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Town Copy 120.00 FORMS

FIRST TIME SYSTEM VARIANCE REQUEST

This form shall accompany an Application (HHE-200) for a proposed first time system which requires a Variance to provisions of the Subsurface Wastewater Disposal Rules. The local plumbing inspector shall not issue a permit for the installation of a first time subsurface wastewater disposal system requiring a variance from the Department of Human Services until approval has been received from them.

GENERAL INFORMATION	
Permit No. <u>6023</u>	Town of <u>AUGUSTA</u>
Property Owner's Name: <u>RUTH TONDREAU</u>	Date Permit Issued <u>7-30-07</u>
System's Location: <u>75 MT VERNON RD.</u>	Tel. No.:
Property Owner's Address: <u>AUGUSTA, ME. 04330</u>	
(if different from above)	

VARIANCE CONDITIONS

- The Department has the authority to vary the requirements of the Rules in accordance with Section 105.2 of the Rules CMR 241 if all the following criteria are satisfied:
- The variance request has the approval of the LPI.
 - The Municipal Officials have indicated that the variance does not conflict with any local wastewater disposal ordinances.
 - 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.
 - The proposed system does not conflict with any provision controlling subsurface wastewater disposal in the Shoreland Zone.
 - The site offers potential for a system which will dispose of the wastewater with minimal threat to public health, safety, or welfare.
 - The property owner has indicated an awareness of the variance and any limitations or added costs the proposed system may require.

SOIL, SITE AND ENGINEERING FACTORS FOR NEW SYSTEM VARIANCE ASSESSMENT (SEE TABLES 1900.1-1900.11)

Soil Profile	CHARACTERISTIC	POINT ASSESSMENT
Depth to Groundwater/Restrictive Layer	<u>7-0</u>	<u>15</u>
Terrain	<u>10"</u>	<u>3</u>
Size of Property	<u>KNOLL</u>	<u>5</u>
Waterbody Setback	<u>6-10 AC. 1989</u>	<u>11</u>
Water Supply	<u>PRIVATE DRILLED</u>	<u>0</u>
Type of Development		<u>3</u>
Disposal Area Adjustment		<u>0</u>
Vertical Separation Adjustment		<u>10</u>
Additional Treatment	<u>MIN + 12"</u>	<u>10</u>
	<u>OUTLET FILTER</u>	<u>3</u>
TOTAL POINT ASSESSMENT (Sec. 1904.5)		<u>50</u>

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

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator)	SECTION OF RULE
1. <u>TO ALLOW ON RESTRICTIVE SOILS</u>	<u>1901.0</u>
2. _____	_____
3. _____	_____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal for a First Time System Variance 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. (Use Additional Sheets, if needed)

THE SOILS UNDER THIS PROPOSED SYSTEM HAS 10" OF SUITABLE SOILS, BY ADDING 12" EXTRA SEPERATION AND OUTLET FILTER THIS SYSTEM SHOULD WORK FINE

1. _____, 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] SIGNATURE OF SITE EVALUATOR 7/20/07 DATE

Pd ck# 66023 120.00 LON

First Time System Variance Request

PROPERTY OWNER

I, Ruth Jondreau, 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.

Ruth Jondreau SIGNATURE OF OWNER 7-30-07 DATE
 AGENT FOR THE OWNER

MUNICIPAL OFFICER(S) (Selectman, Councilman, Alderman, Mayor, Town Manager)

We, the Municipal Officer(s) of _____ have reviewed this application and are aware that the applicant is applying for a First Time System Variance to the Subsurface Wastewater Disposal Rules because the proposed system does not meet all requirements of the rules. The proposed variance request does does not comply with all Municipal Ordinances relating to subsurface wastewater disposal.

SIGNATURE FOR THE MUNICIPALITY TITLE DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests prior to rendering a decision.

I, Henry R. Smith, 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.

Henry R. Smith LPI Signature 7/30/07 Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Health Engineering.

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

Note: 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 1902.0 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 1901.0 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Division of Health Engineering, 10 S.S.
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION >> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

City, Town, or Plantation: AUGUSTA
Street or Road: MT. VERNON RD.
Subdivision, Lot #: _____

AUGUSTA PERMIT # 6023 TOWN COPY
Date Permit Issued: 7/30/07 \$ 120.00 Double Fee Charged
John R. Yahn L.P.I. # 550
Local Plumbing Inspector Signature

OWNER/APPLICANT INFORMATION
Name (last, first, MI): TONDREAU, RUTH Owner Applicant

Mailing Address of Owner/Applicant: 75 MT. VERNON RD AUGUSTA, ME. 04330
Daytime Tel. #: _____

Municipal Tax Map # 5 Lot # 144

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.
Ruth N. Tondreau 7-30-07
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.

