

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 one-time exempted 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 AUGUSTA
Permit No. 66106
Date Permit Issued 8/15/12
Property Owner's Name: CHRIS QUIGG
Tel. No.: 754-0251
System's Location: 40 KELTON ROAD
Property Owner's Address: 49 CHURCH HILL ROAD
(if different from above) AUGUSTA, ME 04330

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.)
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.
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.

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.
Signature: Chris Quigg
DATE: 8-15-2012

LOCAL PLUMBING INSPECTOR
I, Robert Owen, 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):
a. (Approve, (disapprove) the variance request based on my authority to grant this variance. Note: If the LPI does not give his approval, he shall list his reasons for denial in Comments Section below and return to the applicant. -OR-
b. find that one or more of the requested Variances exceeds my approval authority as LPI. I (Recommend, (do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, the reasons shall be stated in Comments Section below as to why the proposed replacement system is not being recommended.
Comments:
Signature: Robert Owen
DATE: 8/15/12

HHE-204 Rev 6/00

FORMS
Replacement System Variance Request

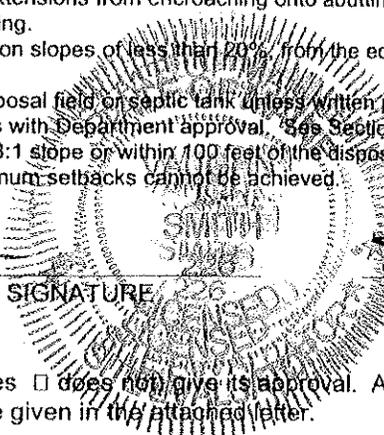
VARIANCE CATEGORY	LIMIT OF LPP'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
Soil Profile	Ground Water Table			to 7"			— inches	
Soil Condition	Restrictive Layer			to 7"			— inches	
from HHE-200	Bedrock			to 12"			— inches	
SETBACK DISTANCES (in feet)	Disposal Fields			Septic Tanks			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 system wells	300 ft	300 ft	300 ft	150 ft	150 ft	150 ft	—	—
Owner's wells	100 down to 60 ft [a]	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 [f]	200 down to 120 ft [f]	300 down to 180 ft [f]	100 down to 50 ft [f]	100 down to 75 ft [f]	100 down to 75 ft [f]	—	—
Water supply line	10 ft	20 ft	25 ft [-h]	10 ft	10 ft	10 ft [h]	—	—
Water course, major -	100 down to 60 ft [d]	200 down to 120 ft [d]	300 down to 180 ft [d]	100 down to 50 ft [b]	100 down to 50 ft	100 down to 50 ft	—	—
Water course, minor	50 down to 25 ft [e]	100 down to 50 ft [e]	150 down to 75 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	—	—
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 [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	—	—
Slopes greater than 3:1	10 ft [g]	18 ft [g]	25 ft [g]	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	8'	5'
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 **ALL FILL MUST REMAIN ON PROPERTY**
- 2.
- 3.

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 1402.8 for special procedures when these minimum setbacks cannot be achieved.

Vander L. Osh
 SITE EVALUATOR'S SIGNATURE



8/13/12
 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

11-8/15/12 \$150
M62/25

\$15.00
to State
+
TOWN COPY
\$ 250.00 fee

SUBSURFACE WASTEWATER DISPOSAL SYSTEM

PROPERTY LOCATION

City, Town, or Plantation: AUGUSTA

Street or Road: 40 KELTON ROAD

Subdivision, Lot #

OWNER/APPLICANT INFORMATION

Name (Last, first, MI): QUIGG CHRIS Owner Applicant

Mailing Address of Owner/Applicant: 49 CHURCH HILL ROAD AUGUSTA, ME 04330

Daytime Tel. #: 622-0936

OWNER OR APPLICANT STATEMENT

I state and acknowledge 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 or Applicant: [Signature] Date: 8-15-2012

AUGUSTA PERMIT #66106

Date Permit Issued: 8/15/12

[Signature] LPI # 1137

\$265 total

The Subsurface Wastewater Disposal System shall not 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.

