

TOWN

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

>> CAUTION: LPI APPROVAL REQUIRED <<

PROPERTY LOCATION

City, Town, or Plantation: Milbridge

Street or Road: 219 Rays Point Rd

Subdivision, Lot #:

Town/City: Milbridge Permit # 928

Date Permit Issued: 6/27/23 Fee: \$250. +15 +20 Double Fee Charged

Charles S. Curran L.P.I. # 2156

Local Plumbing Inspector Signature

Owner Town State

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Sansouci, David Owner Applicant

Mailing Address of Owner/Applicant: 211 Rays Point Rd.
Milbridge, ME 04658

Daytime Tel. #: (603)968-3479

The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. This Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Municipal Tax Map # 08 Lot # 179C

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.

David Sansouci 6-27-23

Signature of Owner or 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.

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 **minor**

a. <25% Expansion

b. >= 25% 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

3. Replacement System Variance

a. Local Plumbing Inspector Approval

b. State & Local Plumbing Inspector

4. Minimum Lot Size Variance

5. Seasonal Conversion Permit

DISPOSAL SYSTEM COMPONENTS

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. Pre-treatment, specify: _____

12. Miscellaneous Components

SIZE OF PROPERTY

0.5 SQ. FT. ACRES

SHORELAND ZONING

Yes No

DISPOSAL SYSTEM TO SERVE

1. Single Family Dwelling Unit, No. of Bedrooms: 2

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 **OR**

b. Low Profile

2. Plastic

3. Other: _____

CAPACITY: 1,000 GAL

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: 224 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

DESIGN FLOW

180 gallons per day

BASED ON:

1. Table 4A (dwelling unit(s))

2. Table 4C (other facilities)

SHOW CALCULATIONS for other facilities: _____

SOIL DATA

PROFILE: 8 CONDITION: E

at Observation Hole # TP-1

Depth 6 "

of Most Limiting Soil Factor: Groundwater

DISPOSAL FIELD SIZING

1. Medium--2.6 sq. ft. / gpd

2. Medium--Large 3.3 sq. ft. / gpd

3. Large--4.1 sq. ft. / gpd

4. 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

3. Section 4G (meter readings)

ATTACH WATER METER DATA

LATITUDE AND LONGITUDE at center of disposal area

Lat. 44 d 33 m 48.1 s

Lon. 67 d 50 m 17.2 s

if g.p.s. state margin of error: 20'

SITE EVALUATOR STATEMENT

I certify that on 5/17/23 (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).

