

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering, Station 10
(207) 287-6672 FAX (207) 287-4172

Coty

PROPERTY LOCATION		>> Caution: Permit Required – Attach In Space Below <<	
City/Town, Location	AUGUSTA	AUGUSTA 4971 TOWN COPY Date Permit Issued: <u>10/18/02</u> \$ <u>1201.00</u> FEE Double Fee Charged <input type="checkbox"/> Local Plumbing Inspector Signature: <u>[Signature]</u> L.P.I. # <u>150A</u>	Municipal Tax Map # <u>64</u> Lot # <u>11</u>
Street or Road	1095 Sr. Bedford Ave. TOGUS POND RD #105		
Subdivision, Lot #	TAX MAP # 64-R11		
OWNER/APPLICANT INFORMATION			
Name (last, first, MI)	Owner: <u>QUIRION LIONEL</u> Applicant		
Mailing Address of	32 HEDGE NETTLE RD		
<input type="checkbox"/> Owner <input type="checkbox"/> Applicant	AUGUSTA, ME 04330		
Daytime Tel. #	207-622-6881		

Owner or Applicant Statement		Caution: Inspections Required	
I state that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant: <u>[Signature]</u> Date: <u>10/31/02</u>		Local Plumbing Inspector Signature: <u>[Signature]</u> (1st) Date Approved: <u>11/19/02</u> (2nd) Date Approved: <u>3/27/03</u>	

PERMIT INFORMATION			
TYPE OF APPLICATION		THIS APPLICATION REQUIRES	
1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> One-time exempted b. <input type="checkbox"/> Non-exempted 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion		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 type="checkbox"/> Replacement System Variance a. <input type="checkbox"/> Local Plumbing Inspector Approval b. <input checked="" type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	
SIZE OF PROPERTY		DISPOSAL SYSTEM TO SERVE	
3/4 AC ± <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> acres SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>(2)</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY	
		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 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"/> Pre-treatment, specify: 12. <input type="checkbox"/> Miscellaneous components	
		PROPOSED TYPE OF WATER SUPPLY	
		1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other:	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

