SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of 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: Otisfield
Street or Road: Hidden Lake Rd.
Subdivision, Lot #:

OTISFIELD PERMIT # 1192 STATE COPY
Date Permit Issued: 12/29/06 $ 110 ☐ If Double Fee FEE Charged
Local Plumbing Inspector Signature
L.P.I. # 8.17

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Labbe, Lisa ☒ Owner ☐ Applicant

Mailing Address of Owner / Applicant: 195 Gore Rd. Oxford, ME. 04270

Daytime Tel. #: 207 539 4565

Municipal Tax Map # R-5 Lot # 4-3

Owner 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.

Signature of Owner or Applicant — Date: 12-29-06

Caution: Inspection Required

I have Inspected the Installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application.

Local Plumbing Inspector Signature — (1st) Date Approved — (2nd) Date Approved

PERMIT INFORMATION

TYPE OF APPLICATION

☒ 1. First Time System
☐ 2. Replacement System
Type Replaced _____
Year Installed _____
☐ 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. Alternitive 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)
☐ 9. Engineered Treatment Tank (only)
☐ 10. Engineered Disposal Field (only)
☐ 11. Pre-treatment, specify:_____
☐ 12. Miscellaneous Components

SIZE OF PROPERTY

3.3+/- ☐ sq. ft. ☒ acres

SHORELAND ZONING

☐ Yes ☒ No

DISPOSAL SYSTEM TO SERVE:

☒ 1. Single Family Dwelling Unit, No. of Bedrooms 4
☐ 2. Multiple Family Dwelling, No. of Units _____
☐ 3. Other:_____ SPECIFY

Current Use: ☐ Seasonal ☐ Year Round ☒ Undeveloped

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

CAPACITY 1000 Min. gallons
(see Standard Notes on pg. 2)

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 1580 ☒ sq. ft. ☐ lin. ft.

GARBAGE DISPOSAL UNIT

☒ 1. No* ☐ 2. Yes ☐ 3. Maybe
If yes or maybe, specify one below:
☐ a. Multi-compartment Tank
☐ b. Tanks in Series
☐ c. Increase in Tank Capacity
☐ d. Filter on Tank Outlet

*see "must read" note on pg 2

DESIGN FLOW

480 gallons per day

BASED ON:
☒ 1. Table 501.1 (dwelling unit(s))
☐ 2. Table 501.2 (other facilities)

SHOW CALCULATIONS
- for other facilities-

360 + 33%

☐ 3. Section 503.0 (meter readings)
ATTACH WATER-METER DATA

SOIL DATA & DESIGN CLASS

PROFILE CONDITION DESIGN
3 / D / 3
of Observation Hole,
to Depth 11 "
or of Most Limiting Factor.

DISPOSAL AREA 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

EFFLUENT/EJECTOR PUMP

☐ 1. Not required
☒ 2. May be required
☐ 3. Required
Specify only for engineered systems
DOSE _____ Gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44d 07.879 m N
Lon. 70 d 33.264 m W
of gps, state margin of error: 37 ft.*

SITE EVALUATOR'S STATEMENT

I Certify that on 12/1/06 (date) I completed a site evaluation on this property and state that the data reported is accurate and that the proposed system is in compliance with the Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature — SE # 67 — Date 12/4/06

*overhead cloud cover was too dense to receive signal for required accuracy

W. HORTON
Site Evaluator Name Printed

647- 8798
Telephone #

meldrum@megalink.net
E-mail Address

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

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Division of Health Engineering, Station 10
(207) 287-4672 FAX (207) 287-3165

Town, City or Plantation	Street, Road, Subdivision	Owner or Applicant Name
Otisfield	Hidden Lake Rd.	L. Labbe

