

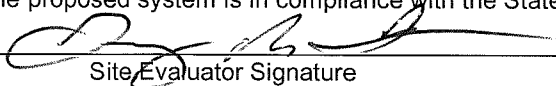

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 Fax: (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	Portland	Town/City _____	Permit # _____
Street or Road	87 Church Road, Cliff Island	Date Permit Issued ___/___/___	Fee: \$ _____ Double Fee Charged []
Subdivision, Lot #		Local Plumbing Inspector Signature _____	L.P.I. # _____
OWNER/APPLICANT INFORMATION		<input type="checkbox"/> Owner <input type="checkbox"/> Town <input type="checkbox"/> State	
Name (last, first, MI)	Walden, Benjamin R. <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.	
Mailing Address of Owner/Applicant	243 Jennie Lane Elliot, ME 03903	Municipal Tax Map # _____ Lot # _____	
Daytime Tel. #	(603) 682-6061	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 _____ (2nd) date approved	
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		_____ Local Plumbing Inspector Signature _____ (2nd) date approved	

PERMIT INFORMATION			
TYPE OF APPLICATION <input type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type replaced: <u>OBD</u> Year installed: <u>1900±</u> <input checked="" type="checkbox"/> 3. Expanded System <input checked="" type="checkbox"/> a. <25% Expansion <input type="checkbox"/> b. >25% 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 Permit	DISPOSAL SYSTEM COMPONENTS <input checked="" 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 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	TYPE OF WATER SUPPLY <input type="checkbox"/> 1. Drilled Well <input checked="" type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other
SIZE OF PROPERTY <u>24,000</u> <input checked="" type="checkbox"/> SQ. FT. <input type="checkbox"/> ACRES	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: <u>3</u> <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: _____ (specify) Current Use <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped		
SHORELAND ZONING <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)			
TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY: <u>1000</u> GAL.	DISPOSAL FIELD TYPE & SIZE <input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device <input checked="" type="checkbox"/> a. Cluster array <input type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE: <u>960</u> <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 <u>270</u> gallons per day BASED ON: <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities <u>3 bedrooms @ 90 gpd = 270 gpd</u>
SOIL DATA & DESIGN CLASS PROFILE <u>2</u> CONDITION <u>AIII</u> at Observation Hole # <u>B-1</u> Depth <u>36</u> " of Most Limiting Soil Factor	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium---2.6 sq. ft. / gpd <input checked="" type="checkbox"/> 2. Medium---Large 3.3 sq. ft. / gpd <input type="checkbox"/> 3. Large---4.1 sq. ft. / gpd <input type="checkbox"/> 4. 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 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at center of disposal area Lat. <u>43</u> d <u>41</u> m <u>45</u> s Lon. <u>-70</u> d <u>06</u> m <u>16</u> s

SITE EVALUATOR STATEMENT			
I certify that on <u>5/17/13</u> (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).			
 Site Evaluator Signature	<u>355</u> SE #	<u>8-10-15</u> Date	 WWW.SE BAGOTECHNICS.COM
<u>Gary M. Fullerton</u> Site Evaluator Name Printed	<u>(207) 200-2063</u> Telephone Number	<u>gfullerton@sebagotechnics.com</u> E-mail Address	

