

Church of God



STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
AUGUSTA, MAINE 04333

DAVID E. SMITH
COMMISSIONER

September 15, 1977

Church of God
RFD #7, North Belfast Avenue
Augusta, ME 04330

Subject: Waiver to the Maine Plumbing Code, Part II,
Church of God Property, North Belfast Avenue, Augusta

Dear Sir:

This will acknowledge receipt of a waiver request and a plan with soils information by Stephen E. Goodwin, Site Evaluator, showing the sewage disposal system for the subject project.

In consideration of the plan dated August 30, 1977, this office will grant the responsible Local Plumbing Inspector the right to waive certain provisions of the Maine Plumbing Code to install the system as proposed by Mr. Goodwin. In all other respects the installation is to comply with the Maine Plumbing Code, Part II, Private Sewage Disposal Regulations and follow the plan submitted with this proposal.

Final approval of the sewage portion is subject to permit by the Local Plumbing Inspector before the construction of this system. A completed HHE-200 Form must be submitted to him for processing. The inspector is to be notified before covering the work, and the work is to be left uncovered until his inspection. He shall be supplied with copies of approved plans for his reference at inspection. Approval is also subject to any local ordinances and state laws.

Yours very truly,

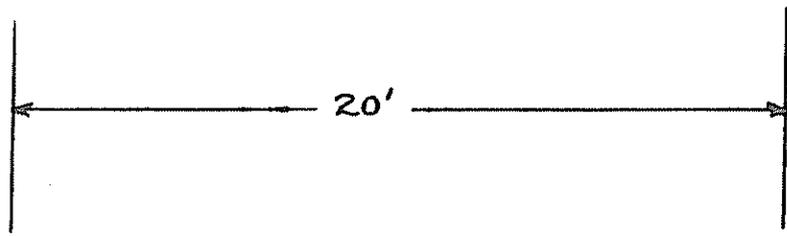
A handwritten signature in cursive script, appearing to read "Russell G. Martin".

Russell G. Martin, Sanitary Engineer
Plans and Standards Review
Division of Health Engineering

DWP/nm

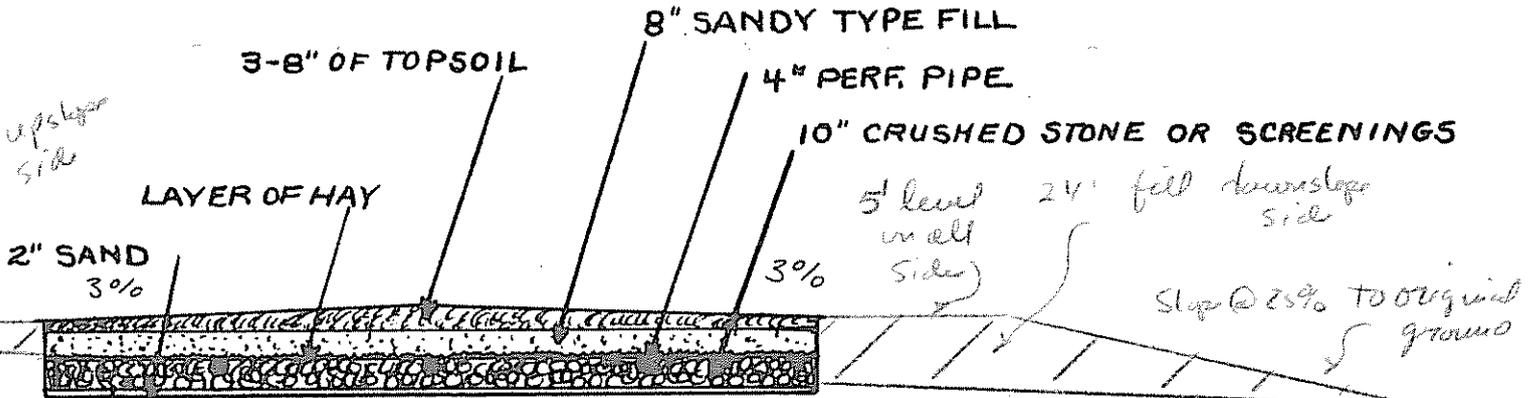
cc: Richard Baker, LPI
Stephen E. Goodwin
Freeman Eugley

encl.



