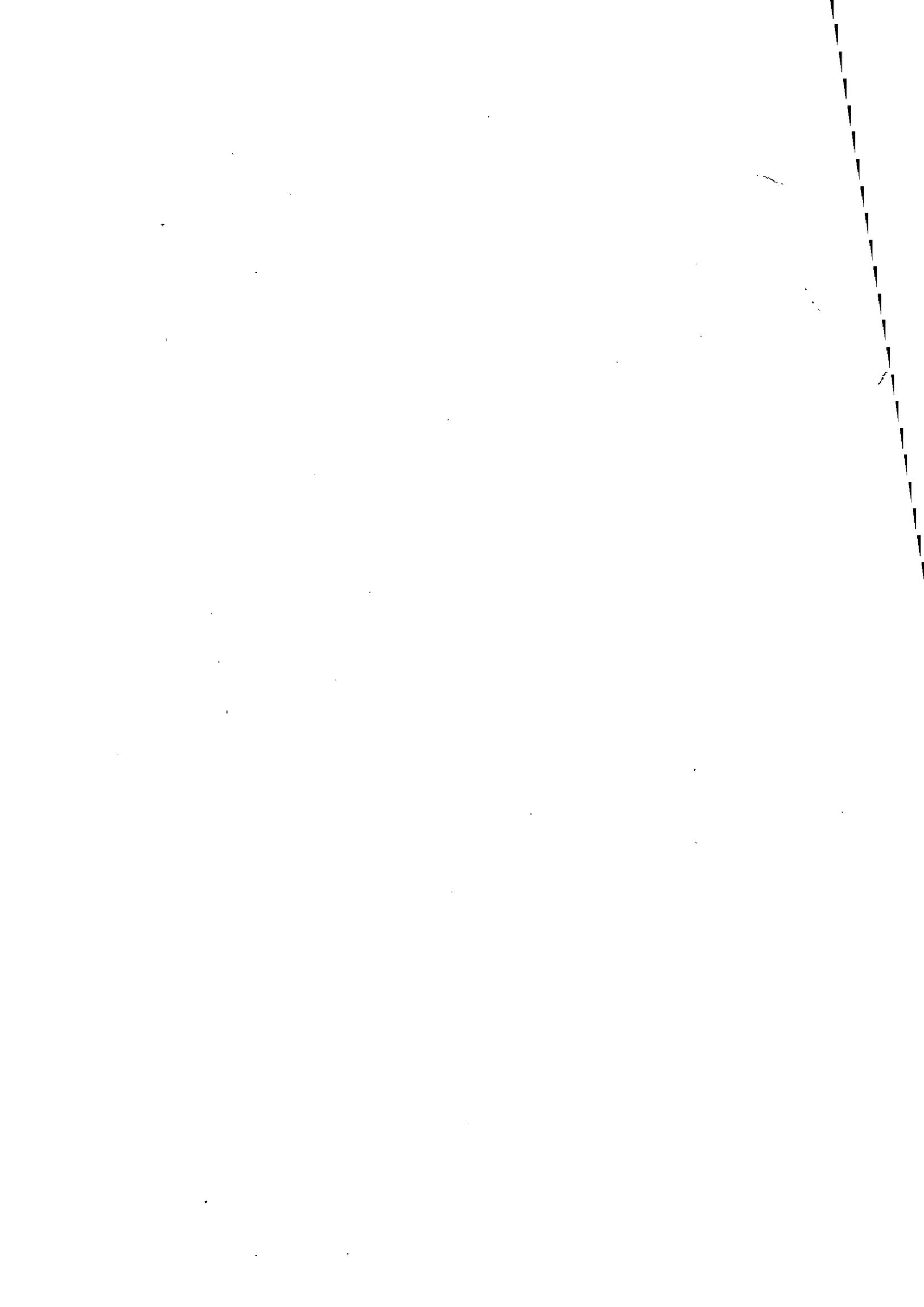


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No. 01-18

#555

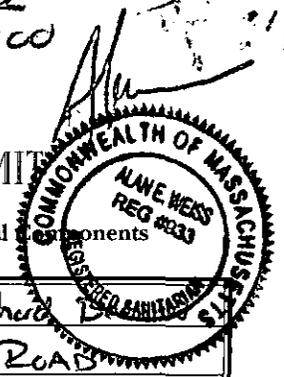
FEE 4152  
225.00

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct ( ) Repair ( ) Upgrade ( ) Abandon ( ) -  Complete System  Individual Component(s)



Location	<u>555 BAY ROAD</u>	Owner's Name	<u>Elizabeth Arries + Richard B...</u>
Map/Parcel#		Address	<u>555 BAY ROAD</u>
Lot#		Telephone#	<u>255-7570</u>
Installer's Name		Designer's Name	<u>Alan Weiss</u>
Address		Address	<u>Belchertown, MA.</u>
Telephone#		Telephone#	<u>413-313-5952</u>

Type of Building Res Lot Size 31,250 +/- sq. ft.  
 Dwelling - No. of Bedrooms 3 Garbage grinder (  )  
 Other - Type of Building \_\_\_\_\_ No. of persons 12.30 Showers ( ), Cafeteria ( )  
 Other Fixtures \_\_\_\_\_  
 Design Flow (min. required) 110 gpd Calculated design flow 330 Design flow provided 414 gpd  
 Plan: Date 01/16/01 Number of sheets 4 Revision Date \_\_\_\_\_  
 Title SEPTIC SYSTEM REPAIR PERMIT, 110 GPD  
 Description of Soil(s) CLASS I, SAND  
 Soil Evaluator Form No. \_\_\_\_\_ Name of Soil Evaluator A. Weiss Date of Evaluation 10/02/01  
DELABOZINSKI

DESCRIPTION OF REPAIRS OR ALTERATIONS New S. Tank + L. Field.

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees to not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed Richard B... Date 10/19/01

Inspections \_\_\_\_\_

No. 01/17

COMMONWEALTH OF MASSACHUSETTS

FEE 225

Board of Health, Amherst, MA.

CERTIFICATE OF COMPLIANCE

Description of Work:  Individual Component(s)  Complete System

The undersigned hereby certify that the Sewage Disposal System; Constructed ( ), Repaired ( ), Upgraded ( ), Abandoned ( )

by: \_\_\_\_\_  
at 555 Bay Road

has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. 01-17, dated \_\_\_\_\_ Approved Design Flow \_\_\_\_\_ (gpd)

Installer Steve Warner  
Designer: Alan W... Inspector: Shirley Dun Date: 11/9/01

The issuance of this permit shall not be construed as a guarantee that the system will function as designed.

No. 01-17

COMMONWEALTH OF MASSACHUSETTS

FEE 225  
4152

Board of Health, Amherst, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

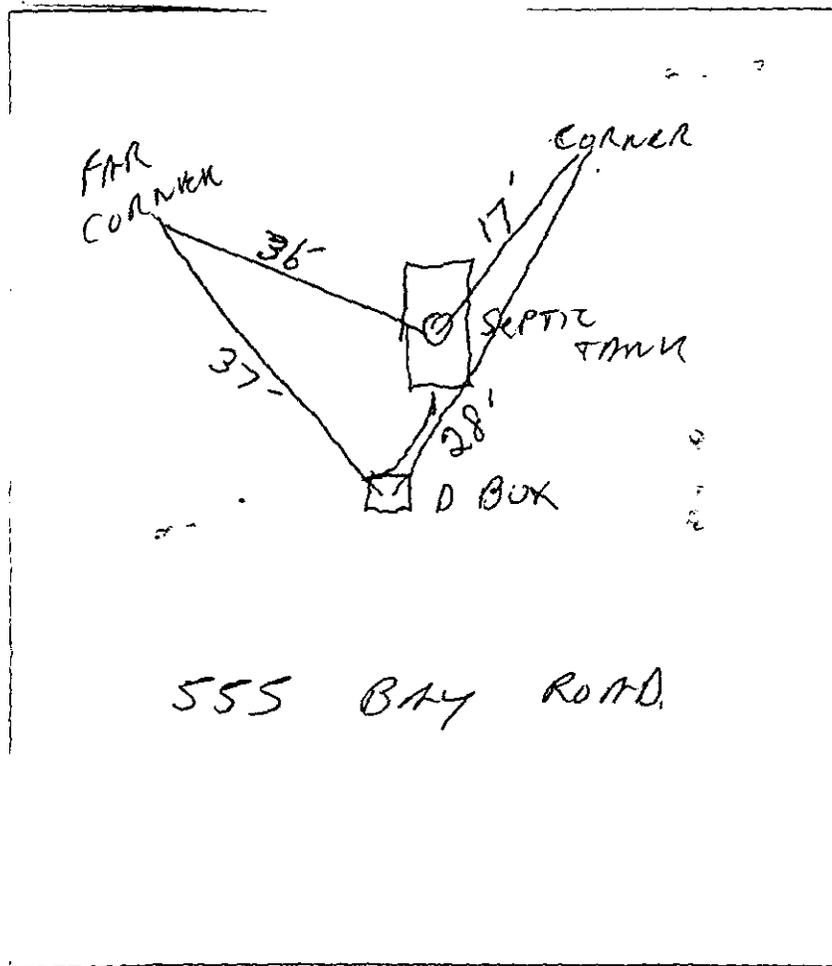
Permission is hereby granted to; Construct ( ) Repair ( ) Upgrade ( ) Abandon ( ) an individual sewage disposal system at 555 Bay Rd as described in the application for

Disposal System Construction Permit No. 01-17, dated 10/16/01

Provided: Construction shall be completed within three years of the date of this permit. All local conditions must be met.

