

REPLACEMENT SYSTEM VARIANCE REQUEST

M 74 E 12
622-5240

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 may approve the Request if all of the following requirements can be met, and the variance(s) requested fall within the limits of the 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.

Township

GENERAL INFORMATION

Town of AUGUSTA

Permit No. 3591 E

Date Permit Issued 11/5/96
MONTH/DAY/YEAR

Property Owner's Name: RALPH RACKLEFF

Tel. No. 622-5240

System's Location: RR 1 BOX 7035 ALBEE ROAD

AUGUSTA

STREET

Maine 04963

TOWN

ZIP

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

STREET

ME
STATE

ZIP

SPECIFIC INSTRUCTIONS TO THE:

LPI:

If any of the variances exceed your 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 the 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.

Ralph C. Rackleff

PROPERTY OWNER'S SIGNATURE

November 1, 1996

DATE

VARIANCE CATEGORY	VARIANCE REQUESTED	LIMIT OF LPI'S APPROVAL AUTHORITY		VARIANCE REQUESTED TO:	
SOILS					
Soil Profile	Ground Water Table	to 6"		Inches	
Soil Condition from HHE-200	Restrictive Layer	to 5"		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	50'b	60b		
	a. Neighbors				
	b. Property Owner's	50'	50'	40'+	
	3. Water Supply Line	See note 'a'			
Waterbodies	1. Waterbody Major	50'	60'	83'	
	2. Waterbody Minor	25'	25'		
	3. Manmade drainage ditch	12'	12'		
Downhill Slope	Greater than 3:1 (33%)	N/A	10c		
Buildings	1. With Basement	5'	10'		
	2. Without Basement	5'	7'		
Property Line		4'	5'		

OTHER

VARIANCE REQUESTED TO REDUCE VERTICAL SEPARATION DISTANCE

1. Fill Extension Grade--to 3:1

FROM 18 INCHES TO 15 INCHES TO MAINTAIN FILL ON PROPERTY

2.

Footnotes:

- a. This setback 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 fill does not extend to the 3:1 slope.

WILLIAM P BROWN

SITE EVALUATOR'S SIGNATURE

10/29/96

DATE

LPI STATEMENT

I, Ray R. Luther, 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 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 the Comments Section below as to why the proposed replacement system is not being recommended.

Comments:

Ray R. Luther
LPI'S SIGNATURE

11/5/96
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

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

174 42

PROPERTY LOCATION

Town or Plantation	AUGUSTA
Subdivision Lot #	ALBEE ROAD

AUGUSTA Date Permit Issued: <i>May R. Fisher</i> Local Plumbing Inspector Signature	3591	TOWN COPY 8	<input type="checkbox"/> Double Fee Charged
\$ <u>180</u>	FEE	L.P.I. # <u>850</u>	

PROPERTY OWNERS NAME

Last: RACKLEFF	First: RALPH
Mailing Address of Owner	RR 1 BOX 7035 AUGUSTA, ME 04330
Daytime Tel. #	622-5240

Municipal Tax Map # _____ Page # _____

Owner Statement

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.

Caution: Inspection Required

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

Signature of Owner/Applicant _____

Date _____

May R. Fisher
Local Plumbing Inspector Signature

11/12/96
Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:

- First Time System
- Multi-User System
- Replacement System
- Expanded System
 - One-time exempted
 - Non-exempted
- Experimental System
- Seasonal Conversion

THIS APPLICATION REQUIRES:

- No Rule Variance
- First Time System Variance (Municipal)
- First Time System Variance (State)
- Replacement System Variance
 - Local Plumbing Inspector approval
 - State & Local Plumbing Inspector approval
- Minimum Lot Size Variance
- Seasonal Conversion Variance

DISPOSAL SYSTEM COMPONENT(S):

- Non-Engineered System
- Primitive System
- Alternative Toilet specify _____
- Non-Engineered Treatment Tank
- Holding Tank _____ Gallons
- Non-Engineered Disposal Area
- Separated Laundry System
- Engineered System (+2000 gpd)
- Engineered Treatment Tank (only)
- Engineered Disposal Area (only)

SIZE OF PROPERTY

0.5 ACRES

DISPOSAL SYSTEM TO SERVE:

- Single Family Dwelling Unit
- Multiple Family Dwelling Unit
Number of Units _____
- OTHER _____ SPECIFY _____

