

FORMS

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. 6190
Date Permit Issued 6/25/08
Property Owner's Name: TAMMY BAILEY
Tel. No.: 582-3863
System's Location: 138 ALLENWOOD PARK ROAD
Property Owner's Address: AUGUSTA, ME 04330
(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]
SIGNATURE OF OWNER

6/25/08
DATE

LOCAL PLUMBING INSPECTOR

I, George H. [Signature], 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. [X] 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:

[Signature]
LPI SIGNATURE

6/25/08
DATE

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Division of Health Engineering, 10 SHS
(207) 287-5672 Fax: (207) 287-3165

PROPERTY LOCATION		>>CAUTION: PERMIT REQUIRED - ATTACH IN SPACE BELOW<<	
City, Town, or Plantation	Augusta	Date Permit Issued	6/25/08
Street or Road	138 Allenwood Park Road	Permit #	6180 TOWN COPY
Subdivision, Lot #		\$	2500
OWNER/APPLICANT INFORMATION		AUGUSTA PERMIT # 6180 TOWN COPY	
Name (last, first, MI)	Bailey, Tim	Local Plumbing Inspector Signature	<i>[Signature]</i>
	<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	L.P.I. #	1028
Mailing Address of Applicant	138 Allenwood Park Road Augusta, ME 04330	<input type="checkbox"/> If Double Fee Charged	
Daytime Tel.#	582-3863	Municipal Tax Map #	95 Lot # 8A LR
Owner or Applicant Statement		CAUTION: INSPECTION REQUIRED	
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		I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal rules Application.	
<i>[Signature]</i> Signature of Owner/Applicant		<i>[Signature]</i> Local Plumbing Inspector Signature	
Date 6/25/08		(1st) date approved 7/11/08 (2nd) date approved	

PERMIT INFORMATION			
TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input checked="" type="checkbox"/> 2. Replacement System Type replaced: UNK Year installed: UNK <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <input type="checkbox"/> b. Major Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input checked="" type="checkbox"/> 3. Replacement System Variance <input checked="" type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Prmit	DISPOSAL SYSTEM COMPONENTS <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input checked="" type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered disposal field (only) <input type="checkbox"/> 11. Pre-treatment, specify: <input type="checkbox"/> 12. Miscellaneous components	
SIZE OF PROPERTY 1.05 <input type="checkbox"/> SQ.FT. <input checked="" type="checkbox"/> ACRES SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: <input type="checkbox"/> 3. Other: _____ Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Privat <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete existing <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: CAPACITY: 1,000	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input checked="" type="checkbox"/> a. cluster array <input checked="" type="checkbox"/> c. Linear <input type="checkbox"/> b. regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: Size: 900 <input checked="" type="checkbox"/> sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment tank <input type="checkbox"/> b. _____ tanks in series <input type="checkbox"/> c. Increase in tank capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW 270 gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 501.1 (dwelling unit(s)) <input type="checkbox"/> 2. Table 501.2 (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE 3 CONDITION C DESIGN 1 at Observation Hole # 1 Depth 26" of Most Limiting Soil Factor	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Small---2.0 sq. ft./gpd <input type="checkbox"/> 2. Medium---2.6 sq. st. / gpd <input checked="" type="checkbox"/> 3. Medium---Large 3.3 sq. f./gpd <input type="checkbox"/> 4. Large---4.1 sq. ft. / gpd <input type="checkbox"/> 5. Extra Large---5.0 sq. ft / gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May Be Required <input type="checkbox"/> 3. Required Specify only for engineered systems: DOSE: _____ gallons	<input type="checkbox"/> 3. Section 503.0 (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. 44 d 17 m 154 e Lon. 69 d 40 m 656 s if g.p.s., state margin or error:

