

582-0809

# 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.

TOWN CIPM

### GENERAL INFORMATION

Permit No. #2548 E Date Permit Issued 10/15/92  
MONTH/DAY/YEAR

Property Owner's Name: Robert Gagnon Tel. No. 582-0809  
W. 287-3755

System's Location: Mud Mills Road STREET  
Augusta TOWN Maine 04330 ZIP

Property Owner's Address: Same STREET  
 (if different from above)

TOWN STATE 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.

Robert Gagnon  
PROPERTY OWNER'S SIGNATURE

10/3/92  
DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:		
SOILS	Soil Profile	Ground Water Table	to 6"	9E - 0	inches	
	Soil Condition	Restrictive Layer	to 6"		inches	
	Soil HHE-200	Bedrock	to 10"		inches	
	SETBACK DISTANCES (IN FEET)	FROM:	TREATMENT TANK	DISPOSAL AREA	TREATMENT TANK	DISPOSAL AREA
Potable Water Supplies	1. Well: > 2000 gal/day		100 <sup>a</sup>	300 <sup>a</sup>		
	2. Well: < 2000 gal/day					
	a. Neighbor's		50 <sup>ab</sup>	60 <sup>ab</sup>	63	
	b. Property Owner's		25'	50'	85	85
	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 <sup>c</sup>	10 <sup>c</sup>		
Buildings	1. With Basement		5'	10'		
	2. Without Basement		5'	10'		
Property Line			4'	5'		

**OTHER**

1. Fill extension Grade—to 3:1

2.

3.

Notes:

- 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.

*David P. Roague*

SITE EVALUATOR'S SIGNATURE

10/3/92

DATE

**LPI STATEMENT**

I, *Mary R. Zilly*, LPI for the Town of *Anguata* 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:

*Mary R. Zilly*

LPI'S SIGNATURE

10/6/92

DATE

**FOR USE BY THE DEPARTMENT ONLY**

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.

*Nich Smith*

SIGNATURE OF THE DEPARTMENT

10/8/92

DATE

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

**PROPERTY ADDRESS**

Town Or Plantation: Augusta

Street vision Lot #: Mid Mills Road

**PROPERTY OWNERS NAME**

Last: Gagnon First: Robert

Applicant Name: Same

Mailing Address of Owner/Applicant (If Different): P.O. Box 2212 Augusta, Me. 04330

AUGUSTA PERMIT COPY

2548

Date Permit Issued: 10/15/92 \$ 60 FEE  Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 857

**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] 10/3/92

Signature of Owner/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.

[Signature] 12-21-92

Local Plumbing Inspector Signature Date Approved

## PERMIT INFORMATION

<p><b>THIS APPLICATION IS FOR:</b></p> <p>1. <input type="checkbox"/> NEW SYSTEM</p> <p>2. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p>	<p><b>THIS APPLICATION REQUIRES:</b></p> <p>1. <input type="checkbox"/> NO RULE VARIANCE</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p>3. <input type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>a. <input type="checkbox"/> Requiring Local Plumbing Inspector Approval</p> <p>b. <input checked="" type="checkbox"/> Requires State and Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</p>	<p><b>INSTALLATION IS:</b></p> <p>COMPLETE SYSTEM</p> <p>1. <input checked="" type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS:</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input type="checkbox"/> HOLDING TANK _____ GAL</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p>
<p><b>SEASONAL CONVERSION</b></p> <p>to be completed by the LPI</p> <p>5. <input type="checkbox"/> SYSTEM COMPLIES WITH RULES</p> <p>6. <input type="checkbox"/> CONNECTED TO SANITARY SEWER</p> <p>7. <input type="checkbox"/> SYSTEM INSTALLED - P#</p> <p>8. <input type="checkbox"/> SYSTEM DESIGN RECORDED AND ATTACHED</p>	<p><b>IF REPLACEMENT SYSTEM:</b></p> <p>YEAR FAILING SYSTEM INSTALLED _____</p> <p>THE FAILING SYSTEM IS: <u>Pre-1980</u></p> <p>1. <input type="checkbox"/> BED      3. <input type="checkbox"/> TRENCH</p> <p>2. <input type="checkbox"/> CHAMBER    4. <input type="checkbox"/> OTHER: <u>cesspool</u></p>	<p><b>DISPOSAL SYSTEM TO SERVE:</b></p> <p>1. <input type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input checked="" type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER _____</p> <p style="text-align: center;">SPECIFY</p>
<p>SIZE OF PROPERTY: <u>27,500</u> sq. ft.</p> <p>ZONING: <u>Residential</u></p>	<p><b>TYPE OF WATER SUPPLY</b></p> <p><u>Drilled well</u></p>	

