



## STATEMENTS

### STATEMENT OF OWNER

I, \_\_\_\_\_, the undersigned, am the owner of the property indicated in the application and state that the property is not for sale in the foreseeable future. I understand that the installation explained above and illustrated on the HHE-200 FORM accompanying this request is not in total compliance with the Maine State Plumbing Code. This system is to replace an existing direct discharge or subsurface wastewater disposal system. Should the proposed replacement system malfunction or create any nuisance or environmental problems or affect my water supply, I release all concerned with this waiver provided they have performed their duties in a reasonable and proper manner. Further, should a malfunction occur, I will take every step possible to correct it.

*Hartwell G. White*  
Signature of Owner Date

### STATEMENT OF SOIL EVALUATOR

I, *Gerald C. Paulin*, the undersigned certify that the information I have submitted on the HHE-200 FORM accurately represents the conditions that exist on the applicant's property. A waiver to the Maine State Plumbing Code is necessary since no system can be installed which will completely satisfy all Code provisions.

*Gerald C. Paulin* *6-23-79*  
Signature of Soil Evaluator Date

### Municipality's Findings

The proposed system ( ~~does~~ ) ( does not ) conflict with any municipal or shoreland zoning ordinances, and has been shown to the Code enforcement Officer.

### CONCLUSIONS

I, *Richard P. Baber*, the undersigned, have visited the above property and find that it is not possible to conform to certain provisions of the Plumbing Code. The waiver request submitted by the applicant is the best alternative for a replacement subsurface wastewater disposal system on this property.

Based upon my conclusions, I permit the installation of the sewage disposal system as proposed and shown on the HHE-200 FORM.

*Richard P. Baber* *6-14-79*  
Signature of Local Plumbing Inspector Date

## WAIVER CONDITIONS

- A. **APPLICABILITY.** These variances relate to existing single family dwellings only. Any variances requested on the reverse side of this application must maintain as near as possible the requirements of the Part II, Plumbing Code on "Subsurface Wastewater Disposal Regulations". For example, if a disposal area can be 90 feet from the owner's well then the 90 feet is to be allowed; not the bare minimum of 60 feet. If the restriction is such that it is less than the requirements here given, then a state variance is required. Any variances or waiver requests not covered in this agreement involving other types of structures or other conditions require submission to the Division for review. All local ordinances must be complied with.
- B. **SOIL EVALUATOR'S RESPONSIBILITIES.** The property shall be visited by a qualified soil evaluator who shall investigate the site and complete the HHE-200 FORM recommending a wastewater disposal system which can best conform with the requirements of the Code. The investigator shall inform his client that a waiver is required and indicate so on the HHE-200 FORM. He should then refer his client to the local Plumbing Inspector.
- C. **LOCAL PLUMBING INSPECTOR'S RESPONSIBILITIES.** The Local Plumbing Inspector shall review the soil evaluation HHE-200 FORM and complete the waiver request form attached. Once it is determined that the waiver request is the most practical approach to correcting the applicant's problem, the Local Plumbing Inspector shall see that the statement portions of the waiver form are completed by the homeowner and the soil evaluator before giving final approval.
- D. **RECORDS.** A copy of the waiver request forms and the associated HHE-200 FORMS shall be provided to the homeowner, the soil evaluator, the L.P.I. for the municipal files, and other copies determined to be necessary, with the original copy forwarded to the Division with a copy of the plumbing permit.
- E. **LOG OF WAIVERS ISSUED.** The plumbing inspector shall maintain a chronological log of all waivers granted. The total of the waivers granted for each calendar year shall be noted in the annual report which is submitted to the town and to the Division.
- F. **SECTION OF THE CODE WHICH CAN BE WAIVED.** The authority of issuing waivers at the municipal level is restricted to those sections specifically identified on the check-off portion of the waiver request form.
- G. **RESCINDING OF WAIVER RIGHTS.** If the Division, in its review of these waivers, finds that a local plumbing inspector or soil evaluator exceeds the limits and limitations spelled out in this agreement, the Division will remove this privilege from that individual.
- H. **HOLDING TANKS.** The Local Plumbing Inspector is authorized to permit the use of holding tanks in replacement situations (not to include privies) where this is the most practical alternative to serve an EXISTING SEASONAL, SINGLE FAMILY DWELLING. A minimum of 1500 gallon holding tank, along with associated alarms, may be permitted by the local plumbing inspector.

