

RECEIVED

DEC 07 2015
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 <u>AUGUSTA</u>
Property Owner's Name:	<u>WELLS, LOREN</u>	Tel. No.: <u>458-0035</u>
System's Location:	<u>238 CHURCH HILL ROAD</u>	
Property Owner's Address:	<u>40 WOODY HAYWOOD</u>	Zip Code _____
e-mail address:	<u>238 CHURCH HILL ROAD, AUGUSTA, ME 04330</u>	

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>0" TO LIMITING FACTOR</u>	<u>TABLE 4F</u>
2.	<u>85' TO ADJUTERS WELL</u>	<u>TABLE 8A</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.

ATTACHMENT YES NO

I, STEPHEN P. ROBBINS, 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.

Stephen P. Robbins SIGNATURE OF SITE EVALUATOR 21 SEP 15 DATE

PROPERTY OWNER

I, Terry J. Shepherd, 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.

Terry J. Shepherd SIGNATURE OF OWNER 12-7-15 DATE
 AGENT FOR THE OWNER

LOCAL PLUMBING INSPECTOR - Approval at local level

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

I, Gary R. Feltz, 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.

Gary R. Feltz
LPI Signature

12/7/15
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.

Gary R. Feltz
LPI Signature

12/7/15
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.

Bruce Pearson
SIGNATURE OF THE DEPARTMENT

12/7/15
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

LOCAL PLUMBING INSPECTOR - Approval at local level

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

I, Gary R. Fulk, 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.

Gary R. Fulk
LPI Signature

12/7/15
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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

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

City, Town, or Plantation: **Augusta**
Street or Road: **238 Church Hill Road**
Subdivision, Lot #: **27113**

OWNER/APPLICANT INFORMATION

Name (last, first, MI): **Wells, Loren** Owner Applicant
Mailing Address of Applicant: **Woody Haywood, 238 Church Hill Rd**
Augusta, ME 04330
Daytime Tel.#: **458-0035**

AUGUSTA PERMIT #7177
Date Permit Issued: **12/7/15**
Yves R. Yulka
TOWN COPY
\$ **250.00** fee
LPI # **850**

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
Tracy J. Shubert
Signature of Owner or Applicant
Date: **12-7-15**

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal rules Application.
(1st) date approved _____
Local Plumbing Inspector Signature _____
(2nd) date approved _____

PERMIT INFORMATION

TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced: Trench Year installed: 60's? <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	THIS APPLICATION REQUIRES <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 type="checkbox"/> a. Local Plumbing Inspector Approval <input checked="" type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Prmit	DISPOSAL SYSTEM COMPONENTS <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered disposal field (only) <input type="checkbox"/> 11. Pre-treatment, specify: <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY 31.03 <input type="checkbox"/> SQ.FT. <input checked="" type="checkbox"/> ACRES	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bdrms: 5 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: <input type="checkbox"/> 3. Other: _____ Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other Proposed new
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)	

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input checked="" type="checkbox"/> b. Low Profile if req. <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: CAPACITY: min. 1250	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: Size: 1,500 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. Increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW 450 gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE 12(3) CONDITION AIII DESIGN at Observation Hole # 1 Depth 44" of Most Limiting Soil Factor	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium---2.6 sq. st. / gpd <input checked="" type="checkbox"/> 2. Medium---Large 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large---4.1 sq. ft. / gpd <input type="checkbox"/> 4. Extra Large---5.0 sq. ft / gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. 44 d 20 m 021 s Lon. 69 d 43 m 861 s if g.p.s., state margin or error:

SITE EVALUATOR STATEMENT

I certify that on **14-Sep-15** (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).
Stephen P. Robbins
Site Evaluator Signature
S.E. # 301 9/21/2015
Stephen P. Robbins 377-6707 narrowspd@aol.com
Page 1 of 4
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator
HHE-200 Rev. 8/11

