* 622-1640 Mr. Blaisdell called 9/5 8:15 TOW

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 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 AUGUSTA

Permit No. 4944 Date Permit Issued 9/4/02

Property Owner's Name: SUZANNE GRANT + BARBARA SELDIN Tel. No.: (845) 358-3507

System's Location: 84 THURSTON RD AUGUSTA ME 04330

Property Owner's Address: C/O ED GRANT

(If different from above) 114 LOCUST DR. NYACK N.Y. 10960

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.

Barbara Seldin — SIGNATURE OF OWNER — 8/29/02 DATE

LOCAL PLUMBING INSPECTOR

I, George A. Bucciarelli, 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: The applicant has been informed that it must be present for the installation at the septic tank.

George A. Bucciarelli — LPI SIGNATURE — 9/4/02 DATE

HHE-204 Rev 6/00

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		25' OR MORE SEE TABLE 700.3
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

2.

3.

Footnotes:
a. This setback distance cannot be reduced by the LPI, but may be considered for reduction by State variance.
b. May not be any closer to neighbor's well than the existing disposal field or septic tank unless written permission is granted by the neighbor.
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 — DATE 8/26/02

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, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA
Street or Road	84 THURSTON RD.
Subdivision, Lot #	

>> CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW <<

AUGUSTA 4944 TOWN COPY

Date Permit Issued: 9/4/02 $ 120.00 ☐ If Double Fee Charged

Local Plumbing Inspector Signature L.P.I. # 1898

OWNER/APPLICANT INFORMATION

Name (last, first, MI) ☒ Owner ☐ Applicant

GRANT, SUZANNE + SELDIN, BARBARA

Mailing Address of Owner/Applicant	C/O ED GRANT 114 LOCUST DRIVE NYACK NY 10960
Daytime Tel. #	(845) 358-3507

Municipal Tax Map # 4 Lot # 144

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 Date 9/4/02

CAUTION: INSPECTION REQUIRED

I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. 11/14/02 RD (1st) date approved

Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

- ☐ 1. First Time System
- ☒ 2. Replacement System
  - Type replaced: CESSPOOLS
  - Year installed: 1933±
- ☐ 3. Expanded System
  - ☐ a. Minor Expansion
  - ☐ b. Major Expansion
- ☐ 4. Experimental System
- ☐ 5. Seasonal Conversion

THIS APPLICATION REQUIRES

- ☐ 1. No Rule Variance
- ☐ 2. First Time System Variance
  - ☐ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☒ 3. Replacement System Variance
  - ☒ a. Local Plumbing Inspector Approval
  - ☐ b. State & Local Plumbing Inspector Approval
- ☐ 4. Minimum Lot Size Variance
- ☐ 5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

- ☒ 1. Complete Non-engineered System
- ☐ 2. Primitive System (graywater & alt. toilet)
- ☐ 3. Alternative Toilet, specify: _____
- ☐ 4. Non-engineered Disposal Area
- ☐ 5. Holding Tank, _____ gallons
- ☐ 6. Non-engineered Disposal Field (only)
- ☐ 7. Separated Laundry System
- ☐ 8. Complete Engineered System (2000 gpd or more)
- ☐ 9. Engineered Treatment Tank (only)
- ☐ 10. Engineered Disposal Field (only)
- ☐ 11. Pre-treatment, specify: _____
- ☐ 12. Miscellaneous Components

SIZE OF PROPERTY

60,000 ± ☒ SQ. FT. ☐ ACRES

SHORELAND ZONING

☒ Yes ☐ No

DISPOSAL SYSTEM TO SERVE

- ☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 4
- ☐ 2. Multiple Family Dwelling, No. of Units: _____
- ☐ 3. Other: _____ (specify)

Current Use ☒ Seasonal ☐ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY

OFF-LOT

☒ 1. Drilled Well ☐ 2. Dug Well ☐ 3. Private ☐ 4. Public ☐ 5. Other

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK

- ☒ 1. Concrete
  - ☒ a. Regular
  - ☐ b. Low Profile
- ☐ 2. Plastic
- ☐ 3. Other: _____

CAPACITY: 1500 GAL.