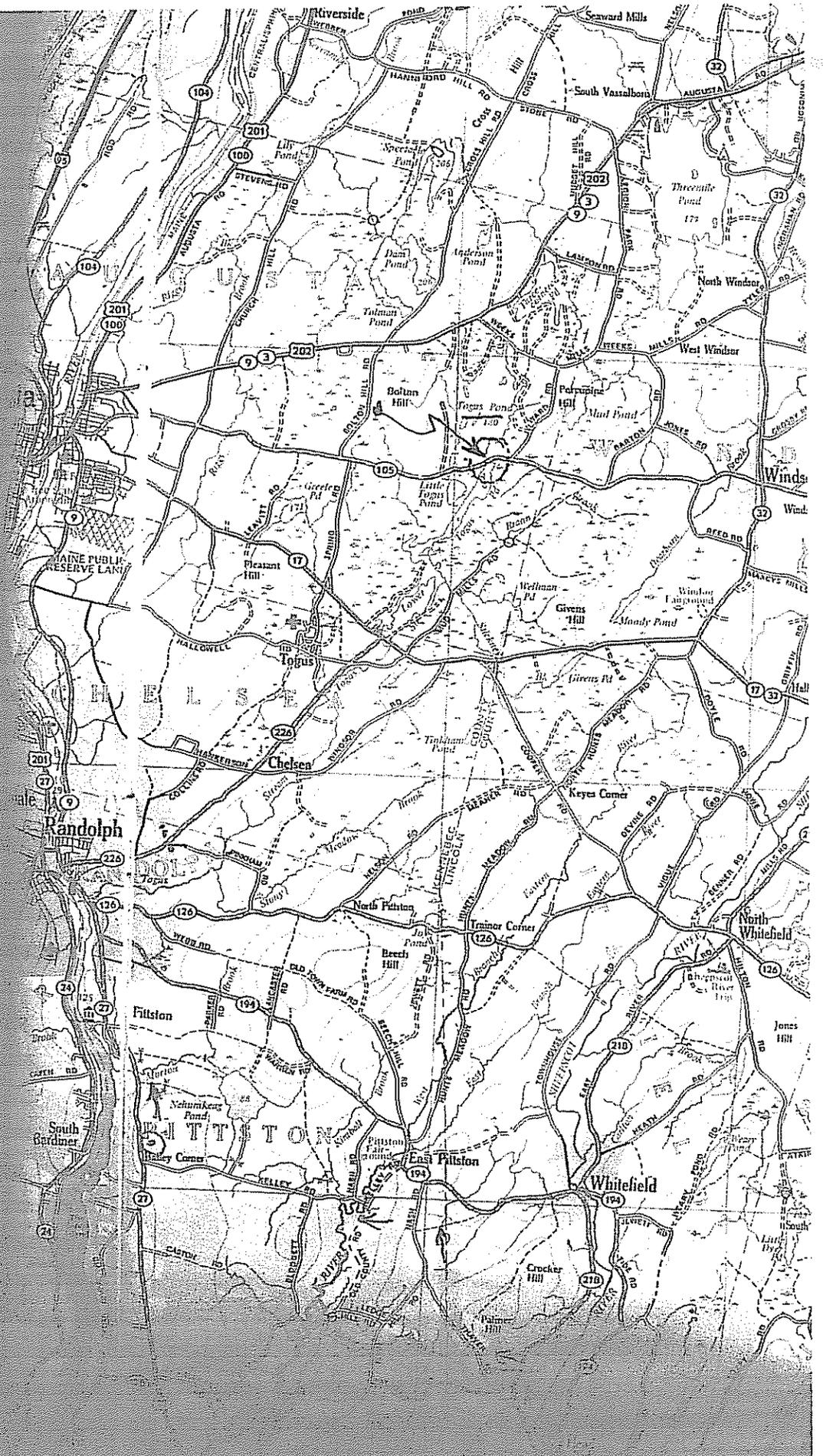
TREATMENT TANK		DISPOSAL FIELD TYPE & SIZE		GARBAGE DISPOSAL UNIT		DESIGN FLOW	
1. <input checked="" type="checkbox"/> Concrete a. <input type="checkbox"/> Regular b. <input checked="" type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY <u>1000</u> gallons		1. <input type="checkbox"/> Stone Bed 2. <input type="checkbox"/> Stone Trench 3. <input checked="" type="checkbox"/> Proprietary Device a. <input type="checkbox"/> Cluster array c. <input checked="" type="checkbox"/> Linear b. <input checked="" type="checkbox"/> Regular load d. <input type="checkbox"/> H-20 load 4. <input type="checkbox"/> Other: _____ SIZE <u>712</u> sq. ft. <input type="checkbox"/> lin. ft.		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 checked="" type="checkbox"/> Filter on Tank Outlet		237 gallons per day BASED ON: 1. <input type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS – for other facilities –	
SOIL DATA & DESIGN CLASS		DISPOSAL FIELD SIZING		PUMPING			
PROFILE CONDITION DESIGN <u>3 CATCH 1 2</u> at Observation Hole # _____ Depth _____ * Elevation _____ OF MOST LIMITING SOIL FACTOR		1. <input type="checkbox"/> Small – 2.0 sq. ft./gpd 2. <input checked="" type="checkbox"/> Medium – 2.6 sq. ft./gpd 3. <input 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		1. <input type="checkbox"/> Not Required 2. <input type="checkbox"/> May Be Required 3. <input checked="" type="checkbox"/> Required >> Specify only for engineered or experimental systems: DOSE: _____ gallons		3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA	

SITE EVALUATOR STATEMENT

I certify that on 9-16-02 (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] SE # 253 Date 9-28-02

