

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

>> Caution: LPI APPROVAL REQUIRED <<<

PROPERTY LOCATION

City, Town, or Plantation: Augusta

Street or Road: 458 Riverside Drive

Subdivision, Lot #: 150122

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Country Village Apartments Owner Applicant

Mailing Address of Owner/Applicant: 458 Riverside Drive, Augusta, ME 04330

Daytime Tel. #: (207) 557-3976

AUGUSTA PERMIT #6938
Date Permit Issued: 5/4/14
X Gary R. Fuller
TOWN COPY \$ 250.00 fee
15.00
LPI # 850

Owner/Applicant Statement

I state and acknowledge that the information submitted is correct to the best of my knowledge, that I have read and agree with the conditions on the back of this form, and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Oliver J. Coffin May 13-14
Signature of Owner/Applicant Date

I have inspected the installation authorized above and on back of this form and found it to be in compliance with the Subsurface Wastewater Disposal Rules and local ordinances.

Local Plumbing Inspector Signature: _____
(1st) Date Approved: _____
(2nd) Date Approved: _____

PERMIT INFORMATION

| | | |
|---|--|--|
| <p>TYPE OF APPLICATION</p> <p>1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>stone bed</u> Year Installed: <u>unknown</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion</p> | <p>THIS APPLICATION REQUIRES</p> <p>1. <input type="checkbox"/> No Rule Variance 2. <input checked="" type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input checked="" type="checkbox"/> State & Local Plumbing Inspector Approval 3. Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 5. <input type="checkbox"/> Minimum Lot Size Variance 6. <input type="checkbox"/> Seasonal Conversion Variance</p> | <p>DISPOSAL SYSTEM COMPONENT(S)</p> <p>1. <input checked="" type="checkbox"/> Complete non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-engineered Disposal Area 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (+2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input checked="" type="checkbox"/> Pre-treatment, specify: <u>outlet filter on tank</u> 12. <input type="checkbox"/> Miscellaneous components</p> |
| <p>SIZE OF PROPERTY</p> <p><input type="checkbox"/> sq. ft. 3 <input checked="" type="checkbox"/> acres</p> | <p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: 2. <input checked="" type="checkbox"/> Multiple Family Dwelling, No. of Units: <u>10</u> 3. <input type="checkbox"/> Other: <u>3 bedroom dwelling & office</u> Specify _____ Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p> | <p>TYPE OF WATER SUPPLY <input type="checkbox"/> Proposed</p> <p>1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other:</p> |
| <p>SHORELAND ZONING</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | | |

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON CROSS-SECTIONAL VIEW)

| | | | |
|--|--|---|--|
| <p>TREATMENT TANK <input checked="" type="checkbox"/> proposed</p> <p>1. <input type="checkbox"/> Concrete <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input checked="" type="checkbox"/> Other: <u>fiberglass tanks</u> CAPACITY: <u>2-1,000</u> Gallons</p> | <p>DISPOSAL AREA TYPE/SIZE</p> <p>1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device <input type="checkbox"/> Cluster array <input checked="" type="checkbox"/> Linear <input checked="" type="checkbox"/> Regular load <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE: <u>3630</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.</p> | <p>GARBAGE DISPOSAL UNIT</p> <p>1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> Multi-compartment tank <input type="checkbox"/> _____ Tanks in series <input type="checkbox"/> Increase in tank capacity <input type="checkbox"/> Filter on tank outlet</p> | <p>DESIGN FLOW</p> <p><u>1110</u> gallons per day BASED ON: <input type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities Meter readings for 16 units with 3 bedroom dwelling and office show 1392 gpd Used 1100 gpd for 10 units, 3 bedroom dwelling, & office 3. <input checked="" type="checkbox"/> Section 4G (meter readings)</p> |
| <p>SOIL DATA & DESIGN CLASS</p> <p>PROFILE CONDITION: <u>3</u> / <u>E</u> at Observation Hole # <u>TP 2</u> Depth: <u>8"</u> OF MOST LIMITING SOIL FACTOR</p> | <p>DISPOSAL FIELD SIZING</p> <p>1. <input type="checkbox"/> Medium 2.6 sq. ft./gpd. 2. <input checked="" type="checkbox"/> Medium Large 3.3 sq. ft./gpd 3. <input type="checkbox"/> Large 4.1 sq. ft./gpd. 4. <input type="checkbox"/> Extra-Large 5.0 sq. ft./gpd.</p> | <p>EFFLUENT/EJECTOR PUMP</p> <p>1. <input type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered systems Dose _____ Gallons</p> | <p>LATITUDE AND LONGITUDE at center of disposal area Lat. N <u>44</u> d <u>20</u> m <u>43.43</u> s Lon. W <u>69</u> d <u>45</u> m <u>10.61</u> s If g.p.s., state margin of error:</p> |

SITE EVALUATOR COMMENTS

System-7 rows of 11 plastic chambers (77 high capacity bio-diffusers); Leach field designed for 10 units, 3 bedroom dwelling, & office. CEO to approve septic tanks

SITE EVALUATOR STATEMENT

I Certify that on February 20, 2014 (date) I completed a site evaluation on this project 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) as interpreted by me.

Kane P. Coffin SE #331 February 20, 2014
Kane P. Coffin, an agent of E.S. Coffin Engineering & Surveying, Inc. Licensed Site Evaluator Date
E.S. Coffin Engineering & Surveying, Inc. (207) 623-9475 or 1-800-244-9475 kcoffin@coffineng.com
432 Cony Road P.O. Box 4687 Augusta, Maine 04330-1687

ATTACHMENT FOR HHE-200 FORM

1. The OWNER/APPLICANT, by signing the front of this form, agrees to provide payment for services rendered as quoted and billed by COFFIN ENGINEERING & SURVEYING (CE&S). Payment on all billings are due within 30 days of billing date, otherwise a late charge of 1.5% per month (18% per year), simple interest, will be added to the total amount. In the event that any portion, or all of the final billing, remains unpaid for a period of 60 days, the OWNER/APPLICANT shall pay all costs of collection, including actual attorney's fees, court costs, CE&S's cost to collect bill. PLEASE NOTE THAT THE PERSON SIGNING THIS FORM UNDER OWNER/APPLICANT IS RESPONSIBLE FOR PAYMENT OF SERVICES AND SHOULD CONTACT CE&S IF HE/SHE HAS NOT RECEIVED A BILL.
2. All construction shall conform with Title 22 MRSA, §42, 10-144A CMR 241 "Maine-Subsurface Waste Water Disposal Rules," and all other pertinent sections. The OWNER/APPLICANT is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits. The OWNER/APPLICANT shall carefully examine all documents submitted by CE&S and promptly notify CE&S upon becoming aware of any defects. The OWNER/APPLICANT agrees to limit the liability of the site evaluator and/or CE&S to the amount of the total fee paid to CE&S and to a limit of five years from the date of this form. Visits to the site will be for information purposes only. CE&S will not be responsible for any site inspection duties.
3. This disposal system form shall not be transferable and becomes invalid if the authorized work has not commenced within two years after the issue date of the disposal system.
4. The OWNER/APPLICANT shall accurately describe the intended uses (present and future) for the system to the site evaluator. By signing the front of this form, the OWNER/APPLICANT agrees that the uses shown on said form is what was described to the site evaluator. Any change from the intended use described on this form requires a new design. Applicability of design must be reevaluated when location of structures are substantially different from those shown on the site plan or when other structures, additions, or appurtenances (i.e. swimming pools, garbage disposals) are considered.
5. The LPI shall inform the owner and designer of any local ordinance exceeding the Rules (Chapter 241) prior to issuing a permit, so that the application may be properly amended to conform to such ordinances.
6. The most recent revision of the Maine State Plumbing Code is hereby made a part of this HHE-200 Form and shall be consulted by the disposal system installer for further construction details, material specifications, cautions, and other related details pertinent to the installation of this disposal system.
7. This HHE-200 form is intended to represent facts pertinent to the Plumbing Code only. The owner/applicant must check local, state, and federal regulations before considering this an approvable site. All information shown on this form relating to property lines, structures, and subsurface structures (such as, but not limited to water lines, septic tanks, cess pools, cellar drains, utility lines, wells, leach fields, etc.) are noted, shown, or left off as not affecting the system based on information provided by the owner/applicant or his agent. The OWNER/APPLICANT acknowledges and understands that CE&S's submissions may represent imperfect data and may contain errors, omissions, conflicts, inconsistencies, code violations, and improper use of materials. Such deficiencies will be corrected when identified. The OWNER/APPLICANT agrees to carefully study and compare the submissions and report at once in writing to CE&S any deficiencies discovered. The OWNER/APPLICANT further agrees to require each contractor and/or subcontractor to likewise study the submissions and report at once any deficiencies discovered. It is the responsibility of the owner/applicant or his agent to confirm, BEFORE CONSTRUCTION BEGINS, the above and/or any other features which may affect (or be adversely affected by) the installation of this system.
8. When a gravity system is proposed, BEFORE CONSTRUCTION BEGINS, the disposal system installer and building contractor shall review the relative elevation of all points given in the this HHE-200 Form and the elevation of the existing or proposed building drain and septic tank openings for compatibility to the minimum code pitch requirements. Any questions that arise should be directed to the local plumbing inspector or designer. When a pump system is installed, provisions shall be made to keep the tank and lift station outlets above the high water table.
9. The Septic System Owner's Manual written by the designer is made a part of this HHE-200 Form and shall be consulted by the owner/applicant and disposal system installer for other facts pertinent to the installation and operation of this disposal system.
10. The OWNER/APPLICANT bears the responsibility to show the location of property lines, subsurface structures (such as, but not limited to water lines, septic tanks, cess pools, cellar drains, utility lines), and wells to the Site Evaluator. Actual property lines must be confirmed by a boundary survey. By signing the front of this form, the OWNER/APPLICANT agrees that the property lines and wells on the accompanying plan(s) are shown correctly and any discrepancy found in the future is the responsibility of the OWNER/APPLICANT.
11. The actual water flow or number of bedrooms shall not exceed the design criteria indicated on this HHE-200 Form without a re-evaluation of the system.
12. CE&S is not responsible for the actions of others, who affect the ultimate cost of the PROJECT; by vandalism, marker removal, changes in scope of work, approval agencies, redesign of septic system, etc. (OWNER/APPLICANT to be notified of any cost increase).
13. The laws of Maine will apply concerning the interpretation and performance of this AGREEMENT. If an item in this AGREEMENT is found to be in violation of any prevailing laws, it will not void the entire AGREEMENT. This AGREEMENT is superior and over-rides any Standard Subcontract Agreement signed by the parties involved in this AGREEMENT for this PROJECT when referenced in said Standard Subcontract Agreement.
14. CE&S is responsible for the actions of its' employees only. Insurance is provided for: vehicles, general liability, errors and omissions, and workman's comp. All other entities on the site are responsible for their own safety, work product, actions, conduct, etc.
15. CE&S is not responsible for any actual, alleged, or threatened, pollutant damage in regard to the services performed. Pollutants are defined as any environmentally threatening contaminants commonly regulated in this state.
16. In the event that the OWNER/APPLICANT hires subcontractors, workers, orders material, etc., and governs, directly or indirectly, the overall operation on the work site; then the OWNER/APPLICANT is deemed to be acting as his own general contractor, having the greater responsibility for the work site.
17. Other than the procedure of collections described above in (1), should the parties of this AGREEMENT have differences involving either the work site, or the PROJECT, that cannot be resolved between them; then the procedures of Alternate Dispute Resolution will be the only method of resolving those differences.

