

Shoreland
Certified Contractor
Number # _____
 Non Shoreland

*72
x.06
6.48 522
+25.08
31.56
36.48*

Town of Belgrade, Maine APPLICATION FOR PERMIT

990 Augusta Road Belgrade Me 04917
207-495-2258
Application # _____
Map# 26 Lot# 48
Permit# _____

Date Logged 2/6/24 Date Rec'd by PB/CEO _____ \$ 31.48 Fee Paid Receipt# _____

1. Applicant: Name <u>Joy M Intriago</u> Mailing Addr <u>PO Box 541</u> State/Zip <u>ME/04918</u> Phone# <u>207-480-9868</u>	2. Owner (if other than applicant): Name _____ Mailing Addr _____ State/Zip _____ Phone# _____
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3. Specific location of property 12 Dern Lane, Belgrade, ME 04918 Map# 26 Lot# 048
Name of Lake/Pond/Stream (if applicable) Great Pond

4. Current use of property (check all that apply)
 Residential/Recreational; _____ Individual Private Campsite; _____ Commercial; _____ Industrial; _____ Other

5. Proposed construction or change in use: Enclose a deck to expand dining room adding 72 square feet.

6. Existing sewage disposal system type and capacity: 1000 gallon tank
Present number of bedrooms 3; Bedrooms to be added under this application 0
When did you purchase the property within Shoreland Zone? May 2023 (month/year) If after 11/6/18, attach copy of septic system inspection report documenting it is not malfunctioning.

7. Total lot area 1.6 acres; Lot area within the Shoreland Zone 36,250 ft²

8. Square footage of unvegetated surface within shoreland zone including all structures, driveways, parking, walkways and patios. 1800

9. What is the total area of cleared openings of woody vegetation (Sqft) approx 150 ft. x 100 ft. = 15,000 ft²

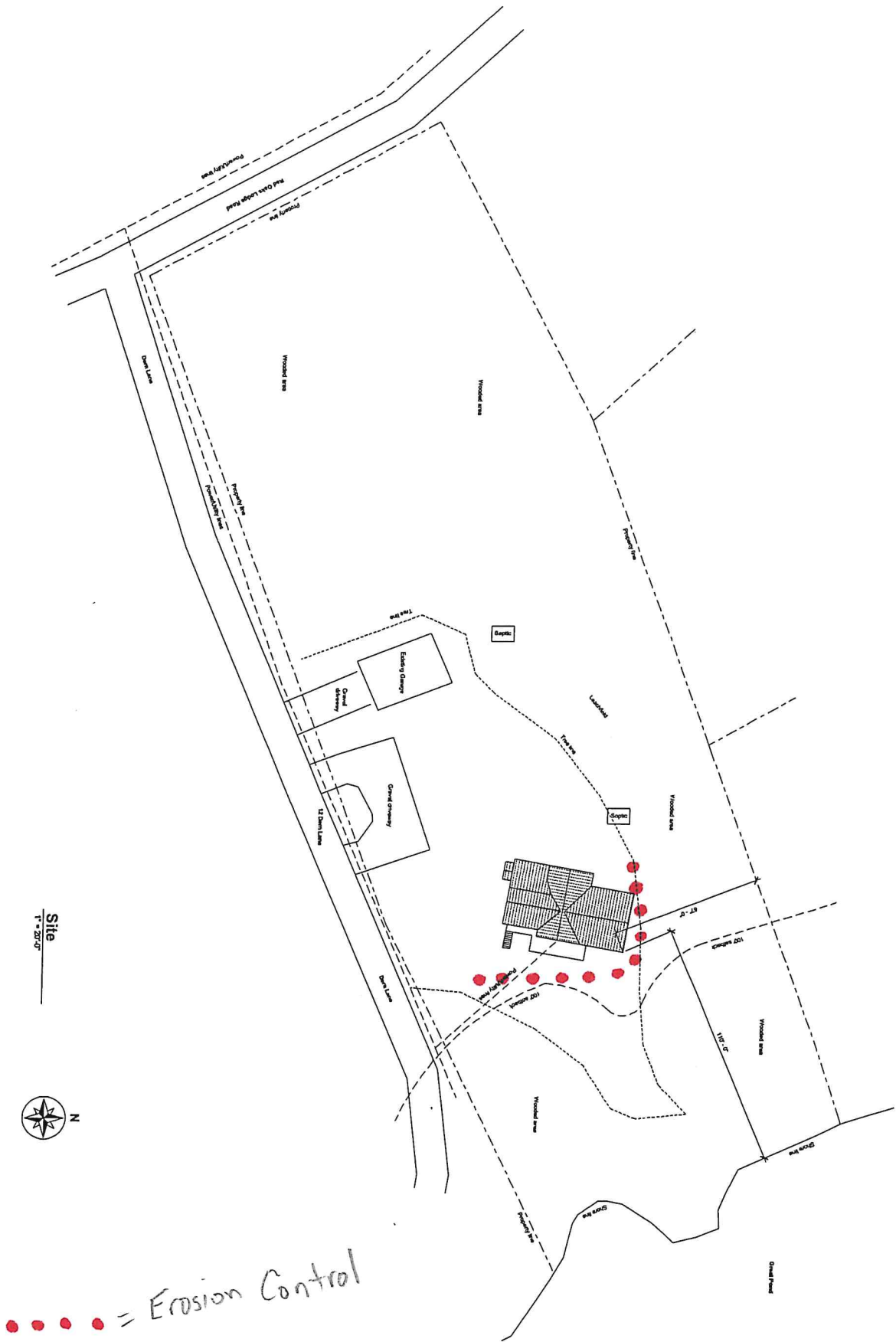
10. Total number of structures on the lots 2. A site plan to-scale MUST accompany this application and be prepared in accordance with the requirements on the attached Instruction Sheet (Item #10 on the Instruction Sheet). All required attachments must accompany this application.