This Application Is For:  New System  Conversion Permit  Replacement Of Entire System  Disposal Area Only  
 Expanded System  Experimental System

An Application For Subsurface Wastewater Disposal Permit This Is NOT A Permit; This Form When Completed Must Be Presented To The Local Plumbing Inspector To Obtain A Permit

Town: Augusta Street, Road, Etc.: Riverside Drive Plumbing Permit No.: 23951EP Date Of Plumbing Permit: 6-14-79  
 If On Water Body, Give Name

Owner Of Property: HARTWELL Webb Tel. No.: 622-5517 Name Of Applicant Owner's Agent: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

Street: 728 Riverside Drive Street: \_\_\_\_\_

Town: Augusta State: Me Zip Code: 04330 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Owner's Signature: [Signature] Date: 6-13-79 Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Size Of Lot: 27,000±  Sq. Feet  Acres Is Lot Zoned?  Yes  No Type Of Zoning: \_\_\_\_\_ Subdivision Name: \_\_\_\_\_ Lot No.: \_\_\_\_\_

The Water Supply For This Property Is:  Dug Well, depth \_\_\_\_\_;  Drilled Well, depth \_\_\_\_\_;  Spring, depth \_\_\_\_\_; Surface water  Body  Course— with disinfection,  without disinfection. Public Utility, name: Augusta Water Dist

**SITE INVESTIGATION** Show Location Of Pits on Site Plan on Page 2

Thickness and Description of each soil strata encountered	Soil Profile No. <input checked="" type="checkbox"/> Pit <input type="checkbox"/> Boring	Soil Profile No. <input type="checkbox"/> Pit <input type="checkbox"/> Boring	Soil Profile No. <input type="checkbox"/> Pit <input type="checkbox"/> Boring	Soil Profile No. <input type="checkbox"/> Pit <input type="checkbox"/> Boring
	Organic Strata	Organic Strata	Organic Strata	Organic Strata
1st Strata <u>DARK BROWN F.S.L. STONEY</u>	1st Strata	1st Strata	1st Strata	1st Strata
Inches <u>12</u>	Inches	Inches	Inches	Inches
2nd Strata <u>Red Brown F.S.L. STONEY</u>	2nd Strata	2nd Strata	2nd Strata	2nd Strata
Inches <u>7</u>	Inches	Inches	Inches	Inches
3rd Strata	3rd Strata	3rd Strata	3rd Strata	3rd Strata
Inches	Inches	Inches	Inches	Inches
4th Strata	4th Strata	4th Strata	4th Strata	4th Strata
Inches	Inches	Inches	Inches	Inches
Depth from bottom of organic horizon to:	Total Depth of Observation Hole Inches <u>19</u>	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches	Total Depth of Observation Hole Inches
	Max. Seasonal Water Table Mottling <input checked="" type="radio"/> None Evident	Max. Seasonal Water Table Mottling <input type="radio"/> None Evident	Max. Seasonal Water Table Mottling <input type="radio"/> None Evident	Max. Seasonal Water Table Mottling <input type="radio"/> None Evident
	Impervious Layer Clay, Etc. <input checked="" type="radio"/> None Evident	Impervious Layer Clay, Etc. <input type="radio"/> None Evident	Impervious Layer Clay, Etc. <input type="radio"/> None Evident	Impervious Layer Clay, Etc. <input type="radio"/> None Evident
	Bedrock <input type="radio"/> None Evident Type of Bedrock <u>19</u>	Bedrock <input type="radio"/> None Evident Type of Bedrock	Bedrock <input type="radio"/> None Evident Type of Bedrock	Bedrock <input type="radio"/> None Evident Type of Bedrock
Surface Slope <u>4</u> %	Surface Slope %	Surface Slope %	Surface Slope %	
Soil Group <u>2</u> Soil Condition <u>A</u> Per Table 9-1 Code II	Soil Group _____ Soil Condition _____ Per Table 9-1 Code II	Soil Group _____ Soil Condition _____ Per Table 9-1 Code II	Soil Group _____ Soil Condition _____ Per Table 9-1 Code II	

