

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation: Augusta

Street Division Lot #: Daniel Rd off Cross Hill Rd

PROPERTY OWNERS NAME

Last: Morton First: Edgar C.

Applicant Name: Mayreen Morton

Mailing Address of Owner/Applicant (If Different): P.O. Box 11006 Augusta, Me. 04330

M4L57

AUGUSTA PERMIT # 1,161 TOWN COPY

Date Permit Issued: 9/23/87 \$ 1720.00 FEE If Double Fee Charged

[Signature] Local Plumbing Inspector Signature L.P.I. # 008

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] Signature of Owner/Applicant Date: 9-23-87

Caution: Inspection Required

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

[Signature] Local Plumbing Inspector Signature Date Approved: 9-25-87

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <p>1. <input type="checkbox"/> NEW SYSTEM</p> <p>2. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p>THIS APPLICATION REQUIRES:</p> <p>1. <input type="checkbox"/> NO RULE VARIANCE</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p>3. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>a. <input type="checkbox"/> Requiring Local Plumbing Inspector Approval</p> <p>b. <input type="checkbox"/> Requires State and Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</p>	<p>INSTALLATION IS:</p> <p>COMPLETE SYSTEM</p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK _____ GAL</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p>SEASONAL CONVERSION</p> <p>to be completed by the LPI</p> <p>5. <input type="checkbox"/> SYSTEM COMPLIES WITH RULES</p> <p>6. <input type="checkbox"/> CONNECTED TO SANITARY SEWER</p> <p>7. <input type="checkbox"/> SYSTEM INSTALLED - P# _____</p> <p>8. <input type="checkbox"/> SYSTEM DESIGN RECORDED AND ATTACHED</p>	<p>IF REPLACEMENT SYSTEM:</p> <p>YEAR FAILING SYSTEM INSTALLED <u>~69</u></p> <p>THE FAILING SYSTEM IS:</p> <p>1. <input type="checkbox"/> BED 3. <input type="checkbox"/> TRENCH</p> <p>2. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER: <u>Out House</u></p>	<p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER <u>Camp</u> SPECIFY _____</p>
<p>SIZE OF PROPERTY: <u>~3 ac</u></p> <p>ZONING: <u>Shoreland</u></p>	<p>TYPE OF WATER SUPPLY</p> <p><u>Dug Well</u></p>	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <u>1000</u> GALS.</p>	<p>WATER CONSERVATION</p> <p>1. <input checked="" type="checkbox"/> NONE</p> <p>2. <input type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY: _____</p>	<p>PUMPING</p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED</p> <p>DOSE: _____ GALS.</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p><u>2 Bedroom Camp minimum flow</u></p>		
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <table style="width: 100%;"> <tr> <td>PROFILE: <u>3</u></td> <td>CONDITION: <u>C</u></td> </tr> </table> <p>DEPTH TO LIMITING FACTOR: <u>20.</u></p>	PROFILE: <u>3</u>	CONDITION: <u>C</u>		<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input checked="" type="checkbox"/> MEDIUM-LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRA LARGE</p>	<p>DISPOSAL AREA TYPE/SIZE</p> <p>1. <input checked="" type="checkbox"/> BED <u>600</u> Sq. Ft.</p> <p>2. <input type="checkbox"/> CHAMBER _____ Sq. Ft.</p> <p><input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input checked="" type="checkbox"/> OTHER: <u>Infiltrator</u> <u>300 ft²</u></p>
PROFILE: <u>3</u>	CONDITION: <u>C</u>				