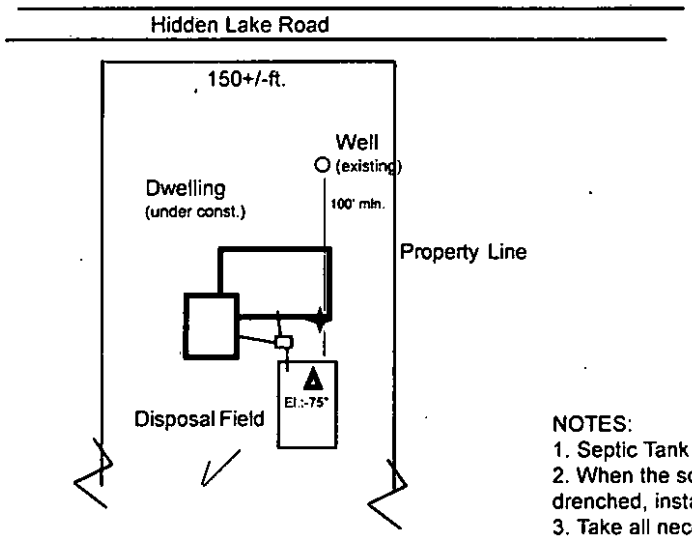
SITE PLAN

Scale: 1" = 100 Ft.

→ = SLOPE

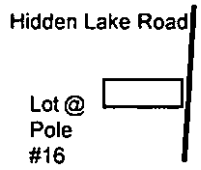
✦ = E.R.P.

▲ = OBSERVATION PIT



SITE LOCATION PLAN

(Attach map from Maine Atlas for First Time System Variance)

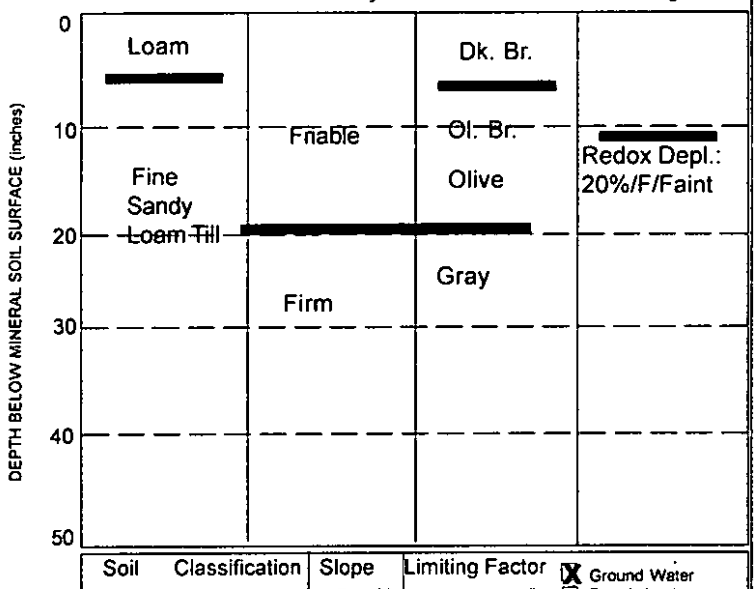


NOTES:
1. Septic Tank shall be watertight or of monolithic construction.
2. When the soil profile is 3 (see below) and the soil is moisture drenched, installation of the Field shall be postpone.
3. Take all necessary measures to protect against surface erosion of Disposal Field.

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

Observation Hole 1 ☐ Test Pit ☒ Boring

1 " Depth of Organic Horizon Above Mineral Soil



Soil Classification		Slope	Limiting Factor	
3	D	2 %	11 "	☒ Ground Water ☐ Restrictive Layer ☐ Bedrock
Profile	Condition	Percent	Depth	

