

REPLACEMENT SYSTEM VARIANCE REQUEST

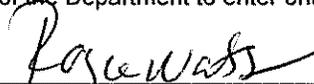
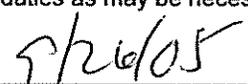
THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

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. 2006)
2. There will be no change in use of the structure except as authorized for minor 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. _____	Date Permit Issued _____
Property Owner's Name <u>Royce Watson</u>	Tel. No.: <u>207-623-8050</u>
System's Location: <u>239 Cony St. Augusta, ME. 04330</u>	
Property Owner's Address: <u>22 Blaine Ave. Augusta, ME. 04330</u>	
(if different from above) _____	

<p>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.)</p> <p>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.</p> <p>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.</p>
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<p>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.</p>
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">  _____ SIGNATURE OF OWNER </div> <div style="text-align: center;">  _____ DATE </div> </div>

<p>LOCAL PLUMBING INSPECTOR I, _____, 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):</p> <p><input type="checkbox"/> a. (<input type="checkbox"/> approve, <input type="checkbox"/> 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.</p> <p>—OR—</p> <p><input type="checkbox"/> b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (<input type="checkbox"/> recommend, <input type="checkbox"/> 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.</p> <p>Comments: _____ _____</p>
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> _____ LPI SIGNATURE </div> <div style="text-align: center;"> _____ DATE </div> </div>

Comment to 2 in 84'
43 feet 10000 RA zone 20000

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
Soil Profile 12	Ground Water Table			to 7"			0-7" inches	
Soil Condition	Restrictive Layer			to 7"			inches	
from HHE-200	Bedrock			to 12"			inches	
SETBACK DISTANCES (in feet)	Disposal Fields (total design flow)			Septic Tanks (total design flow)			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 ft [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]		
Owner's wells	100 down to 60 ft	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 [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]		
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]		
Water course, major - for replacements only, see Table 400.4 for major 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 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 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 Remove 6" of old fill mixed with silt loam soils & replace with fill; add 12" additional fill to create 18"

2. separation between system and L.F.; this is proposed to limit height of system so that fill extensions can be contained on property

3. without steep shoulders. All of site was originally 9D/E soils. Remove any portions of existing system if uncovered.

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 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 onto abutting property.

[d.] Additional setbacks may be required by local Shoreland zoning.

[e.] Natural Resource Protection Act requires a 25 feet 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 neighbors 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.

Jane C. Bens

 SITE EVALUATOR'S SIGNATURE

9/18/05

 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

Paul A. Beers LSE, CSS
26 Fairview Street
Gardiner, ME. 04345
207-582-7400

TOWN: Augusta

LOCATION: 239 Cony St.

APPLICANT'S NAME: Royce Watson

1) The Plumbing and Subsurface Wastewater Disposal Rules adopted by the State of Maine, Department of Human Services pursuant to 22 M.R.S.A. § 42 (the "Rules") are incorporated herein by reference and made a part of this application and shall be consulted by the owner/applicant, the system installer and/or building contractor for further construction details and material specifications. The system installer should contact Paul A. Beers 582-7400, if there are any questions concerning materials, procedures or designs. The system installer and/or building contractor installing the system shall be solely responsible for compliance with the Rules and with all state and municipal laws and ordinances pertaining to the permitting, inspection and construction of subsurface wastewater disposal systems. **Paul A. Beers does not have a financial interest in any proprietary product that may be specified as part of the attached design.**

2) This application is intended to represent facts pertinent to the Rules only. **It shall be the responsibility of the owner/applicant, system installer and/or building contractor to determine compliance with and to obtain permits under all applicable local, state and/or federal laws and regulations (including, without limitation, Natural Resources Protection Act, wetland regulations, zoning ordinances, subdivision regulations, Site Location of Development Act and minimum lot size laws) before installing this system or considering the property on which the system is to be installed a "buildable" lot. It is recommended that a wetland scientist be consulted regarding wetland regulations.**

Prior to the commencement of construction/installation, the local plumbing inspector shall inform the owner/applicant and Paul A. Beers of any local ordinances, which are more restrictive than the Rules in order that the design may be amended. All designs are subject to review by local, state and/or federal authorities. Paul A. Beers's liability shall be limited to revisions required by regulatory agencies pursuant to laws or regulations in effect at the time of preparation of this application.

