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REPLACEMENT SYSTEM VARIANCE REQUEST

TOWN \$ 120.00

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application (HHE-200) for the proposed replacement system which requires a variance to the Rules. The LPI shall review the Replacement System Variance Request and HHE-200 and may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of the LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 2006)
2. There will be no change in use of the structure except as authorized for one-time exempted expansions outside the shoreland zone of major waterbodies/courses.
3. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.
4. The BOD₅ plus S. S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION		Town of <u>AUGUSTA</u>
Permit No. <u>6192</u>		Date Permit Issued <u>7/28/08</u>
Property Owner's Name: <u>WILLIAM BOUCHER</u>		Tel. No.: <u>622-0729</u>
System's Location: <u>610 EASTERN AVENUE AUGUSTA</u>		
Property Owner's Address: <u>118 CUSHNOC ROAD</u>		
(if different from above) <u>VASSALBORO, ME 04989</u>		

SPECIFIC INSTRUCTIONS TO THE: LOCAL PLUMBING INSPECTOR (LPI):
 If any of the variances exceed your approval authority and/or do not meet all 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, complete the Replacement System 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.

PROPERTY OWNER:
 I understand that the proposed system requires a variance to 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.

William Boucher SIGNATURE OF OWNER 7/28/08 DATE

LOCAL PLUMBING INSPECTOR:
 I, Wayne R. Latham, the undersigned, have visited the above property and have determined to the best of my knowledge that it cannot be installed in compliance with the Rules. As a result of my review of the Replacement 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/she shall state his/her reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments _____

Wayne R. Latham LPI SIGNATURE 7/28/08 DATE

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
	Ground Water Table			Restrictive Layer			Bedrock	
SOILS								
Soil Profile	9							
Soil Condition	D							
from HHE-200							7 inches	
SETBACK DISTANCES (in feet)	Disposal Fields (total design flow)			Septic Tanks (total design flow)			inches	
from	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Disposal Fields To	Septic Tanks To
Wells with water usage of 2000 or more gpd or public water supply wells	300 ft	300 ft	300 ft	100 ft	100 ft	100 ft		
Owner's wells	100 down to 60 ft [a]	200 down to 100 ft	300 down to 150 ft	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft		
Neighbor's wells	100 down to 60 ft [f]	200 down to 120 ft [f]	300 down to 180 ft [f]	100 down to 50 ft [f]	100 down to 75 ft [f]	100 down to 75 ft [f]		
Water supply line	10 ft [h]	20 ft [h]	25 ft [h]	10 ft [h]	10 ft [h]	10 ft [h]		
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft [d]	200 down to 120 ft [d]	100 down to 180 ft [d]	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	71'	
Water course, minor	50 down to 25 ft [e]	100 down to 50 ft [e]	150 down to 75 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft		
Edge of fill extension -- Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]		
Slopes greater than 3:1	10 ft [g]	18 ft [g]	25 ft [g]	N/A	N/A	N/A		
No full basement (e.g. slab, frost wall, columns)	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		
Full basement (below grade foundation)	20 down to 10 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft		
Property lines	10 down to 5 ft [c]	18 down to 9 ft [c]	20 down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 down to 10 ft [c]		
Burial sites or graveyards, measured from the downhill toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft		

OTHER

1. REDUCE SLOPE TO 3:1 ON ONE END TO MAINTAIN FILL OUT OF WET AREA
2. REDUCE SEPARATION DISTANCE FROM 18 INCHES TO 12 INCHES TO MAINTAIN FILL ON LAWN AREA AND OUT OF WET AREA
- 3.