To Church
←

12" fill upslope side



Ave. 36" just gravelly soil - fill

ORIGINAL SOIL SURFACE

MULLING or PLAY @ 17-20"

% SLOPE 4

DIRECTION OF SLOPE →

20' X 70' Bed.

DATE Jun 29 1977	DRAWN BY A. Hordman	APPROVED BY
SCALE 1" = 5'	REVISED	
CROSS SECTION - BED SYSTEM		
NAME Church of God	DRAWING NUMBER	
TOWN Augusta Mo.	ATTACHMENT TO: HHE-200	

LPI's Copy

ORIGINAL To be sent to Division of Health Engineering, Augusta, Maine 04333 by the LPI

MAINE DEPARTMENT OF HUMAN SERVICES
APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT

This is NOT a permit; this form when completed must be presented to the Local Plumbing Inspector to obtain a permit. Page 1 of 2

Town: Augusta Street, Road, etc.: North Belfast Ave. Plumbing Permit No.: 7057EP Date of Plumbing Permit: 9-20-77

Owner of property: Church of God Size of lot: 23 Sq. feet Acres

Name & type of establishment: _____ gpd Is lot Zoned? Yes No Type of Zoning: Shoreland Resource Protection

Name of applicant: Marshall Vachurch If you plan to use a previous subdivision approval in lieu of site investigation, please submit one of the following:
 Deed restriction re. private sewage disposal
 Copy of the subdivision's soils report
 Soils report from a State Agency

Applicant's address: Rt 10 #7 North Belfast Ave. Tel. No.: 602-6261

Town: Augusta Maine Zip Code: 04330 Subdivision name: 71/A Lot No.: 71/A

Applicant's signature: _____ Date: _____
Owner's signature: x S.D. Jones Date: _____

This application is for New System Expanded System Replacement System Replacement of Treatment Tank Only Disposal Area Only

The water supply for this property is: Dug well, depth _____, lining _____; Drilled well, depth _____, lining _____; Spring Surface water Body, Course— with disinfection, without disinfection. Public Utility, name _____

SITE INVESTIGATION Show location of pits and/or borings on sketch on page 2, and refer to completed sample form and Chapter 4 of the Code, II.

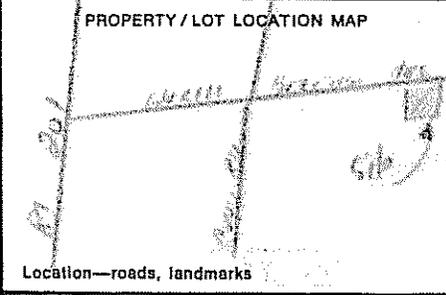
Soil Profile No.	Soil Profile No. 1		Soil Profile No. 2		Soil Profile No. 3		Soil Profile No. 4		Soil Profile No. 5		
	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input checked="" type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	<input type="checkbox"/> Pit	<input type="checkbox"/> Boring	
Organic strata	24" gravelly s.p.	Organic strata	30" gravelly s.p.	Organic strata	14" sandy fine	Organic strata		Organic strata			
Inches		Inches		Inches		Inches		Inches		Inches	
1st strata	24" clay	1st strata	12" s.p.	1st strata	10" clay	1st strata		1st strata		1st strata	
Inches		Inches		Inches		Inches		Inches		Inches	
2nd strata		2nd strata	24" s.p.	2nd strata		2nd strata		2nd strata		2nd strata	
Inches		Inches		Inches		Inches		Inches		Inches	
3rd strata		3rd strata	clay	3rd strata		3rd strata		3rd strata		3rd strata	
Inches		Inches		Inches		Inches		Inches		Inches	
Total Depth of observation hole	Inches 48	Total Depth of observation hole	Inches 60	Total Depth of observation hole	Inches 54	Total Depth of observation hole	Inches	Total Depth of observation hole	Inches	Total Depth of observation hole	Inches
Max. Ground water table—mottling	24 Inches	Max. Ground water table—mottling	24 Inches	Max. Ground water table—mottling	20 Inches	Max. Ground water table—mottling	Inches	Max. Ground water table—mottling	Inches	Max. Ground water table—mottling	Inches
Impervious layer, clay, etc.	24 Inches	Impervious layer, clay, etc.	26 Inches	Impervious layer, clay, etc.	20 Inches	Impervious layer, clay, etc.	Inches	Impervious layer, clay, etc.	Inches	Impervious layer, clay, etc.	Inches
Bedrock	None Evident	Bedrock	None Evident	Bedrock	None Evident	Bedrock	None Evident	Bedrock	None Evident	Bedrock	None Evident
Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock		Type of Bedrock	
Surface slope	4 %	Surface slope	5 %	Surface slope	4.5 %	Surface slope	%	Surface slope	%	Surface slope	%
Soil Group & Condition per Table 9-1 of the Code, II	7C	Soil Group & Condition per Table 9-1 of the Code, II	7C	Soil Group & Condition per Table 9-1 of the Code, II	7C	Soil Group & Condition per Table 9-1 of the Code, II		Soil Group & Condition per Table 9-1 of the Code, II		Soil Group & Condition per Table 9-1 of the Code, II	

