SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of 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, Plantation	AUGUSTA
Street or Road	113 PLEASANT HILL RD.
Subdivision, Lot #	

AUGUSTA 5364 TOWN COPY
Date Permit Issued: 8-27-04 $ 120.00 ☐ If Double Fee Charged
Local Plumbing Inspector Signature L.P.I. # 1804

OWNER/APPLICANT INFORMATION

Name (last, first, MI): PLOURDE, BILL ☑ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 113 PLEASANT HILL RD, AUGUSTA, ME. 04330

Daytime Tel. #

Municipal Tax Map # 14 Lot # 33

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.
Signature of Owner or Applicant — Date 8-24-04

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 9/13/04 — (2nd) 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 Disposal Area
- ☐ 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
.64 ☐ SQ. FT. ☑ ACRES

SHORELAND ZONING
☐ Yes ☑ No

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
  - ☑ a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: ____

CAPACITY: 1,000 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 facilites ---
- ☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	A	☒ C

at Observation Hole # 1
Depth 26"
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

SITE EVALUATOR STATEMENT

I certify that on 6/28/03 (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 6/29/03

JOHN PHILBRICK
Site Evaluator Name Printed

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-4172

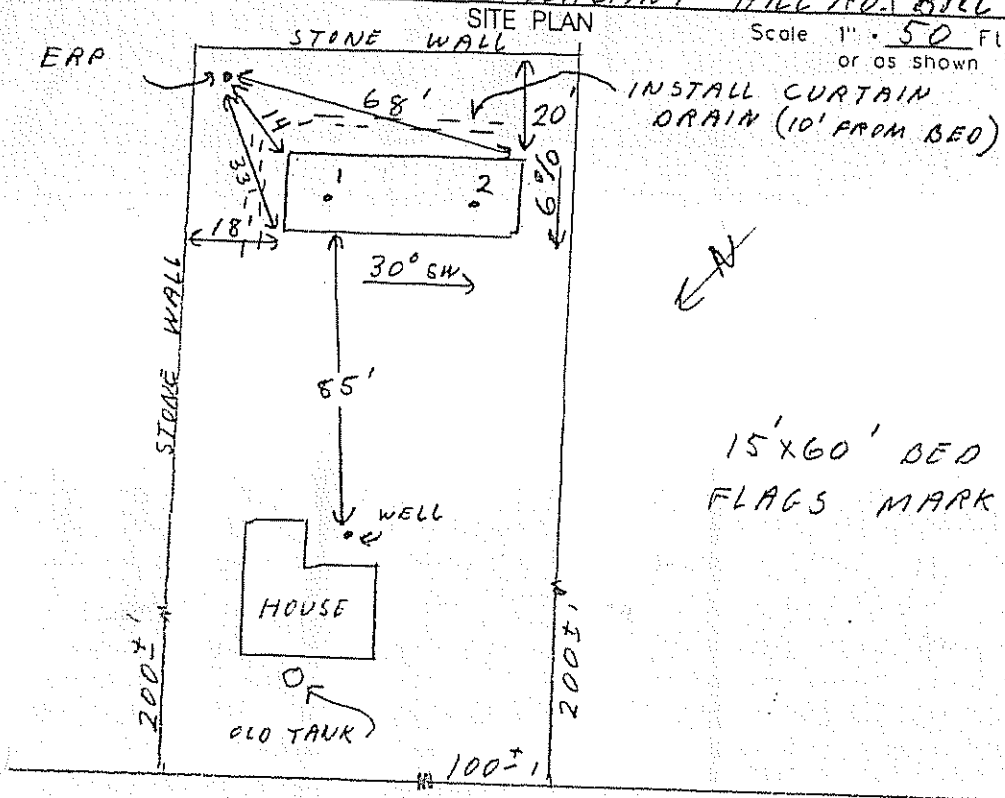
Town, City, Plantation: AUGUSTA

Street, Road Subdivision: PLEASANT HILL RD. BILL

Owner's Name: POURDE

SITE PLAN

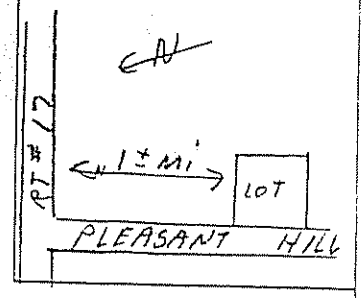
Scale 1" = 50 Ft. or as shown



15'x60' BED
FLAGS MARK CORNERS

SITE LOCATION PLAN

(Map from Maine Atlas recommended)



