

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

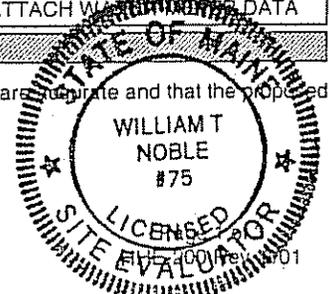
Maine Department of Human Services
Division of Health Engineering, SHS 10
(207) 287-5672 Fax (207) 287-3165

PROPERTY LOCATION		>> Caution Permit Required -- Attach in Space Below <<	
City, Town, or Plantation	Augusta	AUGUSTA 5144 TOWN COPY Date Permit Issued: <u>7/13/03</u> \$ <u>120.99</u> <input type="checkbox"/> Double Fee Charged Local Plumbing Inspector Signature: <u>[Signature]</u> L.P.I. # <u>808</u>	
Street or Road	303 Cony Road		
Subdivision, Lot #			
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	Lovell, Jr., Paul J. <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant		
Mailing Address of Owner/Applicant	2 Morse Street Augusta, Maine 04330		
Daytime Tel. #	(207) 242-7335 <i>CELL #</i>	Municipal Tax Map # <u>14</u>	Lot # <u>45</u>
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. <u>[Signature]</u> <u>7/21/03</u> Signature of Owner or Applicant Date		Caution: Inspection Required I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. <u>[Signature]</u> Local Plumbing Inspector Signature (1st) Date Approved <u>[Signature]</u> Local Plumbing Inspector Signature (2nd) Date Approved	

PERMIT INFORMATION		
TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENTS
<input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <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 checked="" type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input checked="" type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input 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 Approval	<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	DISPOSAL SYSTEM TO SERVE	TYPE OF WATER SUPPLY
4 <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of bedrooms: <u>3</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input checked="" type="checkbox"/> Undeveloped	<input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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 (equipped with Presby Maze™) <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY <u>1500</u> gallons	<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>360</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> lin. ft.	<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 checked="" type="checkbox"/> d. Filter on Tank Outlet	<u>270</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 502.2 (other facilities) SHOW CALCULATIONS -- for other facilities --
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	
PROFILE <u>9</u> / CONDITION <u>D</u> / DESIGN <u>3</u> at Observation Hole # <u>3</u> Depth <u>7</u> " Elevation <u>51</u> " OF MOST LIMITING SOIL FACTOR	<input type="checkbox"/> 1. Small -- 2.0 sq. ft./gpd <input type="checkbox"/> 2. Medium -- 2.6 sq. ft./gpd <input type="checkbox"/> 3. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 4. Large -- 4.1 sq. ft./gpd <input checked="" type="checkbox"/> 5. Extra-Large -- 5.0 sq. ft./gpd	<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	<input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WASTEWATER DATA

SITE EVALUATOR STATEMENT		
I certify that on <u>5-16-03</u> (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).		
<u>[Signature]</u> Site Evaluator Signature	<u>75</u> SE #	<u>5-19-03</u> Date
William T. Noble Site Evaluator Name Printed	<u>(207) 547-3252</u> Telephone #	REVISED <u>6-19-03</u>



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

THE UNIVERSITY OF CHICAGO
DIVISION OF THE PHYSICAL SCIENCES
DEPARTMENT OF CHEMISTRY
5780 SOUTH CAMPUS DRIVE
CHICAGO, ILLINOIS 60637

Dear Sirs:

I am pleased to inform you that your application for a position in the Department of Chemistry has been reviewed and your qualifications are being considered for a position in the Department of Chemistry.

The Department of Chemistry is currently seeking individuals with a Ph.D. in Chemistry or a related field, and with a strong background in organic chemistry. We are particularly interested in candidates who have experience in the synthesis of complex organic molecules and in the study of reaction mechanisms.