SITE EVALUATOR STATEMENT

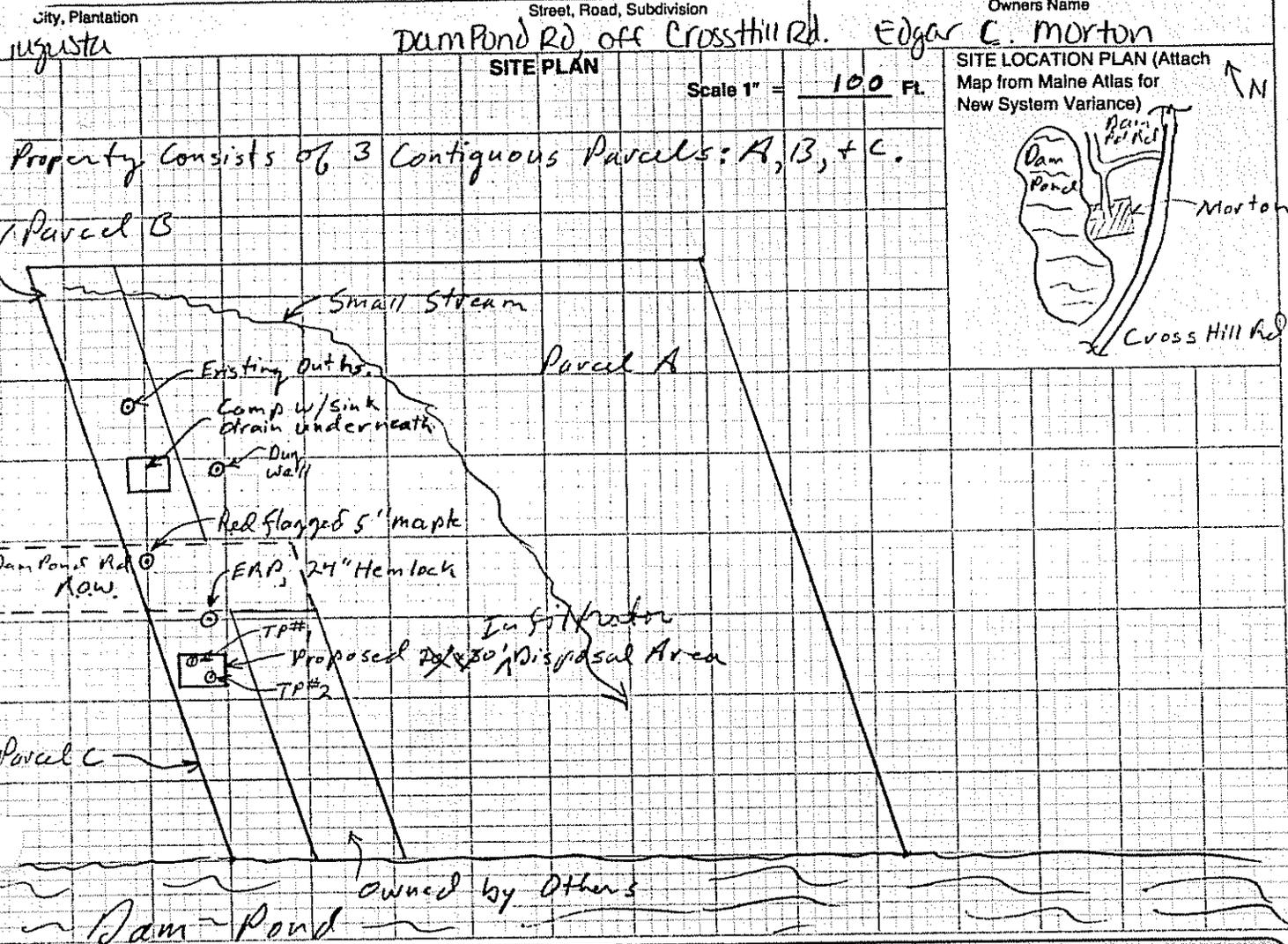
On 6/17/87 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