Site Evaluator Name Printed: STEPHEN C. SMITH Telephone # 207-549-7972



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
TOGUS POND RD

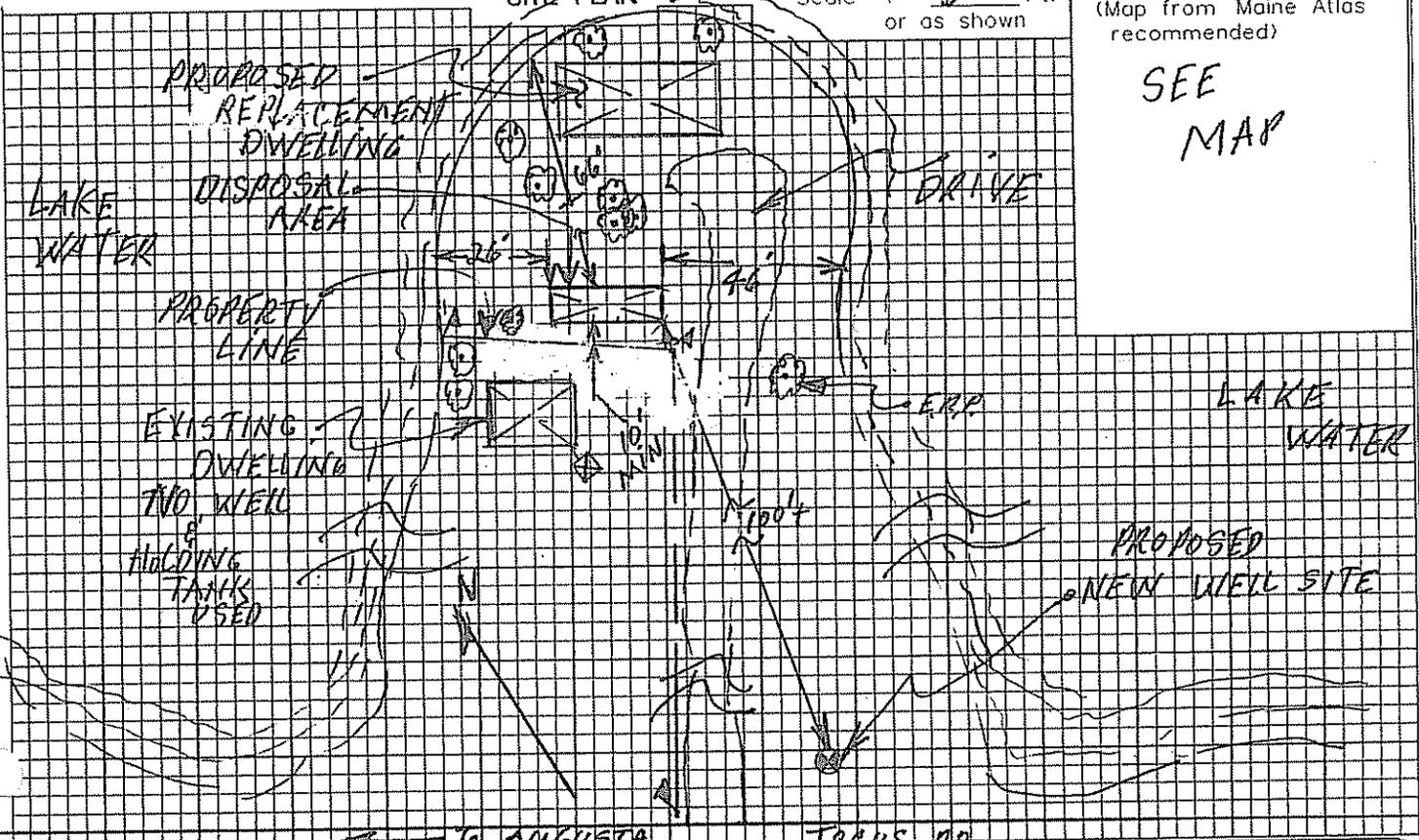
Owner's Name
QUIRION LIONEL

SITE PLAN

Scale 1" = 50' Ft.
or as shown

SITE LOCATION PLAN
(Map from Maine Atlas recommended)

SEE
MAP



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

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

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	COARSE SANDS GRAVEL	FRIABLE	YELLOW TO RED BROWN	
15	COARSE SAND			
20			TO GRAY	COMMON DISTINCT
30				
40				
50				

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

Soil Classification: 6 Profile, C Condition, 9/2 % Slope, Limiting Factor 1920"

Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Soil Classification: _____ Profile, _____ Condition, _____ % Slope, Limiting Factor _____"

Ground Water
 Restrictive Layer
 Bedrock
 Pit Depth

Stephan C. Smith
Site Evaluator Signature

253
SE #

9-28-02
Date

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

TOGUS POND RD (105)

