

called 6/8 8:40

REPLACEMENT SYSTEM VARIANCE REQUEST

FORMS

Town 95.00

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. 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.

1-08-27

GENERAL INFORMATION

Permit No. 6163 Town of Augusta
 Date Permit Issued 5/30/08
 Property Owner's Name: Donald Nichols Tel. No.: 622-7914
 System's Location: 78 Albee Rd, Augusta, Me 04330
 Property Owner's Address: _____
 (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.

Donald L. Nichols
SIGNATURE OF OWNER

5/29/08
DATE

LOCAL PLUMBING INSPECTOR

I, Wayne R. Latta, 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, 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: _____

Wayne R. Latta
LPI SIGNATURE

5/30/08
DATE

HHE-204 Rev 10/02

Replacement System Variance Request

| VARIANCE CATEGORY | 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 | 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 | | |
| 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 | | |
| 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 | | |
| Property 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] | | |
| 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 <i>Fill extension needs to be 3 1/4 : 1</i> | | | | | | | | |
| 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.

Albert E. Heald
 SITE EVALUATOR'S SIGNATURE

5/27/08
 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 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 | AUGUSTA PERMIT # 6163 TOWN COPY Date Permit Issued: <u>5/30/08</u> \$ <u>95.00</u> <input type="checkbox"/> Double Fee Charged Local Plumbing Inspector Signature: <u>[Signature]</u> L.P.I. # <u>8502</u> | |
| Street or Road | 78 Albee Rd | | |
| Subdivision, Lot # | 1-08-27 | | |
| OWNER/APPLICANT INFORMATION | | | |
| Name (last, first, MI) | Nichols, Donald <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant | | |
| Mailing Address of Owner/Applicant | 78 Albee Rd. Augusta, Me 04330 | | |
| Daytime Tel. # | 622-7914 | Municipal Tax Map # <u>71</u> Lot # <u>13</u> RPDS | |

| | |
|---|---|
| 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: <u>Donald E. Nichols</u> Date: <u>5/29/08</u> | 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: <u>[Signature]</u> (1st) date approved: <u>9/10/08</u> (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>Infiltrator</u> Year installed: <u>1995</u> <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion | 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 checked="" 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 COMPONENTS <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. 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 |
| SIZE OF PROPERTY <u>1/2</u> <input type="checkbox"/> SQ. FT. <input checked="" type="checkbox"/> ACRES | 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 | 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 |
| SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

| | | | |
|--|--|--|--|
| TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <u>check</u> <input checked="" type="checkbox"/> a. Regular <u>baffles</u> <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000</u> GAL. | DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input type="checkbox"/> a. cluster array <input checked="" type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>32</u> <input type="checkbox"/> sq. ft. <input checked="" type="checkbox"/> lin. ft. | GARBAGE DISPOSAL UNIT <input type="checkbox"/> 1. No <input checked="" 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 checked="" type="checkbox"/> c. increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet | DESIGN FLOW <u>180</u> gallons per day BASED ON: <input type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities <u>2 bedrooms @ 90 gpd/ea</u> |
| SOIL DATA & DESIGN CLASS PROFILE CONDITION DESIGN <u>3, C, 1, 1</u> at Observation Hole # <u>TP</u> Depth <u>20</u> " of Most Limiting Soil Factor | DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Small—2.0 sq. ft. / gpd <input type="checkbox"/> 2. Medium—2.6 sq. ft. / gpd <input checked="" type="checkbox"/> 3. Medium—Large 3.3 sq. ft. / gpd <input type="checkbox"/> 4. Large—4.1 sq. ft. / gpd <input type="checkbox"/> 5. 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 <u>exists</u> Specify only for engineered systems: DOSE: <u>20-30</u> gallons | ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. <u>49</u> d <u>19</u> m <u>840</u> s Lon. <u>69</u> d <u>38</u> m <u>1998</u> s If g.p.s, state margin of error. |

SITE EVALUATOR STATEMENT

I certify that on 5/24/08 (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: Albert E. Hodsdon SE #: 096 Date: 5/27/08

Site Evaluator Name Printed: Albert E. Hodsdon Telephone Number: 873-5164 E-mail Address: _____

