

69-4

# REPLACEMENT SYSTEM VARIANCE REQUEST

TOWN 4893  
COPY # 20.00

## 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 BOD<sub>5</sub> plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

### GENERAL INFORMATION

Town of AUGUSTA  
 Permit No. 4893 Date Permit Issued 6/26/02  
 Property Owner's Name: ALICE BOWEN Tel. No.: 978-388-1092  
 System's Location: WOODWARD ROAD  
 Property Owner's Address: 3 MAPLEWOOD AVE  
 (if different from above) AMESBURY, MA 01913

### 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.

Alice Bowen      May 30, 2002  
SIGNATURE OF OWNER      DATE

### LOCAL PLUMBING INSPECTOR

I, May R. Sullivan, 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, she shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments: \_\_\_\_\_

May R. Sullivan      6/26/02  
LPI SIGNATURE      DATE

Replacement System Variance Request

VARIANCE CATEGORY	VARIANCE REQUESTED		LIMIT OF LPI'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	Less Than 1000 gpd	1000 to 2000 gpd	To	To
Wells with water usage of 2000 or more gpd	300 <sup>a</sup> ft	300 <sup>a</sup> ft	100 <sup>a</sup> ft	100 <sup>a</sup> ft		
Owner's wells	100 down to 50 ft	200 down to 100 ft	100 <sup>b</sup> down to 50 ft	100 down to 50 ft		
Neighbor's wells	100 <sup>b</sup> down to 60 ft	200 <sup>b</sup> down to 120 ft	100 <sup>b</sup> down to 50 ft	100 <sup>b</sup> down to 75 ft		
Water supply line	10 ft <sup>a</sup>	20 ft <sup>a</sup>	10 ft <sup>a</sup>	10 ft <sup>a</sup>		
Water course, major - for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft	200 down to 120 ft	100 down to 50 ft	100 down to 50 ft	80'	70'
Water course, minor	50 down to 25 ft	100 down to 50 ft	50 down to 25 ft	50 down to 25 ft		
Drainage ditches	25 down to 12 ft	50 down to 25 ft	25 down to 12 ft	25 down to 12 ft	14'	
Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams (edge of fill extension)	25 ft <sup>d</sup>	25 ft <sup>d</sup>	25 ft <sup>d</sup>	25 ft <sup>d</sup>		
Slopes greater than 3:1	10 ft	18 ft	N/A	N/A		
No full basement [e.g. slab, frost wall, columns]	15 down to 7 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Full basement [below grade foundation]	20 down to 10 ft	30 down to 15 ft	8 down to 5 ft	14 down to 7 ft		
Property lines	10 down to 5 <sup>c</sup> ft	18 ft down to 9 <sup>c</sup> ft	10 ft down to 4 <sup>c</sup> ft	15 ft down to 7 <sup>c</sup> ft		
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft		

OTHER

1. Fill extension Grade - to 3:1

2.

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 (or 200 ft. for 1000-2000 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.

*Steph P. Pablin*  
 \_\_\_\_\_  
 SITE EVALUATOR'S SIGNATURE

UPDATED 20 MAY 02 J.R.  
 8 MAY 99  
 \_\_\_\_\_  
 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

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

<b>PROPERTY LOCATION</b>		<b>&gt;&gt; Caution: Permit Required -- Attach in Space Below &lt;&lt;</b>	
City, Town, Plantation	AUGUSTA	AUGUSTA Date Permit Issued: <u>10/27/02</u> 4893 TOWN COPY \$ <u>1200.00</u> FEE Charged <input type="checkbox"/> Double Fee Charged L.P.I. # <u>852</u> Local Plumbing Inspector Signature: <u>[Signature]</u>	
Street or Road	WOODWARD ROAD		
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	BOWEN, ALICE <span style="float:right">Owner Applicant</span>		
Mailing Address of	3 MAPLEWOOD AVENUE		
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	AMESBURY, MA 01913		
Daytime Tel. #	978-388-1092	Municipal Tax Map # <u>69</u> Lot # <u>4</u>	
<b>Owner or Applicant Statement</b>		<b>Caution: Inspections Required</b>	
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. <u>Carol A. Wilcox</u> <u>10-28-02</u> Signature of Owner or Applicant Date		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. <u>[Signature]</u> <u>8-6-02</u> Local Plumbing Inspector Signature (1st) Date Approved	
		(2nd) Date Approved	