MUST BE READ BY OWNER and INSTALLER -
The signature for *Owner Statement* (page 1) shall include the fact of reading and understanding:
1. This Application requires a Permit from the Town before a Building Permit for the lot is obtainable. This Application satisfies only the State Code for external plumbing. The CODE (or "Rules") is incorporated herein by reference and made part of this Application. Compliance of same is the sole responsibility of the Installer.
2. A septic tank filter or an additional tank (preferably) is required *whenever garbage disposal device is contemplated* for the dwelling. This filter demands maintenance and a cleaning of filter prior to onset of frozen ground is recommended.
3. Owner & Installer shall review this Application and verify that it accurately describes the intended uses (present and future) for the system, and that all setbacks and other information hereon is complete and factually correct, prior to its submission to the Town's LPI for a permit. This review especially applies *to neighbors' wells* (within 100 ft. of proposed disposal field), if not identified on this plan, and to any more restricted local ordinance. Report all differences to the Site Evaluator.
4. The four corner flags placed by the SE are indicators of the general location of the disposal field. However, Installer shall use the layout measurements on page 3 to locate the field precisely, as flags can be moved. If a measurement involves a property line, the Owner is responsible for locating the same prior to installation.
5. Site Evaluator's phone number is on page #1 for questions.
6. Proper functioning of a disposal system requires Septic Tank being pumped out periodically, and the tank inspected. Non-pumping and broken baffles reduce the life expectancy of a disposal field, causing clogging and requiring a replacement. Provide easy access to the Septic Tank and use a riser over the cleanout, if needed.
7. Because the method of installation and its usage have a significant effect on the proper functioning of a septic system, it is not possible to adequately predict the efficiency and/or longevity of any particular septic system design.
*Certain products (fatty foods, some liquid soaps, septic tank additives, etc.) and appliances (garbage disposals, water softeners, & dishwashers, especially) are to be used with caution as they can be harmful to the biochemical process of a Septic System.
8. Suggestion: Photo open installation showing pipes or chambers for future reference.

Site Evaluator Signature

67
SE #

12 / 4 / 06
Date

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(207) 287-5672 FAX (207) 287-3165