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

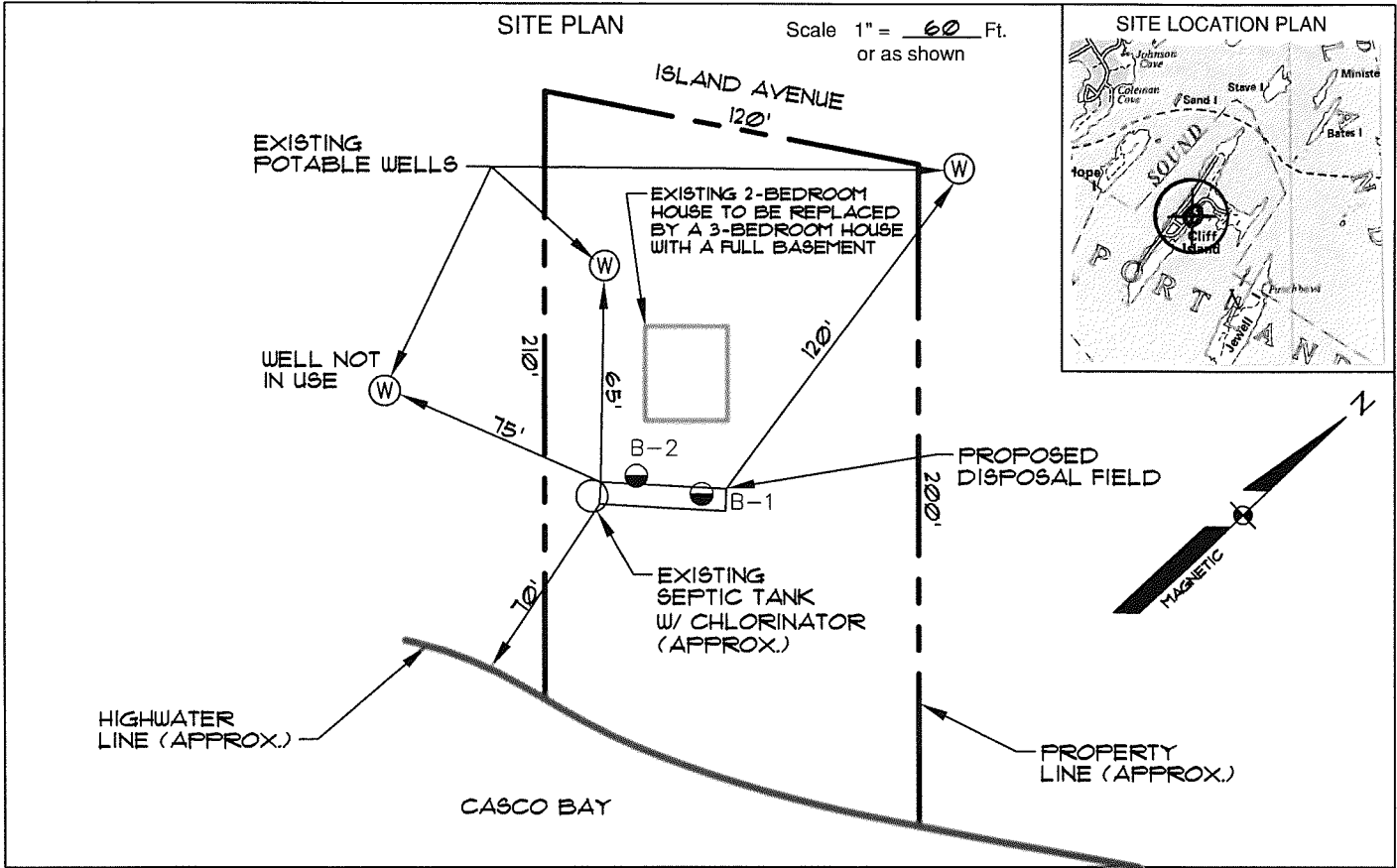
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Town, City, Plantation
Portland

Street, Road, Subdivision
87 Church Road, Cliff Island

Owner or Applicant Name
Walden, Benjamin R



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

Observation Hole B-1 Test pit Boring
0-1 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
10	SANDY LOAM	FRIABLE	BROWN	NONE OBSERVED
20				
30				
40				
50				

LEDGE AT 36"

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
<u>2</u> <u>AIII</u>	<u>3-8</u> %	<u>36</u> "	<input type="checkbox"/> Restrictive Layer
Profile Condition			<input type="checkbox"/> Bedrock
			<input type="checkbox"/> Pit Depth

Observation Hole B-2 Test pit Boring
0-1 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (inches)	Texture	Consistency	Color	Mottling
0				
10	SANDY LOAM	FRIABLE	BROWN	NONE OBSERVED
20				
30				
40				
50				

