



Replacement System Variance Request

VARIANCE CATEGORY	VARIANCE REQUESTED		LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
<b>SOILS</b>						
Soil Profile	Ground Water Table		to 7"		Inches	
Soil Condition	Restrictive Layer		to 7"		Inches	
from HHE-200	Bedrock		to 12"		Inches	
<b>SETBACK DISTANCES (in feet)</b>	<b>Disposal Fields</b>		<b>Septic Tanks</b>		<b>Disposal Fields</b>	<b>Septic Tanks</b>
from	Less than 1000 gpd	1000 to 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	To	To
Wells with water usage of 2000 or more gpd	300 <sup>a</sup> ft	300 <sup>a</sup> ft	100 <sup>a</sup> ft	100 <sup>a</sup> ft		
Owner's wells	100 down to 50 ft	200 down to 100 ft	100 <sup>b</sup> down to 50 ft	100 down to 50 ft		
Neighbor's wells	100 <sup>b</sup> down to 60 ft	200 <sup>b</sup> down to 120 ft	100 <sup>b</sup> down to 50 ft	100 <sup>b</sup> down to 75 ft		
Water supply line	10 ft <sup>a</sup>	20 ft <sup>a</sup>	10 ft <sup>a</sup>	10 ft <sup>a</sup>		
Water course, major - for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft	200 down to 120 ft	100 down to 50 ft	100 down to 50 ft		
Water course, minor	50 down to 25 ft	100 down to 50 ft	50 down to 25 ft	50 down to 25 ft		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	25 down to 12 ft	25 down to 12 ft		
Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams (edge of fill extension)	25 ft <sup>d</sup>	25 ft <sup>d</sup>	25 ft <sup>d</sup>	25 ft <sup>d</sup>		
Slopes greater than 3:1	10 ft	18 ft	N/A	N/A		
No full basement (e.g. slab, frost wall, columns)	15 down to 7 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Full basement (below grade foundation)	20 down to 10 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Property lines	10 down to 5 <sup>c</sup> ft	18 ft down to 9 <sup>c</sup> ft	10 ft down to 4 <sup>c</sup> ft	10 ft down to 7 <sup>c</sup> ft		
Burial sites or graveyards, measured from the downhill toe of the fill extension	25 ft	25 ft	25 ft	25 ft		

**OTHER**

1. REQUEST LPI APPROVAL FOR THE USE OF FILL SOIL AS THE EQUIVALENT TO ORIGINAL SOIL FOR DESIGN PURPOSES ACCORDING TO SECTION 405.2 FILL IS EXTENSIVE AND OF PROPER CONSISTENCY AND APPEARS TO BE PLACED PRIOR TO 1974
- 2.
- 3.

**Footnotes:**

- a. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State Variance.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 (or 200 ft. for 1000-2000 gpd) feet and closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope or property line.
- d. Natural Resources Protection Act requires a 25 foot setback on slopes with less than 20% from the edge of disturbance and 100 feet on slopes greater than 20% except for the repair or installation of a replacement system when no practical alternative exists.

**WILLIAM P BROWN**

*William P Brown*

**8/27/2001**

SITE EVALUATOR'S SIGNATURE

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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services  
Division of Health Engineering, Station 10  
(207)287-5672 FAX (207)287-4172

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; Caution: Permit Required – Attach in Space Below &lt;&lt;</b>	
City, Town, or Plantation	<b>AUGUSTA</b>	AUGUSTA Date Permit Issued: _____ 4738 TOWN CODE \$1500 FEE Double Fee Charged L.P.I. # _____ Local Plumbing Inspector Signature: _____	
Street or Road	<b>780 RIVERSIDE DRIVE</b>		
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	<b>GALLANT, JEAN</b>		
Mailing Address of	<b>816 RIVERSIDE DRIVE</b>		
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	<b>AUGUSTA, ME 04330</b>		
Daytime Tel. #	<b>622-5946</b>	Municipal Tax Map # <u>54</u> Lot # <u>2-13</u>	
<b>Owner or Applicant Statement</b> 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.  Signature of Owner/Applicant: <u>Jean A. Gallant</u> Date: <u>9/14/01</u>		<b>Caution: Inspection Required</b> I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. Local Plumbing Inspector Signature: _____ (1st) Date Approved: <u>3/15/02</u> _____ (2nd) Date Approved: _____	