History Transaction Inquiry
COMPANY NAME {WATER}

ACCT : 000054004781 FIN PER: 54 X-REF:
458 RIVERSIDE DR, AG
CUSTOMER: COUNTRY VILLAGE APTS
ADDR :

COMP: 1
* A/R BALANCES *
* WATER * * Totals *
CURR: 0.00 0.00
30DAY: 0.00 0.00
60DAY: 0.00 0.00
90DAY+: 0.00 0.00
TOT.F/C: 0.00 0.00
LIENS : 0.00 0.00
P. LIEN: 0.00 0.00
TOT.BAL: 0.00 0.00
LAST PYMT: 399.55
LAST DATE: 03/06/2014

7481

AUGUSTA, ME 04330
LAST READING 3690
LAST READ DATE 02/03/2014

| Date | CD. | RATE | DESCRIPTION | READING | USAGE/INV# | AMOUNT | Running \$ | TYPE | REFERENCE | --- REFERENCE --- |
|------------|-----|------|--------------|---------|------------|---------|------------|------|-----------|-------------------|
| 03/06/2014 | 010 | PMT | WATER PMT | 0 | 0 | -399.55 | 0.00 | | | |
| 02/14/2014 | 023 | WA | 1" QTLY | 3690 | 142 | 399.55 | 399.55 | M | 20315863 | |
| 12/05/2013 | 010 | PMT | WATER PMT | 0 | 0 | -442.59 | 0.00 | | | |
| 11/14/2013 | 023 | WA | 1" QTLY | 3548 | 159 | 442.59 | 442.59 | M | 20315863 | |
| 08/21/2013 | 010 | PMT | WATER PMT | 0 | 0 | -390.10 | 0.00 | | | |
| 08/02/2013 | 023 | WA | 1" QTLY | 3389 | 139 | 390.10 | 390.10 | M | 20315863 | |
| 06/05/2013 | 010 | PMT | WATER PMT | 0 | 0 | -324.58 | 0.00 | | | |
| 05/03/2013 | 023 | WA | 1" QTLY | 3250 | 113 | 324.58 | 324.58 | M | 20315863 | |
| 02/26/2013 | 010 | PMT | WATER PMT | 0 | 0 | -317.02 | 0.00 | | | |
| 02/01/2013 | 023 | WA | 1" QTLY | 3137 | 110 | 317.02 | 317.02 | M | 20315863 | |
| 11/09/2012 | 010 | PMT | WATER PMT | 0 | 0 | -281.74 | 0.00 | | | |
| 11/02/2012 | 023 | WA | 1" QTLY | 3027 | 96 | 281.74 | 281.74 | M | 20315863 | |
| 08/22/2012 | 010 | PMT | WATER PMT | 0 | 0 | -294.34 | 0.00 | | | |
| 08/03/2012 | 023 | WA | 1" QTLY | 2931 | 101 | 294.34 | 294.34 | M | 20315863 | |
| 05/23/2012 | 010 | PMT | WATER PMT | 0 | 0 | -367.42 | 0.00 | | | |
| 05/04/2012 | 023 | WA | 1" QTLY | 2830 | 130 | 367.42 | 367.42 | M | 20315863 | |
| 02/24/2012 | 010 | PMT | WATER PMT | 0 | 0 | -422.86 | 0.00 | | | |
| 02/02/2012 | 023 | WA | 1" QTLY | 2700 | 152 | 422.86 | 422.86 | M | 20315863 | |
| 11/15/2011 | 010 | PMT | WATER PMT | 0 | 0 | -650.86 | 0.00 | | | |
| 11/04/2011 | 023 | WA | 1" QTLY | 2548 | 175 | 650.86 | 650.86 | M | 20315863 | |
| 08/18/2011 | 010 | PMT | WATER PMT | 0 | 0 | -542.88 | 0.00 | | | |
| 07/29/2011 | 023 | WA | 1" QTLY | 2373 | 133 | 542.88 | 542.88 | M | 20315863 | |
| 06/08/2011 | 010 | PMT | WATER PMT | 0 | 0 | -517.16 | 0.00 | | | |
| 05/06/2011 | 023 | WA | 1" QTLY | 2240 | 126 | 517.16 | 517.16 | M | 20315863 | |
| 03/08/2011 | 010 | PMT | WATER PMT | 0 | 0 | -264.09 | 0.00 | | | |
| 02/18/2011 | 010 | PMT | WATER PMT | 0 | 0 | -264.09 | 264.09 | | | |
| 02/04/2011 | 023 | WA | 1" QTLY | 2114 | 129 | 528.18 | 528.18 | M | 20315863 | |
| 12/08/2010 | 010 | PMT | WATER PMT | 0 | 0 | -476.73 | 0.00 | | | |
| 11/05/2010 | 023 | WA | 1" QTLY | 1985 | 115 | 476.73 | 476.73 | M | 20315863 | |
| 09/08/2010 | 010 | PMT | WATER PMT | 0 | 0 | -476.73 | 0.00 | | | |
| 08/09/2010 | 023 | WA | 1" QTLY | 1870 | 115 | 476.73 | 476.73 | M | 20315863 | |
| 06/07/2010 | 010 | PMT | WATER PMT | 0 | 0 | -553.91 | 0.00 | | | |
| 05/10/2010 | 023 | WA | 1" QTLY | 1755 | 136 | 553.91 | 553.91 | M | 20315863 | |
| 03/26/2010 | 010 | PMT | WATER PMT | 0 | 0 | -337.59 | 0.00 | | | |
| 02/19/2010 | 010 | PMT | WATER PMT | 0 | 0 | -337.59 | 337.59 | | | |
| 02/05/2010 | 023 | WA | 1" QTLY | 1619 | 169 | 675.18 | 675.18 | M | 20315863 | |
| 11/18/2009 | 010 | PMT | WATER PMT | 0 | 0 | -490.11 | 0.00 | | | |
| 11/09/2009 | 023 | WA | 1" QTLY | 1450 | 120 | 490.11 | 490.11 | M | 20315863 | |
| 08/27/2009 | 014 | WOP | WATER OVERPH | 0 | 0 | -5.00 | -5.00 | | | |
| 08/27/2009 | 010 | PMT | WATER PMT | 0 | 0 | -451.01 | 0.00 | | | |
| 08/10/2009 | 23 | WA | 1" QTLY | 1330 | 108 | 451.01 | 451.01 | M | 20315863 | |