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

Augusta

Street, Road, Subdivision

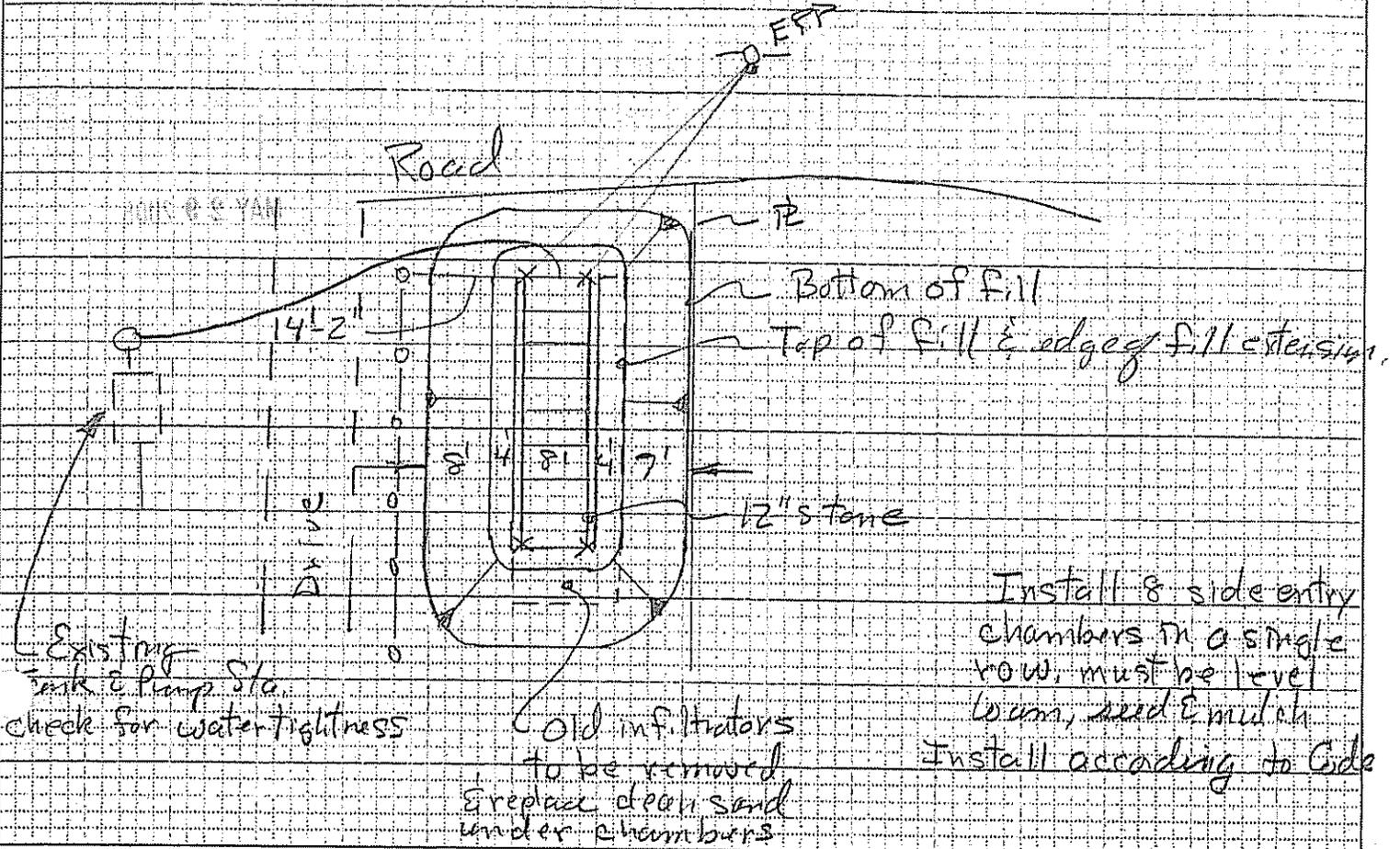
78 Albee Rd.

Owner or Applicant Name

Donald Nichols

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = *20* ft.



BACKFILL REQUIREMENTS

Depth of Backfill (upslope) *match existing*
 Depth of Backfill (downslope) *11"*
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation *-46"*
 Top of Distribution Pipe or Proprietary Device *-58"*
 Bottom of Disposal Field *-70"*

ELEVATION REFERENCE POINT

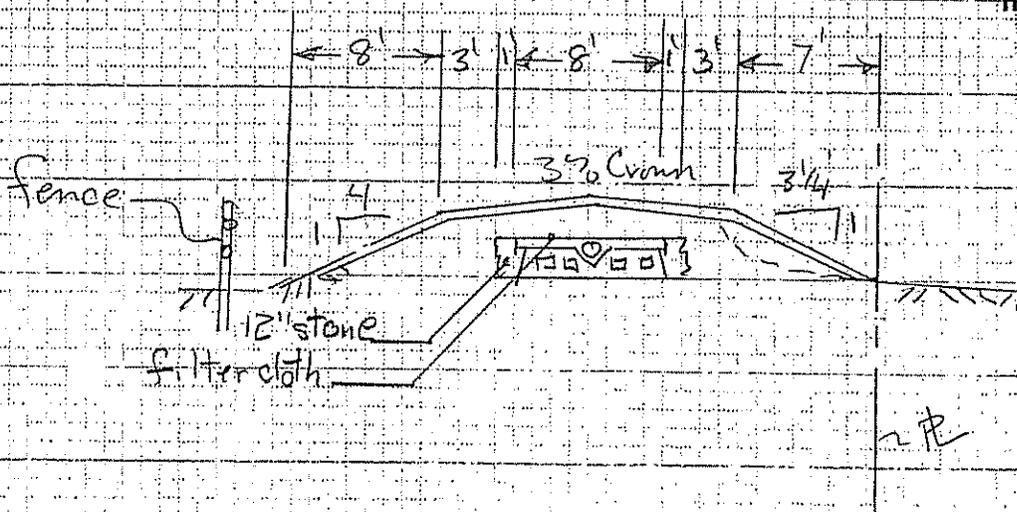
Location & Description: *Nail in Pole 28" High*
 Reference Elevation is: *0.0"*

DISPOSAL FIELD CROSS-SECTION

Scales:

Vertical: 1" = *5* ft.