On 09/15/77 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: Stephen E. Goodwin Health Engineering License No. _____
Date signed: Aug. 30, 1977

PRIVATE SEWAGE DISPOSAL SYSTEM PROPOSED Show location of system and details on sketches on page 2, and refer to completed sample form

SYSTEM: <input checked="" type="radio"/> COMBINED SYSTEM <input type="radio"/> SEPARATED SYSTEM If separated system—type of human waste disposal system to be used: <input type="radio"/> Sealed Vault Privy <input type="radio"/> Open Pit Privy <input type="radio"/> Compost Toilet <input type="radio"/> Incinerator Toilet <input type="radio"/> Chemical Toilet <input type="radio"/> Other, describe _____	TREATMENT TANK: <input checked="" type="radio"/> Septic Tank <input type="radio"/> Concrete <input type="radio"/> Fiberglass <input type="radio"/> Metal Size in gallons: <u>1500</u> <input type="radio"/> Aerobic Tank Manufacturer— Model No. Size in gallons	SUBSURFACE ABSORPTION AREA		SITE MODIFICATION Fill will be: <u>12</u> in. uphill; <u>24</u> in. downhill
		<input type="radio"/> Trench System: Total trench length: <u>71/A</u> <input checked="" type="radio"/> Bed System Length <u>65'</u> Width <u>30'</u> <input type="radio"/> Chamber System <input type="radio"/> Type A <input type="radio"/> Single File <input type="radio"/> Cluster <input type="radio"/> Mound System Length _____ Width _____ at base <u>71/A</u> <input type="radio"/> Special System Length _____ Width _____ <u>71/A</u>	<input type="radio"/> Very Small <input type="radio"/> Small <input type="radio"/> Medium <input checked="" type="radio"/> Medium Large <input type="radio"/> Large <input type="radio"/> Extra Large	DETAILS <input checked="" type="radio"/> A Distribution Box is required Pumping is— <input type="radio"/> required, <input checked="" type="radio"/> is not required. The Dose will be _____ gallons
DISTANCES <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs. <input checked="" type="radio"/> Yes <input type="radio"/> No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.				