DISPOSAL FIELD TYPE & SIZE

- ☒ 1. Stone Bed ☐ 2. Stone Trench
- ☐ 3. Proprietary Device
  - ☐ a. cluster array ☐ c. Linear
  - ☐ b. regular load ☐ d. H-20 load
- ☐ 4. Other: _____

SIZE: 1188 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

☒ 1. No ☐ 2. Yes ☐ 3. Maybe

If Yes or Maybe, specify one below:

- ☐ a. multi-compartment tank
- ☐ b. ___ tanks in series
- ☐ c. increase in tank capacity
- ☐ d. Filter on Tank Outlet

DESIGN FLOW

360 gallons per day

BASED ON:

- ☒ 1. Table 501.1 (dwelling unit(s))
- ☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS — for other facilites —

SOIL DATA & DESIGN CLASS

PROFILE	CONDITION	DESIGN
3	C	1

at Observation Hole # TP1

Depth 20"

of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- ☐ 1. Small—2.0 sq. ft. / gpd
- ☐ 2. Medium—2.6 sq. ft. / gpd
- ☒ 3. Medium—Large 3.3 sq. ft / gpd
- ☐ 4. Large—4.1 sq. ft. / gpd
- ☐ 5. Extra Large—5.0 sq. ft. / gpd

EFFLUENT/EJECTOR PUMP

- ☐ 1. Not Required
- ☐ 2. May Be Required
- ☒ 3. Required

Specify only for engineered systems:

DOSE: _____ gallons

- ☐ 3. Section 503.0 (meter readings) ATTACH WATER METER DATA

SITE EVALUATOR STATEMENT

I certify that on 8-26-02 (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). as per Variance.

Site Evaluator Signature — SE # 168 — Date 8-26-02

JOHN W. LORD JR.

Site Evaluator Name Printed

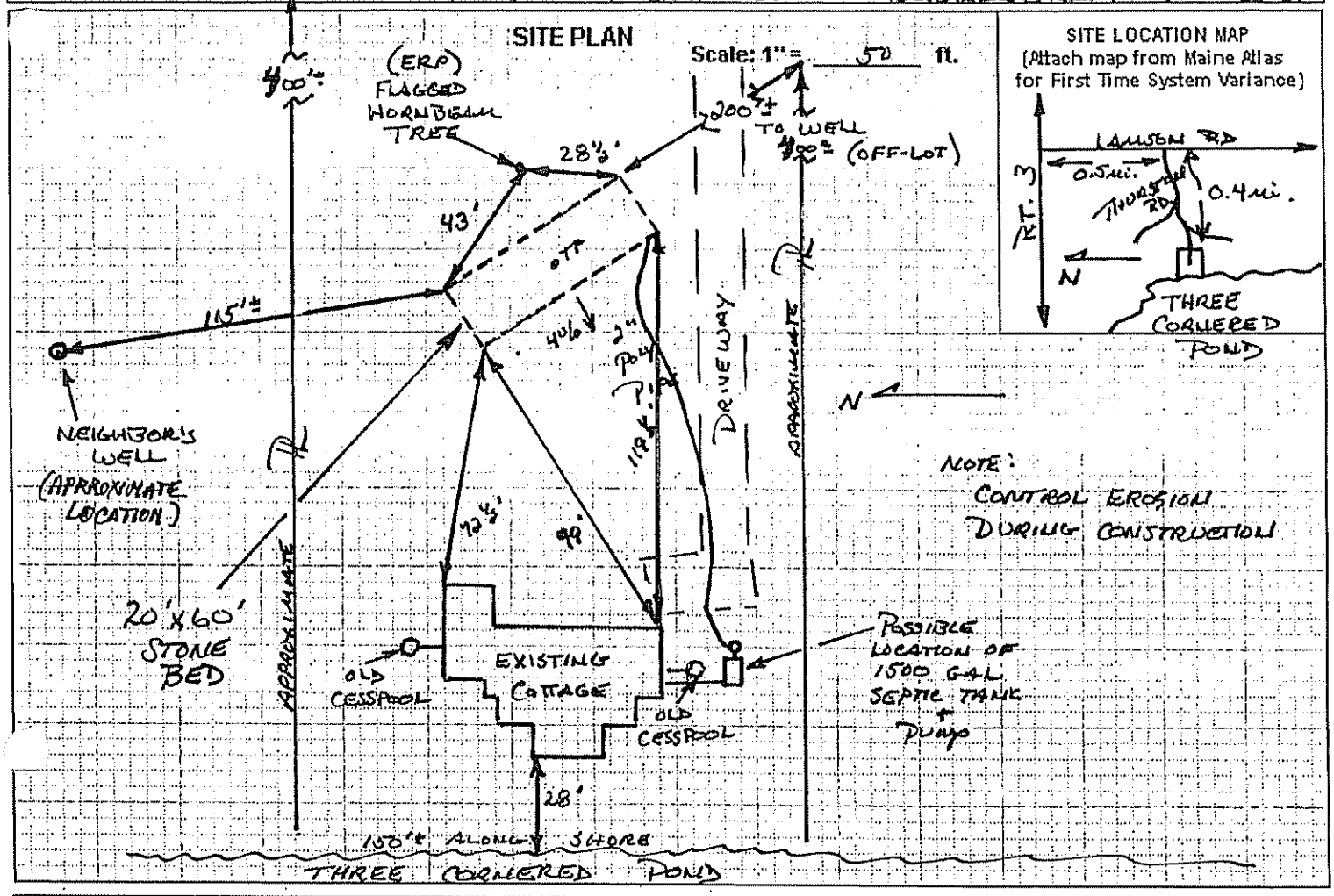
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

