

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
 Division of Environmental Health, 11 SHS
 (207) 287-5672 FAX (207) 287-4172

PROPERTY LOCATION

>> CAUTION: LPI APPROVAL REQUIRED <<

City, Town, or Plantation: AUGUSTA
 Street or Road: 15 HAYS LANDING ROAD
 Subdivision, Lot #:

AUGUSTA PERMIT #6789
 Date Permit Issued: 5/15/13
 TOWN COPY \$ 150.00 fee
 LPI # 850
 Signature: Nancy R. Fuller

OWNER/APPLICANT INFORMATION

Name (last, first, MI): TROCCOLI ROBERT & JANE
 Owner Applicant
 Mailing Address of: C/O DAVID MORIN 18 NORTH STREET AUGUSTA, ME. 04330
 Owner Applicant
 Daytime Tel. #: (207) 242-6475

Municipal Tax Map # 87 Lot # 8

OWNER OR APPLICANT STATEMENT

CAUTION: INSPECTION REQUIRED

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.

I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.

Signature of Owner or Applicant: [Signature] Date: 5/15/13

Local Plumbing Inspector Signature: [Signature] (1st Date Approved) 5/21/13
 (2nd Date Approved)

PERMIT INFORMATION

TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type Replaced: <u>TRENCH</u> Year Installed: <u>UNKNOWN</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. < 25% Expansion <input type="checkbox"/> b. ≥ 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion SIZE OF PROPERTY _____ sq. ft. <u>1/2</u> acres SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	THIS APPLICATION REQUIRES <input type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input checked="" type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>2</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____ Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	DISPOSAL SYSTEM COMPONENT(S) <input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & aff. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input checked="" type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
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DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input type="checkbox"/> 1. Concrete <input type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input checked="" type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: <u>Existing</u> CAPACITY <u>1000</u> gallons	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <u>18 STANDARD (LOW PROFILE) BIO-DIFFUSERS</u> <input checked="" type="checkbox"/> a. Cluster Array <input type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE <u>324</u> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input checked="" type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW <u>180</u> gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities <input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat. <u>44° 10' 00" N</u> Lon. <u>69° 30' 00" W</u> if g.p.s., state margin of error: <u>18"</u>
SOIL DATA & DESIGN CLASS PROFILE CONDITION <u>31C</u> at Observation Hole # <u>TP</u> Depth <u>15"</u> OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May be Required <input checked="" type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	

SITE EVALUATOR STATEMENT

I certify that on 4/30/13 (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#: 132 Date: 5/11/13
 TERRY ADAMS (207) 512-5125 terryadams@maine.com

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health and Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-4172

Plantation
OSTA

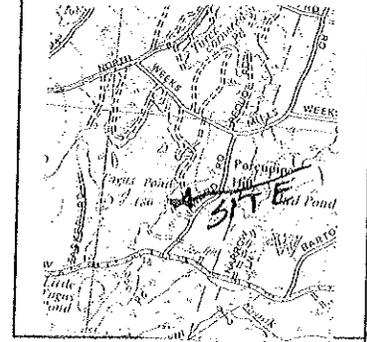
Street, Road, Subdivision
15 HAYS LANDING ROAD

Owner or Applicant Name
ROBERT & JANE TROCCOLI

SITE PLAN

Scale 1" = 40 ± Ft.

SITE LOCATION PLAN



(SEE ATTACHED SITE PLAN)

NOTE: SEE "NOTES FROM THE SITE EVALUATOR"

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole # TP Test Pit Boring
0 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SANDY		BROWN	NONE
		YELLOW	EVIDENT
LOAM	FRIABLE	BROWN	EVIDENT
		LIGHT BROWN	EVIDENT
	VERY FIRM	(DEPTH OBSERVED)	

Soil Profile	Classification Condition	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
<u>3</u>	<u>C</u>	<u>1-9%</u>	<u>15"</u> Depth	

Observation Hole # _____ Test Pit Boring
 _____ " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
(Empty grid with diagonal line)			

Soil 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
		%	" Depth	

Tom Colman
Site Evaluator's Signature

132
S. E. #

5/11/13
Date

SURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health and Human Services
Division of Environmental Health, 11 SHG
(207) 287-5872 FAX (207) 287-4172

City, Plantation

Street, Road, Subdivision

Owner or Applicant Name

AUGUSTA

15 HAYS LANDING ROAD

ROBERT & JANE TROCCOLI

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20' ± FT.

PROPOSED 18 STANDARD (LOW PROFILE) BIO-DIFFUSERS
2 ROWS OF 5 AND 2 ROWS OF 4 IN CLUSTER
WITH EQUAL DISTRIBUTION.

DISTRIBUTION BOX, PROTECT FROM FREEZING.

2" PUMP LINE, PROTECT FROM FREEZING AND CRUSHING.