Footnotes: [a] Single-family well setbacks may be reduced as prescribed in Section 701.2
 [b] This distance may be reduced to 25 feet, if the septic tank or holding tank is tested in the plumbing inspector's presence and shown to be watertight or of monolithic construction.
 [c] Additional setbacks may be needed to prevent fill material extensions from encroaching on abutting property.
 [d] Additional setbacks may be required by local Shoreland zoning.
 [e] Natural Resources Protection Act requires a 25 foot setback on slopes of less than 20%, from the edge of soil disturbance and 100 feet on slopes greater than 20%. See Chapter 15.
 [f] May not be any closer to neighbor's well than the existing disposal field or septic tank unless written permission is granted by the neighbor. This setback may be reduced for single family houses with Department approval. See Section 702.3.
 [g] The fill extension shall reach the existing ground before the 3:1 slope or within 100 feet of the disposal field.
 [h] See Section 1402.10 for special procedures when these minimum setbacks cannot be achieved.

WILLIAM P BROWN *William P Brown*
 SITE EVALUATOR'S SIGNATURE

7/23/2008
 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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION		>> CAUTION: PERMIT REQUIRED -- ATTACH IN SPACE BELOW <<
City, Town, or Plantation	AUGUSTA	
Street or Road	610 EASTERN AVENUE	

OWNER/APPLICANT INFORMATION		AUGUSTA PERMIT # 6192 TOWN COPY	
Name (last, first, MI)	BOUCHER, WILLIAM	Date Permit Issued:	7/28/08
	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	FEE Charged	\$ 120.00
Mailing Address of Owner/Applicant	118 CUSHNOC ROAD VASSALBORO, ME 04989	L.P.I. #	807

Daytime Tel. #	207/622-0729	Municipal Tax Map #	11	Lot #	236
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OWNER OR APPLICANT STATEMENT	CAUTION: INSPECTION REQUIRED
I state 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.	I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.
<i>William Boucher</i> Signature of Owner/Applicant	<i>Mary R. Lally</i> Local Plumbing Inspector Signature
Date	(1st) Date Approved: 8/4/08 (2nd) Date Approved: 8/6/08

PERMIT INFORMATION

TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENTS
<input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced <u>TRENCH</u> Year installed <u>1960'S</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<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 checked="" type="checkbox"/> a. Local Plumbing Inspector approval <input type="checkbox"/> b. State & Local Plumbing Inspector approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<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. Pretreatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous Components

SIZE OF PROPERTY	DISPOSAL SYSTEM TO SERVE:	TYPE OF WATER SUPPLY
0.55 <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>2</u> <input type="checkbox"/> 2. Multiple Family Dwelling Unit, No. of Units: _____ <input type="checkbox"/> 3. Other _____ (specify) Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	<input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
<input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other _____ CAPACITY <u>1000</u> GAL.	<input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input checked="" type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other _____ SIZE <u>960</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	1. <input checked="" type="checkbox"/> No <input type="checkbox"/> 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> 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	<u>180</u> 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	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	LATITUDE AND LONGITUDE
PROFILE CONDITION DESIGN <u>9 / D / 3</u> at Observation Hole # <u>TP-1</u> Depth <u>7</u> " of Most Limiting Soil Factor	1. <input type="checkbox"/> Small - 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq. ft./gpd 3. <input type="checkbox"/> Medlum-Large - 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq. ft./gpd 5. <input checked="" type="checkbox"/> Extra-Large - 5.0 sq. ft./gpd	1. <input type="checkbox"/> Not Required 2. <input checked="" type="checkbox"/> May Be Required 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems DOSE _____ gallons	3. Section 503.0 (meter readings) ATTACH WATER METER DATA at center of disposal area Lat. <u>44</u> d <u>17</u> m <u>44</u> s Long. <u>69</u> d <u>43</u> m <u>05</u> s If gps, state margin of error: <u>30</u> ft

SITE EVALUATOR'S STATEMENT

I certify that on 7/23/08 (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).

