

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

PROPERTY LOCATION

or ation: **AUGUSTA**

Street Subdivision Lot: **CHURCH HILL ROAD**

PROPERTY OWNER'S NAME

Last: **GIDNEY** First: **FRANKLIN**

Applicant's Name: **Box 1064 RTI**

Mailing Address of Owner: **AUGUSTA, ME. 04330**

Daytime Tel.: **622-0054**

AUGUSTA Permit Issued: 8/31/99 4258 \$ 1200 **TDAN COPY** If Double Fee Charged

[Signature] L.P.I. # 1850

Local Plumbing Inspector Signature

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

[Signature] Date _____

Signature of Owner/Applicant

Municipal Tax Map: 3 Lot: 45A

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] Date Approved _____

Local Plumbing Inspector Signature

PERMIT INFORMATION

TYPE OF APPLICATION:

- First Time System
- Replacement System
Type Replaced _____
Year Installed _____
- Expanded System
 - a. one time exempted
 - b. non exempted
 - Experimental System
 - Seasonal Conversion

THIS APPLICATION REQUIRES:

- No Rule Variance
- First Time System Variance
 - a. Local Plumbing Inspector approval
 - b. State & Local Plumbing Inspector approval
- Replacement System Variance
 - a. Local Plumbing Inspector approval
 - b. State & Local Plumbing Inspector approval
- Minimum Lot Size Variance
- Seasonal Conversion Approval

DISPOSAL SYSTEM COMPONENT(S)

- Non-Engineered System
- Primitive System (graywater & alt toilet)
- Alternative Toilet _____
- Non-Engineered Treatment Tank
- Holding Tank _____ Gallons
- Non-Engineered Disposal Area (only)
- Separated Laundry System
- Engineered System (>2000 gpd)
- Engineered Treatment Tank (only)
- Engineered Disposal Area (only)
- Pretreatment

SIZE OF PROPERTY

75 AC ±

SHORELAND ZONING

Yes No

DISPOSAL SYSTEM TO SERVE:

- Single Family Dwelling Unit
- Multiple Family Dwelling: Number of Units _____
- Other _____

TYPE OF WATER SUPPLY

DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- Concrete **NEW**
 - a. Regular
 - b. Low Profile
- Plastic
- Other _____

SIZE **1000** Gallons

DISPOSAL AREA TYPE / SIZE

- Bed **900** Sq. Ft.
- Proprietary Device _____ Sq. Ft.
 - Cluster Linear
 - Regular H-20
- Trench
- Other _____

GARBAGE DISPOSAL UNIT

- No
- Yes
 - Multi-compartment tank
 - Tank in series
 - Increase in tank capacity
 - Filter on tank outlet

CRITERIA USED FOR DESIGN FLOW (Show Calculations)

2 BED ROOM

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

PROFILE & DESIGN CLASS

PROFILE: 9 DESIGN: D

DEPTH TO MOST LIMITING FACTOR: 9 "

DISPOSAL AREA SIZING

- Small - 2.00
- Medium - 2.60
- Medium-Large - 3.30
- Large - 4.10
- Extra-Large - 5.20

PUMPING

- Not required
- May be required
- Required

DOSE _____ Gallons

SITE EVALUATOR'S STATEMENT

On 8/31/99 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules.