- 106, 216 gallons

Water Use Records and Percentile Calculations

rev. 02/2004

| Date | cubic feet | gallons | # days | avg. gpd |
|-------------|------------|-----------|--------|----------|
| 14-Feb-2014 | 14200 | 106230.20 | 90 | 1180.34 |
| 14-Nov-2013 | 15900 | 118947.90 | 102 | 1166.16 |
| 2-Aug-2013 | 13900 | 103985.90 | 89 | 1168.38 |
| 3-May-2013 | 11300 | 84535.30 | 92 | 918.86 |
| 1-Feb-2013 | 11000 | 82291.00 | 89 | 924.62 |
| 2-Nov-2012 | 9600 | 71817.60 | 89 | 806.94 |
| 4-May-2012 | 13000 | 97253.00 | 92 | 1057.10 |
| 2-Feb-2012 | 15200 | 113711.20 | 88 | 1292.17 |
| 4-Nov-2011 | 17500 | 130917.50 | 95 | 1378.08 |
| 29-Jul-2011 | 13300 | 99497.30 | 83 | 1198.76 |
| 6-May-2011 | 12600 | 94260.60 | 92 | 1024.57 |
| 4-Feb-2011 | 12900 | 96504.90 | 89 | 1084.32 |
| 5-Nov-2010 | 11500 | 86031.50 | 86 | 1000.37 |
| 9-Aug-2010 | 11500 | 86031.50 | 89 | 966.65 |
| 10-May-2010 | 13600 | 101741.60 | 95 | 1070.96 |
| 5-Feb-2010 | 16900 | 126428.90 | 86 | 1470.10 |
| 9-Nov-2009 | 12000 | 89772.00 | 89 | 1008.67 |
| 10-Aug-2009 | 10800 | 80794.80 | 90 | 897.72 |

| Daily | Weekly | Monthly | Quarterly |
|-----------------|-----------------|-----------------|-----------------|
| 80th percentile | 85th percentile | 90th percentile | 95th percentile |
| 1191 | 1241 | 1318 | 1392 |

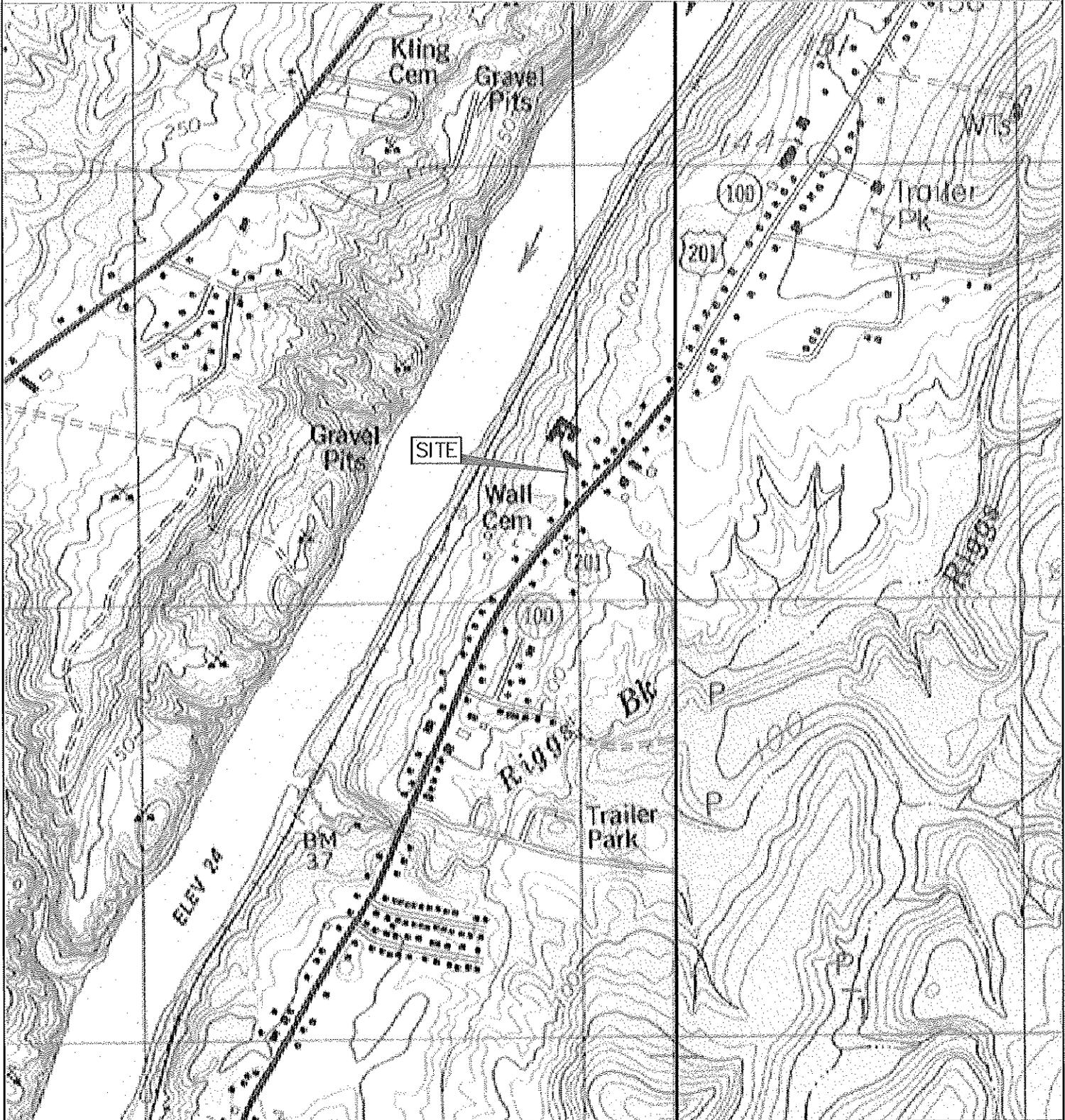
| | cubic feet | gallons |
|---------|------------|------------|
| total | 236700.00 | 1770752.70 |
| average | 13150.00 | 98375.15 |

To use: Enter the date, number of days, and cubic feet. The gallons and percentiles will be calculated automatically by the spreadsheet. To add more readings, simply insert additional rows into the spreadsheet. Choose the percentile which corresponds to the reading frequency: daily, weekly, monthly, or quarterly.



SITE LOCATION MAP

SCALE 1" = 1000'



HHE-200

ENGINEERING & SURVEYING
E.S. COFFIN & ASSOCIATES
 SURVEYING
 E.S. COFFIN ENGINEERING & SURVEYING, INC.
 412 Cozy Road P.O. Box 4657 Augusta, Maine 04330
 Ph. (207) 633-9475 Fax (207) 633-6016 Toll Free 1-800-244-9475

CLIENT/PROJECT
**COUNTRY VILLAGE APARTMENTS
SEPTIC SYSTEM DESIGN**

LOCATION: 458 RIVERSIDE DRIVE

TOWN: AUGUSTA COUNTY: KENNEBEC STATE: MAINE

DRAWN/TITLE
SITE LOCATION MAP

SCALE: AS SHOWN

DATE: MAY 12, 2014

Town, City, Plantation
 Augusta

Street, Road, Subdivision
 458 Riverside Drive

Owner's Name
 Country Village Apartments

SITE PLAN

Scale: 1" = ___ feet

TEXTURE TERMS

Sand
 Loamy sand
 Sandy loam
 Loam
 Silt loam
 Silty clay loam
 Silty clay
 Bedrock

TEXTURE

ABUNDANCE
 Very-38-60%
 Extremely-61-90%

MODIFIER TERMS

VF-very fine
 F-fine
 M-medium
 C-course
ROCK
 Gravely-0.1-3"
 Cobble-3-10"
 Stony->10"

MOTTLING

CONTRAST
 Faint
 Distinct
 Prominent

ABUNDANCE
 None
 Few-<2%
 Common-2-20%
 Many->20%

CONSISTENCE

TERMS
 Loose
 Friable
 Firm
 Very Firm
 Cemented

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole TP 1 Test Pit Boring
1 " Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|-----------------|-------------|---------------------------|-----------------|
| fine sandy loam | Friable | Dark Brown Lt Olive Br | None |
| fine sand | Firm | Olive Br | Common Distinct |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | | | |
|---|---------------------|--------------------------------|--|
| Soil Classification <u>3</u> <u>D</u> Profile Condition | Slope <u>1</u> % | Limiting Factor <u>11</u> " | <input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
|---|---------------------|--------------------------------|--|

Observation Hole TP 2 Test Pit Boring
1 " Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|-----------------|-------------|----------------------------|-----------------|
| fine sandy loam | Friable | Dk Brown Lt Olive Brown | None |
| fine sand | Firm | Olive Br | Common Distinct |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | | | |
|---|---------------------|-------------------------------|--|
| Soil Classification <u>3</u> <u>E</u> Profile Condition | Slope <u>4</u> % | Limiting Factor <u>8</u> " | <input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
|---|---------------------|-------------------------------|--|