Present Structure Square Footage	<u>1800</u>	_____
Proposed Structure Square Footage	<u>1872</u>	_____

*Required only for structures within Shoreland Zone
I/We have obtained and understand the requirements of all Town of Belgrade Ordinance which apply to the proposed construction or change of use. The undersigned applies for a permit to build, alter or improve existing structure(s) or grounds as stated above on this application and portrayed on the attachments. The information provided is true and correct.
Signature: Joy M Intriago Signature: _____

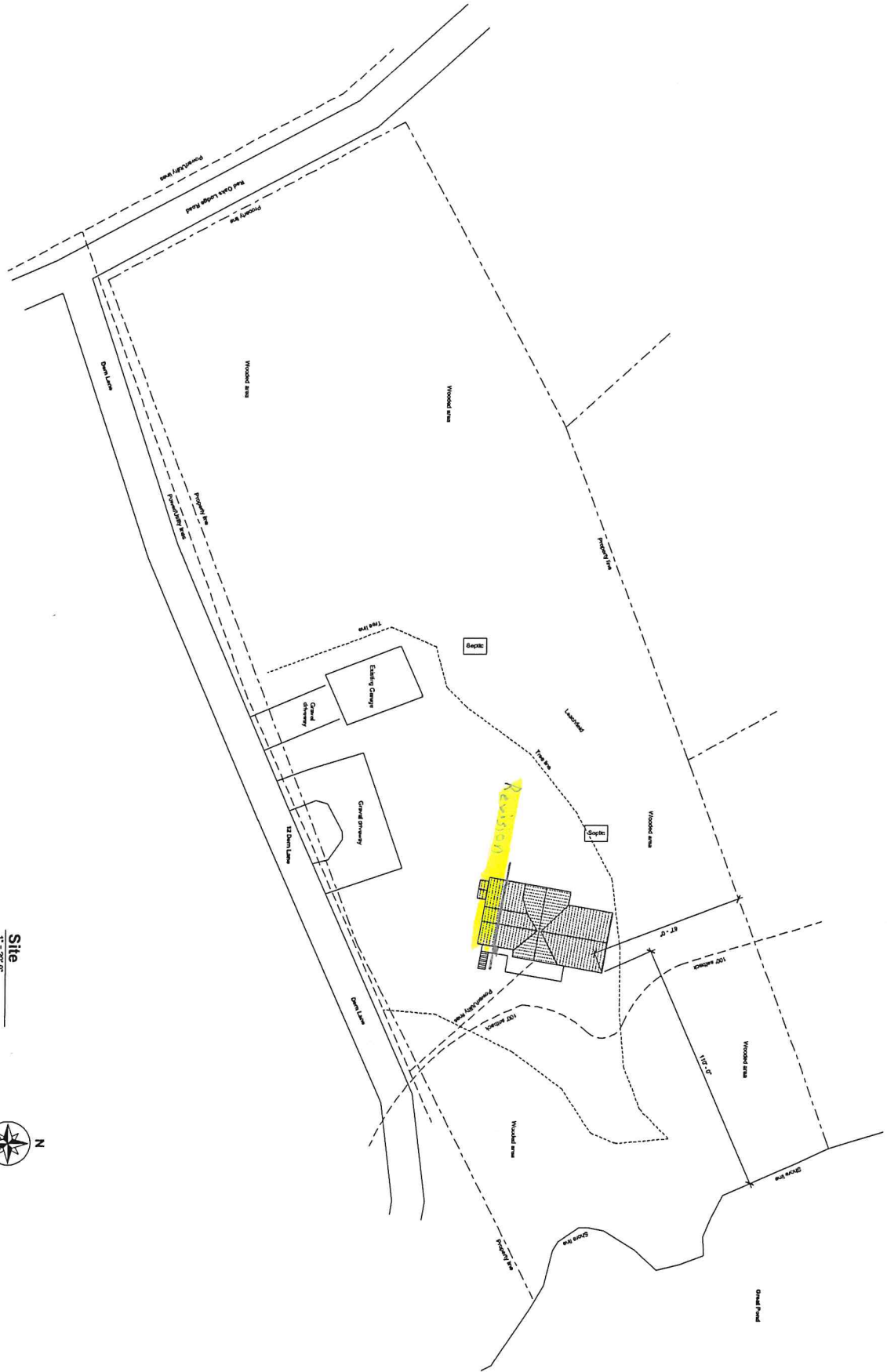
There may be additional Federal, State or local permits required depending on the nature of the project.