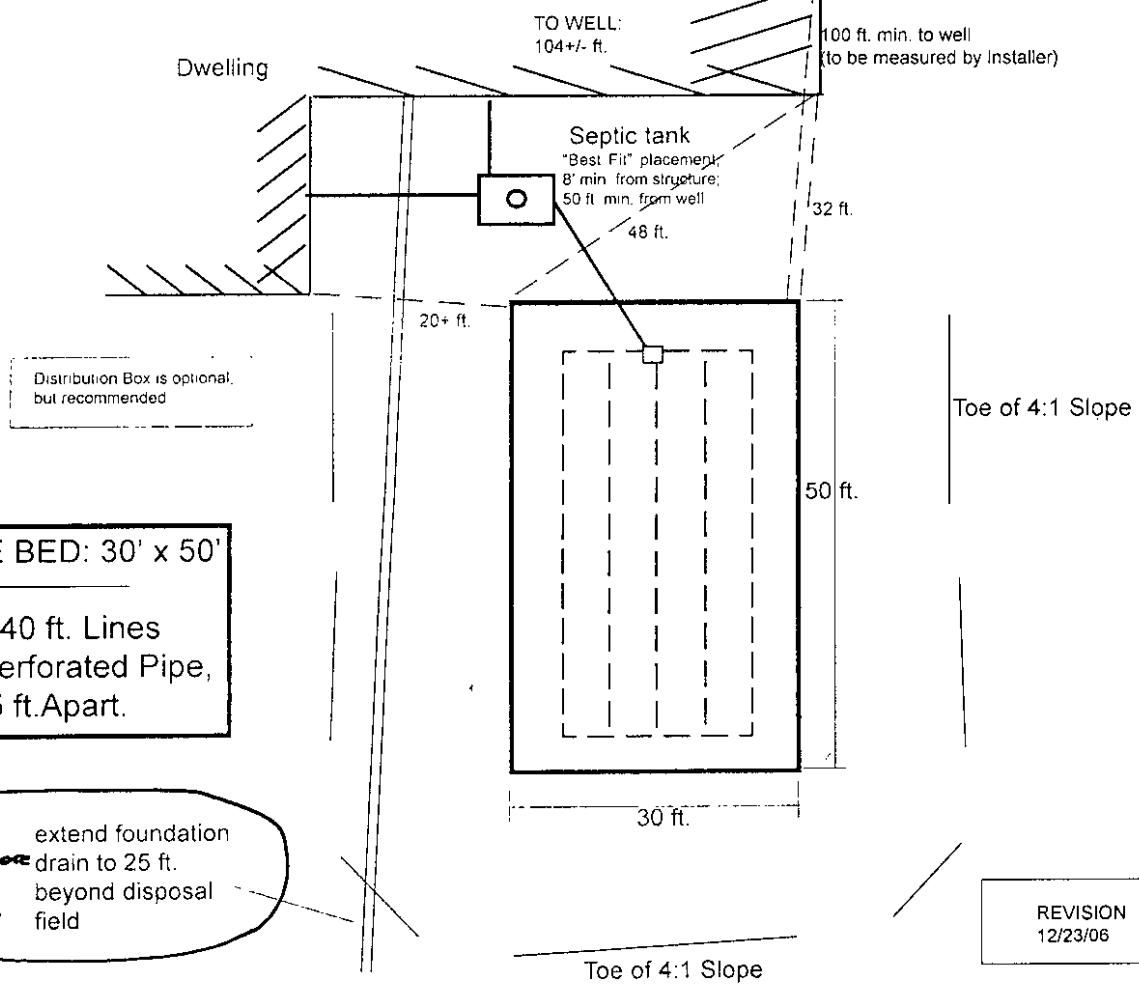
Town, City or Plantation: Otisfield

Street, Road, Subdivision: Hidden Lake Rd.

Owner or Applicant Name: L. Labbe

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20 Ft.



STONE BED: 30' x 50'

5 - 40 ft. Lines of 4" Perforated Pipe, 5 ft.Apart.

LPI to inspect before covering — extend foundation drain to 25 ft. beyond disposal field

REVISION 12/23/06

FILL REQUIREMENTS

Depth of Backfill (Upslope) 37 "
Depth of Backfill (Downslope) 44+/- "
DEPTH AT CROSS-SECTION (shown below)

CONSTRUCTION ELEVATIONS

Finished Grade Elevation -36 "
Top of Distribution Pipe or Proprietary Devices -49 "
Bottom of Disposal Area -60 "

ELEVATION REFERENCE POINT

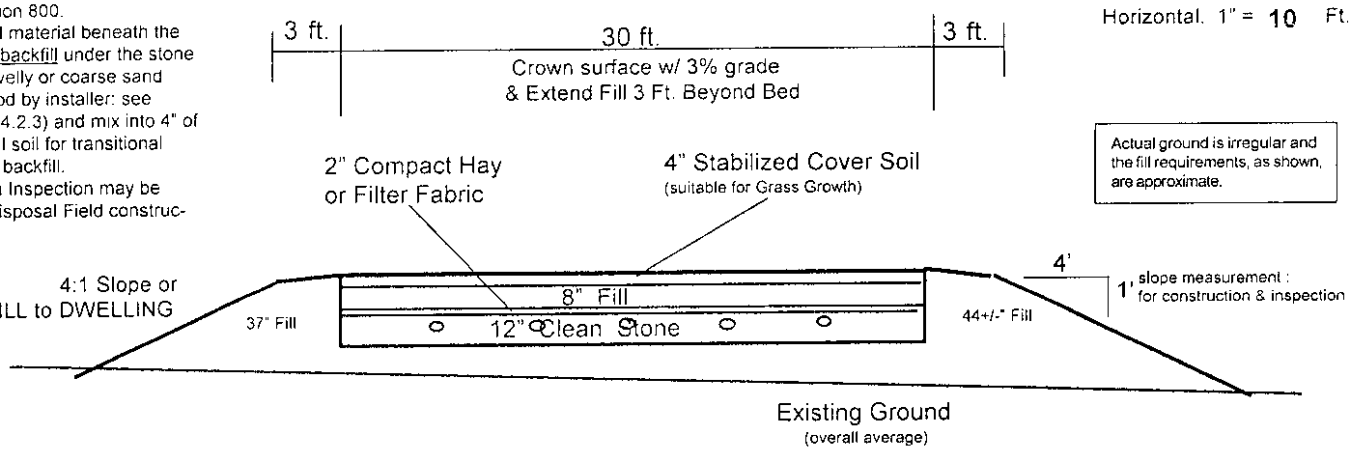
Location & Description top of concrete foundation wall
Reference Elevation is 0.0" or:

Construction Notes:

1. General installation procedure shall follow CODE Section 800.
2. Remove topsoil material beneath the disposal area and backfill under the stone with 8" min. of gravelly or coarse sand (field testing method by installer: see CODE, Section 804.2.3) and mix into 4" of backfill into original soil for transitional zone. Compact all backfill.
3. Site Preparation Inspection may be required prior to Disposal Field construction.

DISPOSAL AREA CROSS SECTION

Scales:
Vertical: 1" = 5 Ft.
Horizontal: 1" = 10 Ft.