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

<p><b>TREATMENT TANK</b></p> <p>1. <input checked="" type="checkbox"/> SEPTIC: <input checked="" type="checkbox"/> Regular <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE: <u>1000</u> GALS.</p>	<p><b>WATER CONSERVATION</b></p> <p>1. <input type="checkbox"/> NONE <u>recommend</u></p> <p>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY: _____</p>	<p><b>PUMPING</b></p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED</p> <p>DOSE: _____ GALS.</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)</p> <p><u>Three bedroom Dwelling - Minimum Design Flow</u></p>
<p><b>SOIL CONDITIONS USED FOR DESIGN PURPOSES</b></p> <p>PROFILE: <u>9</u>      CONDITION: <u>E</u></p> <p>DEPTH TO LIMITING FACTOR: <u>0</u></p>	<p><b>SIZE RATINGS USED FOR DESIGN PURPOSES</b></p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input type="checkbox"/> MEDIUM-LARGE</p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input checked="" type="checkbox"/> EXTRA LARGE</p>	<p><b>DISPOSAL AREA TYPE/SIZE</b></p> <p>1. <input type="checkbox"/> BED _____ Sq. Ft.</p> <p>2. <input checked="" type="checkbox"/> CHAMBER <u>700</u> Sq. Ft. <input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	
			<p>DESIGN FLOW: <u>270</u> (GALLONS/DAY)</p>

## SITE EVALUATOR STATEMENT

On 10/3/92 (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.

