

M10 L12

# 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 does not comply 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 can be met, and the variance(s) requested fall within the limits of LPI's authority.

1. The proposed design meets the definition of a Replacement System from the rules.
2. A 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 is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

### GENERAL INFORMATION

*Town Copy*

Permit No. 2747 E Town of AUGUSTA

Date Permit Issued \_\_\_\_\_ MONTH/DAY/YEAR

Property Owner's Name: JOHN OWCAREZ Tel. No. \_\_\_\_\_

System's Location: RTE. 105 SOUTH BELFAST AVE STREET

AUGUSTA TOWN Maine 04330 ZIP

Property Owner's Address: 90 CONRAD TONDREAU STREET RR #5 BOX 1390

AUGUSTA TOWN ME STATE 04330 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, they 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

John M. Owcarz  
PROPERTY OWNER'S SIGNATURE

DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
<b>SOILS</b>					
Soil Profile	Ground Water Table	to 6"		3 inches	
Soil Condition	Restrictive Layer	to 6"		5 inches	
from HHE-200	Bedrock	to 10"		5 inches	
<b>SETBACK DISTANCES (IN FEET)</b>	<b>FROM:</b>	<b>TREATMENT TANK</b>	<b>DISPOSAL AREA</b>	<b>TREATMENT TANK</b>	<b>DISPOSAL AREA</b>
Potable Water Supplies	1. Well: > 2000 gal/day	100'	300'		
	2. Well: < 2000 gal/day				
	a. Neighbor's	50'	60'		
	b. Property Owner's	25'	50'		
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Perennial	50'	60'		
	2. Intermittent	15'	20'		
	3. Manmade drainage ditch	10'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With Basement	5'	10'		
	2. Without Basement	5'	10'		
Property Line		4'	5'		

**OTHER**

1. Fill extension Grade—to 3:1 N/A

2.

3.

**Footnotes:**

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope.

\_\_\_\_\_  
SITE EVALUATOR'S SIGNATURE

8-23-93  
DATE

**LPI STATEMENT**

I, Ray R. Fulk LPI for the Town of Augusta 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 Wastewater Disposal 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,  disapprove ) 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

8/24/93  
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

1710 412

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

**PROPERTY ADDRESS**

Town Or Plantation: Augusta

Street Division Lot #: Rte 105 So. Delfest Ave

**PROPERTY OWNERS NAME**

Last: OWCARZ First: JOHN

Applicant Name: CONRAD TONDREAU

Mailing Address of Owner/Applicant (If Different): RD # 5 Box 1340  
Augusta, ME 04330

**AUGUSTA**

Date Permit Issued: 8/24/93 \$ 160 **D TOWN COPY**  if Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. #: 850

**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: [Signature] 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: [Signature] Date Approved: 8/24/93

## PERMIT INFORMATION

**THIS APPLICATION IS FOR:**

- NEW SYSTEM
- REPLACEMENT SYSTEM
- EXPANDED SYSTEM
- EXPERIMENTAL SYSTEM

**THIS APPLICATION REQUIRES:**

- NO RULE VARIANCE
- NEW SYSTEM VARIANCE  
Attach New System Variance Form
- REPLACEMENT SYSTEM VARIANCE  
Attach Replacement System Variance Form
  - Requiring Local Plumbing Inspector Approval
  - Requires State and Local Plumbing Inspector Approval
- MINIMUM LOT SIZE VARIANCE

**INSTALLATION IS:**

COMPLETE SYSTEM

- NON-ENGINEERED SYSTEM
- PRIMITIVE SYSTEM  
(Includes Alternative Toilet)
- ENGINEERED (+2000 gpd)

**SEASONAL CONVERSION**  
to be completed by the LPI

- SYSTEM COMPLIES WITH RULES
- CONNECTED TO SANITARY SEWER
- SYSTEM INSTALLED - P# \_\_\_\_\_
- SYSTEM DESIGN RECORDED AND ATTACHED

**INDIVIDUALLY INSTALLED COMPONENTS:**

- TREATMENT TANK (ONLY)
- HOLDING TANK \_\_\_\_\_ GAL
- ALTERNATIVE TOILET (ONLY)
- NON-ENGINEERED DISPOSAL AREA (ONLY)
- ENGINEERED DISPOSAL AREA (ONLY)
- SEPARATED LAUNDRY SYSTEM

