REPLACEMENT SYSTEM VARIANCE REQUEST

RECEIVED
APR 26 2001
BY:

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 and 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 the 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 BOD_5 plus S. S. content of the wastewater is no greater than that of normal domestic effluent.

GENERAL INFORMATION

Town of AUGUSTA

Permit No. #4161.51

Date Permit Issued 4/24/01

Property Owner's Name: MICHAEL NE PTUNE Tel. No.: 623-4479

System's Location: HAYES ROAD AUGUSTA

Property Owner's Address: P O BOX 3193

(if different from above) TOGUS, 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 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 tha a variance for the proposed replacement system is needed, complete the Replacement System Variance Request with your signature on reverse side of form.

PROPERTY OWNER:

It 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.

Mike Neptune — SIGNATURE OF OWNER

4-26-01 — 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, he/she shall state his/her reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments

Gary R. Fuller — LPI SIGNATURE

4/26/01 — DATE

HHE-204 Rev 3/97

Replacement System Variance Request

VARIANCE CATEGORY	VARIANCE REQUESTED		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	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	**82'**	**75'**
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	**93'**	**88'**
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	**7'**	
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	**10.5'**	**5'**
Property lines	10 down to 5[c] ft	18 ft down to 9[c] ft	10 ft down to 4[c] ft	10 ft down to 7[c] ft	**5'**	**+5'**
Burial sites or graveyards, measured from the downhill toe of the fill extension	25 ft	25 ft	25 ft	25 ft		

OTHER

1. **REDUCE FILL EXTENSION TO 3:1 WHERE NECESSARY TO MAINTAIN FILL ON PROPERTY AND OUT OF DRIVEWAY**
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.

WILLIAM P BROWN William P Brown — SITE EVALUATOR'S SIGNATURE

4/20/2001 — 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

PROPERTY LOCATION

City, Town, or Plantation	AUGUSTA
Street or Road	HAYES ROAD
Subdivision, Lot #	

>> Caution: Permit Required -- Attach in Space Below <<

Date Permit Issued: 4/26/2001 $ 150.00 ☐ If Double Fee Charged FEE

Local Plumbing Inspector Signature 465 L.P.I. #

OWNER/APPLICANT INFORMATION

Name (last, first, MI): NEPTUNE, MICHAEL — ☐ Owner ☐ Applicant

Mailing Address of ■ Owner ☐ Applicant	P O BOX 3193 TOGUS, ME 04330
Daytime Tel. #	623-4479

Municipal Tax Map # 67 Lot # 7

Owner or Applicant 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.

Mike Neptune 4/26/01
Signature of Owner/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 5/25/01
(1st) Date Approved

Local Plumbing Inspector Signature (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION:

1. ☐ First Time System
2. ■ Replacement System
   Type Replaced: TRENCH
   Year Installed: 60'S
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 Variance

DISPOSAL SYSTEM COMPONENT(S)

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. ☐ Pretreatment, specify:
12. ☐ Miscellaneous components

SIZE OF PROPERTY

0.6 ☐ sq. ft. ■ acres

SHORELAND ZONING

■ Yes ☐ No

DISPOSAL SYSTEM TO SERVE:

1. ■ Single Family Dwelling Unit, No. of Bedrooms: 3
2. ☐ Multiple Family Dwelling Unit, No. of Units:
3. ☐ Other
   SPECIFY

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 ONE-PIECE

CAPACITY 1000 gallons

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 896 ■ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

1. ■ No 3. ☐ Maybe
2. ☐ Yes >> 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 facilities-
3. ☐ Section 503.0 (meter readings) ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS

PROFILE / CONDITION / DESIGN
3 / C / 1

at Observation Hole # TP-1
Depth 20 " Elevation " 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

PUMPING

1. ■ Not Required
2. ☐ May Be Required
3. ☐ Required>> Specify only for engineered or experimental systems
   DOSE gallons

