49-93

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering
(207)289-3826

PROPERTY ADDRESS

Town Or Plantation	BRUNSWICK
Street Subdivision Lot #	HARDING EXT. ROAD

PROPERTY OWNERS NAME

Last: JACOBS First: ROBERT M.

Applicant Name	RR5 BOX 5573
Mailing Address of Owner/Applicant (If Different)	BRUNSWICK 04011

BRUNSWICK PERMIT # 2,257 STATE COPY

Date Permit Issued: 7/21/88 $ 40 FEE ☐ If Double Fee Charged

178 Local Plumbing Inspector Signature L.P.I. # 812

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector to deny a Permit.

S/ Robert Jacobs 7/21/88
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

Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

THIS APPLICATION IS FOR:
1. ☐ NEW SYSTEM
2. ☒ REPLACEMENT SYSTEM
3. ☐ EXPANDED SYSTEM
4. ☐ EXPERIMENTAL SYSTEM

SEASONAL CONVERSION
to be completed by the LPI
5. ☐ SYSTEM COMPLIES WITH RULES
6. ☐ CONNECTED TO SANITARY SEWER
7. ☐ SYSTEM INSTALLED – P# _____
8. ☐ SYSTEM DESIGN RECORDED AND ATTACHED

IF REPLACEMENT SYSTEM:
YEAR FAILING SYSTEM INSTALLED 1975
THE FAILING SYSTEM IS:
1. ☐ BED 3. ☐ TRENCH
2. ☒ CHAMBER 4. ☐ OTHER: _____

SIZE OF PROPERTY: 1+ ACRES

ZONING: RURAL RESIDENTIAL

THIS APPLICATION REQUIRES:
1. ☐ NO RULE VARIANCE
2. ☐ NEW SYSTEM VARIANCE Attach New System Variance Form
3. ☒ REPLACEMENT SYSTEM VARIANCE Attach Replacement System Variance Form
   a. ☒ Requiring Local Plumbing Inspector Approval
   b. Requires State and Local Plumbing Inspector Approval
4. ☐ MINIMUM LOT SIZE VARIANCE

DISPOSAL SYSTEM TO SERVE:
1. ☐ SINGLE FAMILY DWELLING
2. ☒ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER _____ SPECIFY

INSTALLATION IS:
COMPLETE SYSTEM
1. ☒ NON-ENGINEERED SYSTEM
2. ☐ PRIMITIVE SYSTEM (Includes Alternative Toilet)
3. ☐ ENGINEERED (+ 2000 gpd)

INDIVIDUALLY INSTALLED COMPONENTS:
4. ☐ TREATMENT TANK (ONLY)
5. ☐ HOLDING TANK _____ GAL
6. ☐ ALTERNATIVE TOILET (ONLY)
7. ☐ NON-ENGINEERED DISPOSAL AREA (ONLY)
8. ☐ ENGINEERED DISPOSAL AREA (ONLY)
9. ☐ SEPARATED LAUNDRY SYSTEM

TYPE OF WATER SUPPLY: DRILLED WELL

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK
1. ☒ SEPTIC ☒ Regular ☒ Low Profile OR
2. ☐ AEROBIC

SIZE: 1000 GALS

WATER CONSERVATION
1. ☒ NONE
2. ☐ LOW VOLUME TOILET
3. ☐ SEPARATED LAUNDRY SYSTEM
4. ☐ ALTERNATIVE TOILET SPECIFY: _____

PUMPING
1. ☐ NOT REQUIRED
2. ☒ MAY BE REQUIRED (DEPENDING ON TREATMENT TANK LOCATION AND ELEVATION)
3. ☐ REQUIRED

DOSE: 210+ GALS

CRITERIA USED FOR DESIGN FLOW (BEDROOMS, SEATING, EMPLOYEES, WATER RECORDS, ETC.)
3 BR
MIN. DES. FLOWS

SOIL CONDITIONS USED FOR DESIGN PURPOSES

PROFILE	CONDITION
9	DIE

DEPTH TO LIMITING FACTOR: 4

SIZE RATINGS USED FOR DESIGN PURPOSES
1. ☐ SMALL
2. ☐ MEDIUM
3. ☐ MEDIUM-LARGE
4. ☐ LARGE
5. ☒ EXTRA LARGE

DISPOSAL AREA TYPE/SIZE
1. ☐ BED _____ Sq. Ft.
2. ☒ CHAMBER 675 Sq. Ft.
27 INFILTRATORS ☐ REGULAR ☐ H-20
3. ☐ TRENCH _____ Lineal Ft.
4. ☐ OTHER _____

DESIGN FLOW: 270 (GALLONS/DAY)

SITE EVALUATOR STATEMENT

On June 27 88 (date) I conducted a site evaluation for this project and certify that the data reported is accurate. The system I propose is in accordance with the Subsurface Wastewater Disposal Rules.