**IF REPLACEMENT SYSTEM:**

YEAR FAILING SYSTEM INSTALLED 1953

THE FAILING SYSTEM IS:

- BED
- CHAMBER
- TRENCH
- OTHER: \_\_\_\_\_

**DISPOSAL SYSTEM TO SERVE:**

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

**TYPE OF WATER SUPPLY**

Augusta Water District

SIZE OF PROPERTY: 30,000 Ft<sup>2</sup>

ZONING: RESIDENTIAL

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

**TREATMENT TANK**

- SEPTIC:  Regular  Low Profile
- AEROBIC

SIZE: 4,000 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.)**

2 Bedroom

DESIGN FLOW: 180 (GALLONS/DAY)

**SOIL CONDITIONS USED FOR DESIGN PURPOSES**

PROFILE	CONDITION
<u>8/9</u>	<u>D</u>

DEPTH TO LIMITING FACTOR: 8

**SIZE RATINGS USED FOR DESIGN PURPOSES**

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

**DISPOSAL AREA TYPE/SIZE**

- BED \_\_\_\_\_ Sq. Ft.
- CHAMBER 150 Sq. Ft.
  - REGULAR  H-20
- TRENCH \_\_\_\_\_ Linear Ft.
- OTHER: \_\_\_\_\_

## SITE EVALUATOR STATEMENT

On 8-20-93 (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.

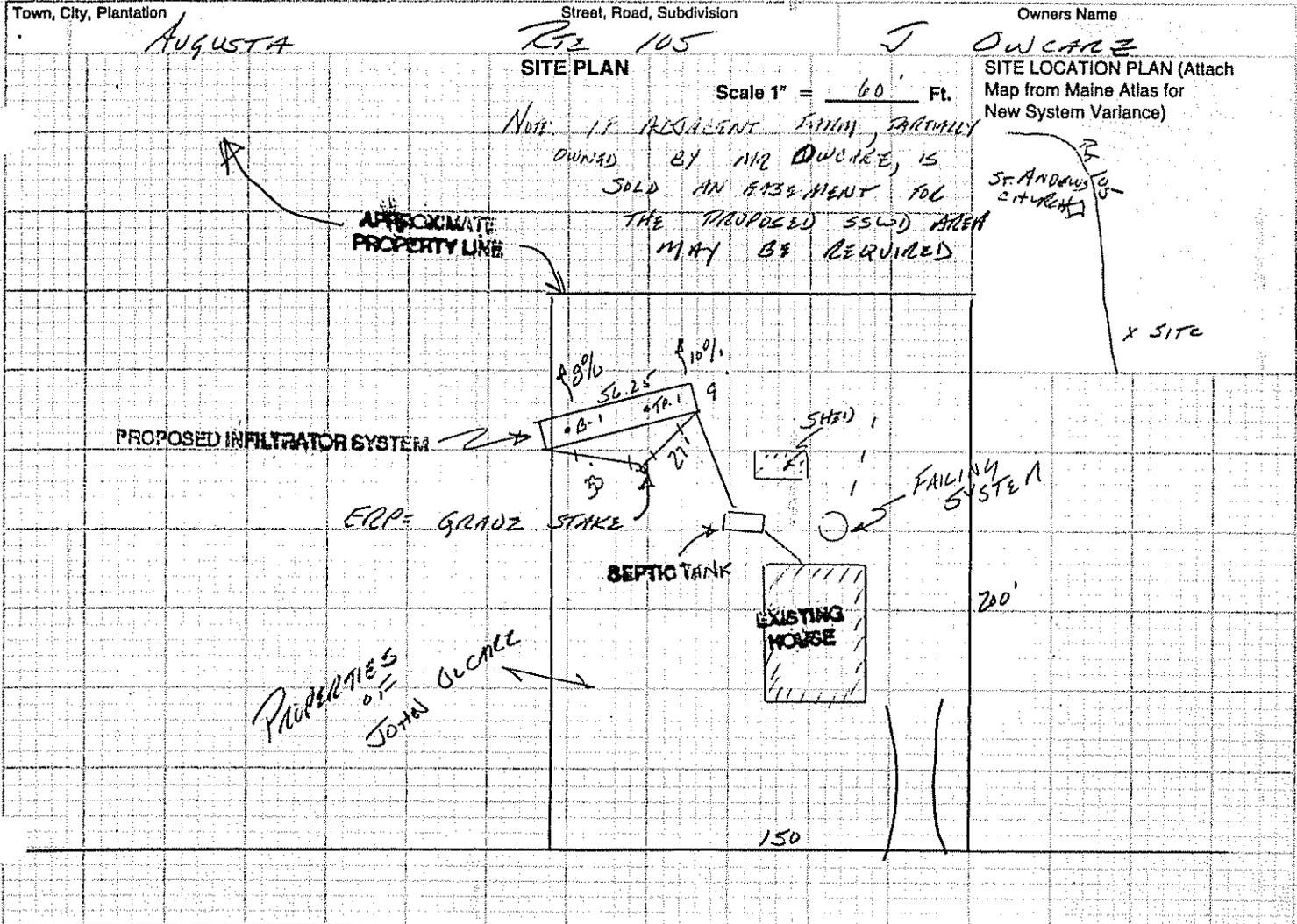
Signature: [Signature]  
Site Evaluator Signature  
(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

