called 7/24 2:00 MA
7/25 8:55 left msg

FORMS

95.00

REPLACEMENT SYSTEM VARIANCE REQUEST

town copy

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. 6189

Date Permit Issued 7/24/08

Property Owner's Name: ROBIN DOBBINS

Tel. No.:

System's Location: RT. 105, TOGUS POND (1157 So. Bel Ave.)

Property Owner's Address: 1051 TASKER RD.

(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 OF OWNER

7-23-08
DATE

LOCAL PLUMBING INSPECTOR

I, Wayne R. Tuttle, 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:

LPI SIGNATURE

7/24/08
DATE

HHE-204 Rev 10/02

FORMS

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
S[illegible]ofile 3	Ground Water Table			to 7"				inches
S[illegible]ondition C	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 supply wells	300 ft [a]	300 ft [a]	300 ft [a]	100 ft [a]	100 ft [a]	100 ft [a]		
Owner's wells	100 down to 60 ft	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	60'	
Neighbor's wells	100 down to 60 ft [b]	200 down to 120 ft [b]	300 down to 180 ft [b]	100 down to 50 ft [b]	100 down to 75 ft [b]	100 down to 75 ft [b]		
Water supply line	10 ft [a]	20 ft [a]	25 ft [a]	10 ft [a]	10 ft [a]	10 ft [a]		
Water course, major - for replacements only, see Table 400.4 for major expansions	100 down to 60 ft	200 down to 120 ft	300 down to 180 ft	100 down to 50 ft	100 down to 50 ft	100 down to 50 ft	60'	
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		
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		
Pr[illegible]y 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]	5'	
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

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 1402.10 for special procedures when these minimum setbacks cannot be achieved.

SITE EVALUATOR'S SIGNATURE — DATE: 6/16/08

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 Dept. Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

City, Town, or Plantation	AUGUSTA
Street or Road	RT # 105 Nr. Belfast Ave
Subdivision, Lot #	TOGUS PO.

AUGUSTA PERMIT # 6189 TOWN COPY

Date Permit Issued: 7/24/08 $ 195.00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 560

OWNER/APPLICANT INFORMATION

Name (last, first, MI): DOBBINS, ROBIN ☐ Owner ☑ Applicant

Mailing Address of Owner/Applicant	1051 TASKER RD. AUGUSTA, ME. 04330
Daytime Tel. #	621-2684

Municipal Tax Map # 65 Lot # 4 LR

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 — Date 7-23-08

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 8/18/08 — (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☐ 1. First Time System
- ☑ 2. Replacement System
  - Type replaced: ?
  - Year installed: ?
- ☐ 3. Expanded System
  - ☐ a. Minor Expansion
  - ☐ b. Major Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES

- ☐ 1. No Rule Variance
- ☐ 2. First Time System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☑ 3. Replacement System Variance
  - ☑ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☐ 4. Minimum Lot Size Variance
- ☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

- ☐ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify: ____
- ☐ 4. Non-engineered Treatment Tank (only)
- ☐ 5. Holding Tank, ____ gallons
- ☑ 6. Non-engineered Disposal Field (only)
- ☐ 7. Separated Laundry System
- ☐ 8. Complete Engineered System (2000 gpd or more)
- ☐ 9. Engineered Treatment Tank (only)
- ☐ 10. Engineered Disposal Field (only)
- ☐ 11. Pre-treatment, specify: ____
- ☐ 12. Miscellaneous Components

SIZE OF PROPERTY

1/2 ± ☐ SQ. FT. ☑ ACRES

DISPOSAL SYSTEM TO SERVE

- ☐ 1. Single Family Dwelling Unit, No. of Bedrooms: ____
- ☑ 2. Multiple Family Dwelling, No. of Units: 4
- ☐ 3. Other: ____ (specify)

Current Use ☐ Seasonal ☑ Year Round ☐ Undeveloped

SHORELAND ZONING

☑ Yes ☐ No

TYPE OF WATER SUPPLY

☑ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☑ 1. Concrete
  - ☑ a. Regular — EXISTING
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: ____

CAPACITY: 1,000 GAL.