TOWN USE ONLY DECISION: _____ APPROVE _____ DISAPPROVED Conditions _____ _____ _____ _____	Date: _____ PB _____ CEO _____ Signatures: _____ _____ _____ _____
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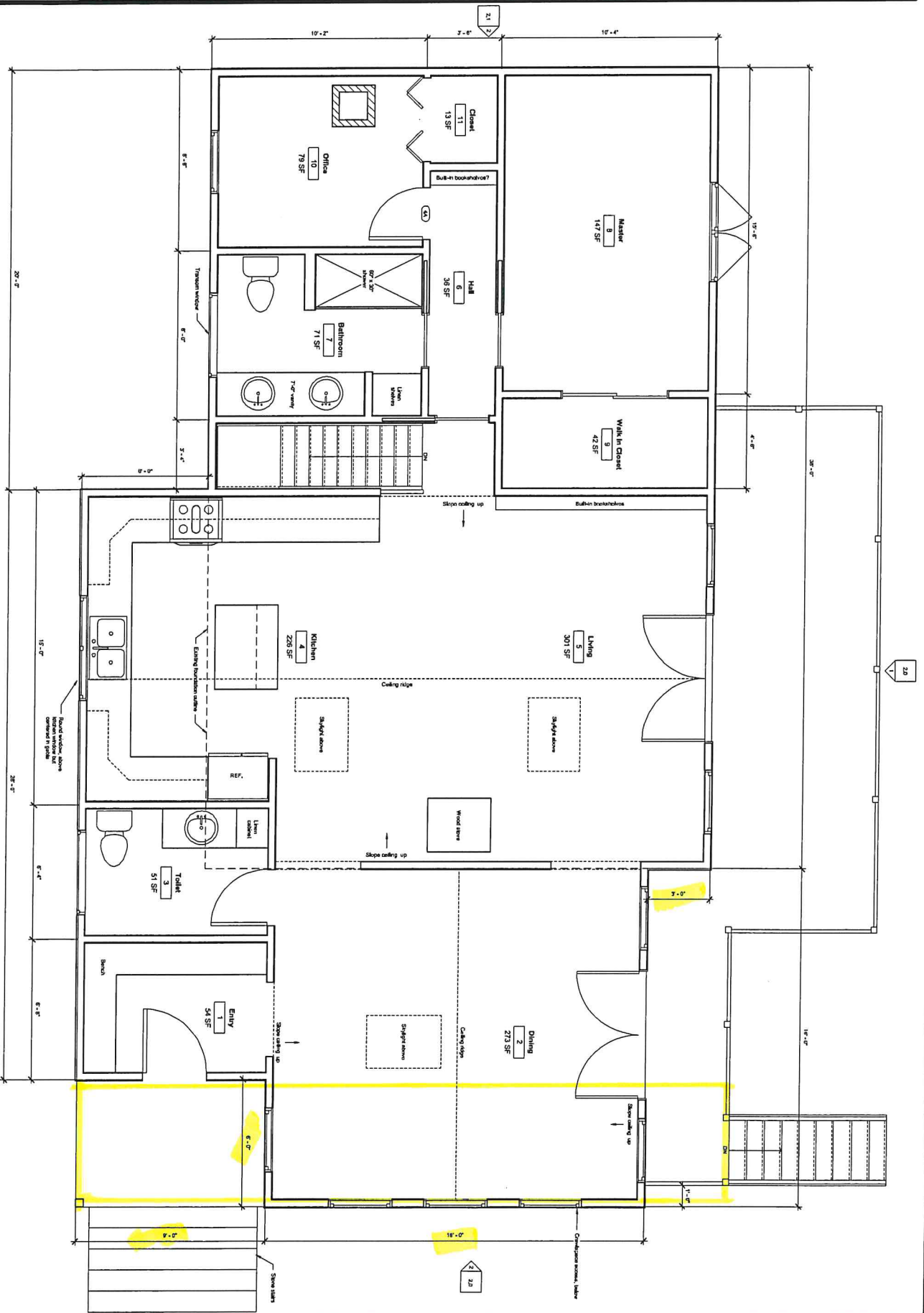


..... = Erosion Control

1.0	Site Plan	CONSTRUCTION DOCUMENTS	Project #	Intriago, Joy	BOURASSA DESIGN & INSPECTION	Rev. Log
			Project Name	Proposed Construction		
			Date	12 Dern Lane, Belgrade ME		