T. P. Raisment — Site Evaluator Signature
#169 — SE#
6/28/88 — Date

(Local Plumbing Inspector's Signature if permit is for Seasonal Conversion.)

General Notes

(attachment to Form HHE-200)

1. The business of soils testing and site evaluation is not a science. The very nature of the business is one of interprestation of the soil and site conditions. We, in the field, attempt to provide a service to the satisfaction of the client and, at the same time, to comply by the rules by which we are bound - the Maine State Plumbing Code. 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 opinio

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. Property lines not shown herein are considered more than 50 feet from proposed disposal area. Actual property lines must be confirmed by survey.

3. Fill to be sandy loam or coarser texture and to be free of foreign debris and with sufficient fines for adequate compaction.

4. All work to be in accord with the Maine State Plumbing Code.

5. No neighboring wells were apparent (unless so indicated) within 100 feet of disposal area. Owner or applicant to verify prior to signing this application.

6. All work to be performed under dry conditions only (for disposal area).

7. Minimum separation distances required:
(unless reduced by variance)
   a. owners well to disposal area -- 100 feet
   b. owners well to septic tank -- 75 feet
   c. neighbor's well to disposal area -- 100 feet
   d. neighbor's well to septic tank -- 100 feet

   other separation distances per plumbing code.

8. Some communities have adopted local ordinances that are more stringent that the State's Rules with regards to setback distances and minimum soil conditions. The LPI shall inform the owner and designer of any local ordinance exceeding the rules (chapt. 241), prior to issueing a permit so that the application may be properly amended to conform to such ordinances.

9. A septic tank outlet filter is recommended when installing a mechanical garbage disposal.

10. Pump stations, when required, shall be installed watertight to prevent infiltration of ground and/or surface water. For uninterrupted service during maintainance or repair duplex pump systems are required.

11. 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.

12. Applicability or design must be reevaluated when location of structure are substantially different of those shown on the site plan or when other structures, additions, or appurtenances (i.e. swimming pools) are considered.

13. Systems put into service prior to establishing proper cover shall be provided with adequate erosion control to prevent damage to the system.

14. Lots not meeting the requirements of the "Minimum Lot Size Rule" but recorded prior to its effective date require a "Minimum Lot Size Waver" as issued by the Department of Human Services.

