

Called 6/24 9:35 left 11:00

REPLACEMENT SYSTEM VARIANCE REQUEST

Town LPI \$120.00

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 AVONDA

Permit No. 5556 Date Permit Issued 6/24/05

Property Owner's Name: JANE ROBERTSON Tel. No.: 597-4126

System's Location: 41 LAMBERT AVENUE

Property Owner's Address: 52 MT VISTA DRIVE

(if different from above) SIDNEY, 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.

Jane Robertson
SIGNATURE OF OWNER

6-23-05
DATE

LOCAL PLUMBING INSPECTOR

Mary R. Smith, 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: _____

Mary R. Smith
LPI SIGNATURE

6/24/05
DATE

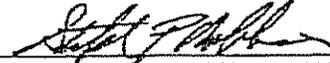
HHE-204 Rev 10/02

FORMS

Replacement System Variance Request

| VARIANCE CATEGORY | LIMIT OF LPT'S APPROVAL AUTHORITY | | | | | | VARIANCE REQUESTED TO: | |
|---|-----------------------------------|-------------------------|------------------------|---------------------------|-------------------------|-----------------------|------------------------|---------------------|
| | | | | | | | | |
| SOILS | | | | | | | | |
| Soil Profile | Ground Water Table | | | to 7" | | | inches | inches |
| Soil Condition | Restrictive Layer | | | to 7" | | | inches | inches |
| from HHE-200 | Bedrock | | | to 12" | | | inches | 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 | 80' | 50' |
| 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 | | |
| 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.



 SITE EVALUATOR'S SIGNATURE

7 JUNE 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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION Maine Department of Human Services
Division of Health Engineering, Station 1D
(207) 287-5672 FAX (207) 287-4172

| | | | |
|--|--|---|--|
| PROPERTY LOCATION | | >> Caution: Permit Required - Attach in Space Below << | |
| City, Town, or Plantation | AUGUSTA | AUGUSTA Date Permit Issued: <u>6-24-05</u> PERMIT # <u>5556</u> <u>20</u> OWN COPY \$ <u>120</u> FEE <input type="checkbox"/> Double Fee Charged Local Plumbing Inspector Signature: <u>[Signature]</u> L.P.I. # <u>850</u> | |
| Street or Road | 41 LAMBERT AVENUE | | |
| Subdivision, Lot # | | | |
| OWNER/APPLICANT INFORMATION | | | |
| Name (last, first, MI) | ROBERTSON, JANE <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant | | |
| Mailing Address of | 52 MT VISTA DRIVE | | |
| | SIDNEY, ME 04330 | | |
| Daytime Tel. # | 547-4186 | Municipal Tax Map # <u>7</u> Lot # <u>116</u> | |
| Owner or Applicant Statement | | Caution: Inspection Required | |
| 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. | |
| Signature of Owner or Applicant: <u>[Signature]</u> Date: <u>6-27-05</u> | | Local Plumbing Inspector Signature: <u>[Signature]</u> (1st) Date Approved: <u>7/6/05</u> (2nd) Date Approved: _____ | |

PERMIT INFORMATION

| | | |
|---|--|--|
| TYPE OF APPLICATION | THIS APPLICATION REQUIRES | DISPOSAL SYSTEM COMPONENT(S) |
| 1. First Time System 2. <input checked="" type="checkbox"/> Replacement System Type Replaced: _____ Year Installed: _____ 3. <input type="checkbox"/> Expanded System a. <input type="checkbox"/> Minor Expansion b. <input type="checkbox"/> Major Expansion 4. <input type="checkbox"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion | 1. <input type="checkbox"/> No Rule Variance 2. <input type="checkbox"/> First Time System 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"/> Experimental System 5. <input type="checkbox"/> Seasonal Conversion Approval | 1. <input checked="" 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 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"/> Pre-treatment, specify: _____ 12. <input type="checkbox"/> Miscellaneous components |
| SIZE OF PROPERTY | DISPOSAL SYSTEM TO SERVE | TYPE OF WATER SUPPLY |
| 7-20,000 sq. ft. <input checked="" type="checkbox"/> <input type="checkbox"/> acres | 1. <input checked="" type="checkbox"/> Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> | 1. <input checked="" type="checkbox"/> Drilled Well 2. <input type="checkbox"/> Dug Well 3. <input type="checkbox"/> Private |
| SHORELAND ZONING | 2. <input type="checkbox"/> Multiple Family Dwelling, No. of Units: _____ | 4. <input type="checkbox"/> Public 5. <input type="checkbox"/> Other: |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 3. <input type="checkbox"/> Other: _____ SPECIFY _____ | |