DISPOSAL FIELD TYPE & SIZE

- ☐ 1. Stone Bed ☐ 2. Stone Trench
- ☑ 3. Proprietary Device
  - ☑ a. cluster array ☐ c. Linear
  - ☑ b. regular load ☐ d. H-20 load
- ☐ 4. Other: ____

SIZE: 672 ☑ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

☑ 1. No ☐ 2. Yes ☐ 3. Maybe

If Yes or Maybe, specify one below:

- ☐ a. multi-compartment tank
- ☐ b. ____ tanks in series
- ☐ c. increase in tank capacity
- ☐ d. Filter on Tank Outlet

DESIGN FLOW

360 gallons per day

BASED ON:

- ☑ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS for other facilities.

☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	C	1

at Observation Hole # 1

Depth 22"

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- ☐ 1. Small—2.0 sq. ft. / gpd
- ☐ 2. Medium—2.6 sq. ft. / gpd
- ☑ 3. Medium—Large 3.3 sq. ft. / gpd
- ☐ 4. Large—4.1 sq. ft. / gpd
- ☐ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ☐ 1. Not Required
- ☐ 2. May Be Required
- ☑ 3. Required

Specify only for engineered systems:

DOSE: ____ gallons

LATITUDE AND LONGITUDE

at center of disposal area

Lat. 44 d 18 m 902 s

Lon. 69 d 39 m 330 s

If g.p.s. state margin of error: 22'

SITE EVALUATOR STATEMENT

I certify that on 6/12/08 (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 — SE # 256 — Date 6/16/08

Site Evaluator Name Printed: JOHN PHILBRICK — Telephone Number: 547-3732 — E-mail Address: ____