LIMIT OF EXCAVATION = 43"

Soil Classification	Slope	Limiting Factor	<input type="checkbox"/> Ground Water
<u>2</u> <u>AIII</u>	<u>3-8</u> %	<u>43</u> "	<input type="checkbox"/> Restrictive Layer
Profile Condition			<input type="checkbox"/> Bedrock
			<input type="checkbox"/> Pit Depth

[Signature]
 Site Evaluator Signature

355
 SE #

8-10-15
 Date

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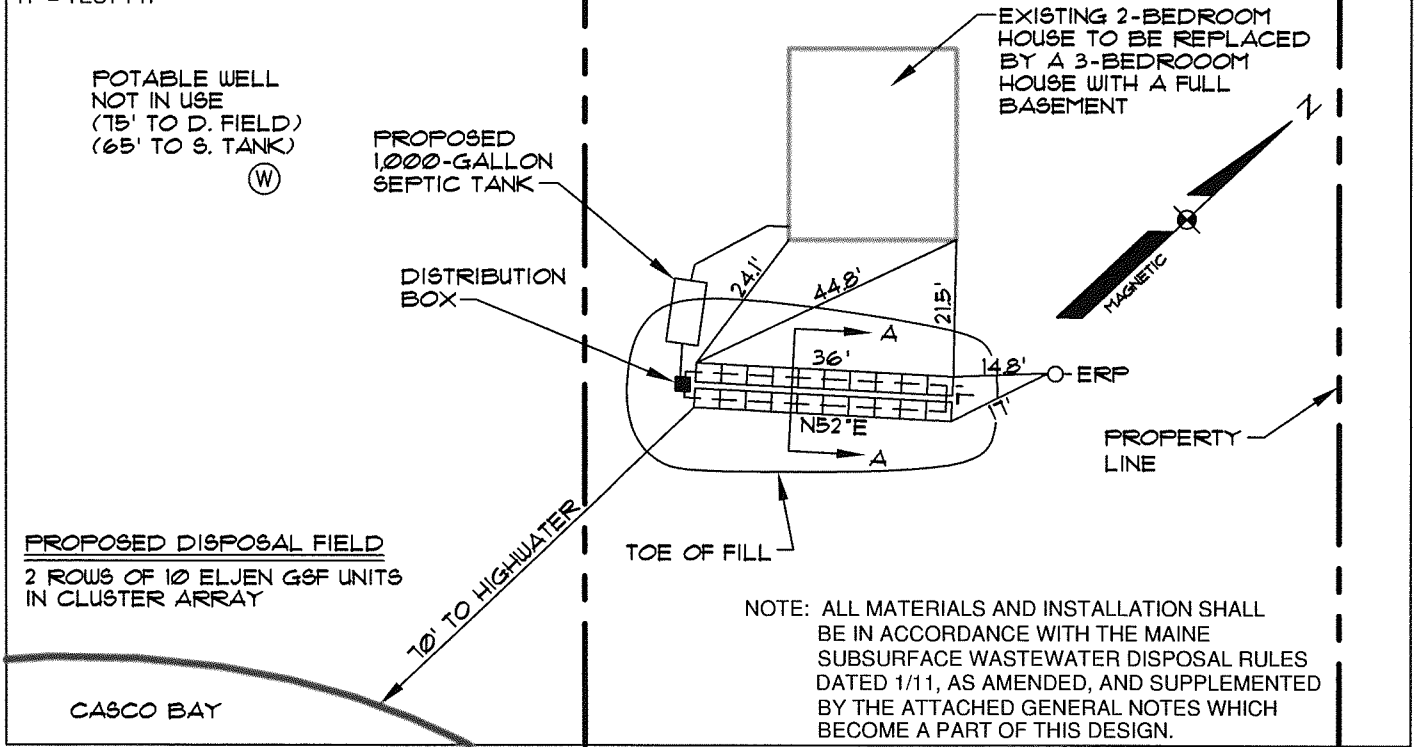
SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 30 FT.