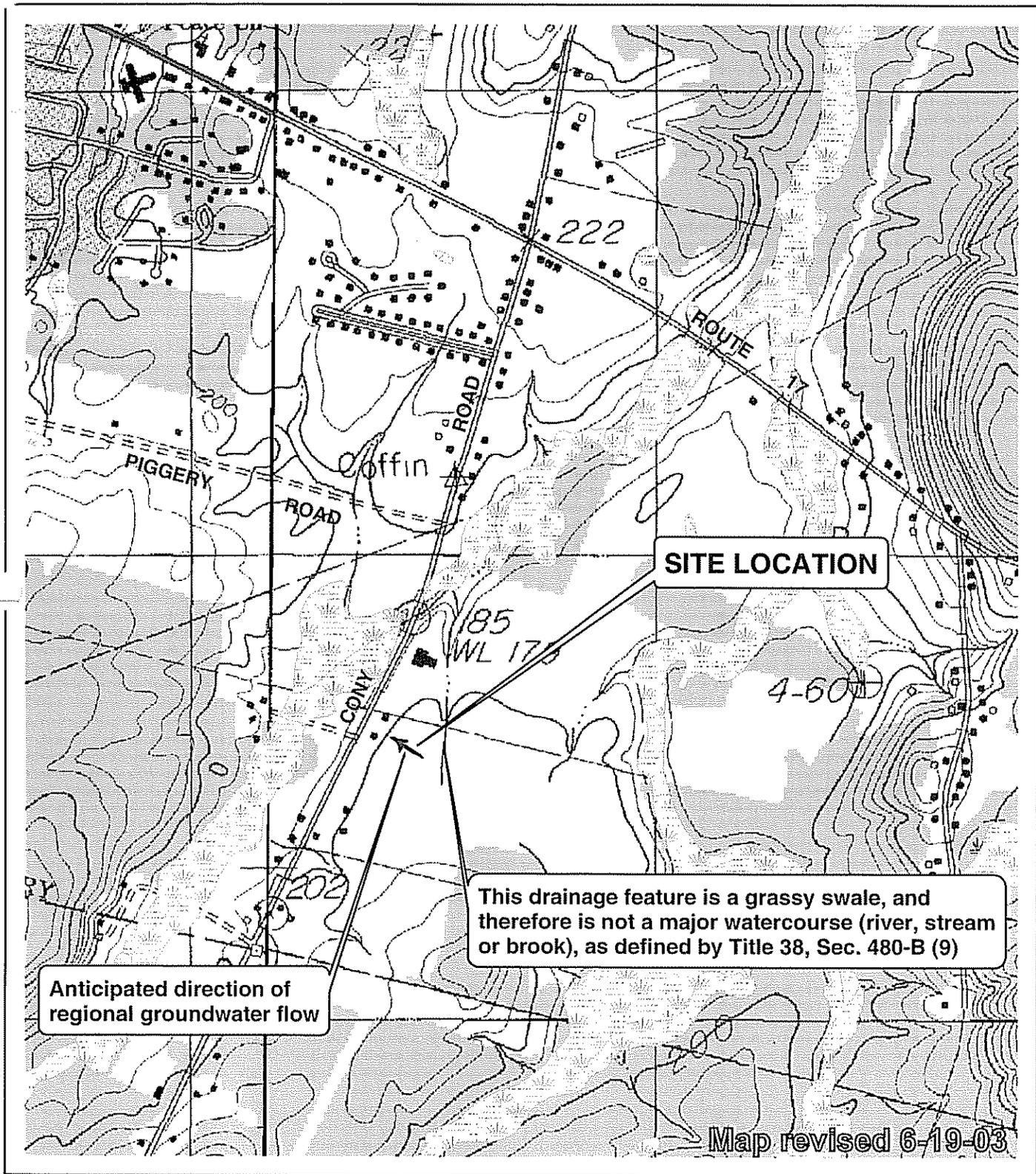
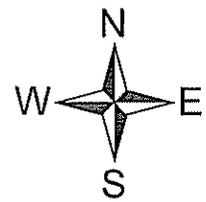
If you are interested in this position, please send me a copy of your curriculum vitae, including a list of your publications and a list of references. Please also include a copy of your most recent thesis or dissertation. Your response should be sent to the following address:

Dr. [Name]
Department of Chemistry
5780 South Campus Drive
Chicago, Illinois 60637

I am sure that you will find this position to be a most interesting and challenging one. I look forward to hearing from you soon.