[Signature]
Site Evaluator Signature
TERRY ADAMS
Site Evaluator Name Printed

132
SE •
582-1642
Telephone

7/26/99
Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation
AUGUSTA

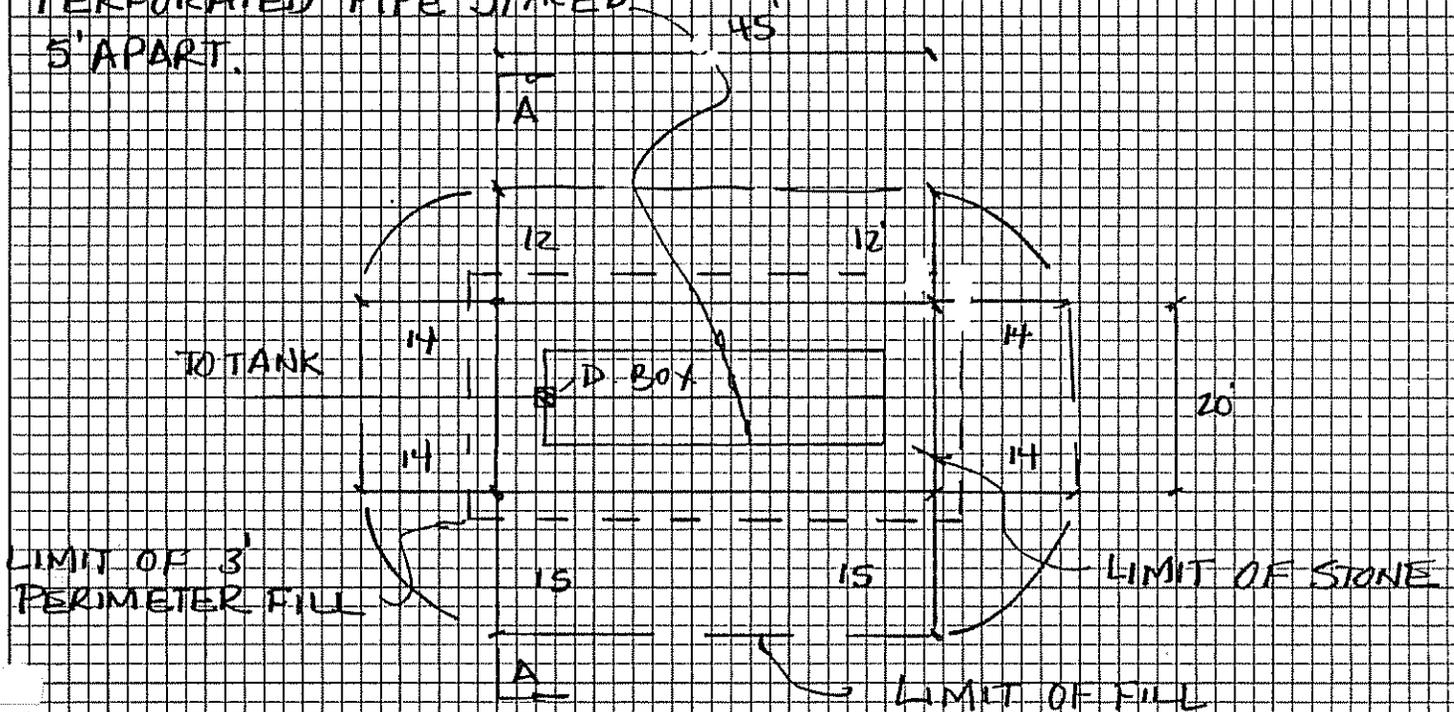
Street, Road, Subdivision
CHURCH HILL RD

Owner's Name
GIDNEY

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE 1" = 20 FT.

3-35' LENGTHS OF 4" DIA.
 PERFORATED PIPE SPACED
 5' APART.

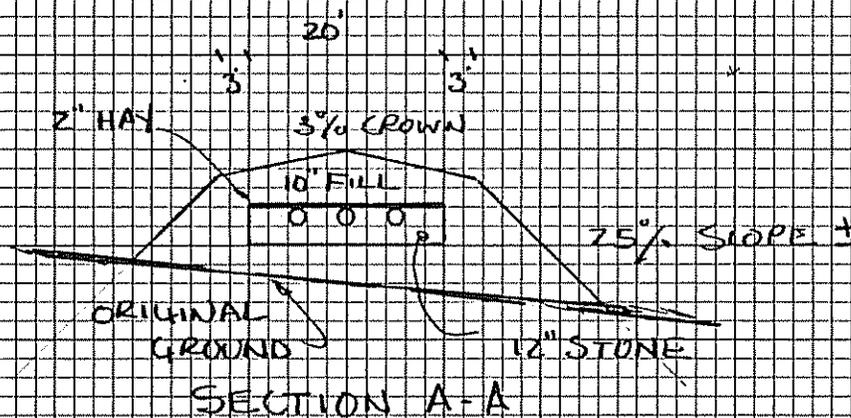


SEE NOTES FROM THE SITE EVALUATOR

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT	
Depth of Fill (Upslope)	<u>33</u>	Finished Grade Elevation	- 21	Location & Description	TRIM (BOTTOM)
Depth of Fill (Downslope)	<u>39</u>	Top of Distribution Pipe or Proprietary Device	- 34	Reference Elevation	0-00
		Bottom of Disposal Area	- 45		

DISPOSAL AREA CROSS SECTION

SCALE:
 VERTICAL: 1" = 5'
 HORIZONTAL: 1" = 20'



Tim Colson
 Site Evaluator Signature

132
 SE *

2/26/99
 Date

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. 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 BOD₅ plus S.S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION		Town of <u>AUGUSTA</u>
Permit No. <u>4258</u>		Date Permit Issued <u>8/31/99</u>
Property Owner's Name: <u>FRANKLIN GIDNEY</u>		Tel. No.: <u>622-0054</u>
System's Location: <u>CHURCH HILL ROAD</u>		
Property Owner's Address: <u>SAME</u>		
(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.