Municipal Tax Map # _____ Lot # _____

CAUTION: INSPECTION REQUIRED

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 _____ (2nd) date approved _____

PERMIT INFORMATION

<p>TYPE OF APPLICATION</p> <p><input type="checkbox"/> 1. First Time System</p> <p><input checked="" type="checkbox"/> 2. Replacement System</p> <p>Type replaced: <u>CESS POOL</u></p> <p>Year installed: <u>?</u></p> <p><input type="checkbox"/> 3. Expanded System</p> <p>a. <25% Expansion</p> <p>b. >25% Expansion</p> <p><input type="checkbox"/> 4. Experimental System</p> <p><input type="checkbox"/> 5. Seasonal Conversion</p>	<p>THIS APPLICATION REQUIRES</p> <p><input type="checkbox"/> 1. No Rule Variance</p> <p><input type="checkbox"/> 2. First Time System Variance</p> <p>a. Local Plumbing Inspector Approval</p> <p>b. State & Local Plumbing Inspector Approval</p> <p><input checked="" type="checkbox"/> 3. Replacement System Variance</p> <p>a. Local Plumbing Inspector Approval</p> <p>b. State & Local Plumbing Inspector Approval</p> <p><input type="checkbox"/> 4. Minimum Lot Size Variance</p> <p><input type="checkbox"/> 5. Seasonal Conversion Permit</p>	<p>DISPOSAL SYSTEM COMPONENTS</p> <p><input checked="" type="checkbox"/> 1. Complete Non-engineered System</p> <p><input type="checkbox"/> 2. Primitive System (graywater & alt. toilet)</p> <p><input type="checkbox"/> 3. Alternative Toilet, specify: _____</p> <p><input type="checkbox"/> 4. Non-engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 5. Holding Tank, _____ gallons</p> <p><input type="checkbox"/> 6. Non-engineered Disposal Field (only)</p> <p><input type="checkbox"/> 7. Separated Laundry System</p> <p><input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more)</p> <p><input type="checkbox"/> 9. Engineered Treatment Tank (only)</p> <p><input type="checkbox"/> 10. Engineered Disposal Field (only)</p> <p><input type="checkbox"/> 11. Pre-treatment, specify: _____</p> <p><input type="checkbox"/> 12. Miscellaneous Components</p>
<p>SIZE OF PROPERTY</p> <p><u>±0.3</u> <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES</p>	<p>DISPOSAL SYSTEM TO SERVE</p> <p><input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>2</u></p> <p><input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____</p> <p><input type="checkbox"/> 3. Other: _____ (specify)</p> <p>Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped</p>	<p>TYPE OF WATER SUPPLY</p> <p><input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private</p> <p><input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other</p>

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p><input checked="" type="checkbox"/> 1. Concrete</p> <p>a. Regular</p> <p>b. Low Profile</p> <p><input type="checkbox"/> 2. Plastic</p> <p><input type="checkbox"/> 3. Other: _____</p> <p>CAPACITY: <u>1000 GAL.</u></p> <p><u>INSTALL</u></p>	<p>DISPOSAL FIELD TYPE & SIZE</p> <p><input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench</p> <p><input checked="" type="checkbox"/> 3. Proprietary Device</p> <p>a. cluster array <input type="checkbox"/> c. Linear</p> <p>b. regular load <input type="checkbox"/> d. H-20 load</p> <p><input type="checkbox"/> 4. Other: <u>ELSEN IN DRAINS</u></p> <p>SIZE: _____ <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.</p>	<p>GARBAGE DISPOSAL UNIT</p> <p><input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe</p> <p>If Yes or Maybe, specify one below:</p> <p><input type="checkbox"/> a. multi-compartment tank</p> <p><input type="checkbox"/> b. _____ tanks in series</p> <p><input type="checkbox"/> c. increase in tank capacity</p> <p><input type="checkbox"/> d. Filter on Tank Outlet</p>	<p>DESIGN FLOW</p> <p><u>180</u> gallons per day</p> <p>BASED ON:</p> <p><input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s))</p> <p><input type="checkbox"/> 2. Table 4C (other facilities)</p> <p>SHOW CALCULATIONS for other facilities</p>
<p>SOIL DATA & DESIGN CLASS</p> <p>PROFILE CONDITION: <u>1. D</u></p> <p>at Observation Hole # <u>2</u></p> <p>Depth <u>12"</u></p> <p>of Most Limiting Soil Factor</p>	<p>DISPOSAL FIELD SIZING</p> <p><input type="checkbox"/> 1. Medium---2.6 sq. ft. / gpd</p> <p><input type="checkbox"/> 2. Medium---Large 3.3 sq. ft. / gpd</p> <p><input checked="" type="checkbox"/> 3. Large---4.1 sq. ft. / gpd</p> <p><input type="checkbox"/> 4. Extra Large---5.0 sq. ft. / gpd</p>	<p>EFFLUENT/EJECTOR PUMP</p> <p><input type="checkbox"/> Not Required</p> <p><input checked="" type="checkbox"/> May Be Required</p> <p><input type="checkbox"/> Required</p> <p>Specify only for engineered systems:</p> <p>_____ gpd</p>	<p>LATITUDE AND LONGITUDE</p> <p>at center of disposal area</p> <p>Lat. <u>44</u> d <u>17</u> m <u>50</u> s</p> <p>Lon. <u>69</u> d <u>46</u> m <u>20</u> s</p> <p>if g.p.s., state margin of error:</p>