DESIGN SUBJECT TO LOCAL, STATE + FEDERAL ORDINANCES.

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	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	84 THURSTON RD.	SUZANNE GRANT + BARBARA SELDEN



SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above)

Observation Hole # TP 1 ☒ Test Pit ☐ Boring

ONE " Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0–6			BROWN	
6–12	FINE	FRIABLE	YELLOW	
12–18	SANDY		BROWN	
18–24				
24–30	LOAM	FIRM	OLIVE BROWN	COMMON DISTINCT
30–36				
36–42				
42–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
3	C	4	20	☒ Groundwater ☒ 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
0–6				
6–12				
12–18				
18–24				
24–30				
30–36				
36–42				
42–48				

Soil Profile	Classification Condition	Slope Percent	Limiting Factor Depth	
				☐ Groundwater ☐ Restrictive Layer ☐ Bedrock

Site Evaluator Signature _____ SE # 168 Date 8-26-02

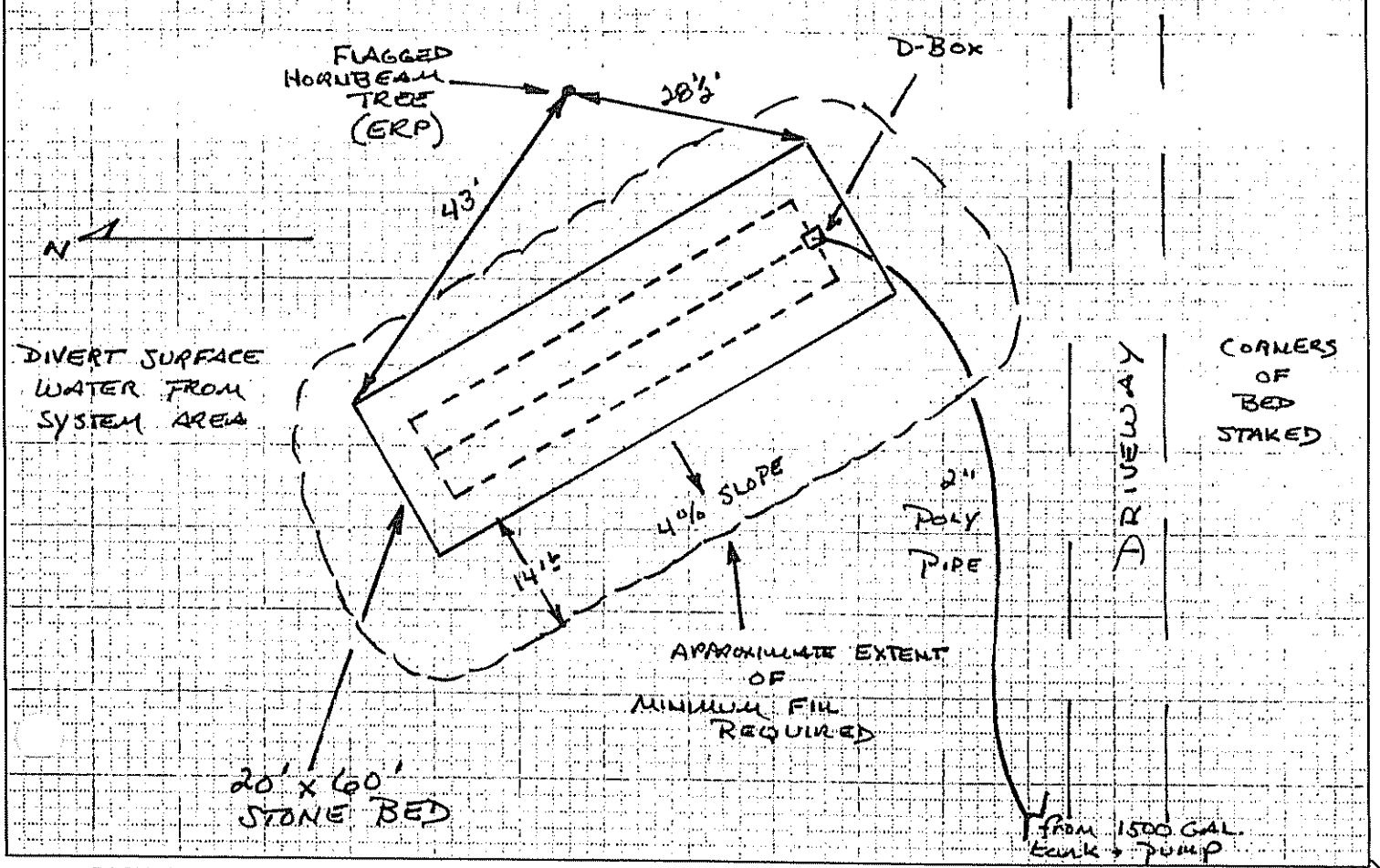
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owner or Applicant Name
AUGUSTA	84 THURSTON RD	SUZANNE GRANT + BARBARA SEIDIN