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

| | | | |
|---|---|---|---|
| TREATMENT TANK | DISPOSAL FIELD TYPE & SIZE | GARBAGE DISPOSAL UNIT | DESIGN FLOW |
| 1. <input checked="" type="checkbox"/> Concrete a. <input checked="" type="checkbox"/> Regular b. <input type="checkbox"/> Low Profile 2. <input type="checkbox"/> Plastic 3. <input type="checkbox"/> Other: _____ CAPACITY: <u>1,000</u> gallons | 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>1,000</u> sq. ft. <input checked="" type="checkbox"/> in. ft. | 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"/> Tanks in Series c. <input type="checkbox"/> Increase in Tank Capacity d. <input type="checkbox"/> Filter on Tank Outlet | <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 501.2 (other facilities) SHOW CALCULATIONS - for other facilities - |
| SOIL DATA & DESIGN CLASS | DISPOSAL FIELD SIZING | EFFLUENT/EJECTOR PUMP | |
| PROFILE CONDITION DESIGN <u>3</u> • <u>C</u> • <u>1</u> at Observation Hole # <u>1</u> Depth <u>20</u> • Elevation <u>-62</u> OF MOST LIMITING SOIL FACTOR | 1. <input type="checkbox"/> Small - 2.0 sq. ft./gpd 2. <input type="checkbox"/> Medium - 2.6 sq. ft./gpd 3. <input checked="" type="checkbox"/> Medium-Large - 3.3 sq. ft./gpd 4. <input type="checkbox"/> Large - 4.1 sq. ft./gpd 5. <input type="checkbox"/> Extra Large - 5.0 sq. ft./gpd | 1. <input type="checkbox"/> Not Required 2. <input checked="" type="checkbox"/> May Be Required 3. <input type="checkbox"/> Required >> Specify dose for engineered & experimental systems DOSE: _____ gallons | 3. <input type="checkbox"/> Section 503.0 (meter readings) ATTACH WATER-METER DATA |

SITE EVALUATOR STATEMENT

I certify that on 3 JUNE 05 (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).

Site Evaluator Signature: [Signature] SE# 301 Date: 7 JUNE 05

Stephen P. Robbins
 P.O. Box 271
 East Winthrop, ME 04343
 Site Evaluator name printed

377-6707
 Telephone#

narrowspd@aol.com
 E-Mail Address

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207) 287-3572 FAX (207) 287-6772