David P. Roague  
Site Evaluator Signature

154  
SE#

10/3/92  
Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

AUGUSTA

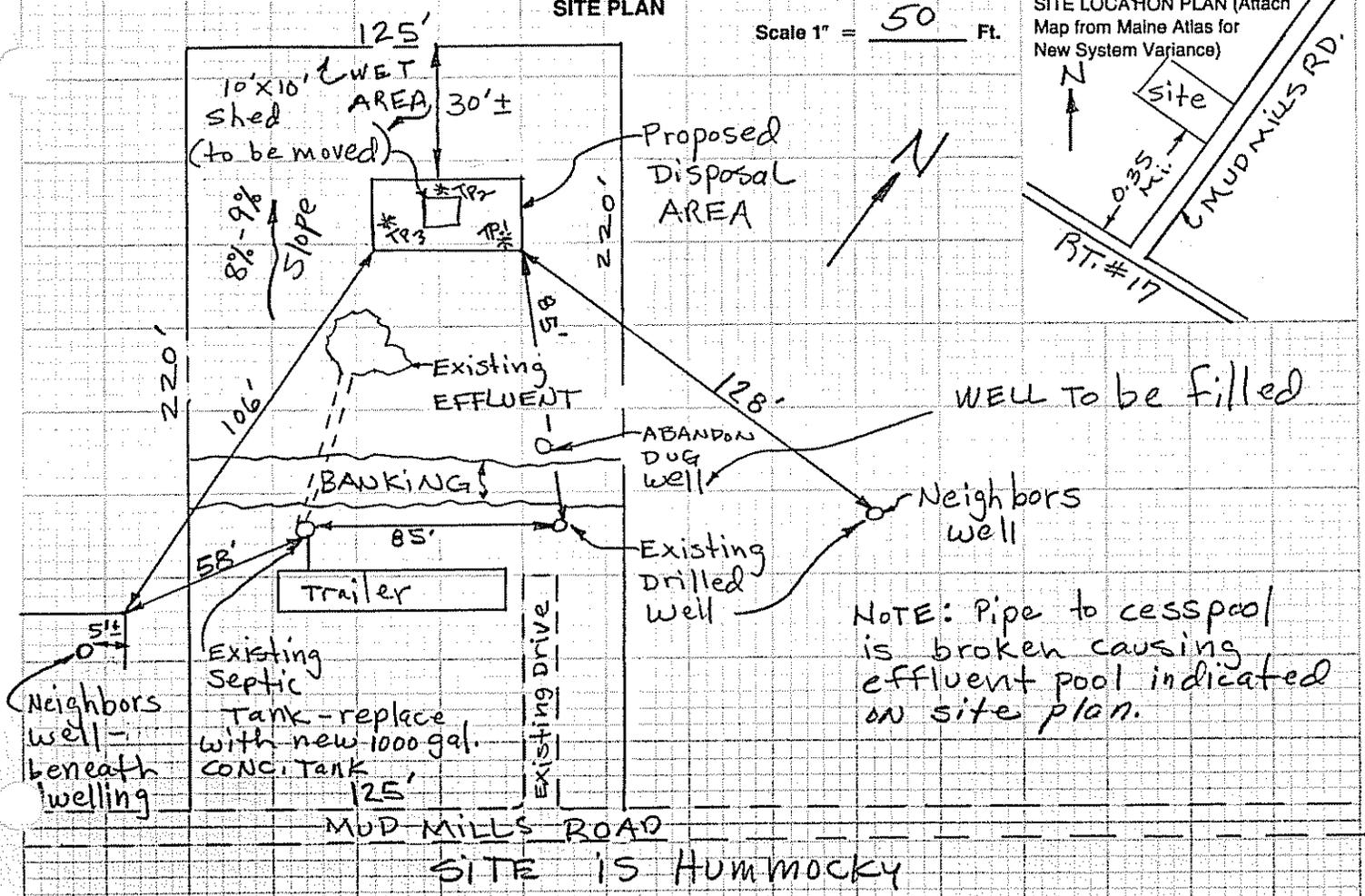
MUD MILLS ROAD

Robert Gagnon

## SITE PLAN

Scale 1" = 50 Ft.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



MUD MILLS ROAD  
SITE IS HUMMOCKY

### SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP<sub>1</sub>  Test Pit  Boring  
 " Depth of Organic Horizon Above Mineral Soil

Observation Hole TP<sub>2</sub>  Test Pit  Boring  
 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	SILT	Friable	Dark	NONE
6	Loam		Brown	apparent
10			olive Gray	
15	SILT	Firm	gray	(Common)
20	Loam to Silty Clay		Dist.	
30	Loam with Sandy Loam		to Many Prom.	
40	Varves			
50				

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	SILT	Friable	BLACK	Masked
6	Loam			
10	Silt + Loam to	Firm	Gray Brown	Many
15	Silty Clay Loam	Very Firm	Gray	Prominent
20	with Sandy Loam	Firm		
30	Varves			
40	TP <sub>3</sub> = 12" Loam over			
45	SILT Loam to Silty Clay Loam			
50	BD = 12" (ON A KNOLL)			

Soil Profile <u>9</u>	Classification <u>D</u>	Slope <u>9</u> %	Limiting Factor <u>10</u>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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Soil Profile <u>9</u>	Classification <u>E</u>	Slope <u>9</u> %	Limiting Factor <u>0</u>	<input checked="" type="checkbox"/> Ground Water <input checked="" type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
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TAKEN IN A DEPRESSION