## PERMIT INFORMATION

<b>TYPE OF APPLICATION</b> 1. <input type="checkbox"/> First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: <u>UNK</u> Year Installed: <u>120 YRS</u> <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	<b>THIS APPLICATION REQUIRES</b> 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. Replacement System Variance a. <input checked="" type="checkbox"/> Local Plumbing Inspector Approval b. <input type="checkbox"/> State & Local Plumbing Inspector Approval 4. <input type="checkbox"/> Minimum Lot Size Variance 5. <input type="checkbox"/> Seasonal Conversion Approval	<b>DISPOSAL SYSTEM COMPONENT(S)</b> 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
<b>SIZE OF PROPERTY</b> <u>1/2</u> 11,250 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> acres	<b>DISPOSAL SYSTEM TO SERVE</b> 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 _____	<b>TYPE OF WATER SUPPLY</b> 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: _____
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		

## DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

<b>TREATMENT TANK</b> 1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input checked="" type="checkbox"/> Low Profile <u>IF REQ</u> 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY <u>1,000</u> gallons	<b>DISPOSAL FIELD TYPE &amp; SIZE</b> 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>600</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> 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 type="checkbox"/> Filter on Tank Outlet	<b>DESIGN FLOW</b> <u>180</u> gallons per day BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 501.2 (other facilities) SHOW CALCULATIONS -- for other facilities --
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE CONDITION DESIGN <u>2 1 A1A 1</u> at Observation Hole # <u>1</u> Depth <u>19</u> - Elevation _____ OF MOST LIMITING SOIL FACTOR	<b>DISPOSAL FIELD SIZING</b> 1. <input type="checkbox"/> Small -- 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium -- 2.6 sq. ft./gpd 3. <input checked="" 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	<b>PUMPING</b> 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 5-2-99, 29 APR 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).

[Signature] 301 SE # 80 MAY 02 Date  
 STEPHEN P. ROBBINS  
 BOX 271  
 EAST WINNHAM, ME 04543 Telephone # 399-6707