TYPE OF WATER SUPPLY

EXISTING DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- Concrete
 - Regular
 - Low Profile
 - Plastic
- SIZE: **1000** Gallons

DISPOSAL AREA TYPE/SIZE

- Stone Bed **810** Sq. Ft.
- Proprietary Device _____ Sq. Ft.
 - Clustered
 - Linear
 - Regular
 - H-20
- Trench _____ Lin. Ft.
- Other _____

GARBAGE DISPOSAL UNIT

- No
 - Yes
 - Multi-compartment Tank
 - Tank In Series
 - Increase in tank capacity
 - Filter on Tank Outlet
- RECOMMENDED**

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

2 BEDROOM

PROFILE & DESIGN CLASS

PROFILE	DESIGN
8	D

DEPTH TO MOST LIMITING FACTOR **12** "

DISPOSAL AREA SIZING

- Small 2.0
- Medium 2.60
- Medium-Large 3.30
- Large 4.10
- Extra-Large 5.00

PUMPING

- Not Required
- May Be Required
- Required

DOSE **50** Gallons

DESIGN FLOW: **180**
(Gallons/Day)

SITE EVALUATOR'S STATEMENT

On **10 / 29 / 96** (date) I completed a site evaluation on this property and state that the data reported is accurate and that the disposal system is in compliance with the Subsurface Wastewater Disposal Rules.

William P Brown
Site Evaluator Signature

188

SE#

10/29/96

Date

WILLIAM P BROWN

Print Name

293-2110

Telephone

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation
AUGUSTA

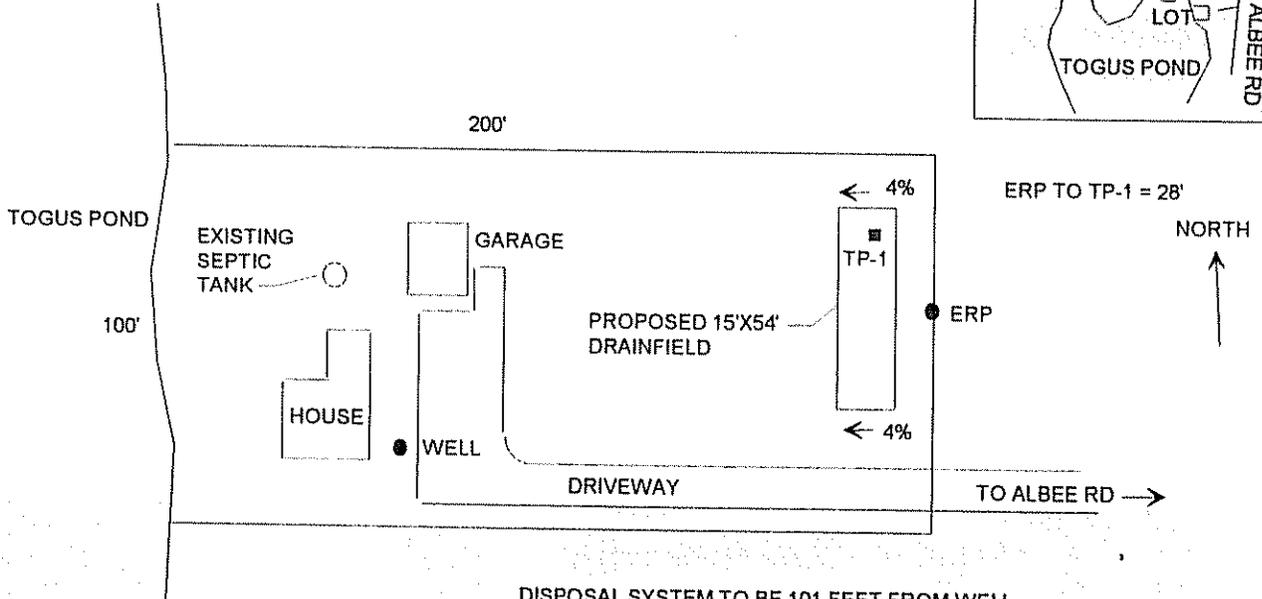
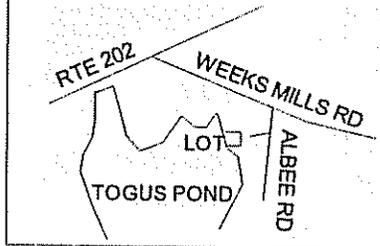
Street, Road, Subdivision
ALBEE ROAD

Owners Name
RALPH RACKLEFF

SITE PLAN

Scale 1" = 50 Ft.

SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)



DISPOSAL SYSTEM TO BE 101 FEET FROM WELL
NEW SEPTIC TANK TO BE 83 FEET FROM LAKE
NEW SEPTIC TANK TO BE AT LEAST 50 FEET FROM OWNER'S WELL OR, IF LESS THAN 50 FEET, THE SEPTIC TANK MUST BE TESTED FOR WATER-TIGHTNESS IN THE PRESENCE OF THE PLUMBING INSPECTOR

SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole TP-1 Test Pit Boring
0' Depth of Organic Horizon Above Mineral Soil

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

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0	SILT		MEDIUM BROWN	
6	LOAM	FRIABLE	BROWN	
10	FILL			
15	SANDY LOAM		MEDIUM BROWN	
20	SILT LOAM		LIGHT BROWN	NONE
30		FIRM	OLIVE BRN	COMMON
40				
50				

DEPTH BELOW MINERAL SOIL SURFACE (Inches)	Texture	Consistency	Color	Mottling
0				
6				
10				
15				
20				
30				
40				
50				

Soil Profile 8	Classification Condition D	Slope 5-6 %	Limiting Factor 12'	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock
-----------------------	-----------------------------------	--------------------	----------------------------	--

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

WILLIAM P BROWN *William P Brown*
Site Evaluator Signature