Sincerely,
[Name]

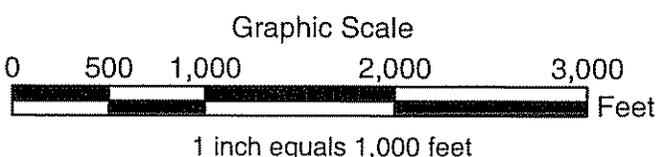
**Bancroft Property
Augusta, Maine
(Paul J. Lovell, Jr., applicant)**



Anticipated direction of regional groundwater flow

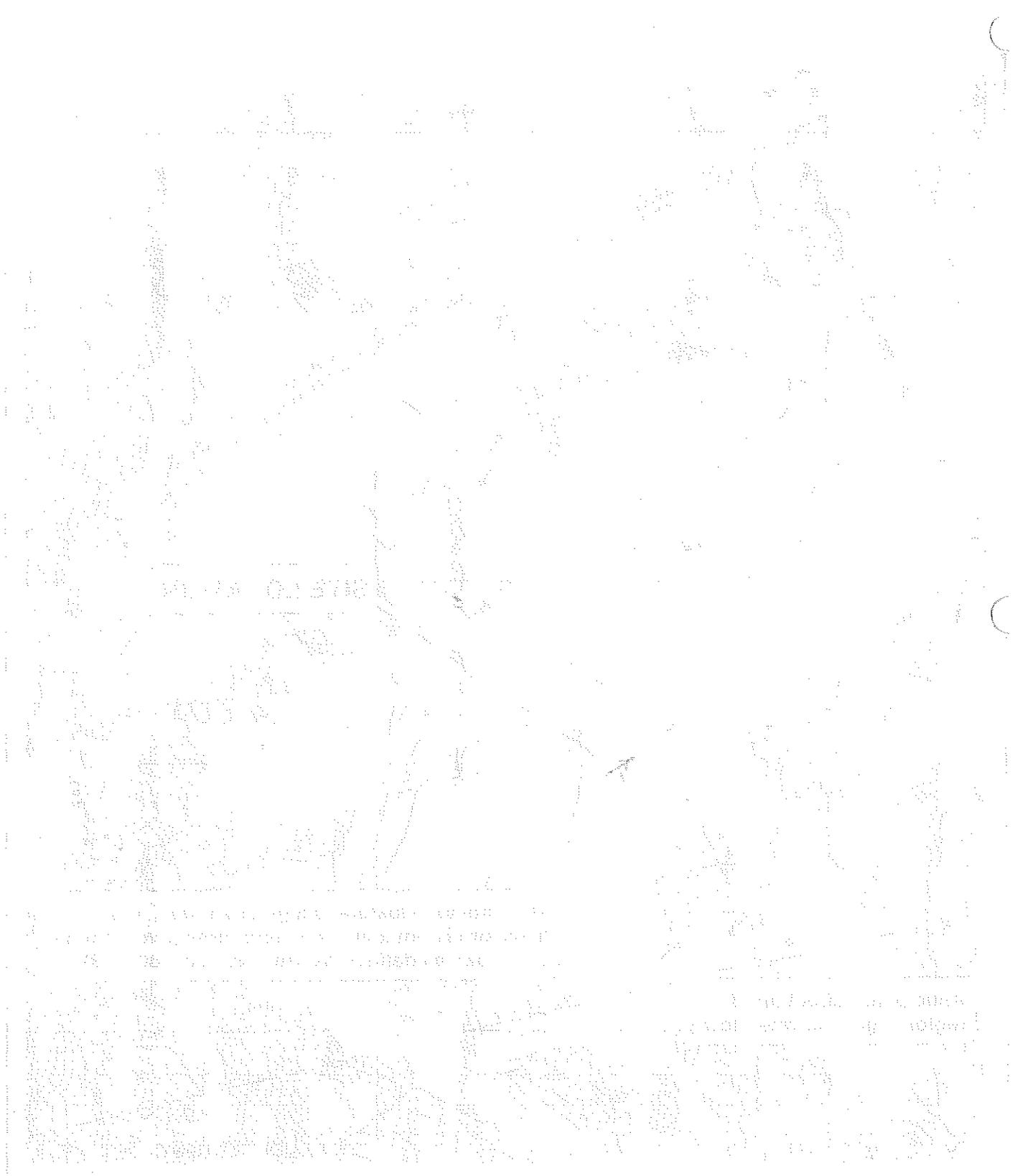
This drainage feature is a grassy swale, and therefore is not a major watercourse (river, stream or brook), as defined by Title 38, Sec. 480-B (9)