SITE EVALUATOR STATEMENT

I certify that on 8/2/12 (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).

Site Evaluator Signature: [Signature] Date: 8/13/12

Site Evaluator Name Printed: VAUGHN L. SMITH

SE # 226

441-3887

E-mail Address: SOILTESTMAN@AOL.COM

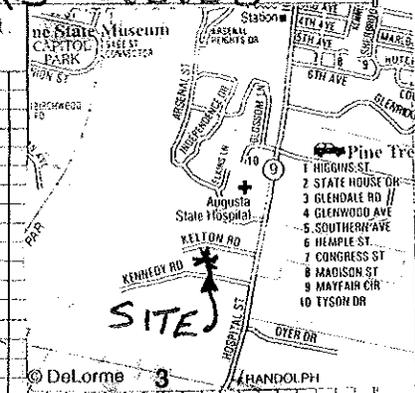
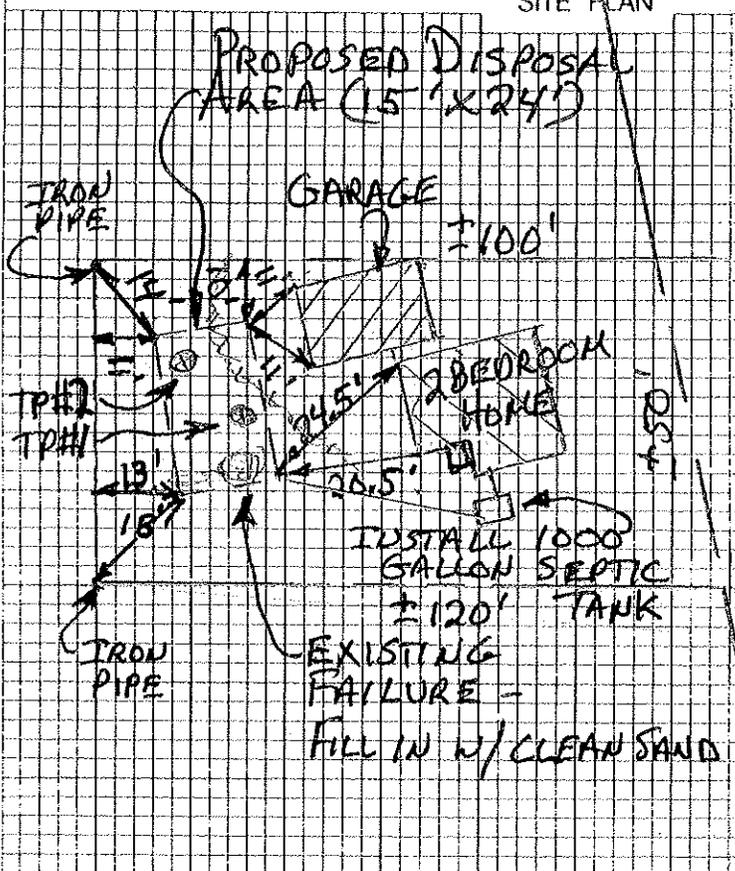
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation **AUGUSTA** Street, Road Subdivision **40 KELTON ROAD** Owner's Name **CHRIS QUIGG**

