

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

09134324

PROPERTY ADDRESS

Town Or Plantation: AUGUSTA

Street: 23 Woodland Rd
TOUGUS, MD.

vision Lot #

PROPERTY OWNER'S NAME

Last: AUSTIN First: ANTHONY

Applicant Name: SAME

Mailing Address of Owner/Applicant (If Different): RT. # 1 BOX 2843
WINDSOR, MD. 04363

CAUTION: PERMIT # 3075 RECD TOWN COPY

Date Permit Issued: 9/26/94 \$ 60.00 FEE Double Fee Charged

L.P.I. # 1008

Local Plumbing Inspector Signature: [Signature]

OWNER/APPLICANT STATEMENT

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

[Signature]
Signature of Owner/Applicant Date

CAUTION: INSPECTION REQUIRED

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

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

<p>THIS APPLICATION IS FOR:</p> <p>1. <input type="checkbox"/> NEW SYSTEM</p> <p>2. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM</p> <p>3. <input type="checkbox"/> EXPANDED SYSTEM</p> <p>4. <input type="checkbox"/> EXPERIMENTAL SYSTEM</p> <p>SEASONAL CONVERSION to be completed by the LPI</p> <p>5. <input type="checkbox"/> SYSTEM COMPLIES WITH RULES</p> <p>6. <input type="checkbox"/> CONNECTED TO SANITARY SEWER</p> <p>7. <input type="checkbox"/> SYSTEM INSTALLED - # _____</p> <p>SYSTEM DESIGN RECORDED AND ATTACHED</p> <p>IF REPLACEMENT SYSTEM: YEAR FAILING SYSTEM INSTALLED _____ THE FAILING SYSTEM IS <u>EAS</u></p> <p>1. <input type="checkbox"/> BED 3. <input type="checkbox"/> TRENCH</p> <p>2. <input type="checkbox"/> CHAMBER 4. <input type="checkbox"/> OTHER _____</p> <p>SIZE OF PROPERTY _____ ZONING <u>SHORELAND</u></p>	<p>THIS APPLICATION REQUIRES:</p> <p>1. <input type="checkbox"/> NO RULE VARIANCE</p> <p>2. <input type="checkbox"/> NEW SYSTEM VARIANCE Attach New System Variance Form</p> <p>3. <input checked="" type="checkbox"/> REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form</p> <p>a. <input type="checkbox"/> Requires Local Plumbing Inspector Approval</p> <p>b. <input checked="" type="checkbox"/> Requires State and Local Plumbing Inspector Approval</p> <p>4. <input type="checkbox"/> MINIMUM LOT SIZE VARIANCE</p> <p>DISPOSAL SYSTEM TO SERVE:</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER _____ SPECIFY _____</p>	<p>INSTALLATION IS:</p> <p>COMPLETE SYSTEM</p> <p>1. <input type="checkbox"/> NON-ENGINEERED SYSTEM</p> <p>2. <input type="checkbox"/> PRIMITIVE SYSTEM (Includes Alternative Toilet)</p> <p>3. <input type="checkbox"/> ENGINEERED (+ 2000 gpd)</p> <p>INDIVIDUALLY INSTALLED COMPONENTS</p> <p>4. <input type="checkbox"/> TREATMENT TANK (ONLY)</p> <p>5. <input checked="" type="checkbox"/> HOLDING TANK <u>1500</u> GAL.</p> <p>6. <input type="checkbox"/> ALTERNATIVE TOILET (ONLY)</p> <p>7. <input type="checkbox"/> NON-ENGINEERED DISPOSAL AREA (ONLY)</p> <p>8. <input type="checkbox"/> ENGINEERED DISPOSAL AREA (ONLY)</p> <p>9. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>TYPE OF WATER SUPPLY</p>
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DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<p>TREATMENT TANK</p> <p>1. <input type="checkbox"/> SEPTIC: <input type="checkbox"/> Regular <input type="checkbox"/> Low Profile</p> <p>2. <input type="checkbox"/> AEROBIC</p> <p>SIZE <u>N/A</u> GALS.</p>	<p>WATER CONSERVATION</p> <p>1. <input type="checkbox"/> NONE</p> <p>2. <input checked="" type="checkbox"/> LOW VOLUME TOILET</p> <p>3. <input type="checkbox"/> SEPARATED LAUNDRY SYSTEM</p> <p>4. <input type="checkbox"/> ALTERNATIVE TOILET</p> <p>SPECIFY _____</p>	<p>PUMPING</p> <p>1. <input checked="" type="checkbox"/> NOT REQUIRED</p> <p>2. <input type="checkbox"/> MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION & ELEVATION)</p> <p>3. <input type="checkbox"/> REQUIRED DOSE: _____ GALS.</p>	<p>CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING) EMPLOYEES, WATER RECORDS, ETC.)</p> <p><u>2 BEDROOM</u></p>				
<p>SOIL CONDITIONS USED FOR DESIGN PURPOSES</p> <table border="1"> <tr> <th>PROFILE</th> <th>CONDITION</th> </tr> <tr> <td><u>2</u></td> <td><u>AI</u></td> </tr> </table> <p>DEPTH TO LIMITING FACTOR: <u>2'</u> "</p>	PROFILE	CONDITION	<u>2</u>	<u>AI</u>	<p>SIZE RATINGS USED FOR DESIGN PURPOSES</p> <p>1. <input type="checkbox"/> SMALL</p> <p>2. <input type="checkbox"/> MEDIUM</p> <p>3. <input type="checkbox"/> MEDIUM-LARGE <u>N/A</u></p> <p>4. <input type="checkbox"/> LARGE</p> <p>5. <input type="checkbox"/> EXTRA-LARGE</p>	<p>DISPOSAL AREA TYPE/SIZE</p> <p>1. <input type="checkbox"/> BED <u>N/A</u> Sq. Ft.</p> <p>2. <input type="checkbox"/> CHAMBER _____ Sq. Ft.</p> <p><input type="checkbox"/> REGULAR <input type="checkbox"/> H-20</p> <p>3. <input type="checkbox"/> TRENCH _____ Linear Ft.</p> <p>4. <input type="checkbox"/> OTHER: _____</p>	<p>DESIGN FLOW: <u>150 G.P.D.</u> (GALLONS/DAY)</p>
PROFILE	CONDITION						
<u>2</u>	<u>AI</u>						