SE#: 181

Date: 8-23-93

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering



## SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP-1  Test Pit  Boring

N/A " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0			
<b>SILT LOAM</b>	<b>FRIABLE</b>	<b>BROWN</b>	<b>NONE EVIDENT</b>
10		<b>OLIVE BROWN</b>	<b>COMMON</b>
<b>SILTY CLAY</b>	<b>FIRM</b>		<b>Faint</b>
20		<b>OLIVE</b>	<b>TO COMMON</b>
30			<b>DISTINCT</b>
40			
50			

Soil Profile <u>B</u>	Classification <u>D</u>	Slope <u>10</u> %	Limiting Factor <u>E</u>	<input checked="" type="checkbox"/> Ground Water
	Condition			<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole B-1  Test Pit  Boring

N/A " Depth of Organic Horizon Above Mineral Soil

Texture	Consistency	Color	Mottling
0			
<b>SILT LOAM</b>	<b>FRIABLE</b>	<b>BROWN</b>	<b>NONE EVIDENT</b>
10		<b>OLIVE BROWN</b>	<b>COMMON</b>
<b>SILTY CLAY</b>	<b>FIRM</b>		<b>Faint</b>
20		<b>OLIVE</b>	<b>TO</b>
30			<b>COMMON</b>
40			<b>DISTINCT</b>
50			

Soil Profile <u>9</u>	Classification <u>D</u>	Slope <u>8</u> %	Limiting Factor <u>E</u>	<input checked="" type="checkbox"/> Ground Water
	Condition			<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

