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. 5567 Date Permit Issued 7/5/05

Property Owner's Name: Clement Beaulieu Tel. No.: 622-0806

System's Location: 123 Church Hill Rd

Property Owner's Address: Augusta, Me 04330

(if different from above) Same

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

Clement Beaulieu — SIGNATURE OF OWNER — 7/5/05 — DATE

LOCAL PLUMBING INSPECTOR

I, Gary R. Fuller, 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, the reasons shall be stated in Comments Section below as to why the proposed replacement system is not being recommended.

Comments

Gary R. Fuller — LPI SIGNATURE — 7/5/05 — DATE

HHE-204 Rev 10/02

Replacement System Variance Request

VARIANCE CATEGORY	LIMIT OF LPI'S APPROVAL AUTHORITY						VARIANCE REQUESTED TO:	
SOILS								
Soil Profile								
Soil Condition	Ground Water Table			to 7"				inches
Item HHE-200	Restrictive Layer			to 7"				inches
SETBACK DISTANCES (in feet)	Bedrock			to 12"				inches
	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	97'	
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 200.4 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		
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.] 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.

James W Marple
SITE EVALUATOR'S SIGNATURE

6/30/05
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

FORMS

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, Plantation: Augusta

Street or Road: Church Hill Rd.

Subdivision, Lot #:

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

AUGUSTA PERMIT # 5567 TOWN COPY

Date Permit Issued: 7/5/05 $ 175.00 ☐ If Double Fee Charged

FEE

L.P.I. # 850

Local Plumbing Inspector Signature

OWNER/APPLICANT INFORMATION

Name — Last, First, MI: Beaulieu, Clement ☒ Owner ☐ Applicant

Mailing Address of Owner/Applicant: 123 Chyrch Hill Rd. Augusta, Me 04330

Daytime Tel #: 622-0806

Municipal Tax Map # 7 Lot # 4C

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 or Local Plumbing Inspector to deny a Permit.

Clement Beaulieu 7/5/05

Signature of Owner or 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 Application

(1st) date approved

Local Plumbing Inspector Signature (2nd) date approved

PERMIT INFORMATION

TYPE OF APPLICATION

☐ 1. First Time System

☒ 2. Replacement System

Type replaced: V-Plank

Year installed:

☐ 3. Expanded System
☐ a. Major Expansion
☐ b. Major Expansion

☐ 4. Experimental System

☐ 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 Treatment Tank (only)
☐ 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 Outlet Filter
☐ 12. Miscellaneous Components

SIZE OF PROPERTY

2 SQ. FT. ☒ ACRES

SHORELAND ZONING

Yes ☒ No

DISPOSAL SYSTEM TO SERVE

☒ 1. Single Family Dwelling Unit, No. of Bedrooms: 3

☐ 2. Multiple Family Dwelling, No. of Units:

☐ 3. Other (specify)

Current Use: ☐ Seasonal ☒ Year Round ☐ Undeveloped

TYPE OF WATER SUPPLY

☒ 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 existing

CAPACITY: 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: 1120 ☒ 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

270 gallons per day

BASED ON:

☒ 1. Table 501.1 (dwelling unit(s))

☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS

--- for other facilites ---

☐ 3. Section 503.0 (meter readings)

ATTACH WATER METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN

1 C 1

at Observation Hole # 2

Depth 18

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---4.3 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

SITE EVALUATOR STATEMENT

I certify that on 6/16/05 (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).