On 5-23-79 (date), a site investigation for this project was completed. I conducted this soil evaluation and certify that the results indicated above best represent the soil conditions found. I recommend the following type and size of private sewage disposal system. I also recommend the proposed private sewage disposal system layout and location shown on page 2.

Signature: Gerald C. Paulin Site Evaluator License Number: 79  
 Date Signed: 5-23-79

**DISPOSAL SYSTEM PROPOSED** Show Location of System and Details on Disposal Plan on Page 2

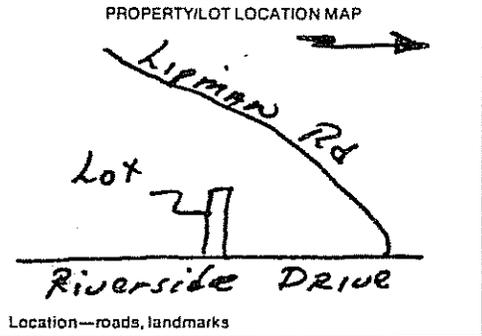
**SYSTEM:**  Combined System  Separated System  
 If separated system—type of human waste disposal system to be used:  
 Sealed Vault Privy  Open Pit Privy  Compost Toilet  Chemical Toilet  Incinerator Toilet

**TREATMENT TANK:**  Aerobic Tank  Septic Tank  
 Concrete  Fiberglass  Metal  
 Size In Gallons: 1000 Gal.  
 Number of Bedrooms: 3

**SUBSURFACE ABSORPTION AREA/TYPE:**  Bed System No. of Beds 1 Length 44 ft Width 20 ft  
 Chamber System Number \_\_\_\_\_  
 Type A  Single File  Type B  Cluster  
 Special System Length \_\_\_\_\_ ft Width \_\_\_\_\_ ft  
 Laundry System Type A \_\_\_\_\_ Type B \_\_\_\_\_  
 No. of Chambers: \_\_\_\_\_ Name and type of establishment If other than private home: \_\_\_\_\_

**SIZE:**  Small  Medium  Med.-Large  Large  Extra-Large  
 Design Flow: 264 GPD

**SITE MODIFICATION:** Fill will be: 20 in. uphill 30 in. downhill  
**DETAILS:**  A Distribution Box is required Pumping is— required  is not required The dose will be \_\_\_\_\_ Gallons  
**DISTANCES:**  Yes  No: The proposed subsurface absorption area will be located at least 100 feet from any and all wells; springs; surface water bodies and courses (lake, pond, ocean, brook, stream, river); swamps; marshes; and bogs.  
 Yes  No: The proposed subsurface absorption area will be located at least 300 feet from any and all wells and springs producing 2000 gallons or more of water per day and any public water supplies.