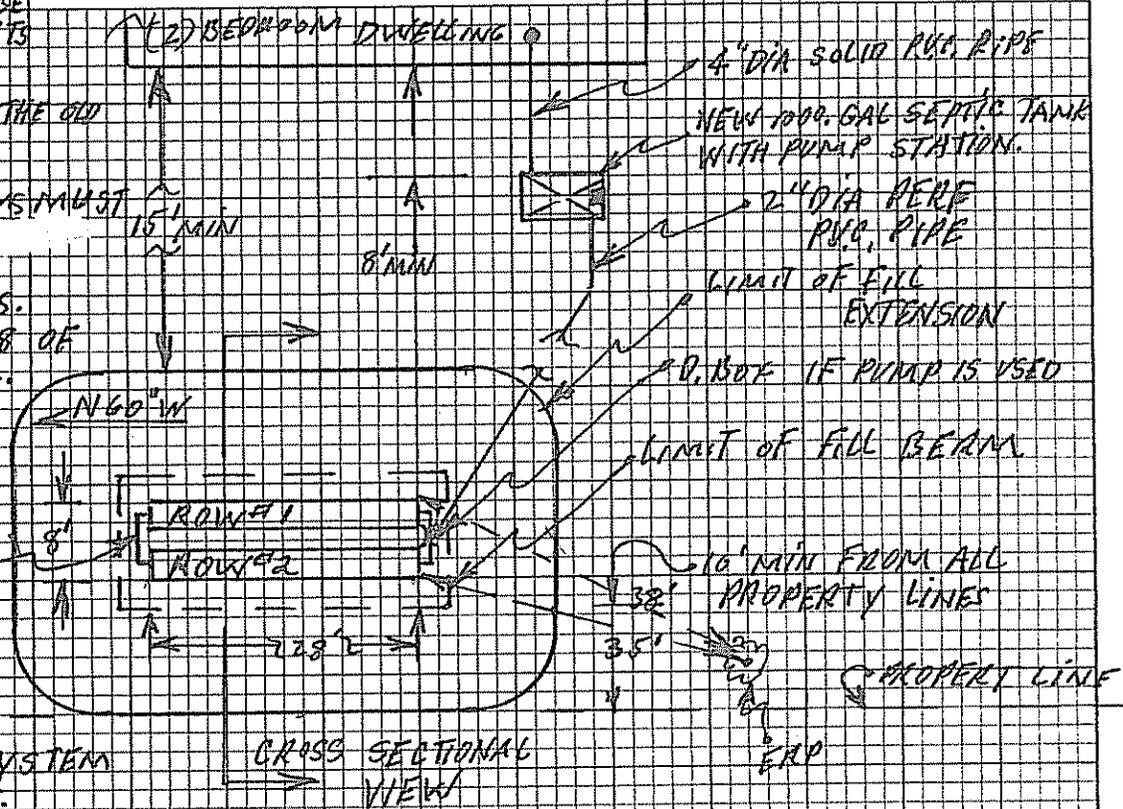
Owner's Name

QUIRION LIONEL

SUBSURFACE WASTEWATER DISPOSAL PLAN

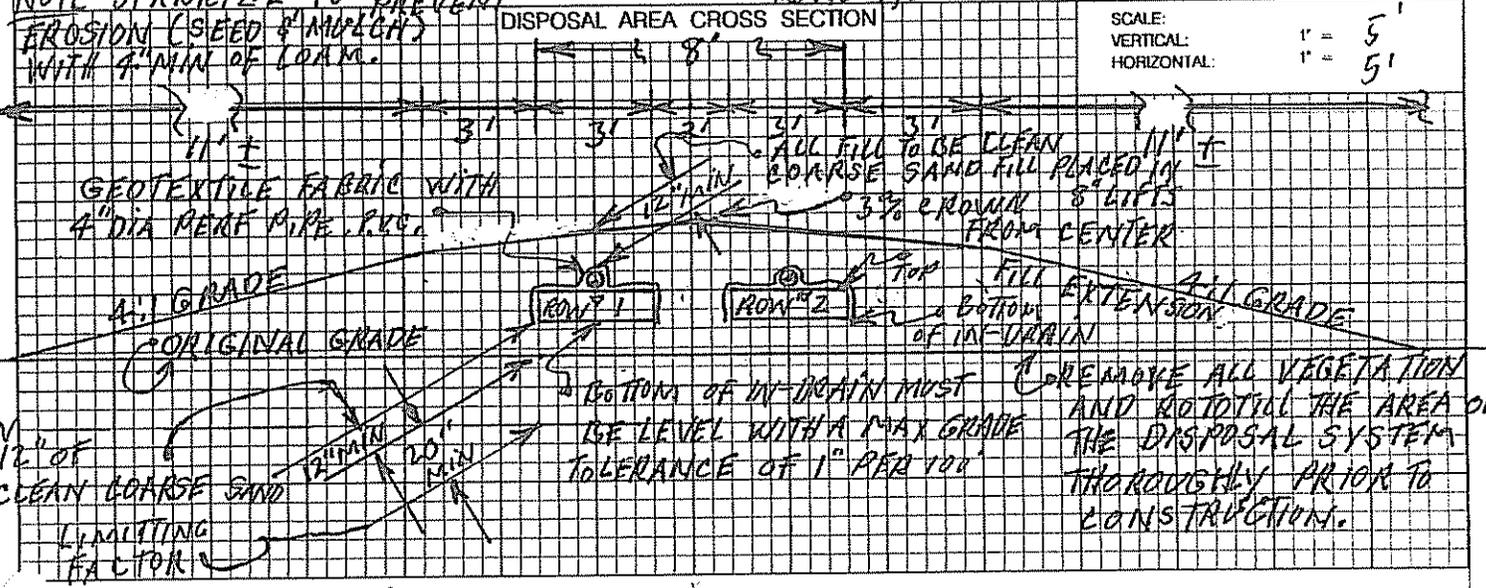
SCALE 1" = 20 FT.

- NOTE: ALL WELLS MUST BE 100' FROM ALL PARTS OF THIS SYSTEM.
- REMOVE ALL PARTS OF THE OLD DISPOSAL SYSTEM.
 - ALL IN-DRAIN SYSTEMS MUST BE INSTALLED TO MANUFACTURER'S SPECIFICATIONS.
 - ALL FILL PER SEC 1178 OF INSTALLATION MANUAL.



NOTE: THIS IN-DRAIN SYSTEM WILL USE (14) UNITS.

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	36" ±	Finished Grade Elevation		Location & Description	THE ERP IS A NAIL IN A TREE SOUTHEAST OF BED
Depth of Fill (Downslope)	36" ±	Top of Distribution Pipe or Proprietary Device	-24	Reference Elevation	-0-
NOTE STABILIZE TO PREVENT EROSION (SEED & MULCH) WITH A MIN OF LOAM.		Bottom of Disposal Area	ROWS #1,2 = -31		



Site Evaluator Signature: *Stephen C. Smith* 253 9-28-02 Date

Page 3 of 3
HHE-200 Rev. 7/97



STATE OF MAINE
 DEPARTMENT OF HUMAN SERVICES
 DIVISION OF HEALTH ENGINEERING
 11 STATE HOUSE STATION
 AUGUSTA, MAINE

04333-0011

ANGUS S. KING, JR.
 GOVERNOR

KEVIN W. CONCANNON
 COMMISSIONER

October 18, 2002

Lionel Quirion
 C/o George Soucy
 16 Cony Street City Center
 Augusta ME 04330

Subject: Approval, Replacement System Variance Request, Quirion property, Togus Pond Road, Augusta

Dear Mr. Quirion:

The Division has reviewed a Replacement System Variance Request for the subject property. The proposal is to install a replacement subsurface wastewater disposal system serving a seasonal two-bedroom single-family dwelling. The state variances requested are to allow the installation of the system with a reduction in the setback distance from a major watercourse to the disposal field of 25 feet, septic tank of 35 feet. Another variance required is a setback distance reduction from a structure without a full basement to the disposal field of 10 feet, septic tank of five feet. The system design, prepared by Stephen Smith, SE, dated August 20, 2002, is found to be in compliance with the Maine Subsurface Wastewater Disposal Rules (Rules).

