

PA 9/10/13

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY LOCATION

City, Town, or Plantation: **AUGUSTA**

Street or Road: **#3445 NORTH BELFAST RD. AVE**

Subdivision, Lot #: **M4/L114**

OWNER/APPLICANT INFORMATION

Name (last, first, MI): **MARINO MARK** Owner Applicant

Mailing Address of Owner/Applicant: **PO BOX 215 DRESDEN, ME 04342**

Daytime Tel.: **737-6063**

AUGUSTA PERMIT #6843 TOWN COPY
Date Permit Issued: **9/10/13** \$250.00 fee
15.00
LPI # **880**

May R. Fuller

Owner or Applicant Statement

I state and acknowledge 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.

Mark Marino **9/6/2013**
Signature of Owner or 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 Application.

May R. Fuller **10/3/13**
Local Plumbing Inspector Signature (1st) Date Approved (2nd) Date Approved

PERMIT INFORMATION

<p>TYPE OF APPLICATION</p> <p><input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced: CESSPOOL Year Installed: UNK.</p> <p><input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. ≥25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion</p>	<p>THIS APPLICATION REQUIRES</p> <p><input type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input checked="" type="checkbox"/> 3. Replacement System Variance <input checked="" type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Approval</p>	<p>DISPOSAL SYSTEM COMPONENTS</p> <p>1. <input checked="" type="checkbox"/> Complete Non-engineered System 2. <input type="checkbox"/> Primitive System (graywater & oil 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+) 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</p>
<p>SIZE OF PROPERTY</p> <p>+/-36 <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres</p>	<p>DISPOSAL SYSTEM TO SERVE</p> <p>1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: 2 2. <input type="checkbox"/> Multiple Family Dwelling, No of Units: _____ 3. <input type="checkbox"/> Other: _____ (SPECIFY)</p> <p>Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	<p>TYPE OF WATER SUPPLY</p> <p>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:</p>
<p>SHORELAND ZONING</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY 1000 gallons</p>	<p>DISPOSAL FIELD TYPE & SIZE</p> <p>1. <input checked="" type="checkbox"/> Stone Bed 2. Stone Trench 3. <input type="checkbox"/> Proprietary Device a. <input type="checkbox"/> cluster array c. <input type="checkbox"/> Linear b. <input type="checkbox"/> regular load d. <input type="checkbox"/> H-20 loaded 4. <input type="checkbox"/> Other: _____ SIZE: 700 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.</p>	<p>GARBAGE DISPOSAL UNIT</p> <p>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</p>	<p>DESIGN FLOW</p> <p>200 gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 4A (dwelling unit(s)) 2. <input type="checkbox"/> Table 4C (other facilities) SHOW CALCULATIONS - - for other facilities - 2 BEDROOMS AT 100 GALLONS PER DAY EACH 3. <input type="checkbox"/> Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. 44 d 21 m 34 s Lon. 69 d 38 m 31 s if g.p.s. state margin of error 18'</p>
<p>SOIL DATA & DESIGN CLASS</p> <p>PROFILE CONDITION: 3 / C at Observation Hole • TP-1 Depth 28 " of Most Limiting Soil Factor</p>	<p>DISPOSAL FIELD SIZING</p> <p>1. <input type="checkbox"/> Medium - 2.6 sq.ft./gpd 2. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq.ft./gpd 3. <input type="checkbox"/> Large - 4.1 sq.ft./gpd 4. <input type="checkbox"/> Extra-Large - 5.0 sq.ft./gpd</p>	<p>EFFLUENT/EJECTOR PUMP</p> <p>1. <input type="checkbox"/> Not required 2. <input checked="" type="checkbox"/> May be required 3. <input type="checkbox"/> Required Specify only for engineered systems: DOSE: _____ Gallons</p>	

SITE EVALUATOR STATEMENT

I certify that on **8/29/13** (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).