NOTE: ALLOW FOR POSITIVE DRAINAGE
 AROUND THE LEACHFIELD.

IPF = IRON PIN FOUND
 TP = TEST PIT

NOTE: IF A GARBAGE DISPOSAL IS
 USED, THEN CHANGES TO
 THIS DESIGN ARE NECESSARY.



BACKFILL REQUIREMENTS

Depth of Fill (Upslope)	10"±
Depth of Fill (Downslope)	20"±

CONSTRUCTION ELEVATIONS

Finished Grade Elevation	-44"
Top of Distribution Pipe or Proprietary Device	-54"
Bottom of Disposal Area (Bottom of Eljen)	-65"

ELEVATION REFERENCE POINT

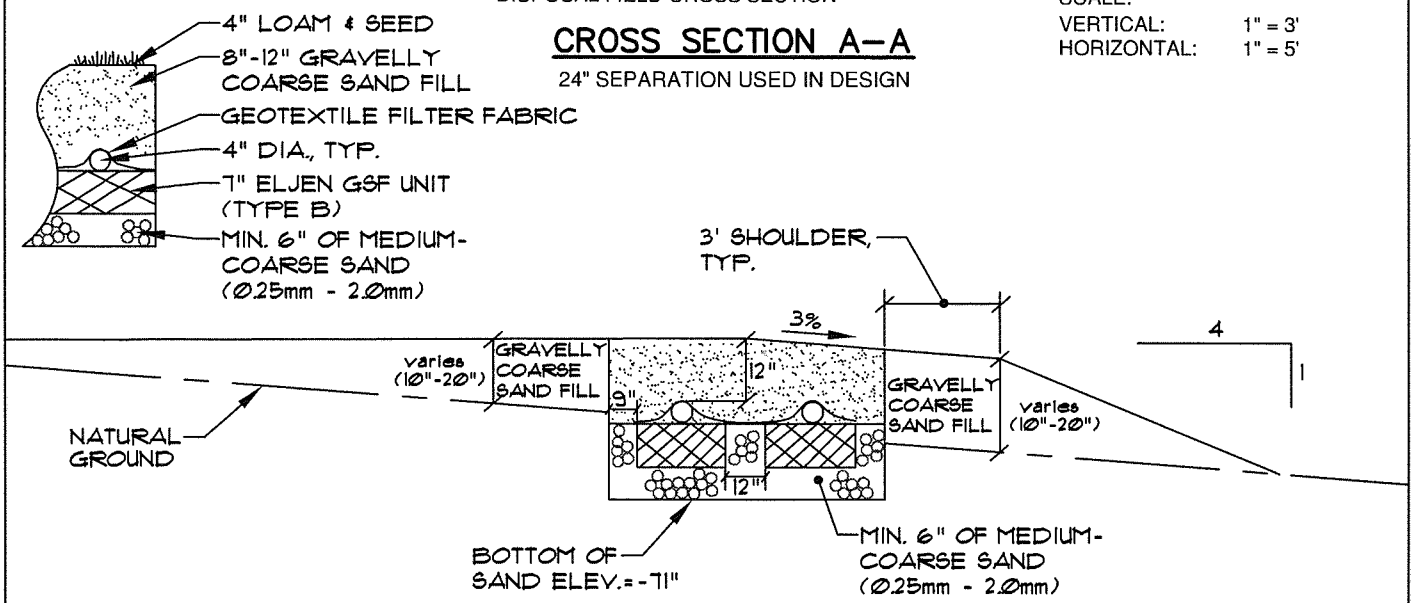
Location & Description Nail up 17"
 in the utility pole
 Reference Elevation 0"

DISPOSAL FIELD CROSS SECTION

CROSS SECTION A-A

24" SEPARATION USED IN DESIGN

SCALE:
 VERTICAL: 1" = 3'
 HORIZONTAL: 1" = 5'