Date 11/23/01 Board of Health Carol J...





555 BAY ROAD



ALAN E. WEISS, M.S., L.S.P.  
Licensed Site Professional  
Registered Sanitarian  
Hydrogeologist  
President

- Subsurface Investigations
- 21E Site Investigations
- Pollution Remediation
- Percolation Tests and Septic Designs

350 Old Enfield Rd.  
Belchertown, MA 01007  
(413) 323-5957 & 323-4916 (FAX)

Date: 10/27/01

Commonwealth of Massachusetts  
AMHERST, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: A. WEISS  
Witnessed By: D. ZAROZINSKI

Date: 10/27/01

Location Address or Lot # <u>555 BAY ROAD AMHERST, MA.</u>	Owner's Name, Address, and Telephone # <u>ELIZABETH ARIES RICHARD BERMAN 555 BAY ROAD AMHERST, MA.</u>
New Construction <input type="checkbox"/> Repair <input checked="" type="checkbox"/>	

Office Review

Published Soil Survey Available: No  Yes

Year Published 1981 Publication Scale 1:25,000 Soil Map Unit HgB  
Drainage Class Well drained Soil Limitations NA

Surficial Geologic Report Available: No  Yes

Year Published \_\_\_\_\_ Publication Scale \_\_\_\_\_

Geologic Material (Map Unit) \_\_\_\_\_

Landform \_\_\_\_\_

Flood Insurance Rate Map:

Above 500 year flood boundary No  Yes

Within 500 year flood boundary No  Yes

Within 100 year flood boundary No  Yes

Wetland Area:

National Wetland Inventory Map (map unit) \_\_\_\_\_

Wetlands Conservancy Program Map (map unit) \_\_\_\_\_

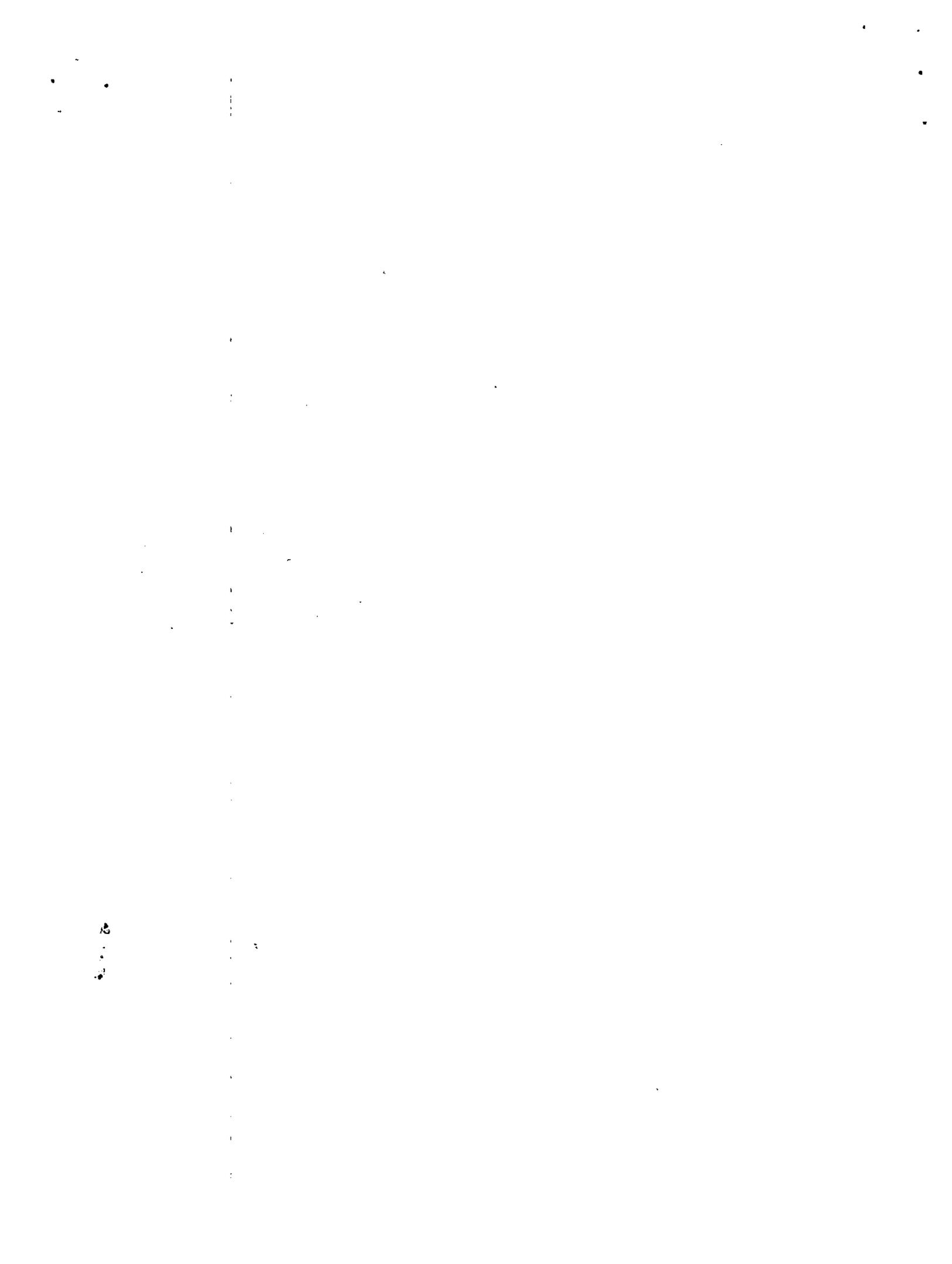
Current Water Resource Conditions (USGS): Month \_\_\_\_\_

Range :Above Normal  Normal  Below Normal

Other References Reviewed: \_\_\_\_\_



- NO DISPOSAL  
- 3 BR



Location Address or Lot No. 555 Bay Road

On-site Review

Deep Hole Number TP-1 Date: 10/27/01 Time: 9:00 Weather overcast

Location (identify on site plan) \_\_\_\_\_

Land Use Forest Slope (%) 2 Surface Stones \_\_\_\_\_

Vegetation grasses

Landform Terrace

Position on landscape (sketch on the back) \_\_\_\_\_

Distances from:

Open Water Body 100' feet      Drainage way 100' feet  
 Possible Wet Area 100' feet      Property Line 20' feet  
 Drinking Water Well 100' feet      Other \_\_\_\_\_

DEEP OBSERVATION HOLE LOG\*

Depth from Surface (Inches)	Soil Horizon	Soil Texture (USDA)	Soil Color (Munsell)	Soil Mottling	Other (Structure, Stones, Boulders, Consistency, % Gravel)
0-10"	Ap	FSL	10YR3/2		Friable loose
10'-28"	Bw	FSL	10YR4/6		Friable loose
28-40"	C <sub>1</sub>	S	10YR5/6	9'	F-C SAND + GRAVEL
60"-112"	C <sub>2</sub>	S	10YR5/6	10YR6/8 (108")	Well sorted med. sand

\* MINIMUM OF 2 HOLES REQUIRED AT EVERY PROPOSED DISPOSAL AREA

Parent Material (geologic) OUTWASH Depth to Bedrock: Not obs

Depth to Groundwater: Standing Water in the Hole: Not obs Weeping from Pit Face: Not obs

Estimated Seasonal High Ground Water: 108"

Note: Remove B Horizon TO 32" +/- ~~the~~ Root Zone





FORM 12 - PERCOLATION TEST

Location Address or Lot No. 555 Bay Rd

COMMONWEALTH OF MASSACHUSETTS  
Amherst, Massachusetts

Percolation Test*		
Date: <u>10/02/01</u>		Time: <u>9:00</u>
Observation Hole #		
Depth of Perc	<u>58"</u>	
Start Pre-soak	<u>9:03</u>	
End Pre-soak	<u>9:18</u>	
Time at 12"	<u>9:20</u>	
Time at 9"	<u>9:21</u>	
Time at 6"	<u>9:24</u>	
Time (9"-6")	<u>3 min</u>	
Rate Min./Inch	<u>22</u>	

REPAIR PERC

\* Minimum of 1 percolation test must be performed in both the primary area AND reserve area.