## PERMIT INFORMATION

<b>TYPE OF APPLICATION:</b> 1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced <u>TRENCH</u> Year Installed <u>60'S</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	<b>THIS APPLICATION REQUIRES</b> 1. <input type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 3. <input checked="" type="checkbox"/> Replacement System Variance a. <input checked="" type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Variance	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 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 Treatment Tank (only) 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 or more) 9. <input type="checkbox"/> Engineered Treatment Tank (only) 10. <input type="checkbox"/> Engineered Disposal Field (only) 11. <input type="checkbox"/> Pretreatment, specify: 12. <input type="checkbox"/> Miscellaneous components
<b>SIZE OF PROPERTY</b> 1 <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres	<b>DISPOSAL SYSTEM TO SERVE:</b> 1. <input type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: _____ 2. <input checked="" type="checkbox"/> Multiple Family Dwelling Unit, No. of Units: <u>3-APTS</u> 3. <input type="checkbox"/> Other _____ SPECIFY _____	<b>TYPE OF WATER SUPPLY</b> 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
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

<b>TREATMENT TANK</b> 1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other _____ CAPACITY <u>1500</u> gallons	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> 1. <input checked="" type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster Array c. <input type="checkbox"/> Linear b. <input type="checkbox"/> Regular load d. <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other _____ SIZE <u>1800</u> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> 1. <input checked="" type="checkbox"/> No 3. <input type="checkbox"/> Maybe 2. <input type="checkbox"/> Yes >> Specify one below: a. <input type="checkbox"/> Multi-compartment Tank b. <input type="checkbox"/> Tanks In Series c. <input type="checkbox"/> Increase in Tank Capacity d. <input type="checkbox"/> Filter on Tank Outlet	<b>DESIGN FLOW</b> <u>540</u> gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS -for other facilities- <b>2- 1 BDRM APTS @ 180 GPD EACH AND</b> <b>1- 2 BDRM APT @ 180 GPD</b> 3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE <u>3</u> / CONDITION <u>D</u> / DESIGN <u>3</u> at Observation Hole # <u>TP-1</u> Depth <u>12</u> " Elevation _____ " OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> 1. <input type="checkbox"/> Small - 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq. ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq. ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.0 sq. ft./gpd	<b>PUMPING</b> 1. <input checked="" type="checkbox"/> Not Required 2. <input type="checkbox"/> May Be Required 3. <input type="checkbox"/> Required >> Specify only for engineered or experimental systems DOSE _____ gallons	

## SITE EVALUATOR'S STATEMENT

I certify that on 8/27/2001 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

William P Brown  
Site Evaluator Signature

188  
SE#

8/27/2001  
Date

**WILLIAM P BROWN**  
Site Evaluator Name Printed

**293-2110**  
Telephone #

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX 207 287-4172

Town, City, Plantation

Street, Road, Subdivision

Owners Name

**AUGUSTA**

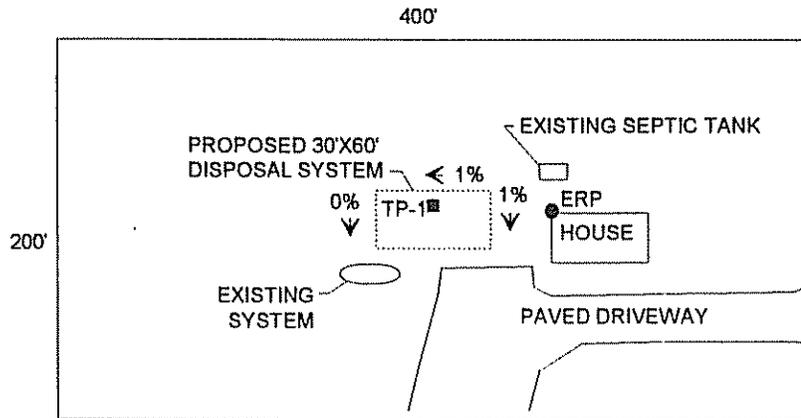
**RIVERSIDE DRIVE**

**JEAN GALLANT**

## SITE PLAN

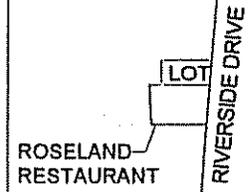
Scale 1" = 100 Ft.