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 05/12/14

HHE-200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation

Augusta

Street, Road, Subdivision

458 Riverside Drive

Owner's Name

Country Village Apartments

FILL REQUIREMENTS

Depth of Fill (Upslope) 43-59"
Depth of Fill (Downslope) 44-47"

CONSTRUCTION ELEVATIONS

Reference Elevation is 00"
Bottom of Disposal Area n/a
Top of Chambers n/a

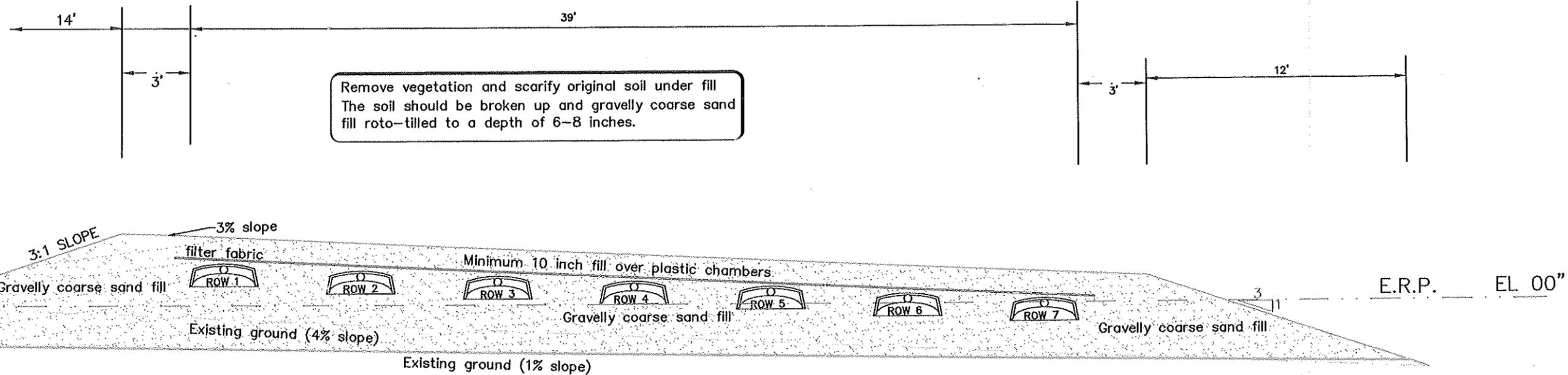
ELEV. REF. PT:

50d nail in CMP 94.2
(18" above ground)

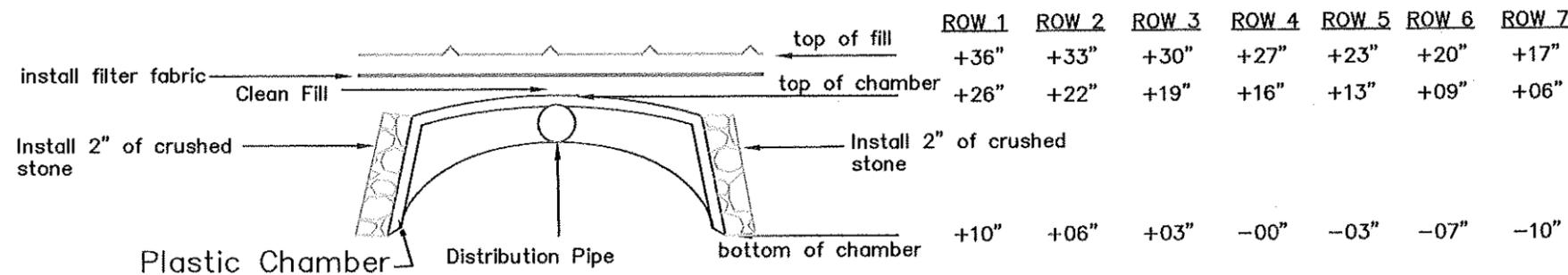
DISPOSAL AREA CROSS SECTION

SCALE:

Vertical: 1 inch = 5 feet
Horizontal: 1 inch = 5 feet



Remove vegetation and scarify original soil under fill
The soil should be broken up and gravelly coarse sand
fill roto-tilled to a depth of 6-8 inches.

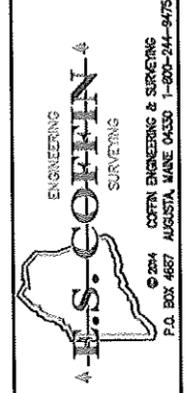


DETAIL (no scale)

INSTALL 77 PLASTIC CHAMBERS
HIGH CAPACITY BIODIFFUSERS
7 ROWS OF 11

SHEET TITLE: CROSS-SECTIONAL VIEW

PROJECT: COUNTRY VILLAGE APARTMENTS
LOCATION: 458 RIVERSIDE DRIVE
TOWN: AUGUSTA COUNTY: KENNEBEC STATE: MAINE



PROJ. NO. 2014-115

Site Evaluator's Signature

Kane P. Coffin

SE # 331

Date: 5/12/14

HHE-200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health

(207) 287-5338
(207) 287-3165 (fax)

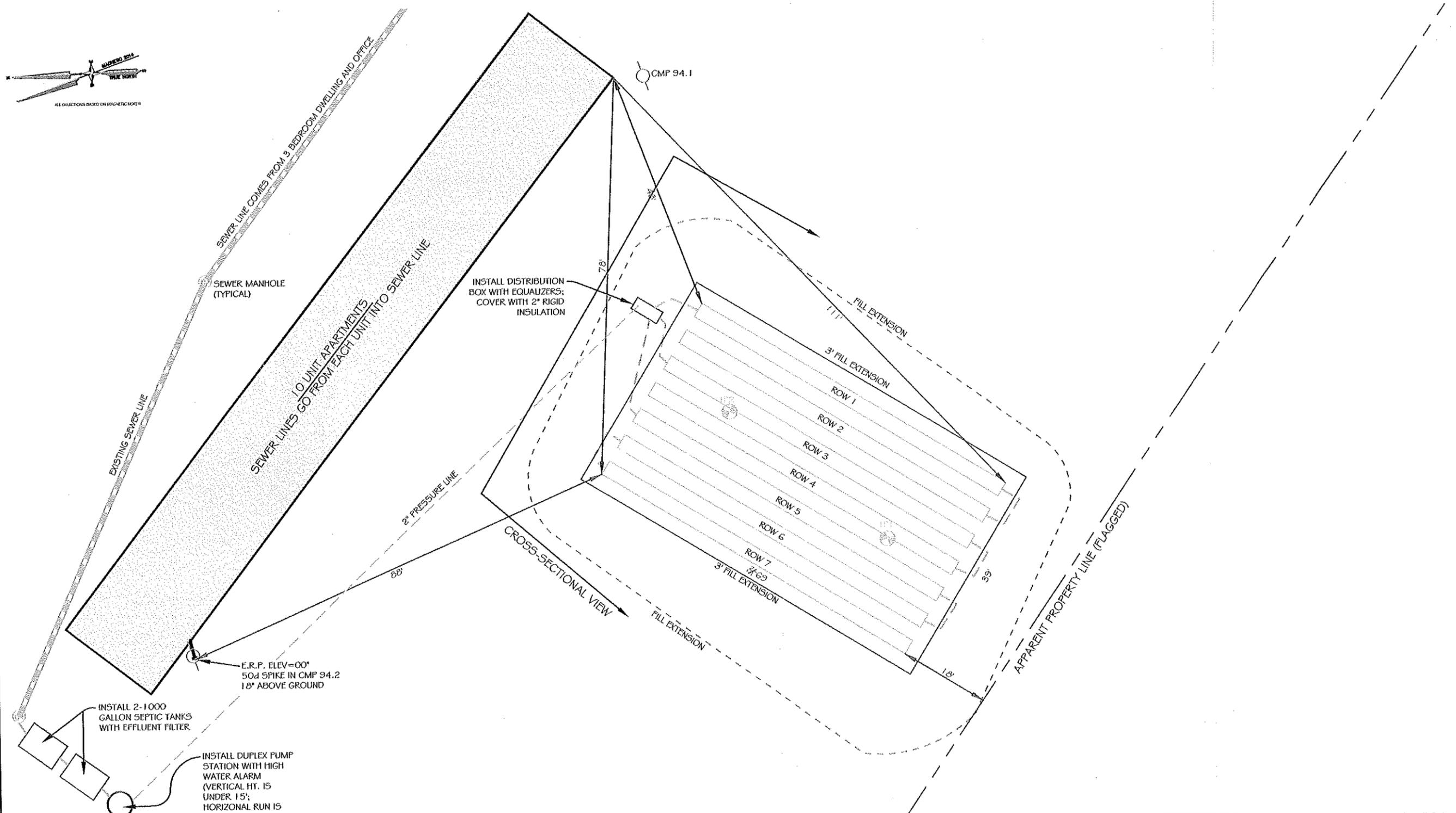
Town, City, Plantation
Augusta

Street, Road, Subdivision
458 Riverside Drive

Owner's Name
Country Village Apartments

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20'