3). All information shown on this application relating to property lines, well locations, subsurface structures and underground facilities (such as, utility lines, drains, septic systems, water lines, etc.) are based solely upon information provided by the owner/applicant and has been relied upon by Paul A. Beers in preparing this application. The owner/applicant shall review this application prior to the start of construction and confirm this information.

4). Installation of a garbage (grinder) disposal is not recommended. If one is installed, an additional 1000 gallon septic tank or a septic tank filter should be connected in series to the proposed septic tank.

5). The system user shall avoid introducing kitchen grease or fats into this system. Chemicals such as septic tank cleaners and/or chlorine (such as from water treatment) and controlled or hazardous substances shall not be disposed of in this system.

- 6) The septic tank should be pumped within two years of installation and subsequently as recommended by the pump service, but in no event should the septic tank be pumped less often than once every three years.
- 7) The actual water flow or number of bedrooms **shall not exceed the design criteria indicated on this application** without a re-evaluation of the system as proposed. If the system is supplied by public water or a private service with a water meter, the water consumption per period should be divided by the number of days to calculate the average daily water consumption (water usage (cu.ft.) x 7.48. (gallons per cu. ft.) .
- 8) The general minimum setback between a well and septic system serving a single family residence is 100-300 feet, unless the local municipality has a more stringent requirement. A well installed by an abutter within the minimum setback distances prior to the issuance of a permit for the proposed disposal system may void this design.
- 9) When a gravity system is proposed: **BEFORE CONSTRUCTION/INSTALLATION BEGINS**, the system installer or building contractor shall review the elevations of all points given in this application and the elevation of the existing and/or proposed building drain and septic tank inverts for compatibility to minimum slope requirements. In gravity systems, the invert of the septic tank(s) outlet(s) shall be at least 4 inches above the invert of the distribution box outlet at the disposal area. When an effluent pump is required, provisions shall be made to make certain that surface ground water does not enter the septic tank or pump station. An alarm device warning of a pump failure shall be installed. Insulate gravity pipes, pump lines and the distribution box as necessary to prevent freezing.
- 10) On all systems, remove the vegetation; organic duff and old fill material from under the disposal area and any fill extension. On sites where the proposed system is to be installed in natural soil, scarify the bottom and sides of the excavated disposal area with a rake. Do not use wheeled equipment on the scarified soil surface. For systems installed in fill, scarify the native soil by roto-tilling to a depth of at least 8 inches over the entire disposal and fill extension area to prevent glazing and to promote fill bonding. Place fill in loose layers no deeper than 8 inches and compact thoroughly before placing more fill (this ensures that voids and loose pockets are eliminated to minimize the chance of leakage). Do not use wheeled equipment on the scarified soil area until after 12 inches of fill is in place. Keep equipment off plastic chambers, leaching pipe or In-drains. Divert the surface water away from the disposal area by ditching or shallow swales.
- 11). Unless noted otherwise, fill shall be gravelly coarse sand, which contains no more than 5 % fines (silt and clay).
- 12). Do not install systems on loamy, silty, or clayey soils during wet periods since soil smearing/glazing may seal off the soil interface.
- 13). Seed all filled and disturbed surfaces with perennial grass seed, then mulch with hay or equivalent material to prevent erosion.

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION		>>Caution: Permit Required - Attach in Space Below<<	
City, Town or Plantation	AUGUSTA	The Subsurface Wastewater Disposal System shall not be installed until a Permit is attached HERE by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.	
Street or Road	239 CONY STREET		
Subdivision Lot #			
OWNER/APPLICANT INFORMATION			
NAME (last, first, MI)	WATSON, ROYCE	<input checked="" type="checkbox"/> OWNER <input type="checkbox"/> APPLICANT	
MAILING ADDRESS of OWNER/APPLICANT	22 BLAINE AVE. AUGUSTA, ME, 04330		
Daytime Tel. #	207-623-8050	Municipal Tax Map #	45 Lot # 7
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	
_____ Signature of Owner or Applicant		_____ Local Plumbing Inspector Signature	
_____ Date		_____ (1st) Date Approved	
		_____ (2nd) Date Approved	