SITE EVALUATOR STATEMENT			
I certify that on 13 June 08 (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).			
<i>[Signature]</i> Site Evaluator Signature Stephen P. Robbins	S.E. # 301	6/18/2008	Page 1 of 4
Note: Changes to or deviations from the design should be confirmed with the Site Evaluator		377-6707 Narrowspd@adelphia.net	HHE-200 Rev. 4/05

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept Health & Human Services
 Division of Health Engineering, 10 SHS
 (207) 287-5672 Fax: (207) 287-3165

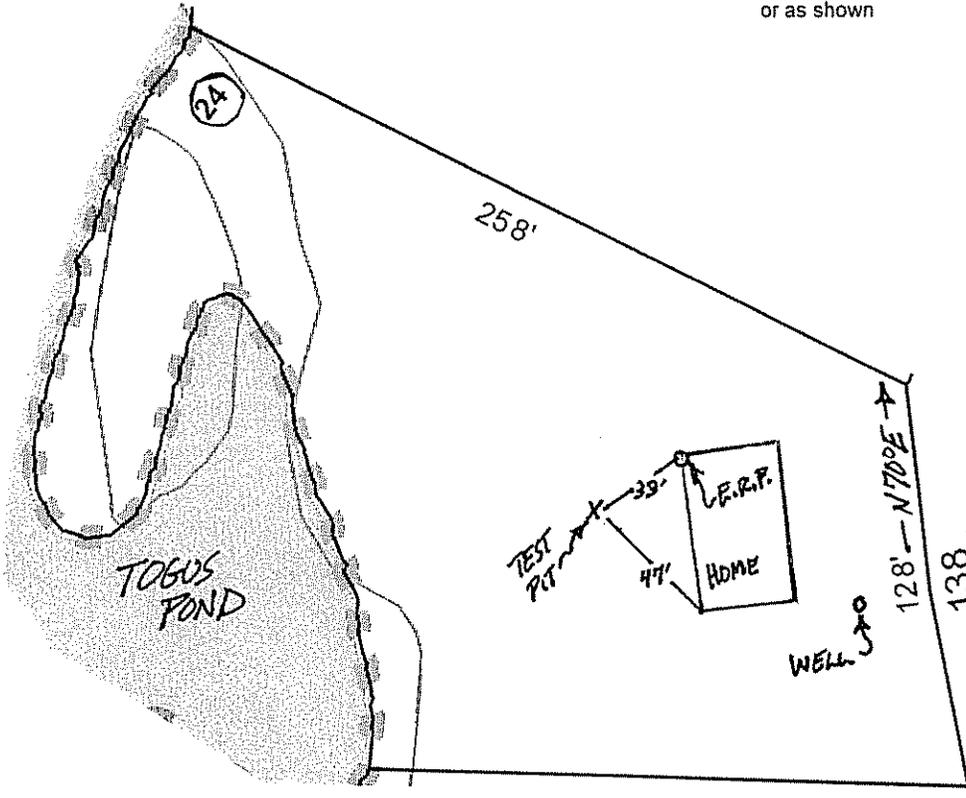
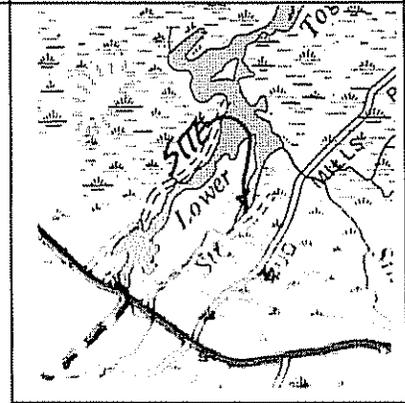
Town, City, Plantation
Augusta

Street, Road Subdivision
138 Allenwood Park Road,

Owner's Name
Bailey, Tim

SITE PLAN

Scale 1" = **60 Ft.**
 or as shown



SOIL DESCRIPTION AND CLASSIFICATION (LOCATION OF OBSERVATION HOLES SHOWN ABOVE)

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

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

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0	Fine sandy loam	Friable	Red brown	None
10				
20				
30		Firm	Olive	
40				
50				

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

Soil Classification **3 C** Slope **2-6%** Limiting Factor **26"** Ground Water Restrictive Layer Bedrock Pit Depth

Soil Classification Slope Limiting Factor Ground Water Restrictive Layer Bedrock Pit Depth

Stephen P. Robbins

S.P.R.