 SIGNATURE OF OWNER

 DATE

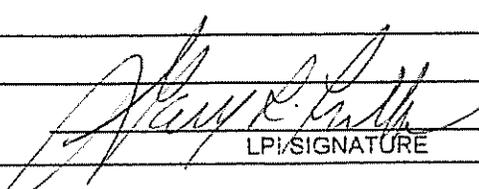
LOCAL PLUMBING INSPECTOR

I, _____, 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: _____



 LPI/SIGNATURE

8/31/99

 DATE

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY				VARIANCE REQUESTED TO:	
	SOILS					
Soil Profile	Ground Water Table		to 7"		9 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 ^a ft	300 ^a ft	100 ^a ft	100 ^a ft		
Owner's wells	100 down to 50 ft	200 down to 100 ft	100 ^b down to 50 ft	100 down to 50 ft		
Neighbor's wells	100 ^b down to 60 ft	200 ^b down to 120 ft	100 ^b down to 50 ft	100 ^b down to 75 ft		
Water supply line	10 ft ^a	20 ft ^a	10 ft ^a	10 ft ^a		
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	60	
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		
Coastal wetlands, special freshwater wetlands, great ponds, rivers, streams (edge of fill extension)	25 ft ^d	25 ft ^d	25 ft ^d	25 ft ^d		
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 ^c ft	18 ft down to 9 ^c ft	10 ft down to 4 ^c ft	15 ft down to 7 ^c ft		
Burial sites or graveyards, measured from the down toe of the fill extension	25 ft	25 ft	25 ft	25 ft		

OTHER

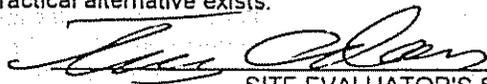
1. Fill extension Grade - to 3:1

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.



SITE EVALUATOR'S SIGNATURE

7/26/99
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

NOTES FROM THE SITE EVALUATOR

1. System shall be installed in accordance with the Maine State Plumbing Code.
 2. Remove vegetation from the proposed disposal area and scarify original ground before placing fill.
 3. Fill shall be clean, coarse sand to gravelly sand. See section 120310 of the Maine Subsurface Waste Water Disposal rules.
 4. All stone shall be of uniform size, and free of fines.
 5. Site shall be graded in a manner which will divert surface water from the bed.
 6. Grass, clover, trefoil, vetch, perennial wild flowers, or other herbaceous perennials may be planted on disposal area surfaces. Woody shrubs in conjunction with a hardy perennial ground cover, may only be used on fill extensions.
 7. If this application includes a new system variance request, it is assumed that this site is not part of a proposed subdivision.
 8. "Permit By Rule"--When the toe of fill for a system extends closer than 100' to a wetland or water body, even though the system itself is 100' or more from the wetland or water body, or when a system requires a Replacement System Variance, the applicant may be required to file a "Permit By Rule" notification from or a complete application form with the D.E.P.
- "Permit By Rule" does not take the place of any other local, state, or federal approvals which may be needed for the proposed activity. In specific instances, the activity may require a shore land zoning permit from the town, a lease from the Bureau of Public Lands (207-289-3061) if the work extends onto state owned submerged lands, or a permit from the U.S. Army Corps of Engineering (207-623-8367).
9. If a system requires a pump, it shall be vented in accordance with standard practice. It is recommended that the required audible high water alarm be installed on the premises on a different electrical circuit from the pump.
 10. As a general rule, a septic tank should be cleaned every two years. It is recommended that no commercial septic tank additives be used.
 11. Unless otherwise stated this design does not provide for the use of a garbage disposal. If one is to be added, contact the site evaluator in order that he may alter the design to accommodate the change.
 12. This site evaluation and design has been done in compliance with the Amine State Plumbing Code. The approval and/or design may be subject to more restrictive local ordinances. The local Plumbing Inspector is to be contacted for final review approval.
 13. By signature on this application, the client agrees with the location of lot lines, wells and other physical features shown and further agrees to limit North By East Associates liability to the original cost of installation of the system or North By East Associates' total fee for services rendered on this project, whichever is greater.