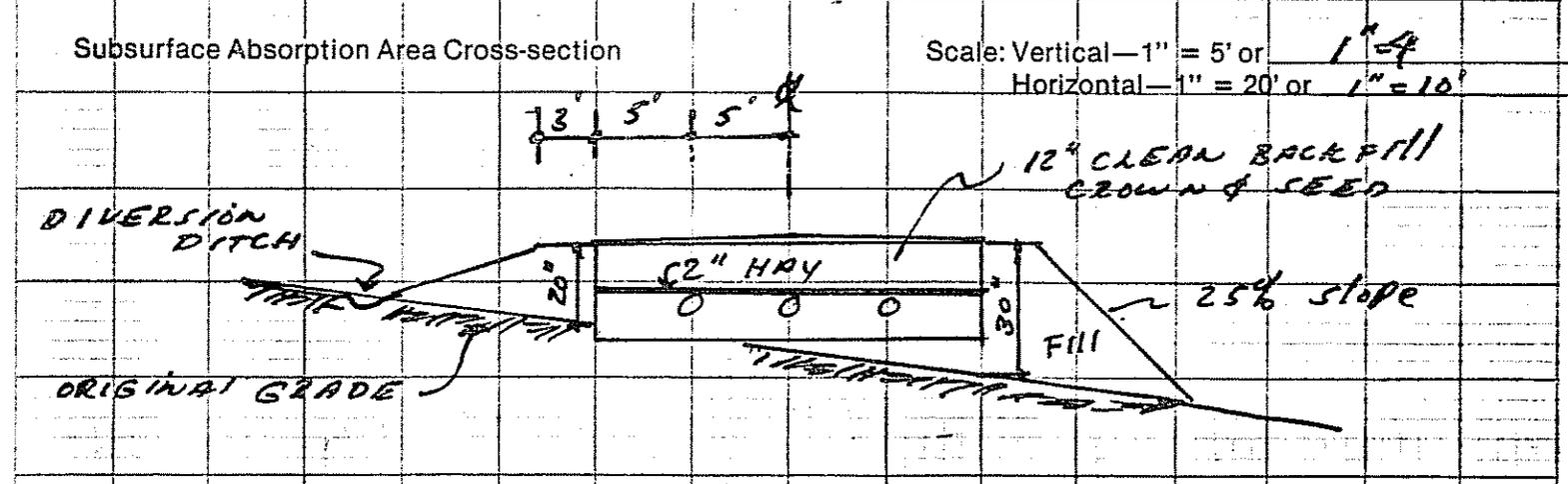
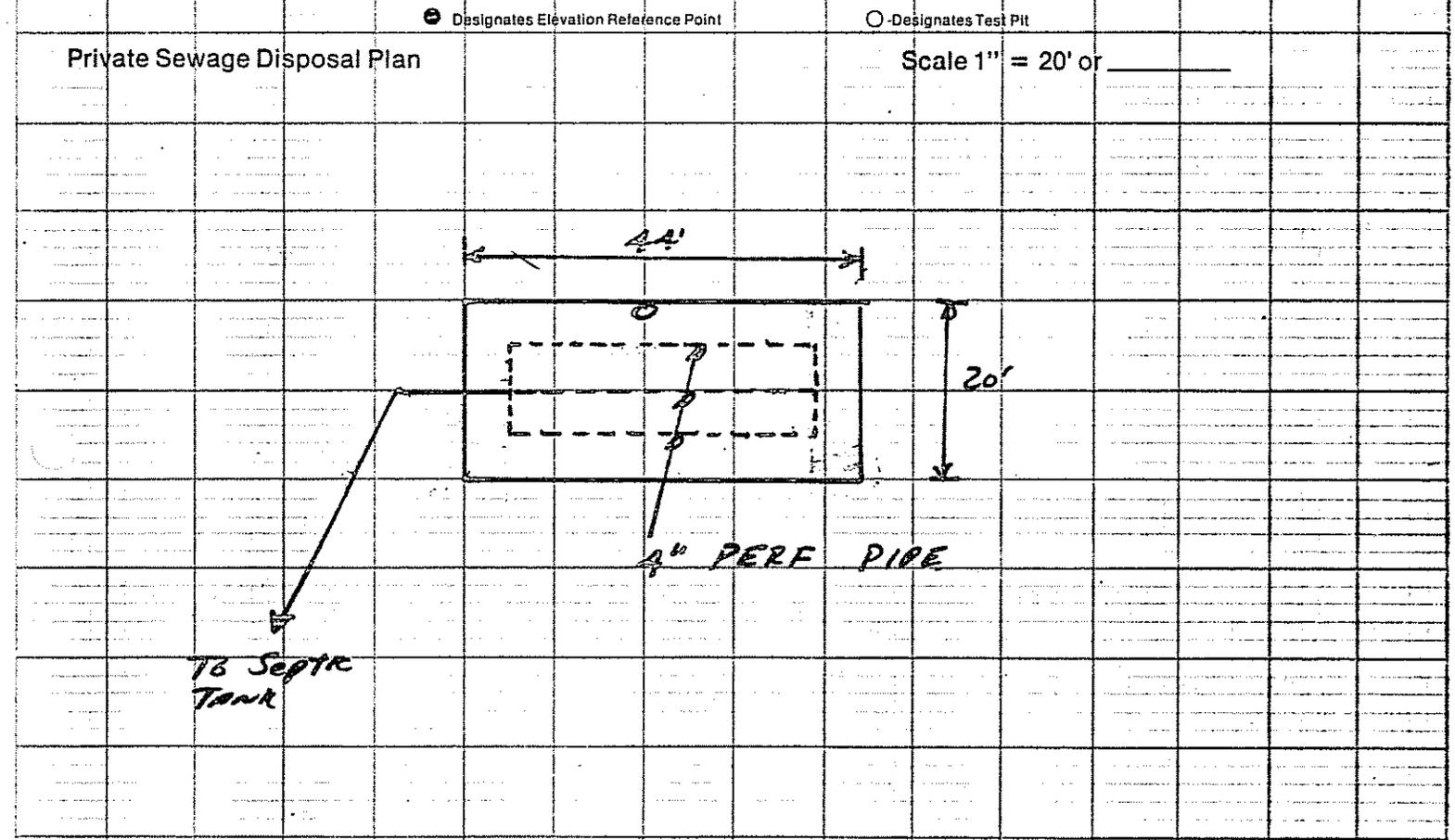