Site Passed  Site Failed

Performed By: A. Weiss

Witnessed By: D. Zorawski, T. Dion

Comments: S' Separation



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Location Address or Lot No. 555 DAY ROAD, AMHEST

Determination for Seasonal High Water Table

Method Used:

- Depth observed standing in observation hole ..... inches
- Depth weeping from side of observation hole ..... inches
- Depth to soil mottles 108" inches
- Ground water adjustment ..... feet

Index Well Number ..... Reading Date ..... Index well level .....

Adjustment factor ..... Adjusted ground water level .....

Depth of Naturally Occurring Pervious Material

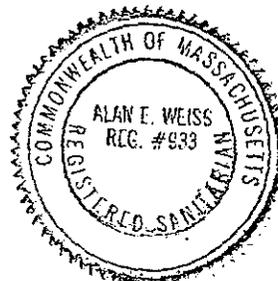
Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system? yes

If not, what is the depth of naturally occurring pervious material? \_\_\_\_\_

Certification

I certify that on June, 1995 (date) I have passed the soil evaluator examination approved by the Department of Environmental Protection and that the above analysis was performed by me consistent with the required training, expertise and experience described in 310 CMR 15.017.

Signature Alan Weiss Date 10/20/01





OK # 4152  
pd 225

FORM 11 - SOIL EVALUATOR FORM

Page 1 of 3

No. \_\_\_\_\_

Date: 10/2/01

Commonwealth of Massachusetts  
, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: AL Weiss Cold Spring Falls Date: 10/2/01  
Witnessed By: DAVID ZANONIA

Location Address or Lot # <u>555 Bay Rd</u>	Owner's Name, Address, and Telephone # <u>Richard Beaman</u> <u>555 Bay Road</u> <u>253-7570</u>
New Construction <input type="checkbox"/> Repair <input checked="" type="checkbox"/>	

Office Review

Published Soil Survey Available: No  Yes

Year Published \_\_\_\_\_ Publication Scale \_\_\_\_\_ Soil Map Unit \_\_\_\_\_

Drainage Class \_\_\_\_\_ Soil Limitations \_\_\_\_\_

Surficial Geologic Report Available: No  Yes

Year Published \_\_\_\_\_ Publication Scale \_\_\_\_\_

Geologic Material (Map Unit) \_\_\_\_\_

Landform \_\_\_\_\_

Flood Insurance Rate Map:

Above 500 year flood boundary No  Yes

Within 500 year flood boundary No  Yes

Within 100 year flood boundary No  Yes

Wetland Area:

National Wetland Inventory Map (map unit) \_\_\_\_\_

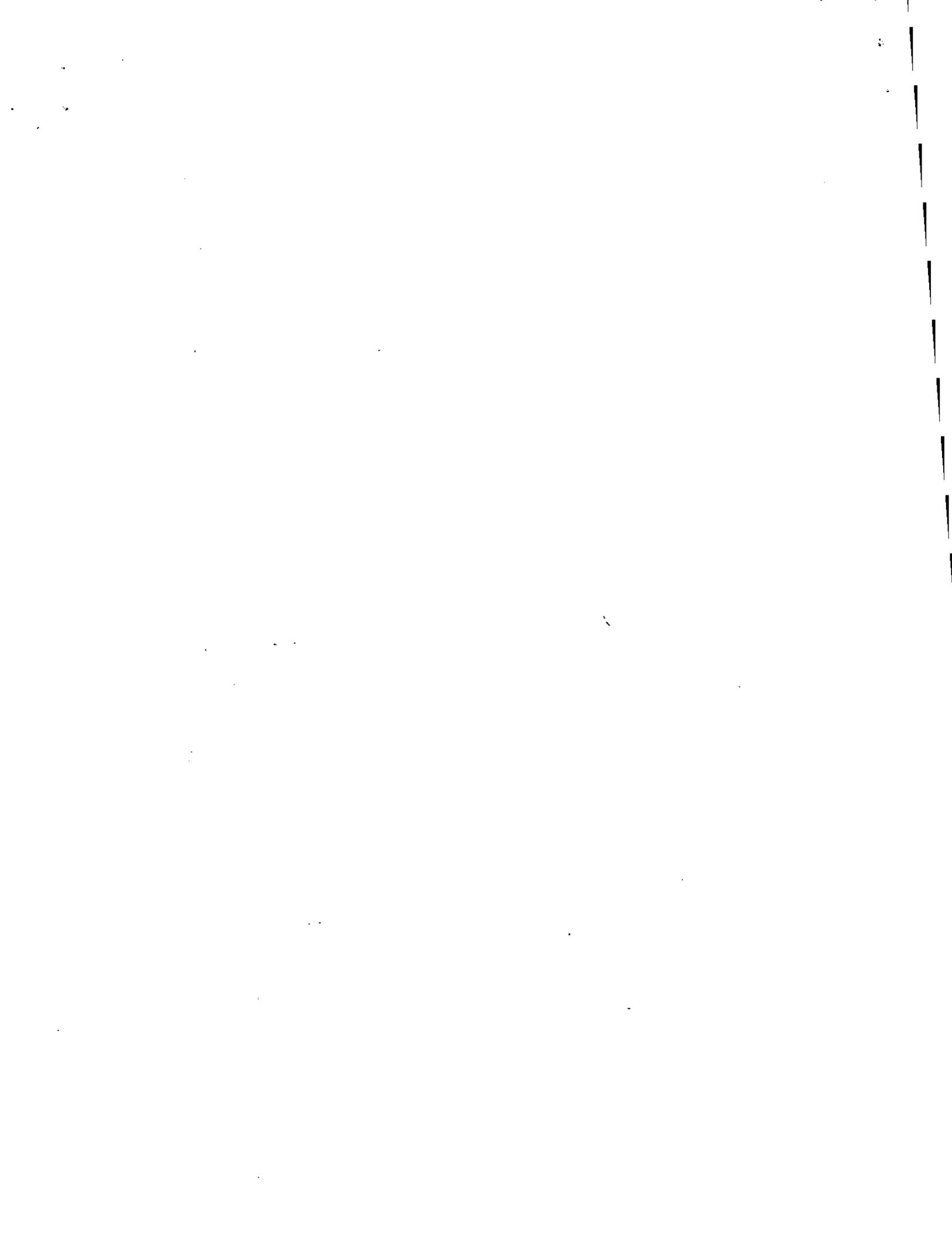
Wetlands Conservancy Program Map (map unit) \_\_\_\_\_

Current Water Resource Conditions (USGS): Month \_\_\_\_\_

Range :Above Normal  Normal  Below Normal

Other References Reviewed: \_\_\_\_\_





Location Address or Lot No. 555 Bay Road

On-site Review

Deep Hole Number (2) Date: 10/2/01 Time: 9:00 Weather: overcast

Location (identify on site plan) \_\_\_\_\_

Land Use Rural Res. Slope (%) 2 Surface Stones None

Vegetation Prostrate

Landform Terrace

Position on landscape (sketch on the back) \_\_\_\_\_

Distances from:

Open Water Body 100' feet      Drainage way 100' feet  
Possible Wet Area 100' feet      Property Line 20' feet  
Drinking Water Well 100' feet      Other \_\_\_\_\_

DEEP OBSERVATION HOLE LOG*					
Depth from Surface (Inches)	Soil Horizon	Soil Texture (USDA)	Soil Color (Munsell)	Soil Mottling	Other (Structure, Stones, Boulders, Consistency, % Gravel)
10	Ma	FSL	10YR 3/2		Frangible Loam
28	Ba	FSL	10YR 4/6		Frangible Loam
60	C1	S	10YR 5/8	9'	F.C. Sand + Gravel
112	C2	S	10YR 4/8	10YR 4/8	Well sorted sand + silt

\* MINIMUM OF 2 HOLES REQUIRED AT EVERY PROPOSED DISPOSAL AREA

Parent Material (geologic) OUTWASH      Depth to Bedrock: 112"

Depth to Groundwater: Standing Water in the Hole: \_\_\_\_\_      Weeping from Pit Face: \_\_\_\_\_

Estimated Seasonal High Ground Water: 108"





FORM 12 - PERCOLATION TEST

Location Address or Lot No. 355 Bay Road

COMMONWEALTH OF MASSACHUSETTS

Amherst, Massachusetts

Percolation Test*		
Date: <u>10/2/01</u>		Time: _____
Observation Hole #	<u>①</u>	
Depth of Perc	<u>58"</u>	
Start Pre-soak	<u>9:03</u>	
End Pre-soak	<u>9:18</u>	
Time at 12"	<u>9:18</u>	
Time at 9"	<u>9:01</u>	
Time at 6"	<u>9:24</u>	
Time (9"-6")	<u>3</u>	
Rate Min./Inch	<u>&lt; 2</u>	

\* Minimum of 1 percolation test must be performed in both the primary area AND reserve area.