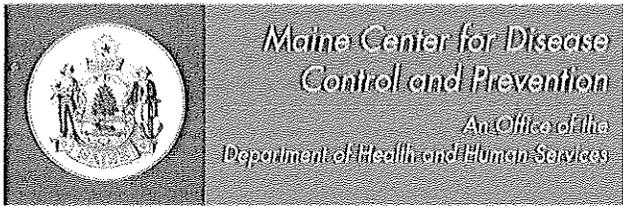
| | | |
|---------------------------|---|---|
| ELEVATION REFERENCE POINT | DESCRIPTION: | ELEVATION: 00' |
| | 50d spike in CMP 94.2 (1.8' above ground) | |
| SHEET TITLE: | PLAN VIEW | |
| | SCALE: 1" = 20' | DATE: MAY 12, 2014 |
| PROJECT: | COUNTRY VILLAGE APARTMENTS | |
| LOCATION: | 458 RIVERSIDE DRIVE | TOWN: AUGUSTA COUNTY: KENNEBEC STATE: MAINE |
| | | |
| PROJ. NO. 2014-115 | | |

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 05/12/14

HHE-200



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION Town of Augusta
Property Owner's Name: Country Village Apartments Tel. No.: 207-557-3976
System's Location: 458 Riverside Drive, Augusta, ME
Property Owner's Address: Olin Charette, 458 Riverside Drive, Augusta, ME Zip Code 04330
e-mail address: _____

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

| SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.) | SECTION OF RULE |
|---|----------------------|
| 1. <u>Fill extension slope of 3:1</u> | <u>Section 8-D-c</u> |
| 2. <u>Soil Condition 3E-8 inches to mottling</u> | <u>Section 8-E</u> |
| 3. _____ | _____ |

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal 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. Attach a separate sheet if necessary.

The variance request is being submitted because topography and existing development limit the potential of the system location. The proposed leach field will be separated from the ground water by 24" of fill.

I, Kane P. Coffin, 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.

Kane P. Coffin

May 12, 2014

SIGNATURE OF SITE EVALUATOR

DATE

PROPERTY OWNER

I, Olin J Charette, 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.

Olin J Charette

SIGNATURE OF OWNER
 AGENT FOR THE OWNER

May 13-14

DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all variance requests prior to rendering a decision.

I, _____, 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 variance requests prior to forwarding to the Division of Environmental Health.

I, Gary R. Fuller, 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.

Gary R. Fuller
LPI Signature

5/13/14
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]
SIGNATURE OF THE DEPARTMENT

5/13/14
DATE

- Notes: 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 7.B.4 of the Subsurface Wastewater Disposal Rules 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 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).

| | CHARACTERISTIC | POINT ASSESSMENT |
|--|--------------------------------|------------------|
| Soil Profile | | |
| Depth to Groundwater/Restrictive Layer | | |
| Terrain | | |
| Size of Property | | |
| Waterbody Setback | | |
| Water Supply | | |
| Type of Development | | |
| Disposal Area Adjustment | | |
| Vertical Separation Distance | | |
| Additional Treatment | | |
| | TOTAL POINT ASSESSMENT: | |

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health

(207) 287-5338
(207) 287-3165 (fax)

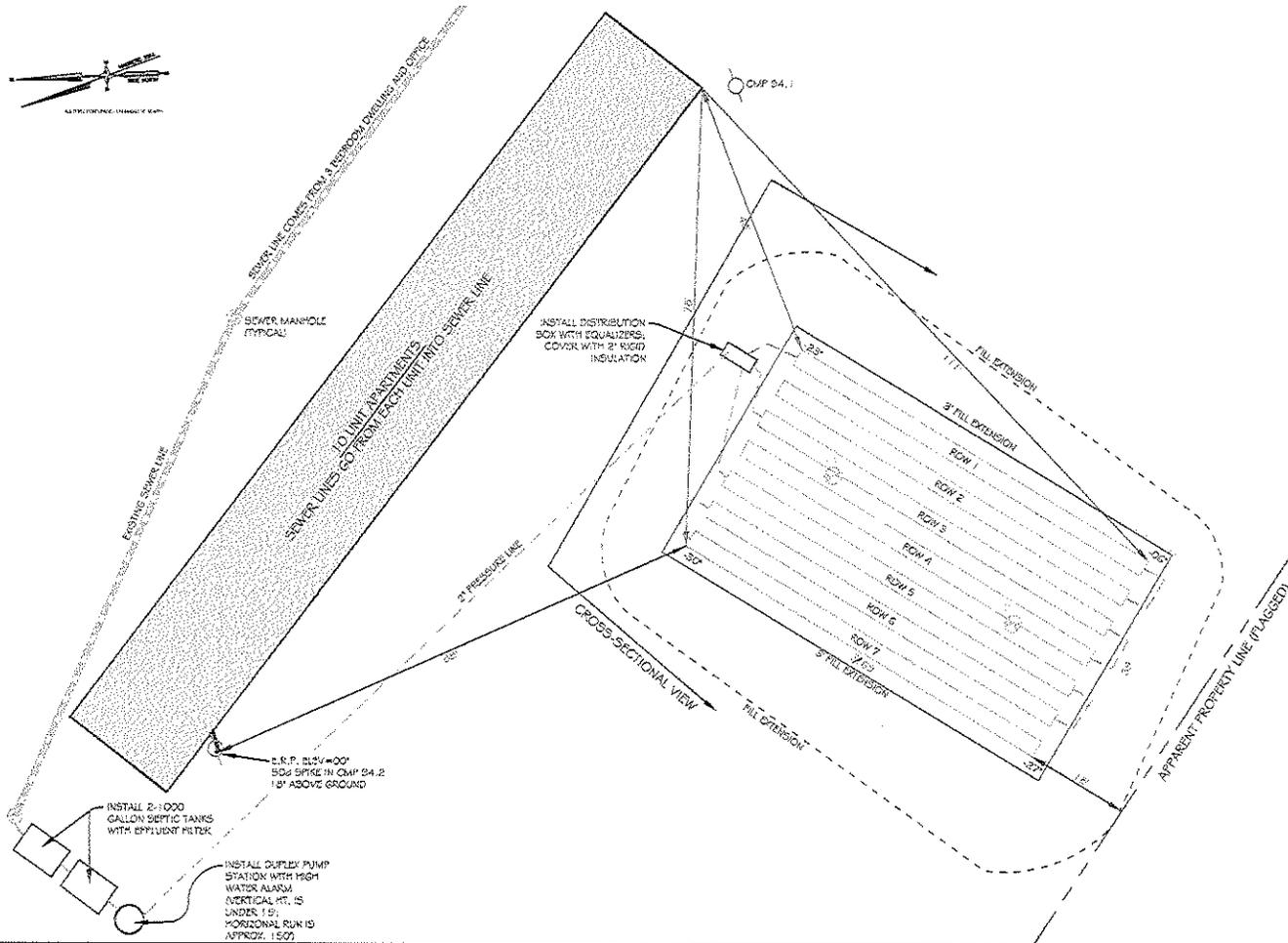
Town, City, Plantation
Augusta

Street, Road, Subdivision
458 Riverside Drive

Owner's Name
Country Village Apartments

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20'



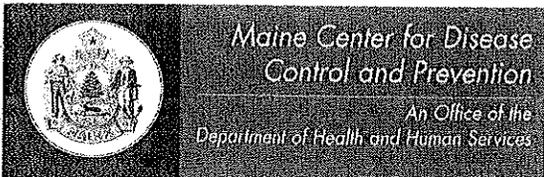
| | | |
|---|---------------------------------------|--|
| PROJECT: COUNTRY VILLAGE APARTMENTS ADDRESS: 458 RIVERSIDE DRIVE CITY: AUGUSTA, MAINE | PLAN VIEW | ELEVATION REFERENCE POINT |
| | SCALE: 1" = 20' DATE: MAY 12, 2014 | DESCRIPTION: 300 depth in CMP 84.2 (1/2" above ground) ELEVATION: 002 |
| | | PROJ. NO. 2014-115 |

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 05/12/14

HHE-200



Maine Center for Disease
Control and Prevention

An Office of the
Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel. (207) 287-8016
Fax (207) 287-9058; TTY (800) 606-0215

Tel. (207) 287-2070

Subsurface Wastewater Unit

Fax (207) 287-5672

May 13, 2014

Town of Augusta
Gary Fuller
16 Cony Street
Augusta, Maine 04330

Subject: Approval, Replacement System Variance Request, Country Village Apartments Property, Olin Charette, 458 Riverside Drive, Augusta, Maine. Mailing Address Owner/Applicant: Same.

Gary;

We have completed our review of an HHE-200 Form dated 02-20-2014 for the Country Village Apartments property located at 458 Riverside Drive, Augusta, Maine.