15. Force mains, pump stations, and/or gravity piping subject to freezing shall be adequately insulated.

T.P. Paiement
S.E. # 169

3/25/88

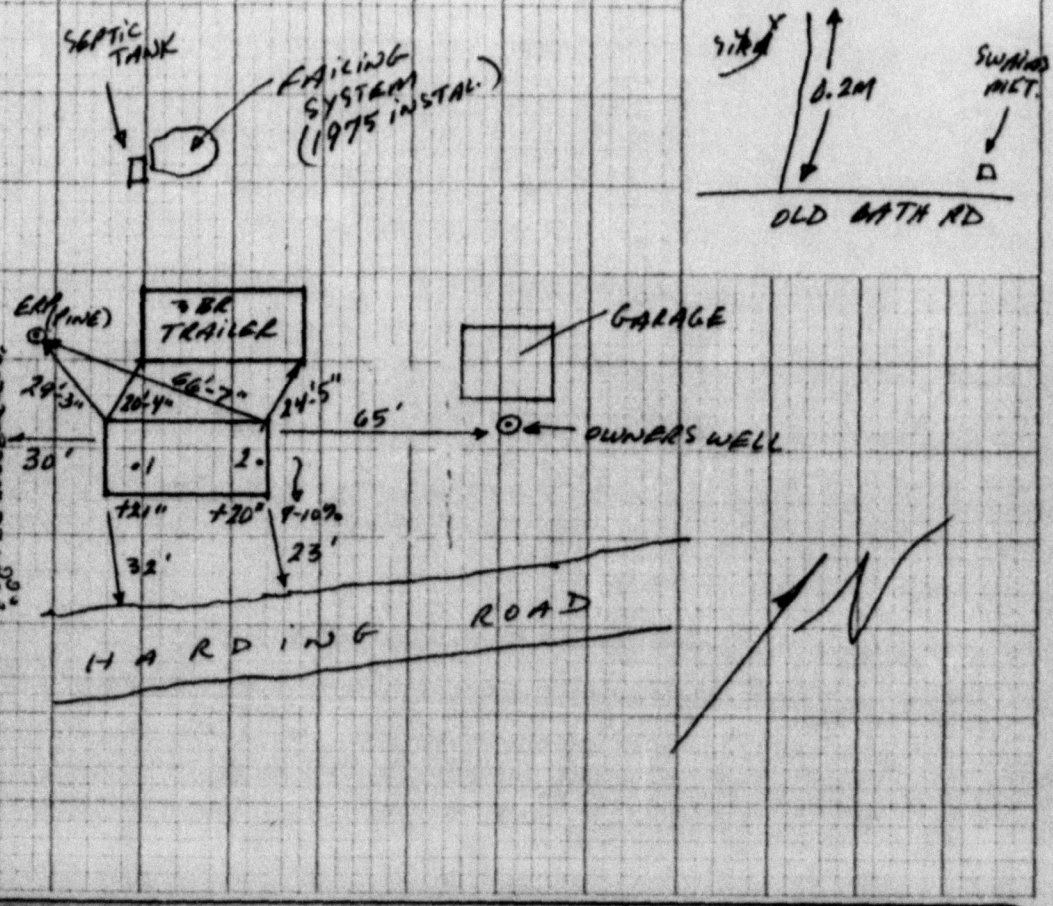
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Human Services
Division of Health Engineering

Town, City, Plantation: BRUNSWICK | Street, Road, Subdivision: HARDING EXTENSION RD. | Owners Name: ROBERT M. JACOBS

SITE PLAN

Scale 1" = 50 Ft.



SITE LOCATION PLAN (Attach Map from Maine Atlas for New System Variance)

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

Observation Hole # 1 ☐ Test Pit ☒ Boring

1 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
0–6 SILT LOAM	FRIABLE	BROWN	
6–15 LOAMY SAND			COMMON/DISTINCT
15–20 SILT LOAM		BLUE GRAY	PROMINENT
20–30 SANDY LOAM	FIRM	GRAY	
30–40 SILT LOAM	S.W. FRIABLE	GRAY	
40–50 SANDY LOAM / SILT LOAM	FIRM		

BEST FITS: Soil Profile 9 | Classification Condition D/E | Slope 8-10 % | Limiting Factor 6 | ☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

Observation Hole # 2 ☐ Test Pit ☒ Boring

1 " Depth of Organic Horizon Above Mineral Soil

DEPTH BELOW MINERAL SOIL SURFACE (Inches)

Texture	Consistency	Color	Mottling
0–6 SANDY LOAM	FRIABLE	BROWN	
6–15 LOAMY SAND			COMMON
15–20 SILT LOAM	S.W. FIRM	BLUE GRAY	PROMINENT
20–30 V.F. SANDY LOAM		DK. GRAY	
30–50 REFUSAL			

BEST FITS: Soil Profile 8 | Classification Condition D/E | Slope 8-10 % | Limiting Factor 6 | ☐ Ground Water ☐ Restrictive Layer ☐ Bedrock