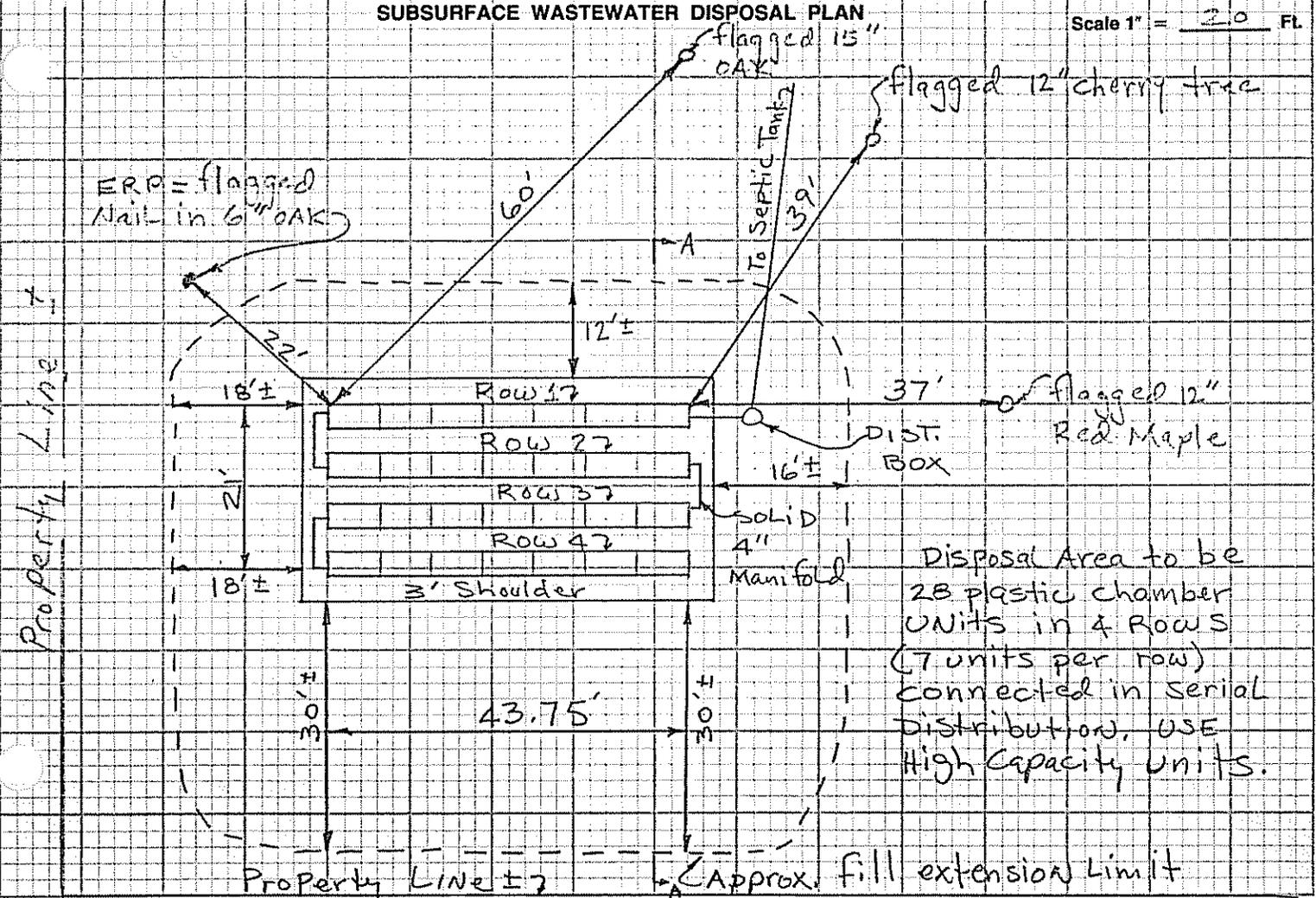
David P. Roague  
Site Evaluator Signature

154  
SE#

10/3/92  
Date

**SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION**

Town, City, Plantation: AUGUSTA Street, Road, Subdivision: MUD MILLS RD Owners Name: Robert GAGNON



**FILL REQUIREMENTS**  
 Depth of Fill (Upslope) 48-53"  
 Depth of Fill (Downslope) 48-55"

**CONSTRUCTION ELEVATIONS**  
 Reference Elevation is 0  
 Bottom of Disposal Area see Below  
 Top of Distribution Lines or Chambers     

**ELEVATION REFERENCE POINT LOCATION & DESCRIPTION**  
Flagged nail in 6" OAK (see Above)

**DISPOSAL AREA CROSS SECTION**

Scale:  
 Vertical: 1 Inch = 1 Ft.  
 Horizontal: 1 Inch = 1 Ft.