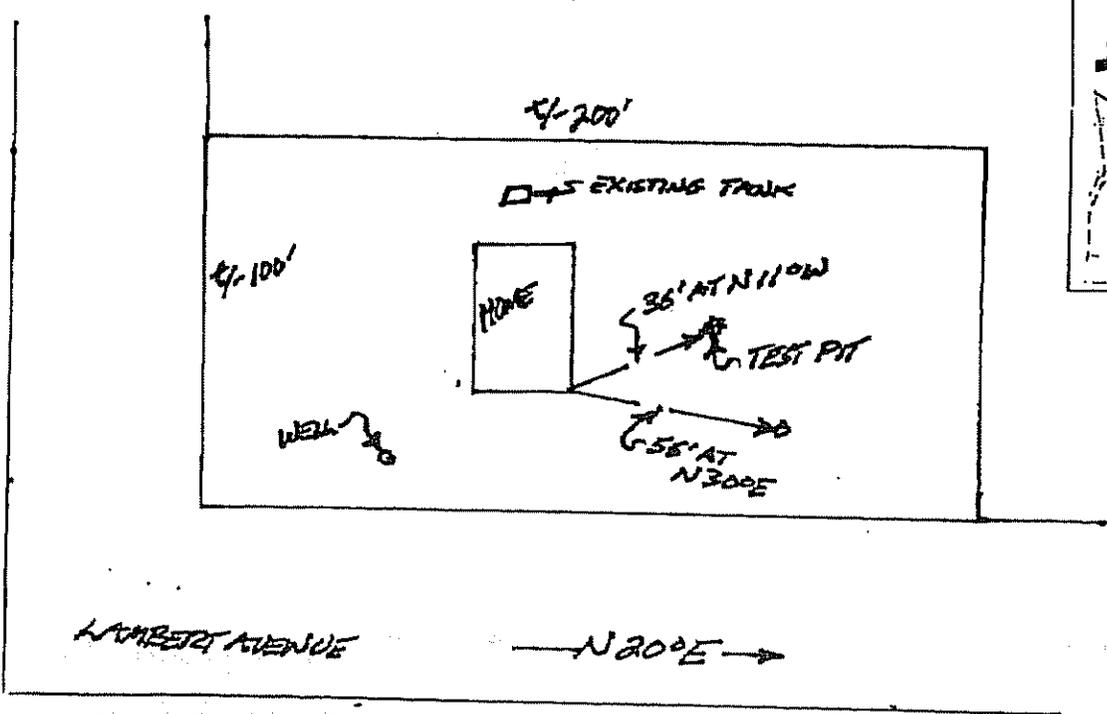
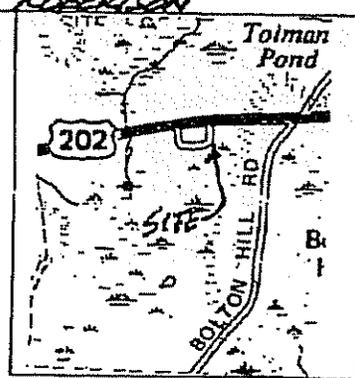
Town, City, Plantation
AUGUSTA

Street, Road, Subdivision
41 WARBETT AVENUE

Owner's Name
JANE ROBERTSON

SITE PLAN

Scale 1" = _____ Ft.
or as shown



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

Observation Hole FE1 Test Pit Boring
1" Depth of Organic Horizon Above Mineral Soil

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|---|-----------------|-------------|---------------|----------|
| 0 | FINE SANDY LOAM | FRAGILE | BROWN & WHITE | NONE |
| 10 | | | RED BROWN | |
| 20 | | FIRM | YELLOW BROWN | |
| 30 | | | OLIVE | |
| 40 | | | | |
| 50 | | | | |

| | | | |
|-----------------------------------|---------------------|-------------------------------|--|
| Soil Classification 3 C | Slope 0-5 | Limiting Factor 20" | <input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
| Profile | Condition | | |

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

| DEPTH BELOW MINERAL SOIL SURFACE (inches) | Texture | Consistency | Color | Mottling |
|---|---------|-------------|-------|----------|
| 0 | | | | |
| 10 | | | | |
| 20 | | | | |
| 30 | | | | |
| 40 | | | | |
| 50 | | | | |

| | | | |
|---------------------|-----------|-----------------|---|
| Soil Classification | Slope | Limiting Factor | <input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth |
| Profile | Condition | | |