Map revised 6-19-03



Source:
USGS Togus Pond Quadrangle
7.5 Minute Series (topographic)
Revised 1982

1950
10/10/50



1950
10/10/50

1950
10/10/50

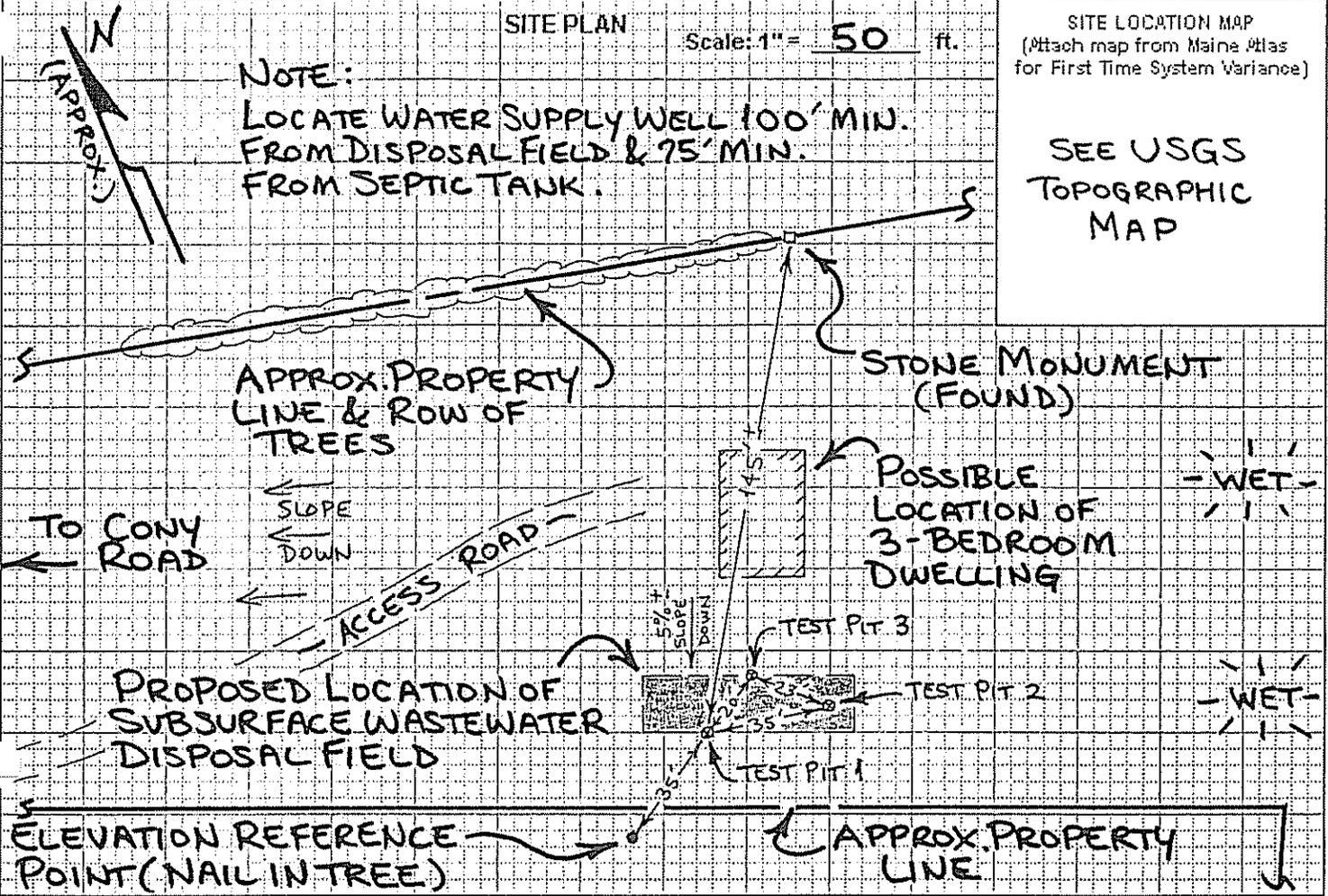
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 FAX (207) 287-3165

Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
CONY ROAD

Owner or Applicant Name
MICHAEL BANCROFT



SOIL PROFILE DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole # 1 Test Pit Boring

1± " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0			OLIVE BROWN	
6	SILT LOAM	FRIABLE		
12			LT. OL. BN.	COM. DIST.
18	SILT TO SILTY CLAY	FIRM	OLIVE	MANY PROMINENT
24				
30				
36				
42				
48	Soil Profile <u>9</u>	Classification Condition <u>D</u>	Slope Percent <u>5±</u>	Limiting Factor Depth <u>8</u>