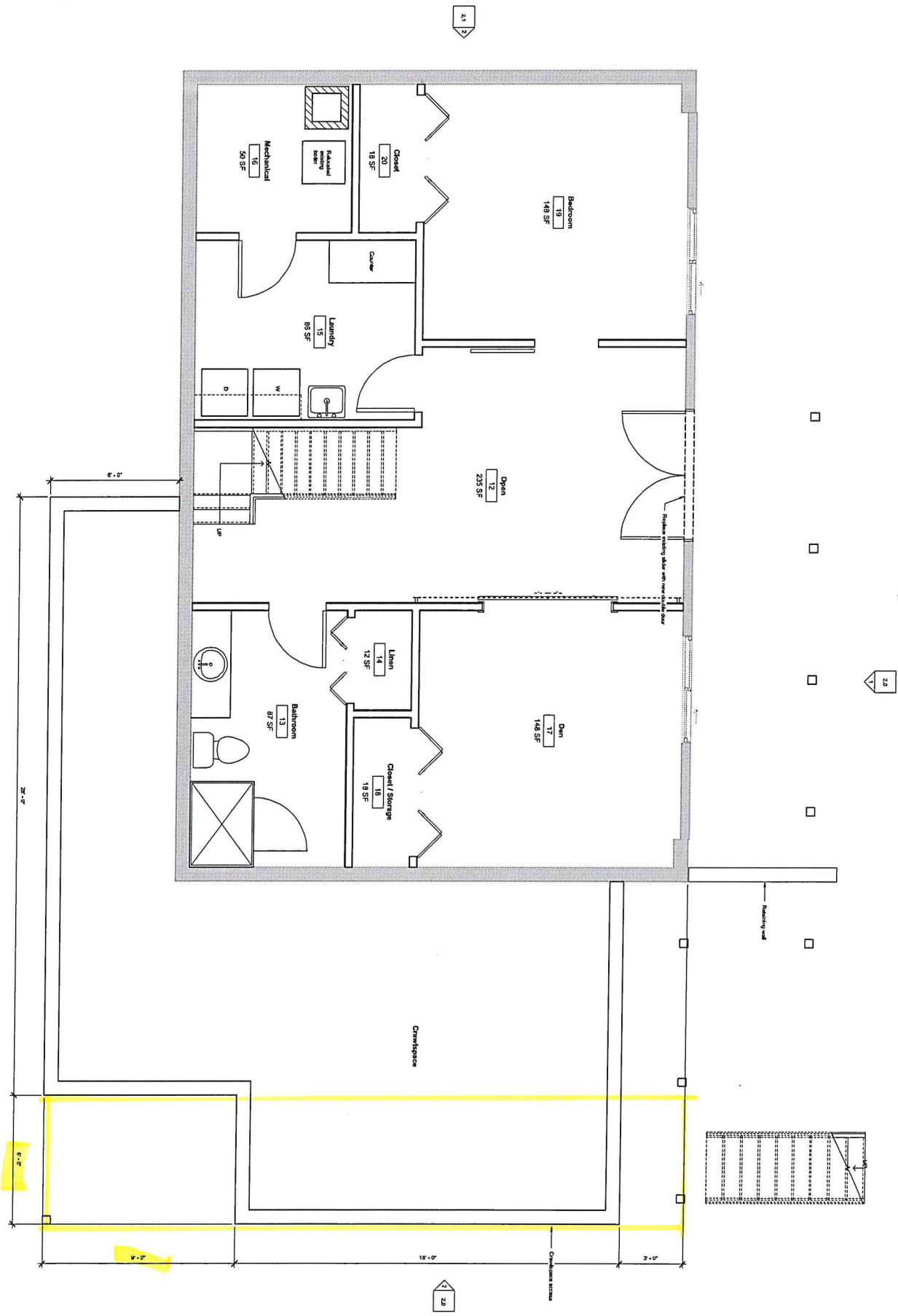
CONSTRUCTION DOCUMENTS Site Plan 1.0	Intriago, Joy Proposed Construction 12 Dern Lane, Belgrade ME	BOURASSA DESIGN & INSPECTION	Rev. Log Date: 2/2/24 Scale:
	PROJECT: Intriago, Joy DATE: 2/2/24 ARCHITECT: BOURASSA SCALE: 1/4" = 1'-0"		



First Floor
1/2" = 1'-0"

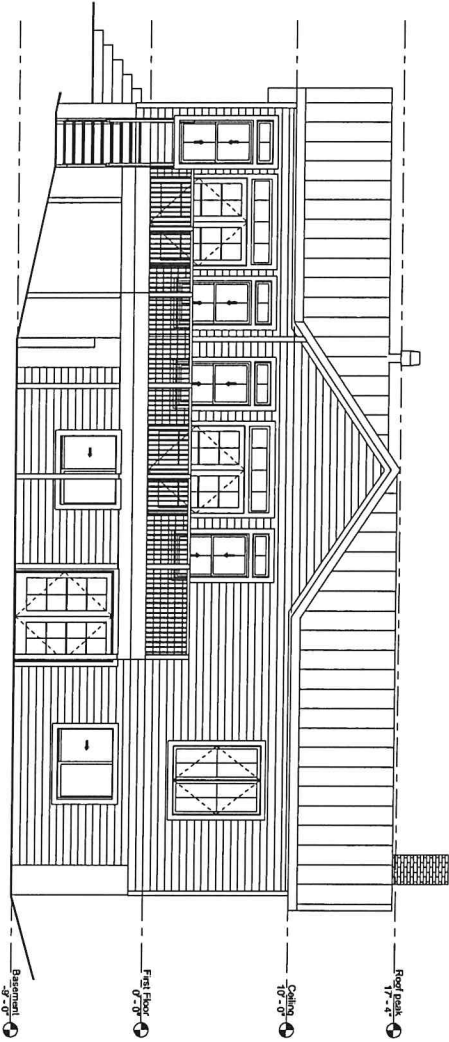


CONSTRUCTION DOCUMENTS Floor Plan I.1	Intriago, Joy Proposed Construction 12 Dern Lane, Belgrade ME	BOURASSA DESIGN & INSPECTION	Rev. Log Date: _____ By: _____
	PROJECT: _____ DATE: _____ SCALE: _____		