Stephen Robbins
Site Evaluator Signature

301

7 JUNE
Date

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

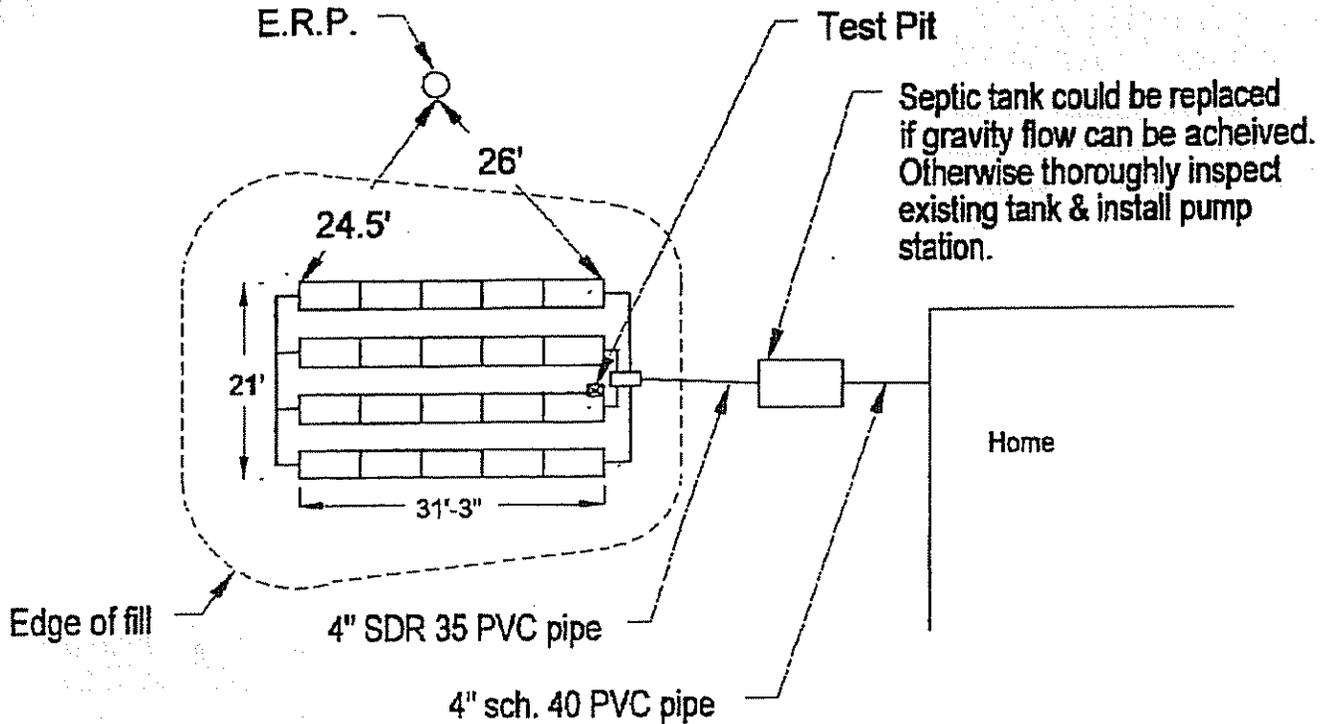
41 LAMBERT AVENUE

Owner or Applicant Name

JANE ROBERTSON

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



Note: Septic tank to be located at least 50' to well

BACKFILL REQUIREMENTS

Depth of Backfill (upslope) 14"
 Depth of Backfill (downslope) 18-32"
 DEPTHS AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation -26"
 Top of Distribution Pipe or Proprietary Device -34"
 Bottom of Disposal Field -50"

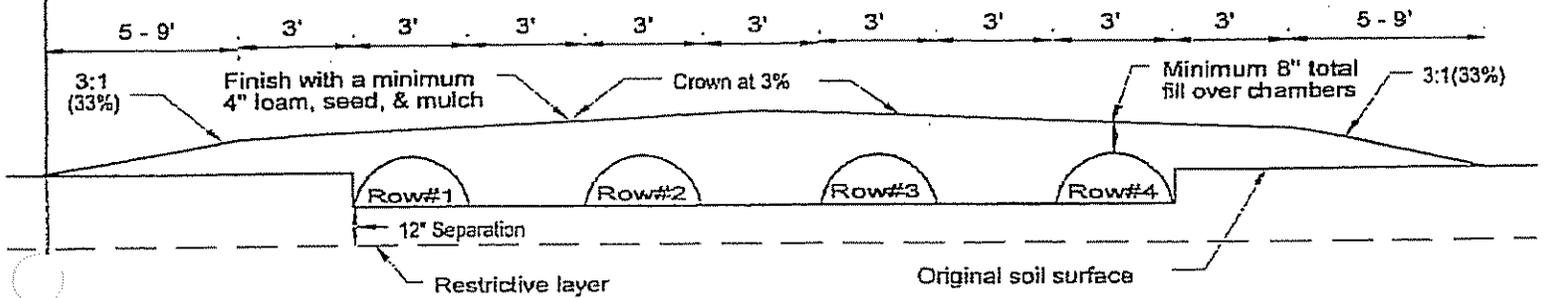
ELEVATION REFERENCE POINT

Location & Description: NAIL IN 10"
ONK, 50" FROM GROUND
 Reference Elevation is: 0.0" or _____