Norman "Bud" Harris **#348** **8/29/13**
Site Evaluator Signature SE # Date
NORMAN "BUD" HARRIS (HARRIS LAND SOLUTIONS, INC.) (207) 892-2435 hlsinct@gmail.com
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SEP 06 2013
Page 1 of 3
HHE-200 Rev. 08/2011

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
 Div of Environmental Health, II SHS
 (207) 287-5672 FAX (207) 287-3165

Town, City, Plantation
AUGUSTA

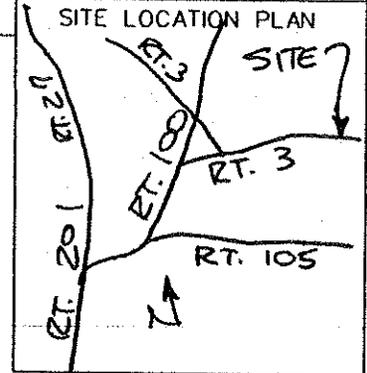
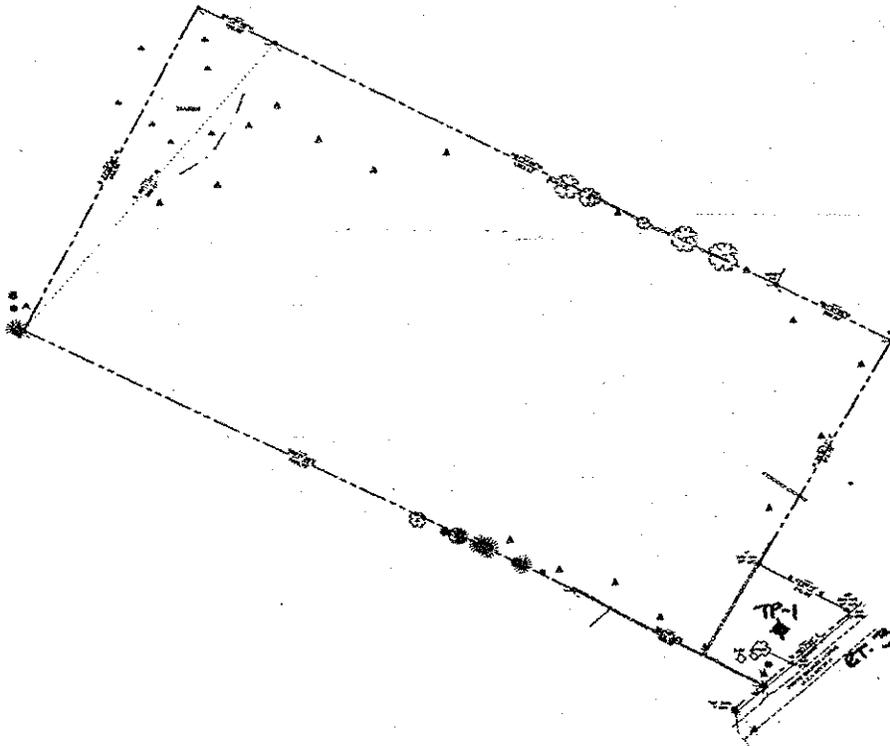
Street, Road, Subdivision
#3445 NORTH BELFAST RD.

Owner's Name
MARK MARINO

SITE PLAN

Scale 1" = NTS ft. or as shown

SITE LOCATION PLAN



NORTH ORIENTATION APPROXIMATE

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

Observation Hole TP-1 Test Pit Boring
1 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	SANDY LOAM	FRIABLE	DARK BROWN	
10	LOAMY SAND	FRIABLE	BROWN	
20	LOAMY FINE SAND	FRIABLE	YELLOW BROWN	
30				RESTRICTIVE
40				
50				

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification 3 C Slope 2-5% Limiting Factor 2B"
 Ground Water Restrictive Layer
 Bedrock Pit Depth

Soil Classification _____ Slope _____% Limiting Factor _____"
 Ground Water Restrictive Layer
 Bedrock Pit Depth