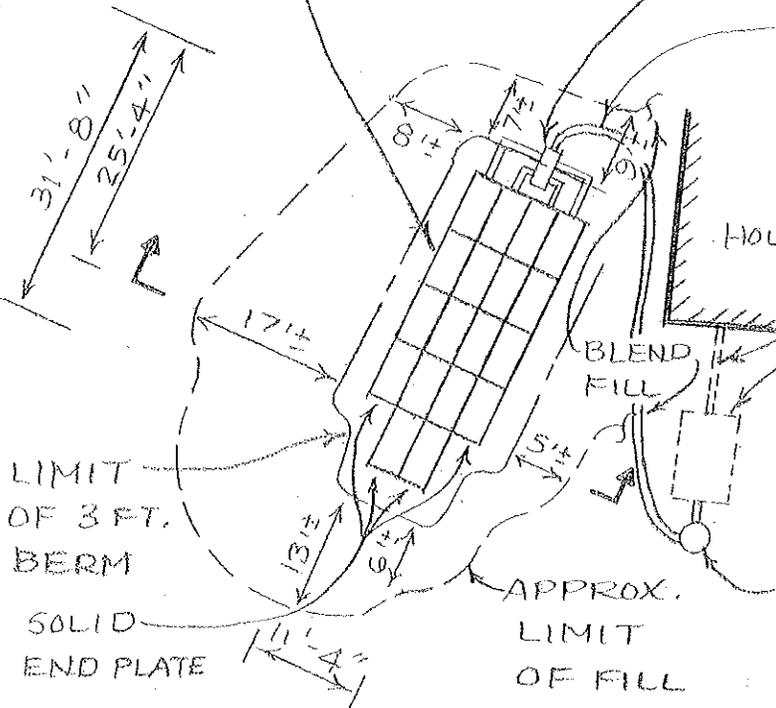
NOTE: REMOVE LARGE BOULDERS FROM AREA OF SYSTEM AND FILL ANY PITS WITH CLEAN LOAMY SAND.

HOUSE

APPROX. BUILDING SEWER

EXISTING SEPTIC TANK, REPLACE WITH PROPOSED 1000 GAL SEPTIC TANK WITH OUTLET FILTER AND RISERS TO FINISH GRADE.

PROPOSED PUMP TANK WITH RISERS TO FINISH GRADE, PROTECT FROM FREEZING.



FILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	SYSTEM:	PRIVY:	ELEVATION REFERENCE POINT
Depth of Backfill (Upslope) <u>20"-25"±</u>	Finished Grade Elevation <u>-20"</u>			Location & Description <u>(BM) NAIL</u>
Depth of Backfill (Downslope) <u>24"-33"±</u>	Top of Distribution Pipe or Proprietary Device <u>-32"</u>		<u>N/A</u>	<u>3'-4" ABOVE GROUND IN A</u>
Depths @ cross-section shown below or on X-sec. detail.	Bottom of Disposal Field <u>-43"</u>			<u>LARGE OAK,</u> Reference Elevation is: <u>0"</u>

DISPOSAL AREA CROSS SECTION

(SEE ATTACHED CROSS SECTION A - A)

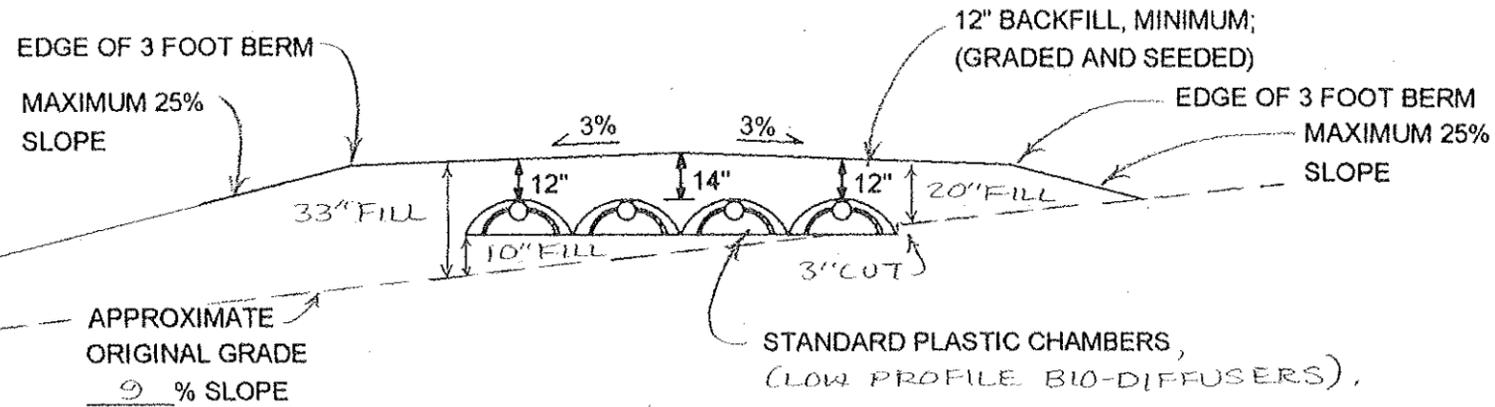
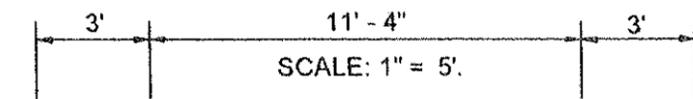
Site Evaluator's Signature

S.E. #

Date

PLASTIC CHAMBER CROSS SECTION
SECTION A - A

NOTE: GRADE UP
DIVERGENT SURFACE WAY
AWAY FROM SYSTEM AND
HOUSE.



