

REPLACEMENT SYSTEM VARIANCE REQUEST

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 minor 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.

GENERAL INFORMATION

Town of AUGUSTA

Permit No. 6167

Date Permit Issued 6/5/08

Property Owner's Name: SHIRLEY DUTIL

Tel. No.:

System's Location: 313 WEST RIVER ROAD

Property Owner's Address: SAME

(if different from above) AUGUSTA, ME 04330

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.

Signature of Shirley H. Dutil

SIGNATURE OF OWNER

5-5-08

DATE

LOCAL PLUMBING INSPECTOR

I, [Signature], 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. (x) 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:

Signature of Local Plumbing Inspector

LPI SIGNATURE

6/5/08

DATE

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
	Disposal Fields (total design flow)			Septic Tanks (total design flow)			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
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 (total design flow)			Septic Tanks (total design flow)			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	12'	5'
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		
<b>OTHER</b>								
1. REDUCE FILL EXTENSION TO 3:1 ONLY AS NEEDED NEAR HOUSE								
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.

SITE EVALUATOR'S SIGNATURE

June 3, 2008  
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, or Plantation	AUGUSTA	<div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <p>AUGUSTA</p> <p>Date Permit Issued: <u>6/5/08</u></p> <p><i>[Signature]</i> Local Plumbing Inspector Signature</p> </div> <div style="text-align: center;"> <p>PERMIT # 6167 TOWN COPY</p> <p>\$ <u>198.00</u> FEE</p> <p>L.P.I. # <u>1200</u></p> </div> <div style="text-align: right;"> <p><input type="checkbox"/> If Double Fee Charged</p> </div> </div>	
Street or Road	313 WEST RIVER ROAD		
Subdivision, Lot #			
<b>OWNER/APPLICANT INFORMATION</b>			
Name (last, first, MI)	DUTIL, SHIRLEY		
	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant		
Mailing Address of	313 WEST RIVER ROAD		
	AUGUSTA, ME 04330		
Daytime Tel. #	685-9236 APPLICANT	Municipal Tax Map # <u>93</u>	Lot # <u>12</u>
<b>Owner or Applicant Statement</b>		<b>Caution: Inspection 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.		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.	
<i>[Signature]</i> Shirley A. Dutil			
Date <u>5-5-08</u>		(1st) Date Approved _____	
Signature of Owner or Applicant		Local Plumbing Inspector Signature _____	
		(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>TRENCH</u> Year Installed: <u>50'S</u> 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion c. <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 Variance a. <input type="checkbox"/> Local Plumbing Inspector approval b. <input type="checkbox"/> State & Local Plumbing Inspector approval 3. <input checked="" type="checkbox"/> 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 type="checkbox"/> Complete Non-engineered System 2. <input type="checkbox"/> Primitive System (graywater & alternative toilet) 3. <input type="checkbox"/> Alternative Toilet, specify _____ 4. <input type="checkbox"/> Non-engineered Treatment Tank (only) 5. <input type="checkbox"/> Holding Tank, capacity _____ gallons 6. <input checked="" 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"/> Pretreatment, specify _____ 12. <input type="checkbox"/> Miscellaneous Components
<b>SIZE OF PROPERTY</b> .5+/- <input type="checkbox"/> Sq. Ft. <input checked="" type="checkbox"/> Acres	<b>DISPOSAL SYSTEM TO SERVE</b> 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms <u>3</u> 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ 3. <input type="checkbox"/> Other: _____ SPECIFY _____	<b>TYPE OF WATER SUPPLY</b> <input type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input checked="" type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other <u>TOWN/CITY WATER</u>
<b>SHORELAND ZONING</b> <input type="checkbox"/> Yes <input checked="" 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 (see note) 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>1296</u> <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	<b>GARBAGE DISPOSAL UNIT</b> 1. <input checked="" type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Maybe >> If yes/maybe, specify one below: a. <input type="checkbox"/> Multi-compartment tank b. <input type="checkbox"/> Tank in series c. <input type="checkbox"/> Increase tank capacity d. <input type="checkbox"/> Filter on tank outlet	<b>DESIGN FLOW</b> <u>270</u> gallons-per-day (gpd) BASED ON: 1. <input checked="" type="checkbox"/> Table 501.1 (dwelling unit(s)) 2. <input type="checkbox"/> Table 502.2 (other facilities) SHOW CALCULATIONS-- for other facilities -- LARGE - 4.1 SQ. FT./GPD 3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA
<b>SOIL DATA &amp; DESIGN CLASS</b> PROFILE <u>8</u> • CONDITION <u>D</u> • DESIGN <u>3</u> at Observation Hole # <u>TP-1</u> Depth <u>14</u> " Elevation <u>-76</u> " 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 type="checkbox"/> Medium-Large - 3.3 sq. ft./gpd 4. <input checked="" type="checkbox"/> Large - 4.1 sq. ft./gpd 5. <input type="checkbox"/> Extra-Large - 5.2 sq. ft./gpd	<b>EFFLUENT/EJECTOR PUMP</b> 1. <input checked="" type="checkbox"/> Not required 2. <input type="checkbox"/> May be required 3. <input type="checkbox"/> Required >> Specify dose for engineered & experimental systems DOSE: _____ gallons	<b>LATITUDE AND LONGITUDE</b> at center of disposal area Lat 44 d m20 s 320 Lon 69 d m46 s 548 if g.p.s. state margin of error: <u>34</u>