Site Passed  Site Failed

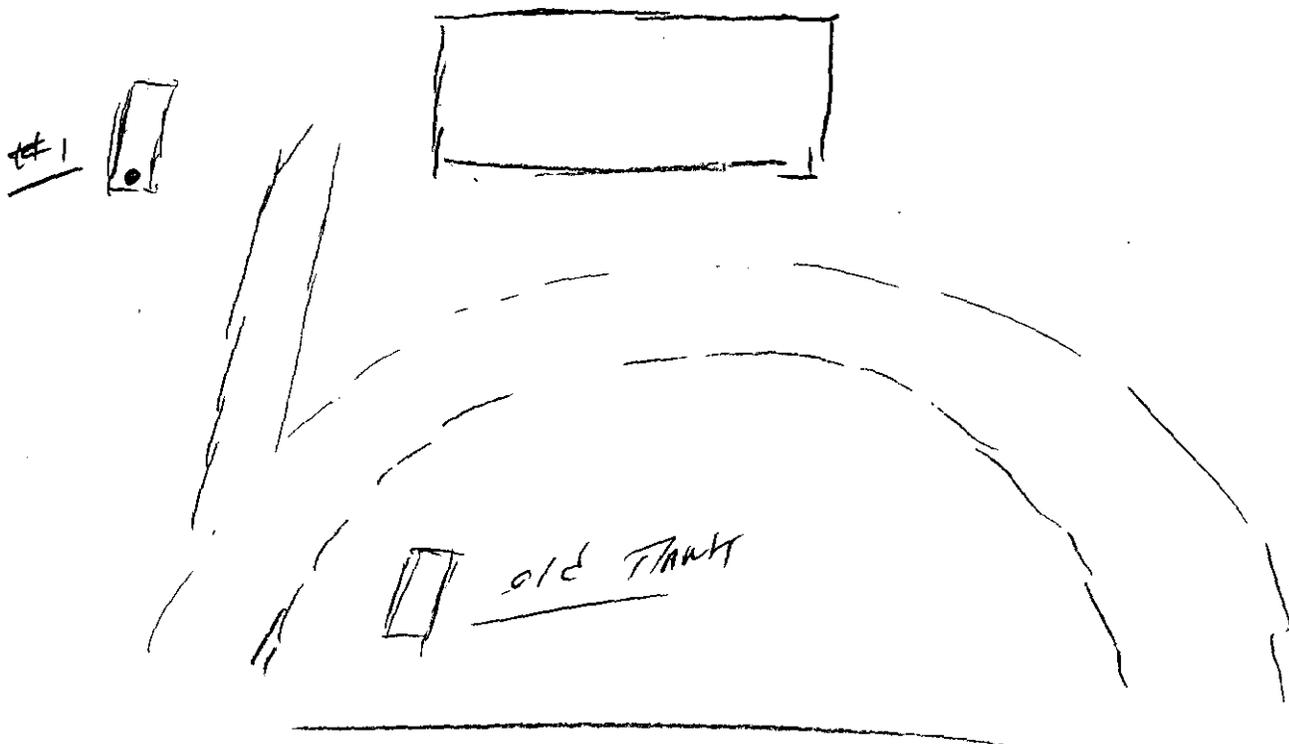
Performed By: AL Weiss Cold Spring Env.

Witnessed By: David Zarozny

Comments: \_\_\_\_\_



5 Bedroom 1406/c



BAY RD

RICHARD L. BERMAN  
555 BAY RD. PH. 413-253-7570  
AMHERST, MA 01002

5-13/110  
0363015651

4152

DATE October 2<sup>nd</sup> 2001

PAY TO THE ORDER OF Town of Amherst \$ 225.00

Two hundred and twenty-five and 00/100 DOLLARS



43303 [www.fleet.com](http://www.fleet.com)  
Amherst Office  
Amherst, Massachusetts 01002