The variance request that is not within the LPI's authority is from the disposal field to the seasonal high water table of 8 inches.

The variance request that is within the LPI's authority is the fill extensions of 3:1 slope.

The variance request has been submitted because topography and existing development limit the potential of the system location and the system design prepared by Kane Coffin, SE #331 on 02-20-2014 is otherwise found to be in compliance with the Maine Subsurface Wastewater Disposal Rules.

A permit for system installation is to be obtained from the Local Plumbing Inspector in advance of the start of system construction.

The system is to be installed in accordance with the submitted and approved system design. Should alterations to the design be required at the time of construction, the site evaluator is to be notified prior to making any changes.

The contractor is to scarify the soils under the fill extensions to create a transitional zone more compatible with the disposal field area.

By accepting this approval and the associated plumbing permit, the owner agrees to comply fully with the conditions of approval and the Subsurface Wastewater 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, please feel free to contact me at 592-7376.

Sincerely,

A handwritten signature in black ink that reads "Brent Lawson". The signature is written in a cursive style with a large initial "B".

Brent Lawson, State Plumbing Inspector
Subsurface Wastewater Program
Division of Environmental Health
e-mail: brent.lawson@maine.gov

/BML

xc: File

Olin Charette, Owner/Applicant.

Kane Coffin, SE

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Depart. Health & Human Services
Div of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-3165

| PROPERTY LOCATION | | >> Caution: LPI APPROVAL REQUIRED << | |
|--|--|--|---|
| City, Town, or Plantation | Augusta | Town/City _____ | Permit # _____ |
| Street or Road | 458 Riverside Drive | Date Permit Issued ___/___/___ | Fee: \$ _____ Double Fee Charged <input type="checkbox"/> |
| Subdivision, Lot # | | | L.P.I. # _____ |
| OWNER/APPLICANT INFORMATION | | Local Plumbing Inspector Signature _____ | |
| Name (last, first, MI) | Country Village Apartments <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant | The Subsurface Wastewater Disposal System <i>shall not</i> be installed until a Permit is issued 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. | |
| Mailing Address of Owner/Applicant | 450 Riverside Drive Augusta, ME 04330 | | |
| Daytime Tel. # | (207) _____ | | |
| Owner/Applicant Statement | | Caution: Inspections Required | |
| I state and acknowledge that the information submitted is correct to the best of my knowledge, that I have read and agree with the conditions on the back of this form, 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 on back of this form and found it to be in compliance with the Subsurface Wastewater Disposal Rules and local ordinances. | |
| Signature of Owner/Applicant _____ Date _____ | | Municipal Tax Map # <u>50</u> Lot # <u>2</u> | |
| | | Local Plumbing Inspector Signature _____ | |
| | | (1 st) Date Approved _____ | |
| | | (2 nd) Date Approved _____ | |

| PERMIT INFORMATION | | | |
|--|---|--|--|
| TYPE OF APPLICATION 1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>stone bed</u> Year Installed: <u>unknown</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion | THIS APPLICATION REQUIRES 1. <input type="checkbox"/> No Rule Variance 2. <input checked="" type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input checked="" type="checkbox"/> State & Local Plumbing Inspector Approval 3. Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 5. <input type="checkbox"/> Minimum Lot Size Variance 6. <input type="checkbox"/> Seasonal Conversion Variance | DISPOSAL SYSTEM COMPONENT(S) 1. <input checked="" type="checkbox"/> Complete non-Engineered System 2. <input type="checkbox"/> Primitive System (graywater & alt toilet) 3. <input type="checkbox"/> Alternative Toilet, specify: _____ 4. <input type="checkbox"/> Non-engineered Disposal Area 5. <input type="checkbox"/> Holding Tank, _____ gallons 6. <input type="checkbox"/> Non-engineered Disposal Field (only) 7. <input type="checkbox"/> Separated Laundry System 8. <input type="checkbox"/> Complete Engineered System (+2000 gpd) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input checked="" type="checkbox"/> Pre-treatment, specify: <u>outlet filter on tank</u> 12. <input type="checkbox"/> Miscellaneous components | DISPOSAL SYSTEM TO SERVE: 1. <input type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: _____ 2. <input checked="" type="checkbox"/> Multiple Family Dwelling, No. of Units: <u>10</u> 3. <input type="checkbox"/> Other: <u>3 bedroom dwelling & office</u> Specify _____ Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped |
| SIZE OF PROPERTY _____ sq. ft. 3 <input checked="" type="checkbox"/> acres | | | |
| SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| | | TYPE OF WATER SUPPLY <input type="checkbox"/> Proposed 1. <input type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input checked="" type="checkbox"/> Public 5. <input type="checkbox"/> Other: _____ | |

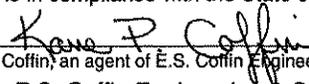
| DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON CROSS-SECTIONAL VIEW) | | | |
|--|--|---|--|
| TREATMENT TANK <input checked="" type="checkbox"/> proposed 1. <input type="checkbox"/> Concrete <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input checked="" type="checkbox"/> Other: <u>fiberglass tanks</u> CAPACITY: <u>2-1,000</u> Gallons | DISPOSAL AREA TYPE/SIZE 1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device <input type="checkbox"/> Cluster array <input checked="" type="checkbox"/> Linear <input checked="" type="checkbox"/> Regular load <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE: <u>3630</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft. | GARBAGE DISPOSAL UNIT 1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> Multi-compartment tank <input type="checkbox"/> _____ Tanks in series <input type="checkbox"/> Increase in tank capacity <input type="checkbox"/> Filter on tank outlet | DESIGN FLOW 1110 gallons per day BASED ON: <input type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities Meter readings for 16 units with 3 bedroom dwelling and office show 1392 gpd Used 1100 gpd for 10 units, 3 bedroom dwelling, & office 3. <input checked="" type="checkbox"/> Section 4G (meter readings) |
| SOIL DATA & DESIGN CLASS PROFILE <u>3</u> / CONDITION <u>E</u> at Observation Hole # <u>TP 11</u> Depth: <u>6"</u> OF MOST LIMITING SOIL FACTOR | DISPOSAL FIELD SIZING 1. <input type="checkbox"/> Medium 2.6 sq. ft./gpd. 2. <input checked="" type="checkbox"/> Medium Large 3.3 sq. ft./gpd 3. <input type="checkbox"/> Large 4.1 sq. ft./gpd. 4. <input type="checkbox"/> Extra-Large 5.0 sq. ft./gpd. | EFFLUENT/EJECTOR PUMP 1. <input type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered systems Dose _____ Gallons | LATITUDE AND LONGITUDE at center of disposal area Lat. N <u>44</u> d <u>20</u> m <u>45.25</u> s Lon. W <u>69</u> d <u>45</u> m <u>10.08</u> s If g.p.s., state margin of error: _____ |

SITE EVALUATOR COMMENTS

System-7 rows of 11 plastic chambers (77 high capacity bio-diffusers); Leach field designed for 10 units, 3 bedroom dwelling, & office. CEO to approve septic tanks

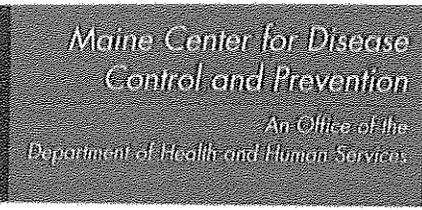
SITE EVALUATOR STATEMENT

I Certify that on December 15, 2014 (date) I completed a site evaluation on this project 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) as interpreted by me.

| | | |
|--|---|---|
|  Kane P. Coffin, an agent of E.S. Coffin Engineering & Surveying, Inc. E.S. Coffin Engineering & Surveying, Inc. 432 Cony Road P.O. Box 4687 | SE #331 Licensed Site Evaluator (207) 623-9475 or 1-800-244-9475 Augusta, Maine 04330-1687 | <u>December 15, 2014</u> Date kcoffin@coffineng.com |
|--|---|---|

Water Disposal Rules, and
 used septic system correctly and
 approved by CE&S and promptly
 and/or

RECEIVED A BILL.
 OWNER/APPLICANT
 including actual amount
 any portion, or all
 date, otherwise
 dered as quoted



Department of Health and Human Services
 Maine Center for Disease Control and Prevention
 286 Water Street
 # 11 State House Station
 Augusta, Maine 04333-0011
 Tel: (207) 287-5672
 Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION Town of Augusta

Property Owner's Name: Country Village Apartments Tel. No.: _____

System's Location: 458 Riverside Drive, Augusta, ME

Property Owner's Address: Olin Charette, 450 Riverside Drive, Augusta, ME Zip Code 04330

e-mail address: _____

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

| SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.) | SECTION OF RULE |
|---|----------------------|
| 1. <u>Fill extension slope of 3:1</u> | <u>Section 8-D-c</u> |
| 2. <u>Soil Condition 3E-6 inches to mottling</u> | <u>Section 8-E</u> |
| 3. _____ | _____ |

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal 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. Attach a separate sheet if necessary.