PERMIT INFORMATION		
TYPE OF APPLICATION: <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced <u>UNKNOWN</u> Year Installed <u>UNKNOWN</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	THIS APPLICATION REQUIRES: <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 type="checkbox"/> a. Local Plumbing Inspector approval <input checked="" type="checkbox"/> b. State & Local Plumbing Inspector approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Approval	DISPOSAL SYSTEM COMPONENT(S) <input checked="" type="checkbox"/> 1. 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 Area (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Area (only) <input type="checkbox"/> 11. Pretreatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY <u>55+/- ACRES</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	DISPOSAL SYSTEM TO SERVE: <input type="checkbox"/> 1. Single Family Dwelling Unit No. of Bedrooms _____ <input checked="" type="checkbox"/> 2. Multiple Family Dwelling: Number of Units <u>2-3</u> <input type="checkbox"/> 3. Other _____ (Specify) Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <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
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <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>1500</u> Gallons	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 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 <input type="checkbox"/> 4. Other _____ Size <u>440</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <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 type="checkbox"/> d. Filter on tank outlet	DESIGN FLOW <u>420</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-- 1 TWO BEDROOM UNIT @ 180GPD 1-2 ONE BEDROOM UNITS @ 120GPD EACH 180 + 120 + 120 = 420GPD <input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER-METER DATA
SOIL DATA & DESIGN CLASS PROFILE <u>12</u> • CONDITION <u>D/3</u> DESIGN <u>3</u> at Observation Hole # _____ Depth <u>7</u> _____ OF MOST LIMITING SOIL FACTOR <u>N/R</u>	DISPOSAL AREA SIZING <input type="checkbox"/> 1. Small --- 2.00 sq. ft. /gpd <input type="checkbox"/> 2. Medium --- 2.60 sq. ft. /gpd <input type="checkbox"/> 3. Medium-Large --- 3.30 sq. ft. /gpd <input type="checkbox"/> 4. Large --- 4.10 sq. ft. /gpd <input checked="" type="checkbox"/> 5. Extra-Large --- 5.00 sq. ft. /gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not required <input checked="" type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required >>Specify Only for Engineered or Experimental Systems DOSE _____ Gallons	

SITE EVALUATOR'S STATEMENT		
I CERTIFY that on <u>9/17/05</u> (date) I completed a site evaluation on this property and state that the data reported is 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 PALL A. BEERS _____ Site Evaluator Name Printed	# <u>56</u> SE # <u>207-582-7400</u> Telephone Number	<u>9/18/05</u> Date <u>decoucvr@msn.com</u> E-Mail Address
Note: Changes to or deviations from design should be confirmed with the Site Evaluator HHE-200 Rev. 8/01		

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-3165

Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
239 CONY ST.

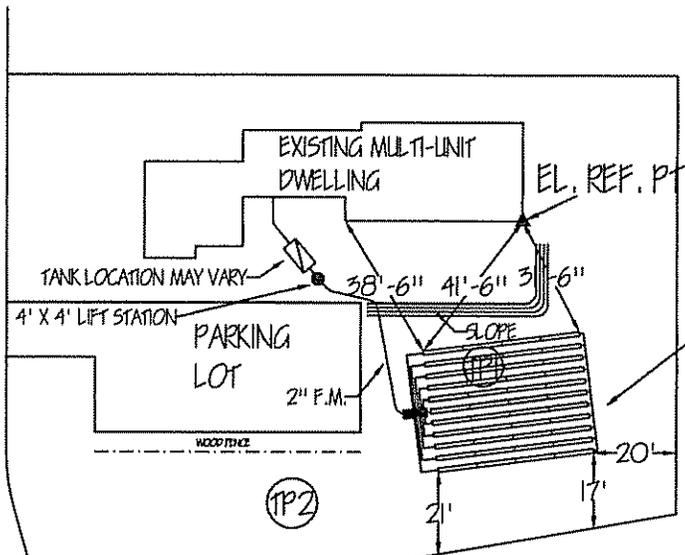
Owner's or Applicant Name
ROYCE WATSON

SITE PLAN

Scale $1' = 50'$ Ft.
or as shown

SITE LOCATION PLAN
(Attach map from Maine Atlas for First Time System Variance)

SEE
ATTACHED
MAP



PROPERTY LINES PER OWNER - SURVEY NOT AVAILABLE AT TIME OF EVALUATION; CONFIRM LINES PRIOR TO INSTALLATION TO INSURE FILL DOES NOT ENCRACH ON ADJUTOR

