

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

**PROPERTY ADDRESS**

Town Or Plantation: Augusta

Street Subdivision Lot #: Bond Brook Road

**PROPERTY OWNERS NAME**

Last: Ballard First: Millard

Applicant Name: Bond Brook Rd.

Mailing Address of Owner/Applicant (If Different):

**Caution: Permit Required**

*The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.*

**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 \_\_\_\_\_ 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 \_\_\_\_\_ 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 1920's

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: overboard

**DISPOSAL SYSTEM TO SERVE:**

- SINGLE FAMILY DWELLING
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER \_\_\_\_\_ SPECIFY \_\_\_\_\_

SIZE OF PROPERTY  
3± Ac.

ZONING  
Shoreland

**TYPE OF WATER SUPPLY**  
City water *Records show (260 gpd use)*

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

**TREATMENT TANK**

- SEPTIC:  Regular  Low Profile
- AEROBIC

SIZE: 1500 GALS.

**WATER CONSERVATION**

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

SPECIFY: \_\_\_\_\_

**PUMPING**

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

DOSE: \_\_\_\_\_ GALS.

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

See above

DESIGN FLOW: 360 (GALLONS/DAY)

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**

PROFILE	CONDITION
<u>5</u>	<u>B</u>

DEPTH TO LIMITING FACTOR: 40-42

**SIZE RATINGS USED FOR DESIGN PURPOSES**

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

**DISPOSAL AREA TYPE/SIZE**

- BED 1000 Sq. Ft.
- CHAMBER \_\_\_\_\_ Sq. Ft.  
 REGULAR  H-20
- TRENCH \_\_\_\_\_ Linear Ft.
- OTHER: \_\_\_\_\_

**SITE EVALUATOR STATEMENT**  SITE EVALUATION WAIVED BY LOCAL OPTION

On June 20, 1983 (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.

Stephen E. Hoodwin 65 Aug. 30, 1983  
 Site Evaluator or Professional Engineer's Signature SE# / PE# Date

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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