Local Plumbing Inspector Signature (1st) date approved

PERMIT INFORMATION

TYPE OF APPLICATION
 1. First Time System
 2. Replacement System
Type replaced: _____
Year installed: _____
 3. Expanded System
 a. Minor Expansion
 b. Major Expansion
 4. Experimental System
 5. Seasonal Conversion

THIS APPLICATION REQUIRES
 1. No Rule Variance
 2. First Time System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 3. Replacement System Variance
 a. Local Plumbing Inspector Approval
 b. State & Local Plumbing Inspector Approval
 4. Minimum Lot Size Variance
 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS
 1. Complete Non-engineered System
 2. Primitive System (graywater & alt. toilet)
 3. Alternative Toilet, specify: _____
 4. Non-engineered Treatment Tank (only)
 5. Holding Tank, _____ gallons
 6. Non-engineered Disposal Field (only)
 7. Separated Laundry System
 8. Complete Engineered System (2000 gpd or more)
 9. Engineered Treatment Tank (only)
 10. Engineered Disposal Field (only)
 11. Pre-treatment, specify: _____
 12. Miscellaneous Components

SIZE OF PROPERTY
8.5 SQ. FT. ACRES

DISPOSAL SYSTEM TO SERVE
 1. Single Family Dwelling Unit, No. of Bedrooms: 3
 2. Multiple Family Dwelling, No. of Units: _____
 3. Other: _____ (specify)
Current Use Seasonal Year Round Undeveloped

TYPE OF WATER SUPPLY
 1. Drilled Well 2. Dug Well 3. Private
 4. Public 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
 1. Concrete
 2. Regular WITH OUTLET FILTER
 3. Plastic
 4. Other: _____
CAPACITY: 4000 GAL.

DISPOSAL FIELD TYPE & SIZE
 1. Stone Bed 2. Stone Trench
 3. Proprietary Device
 a. cluster array c. Linear
 b. regular load d. H-20 load
 4. Other: _____
SIZE: 900 sq. ft. lin. ft.

GARBAGE DISPOSAL UNIT
 1. No 2. Yes 3. Maybe
If Yes or Maybe, specify one below:
 a. multi-compartment tank
 b. _____ tanks in series
 c. increase in tank capacity
 d. Filter on Tank Outlet

DESIGN FLOW
270 gallons per day
BASED ON:
 1. Table 501.1 (dwelling unit(s))
 2. Table 501.2 (other facilities)
SHOW CALCULATIONS for other facilities

SOIL DATA & DESIGN CLASS
PROFILE 71013
CONDITION _____ DESIGN _____
at Observation Hole # 1
Depth 10'
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING
 1. Small—2.0 sq. ft. / gpd
 2. Medium—2.6 sq. ft. / gpd
 3. Medium—Large 3.3 sq. ft. / gpd
 4. Large—4.1 sq. ft. / gpd
 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP
 1. Not Required
 2. May Be Required
 3. Required
Specify only for engineered systems:
DOSE: _____ gallons

ATTACH WATER METER DATA
LATITUDE AND LONGITUDE
at center of disposal area
Lat. 44° 20' 920"
Lon. 69° 48' 562"
If g.p.s., state margin of error 16'

SITE EVALUATOR STATEMENT

I certify that on 7/16/07 (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)

Site Evaluator Signature SE # 256 Date 7/20/07
JOHN PHILBRICK
Site Evaluator Name Printed Telephone Number 547-3732 E-mail Address _____

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator. HHE-200 Rev. 4/05

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

Street, Road, Subdivision

01040604

AUGUSTA

MT VERNON RD.