Samuel Altvater SE # SE00429 Date 6/15/23

Site Evaluator Signature SE # Date

Samuel Altvater (207)478-7105 samaltvater@gmail.com

Site Evaluator Name Printed Telephone Number Email Address

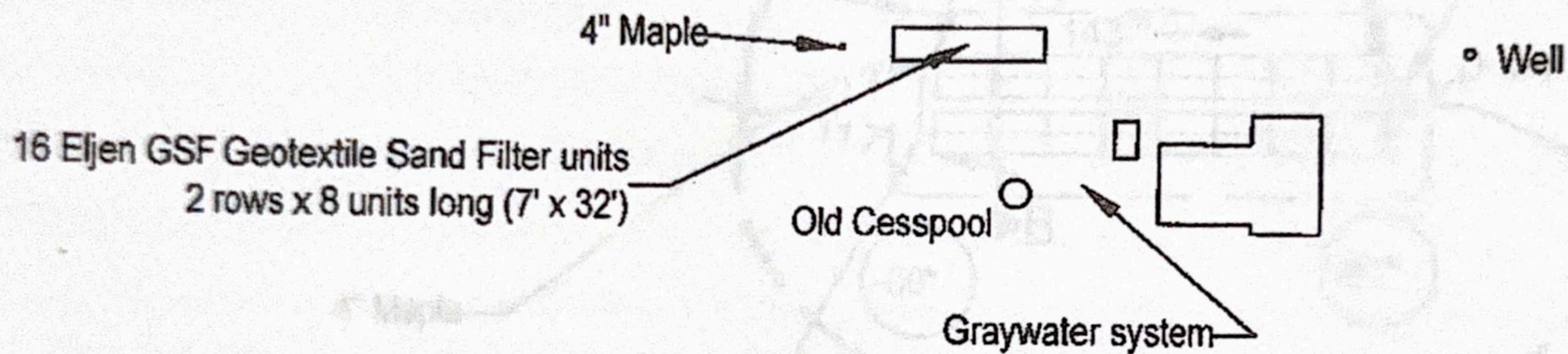
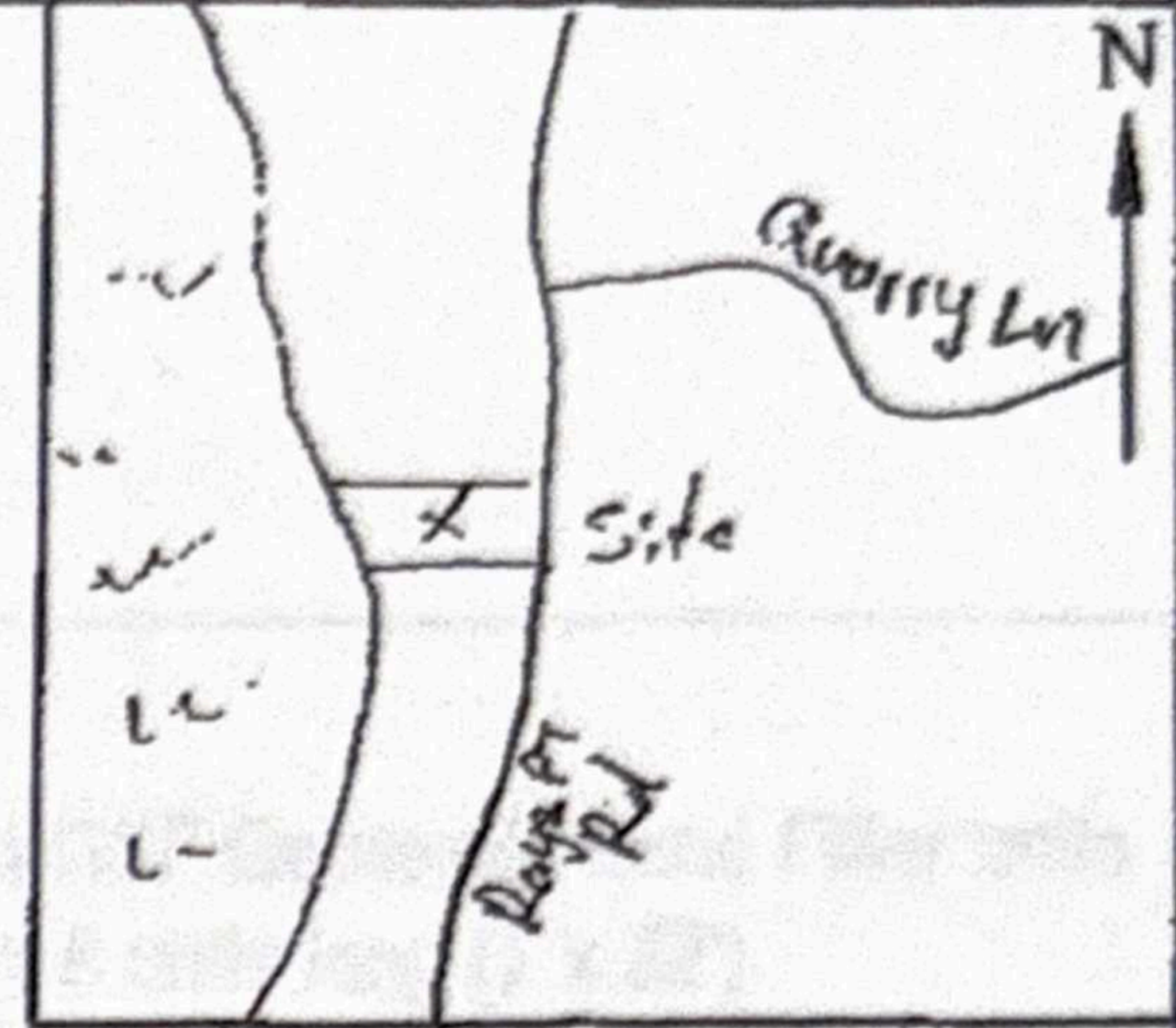
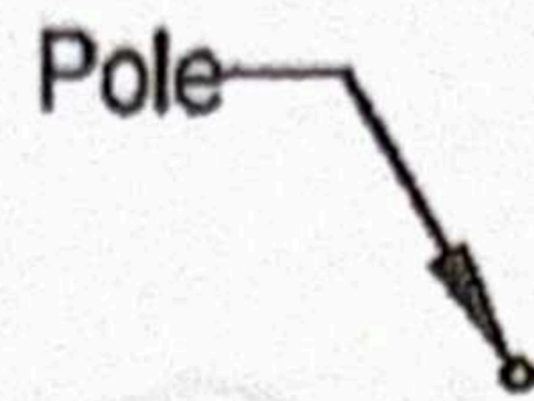
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
Division of Health Engineering, Station 10
(207) 287-5672 Fax (207) 287-3165

Town, City, Plantation: **Milbridge** Street, Road, Subdivision: **219 Rays Point Rd** Owner or Applicant Name: **David Sansouci**

SITE PLAN Scale 1" = 60 ft.