[Signature] Site Evaluator Signature SE# 201 Date 6/17/87

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)																		
Observation Hole <u>TP1</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring																		
2" Depth of Organic Horizon Above Mineral Soil																		
Texture	Consistency	Color	Mottling															
0-6" Sandy loam	Loose	orange brown																
6-15" v. sandy loam	friable	yellow brown																
15-20" sandy loam		ol. brown	common distinct															
20-30" loam	firm																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Soil Profile: <u>3</u></td> <td>Classification Condition: <u>C</u></td> <td>Slope: <u>11</u> %</td> <td>Limiting Factor: <u>20</u></td> <td><input checked="" type="checkbox"/> Ground Water</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Restrictive Layer</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Bedrock</td> </tr> </table>				Soil Profile: <u>3</u>	Classification Condition: <u>C</u>	Slope: <u>11</u> %	Limiting Factor: <u>20</u>	<input checked="" type="checkbox"/> Ground Water					<input type="checkbox"/> Restrictive Layer					<input type="checkbox"/> Bedrock
Soil Profile: <u>3</u>	Classification Condition: <u>C</u>	Slope: <u>11</u> %	Limiting Factor: <u>20</u>	<input checked="" type="checkbox"/> Ground Water														
				<input type="checkbox"/> Restrictive Layer														
				<input type="checkbox"/> Bedrock														
Observation Hole <u>TP2</u> <input checked="" type="checkbox"/> Test Pit <input type="checkbox"/> Boring																		
2" Depth of Organic Horizon Above Mineral Soil																		
Texture	Consistency	Color	Mottling															
0-6" sandy loam	Loose	or. brn.																
6-15" v. sandy loam	friable	yl. brn.																
15-20" sandy loam		ol. brn.	comm. distinct															
20-30" loam	firm																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Soil Profile: <u>3</u></td> <td>Classification Condition: <u>C</u></td> <td>Slope: <u>11</u> %</td> <td>Limiting Factor: <u>18</u></td> <td><input checked="" type="checkbox"/> Ground Water</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Restrictive Layer</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td><input type="checkbox"/> Bedrock</td> </tr> </table>				Soil Profile: <u>3</u>	Classification Condition: <u>C</u>	Slope: <u>11</u> %	Limiting Factor: <u>18</u>	<input checked="" type="checkbox"/> Ground Water					<input type="checkbox"/> Restrictive Layer					<input type="checkbox"/> Bedrock
Soil Profile: <u>3</u>	Classification Condition: <u>C</u>	Slope: <u>11</u> %	Limiting Factor: <u>18</u>	<input checked="" type="checkbox"/> Ground Water														
				<input type="checkbox"/> Restrictive Layer														
				<input type="checkbox"/> Bedrock														

Hammond Benton
Site Evaluator Signature

201
SE#

6/21/87
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

AUGUSTA DAM POND RD OFF CROSS HILL RD ED

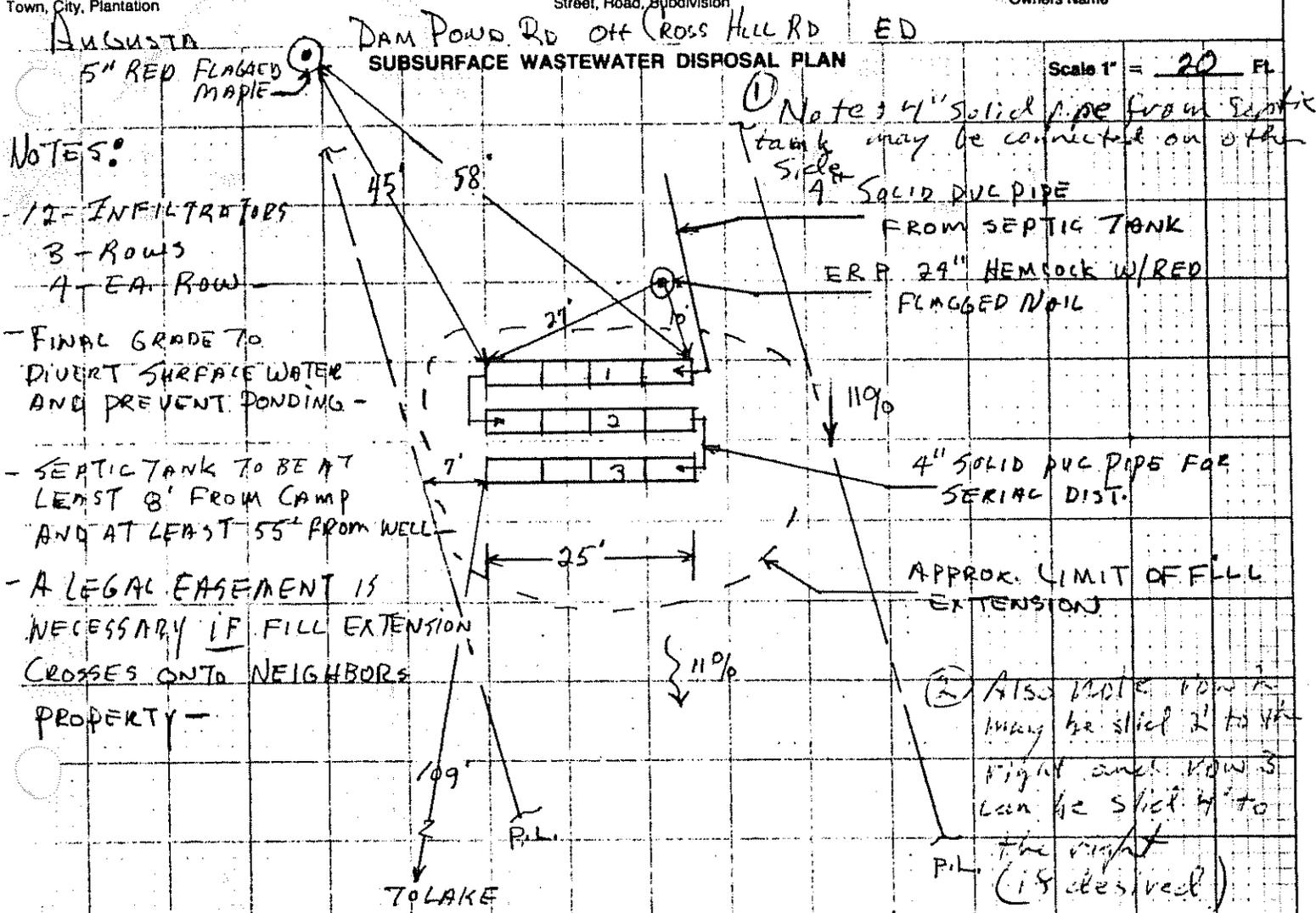
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' FL

