

NEW SYSTEM VARIANCE REQUEST

0105
SEP 2 1983

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: HENRY ULATOWSKI

System's Location: DAM POND ROAD
street

Property Owner's Address 781 LANING STREET
street

SOUTHINGTON, CT.
town

06489
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. HOLDING TANK - SEASONAL

SEC. 17

2. _____

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	N.A.	N.A.
DEPTH TO GROUNDWATER		
SIZE OF PROPERTY		
TERRAIN		
WATERBODY SETBACK		
WATER SUPPLY		
TYPE OF DEVELOPMENT		
DESIGN FLOW		
SEPARATION DISTANCE		
ADDITIONAL TREATMENT	✓	
TOTAL POINT ASSESSMENT		✓

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, _____, 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 B. Sturtevant
Signature of L.P.I.

Sept 15 1983
Date

City

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).

My MAIN REASON FOR REQUESTING THIS
VARIANCE IS THE CONVENIENCE OF A TOILET
FACILITY IN THE CAMP.

(Attach additional sheets, if needed)

I, HENRY ULATOWSKI, 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.

Henry J. Ulatowski 8-31-83
 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.

BASED ON LIMITED SEASONAL USE I RECOMMEND THAT
THIS VARIANCE REQUEST BE APPROVED.

(Attach additional sheets, if needed)

I, WILLIAM RIDEOUT, 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.

William W. Rideout 8/25/83
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.

William D. Berning Councilman 9/15/83
Municipal Officer's Signature *Officer Title* *Date*
Frederick F. Savage Councilman 9/15/83
Municipal Officer's Signature *Officer Title* *Date*
Richard J. Dumont Councilman 9-15-83
Municipal Officer's Signature *Officer Title* *Date*

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 289-3828

PROPERTY ADDRESS

Town Or Plantation: AUGUSTA

Street Subdivision Lot #: DAM FOND RD.

PROPERTY OWNERS NAME

Last: ULATOWSKI First: HENRY

Applicant Name: _____

Mailing Address of Owner/Applicant (if different): 781 LAINING ST. SOUTHWINGTON, CT.

0105 AUGUSTA ✓ *** 11020 ***

Date Permit Issued: 9/19/83 \$ 140 FEE

Robert B. Bestower L.P.I. # 1667 Double Charged

Local Plumbing Inspector Signature

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.

Henry Ulatowski
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.

Robert B. Bestower 9/21/83
Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- SEASONAL CONVERSION
- EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

- NO RULE VARIANCE REQUIRED
- NEW SYSTEM VARIANCE
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE
Attach Replacement System Variance Form
- Requires only Local Plumbing Inspector Approval
- Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM
(includes Alternative Toilet)
- ENGINEERED (> 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

- TREATMENT TANK (ONLY)
- HOLDING TANK
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED _____

THE FAILING SYSTEM IS:

- BED 3 TRENCH
- CHAMBER 4 OTHER _____

DISPOSAL SYSTEM TO SERVE:

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER SEASONAL COTTAGE
SPECIFY _____

SIZE OF PROPERTY: 18,000 ± ZONING: RES.

TYPE OF WATER SUPPLY: LAKE

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- SEPTIC: Regular Low Profile
- AEROBIC

SIZE: N.A. GALS

WATER CONSERVATION

- NONE
- LOW VOLUME TOILET
- SEPARATED LAUNDRY SYSTEM
- ALTERNATIVE TOILET
SPECIFY _____

PUMPING

- NOT REQUIRED
- MAY BE REQUIRED
(DEPENDS ON TREATMENT TANK LOCATION AND ELEVATION)
- REQUIRED

DOSE: _____ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

2 BEDROOM

DESIGN FLOW: 240
(GALLONS DAY)

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE: N.A. CONDITION: _____

DEPTH TO LIMING FACTOR: _____

SIZE RATINGS USED FOR DESIGN PURPOSES

- SMALL
- MEDIUM
- MEDIUM-LARGE
- LARGE
- EXTRA LARGE

N.A.

DISPOSAL AREA TYPE/SIZE

- BED: N.A. Sq Ft
- CHAMBER: _____ Sq Ft
- TRENCH: _____ Linear Ft
- OTHER: _____

SITE EVALUATOR STATEMENT

On 9/12/83 (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.

