Department of Human Services
Division of Health Engineering
(207) 289-3826

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

PROPERTY ADDRESS

Town Or Plantation	AUGUSTA
Street Subdivision Lot #	YOUNG ROAD

PROPERTY OWNERS NAME

Last: DESCHAINE First: THOMAS

Applicant Name:	
Mailing Address of Owner/Applicant (If Different)	RFD #6 Box 1196 YOUNG RD. AUGUSTA, ME. 04330

AUGUSTA PERMIT # 224 TOWN COPY

Date Permit Issued: 5/16/84 $ 14.00 FEE ☐ If Double Charged

Robert St Pierre L.P.I. # 1667

Local Plumbing Inspector 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.

Thomas C. Deschaine 5-14-84

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.

Robert St Pierre June 17 1984

Local Plumbing Inspector Signature — Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ SEASONAL CONVERSION
5. ☐ EXPERIMENTAL SYSTEM

THIS APPLICATION REQUIRES:

1. ☐ NO RULE VARIANCE REQUIRED
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
   ☒ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   3. ☐ Requires only Local Plumbing Inspector Approval
   4. ☒ Requires both State and Local Plumbing Inspector Approval

INSTALLATION IS

COMPLETE SYSTEM

1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:

4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

IF REPLACEMENT SYSTEM:

YEAR FAILING SYSTEM INSTALLED N/A

THE FAILING SYSTEM IS:

1. ☐ BED 3. ☐ TRENCH
2. ☐ CHAMBER 4. ☒ OTHER: HOLDING TANK

DISPOSAL SYSTEM TO SERVE:

1. ☒ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

SIZE OF PROPERTY

10,350 ±

ZONING

SHORELAND

TYPE OF WATER SUPPLY

DUG WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

1. ☒ SEPTIC: ☒ Regular ☐ Low Profile
2. ☐ AEROBIC

SIZE: 1500 EXISTING GALS.

WATER CONSERVATION

1. ☐ NONE
2. ☒ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET

SPECIFY: _____

PUMPING

1. ☐ NOT REQUIRED
2. ☐ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☒ REQUIRED

DOSE: 60 GALS.

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)

3 BEDROOMS

PRESENTLY USING 300 GAL./WEEK

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
3	C

DEPTH TO LIMITING FACTOR: 35

SIZE RATINGS USED FOR DESIGN PURPOSES

1. ☐ SMALL
2. ☐ MEDIUM
3. ☒ MEDIUM-LARGE
4. ☐ LARGE
5. ☐ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE

1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 384 Sq. Ft.
   ☐ REGULAR ☐ H 20
3. ☐ TRENCH _____ Linear Ft.
4. ☐ OTHER: _____

EST. ☒

DESIGN FLOW: 225 GPD (GALLONS/DAY)

SITE EVALUATOR STATEMENT

(☐ SITE EVALUATION WAIVED BY LOCAL OPTION)

On 11/20/83 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I proposes is in accordance with the Subsurface Wastewater Disposal Rules.

Paul A. Beers

Site Evaluator or Professional Engineer's Signature

STATE OF MAINE PAUL A. BEERS #56 LICENSED SOIL EVALUATOR

11/23/83

Date

* Local Plumbing Inspectors Signature if a Local Site Evaluation Waiver under a Local Option