RUTH

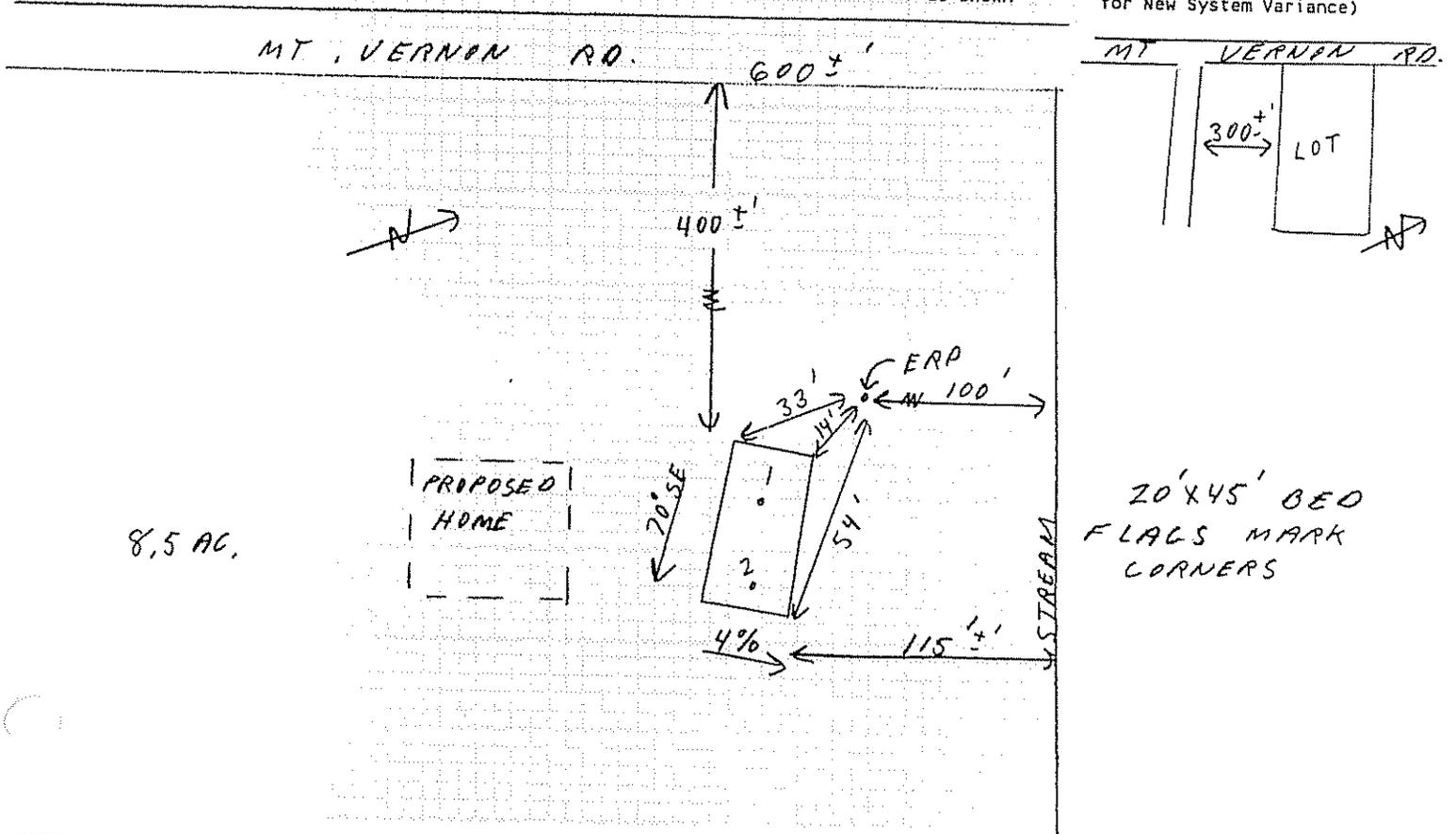
Owner's Name

TONOREAU

SITE PLAN

Scale: 1" = 50 Ft.
or as shown

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

Inches	Texture	Consistency	Color	Mottling
0	SANDY	FRIABLE	DARK BR.	NOVE
6	LOAM			
10	LOAMY SAND		TAN	
15	SILTY CLAY	FIRM	GRAY	COMMON
20				DISTINCT
30				
40				
50				

Soil Classification Profile 7 Condition 0 Slope 4% Limiting Factor 10" Ground Water Restr. Layer Bedrock

Observation Hole 2 Test Pit Boring
0 " Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Classification Profile 7 Condition 0 Slope 4% Limiting Factor 10" Ground Water Restr. Layer Bedrock