Allen W. Robinson # 51 9/25/83
Site Evaluator or Professional Engineer's Signature SE - PE Date

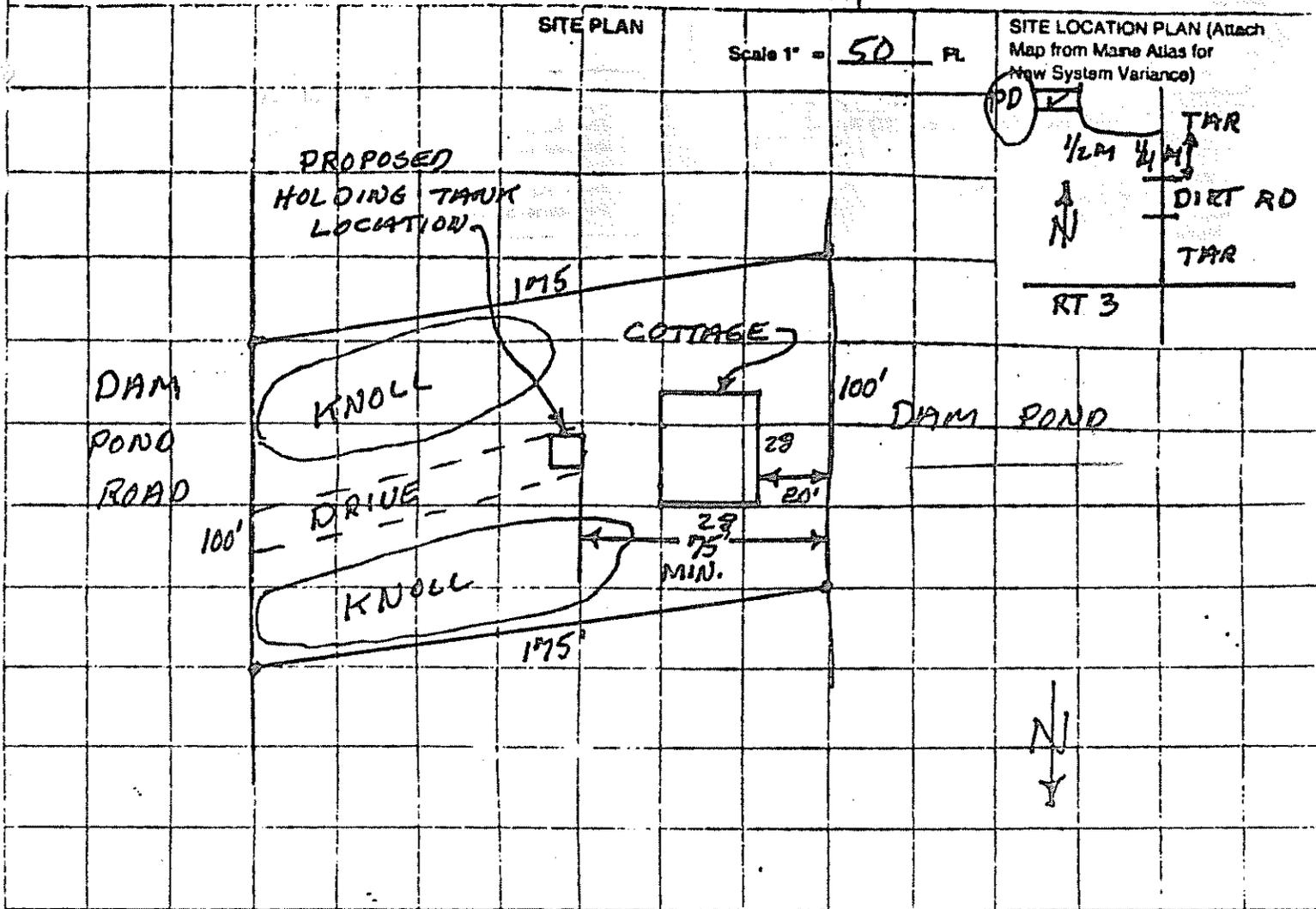
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole _____ Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15		N.A.		
20				
25				
30				
35				
40				
45				
50				

Soil Classification: _____ Slope: _____ Limiting Factor: _____

Ground Water Restricted Layer Shallow

Observation Hole _____ Test Pit Boring

* Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
25				
30				
35				
40				
45				
50				