SITE EVALUATOR'S STATEMENT

I certify that on 4/20/2001 (date) I completed a site evaluation on this property and state that the data reported are accurate and the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

William P Brown — Site Evaluator Signature
188 — SE#
4/20/2001 — Date
WILLIAM P BROWN — Site Evaluator Name Printed
293-2110 — Telephone #

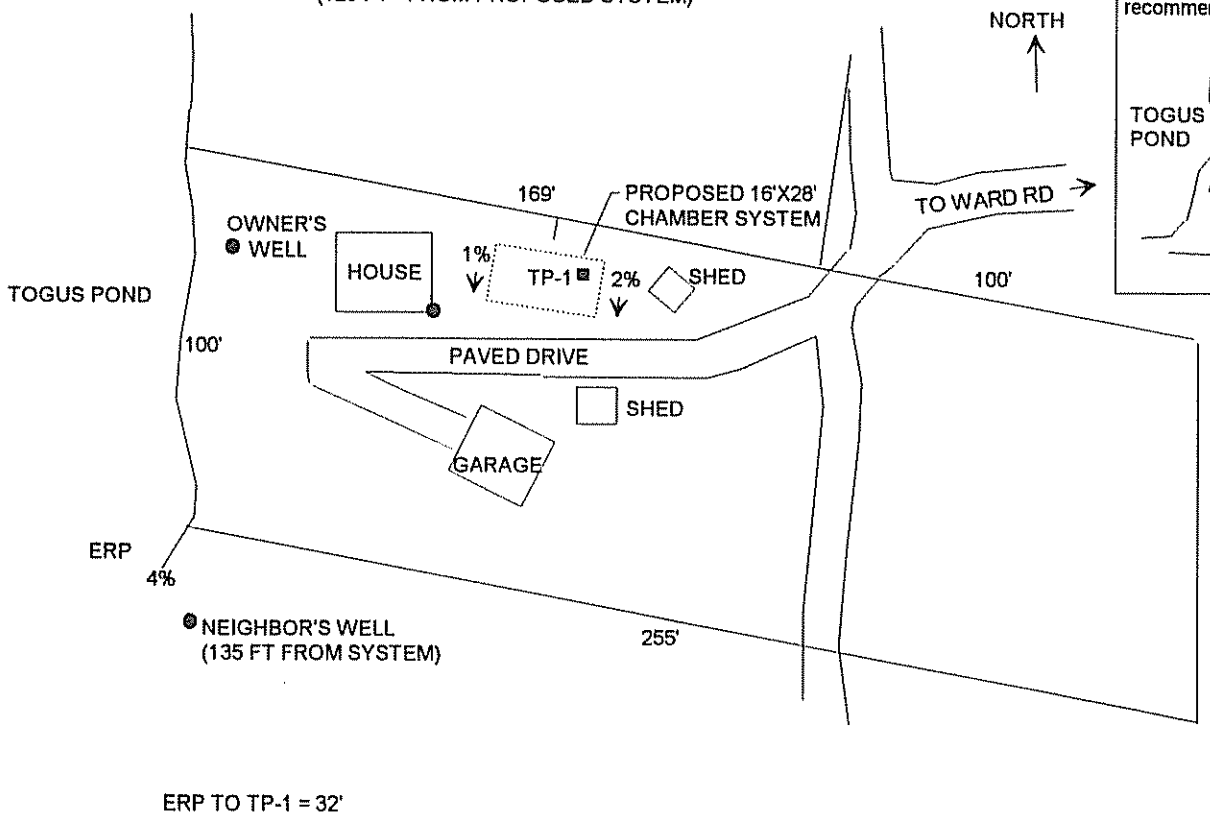
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

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

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	HAYES ROAD	MICHAEL NEPTUNE

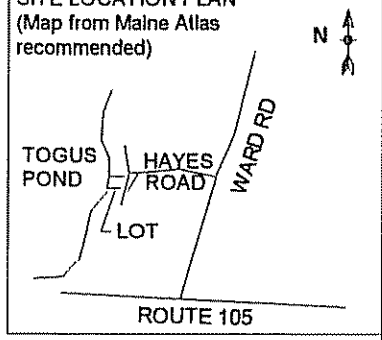
SITE PLAN

Scale 1" = 50 Ft.



