO BE IN COMPLIANCE WITH RULES AND PROPOSED ATTACHED SYSTEM FOR VARIANCE ... UNDERSIGNED MAKES NO GUARANTEE AS TO THE PROPER FUNCTIONING OF THIS SYSTEM.

I, PAUL A. BEERS, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgement, I certify that the proposed system design on the attached Application is the best alternative available, enhances the potential of the site for subsurface wastewater disposal, and that the system should function properly.

Paul A. Beers 10/10/83  
Signature of Site Evaluator Date

**MUNICIPAL OFFICER(s):** (Selectman, Councilman, Alderman, Mayor, Town Manager)

We the undersigned Officer(s) are aware that the applicant is applying to the Division of Health Engineering for a variance to the Subsurface Wastewater Disposal Rules as indicated in the application and that the proposed system does not meet the requirements of the Rules. The proposed variance request  does  does not comply with all Town Zoning requirements and the Municipality  does  does not endorse the variance request. If endorsed, the Town accepts the responsibility for any required enforcement of the Rules should the system malfunction.

<u>William A. ...</u>	<u>City Council</u>	<u>4/26/84</u>
<small>Municipal Officer's Signature</small>	<small>Officer Title</small>	<small>Date</small>
<u>Robert D. ...</u>	<u>" "</u>	<u>4/26/84</u>
<small>Municipal Officer's Signature</small>	<small>Officer Title</small>	<small>Date</small>
<u>[Signature]</u>	<u>City Manager</u>	<u>4/26/84</u>
<small>Municipal Officer's Signature</small>	<small>Officer Title</small>	<small>Date</small>

# NEW SYSTEM VARIANCE REQUEST

This form shall accompany an Application for a proposed new system which requires a Variance to certain provisions of the Subsurface Wastewater Disposal Rules. A check or money order for \$20.00 payable to the Treasurer of the State shall accompany this request form.

The Local Plumbing Inspector shall not issue a Permit for the installation of a subsurface wastewater disposal system until approval has been received from the Department.

## GENERAL INFORMATION

Town of AUGUSTA

Property Owner's Name: DOSTIE BROS.

System's Location: EIGHT ROD ROAD  
street

Property Owner's Address RFD #3 Box 899  
street

AUGUSTA ME. 04330  
Town state zip

## VARIANCE CONDITIONS

The Department has the authority to vary the requirements of the Rules in accordance with CMR 241.16 of the Rules if all the following criteria are satisfied:

- a. The variance request has the approval of the LPI.
- b. The variance request has received written endorsement from the elected municipal officers.
- c. The variance request demonstrates that there is no practical alternative for wastewater disposal, such as access to public sewer or the potential for an easement.
- d. The proposed system does not conflict with Seasonal Conversion, Shoreland Zoning or Resource Protection.
- e. The site offers potential for a system which will dispose of the wastewater with minimal threat to public health, safety, or welfare.
- f. The property owner has indicated an awareness of the variance and any limitations or added costs the proposed system may require.

## SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator)

Section of Code

1. INSTALL SYSTEM ON ORIGINALLY 98 Soils 6B3A
2. INSTALL FILL TAPER AT 3:1 INSTEAD OF 4:1 11D4
3. \_\_\_\_\_

If Variance request is for Sec. 6.B.3 Suitable Soil Conditions, fill in table below.

## SOIL, SITE AND ENGINEERING FACTORS FOR ASSESSING NEW SYSTEM VARIANCE POTENTIAL (SEE TABLE 16-1)

	CHARACTERISTIC	POINT ASSESSMENT
SOIL PROFILE	9	10
DEPTH TO GROUNDWATER	8" (ORIGINAL)	5
SIZE OF PROPERTY	38,000± #	-10
TERRAIN	Upland	5
WATERBODY SETBACK	7250'	5
WATER SUPPLY	Drilled	3
TYPE OF DEVELOPMENT	RES.	0
DESIGN FLOW	MIN.	0
SEPARATION DISTANCE	MIN	0
ADDITIONAL TREATMENT	None	0
<b>TOTAL POINT ASSESSMENT</b>		<b>18 PTS.</b>

## LOCAL PLUMBING INSPECTOR:

The Local Plumbing Inspector shall review all New System Variance requests prior to submission to the Division of Health Engineering. The LPI shall indicate the municipality's position in regards to the variance request. The LPI shall also inform the Division of Health Engineering of any facts relative to the variance request not specifically noted by the property owner or the site evaluator.

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, Robert StPierre, the undersigned, have visited the above property and find that it is not possible to conform to certain provisions of the Rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property.

Therefore, I recommend the issuance of a permit for the system's installation as proposed on the application.

Robert StPierre April 25 / 04  
Signature of L.P.I. Date