SITE PLAN

Scale 1" = 30 Ft. or as shown



NOTES: PROPERTY INFORMATION IS APPROXIMATE
② CONFIRM ALL TIES, ELEVATIONS + PROPERTY LINES PRIOR TO CONSTRUCTION

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

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0-10	SILT	FRIABLE	OLIVE BROWN	NONE
10-20	LOAM			
20-30		FIRM	OLIVE	FEW
30-40				DISTINCT

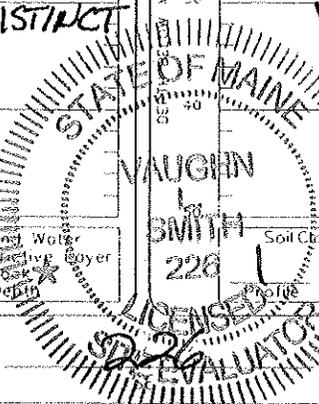
Observation Hole #2 Test Pit Boring
Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0-10	SILT	FRIABLE	OLIVE BROWN	NONE
10-20	LOAM			
20-30		FIRM	OLIVE	FEW
30-40				DISTINCT

Soil Classification **LD** Slope **17%** Limiting Factor **9"**
 Ground Water Restrictive Layer
 Bedrock
 Pit Depth

Soil Classification **LD** Slope **16%** Limiting Factor **11"**
 Ground Water Restrictive Layer
 Bedrock
 Pit Depth

Vaughn K. ...
Site Evaluator Signature



8/13/12
Date

NEW BUILDING →
SEWER

* RAISE INTERNAL PLUMBING
TO ACHIEVE GRAVITY FLOW

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
40 KELTON ROAD

Owner's Name
CHRIS QUIGG

SUBSURFACE WASTEWATER DISPOSAL PLAN

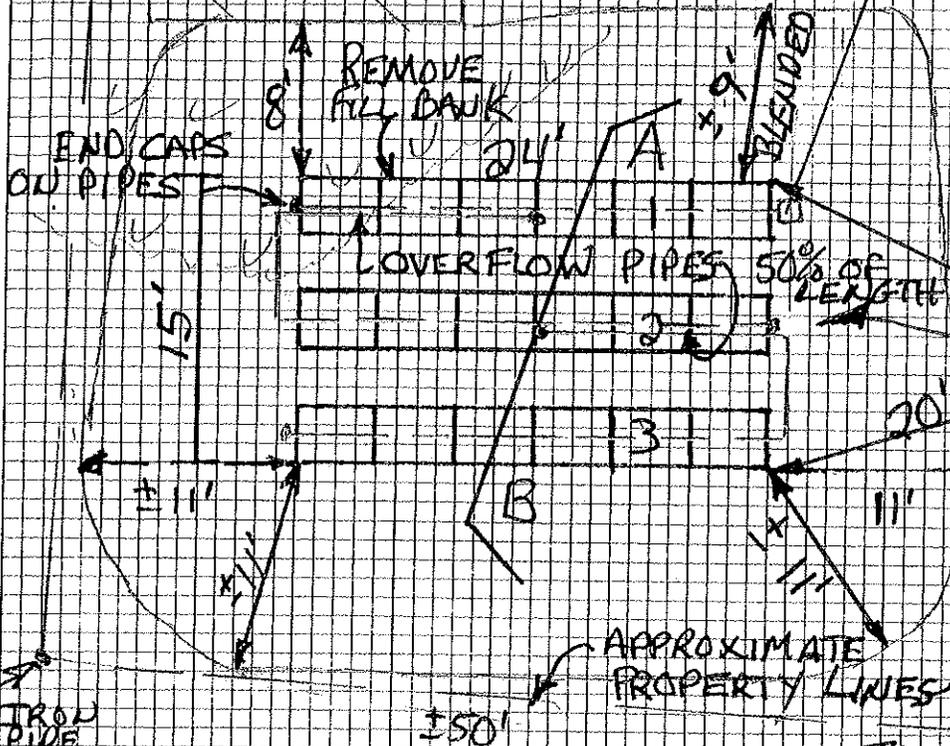
SCALE 1" = 10 FT.