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

01040604

City, Plantation: AUGUSTA

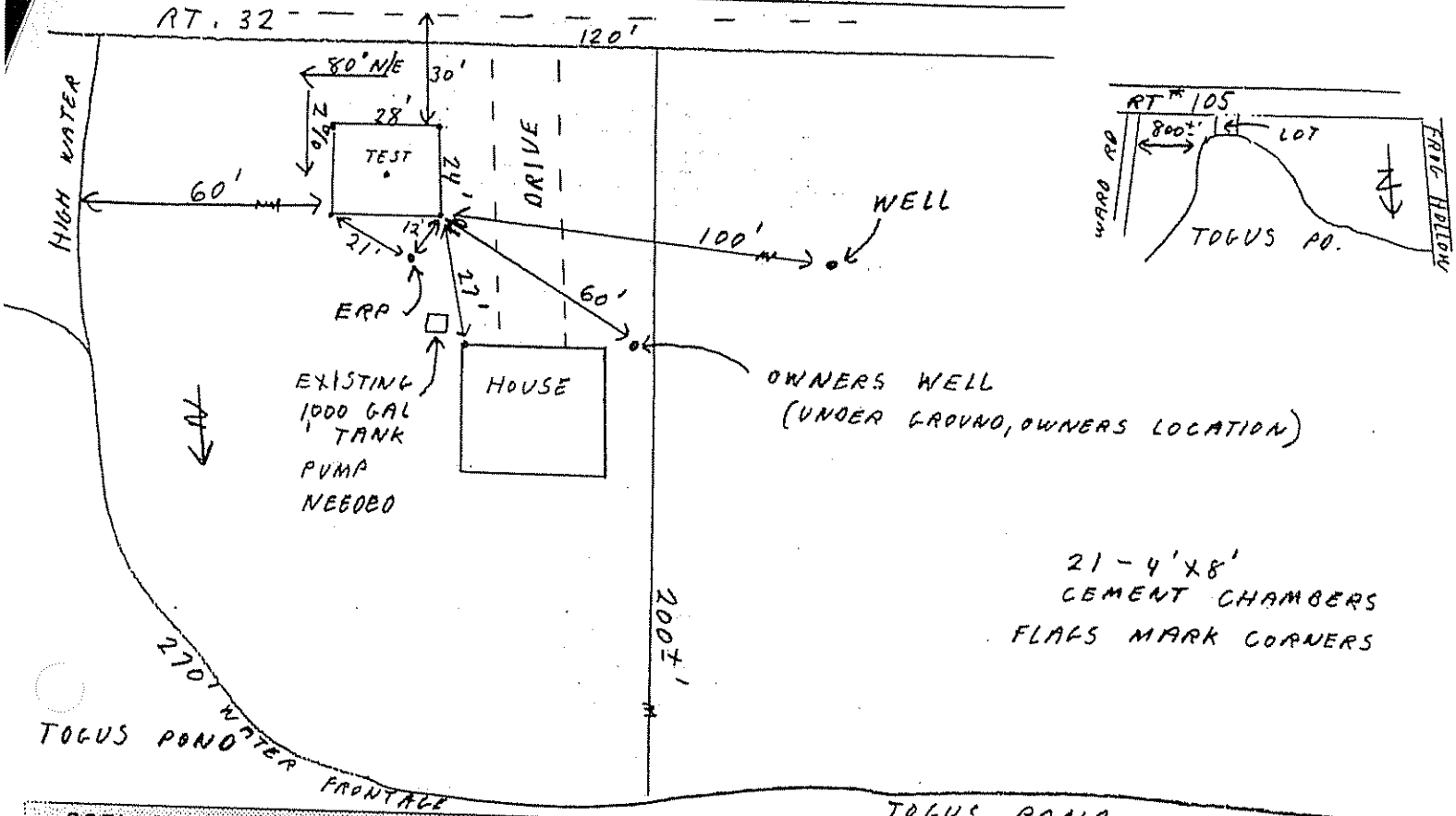
Street, Road, Subdivision: RT. # 105

Owner's Name: ROBIN DOBBINS

SITE PLAN

Scale: 1" = 50 Ft. or as shown

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole 1 — ☑ Test Pit ☐ Boring

0" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–6	SANDY LOAM	FRIABLE	D-BR.	NONE
6–10	LOAMY		YELLOW	
10–15	SAND		BR.	
15–20				
20–30	FINE LOAMY	FIRM	GRAY	COMMON
30–40	SAND			DISTINCT
40–50				

Depth Below Mineral Surface

Soil Profile	Classification Condition	Slope	Limiting Factor	
3	C	2 %	22	☑ Ground Water ☑ Restr. Layer ☐ Bedrock

Observation Hole _____ — ☐ Test Pit ☐ Boring

_____" Depth of Organic Horizon Above Mineral Soil

Inches	Texture	Consistency	Color	Mottling
0–6				
6–10				
10–15				
15–20				
20–30				
30–40				
40–50				

Depth Below Mineral Surface

Soil Profile	Classification Condition	Slope	Limiting Factor	
		%		Ground Water Restr. Layer Bedrock

Site Evaluator Signature

256
SE#

6/16/08
Date

Approved for use as HHE 200 by Division of Health Engineering 9/87

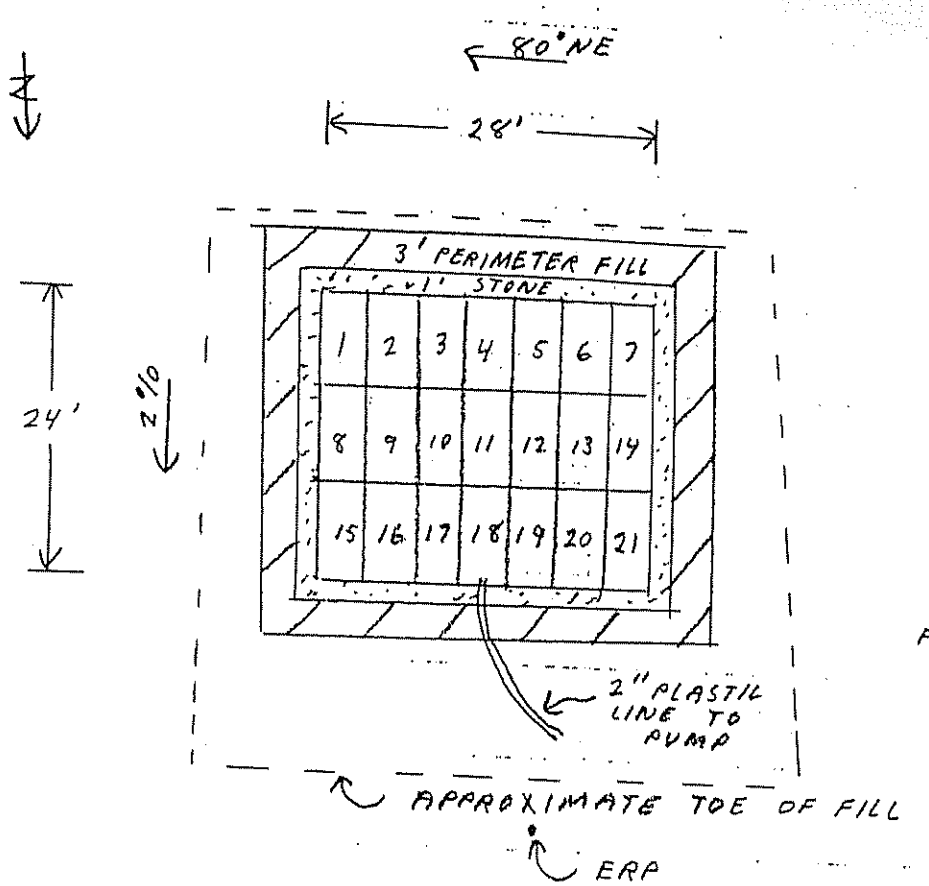
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	RT # 105	ROBIN DOBBINS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 16 ft.