Horizontal: 1" = *10* ft.



Robert E. Hododan III
 Site Evaluator Signature

046
 SE #

5/27/08
 Date

TAKING CARE OF YOUR SYSTEM

Your on-site wastewater treatment system represents a significant investment, which you will want to protect. With proper operation and regular maintenance, your system will function better and last longer.

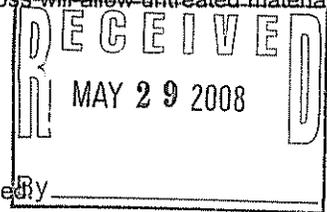
Do not wait until your system shows signs of failure to have your septic tank pumped out. Waiting can mean complete clogging and an expensive repair bill. Call a septic system pumper to inspect your system AT LEAST ONCE EVERY THREE YEARS and pump as needed. Periodic pumping of the septic tank is far less costly, than repair, or replacement of the entire system.

While your tank is being pumped, ask the operator to examine the inlet and outlet baffles or tees in the septic tank. If either is broken, have repairs done immediately. The inlet should also be checked to see if wastewater is continuously flowing into the tank from previously undetected plumbing leaks. The outlet baffle is more important than the inlet baffle. Its loss will allow untreated material to go directly to the absorption area; failure of the system is the common result.

SOME "DO'S" AND "DON'TS"

Some DO's:

- Do conserve water to reduce the amount of wastewater that must be treated and disposed.
- Do only discharge biodegradable wastes into system.
- Do keep your septic tank cover accessible for tank inspections and pumping. Many persons install a concrete riser (or manhole) over the tank, if it is buried six inches or deeper, to provide easy access for inspection and pumping. Don't cover the septic tank or drainfield with asphalt or concrete.
- Do have your septic tank pumped regularly and checked for leaks and cracks. Tanks should be pumped at least once every three (3) years. Keep a schedule and record of past and future inspections and pumping (use the chart on the back cover).
- Do be sure that water from the roof, gutters, and foundation drains do not flow over or into the system.
- Do call a septic professional when you have problems.
- Do compost your garbage or put it in the trash rather than into the septic system.
- Do restrict use of a garbage grinder/disposal. Waste from garbage grinders will fill your septic tank more rapidly, requiring more frequent pumping, but will also float and increase the scum blanket thickness.



Some DON'Ts:

- Don't flush cigarette butts, cotton swabs, cat box litter, sanitary napkins, tampons, disposable diapers, condoms and other non-biodegradable products into your system.
- Don't poison your system by dumping solvents, oils, paints, thinners, disinfectants, pesticides or poisons down the drain which will kill bacteria that help purify sewage and can contaminate groundwater.
- Don't dig into your drainfield or build anything over it.
- Don't plant anything over your drainfield except grass.
- Don't drive over your drainfield or compact the soil in any way.
- Don't empty large quantities of water from items such as hot tubs, or whirlpools, particularly if they are chlorinated.
- Don't put in a separate pipe to carry wash waters to a side ditch or the woods. The *gray water* contains germs that can spread disease.
- Don't wait for signs of failure.
- Don't attempt to repair a failing system yourself. Hire an experienced septic system contractor. A repair permit may be needed from your local health department.

SOME OTHER SYSTEM MANAGEMENT AND MAINTENANCE TIPS

- Water conservation will extend the life of your system.
- Drainfields do not have unlimited capacity. Drainfields are usually designed for a limited gallonage capacity per bedroom per day. Overloads can occur seasonally or daily.
- Save money. Commercial septic tank additives are not necessary. The bacteria needed for partially decomposing the tank solids are naturally present in sewage. Even if you use additives, you will still need to pump the solids out of the tank.
- When working with septic systems, do so carefully and safely. Sewage contains germs that can cause diseases. Never enter a septic tank. Toxic and explosive gases in the tank present a hazard. Old tanks can collapse. Electric controls present a shock and spark hazard. Secure the septic tank lid so children cannot open it.
- State laws require you to get a permit before repairing a failing system. It is important the system is repaired as soon as possible to minimize the health risk to your family and community.

SIGNS OF POSSIBLE SEPTIC SYSTEM PROBLEMS

- Sewage backing up into toilets, tubs or sinks.
- Slowly draining fixtures, particularly after it has rained.
- The smell of raw sewage accompanied by extremely soggy soil over the drainfield.
- Sewage discharged over the ground or in nearby ditches or woods. This is defined as failure in most codes.
- Water test results indicating the presence of biological contamination or organic chemical contamination in the groundwater under the system.