EVALUATOR STATEMENT

On 9/12/94 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

[Signature]
John A. Philbrick, Licensed Site Evaluator

256 SE# _____ Date 9/13/94

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

Page 1 of 3



John R. McKernan, Jr.
Governor

Jane Sheehan
Commissioner

STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
AUGUSTA, MAINE 04333

September 23, 1994

Anthony Austin
Rt 1 Box 2843
Windsor ME 04363

SUBJECT: Request for a Holding Tank installation, Austin property,
Togus Pond, Augusta

Dear Mr. Austin:

The Division has reviewed the Subsurface Wastewater Disposal System and Holding Tank Application completed by John Philbrick, SE for the subject property.

After reviewing the information, the Division approves the proposed holding tank installation with the following conditions:

1. The installation of a 1500 gallon holding tank with suitable float alarm meeting the construction standards of the Subsurface Wastewater Disposal Rules, Section 17.F.1.
2. The holding tank is to be used only by a two (2) bedroom single family dwelling.

George Soucy, Jr., the Local Plumbing Inspector shall issue a permit prior to the holding tank's installation. The holding tank's installation shall be in compliance with the approved application.

This approval does not release the property owner from having to comply with local ordinances and other state laws. The owner shall on an annual basis, provide the municipal officers or LURC personnel with copies of their pumping records.

Yours very truly,

A handwritten signature in cursive script that reads 'Kerwin L. Keller'.

Kerwin L. Keller
Wastewater & Plumbing Control
Division of Health Engineering

KLK/ld

cc: George Soucy, LPI
John Philbrick, SE

REPLACEMENT SYSTEM VARIANCE REQUEST

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an application for the proposed replacement system which does not comply with the Rules. The LPI shall review the Replacement System Variance Request and Application 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 from the rules.
2. A system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

GENERAL INFORMATION

Permit No. 3075 E Town of AUGUSTA
Date Permit Issued 9/30/94
Property Owner's Name: ANTHONY AUSTIN Tel. No. MONTHWATER
System's Location: TOUGHS RD. WOODARD RD.
AUGUSTA STREET
TOWN MAINE 04330 ZIP
Property Owner's Address: R# 1 BOX 2843
" (different from above) WINDSOR STREET
TOWN STATE ME. 04763 ZIP

SPECIFIC INSTRUCTIONS TO THE:

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, they 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, then complete the Replacement Variance Request with your signature on reverse side of form.

PROPERTY OWNER:
It 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.

The OWNER shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached application, I understand that the proposed system is not in total compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

Anthony R Austin

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:		
SOILS Soil Profile 2 Soil Condition AI from HHE-200	Ground Water Table	to 8'				
	Restrictive Layer	to 6'		Inches		
	Bedrock	to 10'		Inches		
SETBACK DISTANCES (IN FEET)	FROM:	TREATMENT TANK	DISPOSAL AREA	TREATMENT TANK	DISPOSAL AREA	
Potable Water Supplies	1. Well: > 2000 gal/day	100'	300'			
	2. Well: < 2000 gal/day	a. Neighbor's	50'	60'		
		b. Property Owner's	25'	50'		
	3. Water Supply Line	See note 'a'				
Waterbodies	1. Perennial	50'	60'	41'		
	2. Intermittent	15'	20'			
	3. Manmade drainage ditch	10'	15'			
Downhill Slope	Greater than 3:1 (33%)	5'	10'			
Buildings	1. With Basement	5'	10'			
	2. Without Basement	5'	10'	5'		
Property Line		5'	10'			
		4'	5'			

OTHER

1. Fill extension Grade—10:3:1

- 2.
- 3.