Groundwater
 Restrictive Layer
 Bedrock

Observation Hole # 2 Test Pit Boring

" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0			V. DARK GRAY BROWN	
6	SILT LOAM	FRIABLE		
12			LT. OL. BN.	COM. DIST.
18	SILT TO SILTY CLAY	FIRM	OLIVE	MANY PROMINENT
24				
30				
36				
42				
48	Soil Profile <u>9</u>	Classification Condition <u>D</u>	Slope Percent <u>5±</u>	Limiting Factor Depth <u>7</u>

TEST PIT 3 - SIMILAR SOIL PROFILE (9-D) WITH LIMITING FACTOR (MOTTLING) AT 7".

Groundwater
 Restrictive Layer
 Bedrock

William J. Robb
 Site Evaluator Signature

75
 SE #

5-19-03
 Date

REVISED 6-19-03

Handwritten notes at the top of the page, including a date "10/10/10" and some illegible text.

Left column of handwritten notes, starting with "10/10/10" and containing several lines of text.

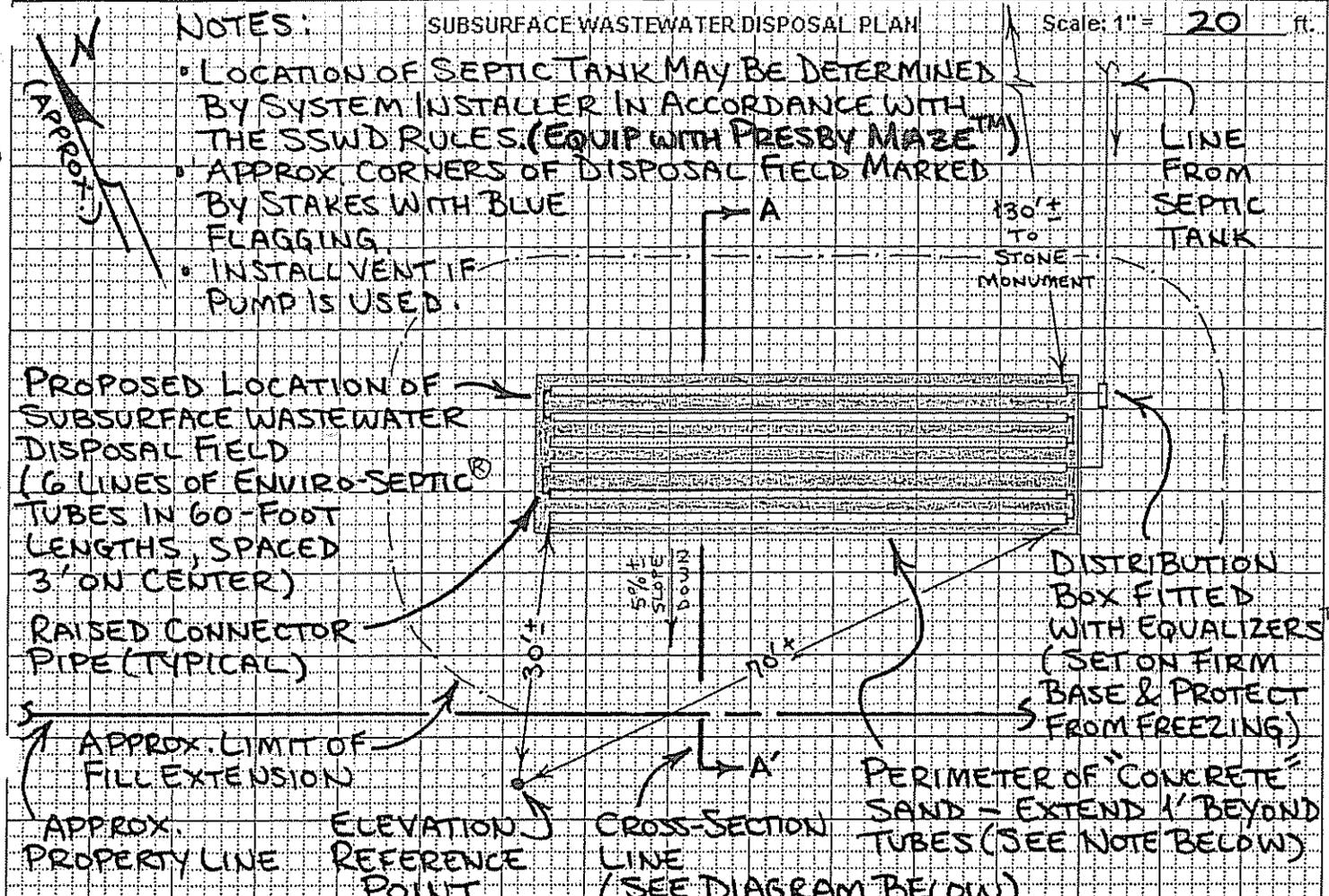
Bottom left section of handwritten notes, including a date "10/10/10" and a list of items.