MEMO perk test

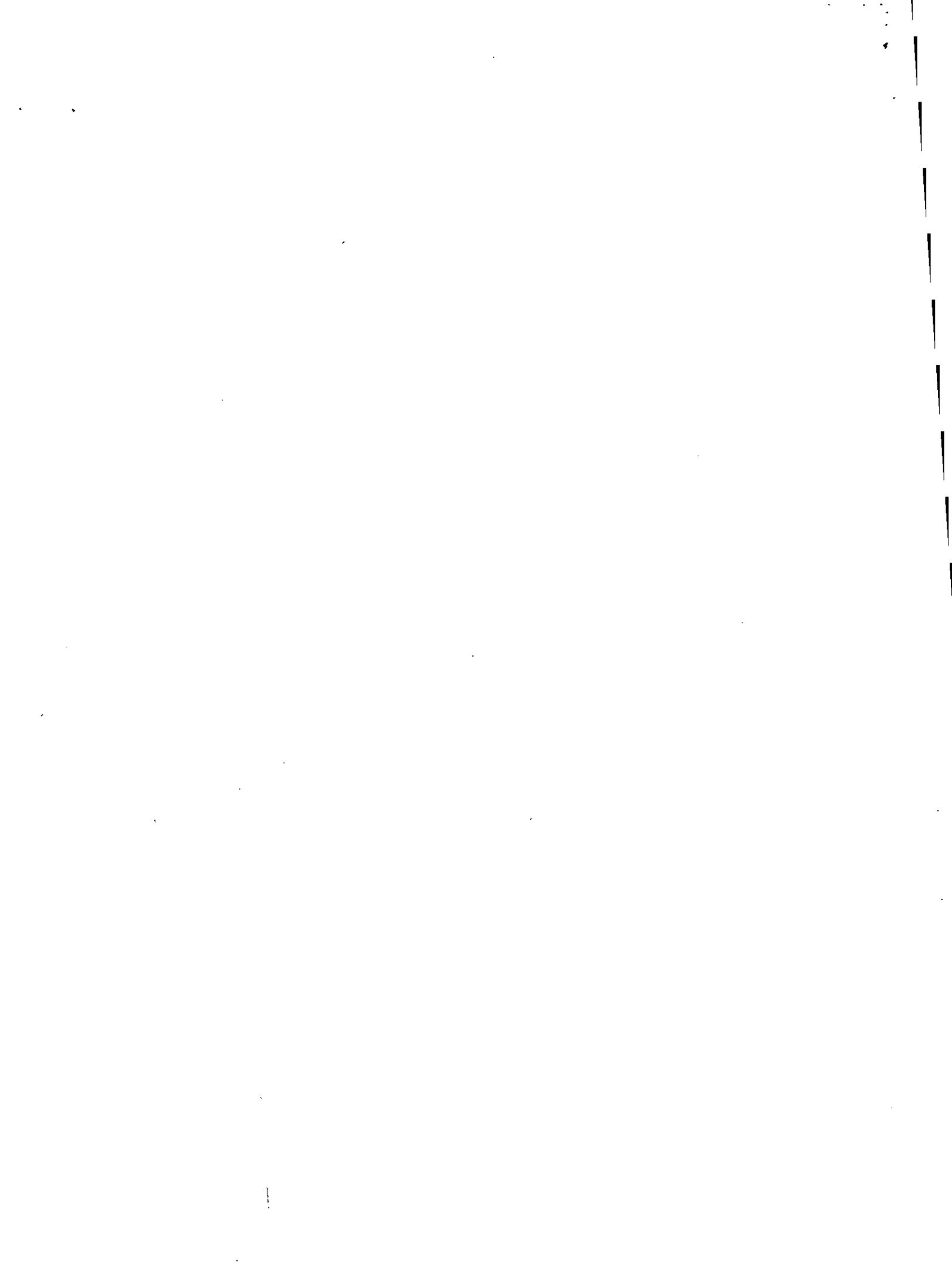
Richard Berman

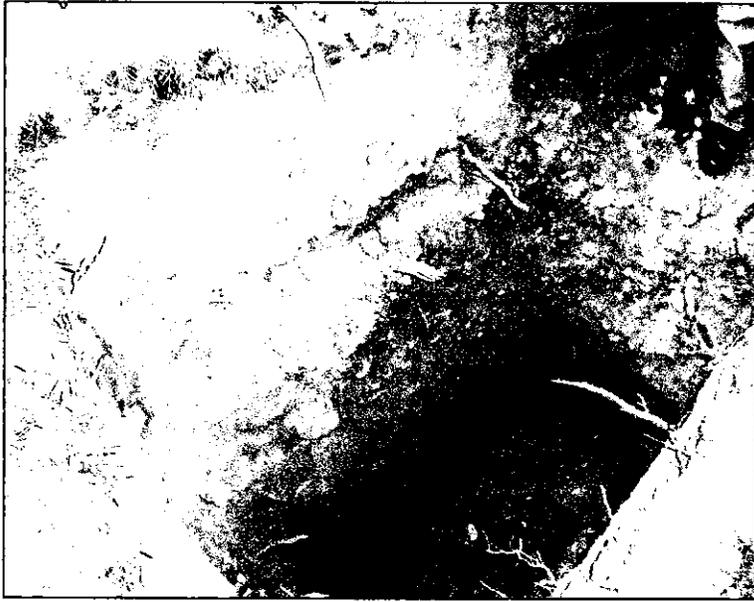
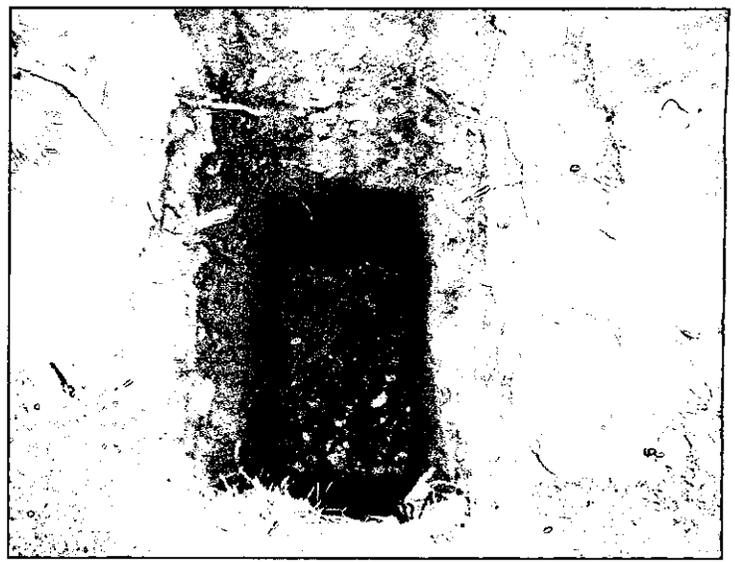
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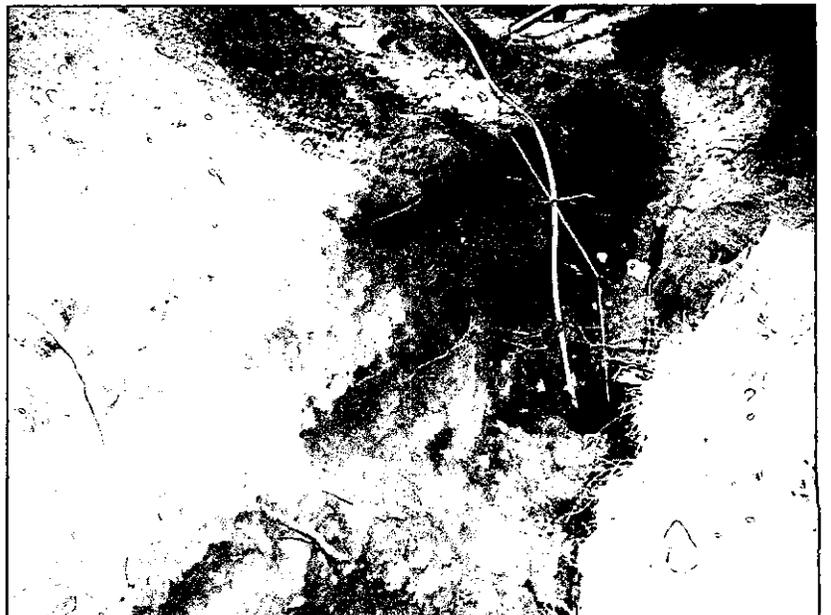
5 DELUXE WALLET OF BONDS

Security of return  
guaranteed.  
Details on back

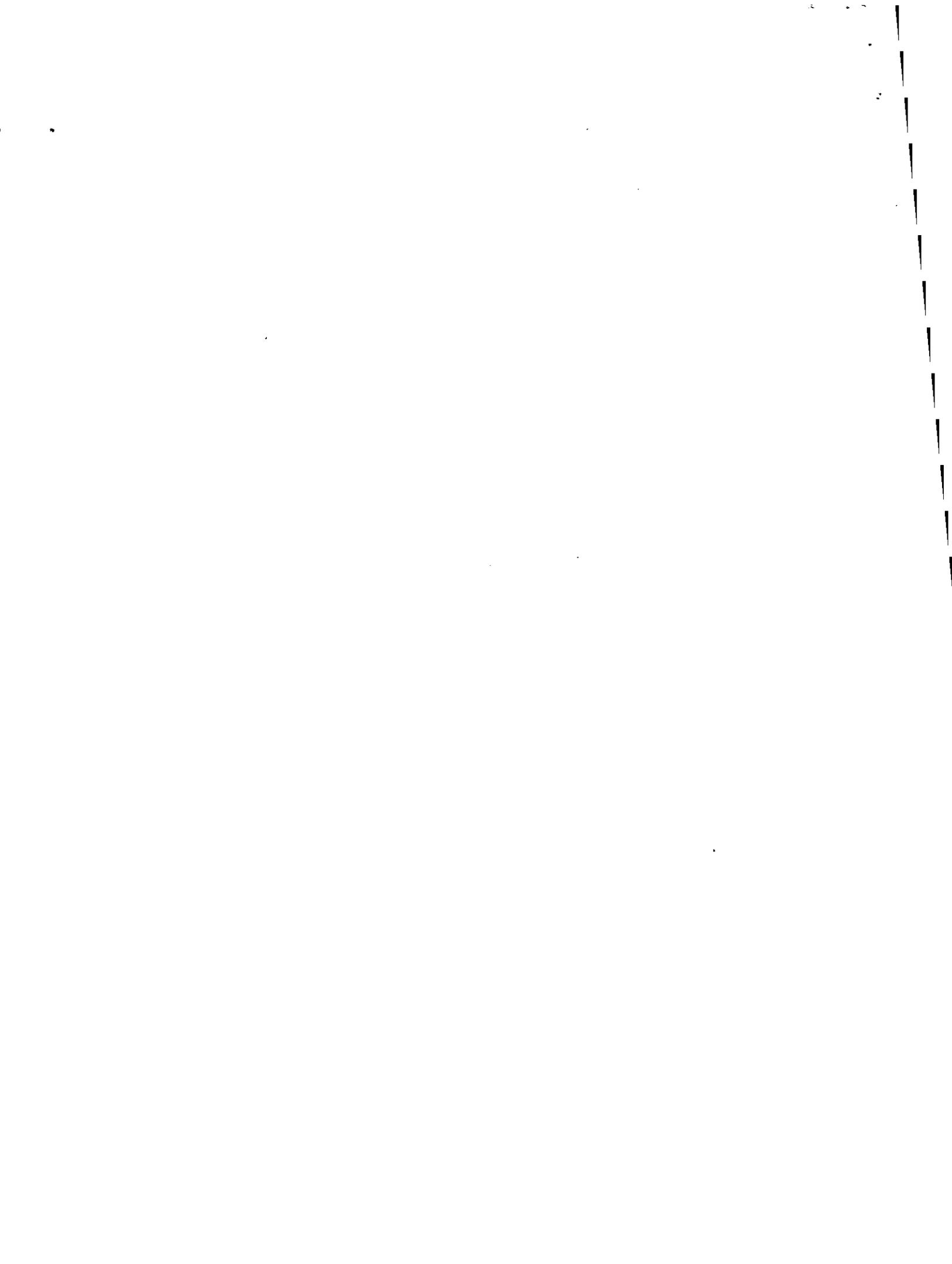




555 Bay Road perc test by Alan Weiss









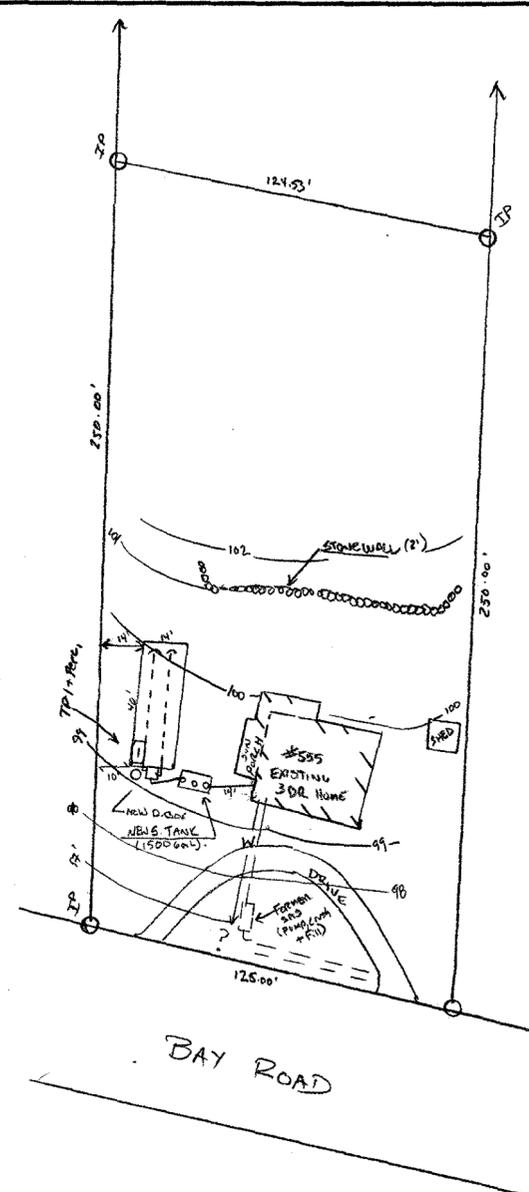
555 Bay Road

(FROM EATW, P.L.S. 5/19/02)