James W. Marple — Site Evaluator Signature

S-304 — SE #

6/30/05 — Date

James W. Marple — Site Evaluator Name Printed

589-4305 — Telephone Number

E-mail Address

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

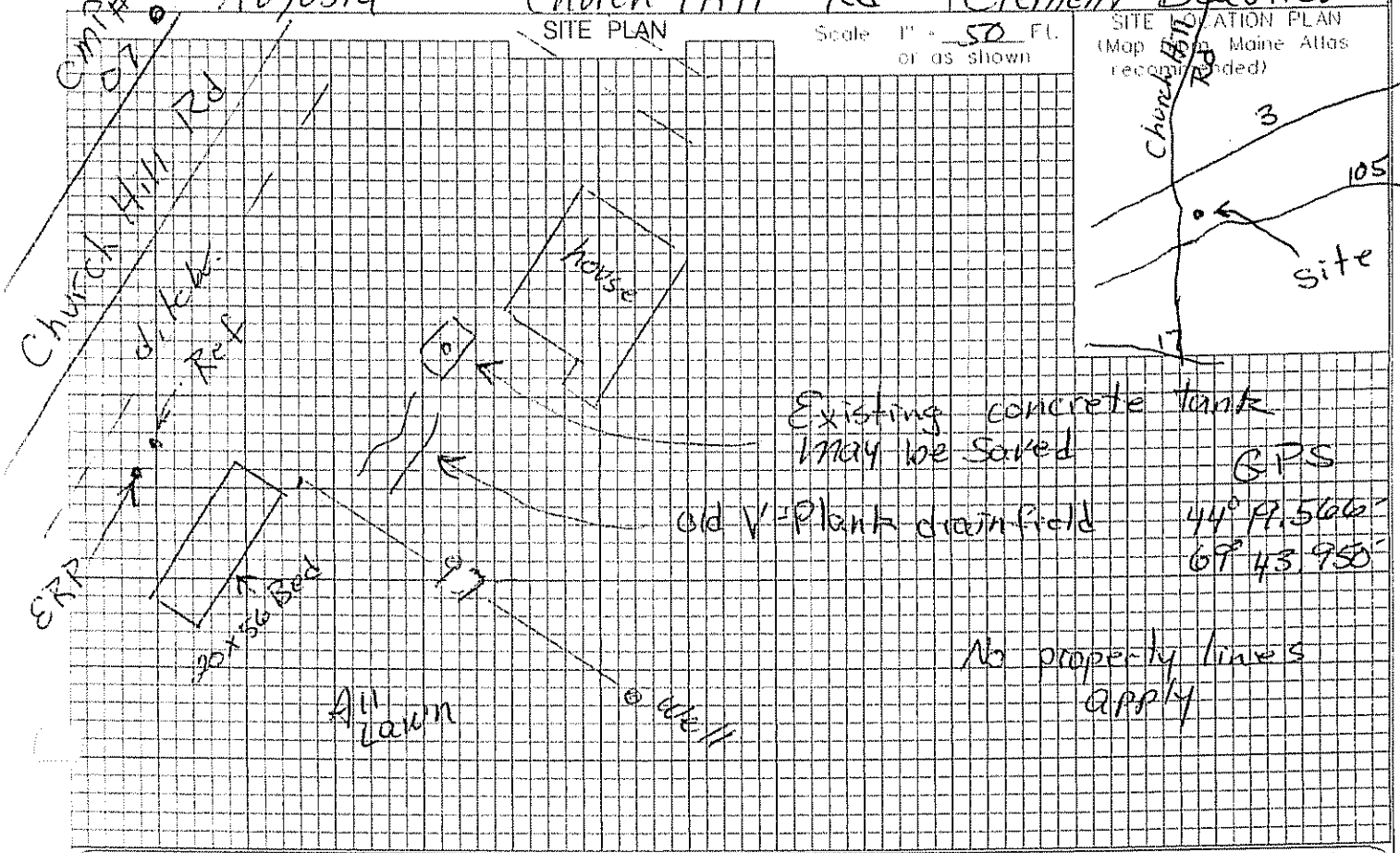
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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: Clement Beaulieu

SITE PLAN

Scale 1" = 50 Ft. or as shown



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

Observation Hole #1 ☐ Test Pit ☒ Boring
_____ " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	Silt	Friable	Brown	
10	Sandy Loam		Lite Brown	
20		Firm	olive	Prominent
30		Bottom of Boring		
40				
50				

Soil Classification		Slope	Limiting Factor	
1 (Profile)	C (Condition)	2 %	18 "	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole #2 ☐ Test Pit ☒ Boring
_____ " Depth of Organic Horizon Above Mineral Soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0	Silt	Friable	Brown	
10	Course Loamy Sand			
20	Silty Clay	Firm	Olive gray	Prominent
30				
40				
50				

Soil Classification		Slope	Limiting Factor	
1 (Profile)	C (Condition)	2 %	18 "	☒ Ground Water ☒ Restrictive Layer ☐ Bedrock ☐ Pit Depth