[Signature]
 Site Evaluator Signature

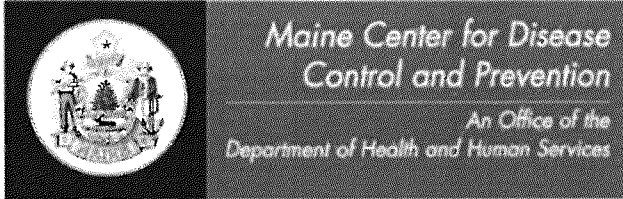
355
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General Notes
(attachment to form HHE-200)
<1,000 gpd Septic System

1. The nature of the site evaluation profession is one of interpretation of soil and site conditions. We, in the field, attempt to both provide a satisfactory service to the client, and comply by the rules by which we are bound - The Maine Subsurface Wastewater Disposal Rules. If at any time you, the client, are not satisfied with the service provided or the results found, it is your right to hire another site evaluator for a second opinion.
2. Property information is supplied by the owner, applicant or representative. Such information presented herein shall be verified as correct by the owner or applicant prior to signing this application.
3. All work shall be in accordance with the Maine Subsurface Wastewater Disposal Rules dated 1/18/11, as amended.
4. All work on the disposal field should be performed under dry conditions.
5. No vehicular or equipment traffic to be allowed on disposal area unless H-20 load is specified. Disposal field shall be constructed from outside the corner stakes located in the field. The downslope area is also to be protected in the same manner.
6. Backfill, if required, is to be gravelly coarse sand texture and to be free of foreign debris (per Table 11A of the Maine Subsurface Wastewater Disposal Rules). If backfill is coarser than original soil, then mix a minimum of 4" of backfill material into original soil.
7. No neighboring wells are apparent (unless so indicated) within 100' of disposal area. Owner or applicant shall verify this prior to signing the application.
8. The disposal field stone shall be clean, uniform in size and free of fines, dust, ashes, or clay. It shall have a nominal size of ¾" or 1½" (per Table 11B of the Maine Subsurface Wastewater Disposal Rules).
9. Minimum separation distances required (unless reduced by variance or special circumstance).
 - a) wells with water usage of 2000 or more gpd or public water supply wells:

Disposal Fields:	300'
Treatment Tanks:	150'
 - b) potable water supply to disposal field: 100'
 - c) potable water supply to treatment tank: 50'
 - d) treatment tank or disposal field to lake, river, stream or brook: 100' for major watercourse,
50' for minor watercourse
 - e) house to treatment tank: 8'
 - f) house to disposal field: 20'
 - For all other separation distances, use separations for less than 1,000 gpd per Maine Subsurface Wastewater Disposal Rules Table 7B for first-time systems and Table 8A for replacement systems.
10. Location of septic system near a wetland may require a separate permit. As such, the owner, prior to construction of the septic system, shall hire a professional to evaluate proximity of adjacent wetlands and prepare necessary permit applications.
11. Garbage disposals are not recommended and, if installed, are done so at the owner's risk. The additional waste load requires increased maintenance frequency and may cause premature failure of disposal field.
12. Pump stations, when required, shall be installed watertight to prevent infiltration of ground and/or surface water.
13. Force mains and pressure lines shall be flushed of any foreign material and pumps shall be checked for proper on/off cycle before being put into service.
14. Force mains, pump stations, and/or gravity piping subject to freezing shall be installed below frost line or adequately insulated.



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-5672
Fax: (207) 287-4172; TTY: 1-800-606-0215

SUBSURFACE WASTEWATER DISPOSAL SYSTEM VARIANCE REQUEST

This form must accompany an application (HHE-200 Form) for any subsurface wastewater disposal system which requires a variance to provisions of the Subsurface Wastewater Disposal Rules. The Local Plumbing Inspector must not issue a permit for the installation of a subsurface wastewater disposal system requiring a variance from the Department of Health and Human Services until approval has been received from the Department.