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

Observation Hole TP1 Test Pit Boring
 * Depth of Organic Horizon Above Mineral Soil _____

Texture	Consistency	Color	Mottling
FINE SANDY LOAM FILL	FRIABLE	OLIVE GRAY	7"
MIXED W/ SILT LOAM	SWF	OLIVE GRAY	
MIXED PROFILE MOTTLING EXTRAPOLATED @ 7"			

Soil Classification	Slope	Limiting Factor	Ground Water
12 D/E Profile	0-3% Condition	7" Depth	<input type="checkbox"/> Restrictive Layer
			<input type="checkbox"/> Bedrock

Observation Hole TP2 Test Pit Boring
 * Depth of Organic Horizon Above Mineral Soil _____

Texture	Consistency	Color	Mottling
SILT LOAM	FRIABLE	DK BRN	0-7"
SICL	FIRM	GRAY	

Soil Classification	Slope	Limiting Factor	Ground Water
9 D/E Profile	0% Condition	0-7" Depth	<input type="checkbox"/> Restrictive Layer
			<input type="checkbox"/> Bedrock

Paul A. Beers
Site Evaluator Signature

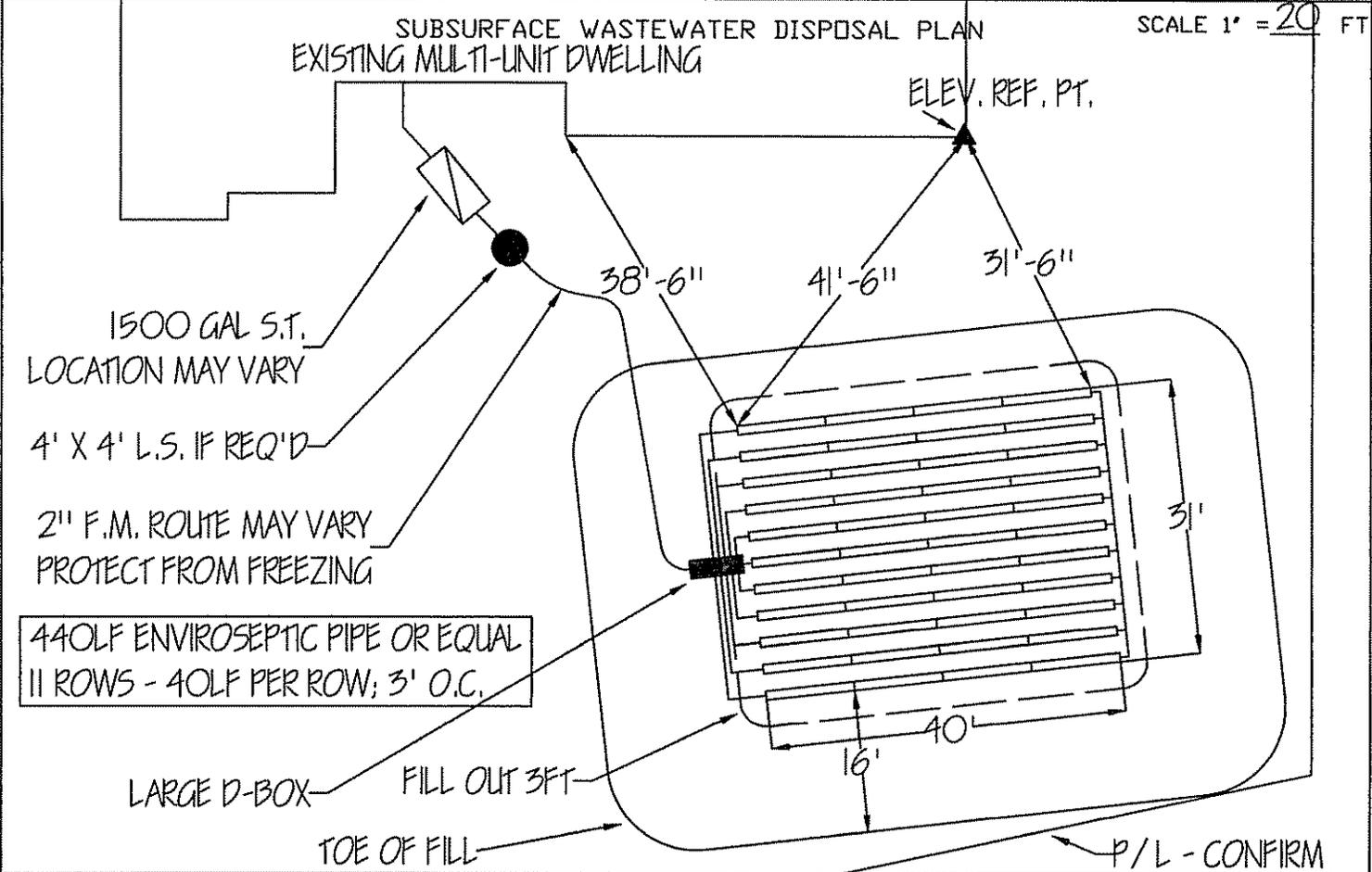
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SE#