NOTES:

- 12 - INFILTRATORS
- 3 - ROWS
- 4 - EA. ROW
- FINAL GRADE TO DIVERT SURFACE WATER AND PREVENT PONDING -
- SEPTIC TANK TO BE AT LEAST 8' FROM CAMP AND AT LEAST 55' FROM WELL
- A LEGAL EASEMENT IS NECESSARY IF FILL EXTENSION CROSSES ONTO NEIGHBORS PROPERTY -

① Note: 4" Solid pipe from septic tank may be connected on other side



4" SOLID PVC PIPE FOR SERIAL DIST.

APPROX. LIMIT OF FILL EXTENSION

② Also note how it may be sliced 2' to the right and how it can be sliced 4' to the right (if desired)

FILL REQUIREMENTS

Depth of Fill (Upslope) 15"
Depth of Fill (Downslope) 19"

CONSTRUCTION ELEVATIONS

Reference Elevation is 0'00"
Bottom of Disposal Area SEE BELOW
Top of Distribution Lines or Chambers

ELEVATION REFERENCE POINT

LOCATION & DESCRIPTION
ERP IS RED FLAGGED NAIL IN 24" HEMLOCK

DISPOSAL AREA CROSS SECTION

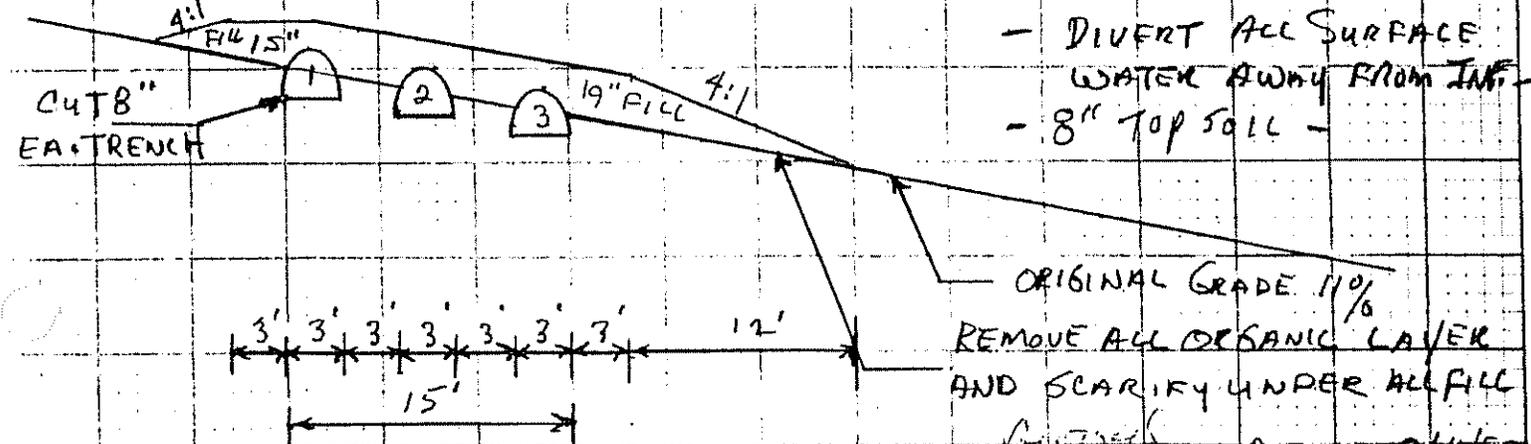
BOTTOM	TOP
T#1 - 79"	- 64"
T#2 - 87"	- 72"
T#3 - 95"	- 80"