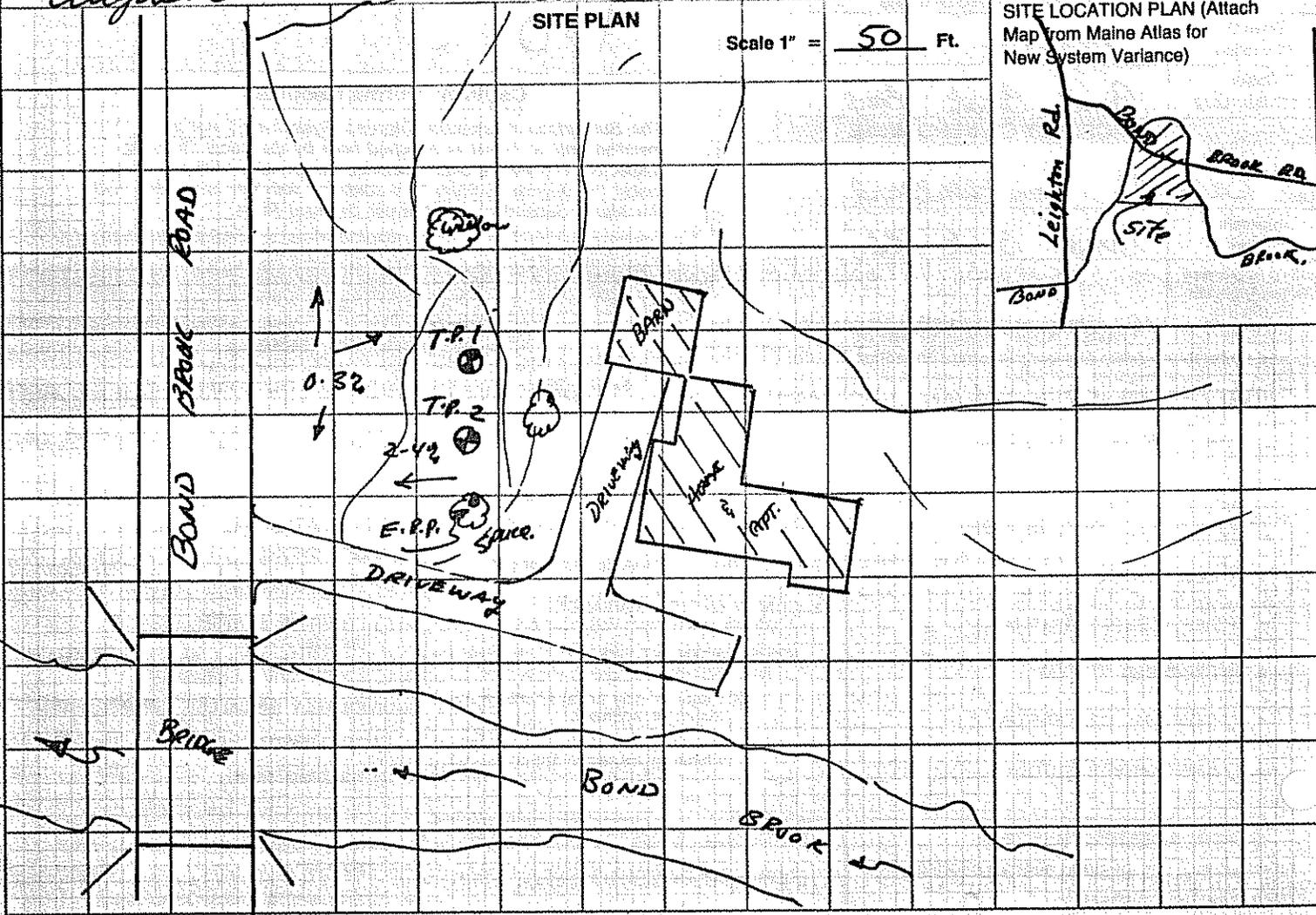
*Augusta*

*Bond Brook Road Millard Bellard*

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	Loamy Sand		Brown	
6 - 10				
10 - 15	Sand		Reddish Brown	
15 - 20				
20 - 30				
30 - 40	fine Sand		Yellowish Brown	
40 - 45				
45 - 50			gray	

Soil Profile <u>S</u>	Classification Condition <u>B</u>	Slope <u>2-4</u> %	Limiting Factor <u>42</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
-----------------------	-----------------------------------	--------------------	---------------------------	--

Observation Hole 2  Test Pit  Boring

0" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0 - 6	Loamy Sand		Brown	
6 - 10				
10 - 15	fs		Reddish Brown	
15 - 20	to			
20 - 30				
30 - 40	S		Yellowish Browns to grayish blue	
40 - 45				
45 - 50				

Soil Profile <u>S</u>	Classification Condition <u>B</u>	Slope <u>2-4</u> %	Limiting Factor <u>40</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
-----------------------	-----------------------------------	--------------------	---------------------------	--