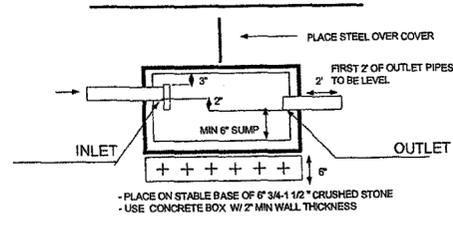
**PLOT PLAN**

(1" = 40')

100 EASTING COURTESY

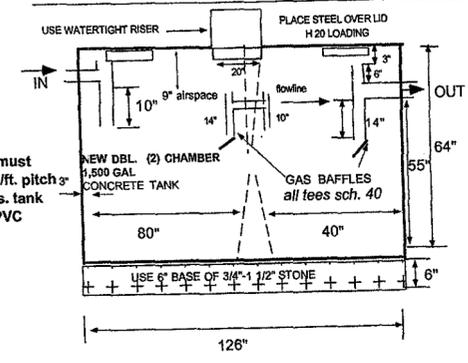


**TYPICAL D. BOX (WATERTIGHT)**



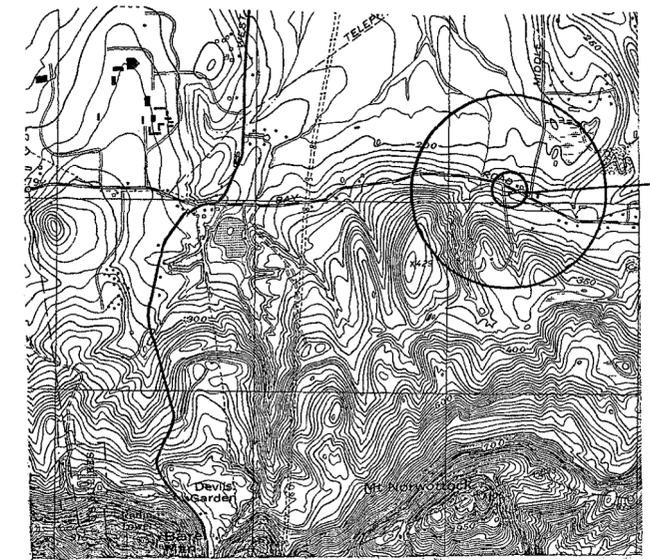
**TYPICAL NEW DBL. CHAMBER 1,500 GAL. S. TANK OR EQUIV. (WATERTIGHT)**

contractor must confirm .02'/ft. pitch 3' from sill to s. tank w/ sch. 40 PVC



NOTE: CONTRACTOR MUST ALSO PIPE MIDDLE TEE WITH SCH 40 PVC AS SHOWN

**SITE LOCUS**



SCALE: 1"=2,083 FT.

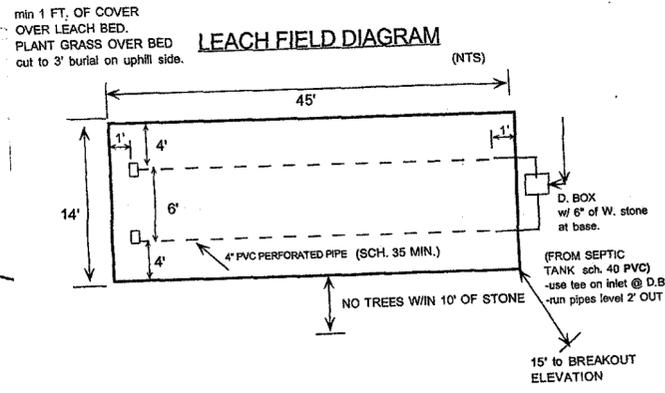
USGS 7.5 MIN. QUAD.



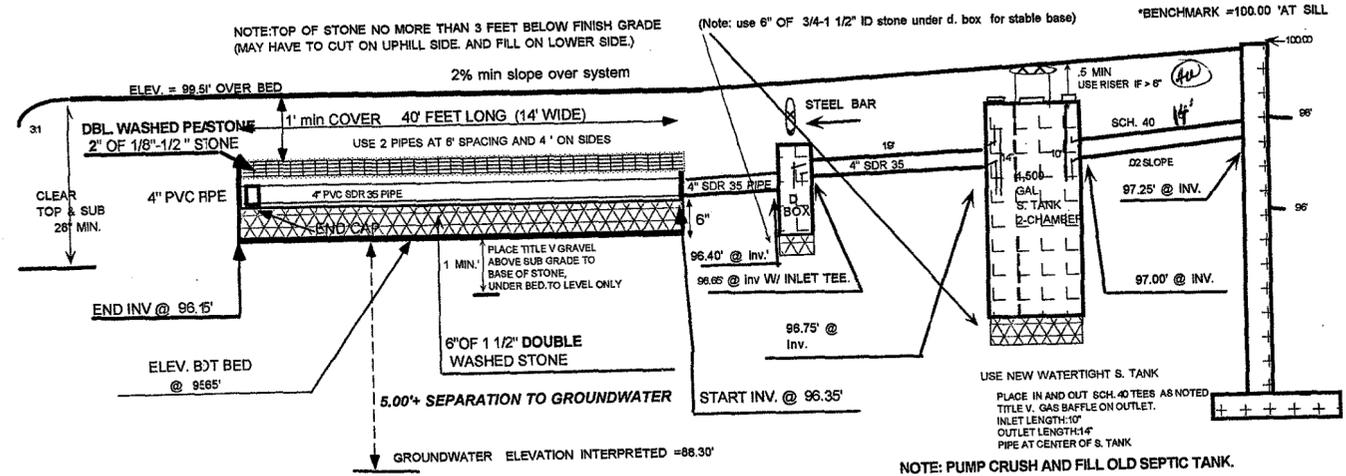
**TEST PIT LOG**

TP-1 EFF. EL. 99.25' (10/02/2001)* USE "TP-1" FOR DESIGN	
0-8"	Ap FINE SANDY LOAM, FRIABLE (10 YR 3/2)
8"-28"	Bw FINE SANDY LOAM, FRIABLE (10 YR 4/6)
28-60"	C1 MED TO COARSE SAND & GRAVEL (10 YR 5/6)
60-112"	C2 MED. SAND, WELL SORTED (10 YR 5/8)
HI G.W. OXIDES OBS. @ 108" IN TP-1 (EFF. IN TP-1) (10 YR 6/8)	
ESHWT: 108" = 90.25' @ TP-2 EFF. FOR DESIGN (5' SEPARATION PROVIDED)	
NOT OBS.	STANDING H2O
NOT OBS.	WEEPING FROM FACE TO BEDROCK
112' +	

**LEACH FIELD DIAGRAM**



**CROSS SECTION OF SEPTIC SYSTEM**



NOTE: USE TITL V FILL ONLY UNDER AND AROUND FIELD TO MEET DESIGN ELEVATIONS AS NOTED ON PLAN AND AS PER 310 15.255 (clear all top and sub prior to fill placement)

ELEV. OF TP-1 = 99.25' EFFECTIVE FOR DESIGN

**DESIGN NOTES:**

- 3 bedrooms x 110 GAL./ROOM/DAY = 330 GAL/DAY =  
-Use ONE Leachfield 14' wide x 40' LONG W/6" of DBL. WASHED STONE.  
Bot. Area: 14' wide x 40' long = 560sf.  
Side Area: N.A.
- Tot. Area: 560 sf x 0.74 gal.sf. = 414 gal./day.
- GARBAGE DISPOSAL NOT ALLOWED.
- ALL D. BOX OUTLET PIPES LEVEL FOR 2'.
- NO PRIVATE WELLS WITHIN 100 FEET (TOWN WATER)
- NO WETLANDS WITHIN 100 FEET OF SAS
- PRE & POST CONTOURS NOTED AS NECESSARY.
- RESERVE AREA NOT REQUIRED.
- SLOPE CALCS (SEE CONTOURS), SUBGRADE INSP. REQ'D.
- 2% MIN. SLOPE OVER SAS, CLEAR TOP AND SUB TO 28" MIN. AS NEEDED.  
CLEAR TO BASE OF B (MIN. 28") UNDER BED (w/ careful subgrade inspection).
- SOIL EVALUATION BY A. WEISS, RS. 9/11/2001 & D. CHICHESTER, OF BOH.
- DEPTH OF PERC. 58" @ PERC "1" & BY A. WEISS 10/02/2001.
- PERC RATE = <2 MIN/IN (USED 5 FOR DESIGN), CLASS 1 SOIL RATING (SAND)
- INSTALL/INSPECT TEES (10" INLET, 14" OUTLET) & GAS BAFFLES ON NEW 1,500 GAL. S. TANK
- PUMP, CRUSH AND REMOVE/FILL EXISTING S. TANK.
- USE APPROVED (1 1/2") ID DBL. WASH STONE UNDER BED & D. BOX FOR 6".  
CONTRACTOR TO CONFIRM STONE PROPERLY WASHED (WITH BUCKET /H2O TEST) PRIOR TO PLACEMENT.
- NO TREES WITHIN 10 FT. OF NEW LEACH FIELD.
- ENGINEER TO INSPECT SUBGRADE ELEV. & FINAL INSTALLATION.
- T.B.M. AT SILL, USE NEW SCH. 40 PIPE AND COVER WITH .75 FT. SOIL MINIMUM.