J. A. Poirier — Site Evaluator Signature

#169 — SE#

6/28/88 — Date

HHE-200 Rev. 1/84

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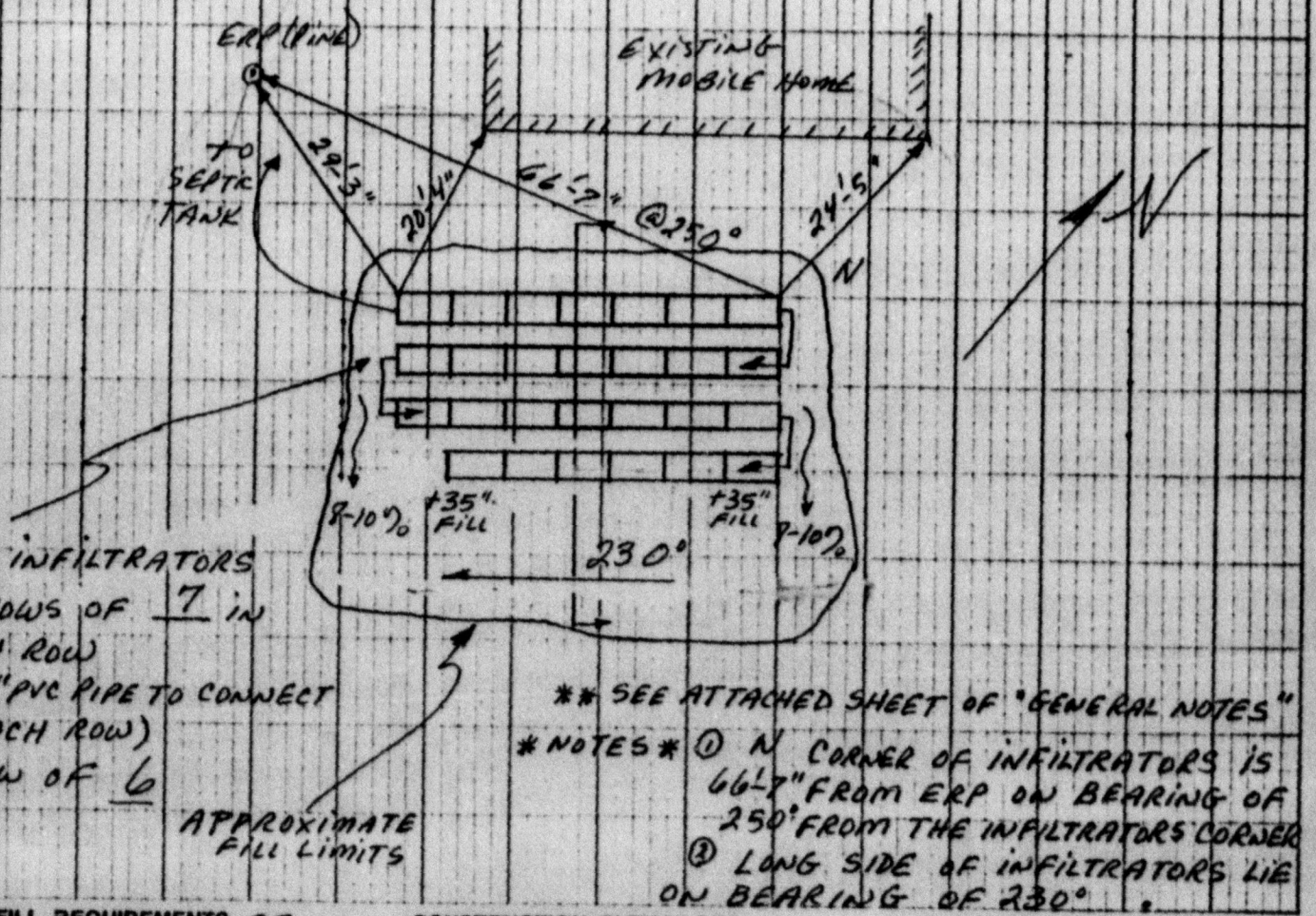
Department of Human Services
Division of Health Engineering

Town, City, Plantation: BRUNSWICK | Street, Road, Subdivision: HARDING EXTENSION ROAD | Owners Name: ROBERT M. JACOBS

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale 1" = 20 Ft.

42-3
5-4
7-5
10-7
11-8
13-10



** SEE ATTACHED SHEET OF "GENERAL NOTES"

* NOTES * ① N CORNER OF INFILTRATORS IS 66'-7" FROM ERP ON BEARING OF 250° FROM THE INFILTRATORS CORNER
② LONG SIDE OF INFILTRATORS LIE ON BEARING OF 230°.

FILL REQUIREMENTS
Depth of Fill (Upslope) 27.
Depth of Fill (Downslope) ≈ 35".