SITE LOCATION PLAN

(Map from Maine Atlas recommended)



ERP TO TP-1 = 32'

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

Observation Hole TP-1 ■ Test Pit ☐ Boring

0 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistancy	Color	Mottling
0	SANDY LOAM	FRIABLE	MEDIUM BROWN	
10			YELLOW BROWN	
20			LIGHT BROWN	NONE
30		FIRM	OLIVE BRN	COMMON
40				
50				

Soil Classification	Slope	Limiting Factor	
3 Profile / C Condition	1-2 %	20 "	■ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

Observation Hole _____ ☐ Test Pit ☐ Boring

" Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

	Texture	Consistancy	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification	Slope	Limiting Factor	
Profile / Condition	%	"	☐ Ground Water ☐ Restrictive Layer ☐ Bedrock ☐ Pit Depth

WILLIAM P BROWN William P Brown — 188 — 4/20/2001

Site Evaluator Signature — SE # — Date

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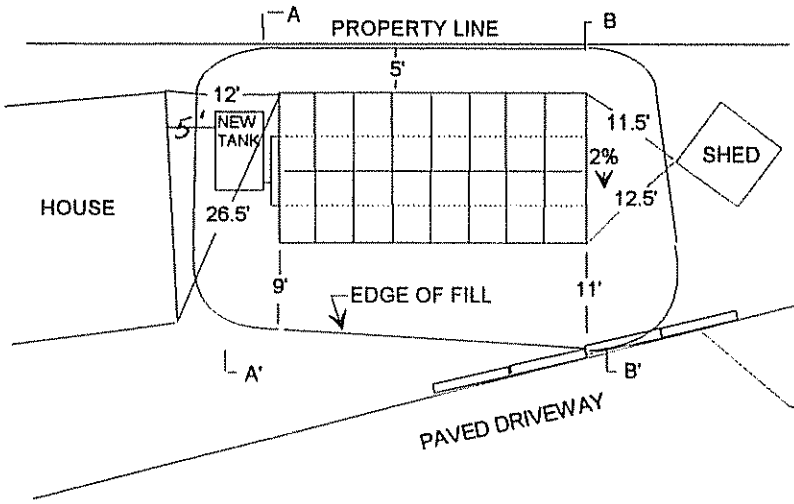
Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
AUGUSTA	HAYES ROAD	MICHAEL NEPTUNE

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" 20' Ft.



REMOVE EXISTING CONCRETE SEPTIC TANK THAT IS IN THE AREA OF THE PROPOSED SYSTEM
BACKFILL TO GRADE WITH COARSE GRAVELLY SAND
USE 14- 4' X 8' CONCRETE CHAMBERS WITH SIDE ENTRY DISTRIBUTION

OVER EXCAVATE AREA OF PROPOSED SYSTEM 6 INCHES BELOW ELEVATION OF THE CHAMBERS. REPLACE WITH VERY COARSE GRAVEL
EXTEND A ONE FOOT WIDE PERIMETER OF COARSE GRAVEL AROUND THE CHAMBERS

MAINTAIN FILL ON PROPERTY

USE CAUTION NEAR OVERHEAD WIRES AND UNDERGROUND SERVICE BETWEEN HOUSE AND GARAGE

GRAVITY FLOW IS POSSIBLE BY RAISING INTERNAL PLUMBING AND MAINTAINING MINIMUM PITCH FROM HOUSE TO DISPOSAL SYSTEM

REMOVE WATER SOFTENER FROM DISPOSAL SYSTEM

STEEPEN SLOPE TO 3:1 TO KEEP FILL ON PROPERTY AND WHERE NECESSARY TO MAINTAIN FILL OUT OF DRIVEWAY
USE LANDSCAPE TIES OR GRANITE BLOCKS, 8 INCHES HIGH, ALONG DRIVEWAY