Right column of handwritten notes, starting with "10/10/10" and containing several lines of text.

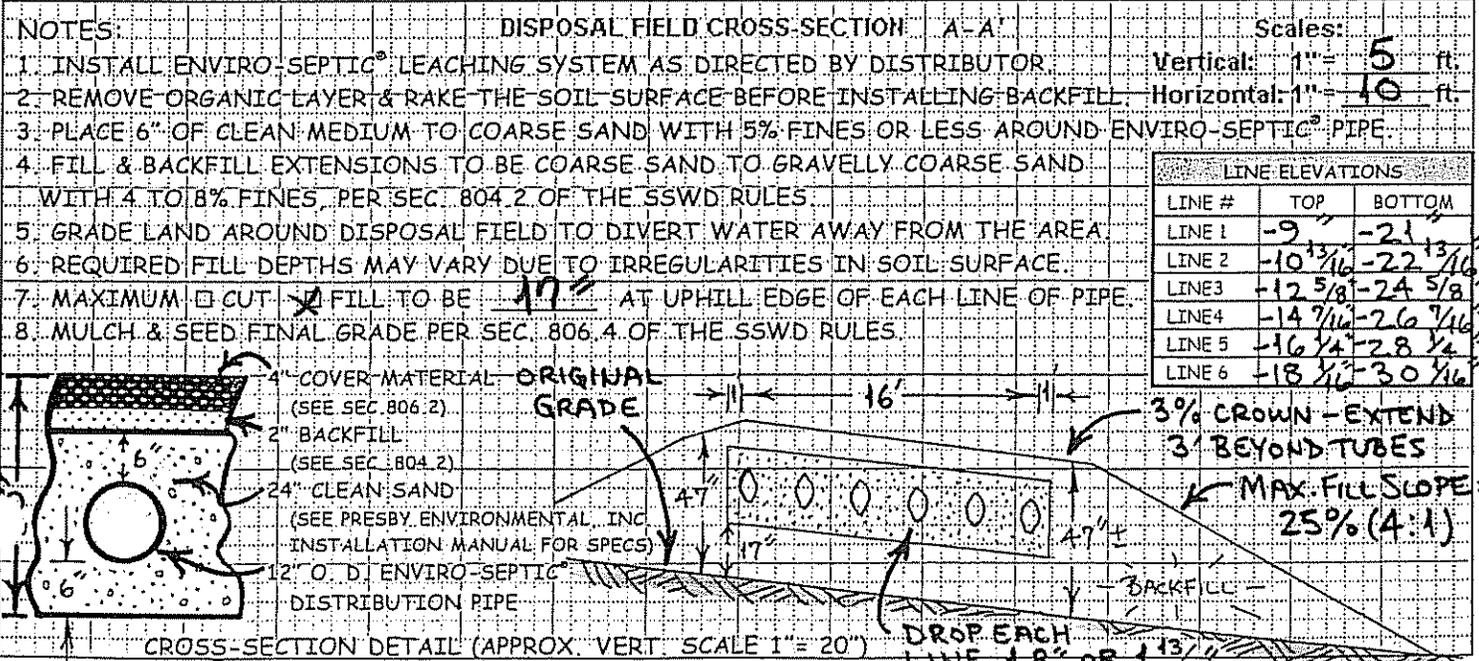
Bottom right section of handwritten notes, including a date "10/10/10" and a list of items.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Town, City, Plantation: **AUGUSTA** Street, Road, Subdivision: **CONY ROAD** Owner or Applicant Name: **MICHAEL BANCROFT**



BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Backfill (upslope) 47"	Finished Grade Elevation +3"	Location & Description: NAIL WITH ORANGE FLAGGING IN 9" DIA. TREE, 80" AGL
Depth of Backfill (downslope) 47±"	Top of Distribution Pipe or Proprietary Device	Reference Elevation is: 0.0" or: _____
DEPTHS AT CROSS-SECTION (shown below)	Bottom of Disposal Field (SEE BELOW)	



William J. Nobb
 Site Evaluator Signature

75 SE # REUSED 5-19-03 Date 6-19-03



14/45

03006A

FIRST TIME SYSTEM VARIANCE REQUEST

This form shall accompany an Application (HHE-200) for a proposed first time system which requires a Variance to provisions of the Subsurface Wastewater Disposal Rules.
 The local plumbing inspector shall not issue a permit for the installation of a first time subsurface wastewater disposal system requiring a variance from the Department of Human Services until approval has been received from them.