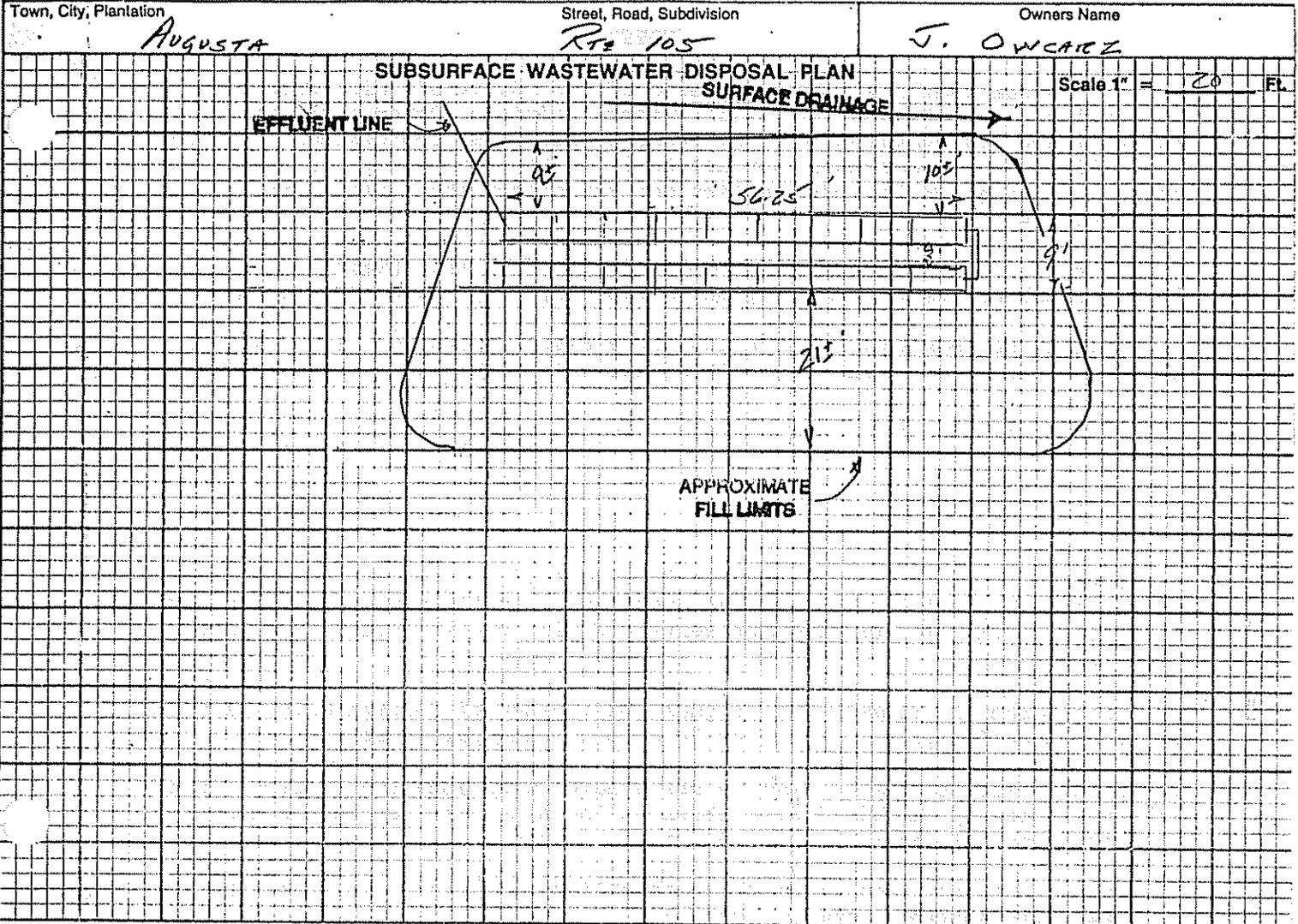
*[Signature]*  
Site Evaluator Signature