GENERAL INFORMATION		Town of <u>Portland</u>
Property Owner's Name:	<u>Benjamin R. Walden</u>	Tel. No.: <u>(603) 682-6061</u>
System's Location:	<u>87 Church Road, Cliff Island</u>	
Property Owner's Address:	<u>243 Jennie Lane, Eliot, ME</u>	Zip Code <u>03903</u>
e-mail address:	<u>benspond@icloud.com</u>	

The subsurface wastewater disposal system design for the subject property requires a replacement system variance first time system variance to the Subsurface Wastewater Disposal Rules. This variance requires local approval local and state approval.

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator. Use additional sheets if needed.)	SECTION OF RULE
1. <u>Reduction of disposal field setback from potable water supply to 65' and 75'</u>	<u>Table 8A</u>
2. <u>Reduction of disposal field setback from major waterbody to 70'</u>	<u>Table 8A</u>
3. _____	_____
SITE EVALUATOR	
<p>When a property is found to be unsuitable for subsurface wastewater disposal by a licensed Site Evaluator, the Evaluator shall so inform the property owner. If the property owner, after exploring all other alternatives, wishes to request a variance to the Rules, and the Evaluator in his professional opinion feels the variance request is justified and the site limitations can be overcome, he shall document the soil and site conditions on the Application. The Evaluator shall list the specific variances necessary plus describe below the proposed system design and function. The Evaluator shall further describe how the specific site limitations are to be overcome, and provide any other support documentation as required prior to consideration by the Department. Attach a separate sheet if necessary.</p> <p><u>The proposed location of the disposal field is the best option for this property to minimize fill amounts due to shallow ledge and maximize setbacks to wells and major waterbody.</u></p> <p>I, <u>Gary M. Fullerton</u>, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available; enhances the potential of the site for subsurface wastewater disposal; and that the system should function properly.</p> <p><u><i>[Signature]</i></u> <u>August 10, 2015</u> SIGNATURE OF SITE EVALUATOR DATE</p>	

PROPERTY OWNER	
<p>I, _____, am the <input type="checkbox"/> owner <input type="checkbox"/> agent for the owner of the subject property. I understand that the installation on the Application is not in total compliance with 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.</p> <p>_____ <input type="checkbox"/> SIGNATURE OF OWNER <input type="checkbox"/> AGENT FOR THE OWNER</p> <p>_____ DATE</p>	

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all variance requests prior to rendering a decision.

I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) approve the requested variance. I (will will not) issue a permit for the system's installation as proposed by the application.

LPI Signature

Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all variance requests prior to forwarding to the Division of Environmental Health.

I, _____, the undersigned, have visited the above property and find that the variance request submitted by the applicant does not conform with certain provisions of the wastewater disposal rules. The variance request submitted by the applicant is the best alternative for a subsurface wastewater disposal system on this property. The proposed system (does does not) conflict with any provisions controlling subsurface wastewater disposal in the shoreland zone. Therefore, I (do do not) recommend the issuance of a permit for the system's installation as proposed by the application.

LPI Signature

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

- Notes: 1. Variances for soil conditions may be approved at the local level as long as the total point assessment is at least the minimum allowed. (See Section 7.B.4 of the Subsurface Wastewater Disposal Rules for Municipal Review.)
2. Variances for other than soil conditions or soil conditions beyond the limit of the LPI's authority are to be submitted to the Department for review. (See Section 7.B.3 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.

SOIL, SITE AND ENGINEERING FACTORS FOR FIRST TIME SYSTEM VARIANCE ASSESSMENT WITH LIMITING SOIL DRAINAGE CONDITIONS (SEE TABLES 7C THROUGH 7M).

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile		
Depth to Groundwater/Restrictive Layer		
Terrain		
Size of Property		
Waterbody Setback		
Water Supply		
Type of Development		
Disposal Area Adjustment		
Vertical Separation Distance		
Additional Treatment		
TOTAL POINT ASSESSMENT:		

Minimum Points (Check One): Outside Shoreland Zone-50 Inside Shoreland Zone-65 Subdivision-65