301

6/18/2008

Page 2 of 4

Site Evaluator Signature

SE #

Date

HHE-200 Rev 7/97

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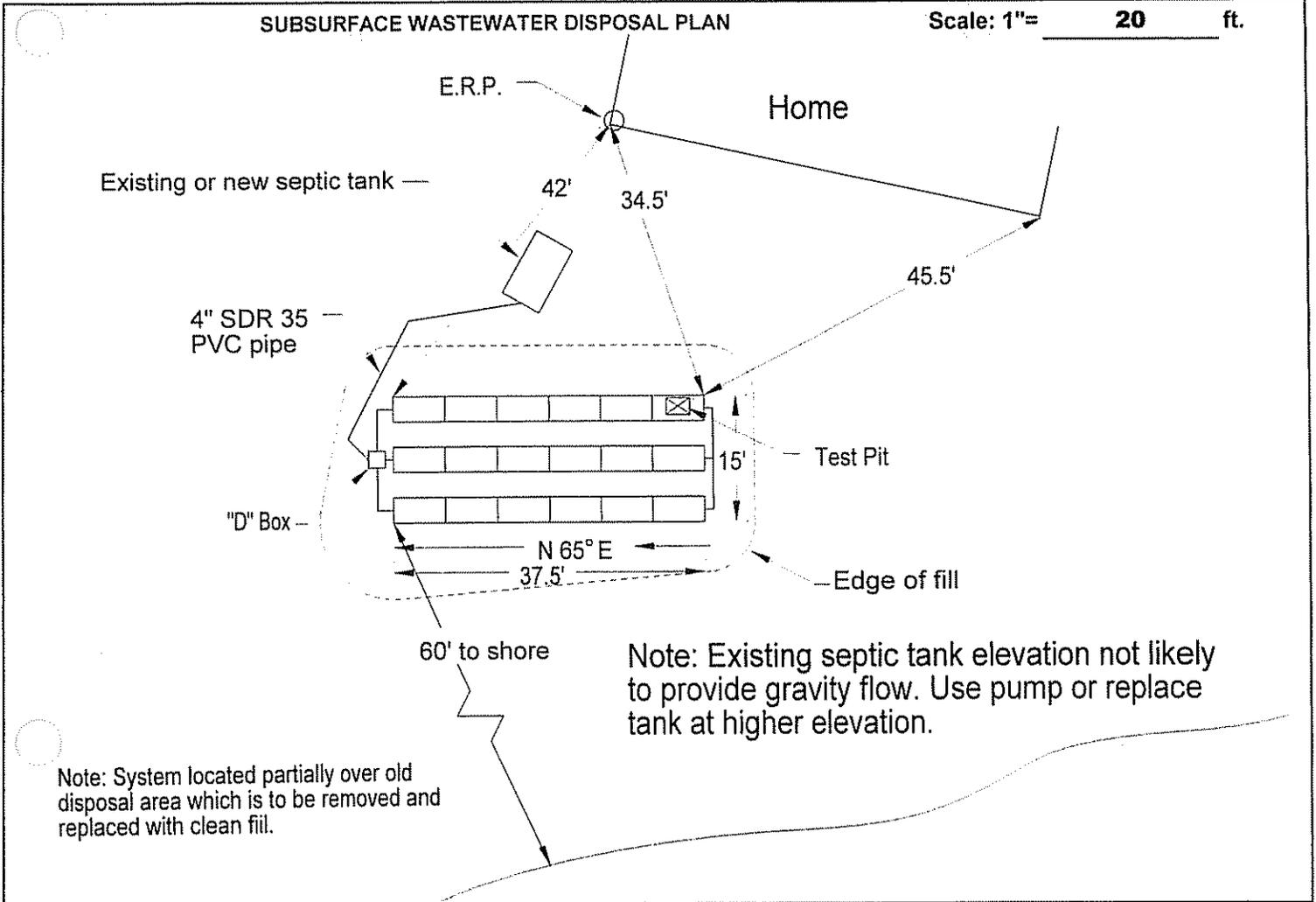
Town, City, Plantation
Augusta