188
SE #

10/29/96
Date

AUGUSTA

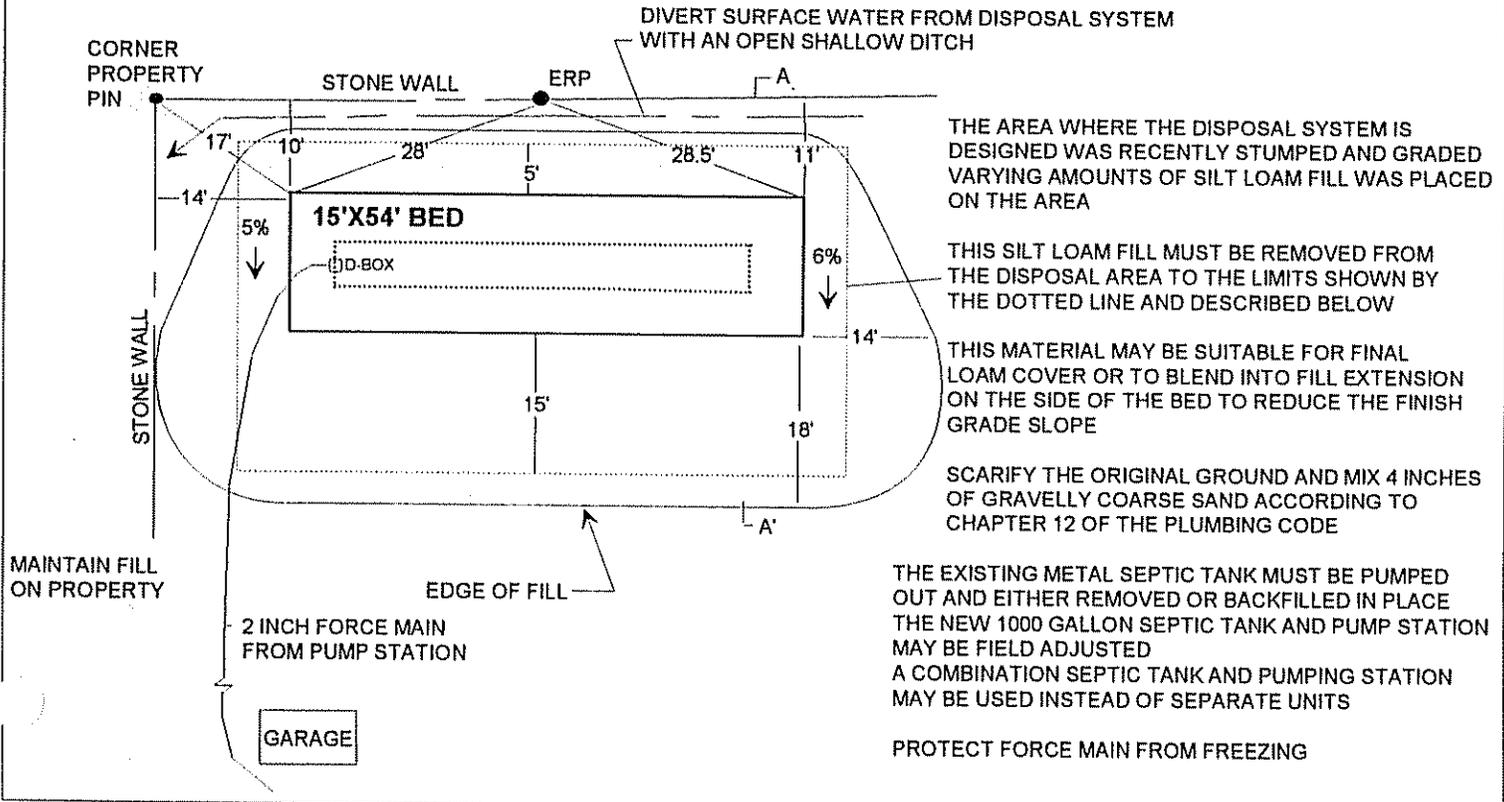
ALBEE ROAD

RALPH RACKLEFF

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20' Ft.

INSTALL EROSION CONTROL MEASURES BEFORE BEGINNING CONSTRUCTION



FILL REQUIREMENTS

Depth of Fill (Upslope) **22-24"**
 Depth of Fill (Downslope) **33"**

CONSTRUCTION ELEVATIONS

Reference Elevation is **00"**
 Bottom of Disposal Area **-47"**
 Top of distribution Lines or Chambers **-36"**

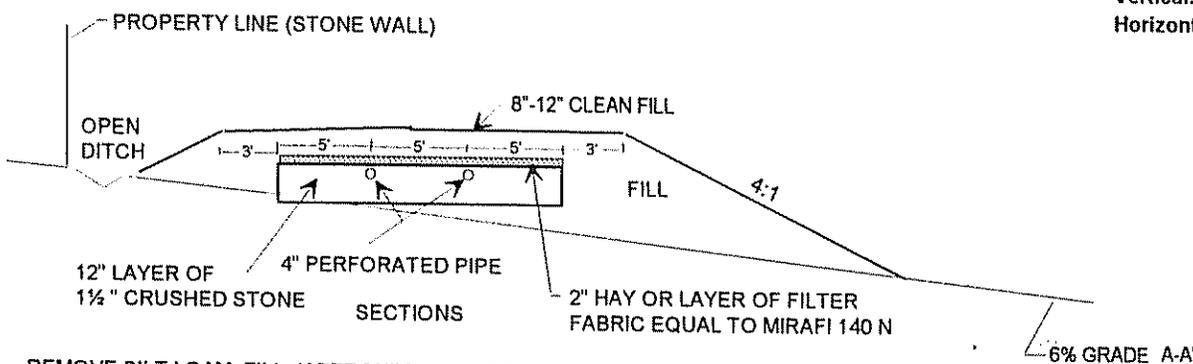
ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

FLAGGED NAIL IN 30 INCH OAK TREE, 3 FEET ABOVE GROUND

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.
 Horizontal: 1 inch = 10 Ft.



REMOVE SILT LOAM FILL (APPROXIMATELY 5 TO 9 INCHES) IN THE DISPOSAL AREA AND AT LEAST 5 FEET UP-SLOPE, 5 FEET SIDE-SLOPE, AND 15 FEET DOWN-SLOPE OF THE DISPOSAL SYSTEM
 SCARIFY THE ORIGINAL GROUND IN THE FILL AREA
 MIX 4 INCHES OF SUITABLE FILL WITH ORIGINAL SOIL TO FORM A TRANSITION ZONE (ACCORDING TO CHAPTER 12 PLUMBING CODE)
 ALL FILL SHALL BE GRAVELLY COARSE SAND
 CROWN FINISH GRADE FROM CENTER AT 3%
 LOAM, SEED, MULCH

WILLIAM P BROWN

Site Evaluator Signature

188
SE #

10/29/96
Date