SITE LOCATION PLAN



NOTES:

1. Scarify all ground to be filled. Remove vegetation and organic loam topsoil. Scarify soil to a depth of 6 to 8 inches by mixing gravelly coarse sand with native soil using a rototiller or a backhoe bucket with teeth. Do not use a backhoe bucket without teeth because it can compact and smear the underlying soil.

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

Observation Hole # TP-1 Test Pit Boring

4" Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0 - 6	Loam	Friable	Dark Grayish	
6 - 12	Silt Loam	Friable	Dark Yellowish Brown	
12 - 18	Silt Loam	Firm	Olive Brown	Few & Distinct
18 - 48	Limit of Excavation at 16 inches			

Soil Profile: <u>8</u>	Classification Condition: <u>E</u>	Slope Percent: <u>2.5</u>	Limiting Factor Depth: <u>6"</u>	<input checked="" type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Observation Hole # _____ Test Pit Boring

_____ Depth of organic horizon above mineral soil

Depth below mineral soil surface (inches)	Texture	Consistency	Color	Mottling
0 - 6				
6 - 12				
12 - 18				
18 - 24				
24 - 30				
30 - 36				
36 - 42				
42 - 48				

Soil Profile: _____	Classification Condition: _____	Slope Percent: _____	Limiting Factor Depth: _____	<input type="checkbox"/> Groundwater
				<input type="checkbox"/> Restrictive Layer
				<input type="checkbox"/> Bedrock

Site Evaluator Signature

SE00429
SF #

6/15/23
Date

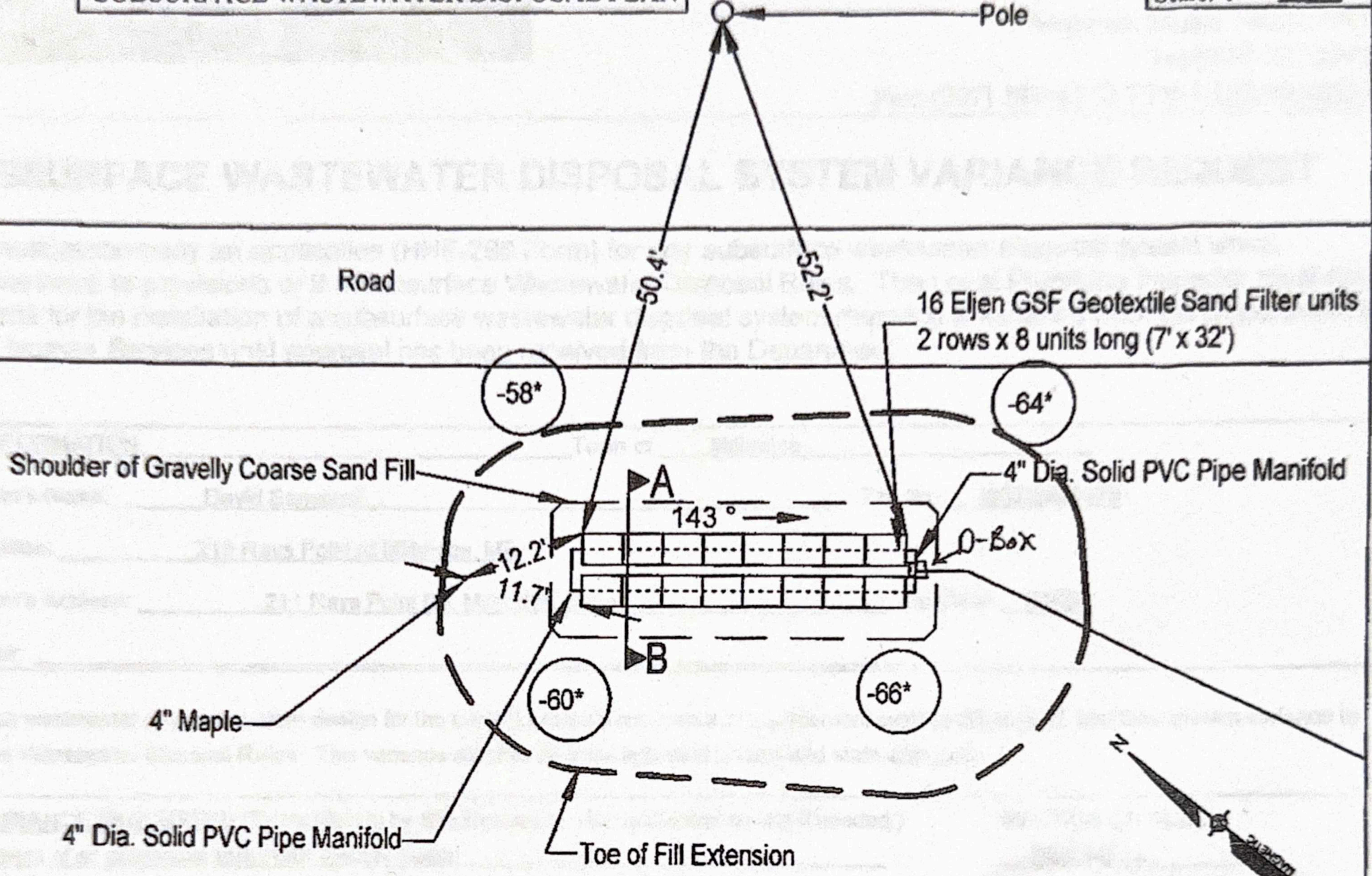
SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Department of Human Services
 Division of Health Engineering, Station 10
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation Milbridge	Street, Road, Subdivision 219 Rays Point Rd	Owner or Applicant Name David Sansouci
--	---	--