## SITE EVALUATOR STATEMENT

I certify that on 6/2/2008 (date) I completed a site evaluation on this property and state that the data reported herein are accurate and that the proposed system is in compliance with the Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

*[Signature]*  
 Site Evaluator Signature

181 SE # \_\_\_\_\_ Date 6/3/2008

JOHN ARCHARD  
 Site Evaluator Name Printed

207-293-2674 Telephone # \_\_\_\_\_ 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  
**313 WEST RIVER ROAD**

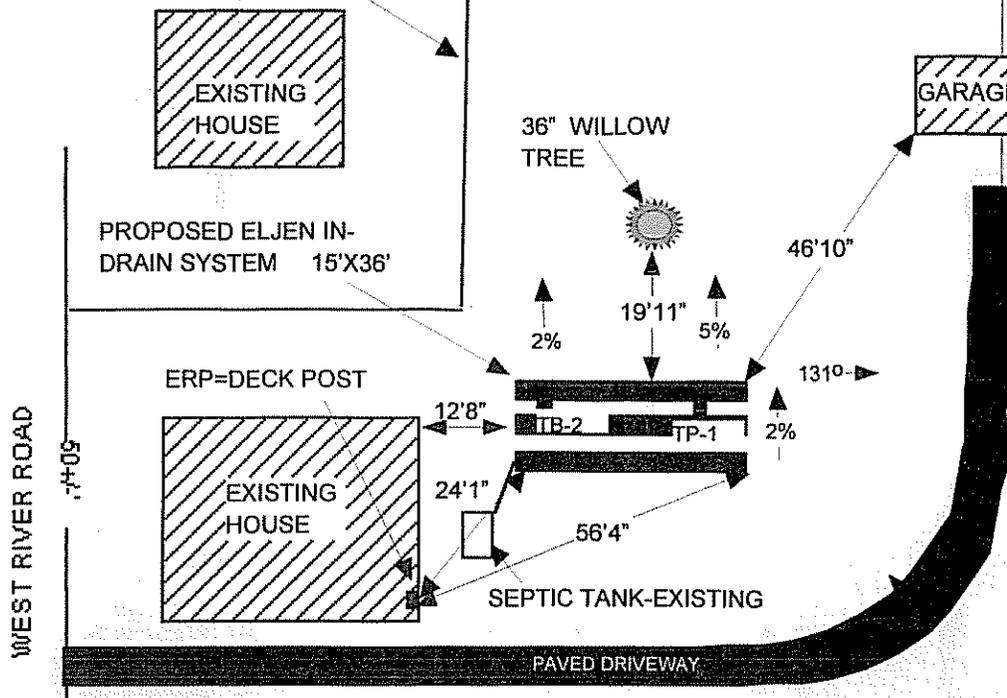
Name of Owner  
**DUTIL**

APPROXIMATE  
PROPERTY LINE

## SITE PLAN

Scale 1" = 30' Ft.  
or as shown

SITE LOCATION PLAN  
(Attach map from *The Maine Atlas* for  
First Time Variance)



### NOTES:

1. Remove any portion of the existing system encountered and replace with suitable fill.
2. Existing tank **MUST** be pumped, baffles inspected and repaired if needed prior to connection to the new disposal area or the tank shall be replaced if not repairable.