It was brought to my attention today that I had misread the application, missed a property line notation, and applied the information pertaining to a holding tank and no water supply on an abutting property to the subject lot. This misapplication of information lead to denial of the variance request. I apologize for this critical error and issue this letter as correction. Your property is currently served with pressurized water from the lake and a subsurface wastewater disposal system. The variances requested for the replacement system are in compliance with the Rules and, therefore, are approved with the following requirements:

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 be required at the time of system installation, the system designer must be notified prior to making any changes.

The variance approval is based only on the rules administered by this department. The approval of the variance request does not relieve the property owner from compliance with all other state and local requirements pertaining to the installation, use, and operation of the wastewater disposal system.

By accepting this approval and the associated plumbing permit, the owner agrees to comply fully with the conditions of approval and the Subsurface Wastewater Disposal 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. It shall be noted that due to the lot size and site constraints, should this system fail you may have no alternative but to install a holding tank.

Should you or others have any questions regarding this review and/or approval, please feel free to contact me at 287-5687.

Sincerely,

Linda Robinson, Environmental Specialist II
 Wastewater and Plumbing Control Program
 Division of Health Engineering
 E-mail: linda.robinson@state.me.us

/lsr
 xc:

File
 George Soucy, LPI
 Stephen Smith, SE



PRINTED ON RECYCLED PAPER

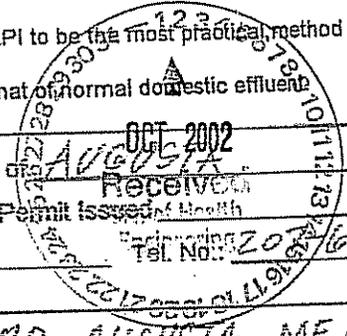
REPLACEMENT SYSTEM VARIANCE REQUEST

FORMS

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. 1903)
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 <u>Augusta</u>
Permit No. _____	Date Permit Issued <u>10/2/02</u>
Property Owner's Name: <u>LIONEL DOURION</u>	Tel. No. <u>207-622-6887</u>
System's Location: <u>Rt 105 TOBUS POND RD</u>	
Property Owner's Address: <u>32 HEDGE NETTLE RD, AUGUSTA, ME 04330</u>	
(if different from above)	

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.

Lionel Dourion
SIGNATURE OF OWNER

10/2/02
DATE

LOCAL PLUMBING INSPECTOR

I, George A. King Jr., 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. (I approve, I 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 (I recommend, I do not recommend) the Department's approval of the variances. Note: If the LPI does not recommend the Department's approval, she shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: _____

George A. King Jr.
LPI SIGNATURE

10/2/02
DATE

HHE-204 Rev 3/97



STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
DIVISION OF HEALTH ENGINEERING
11 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0011

ANGUS S. KING, JR.
GOVERNOR

KEVIN W. CONCANNON
COMMISSIONER

October 17, 2002

Lionel Quirion
C/o George Soucy
16 Cony Street City Center
Augusta ME 04330

Subject: Denial, Replacement System Variance Request, Quirion property, Togus Pond Road, Augusta

Dear Mr. Quirion:

The Division has reviewed a Replacement System Variance Request for the subject property. The proposal is to install a subsurface wastewater disposal system to replace an existing holding tank serving a seasonal two-bedroom single-family dwelling. The state variances requested are to allow the installation of the system with a reduction in the setback distance from a major watercourse to the disposal field of 25 feet, septic tank of 35 feet. Another variance required is a setback distance reduction from a structure without a full basement to the disposal field of 10 feet, septic tank of five feet. The system design, prepared by Stephen Smith, SE, dated August 20, 2002, is not in compliance with the Maine Subsurface Wastewater Disposal Rules (Rules).

Specifically, the application indicates the property has an existing dwelling that is to be replaced with a new dwelling in a new location on the lot. Also indicated on the application is the fact that there is currently no well on the lot and the dwelling utilizes a holding tank for wastewater disposal. The proposal to drill a well on the lot and introduce pressurized water to the property constitutes a major expansion requiring First Time System criteria (Rules Sections 1702.3 and 1704.0). Also, replacing a holding tank with a subsurface wastewater disposal system, when the holding tank was the first system serving the structure, requires First Time System criteria (Rules Section 2000.3.11).

Based upon the findings stated above, the Division does not approve the requested variances. Your options are to continue with the holding tank or explore options for locating a subsurface wastewater disposal system meeting First Time System Criteria on the subject property or off-site.