James W. Marple — Site Evaluator Signature
S 304 — SE #
6/30/05 — Date

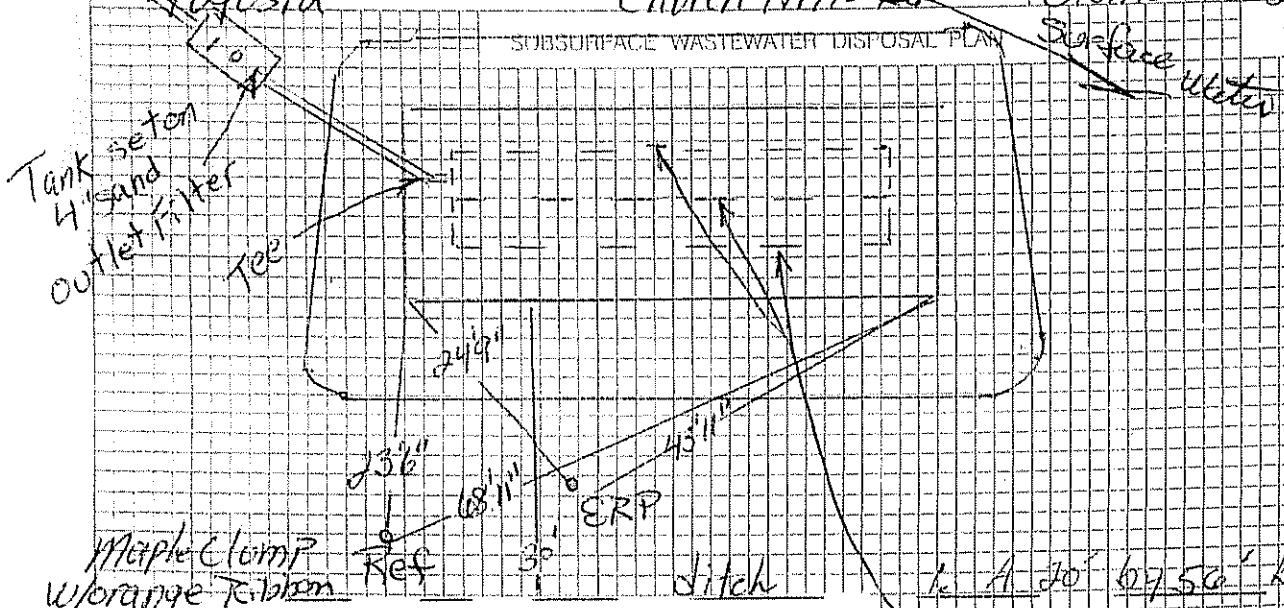
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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: Clement Beaulieu

SCALE 1" = 20 FT.

SUBSURFACE WASTEWATER DISPOSAL PLAN



1. A 20' by 56' bed.
2. 3, 4" distribution lines 46' long and spaced 5' apart.
3. Tank is 5' from slab or 8' from full foundation.
4. Bed is 15' from slab or 20' from full foundation
5. Tank is 100' from owners well or 50' if monolithic tank is used

Remove topsoil, roots, and organic matter under the required sand area of a proposed system, including the slope extensions of raised systems.
Maintain the existing characteristics of the underlying soil as much as possible.
Add the sand fill on the same day that the leach area is excavated.
Do not allow water to run into or over the system during construction.
Do not work wet or frozen soils.

Minimize machine movement to avoid soil compaction and destruction of the soil structure under and around the system. Be especially careful not to compact soil on the down slope side of the system.

FILL REQUIREMENTS		CONSTRUCTION ELEVATIONS		ELEVATION REFERENCE POINT
Depth of Fill (Upslope)	16"	Finished Grade Elevation	-42"	Location & Description: Anail 62" high in 8" Elm tree
Depth of Fill (Downslope)	19"	Top of Distribution Pipe or Proprietary Device	-54"	Reference Elevation: -0-
		Bottom of Disposal Area	-65"	

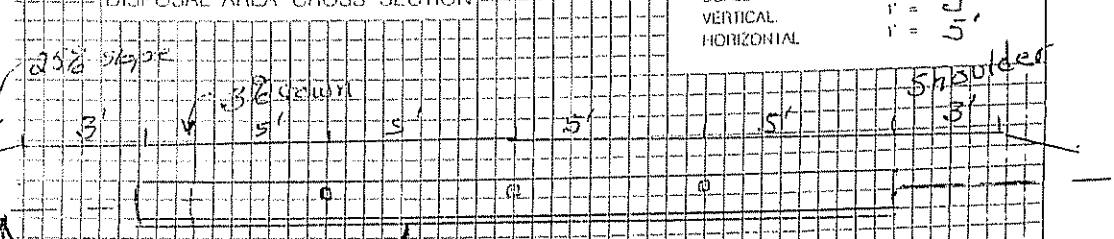
304.2.3 Field Determination of backfill. Due to the difficulty of obtaining sieve analyses and the variability of backfill material, the following procedures can be used in the field to determine the suitability of backfill material. The backfill is suitable if the soil texture is loose single grains, the individual sand grains can be readily seen (similar to salt or sugar grains) and soil, and the following conditions are observed: 1. Squeezed in the hand when dry, it will fall apart when the pressure is released but has enough lines to stain the lines in the palm of the hand. 2. Squeezed when moist, it will form a cast that will crumble when touched and bears very careful handling, and it does not form a ribbon between the thumb and forefinger but has enough lines to stain the lines in the palm of the hand.

304.3.1 Coarse fragments: The upper limit of coarse fragments shall be 3 inches in diameter and approximately 5% by volume.

304.4.1 Extent of backfill material. The fill layer shall include any backfill beneath the disposal field, the shoulders, and the backfill material extensions surrounding the disposal field on all sides.

DISPOSAL AREA CROSS SECTION

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



1. Remove organic matter from under bed and fill extensions.
2. Bed bottom is level.
3. New fill and original soil to be tilled together for 4" transition horizon
4. 12" Clean uniform stone 3/4" to 2 1/2"
5. Final grades 4" topsoil, seed and mulch.

James W. Maple — Site Evaluator Signature
S 304 — SE #
6/30/05 — Date