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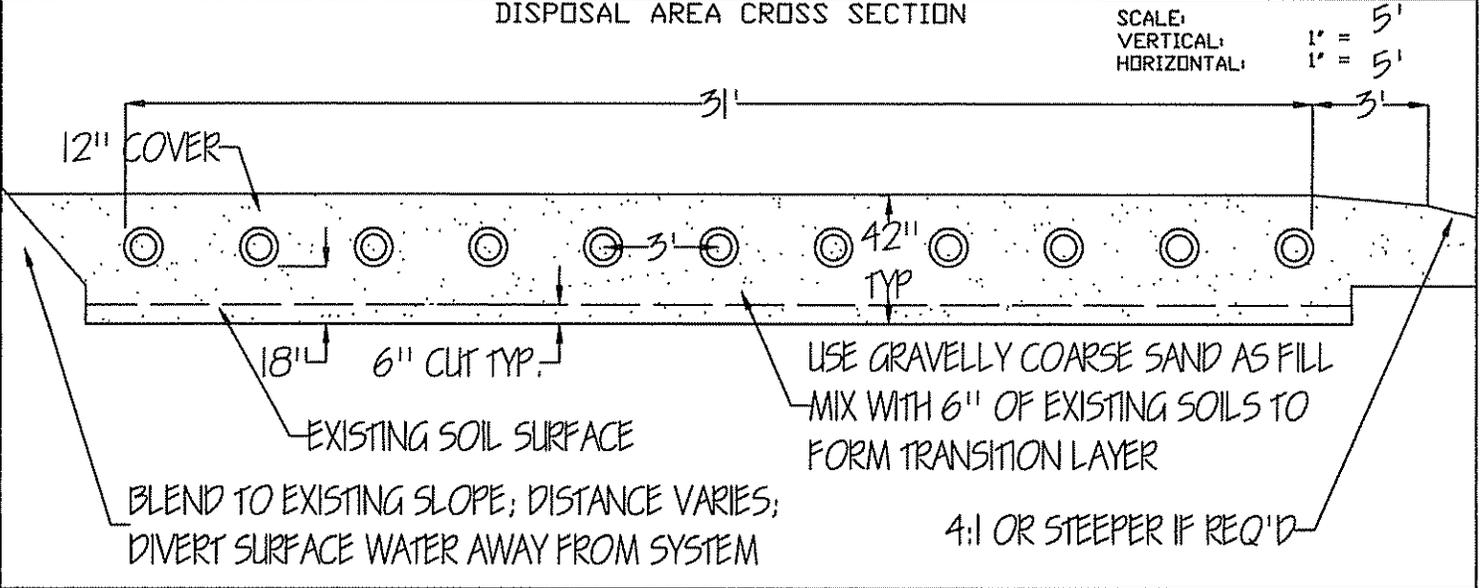
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-5672 FAX (207) 287-3165

Town, City, Plantation: **AUGUSTA** Street, Road, Subdivision: **239 CONY ST.** Owner or Applicant Name: **ROYCE WATSON**