FOR THE USE OF LPI ONLY

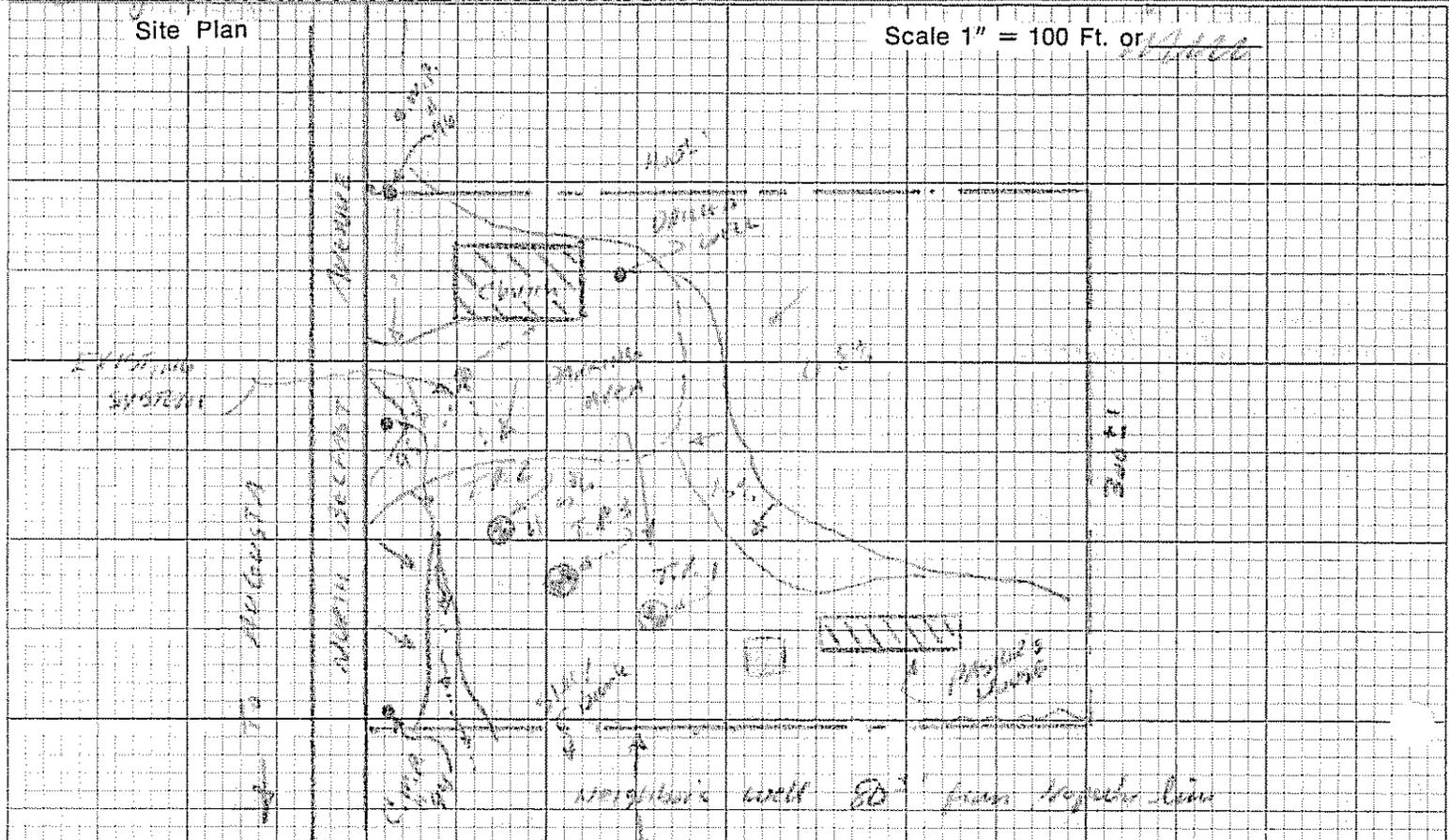
Denial: Application is denied for following reasons; portions of the Code II are cited.
 Form is incomplete (____ pg.) as to General info, Site Investigation, System Proposed, Site Plan, Disposal System Plan, Cross-Section, Statement. See Section 2.3.
 Site investigation indicates site is totally unsuitable for disposal system; Sections 4.5 and 9.5, Table 9-1 Group 9 and 10. Unsuitable for system proposed; Sections 4.3, 4.6, 9.5, Table 9-1.
 System Proposed does not conform to Code; See Sections 9.
 Site investigation indicates site modifications are necessary; See Sections 4.3, 4.4, 4.6, 8.7.
 Miscellaneous _____ See Section _____
 Acceptance: Application for permit is approved with condition specified, comply with Section 4-2
 without condition.
 Signed LPI: Richard P. Baber Date: 9-19-77 HHE-200 1/77