Norman Harris
 Site Evaluator Signature

#348
 SE *

8/29/13
 Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation
AUGUSTA

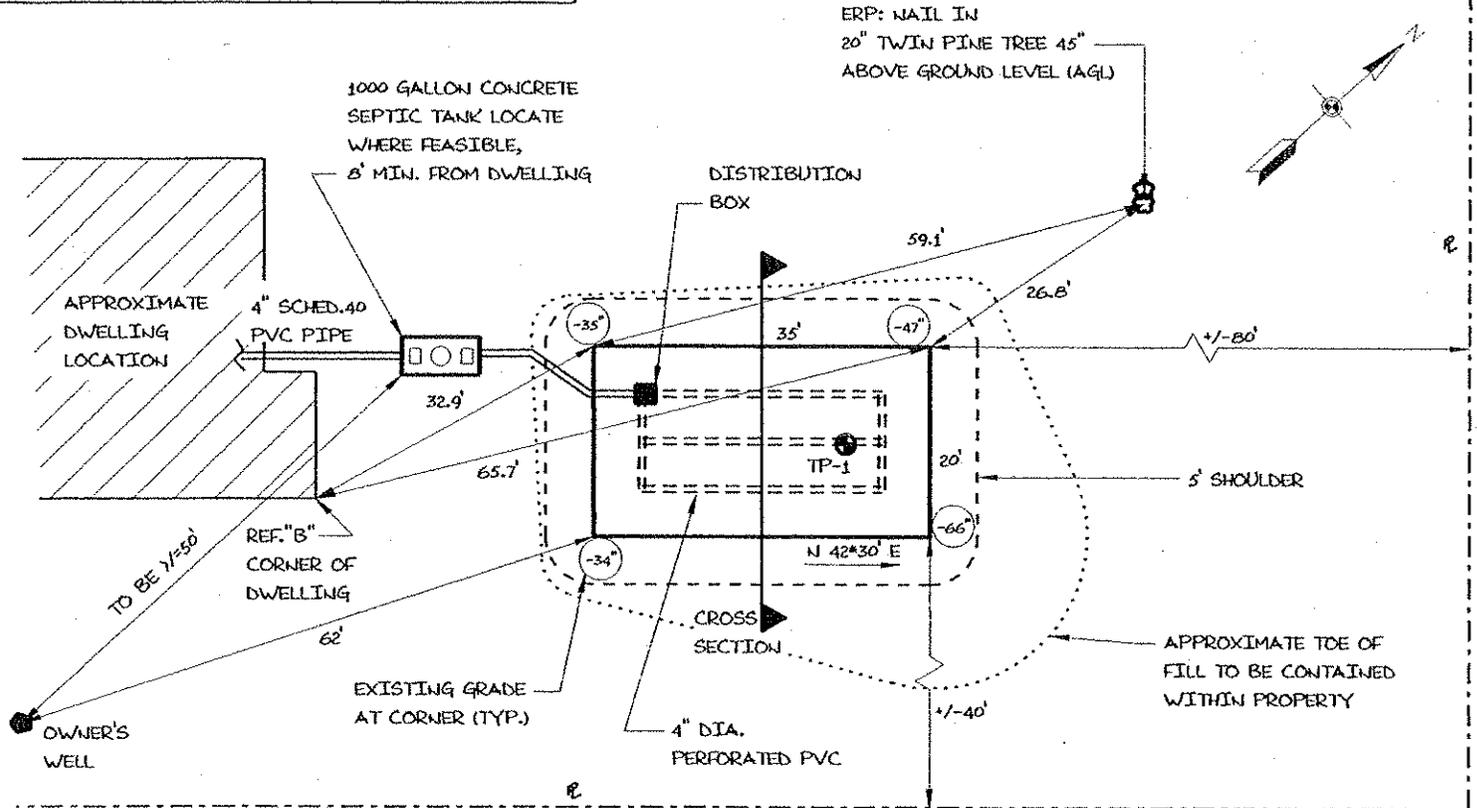
Street, Road, Subdivision
#3445 NORTH BELFAST RD.

Owner or Applicant Name
MARK MARINO

INSTALLER TO CONFIRM ELEVATIONS
NECESSARY TO OBTAIN PROPER GRAVITY
DISTRIBUTION OR PUMP STATION MAY BE REQUIRED

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20' FT.