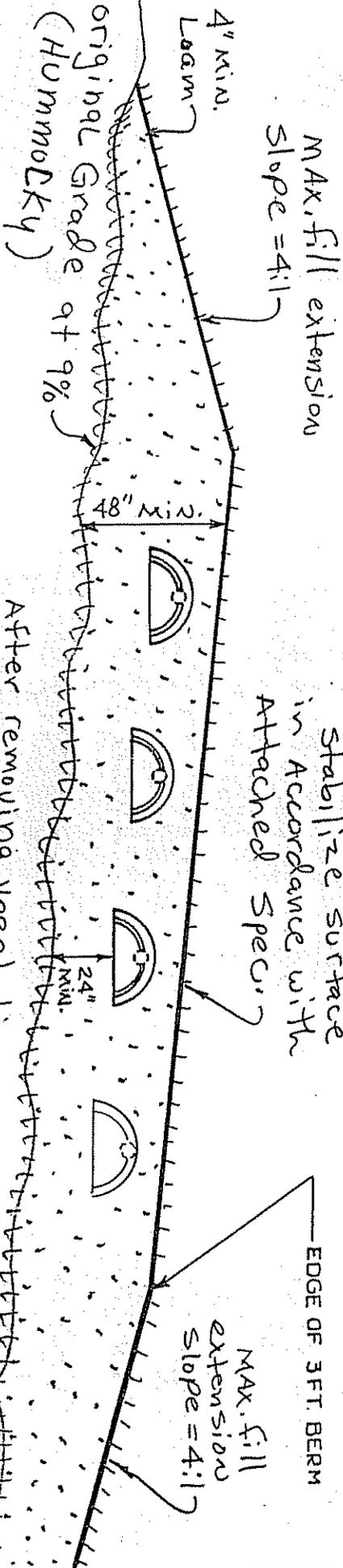
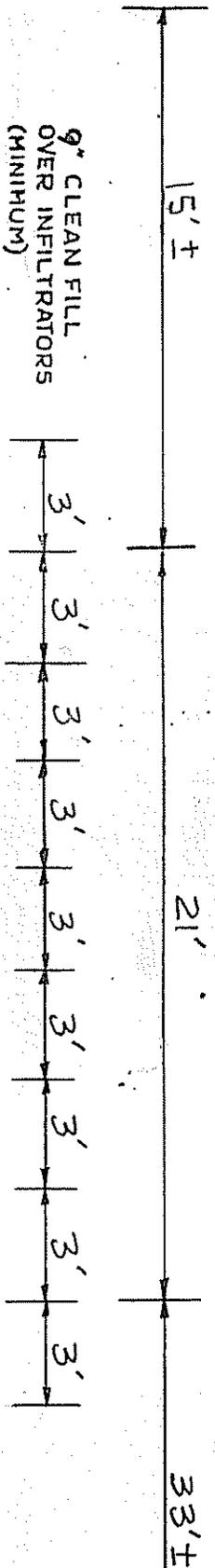
Row	BOTTOM TRENCH	TOP CHAMBERS	
1	-12"	+4"	32
2	-19"	-3"	31
3	-26"	-10"	4/0
4	-33"	-17"	53

David P. Rocque  
Site Evaluator Signature

154  
SE#

10/3/92  
Date

# INFILTRATOR CROSS SECTION 9-10%



Stabilize surface in accordance with Attached Spec's

After removing vegetation and large rocks beneath and large rocks beneath disposal Area, Mix 4" of gravelly loamy sharp sand fill into original soil with rototiller or backhoe bucket to form a transition layer.

FILL UNDER INFILTRATORS TO BE gravelly loamy sharp sand texture.  
 FILL AROUND INFILTRATORS TO BE gravelly loamy sharp sand texture.

- NOTES:**
1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER INFILTRATORS AND FILL EXTENSION AREAS.
  2. BOTTOM OF INFILTRATORS TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
  3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM INFILTRATOR AREA.
  4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

SITE EVALUATOR: <b>DAVID P. ROCQUE</b>	
OWNER: <b>Robert Gagnon</b>	NUMBER OF INFILTRATORS: <b>28</b>
LOCATION: <b>MUD MILLS ROAD</b>	ELEVATIONS: REFERENCE PT. <b>0</b> BOTTOM TRENCH #1 <b>-12"</b> BOTTOM TRENCH #2 <b>-19"</b> BOTTOM TIP #3 <b>-26"</b> BOTTOM TRENCH #4 <b>-3</b>
DATE: <b>10/3/92</b>	PERCENT SLOPE: <b>9%</b>
SCALE: <b>1 INCH = 5 FEET</b>	