*Stephen E. Goodwin*  
Site Evaluator or Professional Engineer's Signature

*65*  
SE# / PE#

*8/30/83*  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

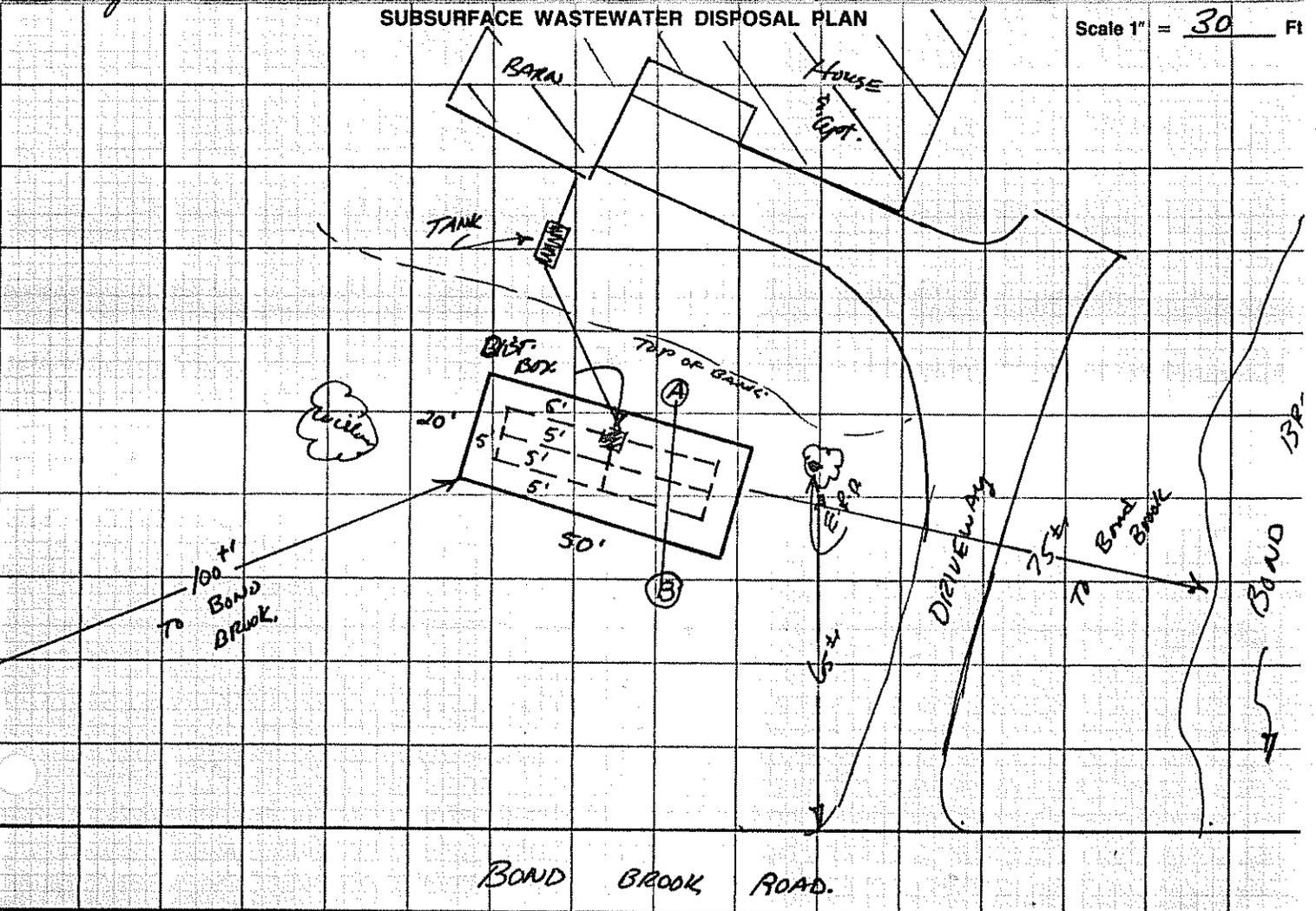
Augusta

Bond Brook Road

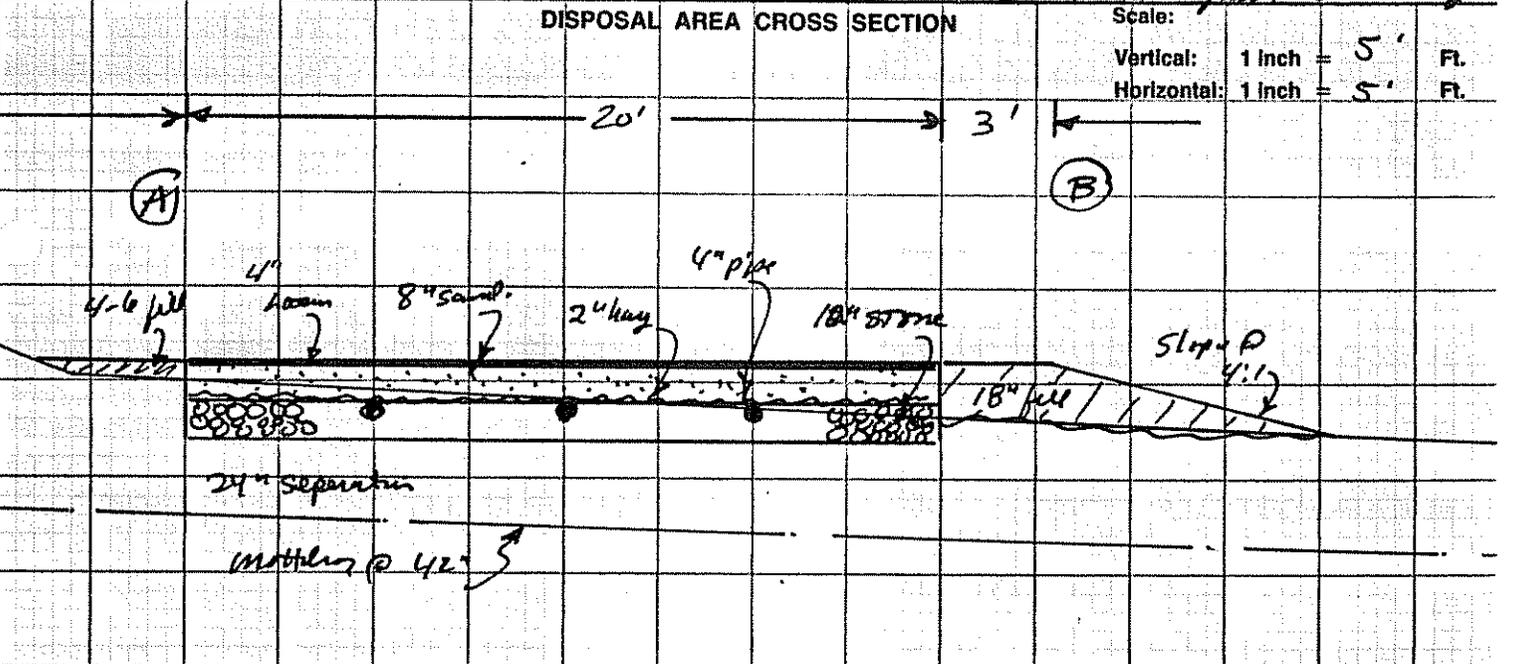
Millard Ballard

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 30 Ft



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	4-6"	Reference Elevation is	Ground @ Base of Spruce	Ground @ Base of Spruce	
Depth of Fill (Downslope)	16-18"	Bottom of Disposal Area	36" Below	Finished grade 6" Below ground	
		Top of Distribution Lines or Chamber	18" Below		



Stephen E. Goodwin  
Site Evaluator or Professional Engineer's Signature

65  
SE # / PE #

8/30/83  
Date

# Replacement System Variance Request

## THE 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, Maine

Town Code

Permit No.  E

Date Permit Issued \_\_\_\_\_  
month/day/yr.

Property Owner's Name: Millard Ballard Tel. No. \_\_\_\_\_

System's Location: Bond Brook Road  
Street

Augusta Maine MAINE 04330  
Town Zip

Property Owner's Address:  
(if different from above) SAME  
Street

\_\_\_\_\_ 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.

X \_\_\_\_\_ X \_\_\_\_\_  
Property Owner's Signature Date

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	100a	300a	
	2. Well: < 2000 gal/day				
	a. Neighbor's	100b	100b		
	b. Property Owner's	50'	60'		
	3. Water Supply Line	See Note 'a'			
Waterbodies	1. Perennial	60'	60'		75'
	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'		

Other Specify:

**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 toe of the fill does not extend to the 3:1 slope.

Stephen E. Ardlevi  
Site Evaluator's Signature

8/30/83  
Date

**LPI Statement**

I, \_\_\_\_\_, LPI for the Town of \_\_\_\_\_, 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: \_\_\_\_\_

\_\_\_\_\_  
LPI's 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