SUBSURFACE WASTEWATER DISPOSAL PLAN

Scale: 1" = 20' ft



NOTES:

1. Review the Eljen Geotextile Sand Filter (GSF) Design and Installation Manual before installing this system.

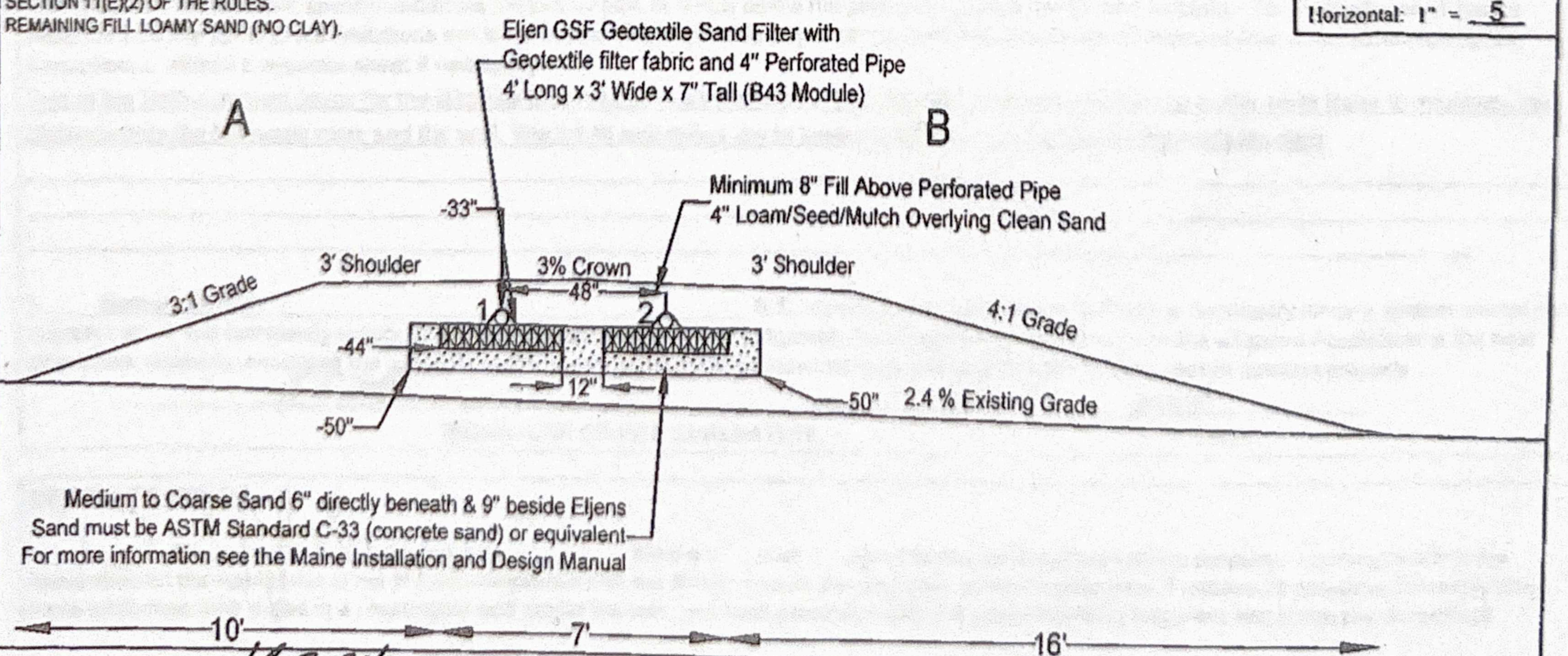
Original Ground Elevation*

BACKFILL REQUIREMENTS	CONSTRUCTION ELEVATIONS	ELEVATION REFERENCE POINT
Depth of Backfill (upslope) 33" to 39"	Finished Grade Elevation (at Row 1) -25"	Location & Description: Pole