CONSTRUCTION ELEVATIONS
Reference Elevation is SEE NEXT PAGE
Bottom of Disposal Area ____
Top of Distribution Lines or Chambers ____

ELEVATION REFERENCE POINT LOCATION & DESCRIPTION
NAIL IN RED RIBBON ON PINE TREE

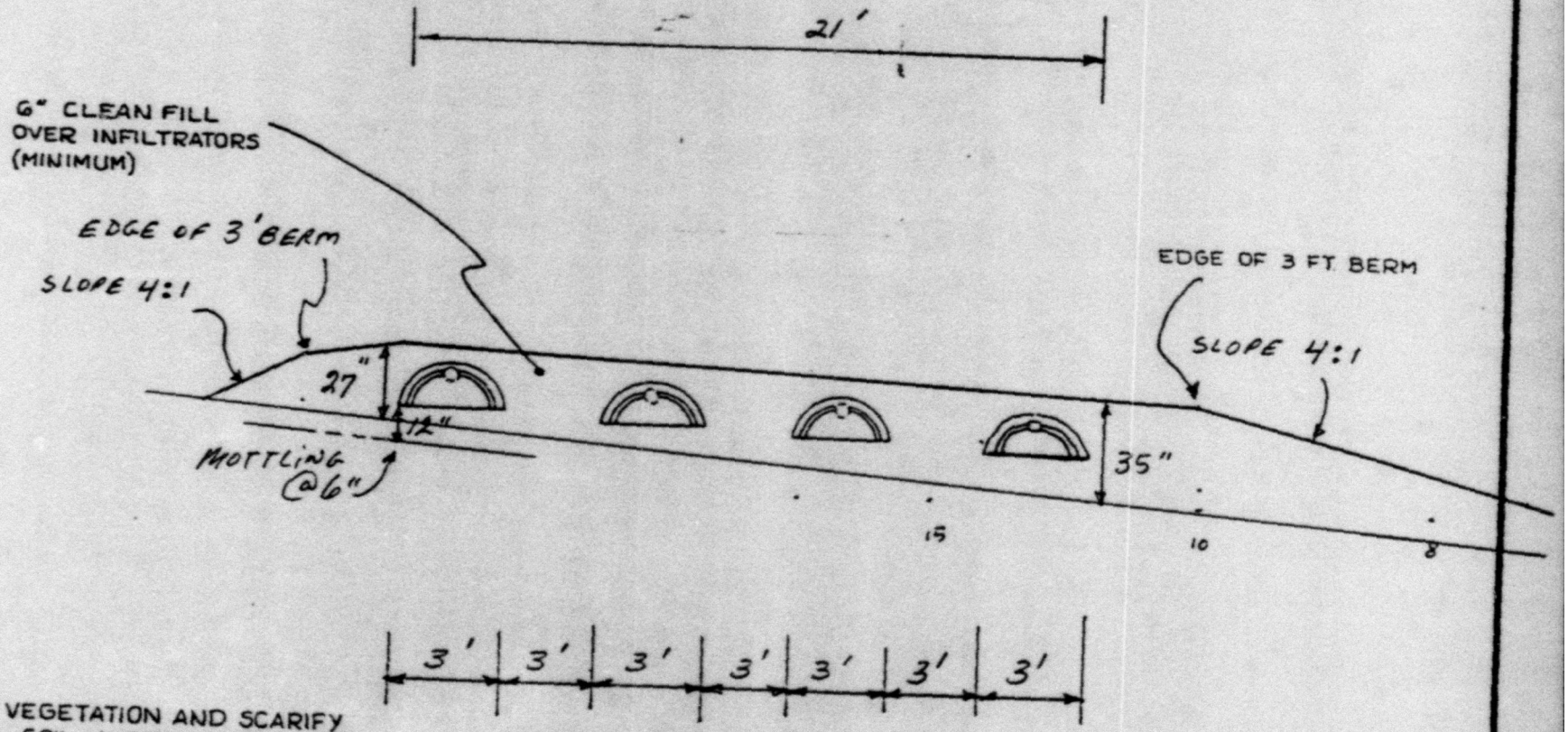
DISPOSAL AREA CROSS SECTION

Scale:
Vertical: 1 inch = ____ Ft.
Horizontal: 1 inch = ____ Ft.

SEE INFILTRATOR CROSS-SECTION NEXT PAGE

S. P. Pariement — Site Evaluator Signature
#169 — SE#
6/21/11 — Date

INFILTRATOR CROSS SECTION 5-6%



NOTES:

1. REMOVE VEGETATION AND SCARIFY ORIGINAL SOIL UNDER INFILTRATORS AND FILL EXTENSION AREAS.
2. BOTTOM OF INFILTRATORS TO BE LEVEL WITH A MAXIMUM GRADE TOLERANCE OF 1" PER 100'.
3. PROVIDE FOR SURFACE DRAINAGE AWAY FROM INFILTRATOR AREA.
4. FINISHED GRADE SHALL BE SEEDED AND MULCHED TO PREVENT EROSION.