GENERAL INFORMATION		Town of <u>Augusta</u>
Permit No. _____		Date Permit Issued _____
Property Owner's Name: <u>Michael Bancroft</u>		Tel. No.: <u>(207) 623-3644</u>
System's Location: <u>Cony Road, Augusta, Maine</u>	applicant:	_____
Property Owner's Address: <u>42 Bangor Street</u>	<u>Paul J. Lovell, Jr.</u>	_____
(if different from above) <u>Augusta, Maine 04330</u>	<u>2 Morse Street</u>	_____
	<u>Augusta, Maine 04330</u>	_____

VARIANCE CONDITIONS

The Department has the authority to vary the requirements of the Rules in accordance with Section 105.2 of the Rules CMR 241 if all the following criteria are satisfied:

- a. The variance request has the approval of the LPI.
- b. The Municipal Officials have indicated that the variance does not conflict with any local wastewater disposal ordinances.
- c. The variance request demonstrates that there is no practical alternative for wastewater disposal, such as access to public sewer or the potential for an easement.
- d. The proposed system does not conflict with any provision controlling subsurface wastewater disposal in the Shoreland Zone.
- e. The site offers potential for a system which will dispose of the wastewater with minimal threat to public health, safety, or welfare.
- f. The property owner has indicated an awareness of the variance and any limitations or added costs the proposed system may require.

SOIL, SITE AND ENGINEERING FACTORS FOR NEW SYSTEM VARIANCE ASSESSMENT
 (SEE TABLES 1900.1-1900.11)

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile	Profile 9	10
Depth to Groundwater/Restrictive Layer	7"	0
Terrain	knoll/upland	5
Size of Property	4 acres	8
Waterbody Setback	> 250 feet	5
Water Supply	drilled well	3
Type of Development	sing. fam. dwell.	0
Disposal Area Adjustment	min. + 33%	5
Vertical Separation Adjustment	min. + 12"	10
Additional Treatment	septic tank filter	3
TOTAL POINT ASSESSMENT (Sec. 1904.5)		54

*
 adv. treatment:
 Presby Maze™
 add 5 pts.

Minimum Points (Check one): Outside Shoreland-50 Inside Shoreland-65 Subdivision-65

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator)	SECTION OF RULE
1. <u>Installation of field on soil with seasonal water table < 12".</u>	<u>Sec. 400.4.1</u>
2. _____	_____
3. _____	_____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal for a First Time System Variance 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.

(Use Additional Sheets, if needed)

Increase in separation distance and disposal field area (as noted above) should compensate for poor soil drainage, provided the system is installed and maintained properly. A septic tank filter is specified for additional wastewater treatment and protection of the disposal field long-term acceptance rate. plus a Presby Maze™

I, William T. Noble, 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.

William T. Noble S.E. 75
 SIGNATURE OF SITE EVALUATOR

5-19-03
 DATE

PROPERTY OWNER

I, Paul J. Love II Jr., 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.

Paul J. Love II Jr.

SIGNATURE OF OWNER
AGENT FOR THE OWNER

7/29/03

DATE

MUNICIPAL OFFICER(S) (Selectman, Councilman, Alderman, Mayor, Town Manager)

We, the Municipal Officer(s) of _____ have reviewed this application and are aware that the applicant is applying for a First Time System Variance to the Subsurface Wastewater Disposal Rules because the proposed system does not meet all requirements of the rules. The proposed variance request does does not comply with all Municipal Ordinances relating to subsurface wastewater disposal.

[Signature]

SIGNATURE FOR THE MUNICIPALITY

C. J. [Signature]

TITLE

7/29/03

DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests prior to rendering a decision.

I, George H. [Signature], 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.

LPI Signature

Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Health Engineering.

I, George H. [Signature], 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.