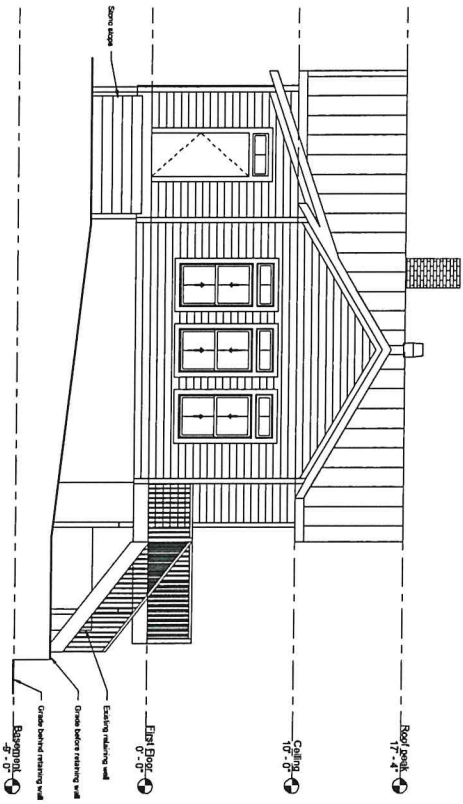


Basement
1/8" = 1'-0"

CONSTRUCTION DOCUMENTS Basement Plan 1.2	PROJECT: Intriago, Joy Proposed Construction 12 Dern Lane, Bangor ME	BOURASSA DESIGN & INSPECTION	REV. LOG Date: _____ By: _____
	DATE: 3/1/2024 SCALE: N/A		

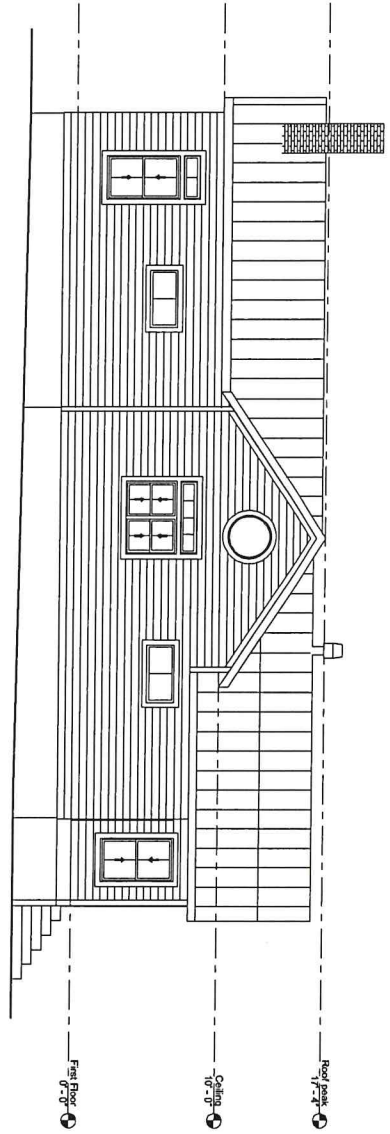


1 East

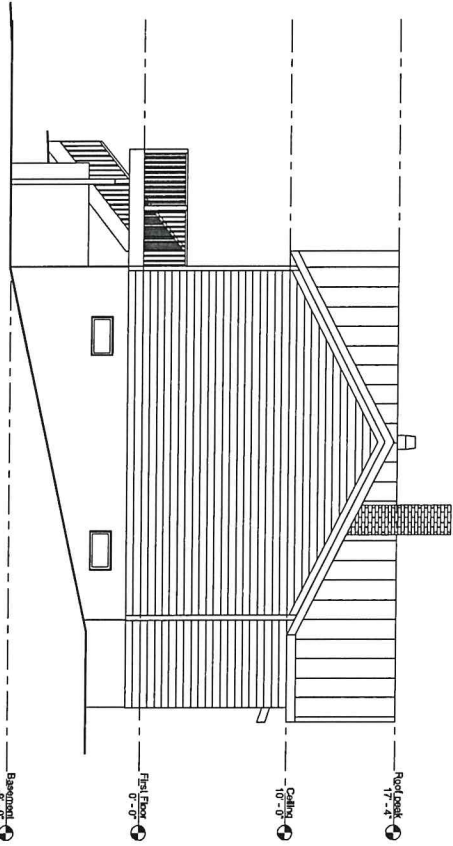


2 South

CONSTRUCTION DOCUMENTS	Date: _____ Rev. Log	BOURASSA DESIGN & INSPECTION	Intriago, Joy Proposed Construction 12 Dern Lane, Belgrade ME	PROJECT # _____ DATE: _____ S/C/CLAS _____
	Elevation			2.0



① West



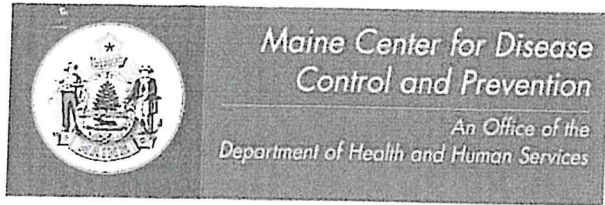
② North

Rev. Log Date _____ Project _____	BOURASSA DESIGN & INSPECTION	
	Intriago, Joy Proposed Construction 12 Dern Lane, Bangor ME	
PROJECT # _____ DATE _____ ARCHIT. _____ 4/1/2024	CONSTRUCTION DOCUMENTS Elevation	
2.1		









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 Belgrade

Property Owner's Name: Joy Intrriago Tel. No.: 207-480-9868

System's Location: 12 Dery Lane

Property Owner's Address: PO Box 541, Belgrade Lakes, ME Zip Code 04918

e-mail address: joy@Lakehomegroup.com

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.)