FILL REQUIREMENTS

Depth of Fill (Upslope)	16	"
Depth of Fill (Downslope)	18-19	"

CONSTRUCTION ELEVATIONS

Reference Elevation is	00"
Bottom of Disposal Area	-25"
Top of distribution Lines or Chambers	-12"

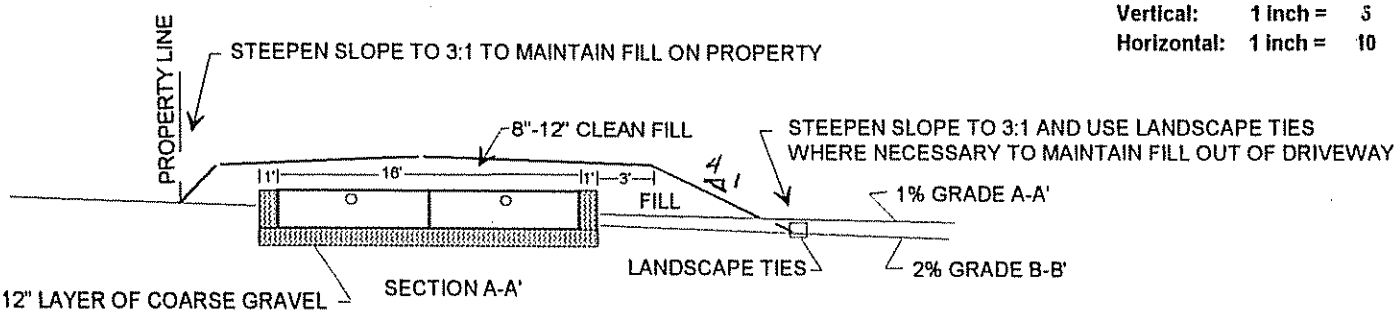
ELEVATION REFERENCE POINT LOCATION & DESCRIPTION

BOTTOM OF CEDAR SHINGLE SIDING AT CORNER OF HOUSE

DISPOSAL AREA CROSS SECTION

Scale:

Vertical: 1 inch = 5 Ft.
Horizontal: 1 inch = 10 Ft.



12" LAYER OF COARSE GRAVEL AROUND PERIMETER AND 6 INCHES BELOW CHAMBERS

REMOVE VEGETATION, ROCKS, AND STUMPS IN DISPOSAL AREA
SCARIFY ENTIRE FILL AREA
ALL FILL SHALL BE GRAVELLY COARSE SAND
INSTALL 6 INCHES OF COARSE GRAVEL UNDER THE CHAMBERS
ISTALL ALL CHAMBERS PER MANUFACTURER'S INSTRUCTIONS
ROWN FINISH GRADE FROM CENTER AT 3%
LOAM, SEED, MULCH

COVER TOP SEAMS BETWEEN CONCRETE CHAMBERS AND GRAVEL PERIMETER WITH HAY OR FABRIC EQUAL TO MIRAFI 140N

WILLIAM P BROWN	188	4/20/2001
Site Evaluator Signature	SE #	Date

WILLIAM P BROWN
RR 2 BOX 6460
MT VERNON ME 04352

May 22, 2001

Michael Neptune
P O Box 3193
Togus, Me 04330

Re: Septic System
Togus, ME

Dear Mr. Neptune,

Enclosed are three copies of a revised page 3 drawing of your septic system.

The original drawing showed 16 concrete chambers on the plan. The correct number should have been 14. These are the 4 ft by 8 ft chambers.

Please share these copies with the contractor and with the Plumbing Inspector when he inspects the system.

If you have questions regarding this matter, please contact me at 293-2110.