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT (ERP)
Depth of Backfill (upslope)	16 "	Finished Grade Elevation	-38 "	Location & Description: FLAGGED NAIL IN ~~FLAGGED HORNBEAM~~ TREE 36" ABOVE EXISTING GRADE AT TREE.
Depth of Backfill (downslope)	26± "	Top of Distribution Pipe ~~or Proprietary Device~~	-51 "	
DEPTHS AT CROSS-SECTION (shown below)		Bottom of Disposal Field	-62 "	Reference Elevation is: 0.0" @

DISPOSAL FIELD CROSS-SECTION

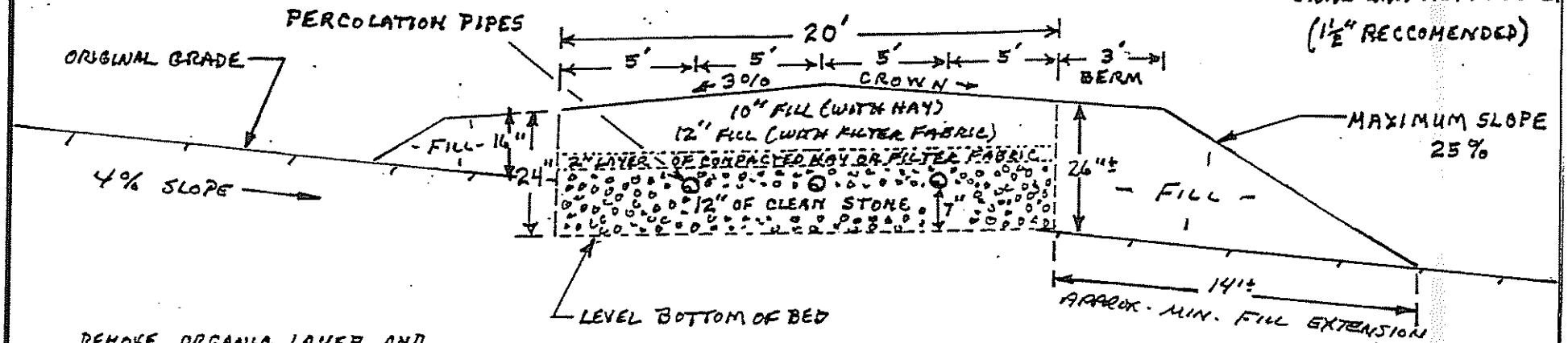
Scales:
Vertical: 1" = _____ ft.
Horizontal: 1" = _____ ft.

(SEE ATTACHED BED DIAGRAM)