Actual ground is irregular and the fill requirements, as shown, are approximate.

Site Evaluator Signature

67
SE #

12 / 4 / 06
Date

FIRST TIME SYSTEM VARIANCE REQUEST

This form shall accompany an Application (HHE-200) for a proposed first time system which requires a Variance to provisions of the Subsurface Wastewater Disposal Rules.
The local plumbing inspector shall not issue a permit for the installation of a first time subsurface wastewater disposal system requiring a variance from the Department of Human Services until approval has been received from them.

GENERAL INFORMATION

Permit No. 1192
Property Owner's Name: Jason Labbe
System's Location: Hidden Lake Rd
Property Owner's Address: 195 Goose Rd Oxford Me 04270
(if different from above)

Town of Otisfield
Date Permit Issued: 12-29-06
Tel. No.: 539-4565

VARIANCE CONDITIONS

The Department has the authority to vary the requirements of the Rules in accordance with Section 105.2 of the Rules CMR 241 if all the following criteria are satisfied:

a. The variance request has the approval of the LPI.
b. The Municipal Officials have indicated that the variance does not conflict with any local wastewater disposal ordinances.
c. The variance request demonstrates that there is no practical alternative for wastewater disposal, such as access to public sewer or the potential for an easement.
d. The proposed system does not conflict with any provision controlling subsurface wastewater disposal in the Shoreland Zone.
e. The site offers potential for a system which will dispose of the wastewater with minimal threat to public health, safety, or welfare.
f. The property owner has indicated an awareness of the variance and any limitations or added costs the proposed system may require.

SOIL, SITE AND ENGINEERING FACTORS FOR NEW SYSTEM VARIANCE ASSESSMENT
(SEE TABLES 2000.1-2000.10)

	CHARACTERISTIC	POINT ASSESSMENT
Soil Profile	3	15
Depth to Groundwater/Restrictive Layer	11"	6
Terrain	SideSlope	3
Size of Property	3.3Ac Setback 700'	4
Waterbody Setback	>250'	0
Water Supply	Drilled	10
Type of Development	Family	0
Disposal Area Adjustment	+33%	5
Vertical Separation Adjustment	+12"	10
Additional Treatment	Filter	3
TOTAL POINT ASSESSMENT (Sec. 2003.6)		51

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

SPECIFIC VARIANCE REQUESTED (To be filled in by Site Evaluator) — **SECTION OF RULE**

1. _____
2. _____
3. _____

SITE EVALUATOR

When a property is found to be unsuitable for subsurface wastewater disposal for a First Time System Variance 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. (Use Additional Sheets, if needed)

The increased size & vertical separation will overcome the site's limitations

I, _____, 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.

_____ 11/4/06
SIGNATURE OF SITE EVALUATOR — DATE

HHE-215 Rev 6/00

PROPERTY OWNER

I, Jason LaBbe (FILL IN FRONT) am the owner ~~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.

Jason LaBbe — SIGNATURE OF OWNER / AGENT FOR THE OWNER

12-21-06 — DATE

MUNICIPAL OFFICER(S) (Selectman, Councilman, Alderman, Mayor, Town Manager)

We, the Municipal Officer(s) of OTISFIELD have reviewed this application and are aware that the applicant is applying for a First Time System Variance to the Subsurface Wastewater Disposal Rules because the proposed system does not meet all requirements of the rules. The proposed variance request does does not comply with all Municipal Ordinances relating to subsurface wastewater disposal

Marianne Lyons Mann — SIGNATURE FOR THE MUNICIPALITY

Administrative Assistant — TITLE

12-29-06 — DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

The local plumbing inspector shall review all First Time System Variance requests *prior* to rendering a decision.

I, Rich St. John, 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, II (do ~~do not~~) approve the requested variance. I (will ~~will not~~) issue a permit for the system's installation as proposed by the application.

Rich St. John — LPI Signature

12-29-06 — Date

LOCAL PLUMBING INSPECTOR - Referral to the Department

The local plumbing inspector shall review all First Time System Variance requests prior to forwarding to the Division of Health Engineering.

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

Note: 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 1902.0 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 1901.0 for Department Review.) The LPI's signature is required on these variance requests prior to sending them to the Department.