* IT IS THE OWNER'S RESPONSIBILITY TO VERIFY THAT THERE ARE NO UNIDENTIFIED WELLS LOCATED WITHIN 100' OF DISPOSAL SYSTEM.
* ALL INFORMATION CONTAINED WITHIN THIS APPLICATION IS AS REPRESENTED BY OWNER, APPLICANT OR OWNER'S/APPLICANT'S REPRESENTATIVE. THE SITE EVALUATOR WILL NOT BE HELD RESPONSIBLE FOR ANY PERTINENT FACTORS NOT IDENTIFIED, DISCLOSED OR INACCURATELY DISCLOSED.

FILL REQUIREMENTS

Depth of Fill (Upslope) ± 2" - 14"
Depth of Fill (Downslope) ± 1" - 33"

CONSTRUCTION ELEVATIONS

Finished Grade Elevation -33"
Top of Distribution Pipe or Proprietary Device -45"
Bottom of Disposal Area -56"

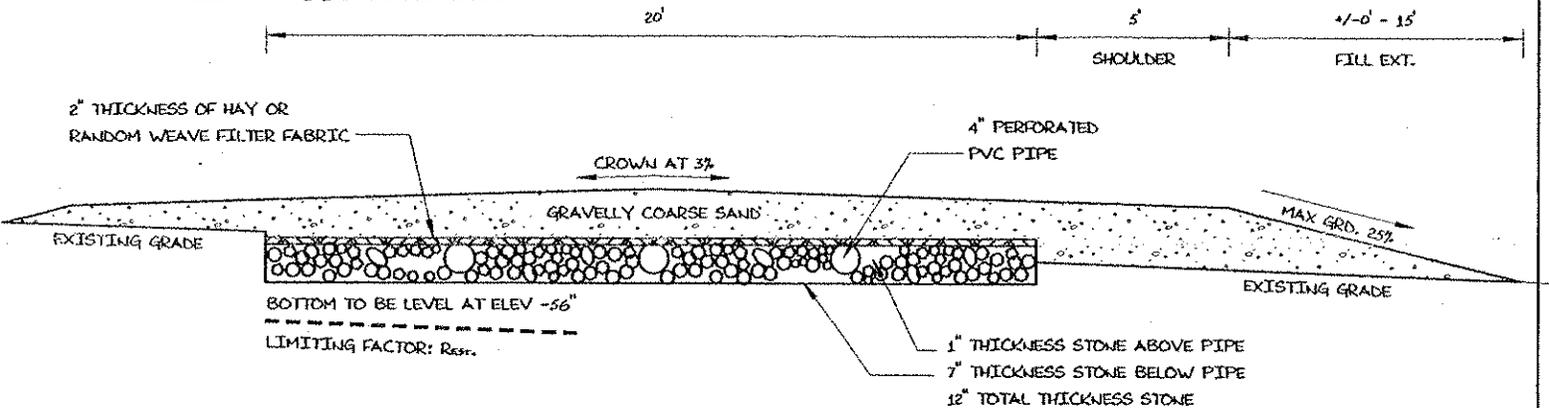
ELEVATION REFERENCE POINT

Location & Description NAIL IN 20" TWIN PINE 45" AGL
Reference Elevation -0"

DISPOSAL FIELD CROSS-SECTION

SCALES:
VERTICAL: 1" = 5 FT
HORIZONTAL: 1" = 5 FT

NOTES: * BACKFILL TO BE GRAVELLY COARSE SAND FREE OF FINES AND ORGANIC DEBRIS
* FINAL GRADES SHALL BE LOAMED, SEEDED AND OR MULCHED TO PREVENT EROSION
* ANY STONE REQUIRED TO BE FREE OF FINES AND ORGANIC DEBRIS AT A SIZE OF +/- 1 1/2" IN DIAMETER.