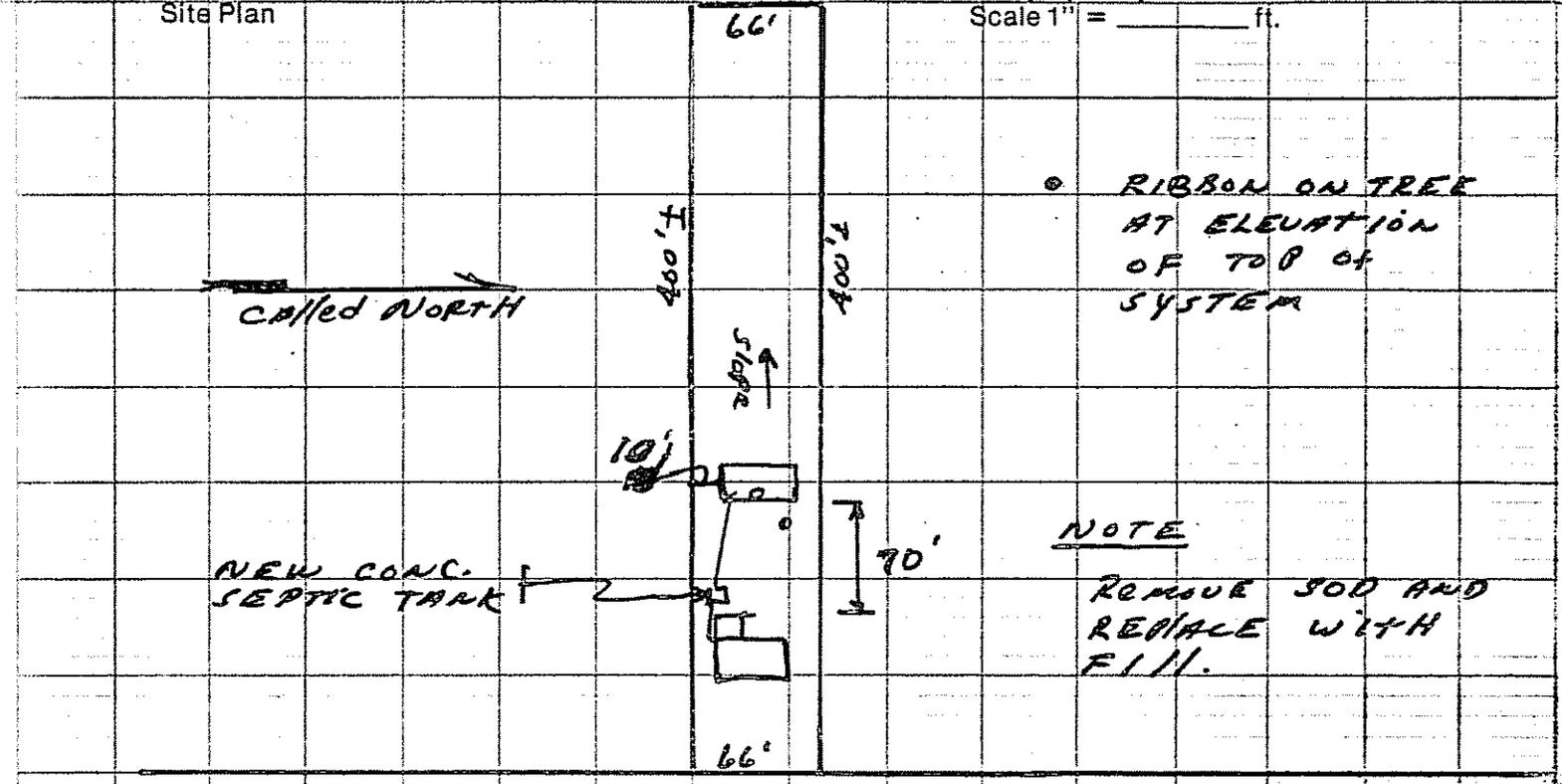
WAIVER  State Variance Required  Replacement Variance Required  None Required