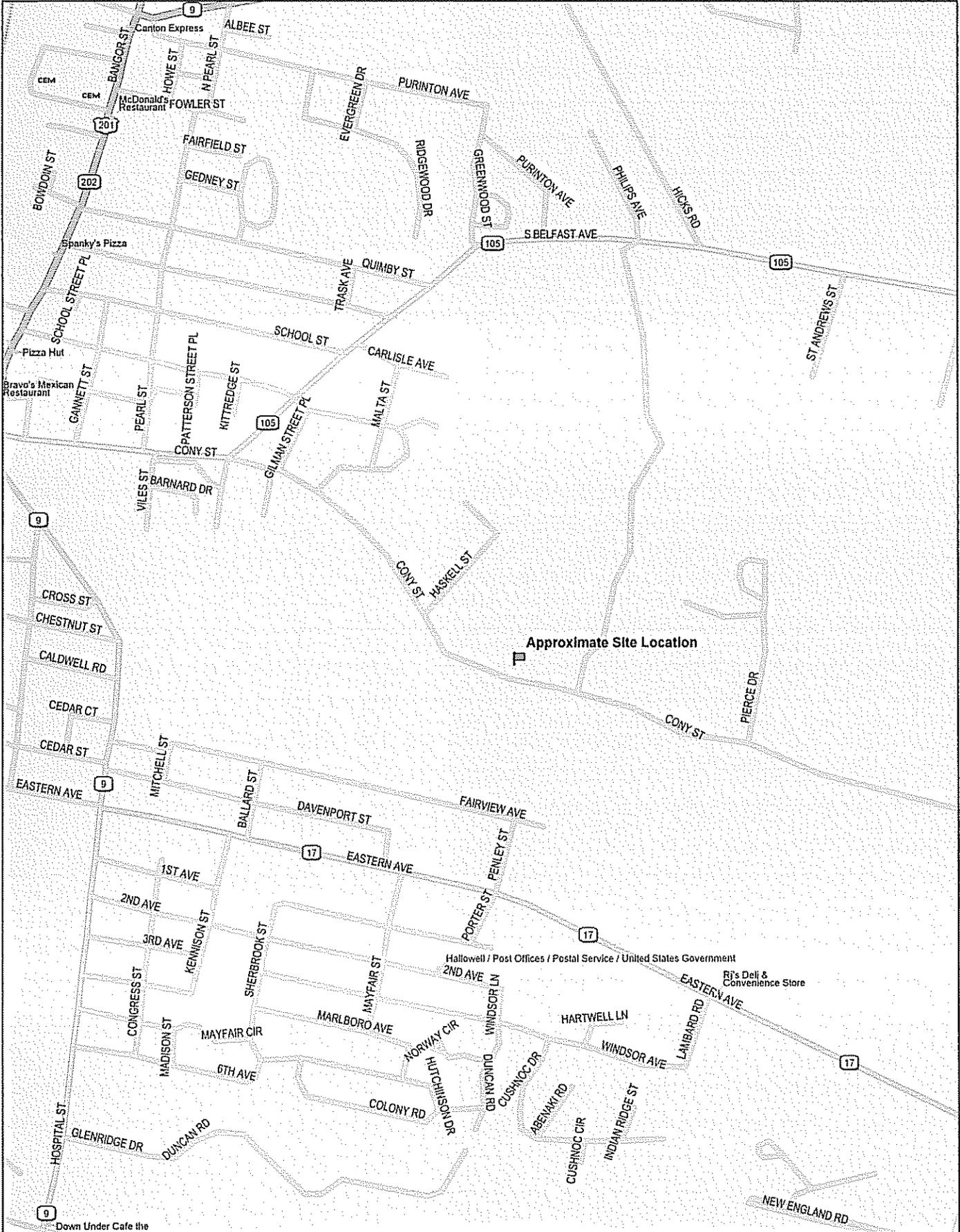
FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	42"	Finished Grade Elevation	-24" + /	Location & Description	
Depth of Fill (Downslope)	42"	Top of Distribution Pipe or Proprietary Device	-36"	NAIL IN CORNER BOARD	
DEPTHS AT CROSS-SECTION (SHOWN BELOW)		Bottom of Disposal Area	-48"	42" UP FROM GRADE	
				Reference Elevation is: 0.0"	



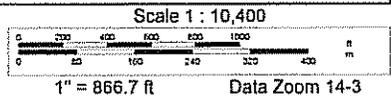
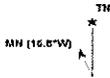
Dave C. Bliss
Site Evaluator Signature

56
SE #

9/18/05
Date



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 www.delorme.com



Do Not Issue

this structure not
approved for

3 Units.

Gany