SEPTIC SYSTEM REPAIR PLAN FOR ELIZABETH ARIES & RICHARD BERMAN 555 BAY ROAD AMHERST, MA		
SCALE: <b>NOTED</b>	APPROVED BY	DRAWN BY <b>AW</b>
DATE: <b>10/16/01</b>		
COLD SPRING ENVIRONMENTAL, INC.		DRAWING NUMBER <b>101-1413-1002</b>

CHARRETTE PRO-FORM 920PF PRINTED ON 920H CHARPRINT YELLOW

TOWN OF AMHERST  
HEALTH PERMITS/INSPECTION SERVICES

No. 1838

Received of Richard L. Freeman of 555 Jay Road  
Name Address

For Property Located at: 555 Jay Road Richard Freeman  
Street Address Owner

- |   |             |   |       |
|---|-------------|---|-------|
| <b>HEA009</b> Bakery<br>R6510 443508                    | _____       | <b>HEA015</b> Sanitary Code Booklets<br>R6510 432305            | _____ |
| <b>HEA001</b> Bed & Breakfast<br>R6510 443516           | _____       | <b>HEA016</b> Septic Tank Permit-Installers<br>R6510 443511     | _____ |
| <b>HEA002</b> Catering License<br>R6510 443507          | _____       | <b>HEA017</b> Septic Tank Permit-Private<br>R6510 443510        | _____ |
| <b>HEA003</b> Food Handler<br>R6510 443515              | _____       | <b>HEA018</b> Septic Tank Reinspection Fee<br>R6510 432301      | _____ |
| <b>HEA004</b> Frozen Deserts<br>R6510 443501            | _____       | <b>HEA019</b> Sub-Division Review Fee<br>R6510 432306           | _____ |
| <b>HEA005</b> Health Dept. Housing Isp.<br>R6510 432302 | _____       | <b>HEA012</b> Swimming Pool Permits<br>R6510 443512             | _____ |
| <b>HEA006</b> Massage Therapy License<br>R6510 443504   | _____       | <b>HEA020</b> Tanning License<br>R6510 443509                   | _____ |
| <b>HEA007</b> Milk & Cream License<br>R6510 443500      | _____       | <b>HEA024</b> Funeral Director License<br>R6510 443502          | _____ |
| <b>HEA008</b> Motel License<br>R6510 443506             | _____       | <b>HEA034</b> Immunization Clinic<br>R6510 432307               | _____ |
| <b>HEA010</b> Removal of Offal<br>R6510 443513          | _____       | <b>HEA030</b> Car Seats<br>R6510 258004                         | _____ |
| <b>HEA021</b> Removal of Rubbish<br>R6510 443520        | _____       | <b>HEA026</b> Smoking & Tobacco Reg. Violations<br>R6510 443518 | _____ |
| <b>HEA011</b> Percolation Test Fees<br>R6510 432300     | <u>1500</u> | <b>HEA023</b> TB Clinic<br>R6510 432303                         | _____ |
| <b>HEA013</b> Recreation Camp License<br>R6510 443503   | _____       | <b>HEA022</b> Tobacco License<br>R6510 443505                   | _____ |
| <b>HEA014</b> Retail Store Permit<br>R6510 443514       | _____       | <b>HEA</b>  | _____ |
|   |             | <b>HEA</b>  | _____ |

TOTAL FEE: 1500.00

Inspection Services/Health Department

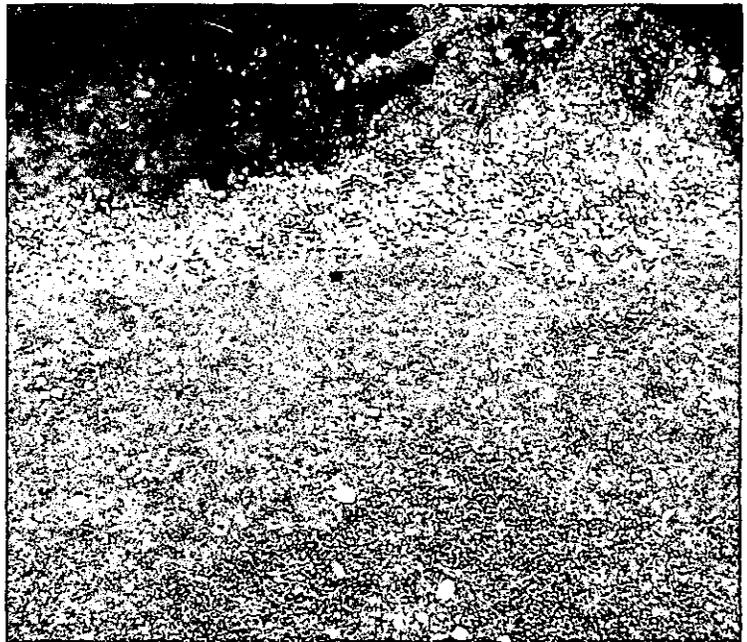
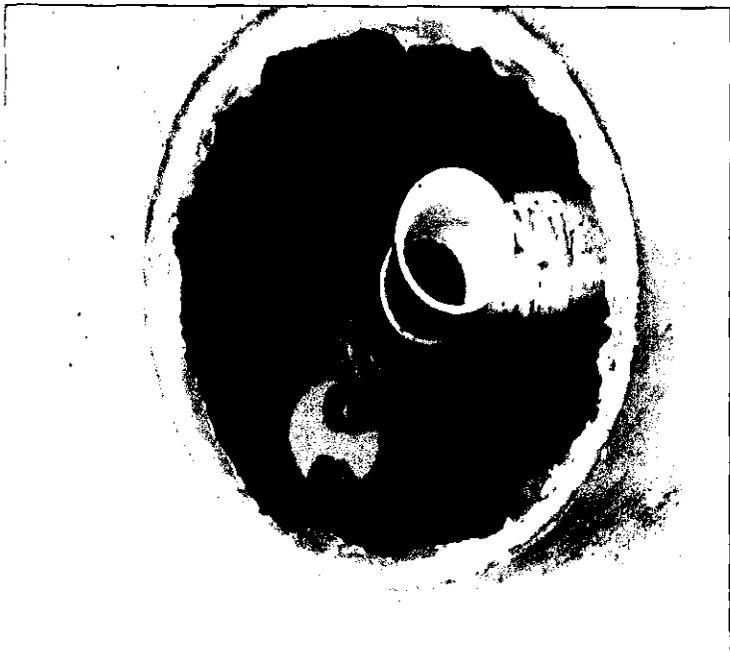
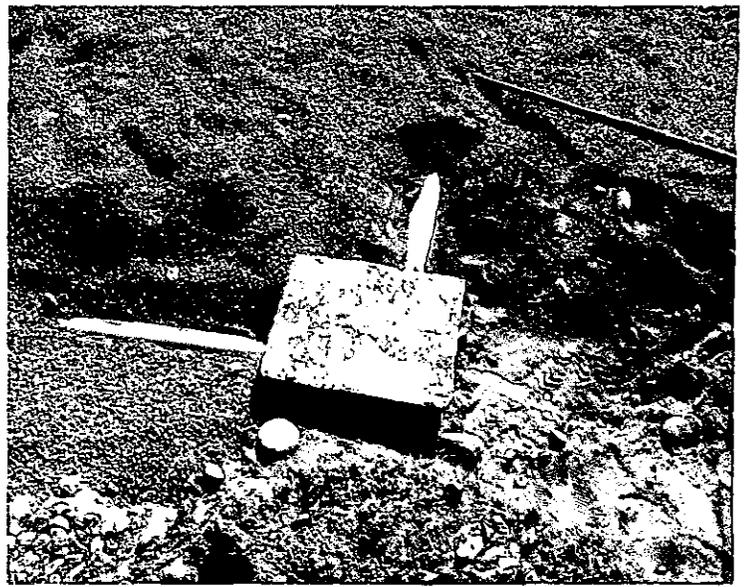
Date 10/2/2001