SOIL DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole 1 — ☒ Test Pit ☐ Boring

0" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (Inches)	Texture	Consistency	Color	Mottling
0–10	SANDY LOAM	FRIABLE	DARK BR	NONE
10–20	LOAMY SAND	↓	YELLOW BR	↓
20–30	↓	↓	GRAY	COMMON DISTINCT
30–40	BEDROCK	↓	↓	↓
40–50	↓	↓	↓	↓

Soil Classification: Profile	Condition	Slope	Limiting Factor	
3	AIIIC	6 %	25"	☐ Ground Water ☐ Restrictive Layer ☒ Bedrock ☐ Pit Depth

Observation Hole 2 — ☒ Test Pit ☐ Boring

0" Depth of Organic Horizon Above Mineral Soil

Depth Below Mineral Soil Surface (Inches)	Texture	Consistency	Color	Mottling
0–10				
10–20		SAME AS #1		
20–30				
30–40				
40–50				

Soil Classification: Profile	Condition	Slope	Limiting Factor	
3	AIIIC	6 %	25"	☐ Ground Water ☐ Restrictive Layer ☒ Bedrock ☐ Pit Depth

Site Evaluator Signature: [signature] — SE # 256 — Date: 6/29/03

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

01040103

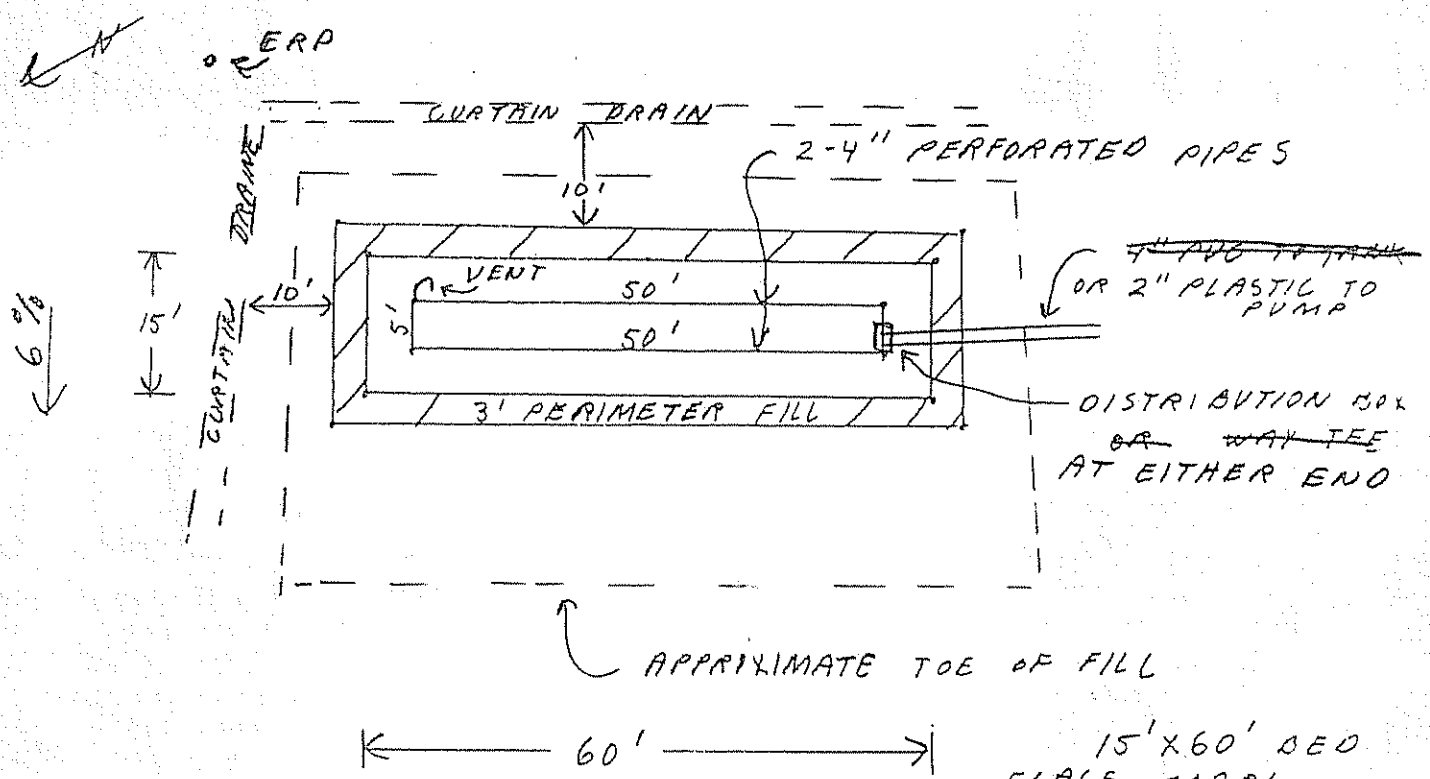
Town, City, Plantation: AUGUSTA

Street, Road, Subdivision: PLEASANT HILL RD.

Owner's Name: BILL PLOURDE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 Ft. or as shown



FILL REQUIREMENTS

Depth of Fill (Upslope) 22"

Depth of Fill (Downslope) 33"

CONSTRUCTION ELEVATION

Reference Elevation is 0"

Bottom of Disposal Area -56"

Top of Distribution Lines or Chambers -45"

ELEVATION REFERENCE POINT

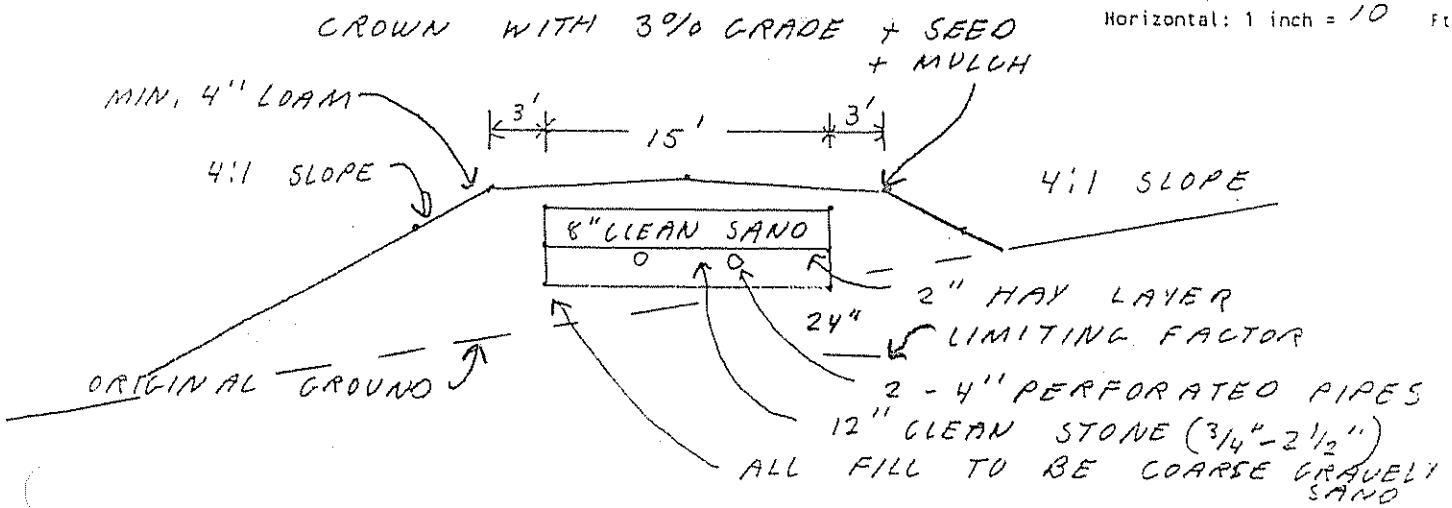
ERP IS IN 2' OAK, 14' NE OF SYSTEM, 24" ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.

Horizontal: 1 inch = 10 Ft.



Site Evaluator Signature

256
SE#

6/29/03
Date

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

REPLACEMENT SYSTEM VARIANCE REQUEST

FORMS

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 an 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 LPI's authority.