The variance request is being submitted because topography and existing development limit the potential of the system location. The proposed leach field will be separated from the ground water by 24" of fill.

I, Kane P. Coffin, 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.

Kane P. Coffin

 SIGNATURE OF SITE EVALUATOR

December 15, 2014
 DATE

PROPERTY OWNER

I, _____, 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.

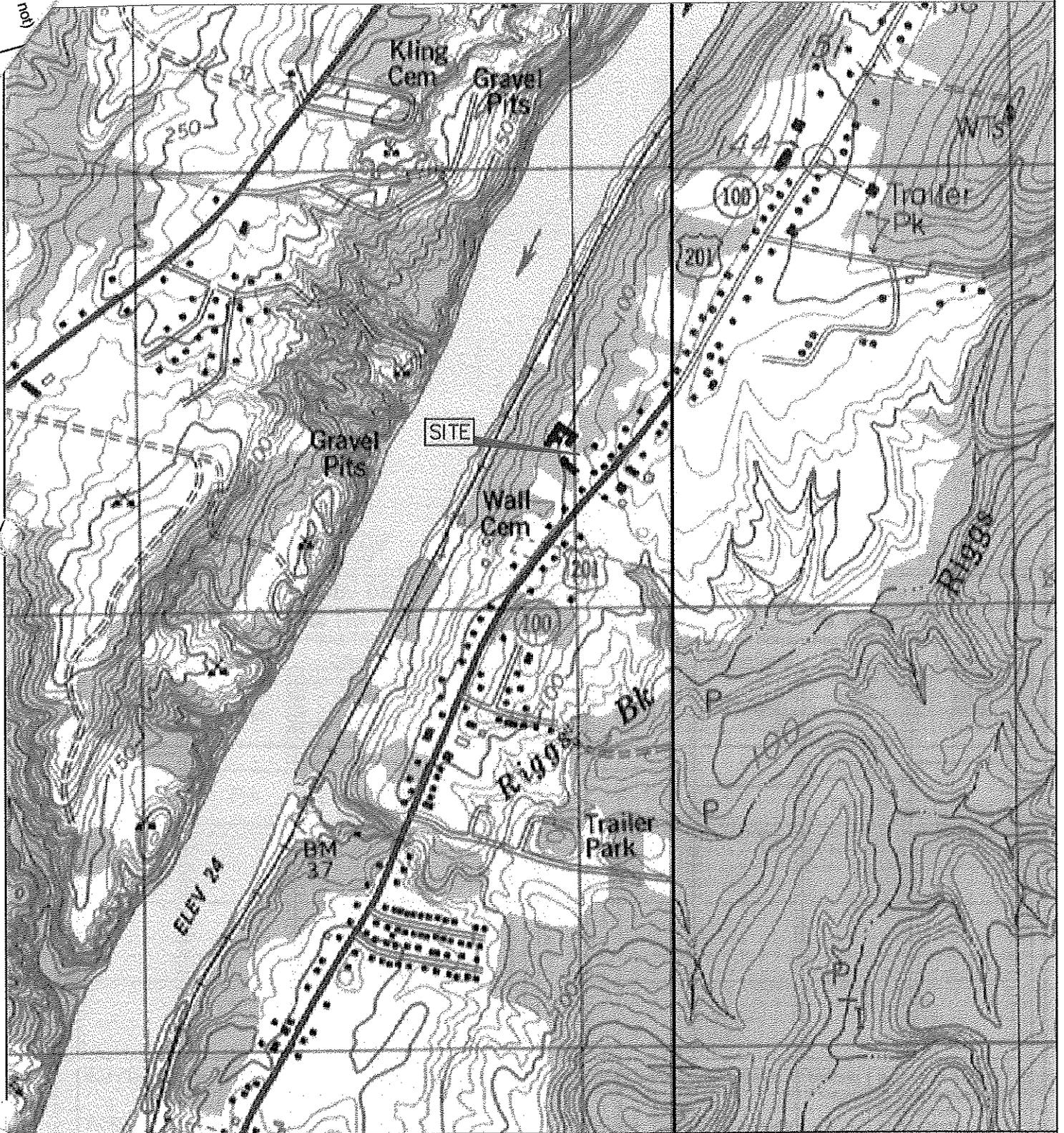
 SIGNATURE OF OWNER
 AGENT FOR THE OWNER

 DATE

variance requests submitted by
 by the applicant is the best
 not conflict with any provisions
 will will not

SITE LOCATION MAP

SCALE 1" = 1000'



| | | | |
|----------------|---|--|---|
| HHE-200 |  <small>ENGINEERING & SURVEYING, INC.</small> <small>437 Gray Road P.O. Box 4887 Augusta, Maine 04310</small> <small>Ph. (207) 623-9475 Fax (207) 623-9014 Toll Free 1-800-311-9475</small> | <small>CLIENT/PROJECT:</small> COUNTRY VILLAGE APARTMENTS SEPTIC SYSTEM DESIGN | <small>SHEET TITLE:</small> SITE LOCATION MAP |
| | | <small>LOCATION:</small> 458 RIVERSIDE DRIVE | <small>SCALE:</small> AS SHOWN |
| | | <small>TOWN:</small> AUGUSTA <small>COUNTY:</small> KENNEBEC <small>STATE:</small> MAINE | <small>DATE:</small> DECEMBER 15, 2014 |

City, Plantation
 Augusta

Street, Road, Subdivision
 458 Riverside Drive

Owner's Name
 Country Village Apartments

SITE PLAN

Scale: 1" = ___ feet

TEXTURE TERMS

Sand
 Loamy sand
 Sandy loam
 Loam
 Silty loam
 Silty clay loam
 Silty clay
 Bedrock

TEXTURE

ABUNDANCE
 Vary-35-60%
 Extremely-61-90%

MODIFIER TERMS

VF-very fine
 F-fine
 M-medium
 C-course
ROCK
 Gravel-0.1-3"
 Cobble-3-10"
 Stony-+10"

MOTTLING

CONTRAST
 Faint
 Distinct
 Prominent

ABUNDANCE
 None
 Few-1-2%
 Common-2-20%
 Many->20%

CONSISTENCE

TERMS
 Loose
 Friable
 Firm
 Very Firm
 Cemented

SOIL DESCRIPTION AND CLASSIFICATION

Observation Hole TP 11 Test Pit Boring
 | " Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|----------------------------------|-------------|-------------------------|--------------------|
| 0 fine sandy loam | Friable | Yellow Brown | None |
| 10 very fine sandy loam | Firm | Lt Olive Br Olive Br | Common Distinct |
| 20 | | | |
| 30 | | | |
| 40 | | | |
| 50 | | | |

| | | | |
|---|---------------------|----------------------------------|--|
| Soil Classification <u>3</u> <u>E</u> Profile Condition | Slope <u>1</u> % | Limiting Factor <u>6</u> " | <input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
|---|---------------------|----------------------------------|--|

Observation Hole TP 12 Test Pit Boring
 | " Depth of Organic Horizon Above Mineral Soil

| Texture | Consistency | Color | Mottling |
|----------------------------------|-------------|----------------------------|--------------------|
| 0 fine sandy loam | Friable | Yellow Brown | None |
| 10 very fine sandy loam | Firm | Lt Olive Brown Olive Br | Common Distinct |
| 20 | | | |
| 30 | | | |
| 40 | | | |
| 50 | | | |

| | | | |
|---|---------------------|-----------------------------------|--|
| Soil Classification <u>3</u> <u>D</u> Profile Condition | Slope <u>1</u> % | Limiting Factor <u>12</u> " | <input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
|---|---------------------|-----------------------------------|--|

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

Date: 12/15/14

HHE-200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation
Augusta

Street, Road, Subdivision
458 Riverside Drive

Owner's Name
Country Village Apartments

FILL REQUIREMENTS

Depth of Fill (Upslope) 44-57"
Depth of Fill (Downslope) 45-50"