## SOIL DESCRIPTION AND CLASSIFICATION

(Location of Observation Holes Shown Above)

Observation Hole # TP-1 Test Pit  Boring

N/A " Depth of Organic Horizon above Mineral Soil

Texture	Consistency	Color	Mottling
0			
6	FRIABLE	BROWN	NONE EVIDENT
10			
15		OLIVE BROWN	COMMON
20	FIRM		FAINT TO
24		OLIVE	COMMON
30			DISTINCT
42			
48			

Soil Classification: **8 D**  
Profile Condition  
Slope: **2** %  
Limiting Factor: **14** " Depth  
 Ground Water  
 Restrictive Layer  
 Bedrock

Observation Hole # TP-2 Test Pit  Boring

N/A " Depth of Organic Horizon above Mineral Soil

Texture	Consistency	Color	Mottling
0			
6	FRIABLE	BROWN	NONE EVIDENT
10			
15		OLIVE BROWN	COMMON
20	FIRM		FAINT TO
24		OLIVE	COMMON
30			DISTINCT
42			
48			

Soil Classification: **8 D**  
Profile Condition  
Slope: **2.5** %  
Limiting Factor: **14** " Depth  
 Ground Water  
 Restrictive Layer  
 Bedrock

*[Signature]*  
Site Evaluator Signature

181  
SE#

6/3/2008  