ORIGINAL GRADE

FILL UNDER INFILTRATORS TO BE LOAMY SAND OR COARSER TEXTURE.

FILL AROUND INFILTRATORS TO BE SANDY LOAM OR COARSER TEXTURE.

SITE EVALUATOR: Tom Paiement L.E. #169

OWNER: ROBERT M. JACOBS

NUMBER OF INFILTRATORS: 27

PERCENT SLOPE: 5-6%

LOCATION: BRUNSWICK HARDING EXTENSION RD.

ELEVATIONS:

REFERENCE PT. 00" BOTTOM TRENCH #1 -58"

DATE: 6/28/88

SCALE: 1 INCH = 3 FEET

BOTTOM TRENCH #2 -62" BOTTOM TRENCH #3 -66"

BOTTOM TRENCH #4 -70"

Replacement System Variance Request

THE LIMITATIONS OF THE REPLACEMENT SYSTEM VARIANCE REQUEST

This form shall be attached to an Application for the proposed replacement system which is in noncompliance with the Rules. The LPI shall review the Replacement System Variance Request and Application and may approve the Request if all of the following requirements with LPI approval limitations can be met.

1. The replacement system is correcting a malfunction or an unlicensed wastewater discharge system.
2. A replacement system cannot be designed and installed in total compliance with the Rules.
3. The design flow is less than 500 GPD.
4. There will be no change in use of the structure.
5. The replacement system does not conflict with Seasonal Conversion Permit (30 MRSA § 3223) or with Mandatory Shoreland Zoning (12 MRSA § 4811).
6. The replacement system is determined by the Site Evaluator and LPI to be the most practical method to treat and dispose of the wastewater.

GENERAL INFORMATION

Town of BRUNSWICK

Town Code ☐☐☐☐☐ Permit No. ☐☐☐☐☐E Date Permit Issued ____ month/day/yr.

Property Owner's Name: ROBERT JACOBS Tel. No. ____

System's Location: HARDING EXTENSION ROAD
Street

BRUNSWICK
Town MAINE 04011
Zip

Property Owner's Address: RR 5 BOX 5573
(if different from above) Street

BRUNSWICK ME 04011
Town State Zip

Specific Instructions to the:

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, then complete the Replacement 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.

The Owner shall sign this statement. Therefore, having read both this Replacement Variance Request and the attached Application, I understand that the proposed system is not in total compliance with the Rules and hereby release all those concerned with this Variance, provided they have performed their duties in a reasonable and proper manner.

Robert Jacobs July 5 '88
Property Owner's Signature Date

Soil Condition from HHE-200	Restrictive Layer	to 5'			
	Bedrock	to 10'			Inches
Setback Distances (in feet)	From:	Treatment Tank	Disposal Area	Treatment Tank	Disposal Area
[illegible]	1. [illegible]	[illegible]	[illegible]		
	2. [illegible]	[illegible]	[illegible]		
	3. Water Supply Line	See Note 'a'			
Waterbodies	1. Perennial	60'	60'		
	2. Intermittent	25'	25'		
	3. Manmade drainage ditch	15'	15'		
Downhill Slope	Greater than 3:1 (33%)	5'	10'		
Buildings	1. With basement	See Note	15'		
	2. Without basement	5'	10'		
Property Line		5'	5'		

Other Specify:

Footnotes:

a. This setback distance cannot be reduced by variance. See Table 6-2.

b. A variance to reduce the 100 foot setback distance to a minimum of 80 feet may be granted only with the neighbor's written permission.

c. Sufficient distance shall be maintained to assure that the toe of the fill does not extend to the 3:1 slope.

T. P. Pariement — 6/28/88

Site Evaluator's Signature — Date

LPI Statement

I, R. L. Brown, LPI for the Town of Brunswick have conducted an on-site inspection for the proposed replacement system and have determined, to the best of my knowledge, that it cannot be installed in total compliance with the Rules, applicable Municipal Ordinances, or the Local Shoreland Zoning Ordinance. As a result of my review of the Replacement System Variance Request, the Application, and my on-site investigation, I (check and complete either a or b):

☑ a. (☑ approve, ☐ do not approve) 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 shall state his reasons in Comments Section below as to why the proposed replacement system is not being recommended.

Comments:

[signature] — 7/26/88

LPI's 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