<i>William P Brown</i> Site Evaluator Signature	188 SE#	7/23/2008 Date
WILLIAM P BROWN Site Evaluator Name Printed	293-2110 Telephone Number	 E-mail Address

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering
Department of Human Services

Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
610 EASTERN AVENUE

Owners Name
WILLIAM BOUCHER

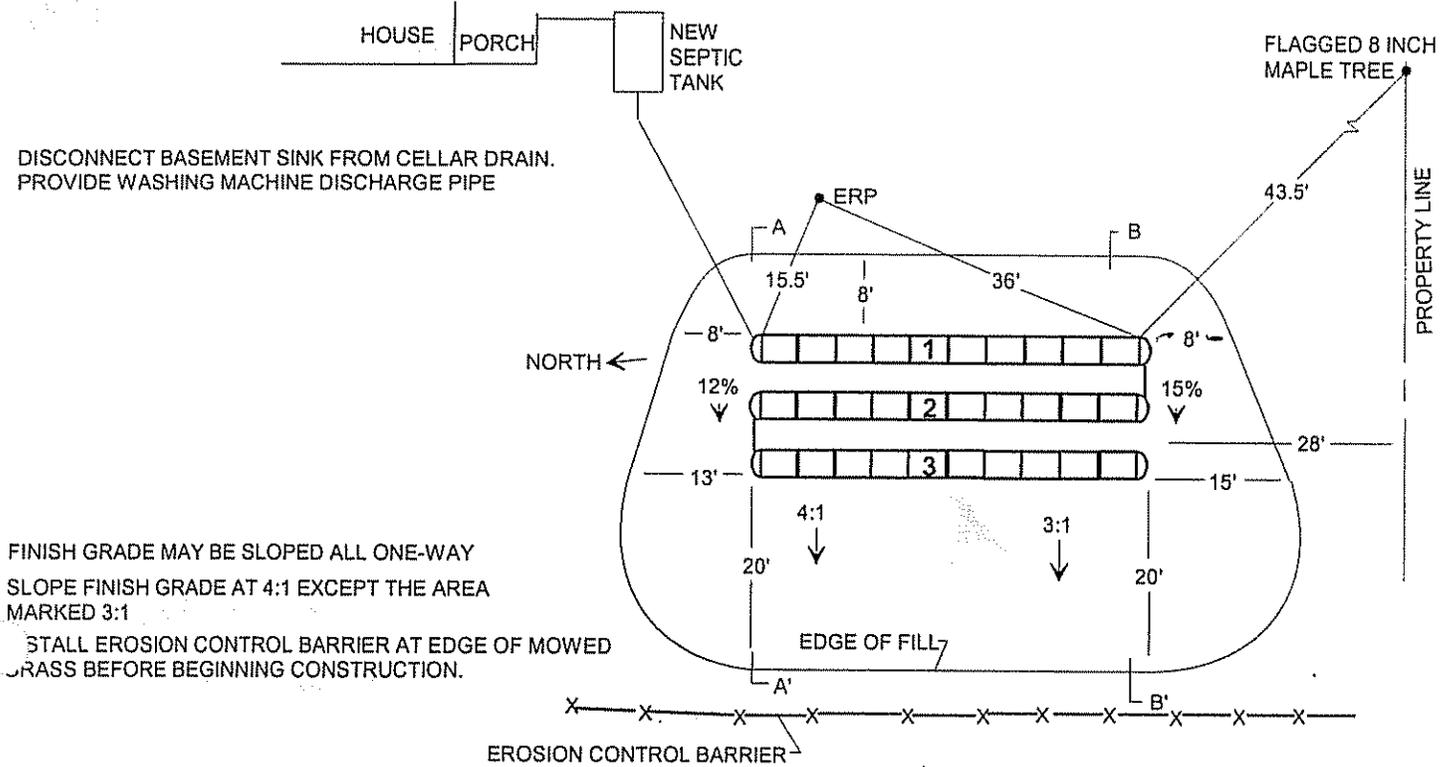
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

USE 3 ROWS OF "QUICK-FOUR" INFILTRATORS WITH 10 UNITS IN EACH ROW (OR EQUIVALENT). EACH ROW IS 3 FEET APART. FLAG MARK CORNERS OF NEW SYSTEM WITHOUT ENDCAPS. THE SYSTEM MEASURES 15' X 40' WITHOUT ENDCAPS. USE UPPER KNOCKOUTS ON ENDCAPS FOR ALL PIPE CONNECTIONS.