CONFIDENTIAL

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

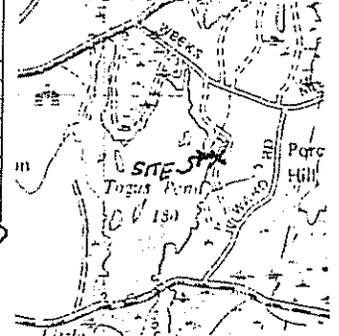
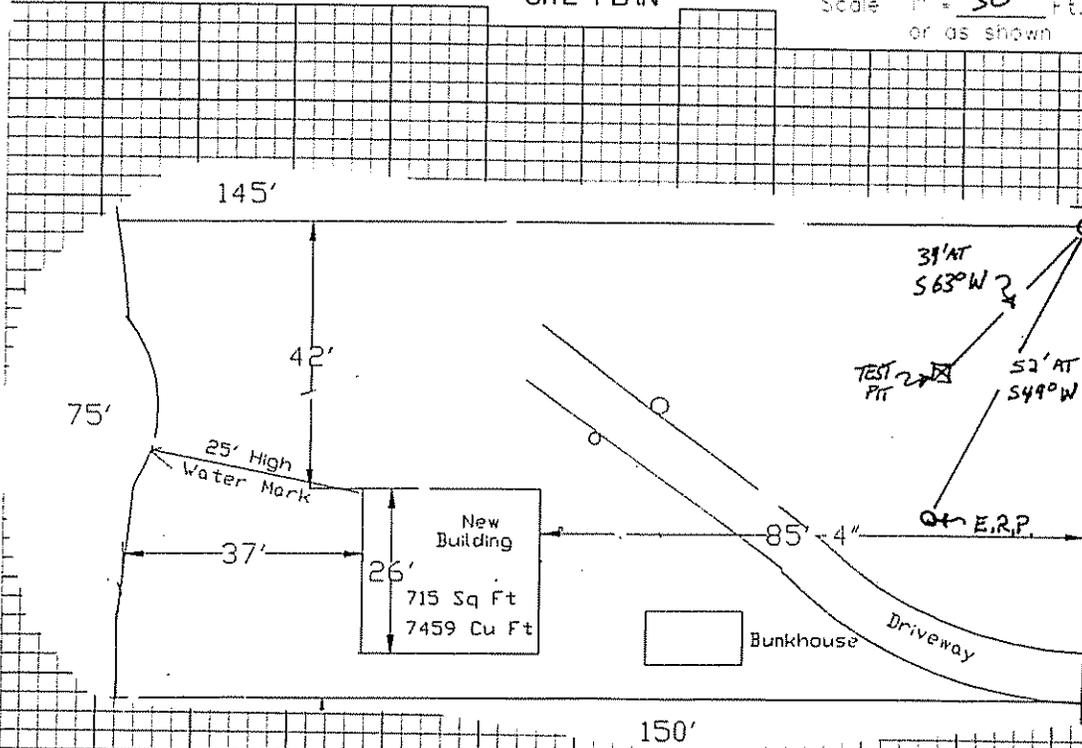
Department of Human Services  
Division of Health Engineering  
(207) 287-5672 FAX (207) 287-4172

Town, City, Plantation  
**AUGUSTA**

Street, Road, Subdivision  
**WOODWARD ROAD**  
SITE PLAN

Owner's Name  
**NICE BOWEN**

Scale 1" = 30 Ft.  
or as shown



## SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

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

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

Texture	Consistency	Color	Mottling
FINE SANDY LOAM	FRIABLE	DARK BROWN	
		YELLOW BROWN	COMMON
		BDRK	

Soil Classification 2 Profile	Slope 20%	Limiting Factor 19"	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input checked="" type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
Condition AIII			

Texture	Consistency	Color	Mottling

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
Profile	Condition	%	"

*Stephen P. Williams*  
Site Evaluator Signature

301

SE

8 MAY 99 UPDATE 20 MAY 02 DR  
Date

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that this is crucial for ensuring the integrity of the financial statements and for providing a clear audit trail. The text also mentions that proper record-keeping is essential for identifying and correcting errors in a timely manner.

2. The second part of the document focuses on the role of internal controls in preventing fraud and misstatements. It highlights that a strong internal control system is necessary to ensure that all transactions are properly authorized, recorded, and reviewed. The text also notes that internal controls should be designed to provide reasonable assurance of the reliability of the financial reporting process.

3. The third part of the document discusses the importance of segregation of duties in reducing the risk of error and fraud. It explains that no single individual should be responsible for all aspects of a transaction, as this could lead to conflicts of interest and a lack of oversight. The text also mentions that segregation of duties is a key component of an effective internal control system.

4. The fourth part of the document addresses the need for regular monitoring and evaluation of internal controls. It states that internal controls should not be set and forgotten, but rather should be reviewed and updated as needed to reflect changes in the business environment. The text also notes that management should be responsible for ensuring that internal controls are effectively implemented and maintained.

5. The fifth part of the document discusses the importance of communication in the internal control process. It emphasizes that all employees should be aware of their role in maintaining internal controls and should be encouraged to report any suspected weaknesses or fraud. The text also mentions that management should provide clear guidance and support to employees in this regard.