Soil Classification: _____ Slope: _____ Limiting Factor: _____

Ground Water Restricted Layer Shallow

Meritt Redmont

51

HOLDING TANK PUMPER AGREEMENT PROPERTY OWNER STATEMENT

Department Human Services
Division of Health Engineering
Station #10, State House
Augusta, ME 04333

HOLDING TANK PUMPER

General Information

Name of Business DANIELS SEPTIC TANK SERV. Telephone 582-2232
Business Address RD#1 BOX 86A GARD, ME. 04345
Maximum Capacity of tank truck 2300 gallons
Wastes can be pumped and disposed of: all year round
(check one) limited to _____ Month to _____ Month

Wastes will be disposed of at the following Department of Environmental Protection licensed site(s).
Location of site(s): _____
or facility JACKSON AVE. AUGUSTA ME.

Agreement

I JERARD SMITH, while under contract, will be responsible for the pumping and maintenance of the
Pumper owner
holding tank on the property of HENRY ULATOWSKI located at PIKE VIEW SHORES
Property owner
OFF OF CROSS HILL ROAD
Property's Address
on the _____ year round, seasonal basis

Pumper / Property Owner Contract

I, JERARD SMITH, agree to pump and maintain the holding tank for HENRY ULATOWSKI, located at
Pumper owner Property owner
PIKE VIEW SHORES - OFF OF CROSS HILL RD.
Property Address
for the contract period of 9 (83) to 9 (84) with a new contract contingent upon the following

factor's list (dumping site accessibility, costs, etc.)

- AUGUSTA SANITARY DIST \$1.00 PER HUNDRED GALLONS
- _____
- _____

New Agreement / Contract Form

A copy shall be completed at the expiration of this contract and forwarded to the Department for its records. If this is not received by the Department, the Department's original Approval becomes null and void and therefore, a violation of the Rules.

Property Owner's Signature Henry Ulatowski Date 9/14/83
Pumper Proprieter's Signature Jerald C. Smith Date 9-14-83

(over)

HHE-230 RV7 80

PROPERTY OWNER

I, HENRY ULATOWSKI am the owner of COTTAGE located at
DAM POND RD. AUGUSTA
Property owner
(street) (town)

This facility was constructed
 was subdivided on or before 1972
 is proposed

The usage of this facility has been; will be: A TWO BEDROOM SUMMER
CAMP SERVING A FAMILY OF (2) FOR FIVE WEEKS
IN SUMMER & (3) WEEK ENDS DURING REST OF YEAR.

in 1972 (date).

Example: three bedroom summer camp serving a family of five for three weeks in summer and 12 weekends during the rest of the year.)

Proposed method of disposal is: WHEN HOLDING TANK REQUIRES PUMPING & DISPOSAL OF WASTE, I WILL HIRE A CONTRACTOR. (PRIVATE)
(The private wastewater disposal system described on the attached Application.)

I recognize that any approval the Division may give will be limited to the usage described above and may be enforced by requiring a covenant of the Deed.

Space for Notary Seal & Signature Below

Owner's Name - Printed HENRY ULATOWSKI
Address 781 LIVING ST.
SOUTHINGTON, CT. 06489
Signature: Henry Ulatowski
Date: 8-31-83

(Owner: Please complete and record original in Registry of Deeds and submit copy to Local Plumbing Inspector)

(Registrar Please cross-reference with book & page within)

We, (HENRY & MARIE ULATOWSKI), Owner(s)
Owner's Name(s)

of the property located at DAK POND Augusta
Street Town/City

the deed of which is recorded in Book # 1601, page # 461,
hereby acknowledge that the installation of a subsurface sewage disposal system on the aforesaid property required a waiver which has been approved by the State of Maine, Department of Human Services.

The waiver conditions and/or system is restricted as follows:

1. The existing two bedroom seasonal cottage shall be restricted to two bedrooms and shall not be expanded beyond two bedrooms nor converted to year-round usage without prior approval of the Division of Health Engineering.

and is approved subject to the implementation of the above conditions and, in the event of any future failure of the system, to the maintenance, correction, or replacement of said system by the owner of said property at the time of such failure.

Signature(s) Henry Ulatowski
Marie Rose Ulatowski

State of Maine

(County) Kennebec ss

Subscribed and sworn to by the above named Henry Ulatowski
(and Marie Rose Ulatowski) this day of September 19, 1983,
at Augusta, Maine.

Before me Michelle Guerin
Notary Public

My Commission Expires:

May 7, 1989