Date

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HHE-200 Rev. 6/01

# SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

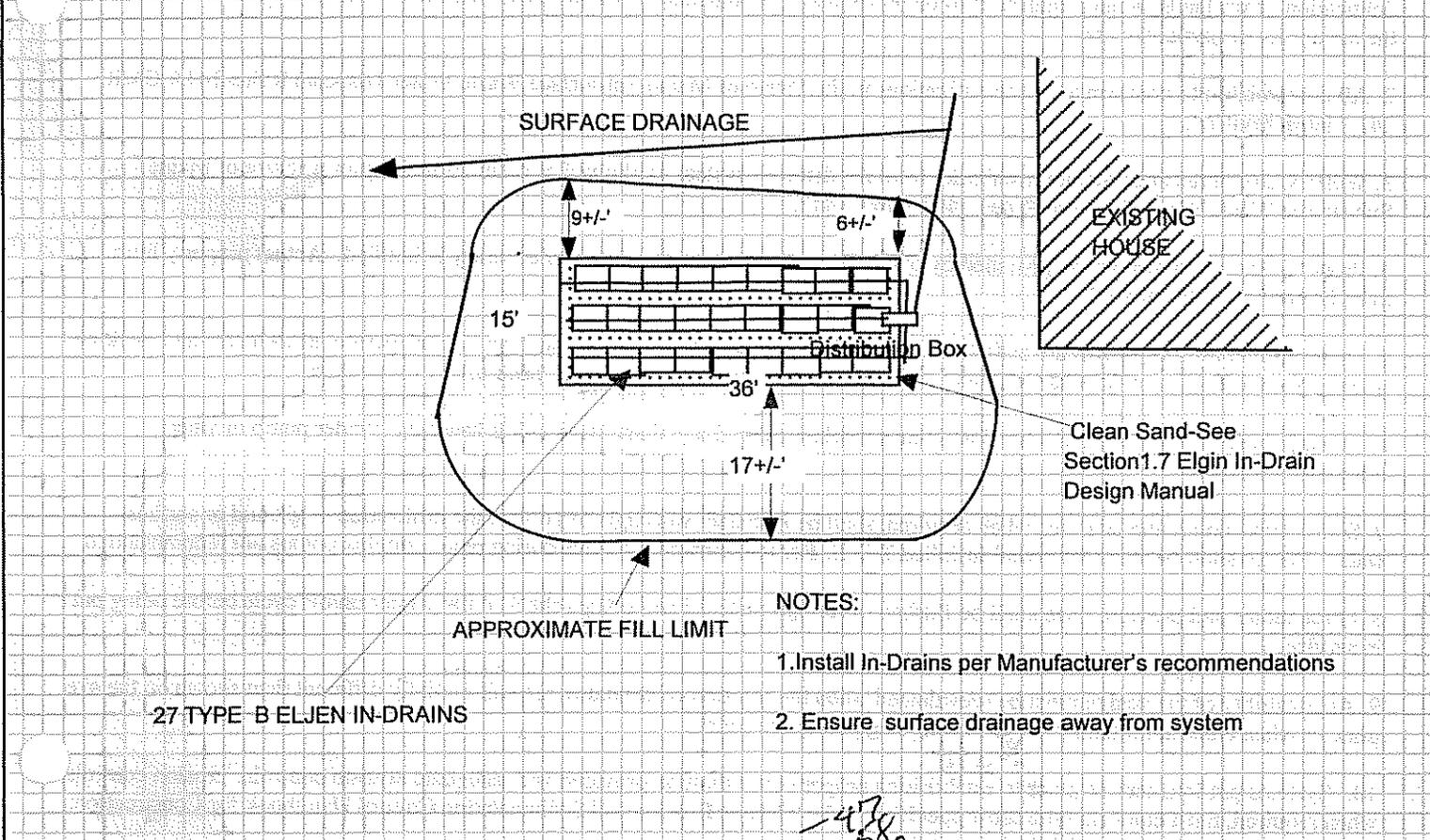
Town, City, Plantation  
**AUGUSTA**

Street, Road, Subdivision  
**313 WEST RIVER ROAD**

Name of Owner  
**DUTIL**

## SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.



**NOTES:**

1. Install In-Drains per Manufacturer's recommendations
2. Ensure surface drainage away from system

27 TYPE-B ELJEN IN-DRAINS

**BACKFILL REQUIREMENTS**

**CONSTRUCTION ELEVATIONS**

**ELEVATION REFERENCE POINT**

Depth of Backfill (Upslope)	28-32	Finished Grade Elevation	-34"
Depth of Backfill (Downslope)	32-36	Top of Distribution Pipe or Proprietary Device	-45"
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-58"

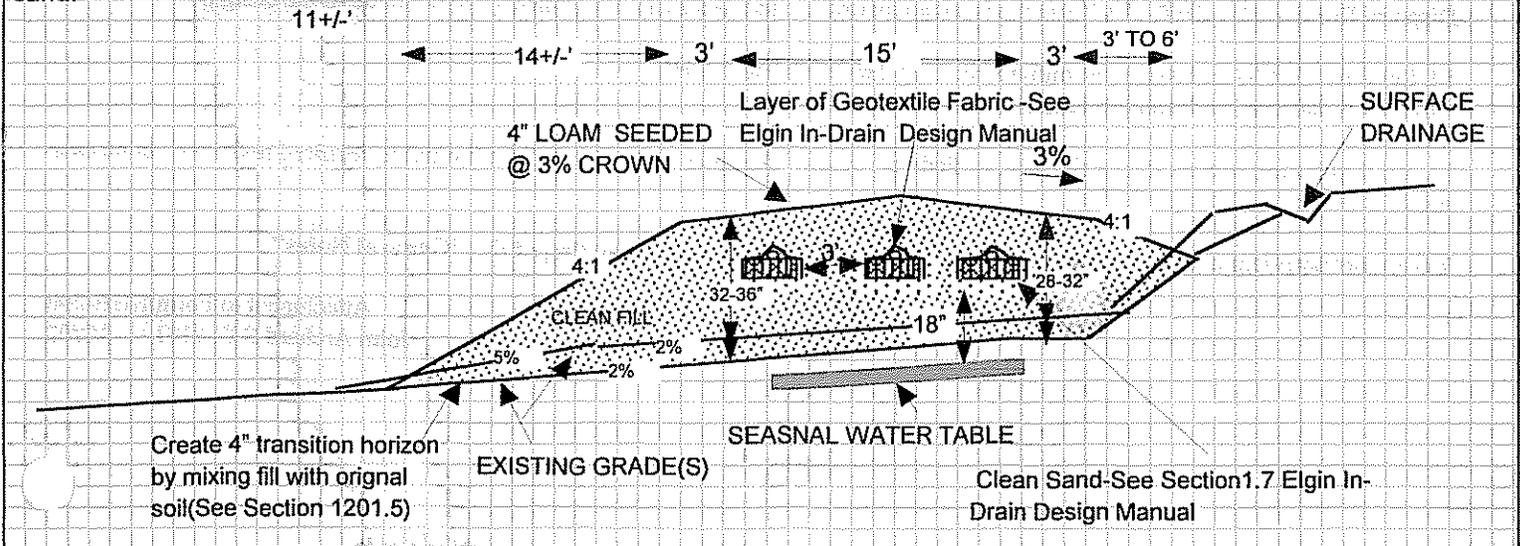
Location & Description	FLAGGED NAIL IN 6" POS
	UNDER DECK 25.5" ABOVE GROUND
Reference Elevation is:	0.0" or: _____