NORTH ↑



## SITE LOCATION PLAN

(Map from Maine Atlas recommended)



RIVERSIDE DRIVE

ROSELAND RESTAURANT

ERP TO TP-1 = 50'

THE AREA OF THE PROPOSED SEPTIC SYSTEM IS A FILLED AREA IT APPEARS THAT THE FILL WAS PLACED PRIOR TO JULY 1, 1974 AND IS OF SUITABLE TEXTURE, CONSISTENCY, DEPTH, EXTENT, AND STRUCTURE TO BE OF EQUIVALENT OF ORIGINAL SOIL FOR DESIGN PURPOSES. THE FILL MATERIAL CONSISTS OF SANDY LOAM AND LOAMY SAND SOILS AND IS FREE OF ORGANIC MATERIALS.

### SOIL DESCRIPTION AND CLASSIFICATION

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

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	FINE SAND FILL	FRIABLE	YELLOW BROWN	
10	SANDY LOAM FILL	FIRM	DARK BROWN	NONE COMMON
20	LOAMY SAND FILL	FRIABLE	BROWN	
30				
40				
50				

Soil Classification <b>3</b> Profile	Slope <b>D</b> Condition	Limiting Factor <b>0-1%</b>	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
		<b>12"</b>	

### (Location of Observation Holes Shown Above)

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

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification Profile	Classification Condition	Slope %	Limiting Factor "	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth

WILLIAM P BROWN

Site Evaluator Signature

*William P Brown*

188  
SE #

8/27/2001  
Date

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# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services  
Division of Health Engineering

Town, City, Plantation

Street, Road, Subdivision

Owners Name

**AUGUSTA**

**RIVERSIDE DRIVE**

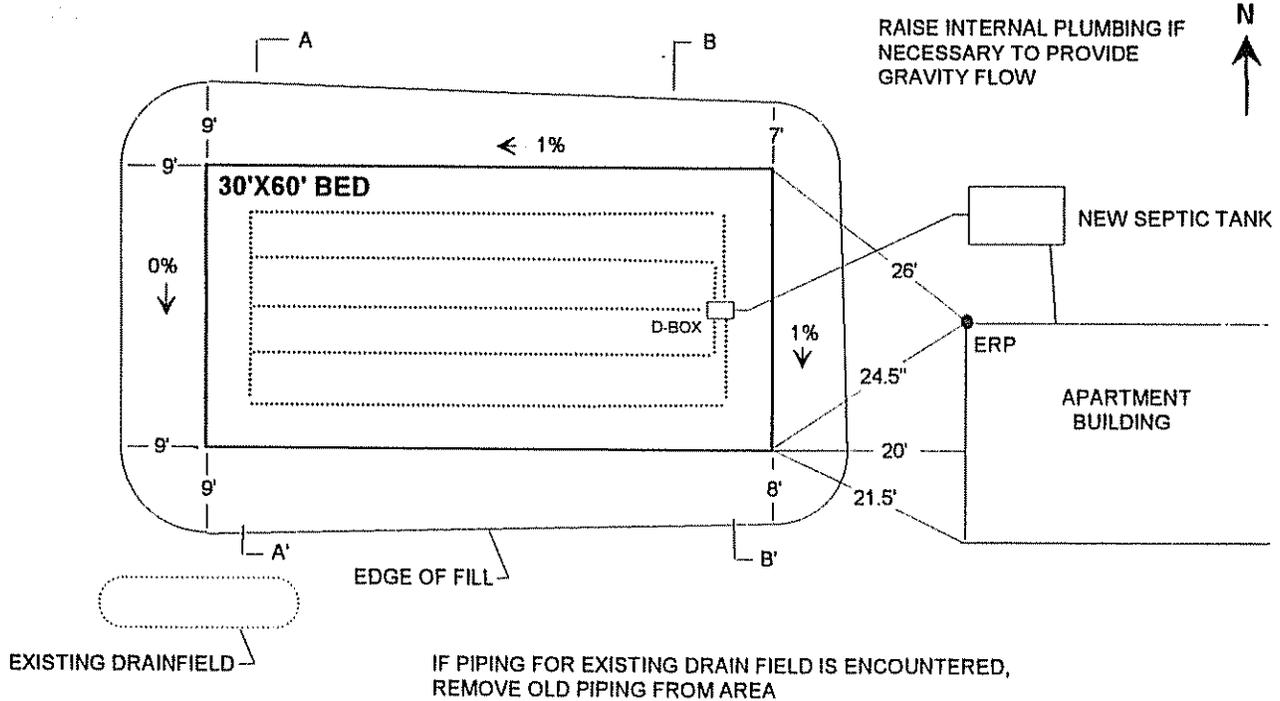
**JEAN GALLANT**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