Street, Road, Subdivision
138 Allenwood Park Road,

Owner or Applicant Name
Bailey, Tim

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 ft.



BACKFILL REQUIREMENTS

Depth of Backfill (upslope)

10 " Finished Grade Elevation

-42 "

ELEVATION REFERENCE POINT

Location & Description:

Nail in

Depth of Backfill (downslope)

13-21 " Top of Distribution Pipe or Proprietary Device

-55 "

trim board, 8" from bottom

DEPTHS AT CROSS-SECTION (shown below) Bottom of Disposal Field

-66 "

Reference Elevation is : 0.0' or:

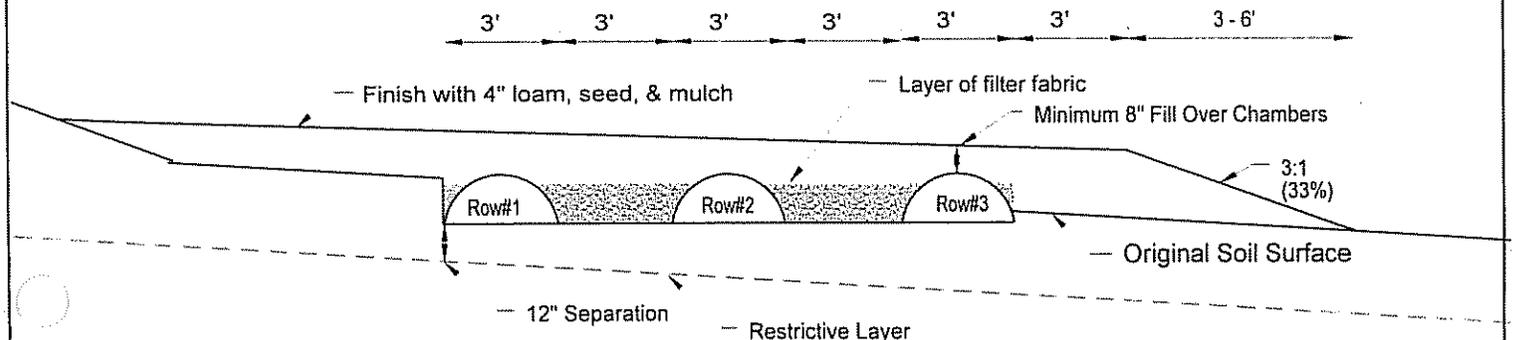
DISPOSAL FIELD CROSS-SECTION

Scales:

Vertical: 1" = 5 ft.

Horizontal: 1" = 5 ft.

Note: Use 18 high capacity Biodifuser type plastic chambers.
 Use clean crushed stone around chambers. Do not use stone under chambers. Chambers and stone to be draped with filter fabric



ATTACHMENT TO HHE-200

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 **roto-till** 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 State of Maine Subsurface Waste-water Disposal Rules for further clarification of fill requirements. In 8" lifts, compacted as placed. First lift to be thoroughly mixed with original soil, to form a transition horizon.
5. Septic tanks and pump stations shall be installed water-tight 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 & shoreline 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, thoroughly inspect & replace outlet baffle with plastic filter.
10. Unless otherwise specified, this plan does not allow the placement of pumps between the waste-water 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 foundation/floor drains is not considered waste-water 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). A floor drain used for anything other than fresh-water disposal does require design and 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.