FOR THE USE OF LPI ONLY  
 Denial: Application is denied for the following reasons; portions of the Code II are cited. Form is incomplete (\_\_\_\_ pg.) as to  General info.,  Site Investigation,  System Proposed,  Site Plan,  Disposal System Plan,  Cross-Section,  Statement. See section 4.1  
 Site Investigation indicates site is  unsuitable for disposal system.  Unsuitable for system proposed.  
 System Proposed does not conform to Code.  
 Site Investigation indicates site modifications are necessary.  
 Acceptance: Application for permit is approved  with condition specified, comply with Section 4.4  without condition.

Signed LPI: Richard P. Baber Date: 6-14-79

APPLICATION FOR SUBSURFACE WASTEWATER DISPOSAL PERMIT  
(For systems disposing of less than 2000 gallons per day)

Town: **Augusta** Street, Road, etc.: **Riverside Drive** Owner of Property: **HARTWELL Webb**  
If on water body, give name



Site Evaluator's Signature: **Gerald Poulin** Date: **5-23-79** License Number: **79**

Statement: (no permit may be issued unless signed)  
I certify that all the information submitted to be true and correct; and I understand that issuance of a permit is based upon the information and plans submitted by the applicant. I also understand that any falsification of this application is reason to deny a permit to install a private sewage disposal system and that the permit is valid for a six (6) month period from the date of permit issuance. I understand that no guarantee is intended or implied by reason of any advice or approval given by the Administrative Authority or its agent.

Signature Required: **HARTWELL Webb** Date: **6-13-79**

Applicant: **HARTWELL Webb** Owner: **HARTWELL Webb**

HHE-200 17