Scale:

Vertical: 1 inch = 5' FL
Horizontal: 1 inch = 10' FL

- CLEAN SANDY LOAM TO LOAMY SAND FILL -

- DIVERT ALL SURFACE WATER AWAY FROM INF -
- 8" TOP SOIL -



ORIGINAL GRADE 11%
REMOVE ALL ORGANIC LAYER AND SCARIFY UNDER ALL FILL

Vanessa Baylun
Site Evaluator Signature

201
SE#

9/21/87 REVISED 9/16/87
Date Page 3 of 3

This revision affects certain portions of my original plans dated 6/21/87

*9. owner & well
for conversion*

Replacement System Variance Request

IE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an Application for the proposed replacement system which is in noncompliance 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 with LPI approval limitations can be met.

1. The replacement system is correcting a malfunction or an unlicensed wastewater discharge system.
2. A replacement 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 does not conflict with Seasonal Conversion Permit (30 MRSA § 3223) or with Mandatory Shoreland Zoning (12 MRSA § 4811).
6. 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

Town Code

Permit No. E

Date Permit Issued 9-23-87
month/day/yr.

Property Owner's Name: Edgar C. Norton Tel. No. 623-3825

System's Location: Ham Pond Rd off Cross Hill Rd
Street
Augusta MAINE
Town Zip

Property Owner's Address:
(if different from above) P.O. Box 11006
Street
Augusta MAINE 04330
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, 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, 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.

Edgar C. Norton by Maureen R. Norton Property Owner's Signature
Date 7-2-87

Variance Category	Variance Requested	Limit of LPI's Approval Authority		Variance Requested to:	
Soils Soil Profile Soil Condition 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 2. Well: < 2000 gal/day a. Neighbor's b. Property Owner's 3. Water Supply Line	100a 100b 50' See Note 'a'	300a 100b 60' 55'
Waterbodies	1. Perennial	60'	60'		
	2. Intermittent	25'	25'		
	3. Manmade drainage ditch	15'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With basement	See Note	15'		
	2. Without basement	'a'	10'		
Property Line		5'	5'		5'

Other Specify: Note: This application is for a replacement system. A future seasonal conversion may be requested w/ these same plans.

- Footnotes:
- a. This setback distance cannot be reduced by variance. See Table 6-2.
 - b. A variance to reduce the 100 foot setback distance to a minimum of 80 feet may be granted only with the neighbor's written permission.
 - c. Sufficient distance shall be maintained to assure that the top of the fill does not extend to the 3:1 slope.

Robert D. Simpson
Site Evaluator's Signature

6/21/87
Date

LPI Statement

I, George Soucy Jr, LPI for the Town of Augusta 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 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, do not approve) 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: This camp was originally pumped into for the well and the water quality is good.

George Soucy Jr
LPI's Signature

9-22-87
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

May 21, 1987

To Whom It May Concern:

We, Edgar C. & Martha J. Morton, authorize Maureen R. Morton to act as our agent in the building improvements and septic System construction of our camp at Dam Pond in Augusta, Maine. Charles Martell will be the builder.

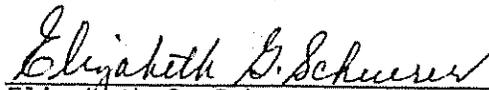
Edgar C. Morton



Martha J. Morton



Signed & acknowledged in my presence on May 21, 1987.
New Smyrna Beach, Florida
County of Volusia



Elizabeth G. Schuerer

NOTARY PUBLIC, STATE OF FLORIDA.
MY COMMISSION EXPIRES JULY 11, 1990.
BONDED THRU NOTARY PUBLIC UNDERWRITERS