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

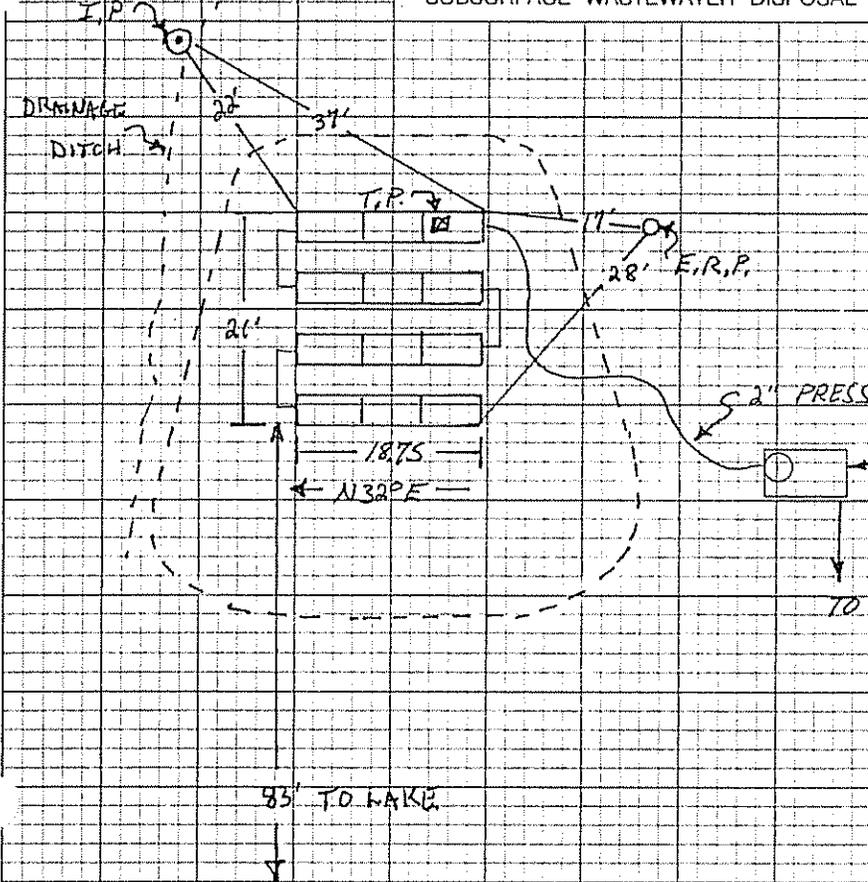
Town, City, Plantation  
**AUGUSTA**

Street, Road, Subdivision  
**WOODWARD ROAD**

Owner's Name  
**ALICE BOWEN**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.



### ELEVATION NOTES

ROW	BOTTOM	TOP	FILL
#1	-60"	-44"	-36"
#2	-74"	-58"	-50"
#3	-88"	-72"	-64"
#4	-102"	-86"	-78"

### FILL REQUIREMENTS

Depth of Fill (Upslope)	29"
Depth of Fill (Downslope)	29"

### CONSTRUCTION ELEVATIONS

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

### NOTES ABOVE

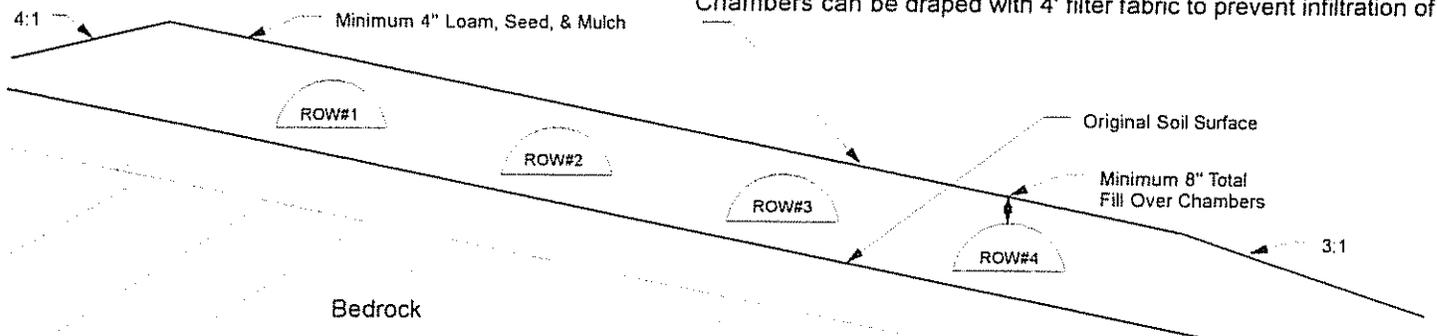
ELEVATION REFERENCE POINT  
Location & Description **NAH 113 24"**  
PIPE, 60" FROM GROUND  
Reference Elevation **0**