181  
SE#

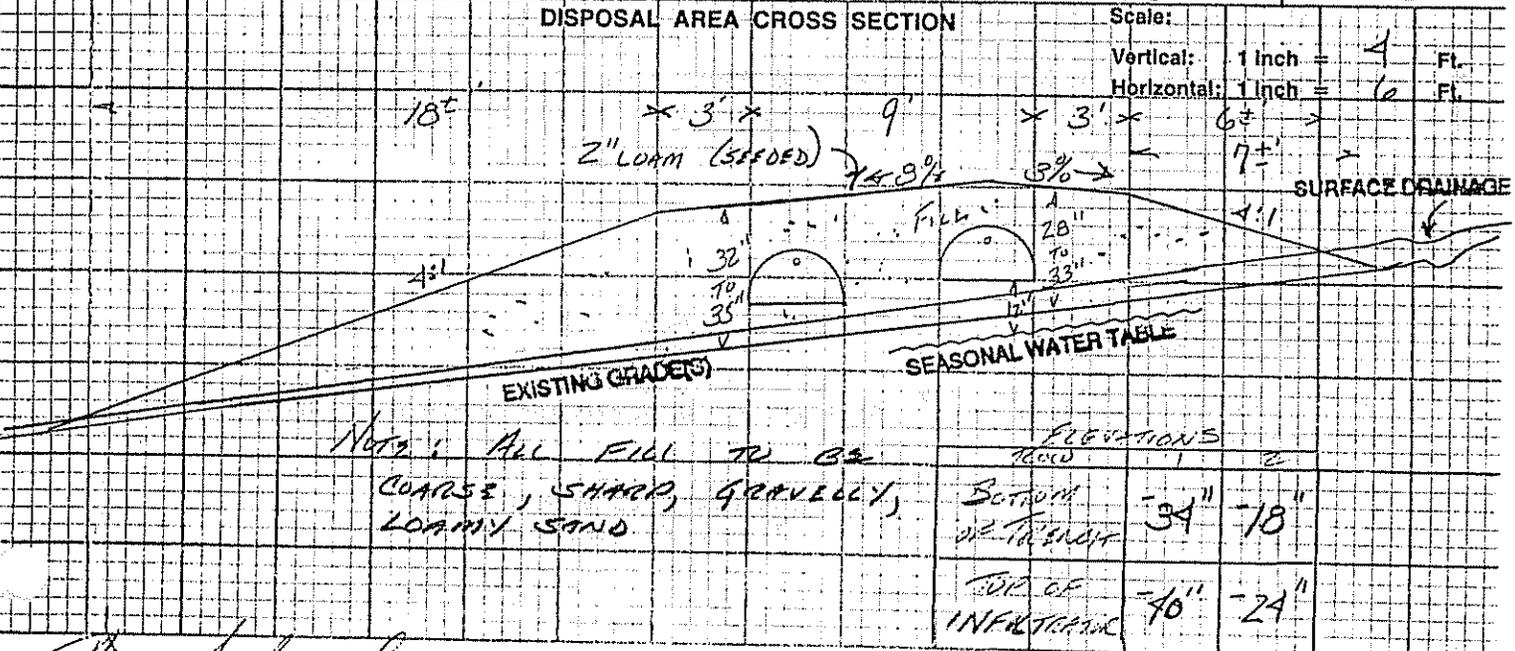
8-23-93  
Date

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION	
Depth of Fill (Upslope)	<u>28.33"</u>	Reference Elevation is	<u>00"</u>	<u>SEE BLUE GRIPPER STAKE MARKED</u>	
Depth of Fill (Downslope)	<u>32.35"</u>	Bottom of Disposal Area	<u>11"</u>		
		Top of Distribution Lines or Chambers	<u>24" ABOVE GROUND</u>		



[Signature]  
Site Evaluator Signature

101  
SE#

8-23-93  
Date

## NOTES

1. Site evaluations conform to criteria of the "State of Maine-Subsurface Wastewater Disposal Rules-Capt 241" latest revision. Other environmental concerns are not evaluated and may require additional professional opinions. The delineation of wetlands when needed is to be performed by competent consultants engaged in such practice and may affect the suitability of particular sites.
2. All construction to conform to specifications in the "State of Maine-Subsurface Wastewater Disposal Rules-Chapt 241" latest revision.
3. Wells to be located a minimum 100' from disposal system. Systems to be a minimum 20' from structures with foundations 15' from other structures.
4. Property lines shown are as provided by owner/owner's agent no guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
5. A septic tank outlet filter is required when installing a mechanical garbage disposal or solids handling grinder pump.
6. Pump stations, when required, shall be watertight to prevent infiltration. Pumps shall be installed to manufacturers specifications and sized for actual installed T.D.H.. For uninterupted service during repair duplex pumps are required.
7. Force mains and pressure lines shall be flushed of foriegn material and pumps checked for proper on/off cycle before being put in service.
8. Applicability of design must be reevaluated when location of structures are substantially different than shown on the site plan, or when other appurtenances(I.E. swimming pools) are considered.
9. Systems put into service prior to establishing proper cover shall be provided with adequate erosion controls.
10. Provide low profile tanks when determined needed in the field. All tanks may be field located at least 8' from structures.
11. All components subject to freezing must be adequately insulated.
12. The LPI shall inform the owner and designer of local ordinances exceeding the "Rules" prior to issueing a permit, so that necessary amendments can be made.
13. Systems must be maintained as outlined in "Septic Systems-How They Work and How to Keep Them Working" by Maine D.E.P.
14. All designs are subject to Local, State, or Federal review. Designers liability shall be limited to required revisions. In no case shall liability exceed designers fee.

The owner/applicants signature on page one aknowledges their understanding of the "Notes".