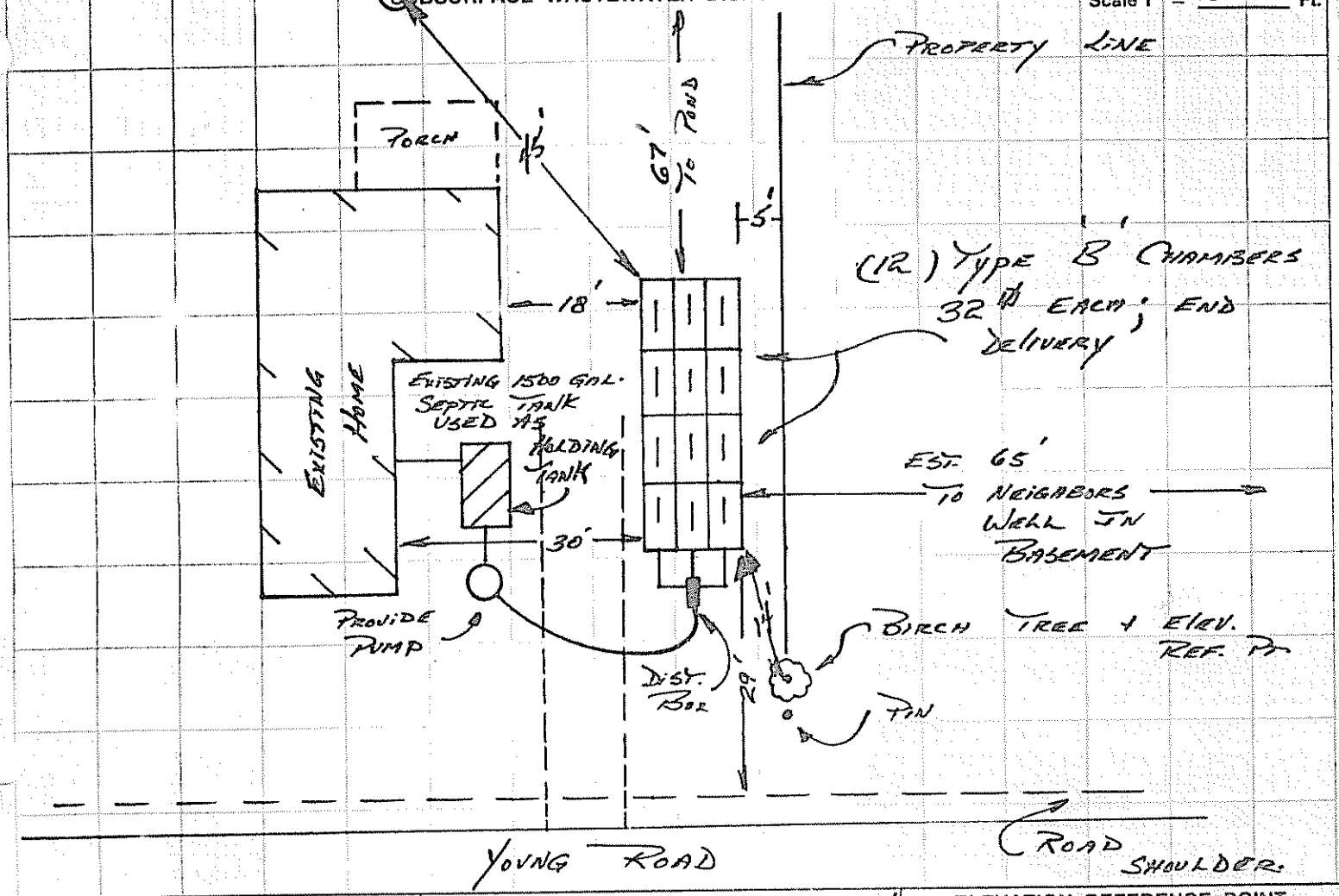
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: AUGUSTA
Street, Road, Subdivision: YOUNG ROAD
Owners Name: THOMAS DESCHAINE

SUBSURFACE WASTEWATER DISPOSAL PLAN

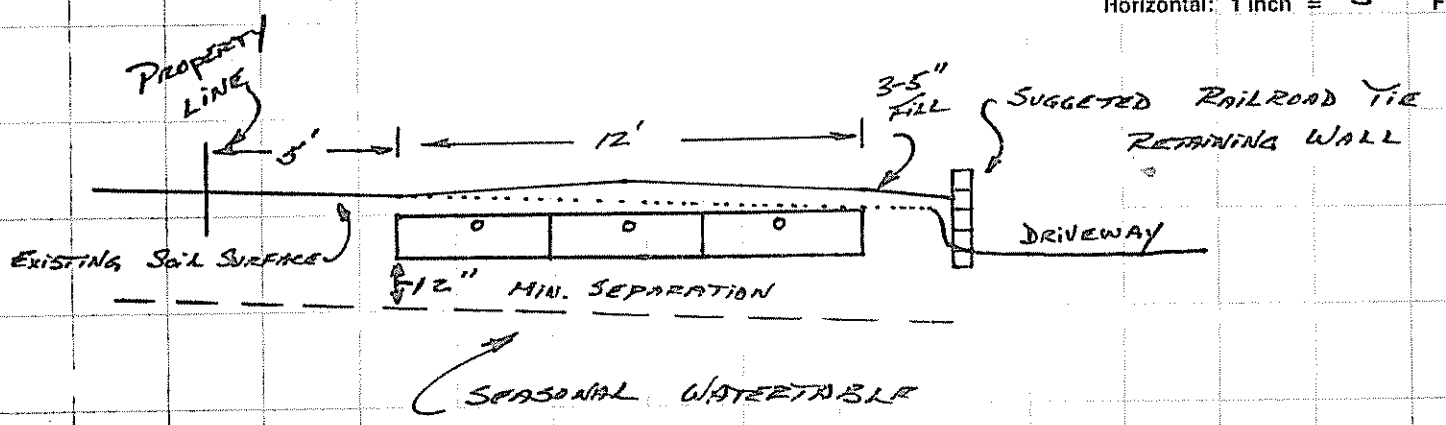
Scale 1" = 20 Ft.



FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
Depth of Fill (Upslope)	0"	Reference Elevation is	60"	NAIL IN BIRCH TREE
Depth of Fill (Downslope)	3-5" (VARIES)	Bottom of Disposal Area	0"	44" UP FROM BASE
		Top of Distribution Lines or Chambers	13"	

DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = 5' Ft.
Horizontal: 1 inch = 5' Ft.



INSTALLATION NOTES: MAINTAIN MIN 6" COVER OVER CHAMBERS • GRADE SURFACE OF SYSTEM TO DRAIN SURFACE WATER • SLOPE IN CHAMBER AREA IS VARIABLE, FILL DEPTHS WILL VARY • STABILIZE SYSTEM SURFACE TO PREVENT EROSION...

Paul A. Burns
Site Evaluator or Professional Engineer's Signature

#56
SE # / PE #

11/23/83
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Division of Health Engineering

Town, City, Plantation: AUGUSTA

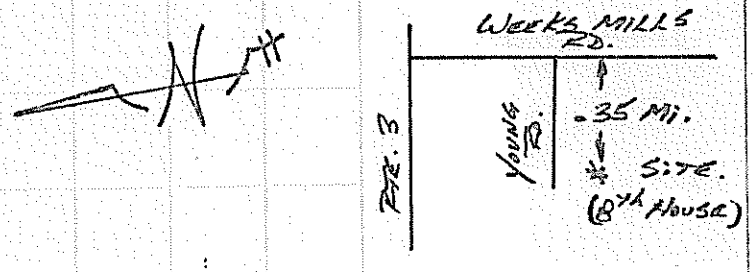
Street, Road, Subdivision: YOUNG ROAD

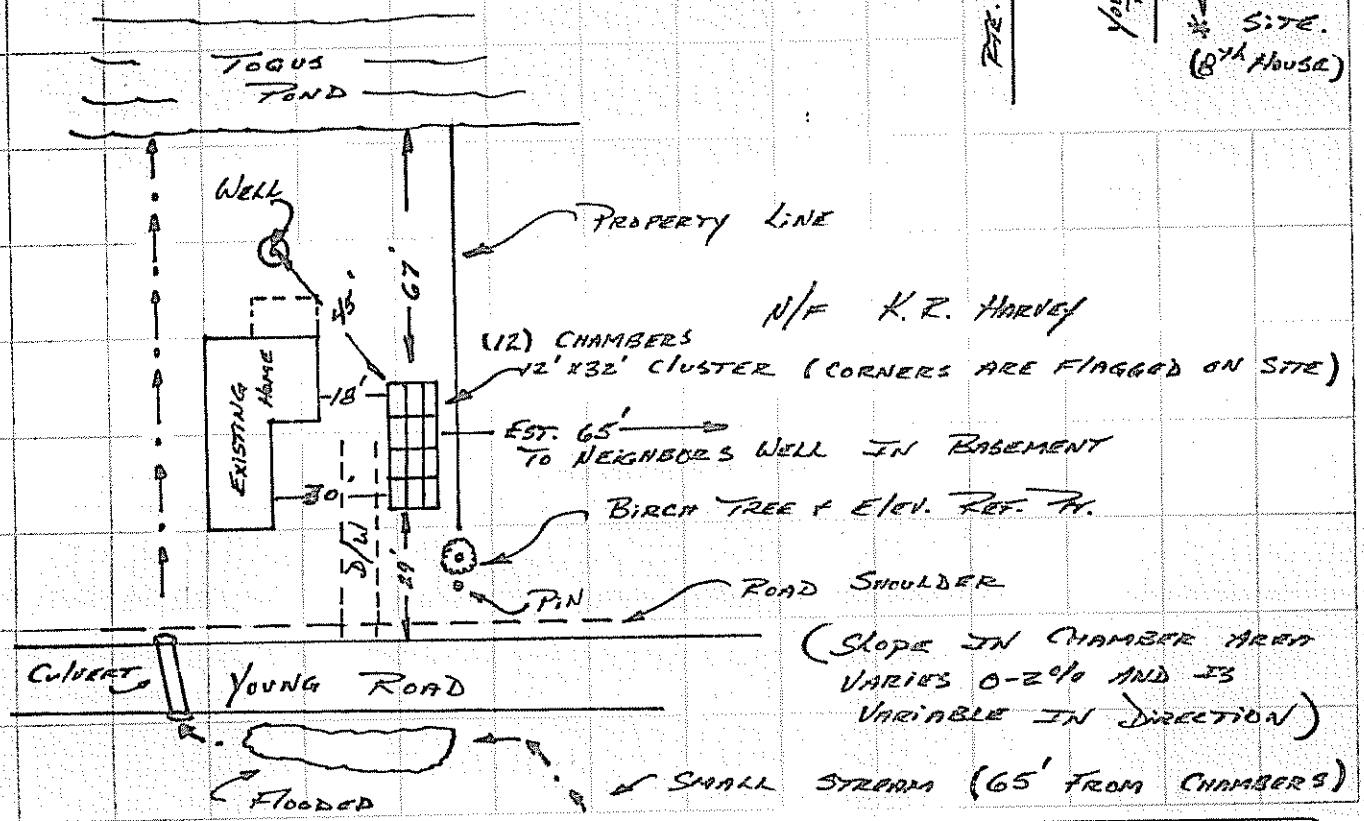
Owners Name: THOMAS DESCHAINE

SITE PLAN

Scale 1" = 50 Ft.