[Signature]

LPI Signature

7/29/03

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

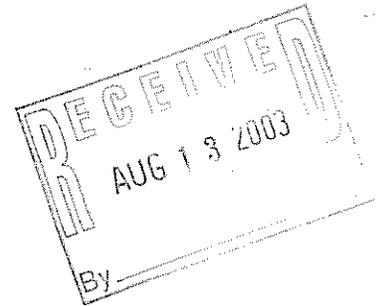
- Note: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 1902.0 for Municipal Review.)
2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 1901.0 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.



STATE OF MAINE
 DEPARTMENT OF HUMAN SERVICES
 DIVISION OF HEALTH ENGINEERING
 11 STATE HOUSE STATION
 AUGUSTA, MAINE
 04333-0011

JOHN ELIAS BALDACCI
 GOVERNOR

August 11, 2003



Michael Bancroft
 42 Bangor Street
 Augusta ME 04330

Subject: Approval, First Time System Variance Request, Bancroft property, Cony Road, Augusta

Dear Mr. Bancroft:

The Division has reviewed a First Time System Variance Request for the subject property. The proposal is to install a subsurface wastewater disposal system to serve a three-bedroom single-family dwelling. The state variance requested is to allow the installation of the system in soils with seven inches to the groundwater table. The system design, prepared by William Noble, SE, dated May 19, 2003, includes an increase in disposal area, an increase in vertical separation, and additional treatment, via a septic tank filter known as Presby Maze, in order to achieve the required First Time System Variance Total Point Assessment. The design is found to be in compliance with the Maine Subsurface Wastewater Disposal Rules.

We approve the requested variance with the following requirements:

1. A permit for system installation is to be obtained from the Local Plumbing Inspector in advance of the start of system construction.
2. The system is to be installed in accordance with the submitted and approved system design. Should alterations be required at the time of system installation, the system designer must be notified prior to making any changes.
3. The variance approval is based only on the rules administered by this department. The approval of the variance request does not relieve the property owner from compliance with all other state and local requirements pertaining to the installation, use, and operation of the wastewater disposal system.

By accepting this approval and the associated plumbing permit, the owner agrees to comply fully with the conditions of approval and the Subsurface Wastewater Disposal 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 regarding this review and/or approval, please feel free to contact me at 287-5687.

Sincerely,

Linda S. Robinson, Environmental Specialist II
 Wastewater & Plumbing Control Program
 Division of Health Engineering
 E-mail: linda.robinson@maine.gov

/lsr
 cc:

George Soucy Jr., LPI
 William Noble, SE
 Paul Lovell Jr., Applicant



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STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
DIVISION OF HEALTH ENGINEERING
10 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0010

14/45

03006A

RECEIVED
AUG 18 2003

FIRST TIME SYSTEM VARIANCE REQUEST

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	Augusta, Maine 04330	_____

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Type of Development	sing. fam. dwell.	0
Disposal Area Adjustment	min. + 33%	5
Vertical Separation Adjustment	min. + 12"	10
Additional Treatment	septic tank filter	3
TOTAL POINT ASSESSMENT (Sec. 1904.5)		54

adv. treatment:
Presby Maze™
add 5 pts.

Minimum Points (Check one): Outside Shoreland-50 Inside Shoreland-65 Subdivision-65

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2. _____	_____
3. _____	_____

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William T. Noble S.E. 75
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5-19-03
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Paul J. Lovell Jr. SIGNATURE OF OWNER AGENT FOR THE OWNER
7/29/03 DATE

MUNICIPAL OFFICER(S) (Selectman, Councilman, Alderman, Mayor, Town Manager)

We, the Municipal Officer(s) of _____ have reviewed this application and are aware that the applicant is applying for a First Time System Variance to the Subsurface Wastewater Disposal Rules because the proposed system does not meet all requirements of the rules. The proposed variance request does does not comply with all Municipal Ordinances relating to subsurface wastewater disposal.

[Signature] SIGNATURE FOR THE MUNICIPALITY
C. J. Neff TITLE
7/29/03 DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests prior to rendering a decision.

I, George A. Bivona, 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.

LPI Signature Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Health Engineering.

I, George A. Bivona, 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.

[Signature] LPI Signature
7/29/03 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.

Linda S. Robinson SIGNATURE OF THE DEPARTMENT
8/10/03 DATE

- Note: 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 1902.0 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 1901.0 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