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation

Augusta

Street, Road Subdivision

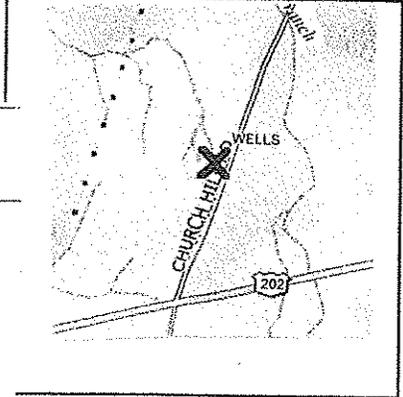
238 Church Hill Road,

Owner's Name

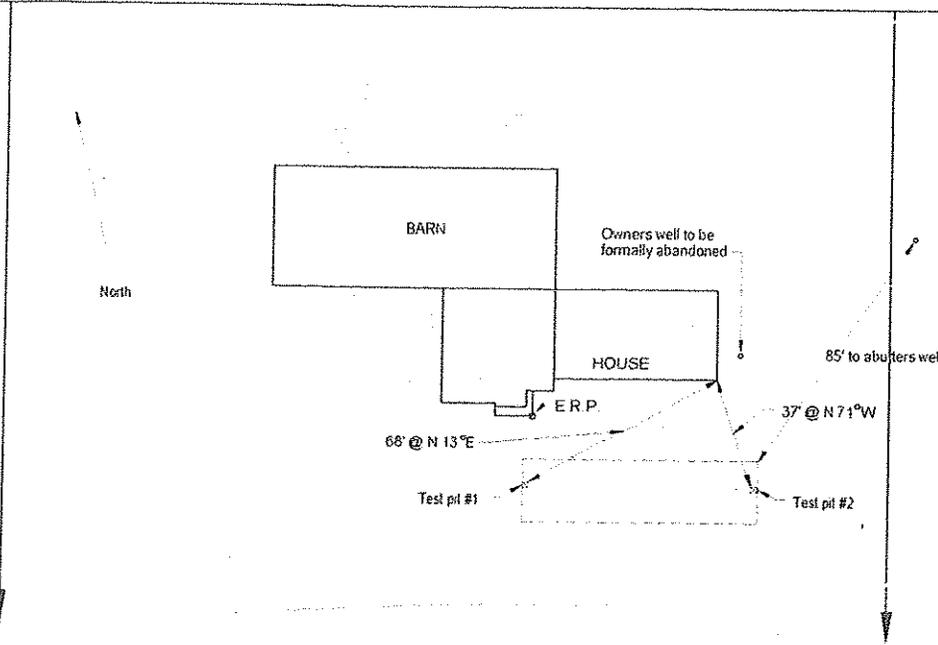
Wells, Loren

SITE PLAN

Scale 1" = **60 Ft.**
 or as shown



Church Road



SOIL DESCRIPTION AND CLASSIFICATION (LOCATION OF OBSERVATION HOLES SHOWN ABOVE)

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Motting
0	Loam (Fill) Sand (Fill)	Friable	Brown ↓ Gray	None evident
10		Loose		
20				
30	Sandy loam	Friable	Red brown	
40			Yellow brown	
50				

Soil Classification **12 (3)** Slope Ground Water
 Profile Condition **AIII** Limiting Factor **44"** Restrictive Layer
 varies Bedrock
 Pit Depth

Observation Hole #1 Test Pit Boring
 2" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Motting
0	Loam	Friable	Black	Assumed
10	Silty clay		Olive gray	Common
20				
30		Firm		
40	Note: Limiting factor in test pit #1 is 16" below the elevation of limiting factor in Test Pit #2. Separation will be 40" over 9E soil.			
50				

Soil Classification **9** Slope Ground Water
 Profile Condition **E** Limiting Factor **0"** Restrictive Layer
 0% Bedrock
 Pit Depth

Stephen P. Robbins

301

9/21/2015

Page 2 of 4

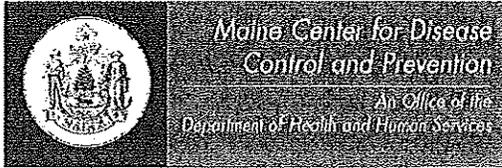
Site Evaluator Signature

S.P.R.

SE #

Date

HHE-200 Rev 7/97



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

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) 287-8016
Fax (207) 287-9058; TTY (800) 606-0215

Tel. (207) 287-2070

Subsurface Wastewater Unit

Fax (207) 287-5672

December 7, 2015

Town of Augusta
Gary Fuller
16 Cony Street
Augusta, Maine 04330

Subject: Approval, Replacement System Variance Request, Lorren Wells Property, C/O Woody Hayood Property, 238 Church Hill Road, Augusta, Maine. Mailing Address Owner/Applicant: SAME.

Gary;

We have completed our review of an HHE-200 Form dated 09-21-2015 for the property at 238 Church Hill Road, Augusta, Maine.

The variance request that is not within the LPI's authority is 0 inches to bedrock.

The variance request that is within the LPI's authority is from the disposal field to a potable water supply of 85 feet.

The variance request has been submitted because topography and existing development limit the potential of the system location and the system design prepared by Stephen Robins, SE #301 on 09-21-2015 is otherwise found to be in compliance with the Maine Subsurface Wastewater Disposal Rules.

A permit for system installation is to be obtained from the Local Plumbing Inspector in advance of the start of system construction.

The system is to be installed in accordance with the submitted and approved system design. Should alterations to the design be required at the time of construction, the site evaluator is to be notified prior to making any changes.

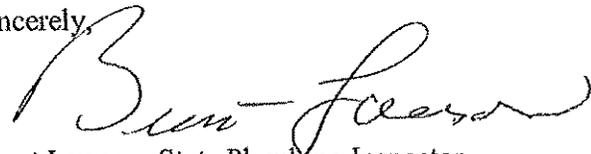
The contractor is to scarify the soils under the fill extensions to create a transitional zone more compatible with the disposal field area.

By accepting this approval and the associated plumbing permit, the owner agrees to comply fully with the conditions of approval and the Subsurface Wastewater Rules.

Because installation and owner maintenance has a significant effect on the working order of onsite sewage disposal systems, including their components, the Division makes no representation or guarantee as to the efficiency and/or operation of the system.

Should you or others have any questions, please feel free to contact me at 592-7376.

Sincerely,

A handwritten signature in cursive script that reads "Brent Lawson".

Brent Lawson, State Plumbing Inspector
Subsurface Wastewater Program
Division of Environmental Health
e-mail: brent.lawson@maine.gov

/BML

xc: File

Lorren Wells, C/O Woody Haywood; Owner/Applicant.
Stephen Robins; SE