Site Evaluator Signature	SE #	Date
[signature]	168	8-26-02

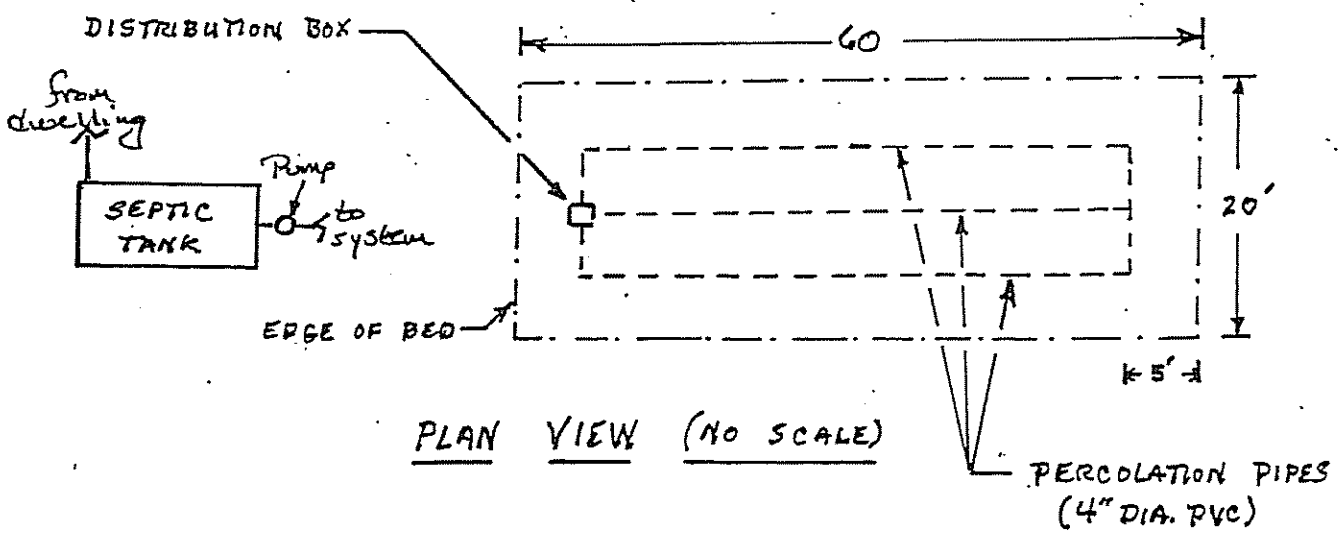
SEWAGE DISPOSAL BED DETAILS

BED REQUIRES CLEAN STONE UNIFORM IN SIZE. (1½" RECCOMENDED)



REMOVE ORGANIC LAYER AND SCARIFY THE SOIL SURFACE BEFORE INSTALLING FILL.

BED CROSS SECTION (NO SCALE)



PLAN VIEW (NO SCALE)

NOTES

1.) 16 INCHES OF FILL IS REQUIRED AT UPHILL SIDE OF BED.

2.) TEXTURE OF FILL SHALL BE GRAVELLY COARSE SAND.

3.) REFER TO MAINE SUBSURFACE WASTE WATER DISPOSAL RULES FOR FURTHER DETAILS REGARDING INSTALLATION PROCEDURES.

FOR: SUZANNE GRANT + BARBARA SELDIN

DATE: 8-26-02

BY: JOHN W. LORD, JR. S.E. #168

3/00

TABLE 700.3

Setback distances for replacement systems and/*or* expansions outside the shoreland zone of major waterbodies/courses with plumbing inspector approval.

[Only if the site evaluator determines there is no practical alternative and the plumbing inspector approves.]

Site features vs disposal system components of various sizes	Disposal Fields			Septic Tanks and Holding Tanks		
	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd	Less than 1000 gpd	1000 to 2000 gpd	Over 2000 gpd
Wells with water usage of 2000 or more gpd or public water supply wells	300 ft	300 ft	300 ft	100 ft	100 ft	100 ft
Owner's well	100 down to *60* ft [a]	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 (f)	100 down to 60 ft [f]	200 down to 120 ft [f]	300 down to 180 ft [f]	100 down to 50 ft [f]	100 down to 75 ft [f]	100 down to 75 ft [f]
Water supply line	10 ft	20 ft	25 ft [h]	10 ft	10 ft	10 ft [h]
Water course, major for replacements only, see Table 400.4 for exempted expansions	100 down to 60 ft [d]	200 down to 120 ft [d]	300 down to 180 ft [d]	100 ft [b]	100 ft	100 down to 50 ft
Water course, minor (e)	50 down to 25 ft [e]	100 down to 50 ft [e]	150 down to 75 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]	50 down to 25 ft [e]
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 (e)	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]	25 ft [e]
Slopes greater than 3:1	10 ft [g]	18 ft [g]	25 ft [g]	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 ft down to 10 ft [c]	10 down to 4 ft [c]	15 down to 7 ft [c]	20 ft down to 10 ft [c]
Burial sites or graveyards, measured from the toe of the fill extension	25 ft	25 ft	25 ft	25 ft	25 ft	25 ft

Notes:

[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 *701.4*.

[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.