1. Reduce setback between the well and new disposal field to 75 feet and to the existing septic tank to 60 feet.

SECTION OF RULE
Sec. 8.A.1. and Table 8A

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.

The new disposal field is larger and more appropriately sized for the dwellings being served. Plus, the Elyen system provides pre-treatment of the effluent and more protection for the well and nearby Lake.

I, Kenneth G. Stratton, 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.

Kenneth G. Stratton SE157
 SIGNATURE OF SITE EVALUATOR

5/10/23
 DATE

PROPERTY OWNER

I, Joy Intrriago, 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.

SIGNATURE OF OWNER
 AGENT FOR THE OWNER

6/27/23
 DATE

LOCAL PLUMBING INSPECTOR - Approval at local level

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

I, Hans Rasmussen, 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.

Hans Rasmussen
LPI Signature

6/27/2023
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	N/A	
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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. Health & Human Services
Div. Environmental Health, 11SHS
(207) 287-2070 Fax: (207) 287-4172

PROPERTY LOCATION

City, Town, or Plantation: Belgrade
Street or Road: 12 Dern Lane
Subdivision, Lot #: N/A

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: Belgrade Permit #: 23-48
Date Permit Issued: 6/27/23 Fee: 265.00 Double Fee Charged []
Local Plumbing Inspector Signature: Hans Rasmussen L.P.I. #: 2298
Fee: \$ _____ state min fee \$ _____ Locally adopted fee
Copy: [] Owner [] Town [] State

OWNER/APPLICANT INFORMATION

Name (last, first, MI): Intriago, Jay Owner Applicant
Mailing Address of Owner/Applicant: PO Box 541
Owner/Applicant: Belgrade Lakes, ME 04918
Daytime Tel. #: 207-480-9868

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.

Municipal Tax Map #: 2B Lot #: 48

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.

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: Hans Rasmussen
(1st) date approved: 6/27/23
(2nd) date approved: 6/30/23

Signature of Owner or Applicant: _____ Date: _____

PERMIT INFORMATION

TYPE OF APPLICATION

- 1. First Time System
- Replacement System
Type replaced: stone bed
Year installed: 1988
- 3. Expanded System
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 Approval
- Replacement System Variance
 Local Plumbing Inspector Approval
b. State & Local Plumbing Inspector Approval
- 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
- 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

1.6 SQ. FT. ACRES

DISPOSAL SYSTEM TO SERVE

- Single Family Dwelling Unit, No. of Bedrooms: 3
- 2. Multiple Family Dwelling, No. of Units: _____
- Other: 1-bedroom apartment (specify)
Current Use: Seasonal Year Round _____ Undeveloped

TYPE OF WATER SUPPLY - existing

- Drilled Well
- 2. Dug Well
- 3. Private
- 4. Public
- 5. Other

SHORELAND ZONING

Yes No

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK -

- Concrete existing
- Regular Repair covers
- b. Low Profile
- 2. Plastic
- 3. Other: _____
- CAPACITY: 1,000 GAL.
2 tanks - 1,000 gal each

DISPOSAL FIELD TYPE & SIZE

- 1. Stone Bed
- 2. Stone Trench
- Proprietary Device
a. cluster array Linear
- regular load
- d. H-20 load
- 4. Other: 27 Eljen units
- SIZE: 1,296 (sq. ft.) lin. ft.

GARBAGE DISPOSAL UNIT

- 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

360 total gallons per day
BASED ON:
 Table 4A (dwelling unit(s))
2. Table 4C (other facilities)
SHOW CALCULATIONS for other facilities
3-bdrm home - 270 gpd
1-bdrm apt - 90 gpd
3. Section 4G (meter readings) 360
ATTACH WATER METER DATA gpd

SOIL DATA & DESIGN CLASS

PROFILE CONDITION: 31C original soil
at Observation Hole # 1
Depth 50 "
of Most Limiting Soil Factor

DISPOSAL FIELD SIZING

- 1. Medium—2.6 sq. ft. / gpd
- 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

- Not Required for home
- 2. May Be Required
- Required for apt.
- Specify only for engineered systems:
DOSE: _____ gallons

LATITUDE AND LONGITUDE

at center of disposal area
Lat. 44 d 31 m 39 s N
Lon. 69 d 52 m 53 s W
if g.p.s. state margin of error: _____

SITE EVALUATOR STATEMENT

I certify that on 5/8/23 (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).

Site Evaluator Signature: Kenneth G. Stratton
Site Evaluator Name Printed: Kenneth G. Stratton

KENNETH G. STRATTON
LSE 157

SE #: 157 Date: 5/10/23

Telephone Number: 207-931-7418

E-mail Address: _____

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

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health & Human Services
 Division of Environmental Health
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation

Street, Road, Subdivision

Belgrade

12 Deryn Lane

Owner's Name

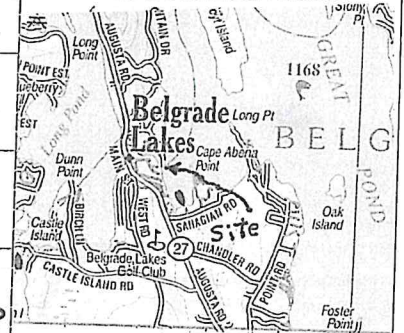
Joy Intrriago

SITE PLAN

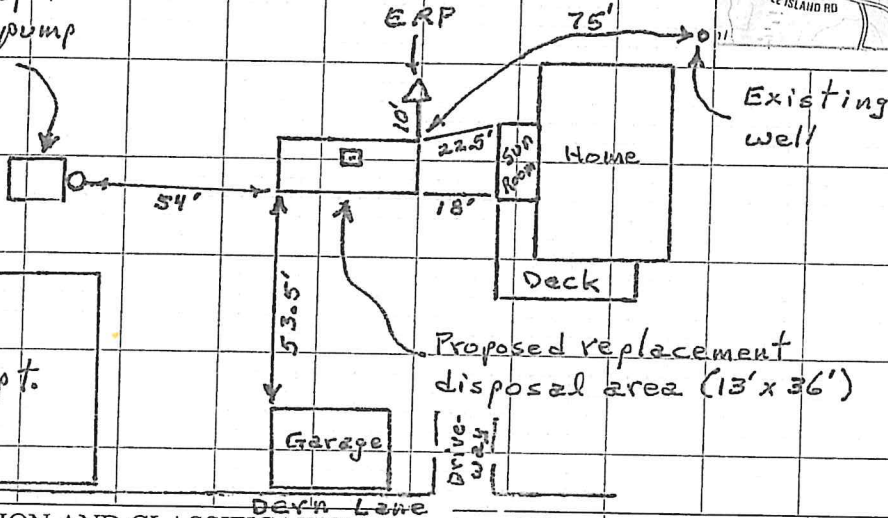
Scale 1" = 50' ft. or as shown

SITE LOCATION PLAN

The new disposal bed will be located in the area of the existing stone bed. All contaminated stone & soil should be removed.



Existing septic tank and pump chamber



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

Observation Hole Test Pit Boring
 " 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	Sandy loam	Friable	Brown	None
10	Topsoil			
10-20	Crushed stone of bed	Very friable	Gray	
20-30	Stony sandy loam	Friable	yellow brown	
30-40	glacial till			
40-50		slightly firm	Light olive	Few, faint

Depth Below Mineral Soil Surface (inches)	Texture	Consistency	Color	Mottling
0				
10				
20				
30				
40				
50				

Soil Classification <u>3</u> <u>C</u> Profile Condition	Slope <u>0-3%</u>	Limiting Factor <u>50"</u>	<input checked="" type="checkbox"/> Ground Water <input checked="" type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Soil Classification Profile Condition	Slope %	Limiting Factor "	<input type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
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Kenneth G. Stratton

157

5/10/23

Site Evaluator Signature

SE #

Date

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Department of Health & Human Services
 Division of Environmental Health
 (207) 287-5672 Fax: (207) 287-3165

Town, City, Plantation

Street, Road, Subdivision

Owner's Name

Belgrade

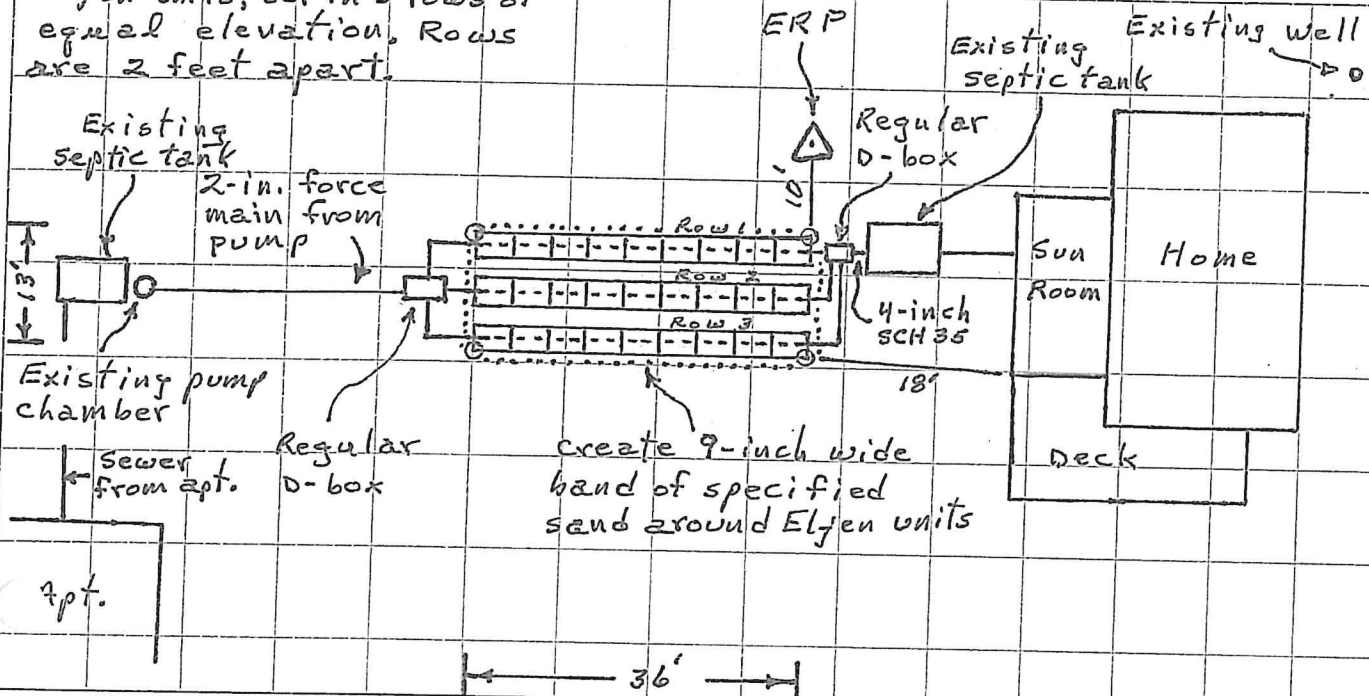
12 Dern Lane

Joy Intriaigo

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.