Footnotes:

- a. This setback distance cannot be reduced by variance. See Table 6-2.
- b. Written Permission from the owner of a well is required when a replacement system will be located less than 100 feet but closer to that well than the system it is replacing.
- c. Sufficient distance shall be maintained to assure that the top of the fill does not extend to the 3:1 slope.

[Signature]
SITE EVALUATOR'S SIGNATURE

9/13/94
DATE

LPI STATEMENT

I, George A. Lawrence, LPI for the Town of Augusta have conducted an on-site inspection for the proposed replacement system and have determined to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Wastewater Disposal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System 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.

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, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments:

[Signature]
LPI'S SIGNATURE

9/22/94
DATE

FOR USE BY THE DEPARTMENT ONLY

The Department has reviewed the variance(s) and (does does not) give its approval. Any additional requirements or reasons for the Variance denial, are given in the attached letter.

HOLDING TANK APPLICATION

This form along with a completed HHE-200 form constitutes an application for installation of a holding tank to receive sanitary wastewater. Holding tanks are permitted only for:

- a) the replacement of a malfunctioning subsurface disposal system, surface discharge, or overboard discharge when no other alternative is available and no change in usage is proposed;
- b) for new commercial or industrial facilities generating less than 500 GPD of wastewater when no other alternative is available;
- c) for temporary use by a new single family dwelling when a public sewer will be available within 18 months.

Applications not meeting one of the above criteria will be immediately rejected. Incomplete applications will be returned. Applications for new commercial or industrial facilities require the submission of a \$20.00 review fee. The Department reserves the right to require attachment of deed covenants restricting the use of the property as a condition of approval of any holding tank application.

All appropriate blanks must be completed and all signatures obtained prior to submission for approval.

APPLICANT

First Name: ANTHONY Last Name: AUSTIN

Address: RT # 1 BOX 2543

City/Town: WINDSOR State: VT Zip: 04363

PROPERTY

Address: TOUGUS RD.

City/Town: AUGUSTA Zip: 04330

Replacement New Commercial Installation (\$20 Review Fee)

Age of old System: 7 Type of Old System: MAS

PUMPER

Business Name: Pat Jackson Inc

Address: RD 5 BOX 540

City: Augusta Zip: 04330

Truck Capacity: 3000 Can Pump From 9/94 to 9/95

Disposal Site: Augusta Sanitary District or licensed Disposal Site

PROPERTY OWNER

I, Anthony R Austin, am the owner of the property described in this application. I hereby do swear that all information regarding the past, present, and planned future uses of the property is accurate. I understand that a conventional subsurface wastewater disposal system is not feasible on my property and that the holding tank is only a temporary receptical and requires periodic maintenance. I have contracted with the individual specified on the form as the pumper to periodically empty the holding tank. I further agree to file with the Registry of Deeds and to abide by any deed covenants that may be required by the Department as a condition of approval.

Anthony R Austin
Property Owner's Signature

9-20-94
Date

SITE EVALUATOR

I, _____, state that I have evaluated the subject property and find that there is no feasible subsurface wastewater disposal system for this property. I have completed an HHE-200 form proposing a holding tank as the only alternative for on-site wastewater disposal.

[Signature]
Site Evaluator's Signature

9/13/94
Date

PUMPER

I, Eugene Dube, operate a septage removal service as described on this form and have contracted with the property owner to remove holding tank wastes from the subject property. I state that I have the necessary equipment and capacity to service the subject property and that I will dispose of the wastewater at an approved site.

[Signature]
Pumper's Signature

9/21/94
Date

LOCAL PLUMBING INSPECTOR

I, George A. Sawyer Jr., local plumbing inspector for the municipality of Augusta have visited the subject property and reviewed this application and concur with the site evaluation that a holding tank is the only feasible option for this property.

[Signature]
Local Plumbing Inspector's Signature

9/22/94
Date

MUNICIPAL OFFICERS

We, municipal officers for Augusta, have reviewed this application and do state that the installation of a holding tank on the subject property does not conflict with any local ordinances.

[Signature]
Municipal Officer's Signature

Dir. of C&S Ser.
City Eng.
Title

9.22.94
Date

[Signature]
Municipal Officer's Signature

Title

Date

[Signature]
Municipal Officer's Signature

Title

Date