CONSTRUCTION ELEVATIONS

Reference Elevation is 00"
Bottom of Disposal Area n/a
Top of Chambers n/a

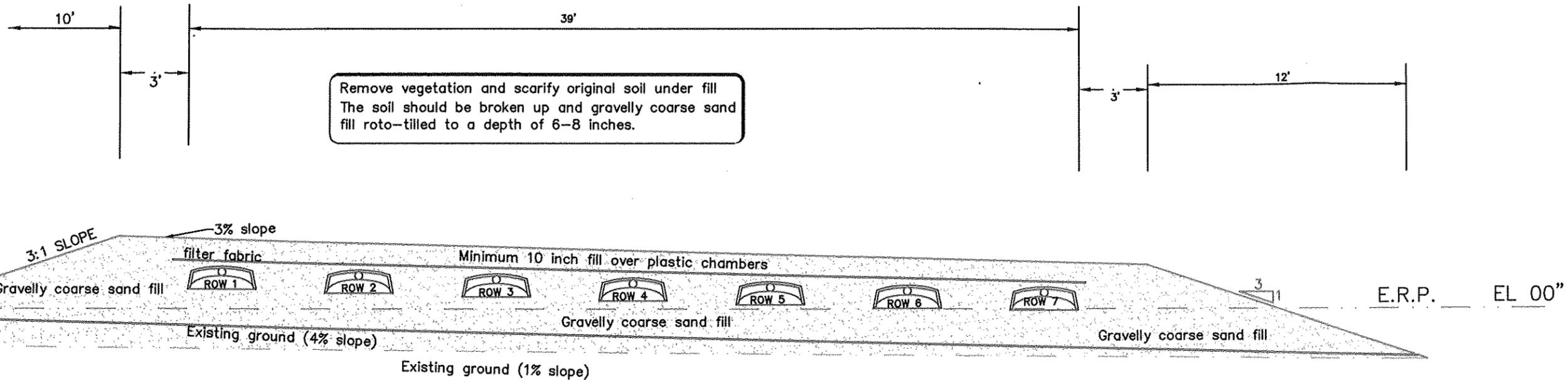
ELEV. REF. PT:

50d spike in corner of building
(4" above ground)

DISPOSAL AREA CROSS SECTION

SCALE:

Vertical: 1 inch = 5 feet
Horizontal: 1 inch = 5 feet



| | ROW 1 | ROW 2 | ROW 3 | ROW 4 | ROW 5 | ROW 6 | ROW 7 |
|-------------------|-------|-------|-------|-------|-------|-------|-------|
| top of fill | +36" | +34" | +32" | +31" | +29" | +27" | +25" |
| top of chamber | +26" | +24" | +22" | +20" | +18" | +16" | +15" |
| bottom of chamber | +10" | +08" | +06" | +04" | +02" | -00" | -01" |

DETAIL (no scale)

INSTALL 77 PLASTIC CHAMBERS
HIGH CAPACITY BIODIFFUSERS
7 ROWS OF 11

SHEET TITLE: CROSS-SECTIONAL VIEW
SCALE: 1" = 5'
DATE: DECEMBER 15, 2014

PROJECT: COUNTRY VILLAGE APARTMENTS
LOCATION: 458 RIVERSIDE DRIVE
TOWN: AUGUSTA
COUNTY: KENNEBEC
STATE: MAINE

ENGINEERING SURVEYING
K.S. COFFIN
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AUGUSTA, MAINE 04330 1-800-234-3475
P.O. BOX 4637

PROJ. NO. 2014-115

Site Evaluator's Signature

Kane P. Coffin

SE # 331

Date: 12/15/14

HHE-200

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health

(207) 287-5338
(207) 287-3165 (fax)

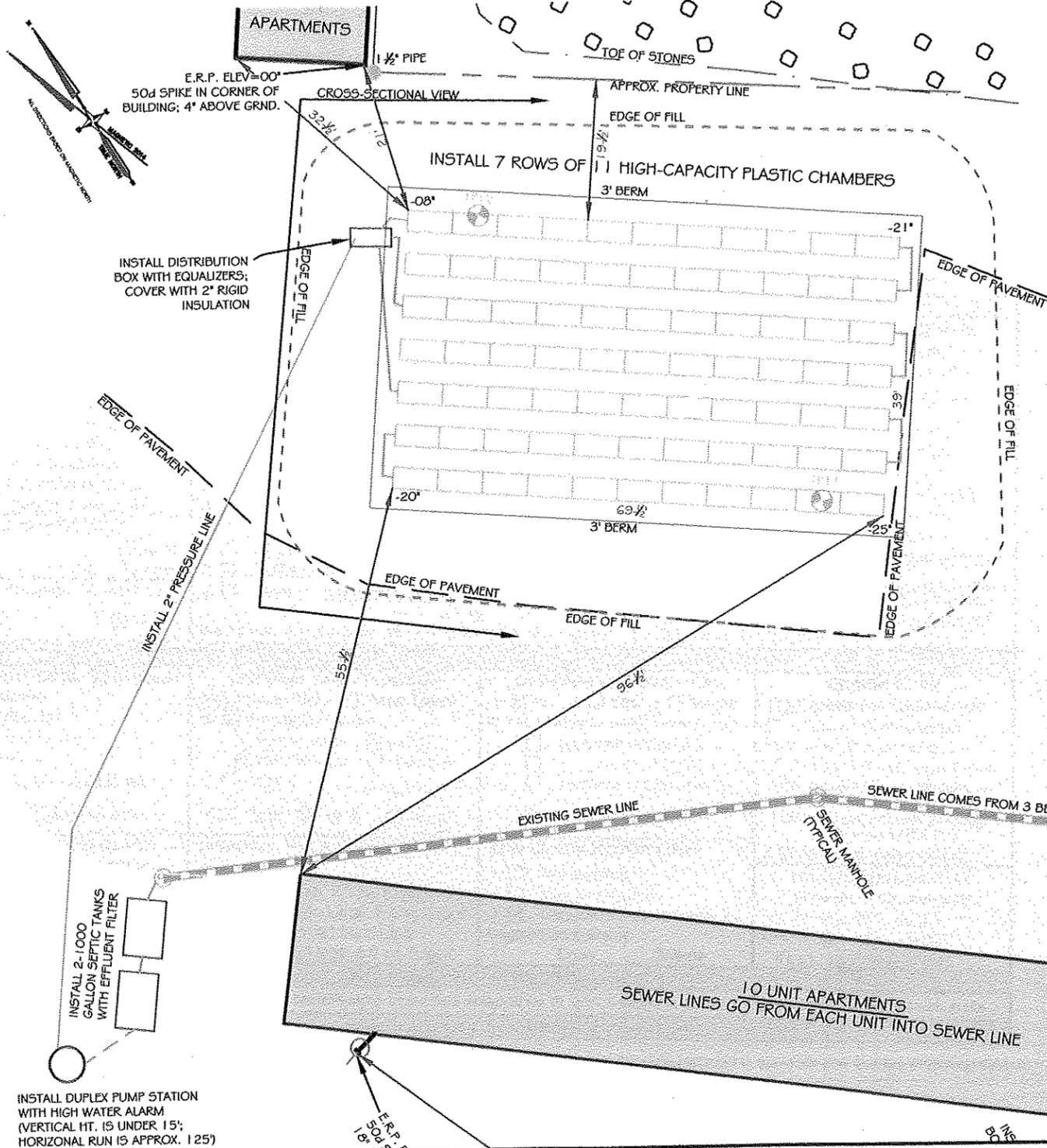
Town, City, Plantation
Augusta

Street, Road, Subdivision
458 Riverside Drive

Owner's Name
Country Village Apartments

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20'



DISPOSAL FIELD CONSTRUCTION TECHNIQUES

1. Vegetation shall be cut and removed from the area where backfill material is to be placed. Organic duff and old fill material from under the disposal area and fill extension should be removed.
2. The area under the disposal field and backfill extensions shall be roto-tilled with gravely coarse sand fill to a depth of 6-8 inches to form a Transitional Horizon. Do not use wheeled equipment on the scarified soil surface until after 12 inches of fill is in place.
3. Fill large holes that are left as a result of stump or stone removal with gravely coarse sand fill.
4. Surface water (from roofs or upland) must be diverted away from the disposal field.
5. Septic tank(s), grease trap, pumping station, and lines may be relocated to accommodated site conditions as long as setbacks and intent of design are met.
6. All construction shall conform with Title 22 MRSA, Section 42, 10-144A-CMR 241 "Maine Subsurface Waste Water Disposal Rules" and other pertinent sections.
7. The owner/contractor shall carefully observe the vertical distance between the E.R.P. and the bottom of the leach field and notify the Site Evaluator promptly if separation distance appears to be at odds with the original ground.
8. The owner/applicant is responsible for the contractor installing the proposed septic system correctly and for obtaining all necessary permits.
9. Access openings for septic tanks serving single-family dwelling units may be buried, although water tight risers to within 6" of finish grade are required. The riser opening must be at least 18" in diameter over the tank cover. Outlet baffles that utilize an effluent filter must have a riser of at least 18" in diameter extended to finish grade.
10. 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.
11. The septic tank should be pumped at least once every three years.
12. 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.

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|---------------------------|--|
| ELEVATION REFERENCE POINT | ELEVATION: 00' |
| | DESCRIPTION: 50d spike in corner of building (4" above ground) |
| SHEET TITLE | PLAN VIEW |
| | OFFICE # 3 BEDROOM DWELLING |
| PROJECT | COUNTRY VILLAGE APARTMENTS |
| LOCATION | 458 RIVERSIDE DRIVE |
| TOWN | AUGUSTA |
| COUNTY | KENNEBEC STATE: MAINE |
| DATE | DECEMBER 15, 2014 |
| SCALE | 1" = 20' |
| PROJ. NO. | 2014-115 |

Site Evaluator's Signature *Kane P. Coffin*

SE # 331

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