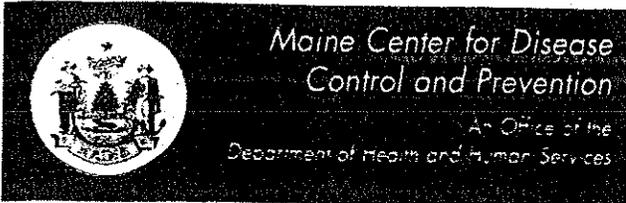


* WHERE POSSIBLE, THE AREA UNDER THE DISPOSAL FIELD AND EXTENSIONS SHALL BE SCARIFIED 6 TO 8 INCHES TO CREATE A TRANSITION ZONE

Site Evaluator Signature
NORMAN "BUD" HARRIS (HARRIS LAND SOLUTIONS, INC.) (207) 892-2435

#348
SE

8/29/13
Date



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION Town of AUGUSTA

Property Owner's Name: MARK MARINO Tel. No.: 737-6063

System's Location: #3445 No. BELFAST RD.

Property Owner's Address: P.O. BOX 215 Zip Code 04342

e-mail address: DRESDEN, ME.

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)

	SECTION OF RULE
1. <u>62' SETBACK - FIELD TO WELL (FURTHER THAN EXIST.)</u>	<u>8, TABLE 2A</u>
2. <u>50' SETBACK - TANK TO WELL (SAME LOCATION)</u>	<u>" "</u>
3. _____	_____

SITE EVALUATOR

When a 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 Rules, and the Evaluator in his professional opinion feels the variance request is justified and 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. Attach a separate sheet if necessary.

I, NORMAN HARRIS, 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 judgment, 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.

[Signature] #348 8/29/13

SIGNATURE OF SITE EVALUATOR DATE

PROPERTY OWNER

I, _____, am the owner agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with 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.

SIGNATURE OF OWNER
 AGENT FOR THE OWNER

DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all variance requests prior to rendering a decision.

I, Ray P. Yankin, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) approve the requested variance. I (will will not) issue a permit for the system's installation as proposed by the application.

Ray P. Yankin
LPI Signature

9/10/13
Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all variance requests prior to forwarding to the Division of Environmental Health.

I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) recommend the issuance of a permit for the system's installation as proposed by the application.

LPI Signature

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

Notes: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)

2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Distance		
Additional Treatment		
TOTAL POINT ASSESSMENT:		

Minimum Points (Check One): Outside Shoreland Zone-50 Inside Shoreland Zone-65 Subdivision-65

STATEMENT TO OWNER/APPLICANT

(attachment to HHE-200)

A Site Evaluation as defined in The Maine Subsurface Wastewater Disposal Rules (January 18, 2011) is:

“ The practice of investigating, evaluating, and reporting the basic soil and site conditions that apply to wastewater treatment and disposal along with a system design in compliance with this code.”

All reported site features are interpreted from information supplied by the owner, applicant or representative. This information in turn is utilized as means to design a disposal system that complies with the Maine Subsurface Wastewater Disposal Rules. The owner, applicant, and/or representative prior to signing of this application must verify this information as correct.

Minimum separation distances required for disposal systems less than 1000 gpd (unless reduced by variance)

Well (owner or neighbor) to any disposal component 100'
Location of neighbor's wells is often difficult to observe. Many wells may be buried or hidden, making them unidentifiable. Confirmation from neighbor that their well is greater than 100' must be obtained prior to installation.

- Water supply line to any disposal component 10'
- Building (full basement) to disposal area 20'
- Building (no full basement) to disposal area 15'
- Building to Septic Tank 8'
- Waterbody (major) to any septic component 100'
- Waterbody (minor) to any septic component 50'
- Property line to any septic component 10'*

* All fill material (fill extension) to be contained within property with 4:1 slope

If after review it is agreed that all information is accurate, the following steps should be taken.

1. Sign the Owner or Applicant Statement section on page 1 of the application
2. Sign any Variance forms or any special circumstance forms that may be attached
3. If required, secure any neighbor variance/release form signatures
4. Repeat signatures on all copies
5. Submit 3 copies to your local Code Enforcement for review and approval

Prior to installation it is recommended that all abutting property owners be notified.

Harris Land Solutions, Inc.
(207) 892-2435