REMOVE VEGETATION AND APPROXIMATELY 18 INCHES OF FINE SAND AND FIRM SANDY LOAM SOILS. REPLACE WITH 12 INCHES OF GRAVELLY COARSE SAND. SOME PORTIONS OF THE EXCAVATED SOILS MAY BE SUITABLE FOR USE AS FILL. OTHER PORTIONS OF FILL ARE NOT SUITABLE FOR USE AS FILL. THESE AREAS OF COMPACT SANDY LOAM FOUND AT A DEPTH OF 10 TO 17 INCHES MAY BE USED AS FILL IN OTHER AREAS ON THE PROPERTY

REMOVE EXISTING 1000 GALLON SEPTIC TANK AND REPLACE WITH NEW 1500 GALLON SEPTIC TANK IN SAME LOCATION



### FILL REQUIREMENTS

Depth of Fill (Upslope) **17-25"**  
Depth of Fill (Downslope) **20-25"**

### CONSTRUCTION ELEVATIONS

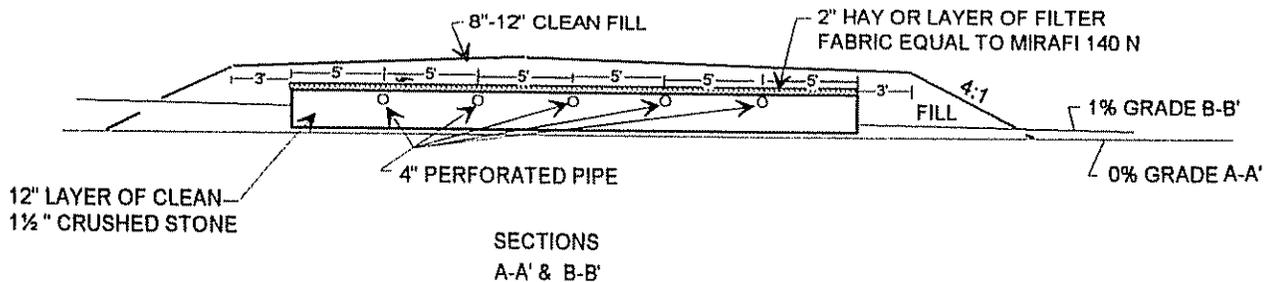
Reference Elevation Is **00"**  
Bottom of Disposal Area **-58"**  
Top of distribution Lines or Chambers **-47"**

ELEVATION REFERENCE POINT  
LOCATION & DESCRIPTION  
**BOTTOM OF CORNER TRIM OF  
VINYAL SIDING AT BACK OF HOUSE**

### DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 6 Ft.  
Horizontal: 1 inch = 10 Ft.



REMOVE VEGETATION IN DISPOSAL AREA  
REMOVE APPROX 18 INCHES OF FINE SANDY LOAM TO EXPOSE COARSE LOAMY SAND BELOW  
PLACE GRAVELLY COARSE SAND TO ELEVATION OF SYSTEM  
FILL SHALL BE GRAVELLY COARSE SAND  
CROWN FINISH GRADE FROM CENTER AT 3%  
LOAM, SEED, MULCH DISTURBED AREAS

**WILLIAM P BROWN**  
Site Evaluator Signature

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SE #

8/27/2001

Date

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