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

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
SANDY LOAM FILL	LOOSE TO FRIABLE	OLIVE BROWN	
FINE SANDY LOAM		DK BROWN	
GR. SANDY LOAM	SOMEWHAT FIRM TO FIRM	REDDISH BROWN	FEW DISTINCT @ 35"
REFUSAL	FIRM		

Soil	Classification	Slope	Limiting Factor	
3 (Profile)	C (Condition)	0-2 %	35"	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole _____ ☐ Test Pit ☐ Boring

_____ " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling

Soil	Classification	Slope	Limiting Factor	
(Profile)	(Condition)	%		☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Paul C. Beers

Site Evaluator or Professional Engineer's Signature

56

SE# / PE#

11/23/83

Date

HHE - 200 Rev. 4/83

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 is in noncompliance 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 with LPI approval limitations can be met.

1. The replacement system is correcting a malfunction or an unlicensed wastewater discharge system.
2. A replacement 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 does not conflict with Seasonal Conversion Permit (30 MRSA § 3223) or with Mandatory Shoreland Zoning (12 MRSA § 4811).
6. 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

Town of AUGUSTA

Town Code ☐☐☐☐☐ Permit No. ☐ · 22 4/E Date Permit Issued 5/16/84 (month/day/yr.)

Property Owner's Name: THOMAS DESCHAINE Tel. No. 622-9679

System's Location: RFD #6 Box 1196 YOUNG ROAD (Street)

AUGUSTA (Town) MAINE 04330 (Zip)

Property Owner's Address: (if different from above) _____ (Street)

_____ (Town) (State) (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, 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, 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.

Carlene Deschaine (Property Owner's Signature) 5/15/84 (Date)

HHE-204 RV7/80

Cely

Variance Category	Variance Requested	Limit of LPI's Approval Authority		Variance Requested to:	
Soils Soil Profile Soil Condition from HHE-200	Ground Water Table	to 6"			inches
	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	100a	300a		
	2. Well: < 2000 gal/day a. Neighbor's	100b	100b	90'	65'
	b. Property Owner's	50'	60'	55'	45'
	3. Water Supply Line	See Note 'a'			
Waterbodies	1. Perennial	60'	60'	80' - POND 30' - STREAM	67' - POND 60' + 65' - STREAM
	2. Intermittent	25'	25'		
	3. Manmade drainage ditch	15'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With basement	See Note	15'		
	2. Without basement	'a'	10'		
Property Line		5'	5'		5'

Other Specify: PRESENT WATER USE IS 300 GAL/WEEK ON HOLDING TANK NEW EST. USE IS 225 GPD. ALLOW 14" OF OLD FILL TO BE CONSIDERED ORIGINAL SOIL

Footnotes:

a. This setback distance cannot be reduced by variance. See Table 6-2.

b. A variance to reduce the 100 foot setback distance to a minimum of 80 feet may be granted only with the neighbor's written permission.

c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope.

Paul A. Berg — Site Evaluator's Signature

11/23/83 — Date

LPI Statement

I, Robert B. St. Pierce, 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 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, ☐ do not approve) 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, he shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments:

Robert St Pierre — LPI's Signature

5-15-84 — 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.

David P. Breau — Signature of the Department

May 16, 1984 — Date

STATE OF MAINE
DEPARTMENT OF HUMAN SERVICES
AUGUSTA, MAINE 04333

JOSEPH E. BRENNAN
GOVERNOR

MICHAEL R. PETIT
COMMISSIONER

WELL SETBACK RELEASE FORM

I, K. R. HARVEY (name of well owner), permanent mailing address RFD #6, YOUNG RD. (street, road, etc.), AUGUSTA (town), hereby give my approval to THOMAS DESCHAINE (owner of system being installed), permanent mailing address RFD #6 BOX 1196 YOUNG RD. (street, road, etc.), AUGUSTA (town), for the purpose of locating and installing a wastewater disposal system (holding tank) no less than 65 feet (horizontal distance) to my _____ well (drilled, dug, etc., plus depth to well) located at YOUNG ROAD AUGUSTA (well location and address, if different from the above address).

Kenneth R Harvey 12/13/83
Signature - Owner of well Date

Thomas C Deschaine 12/13/83
Signature - Owner of disposal field Date

Doris P. Harvey 12/13/83
Signature - Witness Date