This design requires 27 Eljen units, set in 3 rows of equal elevation, Rows are 2 feet apart.



FILL REQUIREMENTS

CONSTRUCTION ELEVATIONS

ELEVATION REFERENCE POINT

Depth of Fill (Upslope) 0"
 Depth of Fill (Downslope) 0"

Finished Grade Elevation *See Attached p. 4*
 Top of Distribution Pipe or Proprietary Device _____
 Bottom of Disposal Area _____

Flagged nail in 10-inch wh. birch. Nail is 48" up on tree. ERP = 0"

DISPOSAL AREA CROSS SECTION

Scale

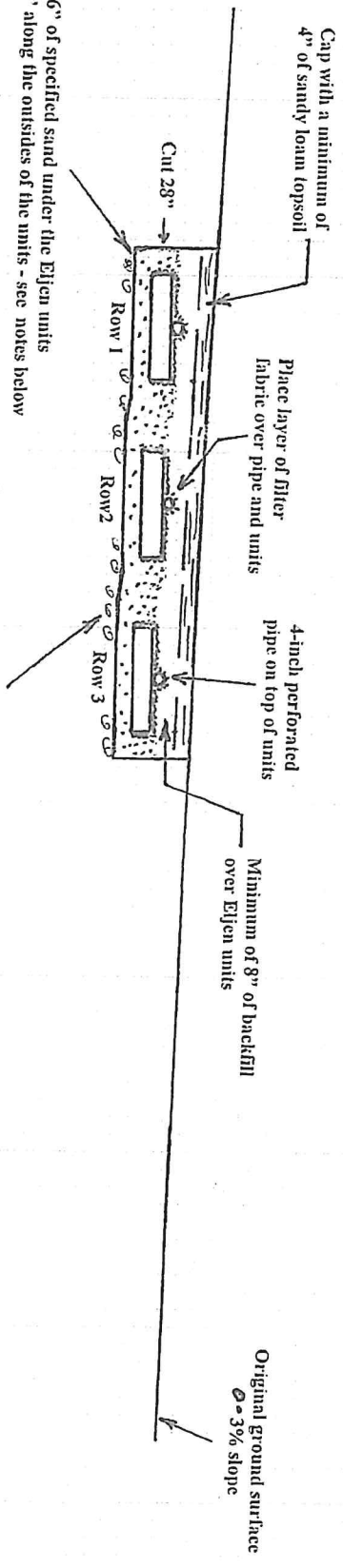
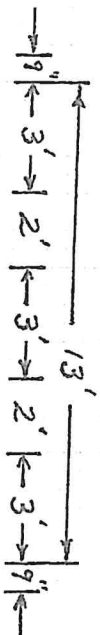
Horizontal 1" = 5 ft.
 Vertical 1" = 5 ft.

See Attached Page 4 -
 Disposal Area Cross Section

Kenneth G. Sparta
 Site Evaluator Signature

157
 SE #

5/10/23
 Date



Place 6" of specified sand under the Eljen units and 3" along the outsides of the units - see notes below

NOTE: The 3 rows of Eljens are at the same elevation,

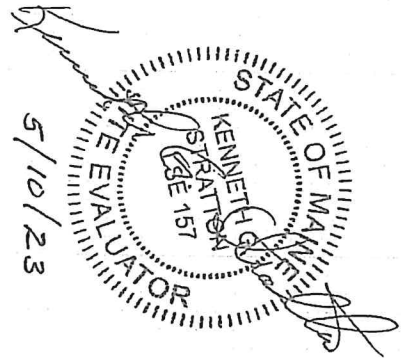
Note: Backfill means gravelly coarse sand

Create a 4-inch transition zone under the disposal area footprint and under all side and down-slope fill extensions by mixing gravelly coarse sand into the original soil

Specified Sand: The system must be installed using a medium to coarse sand with an effective size of 0.25 to 2.0 mm, no greater than 10% passing a #100 sieve and 5% passing a #200 sieve, and no particles larger than 0.375"; or materials meeting the ASTM C33 specification with less than 10% passing a #100 sieve and less than 5% passing a #200 sieve. Washed concrete sand easily meets the above specification and is a reliable choice. Suitability of bank run sand must be verified.

ELEVATIONS - ERP = 0"

	ROW 1	ROW 2	ROW 3
Finished Grade	-40" ±	-40" ±	-40" ±
Top of Perforated Pipe	-51"	-51"	-51"
Bottom of Units	-62"	-62"	-62"
Bottom of Sand	-68"	-68"	-68"



Attachment to Form HHE-200

DISPOSAL AREA CROSS SECTION

Design Completed for: Log Intrigo
 Location: 12 Dero Lane, Belgrade Lakes

SCALE: 1" = 5' (both horizontal & vertical)