APPLICATION FOR PRIVATE SEWAGE DISPOSAL PERMIT
(For systems disposing of less than 2000 gallons per day)

Town <i>Augusta</i>	Street, Road, etc. <i>North Balfour Lane</i> If on water body, give name	Owner of property <i>Church of God</i>
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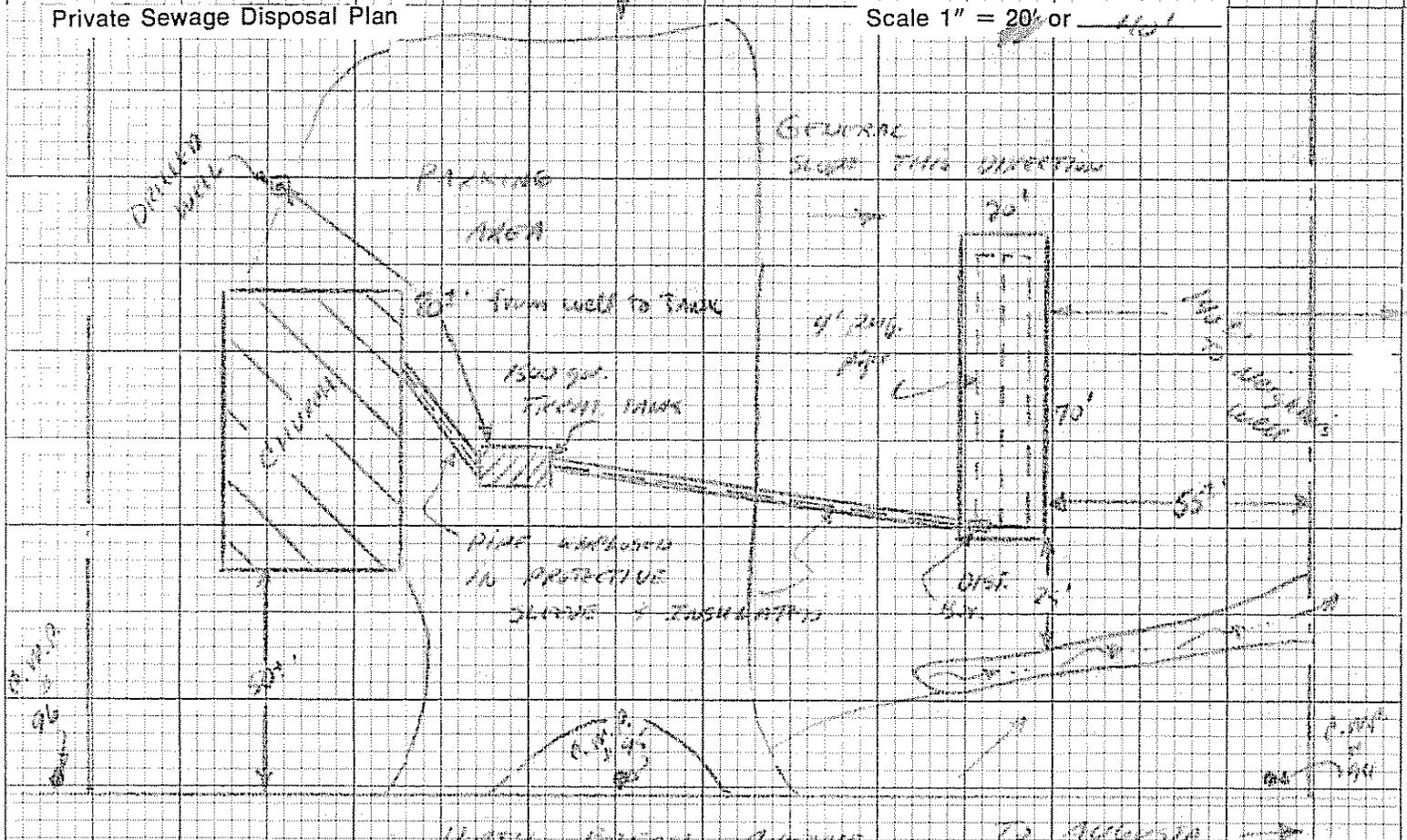
Site Plan