GARAGE
2 BEDROOM HOUSE

4" DIA SCH 40 EFFLUENT LINE FROM SEPTIC TANK

Construction Elevations

Row	Bottom of In-drain Unit	Top of Pipe
Row # 1	-37"	-26"
Row # 2	-49"	-38"
Row # 3	-61"	-50"



* ERP = 14" PINE

PROPOSED DISPOSAL AREA (15' x 24')
3 ROWS OF 6 = 18
ELJEN IN-DRAIN UNITS
(6 FT. ON CENTER)

SEE PD FOR ADDITIONAL MEASUREMENTS + NOTES

FILL REQUIREMENTS

Depth of Fill (Upslope) ± 32"
Depth of Fill (Downslope) ± 38"
FILL DEPTHS WILL VARY

CONSTRUCTION ELEVATIONS

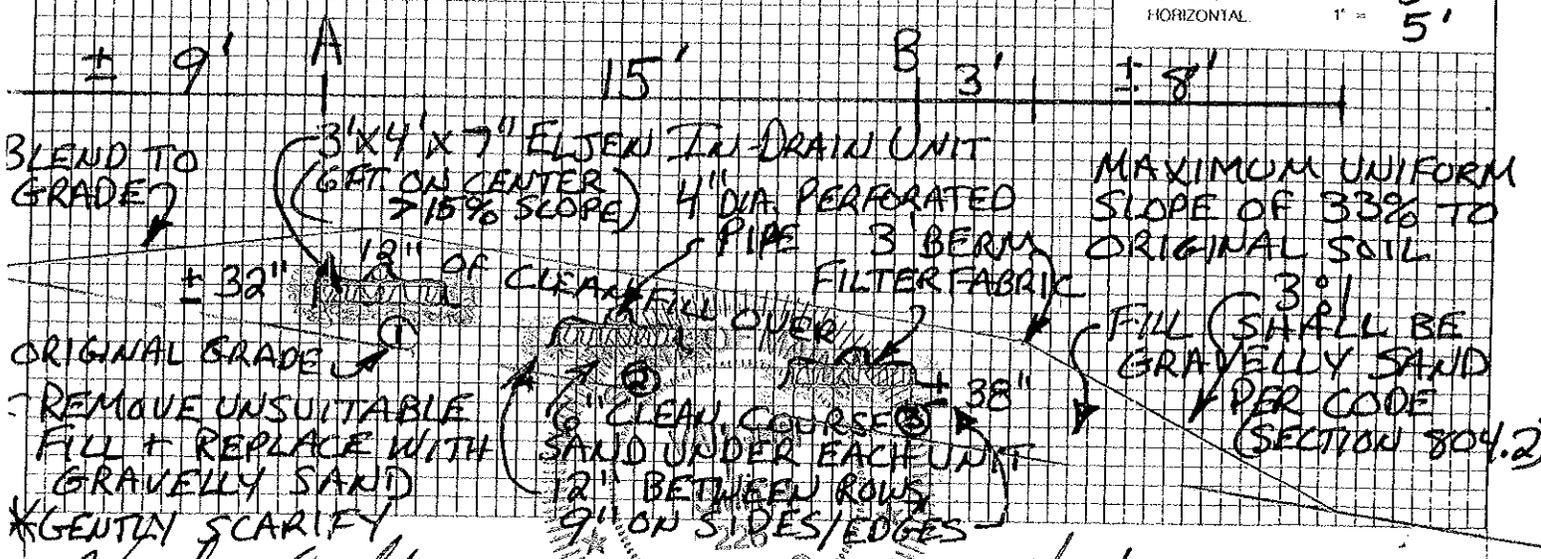
Finished Grade Elevation SEE ABOVE
Top of Distribution Pipe or Proprietary Device
Bottom of Disposal Area

ELEVATION REFERENCE POINT

Location & Description 14" PINE
W/NAIL 42" ABOVE
Reference Elevation 0" GROUND

DISPOSAL AREA CROSS SECTION

SCALE:
VERTICAL 1" = 5'
HORIZONTAL 1" = 5'



ORIGINAL GRADE
REMOVE UNSUITABLE FILL + REPLACE WITH GRAVELLY SAND
*GENTLY SCARIFY

Charles L. [Signature]
Site Evaluator Signature



8/13/2
Date