CONNECT ROWS IN SERIAL DISTRIBUTION. USE VERY COARSE GRAVEL NEAR INFILTRATORS

PUMP OUT AND REMOVE EXISTING TANK. INSTALL ONE PIECE SEPTIC TANK AT HIGHER ELEVATION AT LEAST 8 FEET FROM THE BUILDING. RAISE INTERNAL PLUMBING AND INSTALL NEW BUILDING DRAIN TO PROVIDE GRAVITY FLOW TO DISPOSAL SYSTEM.



FINISH GRADE MAY BE SLOPED ALL ONE-WAY
SLOPE FINISH GRADE AT 4:1 EXCEPT THE AREA
MARKED 3:1

INSTALL EROSION CONTROL BARRIER AT EDGE OF MOWED
GRASS BEFORE BEGINNING CONSTRUCTION.

FILL REQUIREMENTS

Depth of Fill (Upslope) **27-29"**
Depth of Fill (Downslope) **31-38"**
DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation
Top of distribution Lines or Chambers
Bottom of Disposal Area

**VARIES
SEE
BELOW**

ELEVATION REFERENCE POINT

Location and Description:
**FLAGGED NAIL IN 16 INCH APPLE
TREE, 2 FEET ABOVE GROUND**
Reference Elevation is: 00"

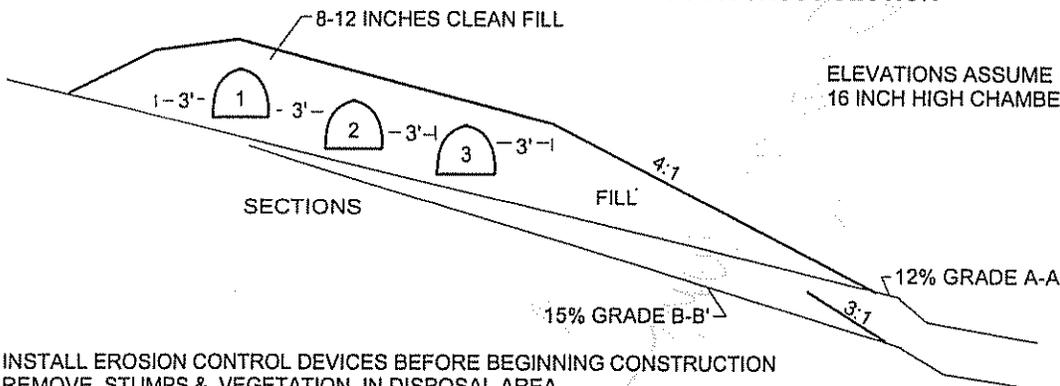
DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 10 Ft.

ELEVATIONS ASSUME HIGH CAPACITY

16 INCH HIGH CHAMBERS



ROW	BOTTOM OF CHAMBER	TOP OF CHAMBER
1	-49"	-33"
2	-58"	-42"
3	-67"	-51"

INSTALL EROSION CONTROL DEVICES BEFORE BEGINNING CONSTRUCTION
REMOVE STUMPS & VEGETATION IN DISPOSAL AREA
SCARIFY ENTIRE FILL AREA
MIX 4 INCHES OF FILL MATERIAL THOROUGHLY WITH EXISTING SOIL TO FORM
TRANSITION ZONE (ACCORDING TO CHAPTER 8, MAINE PLUMBING CODE)
INSTALL CHAMBERS PER MANUFACTURER'S RECOMMENDATIONS
USE VERY COARSE GRAVEL AROUND INFILTRATORS
ALL OTHER FILL SHALL BE GRAVELLY COARSE SAND
SLOPE FINISH GRADE AS SHOWN OR ALL ONE-WAY
LOAM, SEED, MULCH ALL DISTURBED AREAS

WILLIAM P BROWN
Site Evaluator Signature

William P Brown

188
SE #

7/23/2008
Date

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