Sincerely,

William P Brown

William P Brown S E # 188

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation	Street, Road, Subdivision	Owners Name
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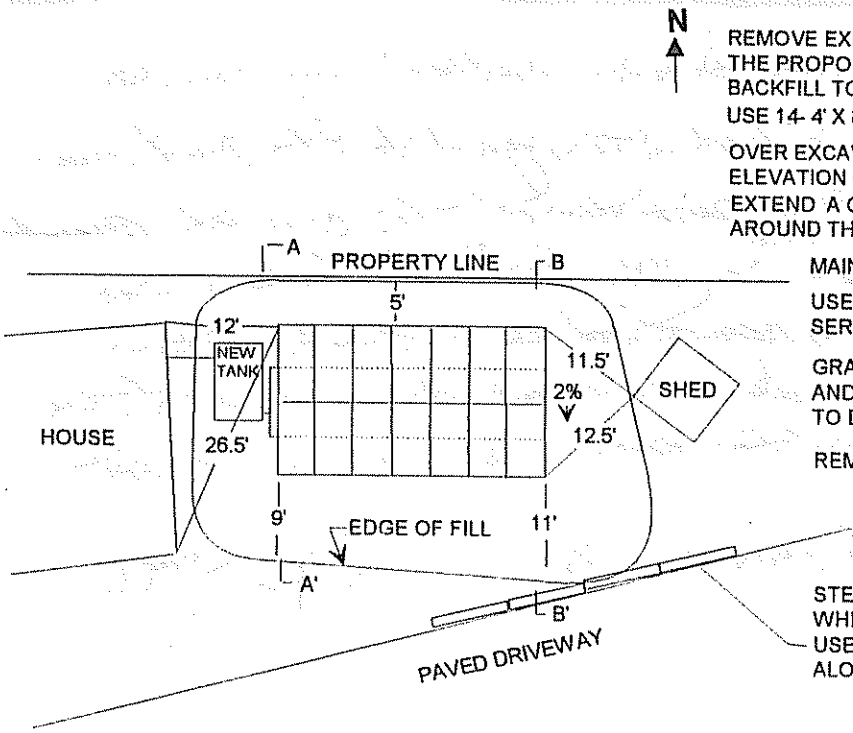

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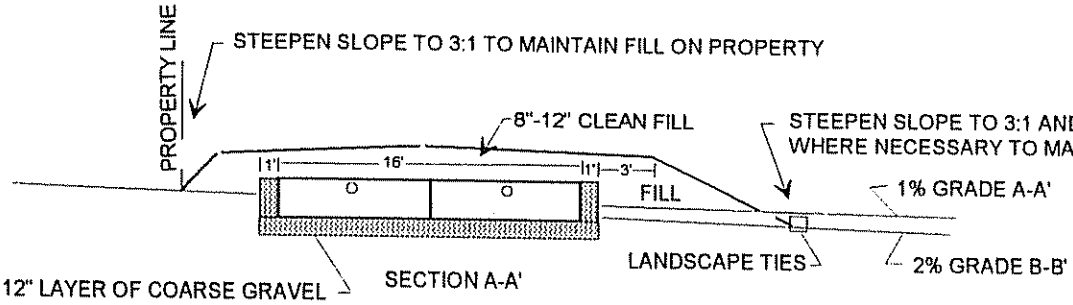

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COVER TOP SEAMS BETWEEN CONCRETE CHAMBERS AND GRAVEL PERIMETER WITH HAY OR FABRIC EQUAL TO MIRAFI 140N

WILLIAM P BROWN William P Brown
Site Evaluator Signature

188
SE #

4/20/2001 revised 5/22/2001
Date

5/29/2001

6:00 P.M. William Brown called my home to discuss questions I had with regard to the bank run fill used around the perimeter of this concrete chamber system. Mr. Brown was O.K. with it, if stone was in 6 inch range, requested some smaller stone be dumped in as well to break down some of the large voids. Use filter fabric not hay to cover system.

Notified Tracey Coutts Contractor. 8X. [signature] CEO