Scale 1" = 100 Ft. or *1/4" = 100'*



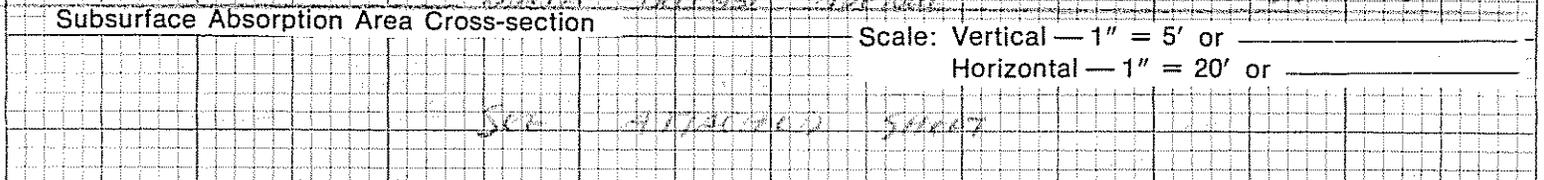
Private Sewage Disposal Plan

Scale 1" = 20' or *1/2" = 20'*



Subsurface Absorption Area Cross-section

Scale: Vertical — 1" = 5' or
Horizontal — 1" = 20' or



NOTE:
SYSTEM IS DESIGNED
ON BASIS OF POSSIBILITY
IT MAY HAVE TO BE EXAMINED ACCORDING TO CURRENT CODES.

Statement: (no permit may be issued unless signed)

I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

Signature Required
Date: *9-20-77*
Applicant:
Owner: *J. J. Lyons*

APPLICATION AND AGREEMENT

TO WAIVE CERTAIN PROVISIONS OF THE PLUMBING CODE

I, Church of God, hereby apply to the Maine State Department
 (owner)
 of Human Services for permission authorizing the responsible Plumbing Inspector
 to waive certain provisions of the Plumbing Code for an installation in connection
 with a dwelling or building at North Belfast Ave., Augusta, Me.
 (street) (city or town)

This may include materials, methods, dimensions or conditions not specifically
 approved by the Plumbing Code. Please draw a brief sketch of the property's
 location on the back of this form so an inspector can find it. Include landmarks,
 route numbers and street names.

Section of Code to be waived,	Description of specific waiver
1. <u>Secd. 4.2</u>	<u>Drilled well 80[±] feet from Trout Tank</u>
2. <u>Secd. 8.7(a)</u>	<u>Request 20'x70' Bed on 36" fill over 7-C soil.</u>
3. _____	<u>for approv. 80 members.</u> (If additional space is needed, attach a list)

In all other respects, the installation will comply with the Code. The installa-
 tion will be made in accordance with the ATTACHED PLAN. A permit is to be issued
 by the Plumbing Inspector if he is in agreement. The undersigned stipulates that
 he is the owner and occupant of the building involved and that the building is
 not for sale in the foreseeable future. The installation will be made by:
 _____, License No. _____.

If any defects or inadequacies appear, I will promptly notify the State Department
 of Human Services and subsequently make such corrections as the Department shall
 find necessary

Owner's signature S. J. Levesque

NOTE: A PLAN TO SCALE Winter address _____
 MUST BE ATTACHED Summer address _____
 Telephone _____ Date _____

THE FOLLOWING TO BE FILLED IN BY THE PLUMBING INSPECTOR

I am (Local), (~~Alternate~~) Plumbing Inspector for the town of Augusta.
 I have examined the plans for the installation described above and I find the building
 to be in my jurisdiction.

I (do), (~~do-not~~) recommend the issuance of a special permit for the installation
 as described above.

Signed Richard P. Baber
 Date 9-20-77

Return this form to the Division of Health Engineering, Department of Human Services,
 Augusta, Maine. NO permit shall be issued for this waiver until the Local Plumbing
 Inspector receives notification from this office.