Depth of Backfill (downslope) 35" to 41"	Top of Perforated Pipe (at Row 1) -33"	32" UP
	Bottom of Eljen Unit (at Row 1) -44"	Reference Elevation: 0.0"
	Bottom of System Sand (at Row 1) -50"	

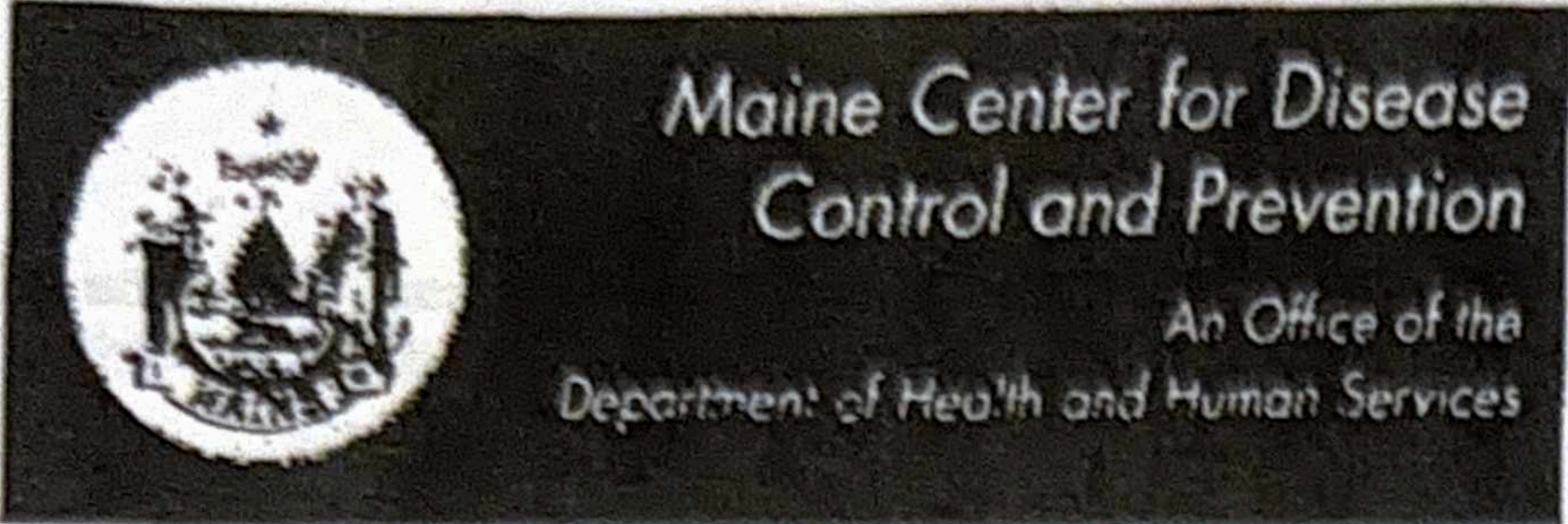
NOTE: DISPOSAL FIELD BACKFILL MATERIAL PLACED BELOW OR WITHIN 3' OF THE SYSTEM SAND MUST BE GRAVELLY COARSE SAND MEETING SECTION 11(E)(2) OF THE RULES. REMAINING FILL LOAMY SAND (NO CLAY).