**DISPOSAL AREA CROSS SECTION**

Scales:

Vertical: 1" = 4 Ft.  
 Horizontal: 1" = 10 Ft.

Note: All fill to be coarse, gravelly, sharp, clean sand.



Create 4" transition horizon by mixing fill with original soil (See Section 1201.5)

Clean Sand-See Section 1.7 Elgin In-Drain Design Manual

*[Signature]*  
 Site Evaluator Signature

181  
 SE#

6/3/2008  
 Date

Page 3 of 3  
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## GENERAL NOTES

1. Site evaluations conform to the criteria of the "State of Maine Subsurface Waste Water Disposal Rules-1 44A CMR 241 latest revision. Other environmental concerns are not evaluated and may require additional professional opinions and/or permits. The delineation of wetlands, when required, is to be performed by competent consultants experienced in such practice and may affect the suitability of particular sites.
2. All construction to conform to the specifications in the "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241 " latest revision.
3. Wells & structures must maintain setbacks from the disposal system as allowed or required in Chapter 4 "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 241".
4. Property lines as shown are as provided by owner/owner's agent; no guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
5. Underground utilities shown are as indicated by the owner/operator or their agent. The owner/operator shall locate and mark all underground utilities, notify "Dig Safe" and the excavation contractor, as required, prior to any excavation.
6. A septic tank filter is required when installing a mechanical garbage disposal or solids handling grinder pump or when otherwise specified.
7. Septic tanks and pump stations, when required, shall be installed watertight to prevent the infiltration of ground or surface water. Pumps shall be sized for actual installed T.D.H. For uninterrupted service during repair, duplex pumps are recommended.
8. Force mains and pressure lines shall be flushed of foreign material and pumps checked for proper on/off cycle before being put in service.
9. Applicability of the design must be reevaluated when the location of structures are substantially different than shown on the site plan, or when other appurtenances (i.e.: swimming pools) are added.
10. Systems put into service prior to establishing proper cover shall be provided with adequate erosion controls. Erosion controls, when required, must conform with those specified in the "Maine Erosion and Sedimentation Control Handbook for Construction: Best Management Practices" DEP March 1991
11. Provide low profile tanks when determined as needed in the field. All tanks may be field located and meet the setback requirements of Chapt. 4 "State of Maine Subsurface Waste Water Disposal Rules-144A CMR 24 ".
12. All components subject to freezing must be adequately insulated.
13. The LPI shall inform the owner and designer of any local ordinances exceeding the "State of Maine Subsurface Waste Water Disposal Ruics-1 44A CMR 241 " prior to issuing a permit so that necessary amendments can be made to the design.
14. Systems must be maintained as outlined in "Top Ten Tank Tips" DHE  
<http://www.state.me.us/dhs/eng/plumb/Adobe/top10tips.pdf>
15. All designs are subject to Local, State, or Federal review. Designer's liability shall be limited to required revisions. In no case shall liability exceed designers fee.

The owner/applicants signature on page one acknowledges their understanding of the "General Notes"

Attachment to Form HHE-200  
John Archard S.E. #181 3/2/02