FINISHED GRADE: -20"
TOP OF PLASTIC CHAMBERS: -32"
BOTTOM OF PLASTIC CHAMBERS: -43"

OWNER: ROBERT & JANE TROCCOLI
LOCATION: AUGUSTA

Terry Adams
TERRY ADAMS

137
S.E.#

5/11/13
DATE

NOTES FROM THE SITE EVALUATOR

1. Systems shall be installed in accordance with the State of Maine Subsurface Wastewater Disposal Rules.
2. Remove vegetation from the proposed disposal area and scarify original ground before placing fill.
3. Backfill shall be clean, gravely coarse sand. See section 11-E.2 of the Maine Subsurface Waste Water Disposal rules. Manufactures of some proprietary disposal devices have more restrictive standards and those standards should be adhered to.
4. All stone shall be uniform size and free of fines and comply with section 11-F.2 of the Maine Subsurface Waste Water Disposal Rules.
5. Site shall be graded in a manner, which will divert surface water from the bed.
6. Grass, clover, trefoil, vetch, perennial wild flowers or other herbaceous perennials may be planted on disposal area surfaces. Woody shrubs in conjunction with a hardy perennial ground cover may only be used on fill extensions.
7. If this application includes a new system variance request, it is assumed that this site is not part of a proposed subdivision.
8. Wetlands -- Work in and adjacent to wetlands and other natural resource protected areas must comply with Section 11, M of the Subsurface Wastewater Disposal Rules.
9. If a system requires a pump, it shall be vented in accordance with standard practice. It is recommended that the required audible high water alarm be installed on the premises on a different electrical circuit from the pump.
10. Install Septic Tank Risers 18" in diameter (Minimum) to within 6" of finish grade on inlet, cleanout and outlet covers. Risers shall be installed to finish grade over pump chambers to allow pump removal.
11. As a general rule, a septic tank should be cleaned every two years. It is recommended that no commercial septic tank additives be used.
12. Unless otherwise stated this design does not provide for the use of a garbage disposal. If one is to be added, contact the site evaluator in order that they may alter the design to accommodate the change.
13. This site evaluation and design has been done in compliance with the Maine State Plumbing Code. The approval and/or design may be subject to more restrictive local ordinances. The Local Plumbing Inspector is to be contacted for final review approval.
14. By signature on this application, the client agrees with the location of lot lines, wells and other physical features shown and further agrees to limit the liability of the site evaluator to the original cost of installation of the system or the total fee for services rendered on this project, whichever is greater.
15. This site evaluation and septic design has been done for the owner or applicant shown on page 1 and for the structure as described to the site evaluator. Any change in ownership, house location or other data shown on the HHE 200 form will make this design null and void.



Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services

Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION	Town of <u>AUGUSTA</u>
Property Owner's Name: <u>ROBERT & JANE TROCCOLI</u>	Tel. No.: <u>(207) 242-6475</u>
System's Location: <u>15 HAYS LANDING ROAD</u>	
Property Owner's Address: <u>18 NORTH STREET - AUGUSTA, ME.</u>	Zip Code <u>04330</u>
e-mail address: _____	

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)	SECTION OF RULE
1. TO PLACE A DISPOSAL FIELD 9 FEET FROM A _____	_____
2. PROPERTY LINE, 9 FEET FROM THE HOUSE AND _____	_____
3. 35' FROM THE MAJOR WATER BODY. _____	_____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.

THE PROPOSED SYSTEM IS IN THE SAME LOCATION AS THE EXISTING SYSTEM.

I, TERRY ADAMS, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available, enhances the potential of the site for subsurface wastewater disposal, and that the system should function properly.

Terry Adams SIGNATURE OF SITE EVALUATOR 5/11/13 DATE

PROPERTY OWNER

I, Robert Troccoli, am the owner agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with 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] SIGNATURE OF OWNER _____ DATE
 AGENT FOR THE OWNER

AUGUSTA

15 HAYS LANDING ROAD

ROBERT & JANE TROCCOLI

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all variance requests prior to rendering a decision.

I, Gary P. Fenton, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) approve the requested variance. I (will will not) issue a permit for the system's installation as proposed by the application.

Gary P. Fenton
LPI Signature

5/15/13
Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all variance requests prior to forwarding to the Division of Environmental Health.

I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) recommend the issuance of a permit for the system's installation as proposed by the application.

LPI 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

Notes: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)

2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Distance		
Additional Treatment		
TOTAL POINT ASSESSMENT:		

Minimum Points (Check One): Outside Shoreland Zone-50 Inside Shoreland Zone-65 Subdivision-65