1. The proposed design meets the definition of a Replacement System as defined in the Rules (Sec. 1903)
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 BOD_5 plus S.S. content of the wastewater is no greater than that of normal domestic effluent

GENERAL INFORMATION

Permit No. #5364

Town of AUGUSTA

Date Permit Issued 8/27/04

Property Owner's Name: BILL PLOURDE

Tel. No.:

System's Location: PLEASANT HILL RD., HOUSE # 113

Property Owner's Address: AUGUSTA, ME 04330

(if different from above)

SPECIFIC INSTRUCTIONS TO THE:

LOCAL PLUMBING INSPECTOR (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, 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 Variance Request with your signature on reverse side of form.

PROPERTY OWNER:

If 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.

[signature] 8-24-04

SIGNATURE OF OWNER DATE

LOCAL PLUMBING INSPECTOR

George H. Sawyer Jr., 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 she shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments

[signature] 8/27/04

LPI SIGNATURE DATE

HHE-204 Rev. 3/97

10 CMR 241 (June 1, 1999)

FORMS

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
Soil Profile 3	Ground Water Table			to 7"				inches
Soil Condition Att C	Restrictive Layer			to 7"				inches
from HHE-200	Bedrock			to 12"				inches
SETBACK DISTANCES (in feet)	Disposal Fields			Septic Tanks			Disposal Fields	Septic Tanks
From	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water supply wells	300[d] ft	300[d] ft	300[d] ft	100[d] ft	100[d] ft	100[d] ft		
Owner's wells	100 down to 50 ft	200 down to 100 ft	300 down to 150 ft	100[b] down to 50 ft	100 down to 50 ft	100 down to 50 ft	85'	50'
Neighbor's wells	100[b] down to 60 ft	200[b] down to 120 ft	300[b] down to 180 ft	100[b] down to 50 ft	100[b] down to 75 ft	100[b] down to 75 ft		
Water supply line	10 ft[d]	20 ft[d]	25 ft[d]	10 ft[d]	10 ft[d]	10 ft[d]		
Water course, major - for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft		
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft		
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[d]	25 ft[d]	25 ft[d]	25 ft[d]	25 ft[d]	25 ft[d]		
Slopes greater than 3:1	10 ft	18 ft	25 ft	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[c] ft	18 down to 9[c] ft	20 down to 10[c] ft	10 down to 4[c] ft	15 down to 7[c] ft	20 down to 10[c] ft		
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft		

OTHER

1. Fill extension Grade - to 3:1

2.

3.

Footnotes: a. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State variance

b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 (200 ft. for 1000-2000 gpd or 300 ft. for over 2000 gpd) feet and 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 or property line.

d. Natural Resources Protection Act requires a 25 foot setback on slopes with less than 20% from the edge of disturbance and 100 feet on slopes greater than 20% except for the repair or installation of a replacement system when no practical alternative exists.

SITE EVALUATOR'S SIGNATURE — DATE 6/29/04

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

Page 2- HHE-204 Rev. 4/95

PROPOSAL

FROM:

S. Shepherd and Son, Inc
7 Orchard Lane
Hallowell, Maine 04347

Tel. 623-9168
Fax 622-5324

PAGE NO. 1 OF 1 PAGES

DATE 8/13/04

PROPOSAL SUBMITTED TO:

Bill Plourde
818-9679

JOB NAME

ADDRESS 113 Pleasant Hill Road

CITY/STATE/ZIP Augusta, Maine 04330

PHONE

We hereby submit specifications and estimates for:

Supply complete Subsurface Wastewater Disposal System as designed by John Philbrick SE#256 dated 8/29/03
If Force Main needs only insulation for protection, it is included in price. If for some unknown reason you can NOT get from Point A to Point B because ledge needs to be removed, ledge removal is Not included in price, and will have to be negotiated (I Believe we can find a route without ledge) The Total Price for the job (without ledge remval is Six Thousand, Four Hundred Fifty Dollars ($6,450.00)
Certificate of Insurance will be given upon request

We propose hereby to furnish the materials and perform the labor necessary for the completion of the above specifications, for the sum of Six Thousand Four Hundred Fifty dollars ($ 6,450.00) with payment to be made as follows:
Upon Completion

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control. This proposal subject to acceptance within 30 days and is void thereafter at the option of the undersigned.

Authorized Signature Stephen Shepherd pres

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

ACCEPTED:

Signature

Date

Signature

REPLACEMENT SYSTEM VARIANCE REQUEST

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GENERAL INFORMATION

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Tel. No.:

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LPI SIGNATURE DATE

HHE-204 Rev. 3/97

ORMS

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