Any party aggrieved by this decision may request a Formal Conference, pursuant to provisions and requirements of Section 2102.1 of the Rules. A copy of the rule section is enclosed.

Should you or others have any questions regarding this review and/or denial, feel free to contact me at 287-5687.

Sincerely,

Linda S. Robinson, Environmental Specialist II
Wastewater & Plumbing Control Program
Division of Health Engineering
E-mail: linda.robinson@state.me.us

/lsr
Enclosed: Rules Chapters 17 & 21
cc: Lionel Quirion, Property Owner
Stephen Smith, SE



PRINTED ON RECYCLED PAPER

REPLACEMENT SYSTEM VARIANCE REQUEST

FORMS

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. 1903)
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

Permit No. _____

Property Owner's Name: LIONEL BOIRION

System's Location: At (105) TOBUS POND RD

Property Owner's Address: 32 HEDGE NETTLE RD, AUGUSTA, ME 04330

(if different from above) _____

Town of AUGUSTA
Date Permit Issued OCT 2002

Tel. No: 207-622-6888

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.

Lionel Boirion
SIGNATURE OF OWNER

Sept 30 2002
DATE

LOCAL PLUMBING INSPECTOR

I, George A. Burt, 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. (I approve, I 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, she shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

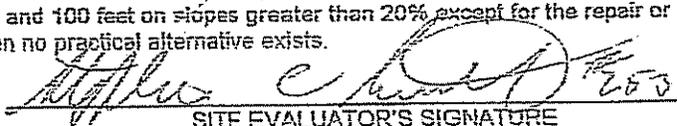
Comments: _____

George A. Burt
LPI SIGNATURE

10/2/02
DATE

HHE-204 Rev 3/97

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
	Disposal Fields			Septic Tanks			Disposal Fields	Septic Tanks
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)								
From	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	To	To
Wells with water usage of 2000 or more gpd or public water supply wells	300 ^a ft	300 ^a ft	300 ^a ft	100 ^b ft	100 ^b ft	100 ^b ft	—	—
Owner's wells	100 down to 50 ft	200 down to 100 ft	300 down to 150 ft	100 ^b down to 50 ft	100 down to 50 ft	100 down to 50 ft	—	—
Neighbor's wells	100 ^b down to 60 ft	200 ^b down to 120 ft	300 ^b down to 180 ft	100 ^b down to 50 ft	100 ^b down to 75 ft	100 ^b down to 75 ft	—	—
Water supply line	10 ft ^d	20 ft ^d	25 ft ^d	10 ft ^d	10 ft ^d	10 ft ^d	—	—
Water course, major - for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft	200 down to 120 ft	300 down to 150 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	25'	35'
Water course, minor	50 down to 25 ft	100 down to 50 ft	150 down to 75 ft	50 down to 25 ft	50 down to 25 ft	50 down to 25 ft	—	—
Drainage ditches	25 down to 12 ft	50 down to 25 ft	75 down to 35 ft	25 down to 12 ft	25 down to 12 ft	25 down to 12 ft	—	—
Edge of fill extension - Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams	25 ft ^d	25 ft ^d	25 ft ^d	25 ft ^d	25 ft ^d	25 ft ^d	—	—
Slopes greater than 3:1	10 ft	18 ft	25 ft	N/A	N/A	N/A	—	—
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	40 down to 20 ft	8 down to 5 ft	14 down to 7 ft	20 down to 10 ft	10'	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 ^c ft	18 down to 9 ^c ft	20 down to 10 ^c ft	10 down to 4 ^c ft	15 down to 7 ^c ft	20 down to 10 ^c ft	—	—
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 shall be to 5 ft A MAJOR WATER COURSE REDUCED TO 25' (STATE VARIANCE)								
2. for the adjacent lake & 35' SEPTIC TANK								
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 (200 ft for 1000-2000 gpd or 300 ft. for over 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.								
 SITE EVALUATOR'S SIGNATURE						8-20-02 DATE		
FOR USE BY THE DEPARTMENT ONLY								
The Department has reviewed the variance(s) and () does <input checked="" type="checkbox"/> 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						10-17-02 DATE		