21 - 4'x8' CEMENT CHAMBERS FLAGS MARK CORNERS

BACKFILL REQUIREMENTS

Depth of Backfill (upslope) 15"
Depth of Backfill (downslope) 21"
DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

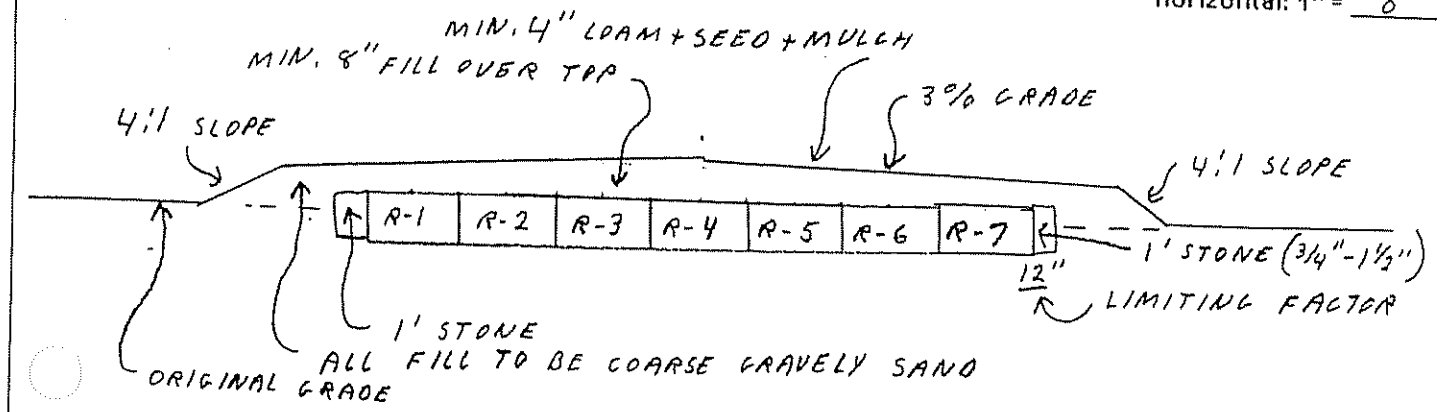
Finished Grade Elevation -27"
Top of Distribution Pipe or Proprietary Device -39"
Bottom of Disposal Field -52"

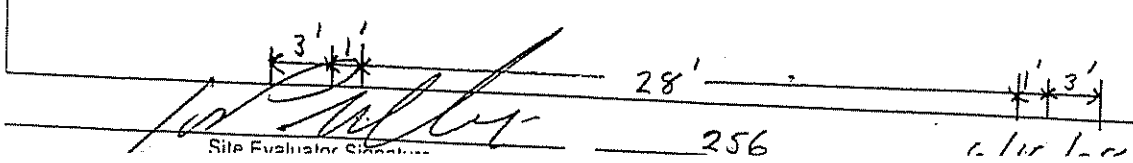
ELEVATION REFERENCE POINT

Location & Description: ERP IS IN 2' W. BIRTCH, 9' NORTH OF SYSTEM,
Reference Elevation is: 0.0" or: 56" ABOVE GROUND

DISPOSAL FIELD CROSS-SECTION

Scales:
Vertical: 1" = 4 ft.
Horizontal: 1" = 8 ft.