DISPOSAL FIELD CROSS SECTION

Scales:
 Vertical: 1" = 5'
 Horizontal: 1" = 5'



Medium to Coarse Sand 6" directly beneath & 9" beside Eljens Sand must be ASTM Standard C-33 (concrete sand) or equivalent. For more information see the Maine Installation and Design Manual



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) 287-2070
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 Milbridge

Property Owner's Name: David Sansouci Tel. No.: (603)9683479

System's Location: 219 Rays Point rd Milbridge, ME

Property Owner's Address: 211 Rays Point Rd. Milbridge, ME Zip Code 04658

e-mail address: _____

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>Replacement of an alternative toilet with a water closet.</u>	<u>Sec. 9C 2a</u>
2. <u>3:1 fill extensions on the uphill side of the disposal area</u>	<u>Sec.8D(c)</u>
3. <u>89' to well & 75' to proposed well</u>	<u>Table 8A</u>

SITE EVALUATOR

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.

Due to the limited amount space for the disposal area the bed is also located in the area with the most suitable soil profile while trying to maximize the distance from the highwater mark and the well. The 3:1 fill extensions are to keep the fill from encroaching on the roadside ditch

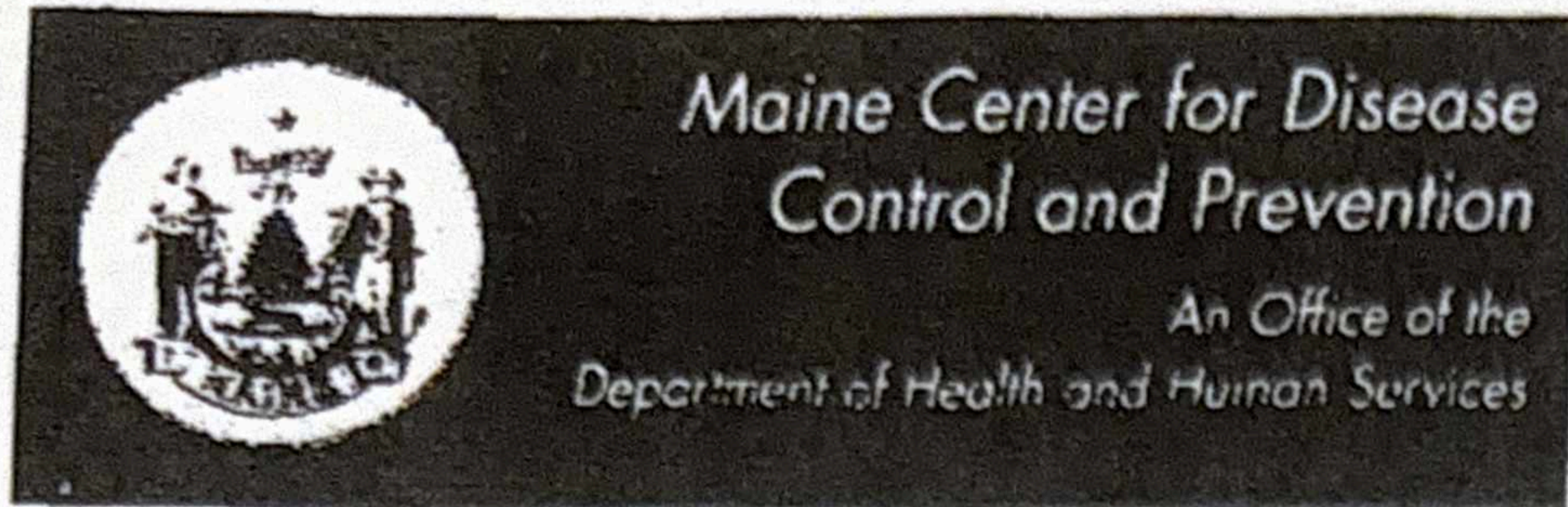
I, Samuel Altvater, S.E., certify that a variance to the Rules is necessary since a system cannot be installed which will completely satisfy all the Rule requirements. In my judgment, the proposed system design on the attached Application is the best alternative available; enhances the potential of the site for subsurface wastewater disposal; and that the system should function properly.

[Signature] 6/26/22

SIGNATURE OF SITE EVALUATOR DATE

PROPERTY OWNER

I, David Sansouci, 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



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) 287-2070
Fax: (207) 287-4172; TTY: 1-800-606-0215

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