DISPOSAL FIELD CROSS-SECTION

Scales:
 Vertical: 1" = 5 ft.
 Horizontal: 1" = 5 ft.

Note: Chambers may be draped with filter fabric equal to Amoco #4535 to prevent infiltration of fill through louvers. Clean crushed stone can be used around chambers if 3" of soil can be maintained between rows. Do not use stone under chambers.



Sub P. Plan SE.#301

7 JUNE 05

PAGE 2 OF 4

| Town | Address | Owner |
|---------|---|----------------|
| AUGUSTA | 41 LAURET AVENUE ATTACHMENT TO HHE-200 | JANE ROBERTSON |

Caution: Before starting, contractor must insure fill depth amounts match with elevations given. Contact designer immediately with any discrepancies.

Notes:

1. Construction to conform to "State of Maine Subsurface Wastewater Disposal Rules".
2. Property lines shown are as provided by owner, agent, or municipality. No guarantee of accuracy is implied. Actual property lines must be confirmed by survey.
3. Remove organic material and scarify (foto-till) furrow area under drain-field and fill extensions.
4. Unless otherwise specified, all fill will be coarse sand to a gravelly coarse sand. See Sec. 804.0 in the Maine State Plumbing Code for further clarification of fill requirements. In 8" lifts, compacted as placed. First lift to be thoroughly mixed with original soil.
5. Septic tanks and pump stations shall be installed watertight to prevent infiltration of ground and surface water.
6. Force mains, pump stations, and or gravity piping subject to freezing shall be adequately insulated.
7. Unless otherwise specified, septic tank to be located by contractor; at minimum; 8' to proposed or existing home and or buildings, 10' to property line & water supply line, 100' to all wells and shoreline. Owner's well setback can be reduced to 50' if a 1 piece water-tight tank is used.
8. A septic tank outlet filter is recommended.
9. If replacement system with new tank, existing tank or cesspool to be filled with soil or removed. If existing tank is to be utilized, tank is to be thoroughly inspected for condition.
10. Unless otherwise specified, this plan does not allow the placement of pumps between the wastewater source and the septic tank.
11. Unless otherwise specified, disposal area to existing or proposed buildings setback is 20'.
12. Water from gutters, driveways, walks, and other surface water to be diverted away from system.
13. Loam, seed and mulch all disturbed areas to prevent erosion and facilitate runoff.
14. Unless otherwise specified, keep traffic heavier than lawn tractor away from all components of system.
15. Keep sanitary napkins, cigarette butts, coffee grounds, paper towels, grease, and nonbiodegradables out of system.
16. Many times it is impossible to locate water supplies. Property owner assumes responsibility of proper setback to any unknown water supplies.
17. Discharge from water treatment equipment and residential floor drains is not considered wastewater and must not be plumbed into septic system. This flow should be diverted into a separate drywell (Disposal area that does not require design or permit).
18. Plumbing fixtures must be strictly maintained to insure excess water does not enter septic system. Excess water can lead to premature clogging and total failure of disposal area.
19. Venting of disposal area is not required, but can facilitate biological action in disposal area.
20. Pumped systems will be equipped with audible high water alarm, wired to separate circuit as pump.
21. If a BK2000 Waste-Water Management system or any other Norweco products are included in this design, the designer has a financial interest in the sale of these products. Owner is encouraged to research comparable products and make final choice. If owner chooses a competitors product, design will be revised to note said change at no charge.
22. Take 3 copies of the plan to your local plumbing inspector for required permit.

Stephen P. Robbins

S.E. #301

Date 7 JUNE 05

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S.P.