Site Evaluator Signature 256

Property Location: 1157 SOUTH BELFAST AVENUE *MAP ID:* 65/ 4/ / / *Bldg Name:* *State Use:* 1040

Vision ID: 9386 *Account #* 20701 *Bldg #:* 1 of 1 *Sec #:* 1 *of* 1 *Card* 1 *of* 1 *Print Date:* 07/24/2008 11:40

CONSTRUCTION DETAIL

Element	Cd.	Ch.	Description
Style	11		Family Conver.
Model	01		Residential
Grade	02		Below Average
Stories	2		2 Stories
Occupancy	2		
Exterior Wall 1	14		Wood Shingle
Exterior Wall 2			
Roof Structure	03		Gable/Hip
Roof Cover	03		Asph/F Gls/Cmp
Interior Wall 1	05		Drywall/Sheet
Interior Wall 2			
Interior Flr 1	14		Carpet
Interior Flr 2	12		Hardwood
Heat Fuel	02		Oil
Heat Type	03		FHA-no Duc/Mon
AC Type	01		None
Total Bedrooms	05		5 Bedrooms
Total Bthrms	2		
Total Half Baths	0		
Total Xtra Fixtrs			
Total Rooms			
Bath Style			
Kitchen Style			

CONSTRUCTION DETAIL (CONTINUED)

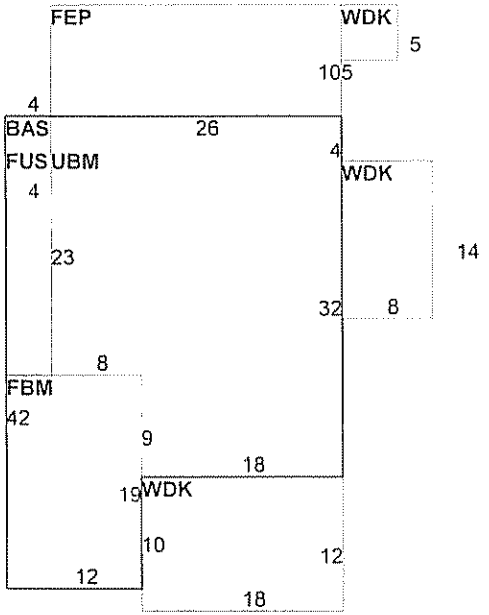
Element	Cd.	Ch.	Description

MIXED USE

Code	Description	Percentage
104R	TWO FAMILY MDL-01	100

COST/MARKET VALUATION

Adj. Base Rate:	49.30
Section. RCN:	130,650
Net Other Adj:	0.00
Replace Cost	130,650
AYB	1944
EYB	1971
Dep Code	A
Remodel Rating	
Year Remodeled	
Dep %	35
Functional Obsinc	10
External Obsinc	5
Cost Trend Factor	1
Condition	
% Complete	
Overall % Cond	50
Apprais Val	65,300
Dep % Ovr	0
Dep Ovr Comment	
Misc Imp Ovr	0
Misc Imp Ovr Comment	
Cost to Cure Ovr	0
Cost to Cure Ovr Comment	



OB-OUTBUILDING & YARD ITEMS(L) / XF-BUILDING EXTRA FEATURES(B)

Code	Description	Sub	Sub Descript	L/B	Units	Unit Price	Yr	Gde	Dp Rt	Cnd	%Cnd	Apr Value
FPL3	2 STORY CHI			B	1	3,000.00	1971		1		100	1,500

BUILDING SUB-AREA SUMMARY SECTION

Code	Description	Living Area	Gross Area	Eff. Area	Unit Cost	Undeprec. Value
BAS	First Floor	1,080	1,080	1,080	49.30	53,246
FBM	Basement, Finished	0	228	103	22.27	5,078
FEP	Porch, Enclosed, Finished	0	260	182	34.51	8,973
FUS	Upper Story, Finished	1,080	1,080	1,080	49.30	53,246
UBM	Basement, Unfinished	0	760	152	9.86	7,494
WDK	Deck, Wood	0	353	53	7.40	2,613
	Ttl. Gross Liv/Lease Area:	2,160	3,761	2,650		130,650