SAME AS #1

[Signature]
Site Evaluator Signature

256
SE#

7/20/07
Date

Approved for use as
HHE 200 by Division of
Health Engineering 9/87

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

08246445

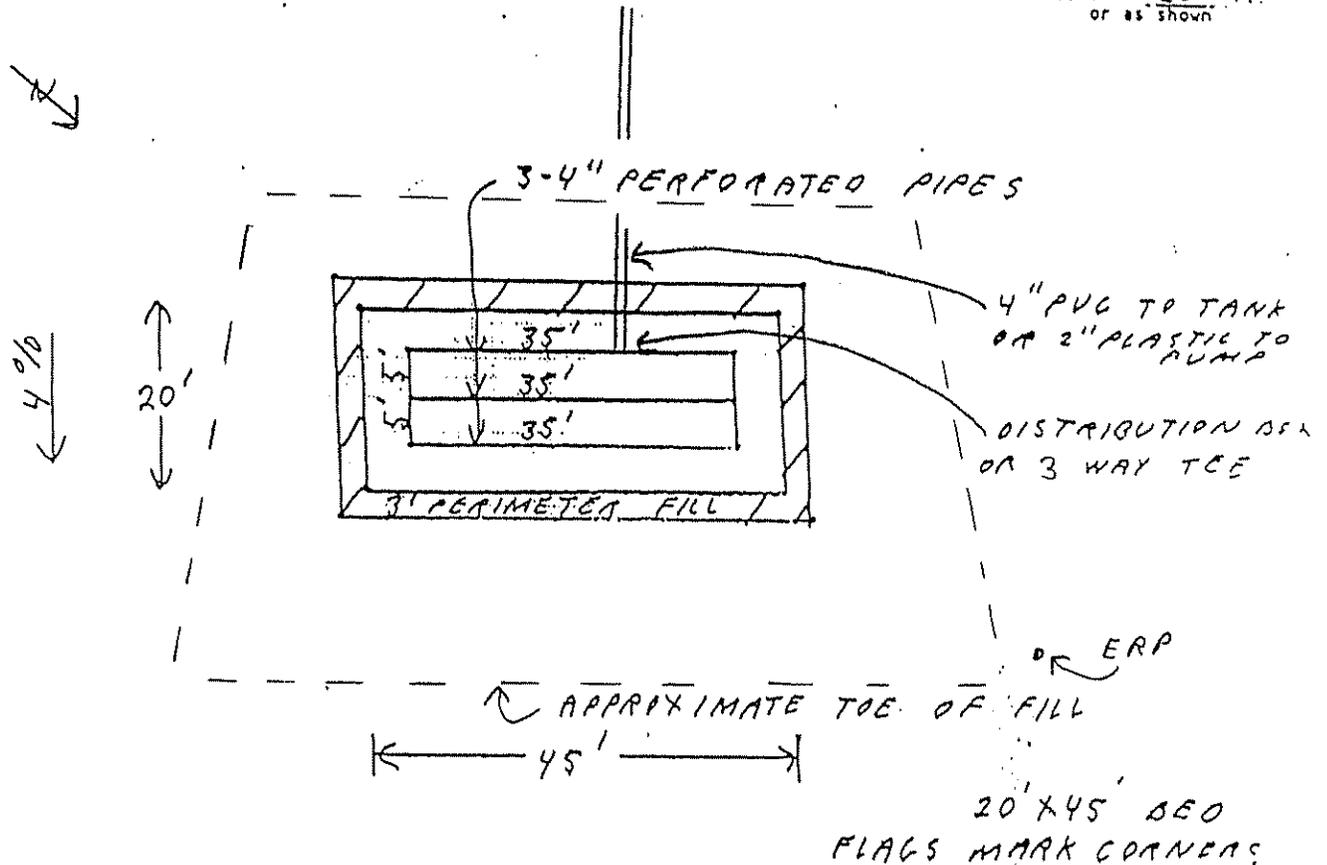
AUGUSTA

MT. VERNON RD.

RUTH TONDREAU

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft.
or as shown



FILL REQUIREMENTS
Depth of fill (Upslope)
Depth of fill (Downslope)

CONSTRUCTION ELEVATION
30" Reference Elevation is
40" Bottom of Disposal Area
Top of Distribution Lines or Chambers

ELEVATION REFERENCE POINT
0" ERP IS TOP OF SET POST
-10" 14' NORTH OF SYSTEM, 45"
+2" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5 ft.
Horizontal: 1 inch = 10 ft.

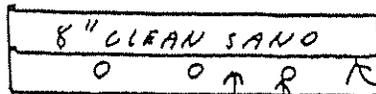
CROWN WITH 3% GRADE + SEED + MULCH

MIN. 4" LAMM

4:1 SLOPE

4:1 SLOPE

ORIGINAL GROUND



8" CLEAN SAND
2" HAY LAYER
-22" LIMITING FACTOR
3-4" PERFORATED PIPES
12" CLEAN STONE (7/4"-2 1/2")
ALL FILL TO BE COARSE GRAVELLY SAND

[Signature]
Site Evaluator Signature

256
SEN

7/20/07
Date

Approved for use as
NHE 200 by Division of
Health Engineering 9-57