### DISPOSAL AREA CROSS SECTION

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



Note: Use 4-6" Very Coarse Sand Or Screened Gravel Around Chambers. Chambers can be draped with 4' filter fabric to prevent infiltration of fill.



*Steph P. Miller*  
Site Evaluator Signature

301

8 MAY 98

UPDATE 20 MAY 02  
S.R.  
4



AUGUSTA

WOODNARD ROAD

ANILE BOWEN

ATTACHMENT TO HHE-200

## notes:

1. Construction to conform with "State of Maine Subsurface Wastewater Disposal Rules".
2. Property lines shown are as provided by owner, agent, or municipality. No guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
3. Remove organic material and ~~scarify~~ tototill ~~furrow~~ area under drainfield and fill extensions.
4. Unless otherwise specified, all fill will be coarse sand to a gravely coarse sand. See Sec. 804.0 in the Maine State Plumbing Code for further clarification of fill requirements. In 8" lifts, compacted as placed. First lift to be thoroughly mixed with original soil.
5. Septic tanks and pump stations shall be installed watertight to prevent infiltration of ground and surface water.
6. Force mains, pump stations, and or gravity piping subject to freezing shall be adequately insulated.
7. Unless otherwise specified, septic tank to be located by contractor; at minimum; 8' to proposed or existing home and or buildings, 10' to property line & water supply line, 100' to all wells and shoreline. Owners well setback can be reduced to 75' if tested for water-tightness in presence of L.P.I. .
8. A septic tank outlet filter is recommended.
9. If replacement system with new tank, existing tank or cesspool to be filled with soil or removed. If existing tank is to be utilized, tank is to be thoroughly inspected for condition.
10. Unless otherwise specified, this plan does not allow the placement of pumps between the wastewater source and the septic tank.
11. Unless otherwise specified, disposal area to existing or proposed buildings setback is 20'.
12. Water from gutters, driveways, walks, and other surface water to be diverted away from system.
13. Loam, seed and mulch all disturbed areas to prevent erosion and facilitate runoff.
14. Unless otherwise specified, keep traffic heavier than lawn tractor away from all components of system.
15. Keep sanitary napkins, cigarette butts, coffee grounds, paper towels, grease, and nonbiodegradables out of system.
16. Many times it is impossible to locate water supplies. Property owner assumes responsibility of proper setback to any unknown water supplies.
17. Discharge from water treatment equipment and residential floor drains is not considered wastewater and must not be plumbed into septic system. This flow should be diverted into a separate drywell (Disposal area that does not require design or permit).
18. Plumbing fixtures must be strictly maintained to insure excess water does not enter septic system. Excess water can lead to premature clogging and total failure of disposal area.
19. Venting of disposal area is not required, but can facilitate biological action in disposal area.
20. Pumped systems will be equipped with audible high water alarm, wired to separate circuit as pump.
21. Take 3 copies of the plan to your local plumbing inspector for required permit.

Stephen P. Robbins

S.E.#301

Date 20 MAY 07Page 4 of 4

S.P.R.

RECEIVED  
JUN 3 2002  
By \_\_\_\_\_