Must be Validated by the Collector's Office to be considered paid

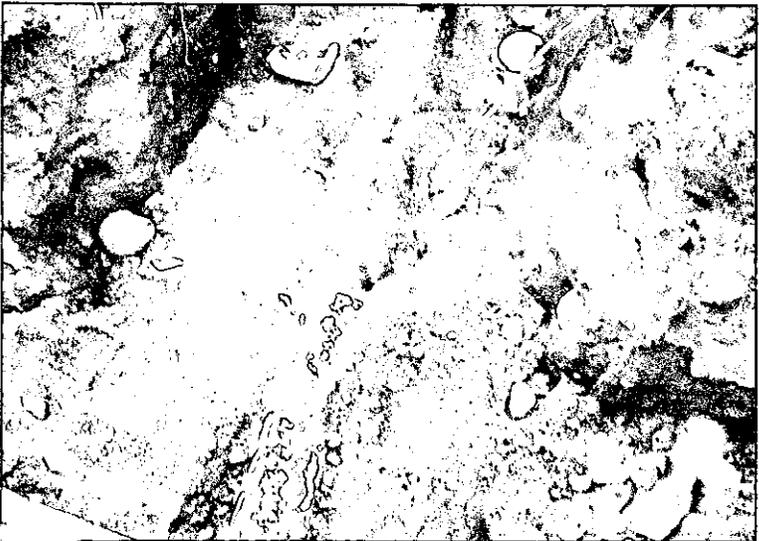
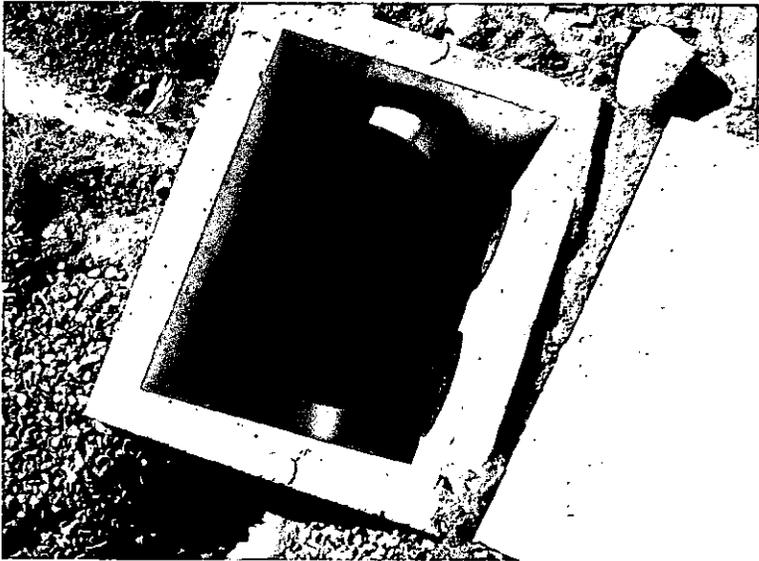
White - Applicant Yellow - Collector Pink - Accounting Gold - Health/Inspections



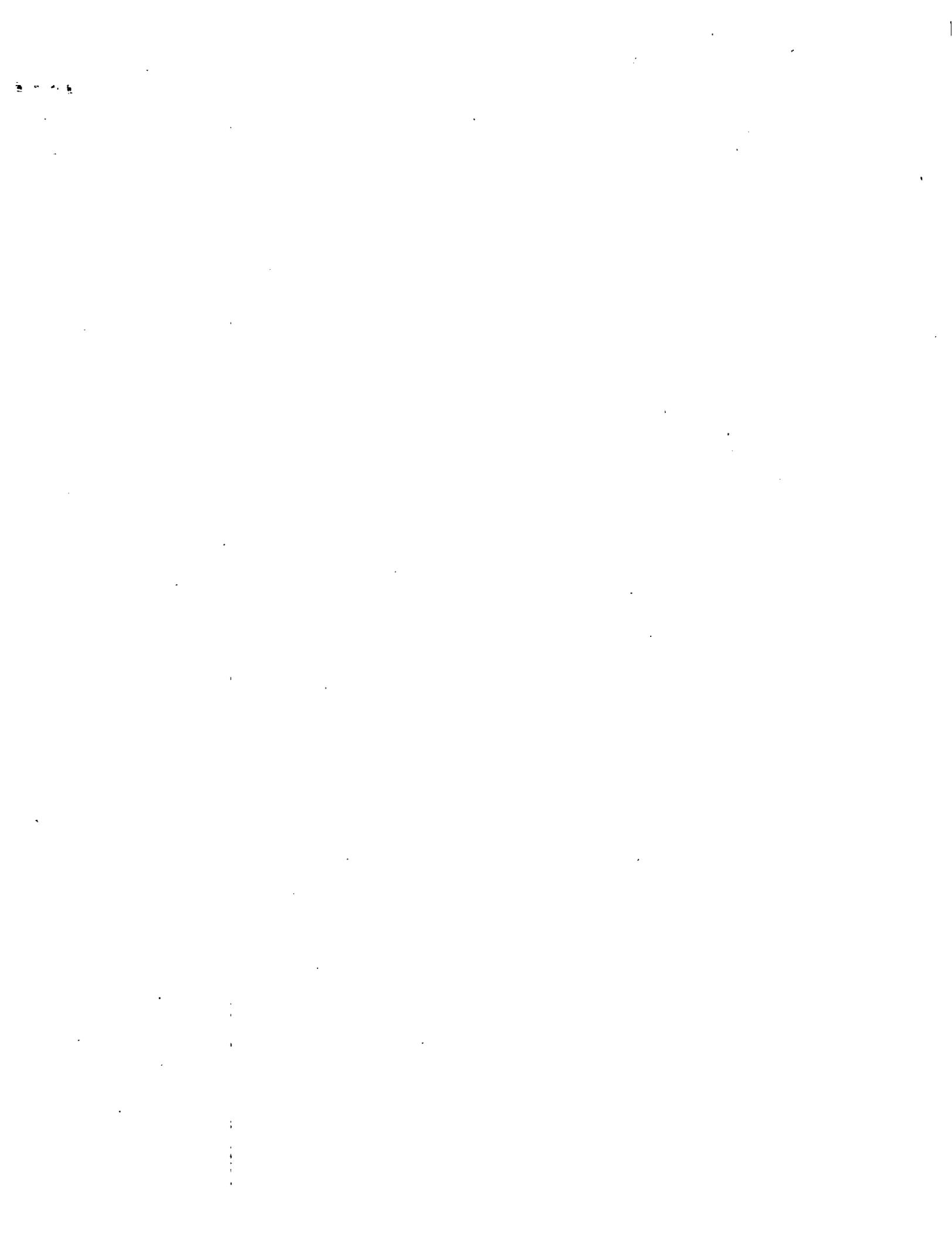


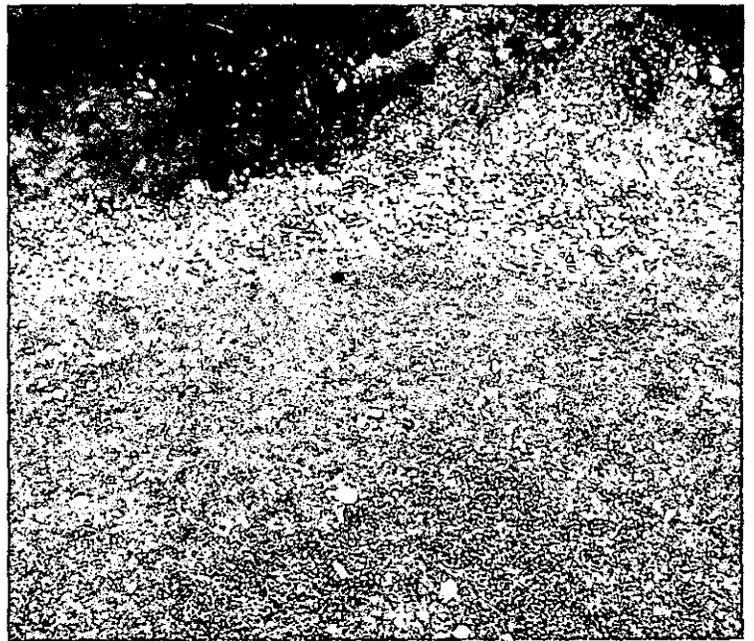
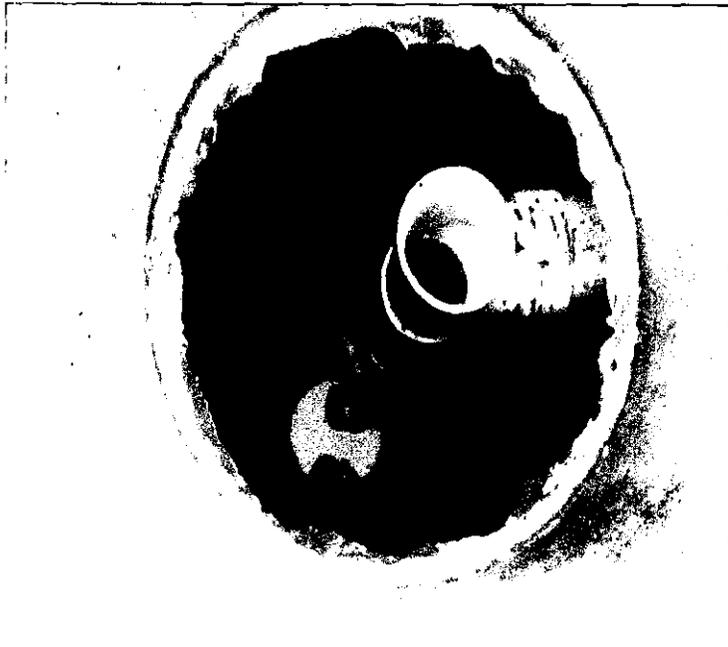
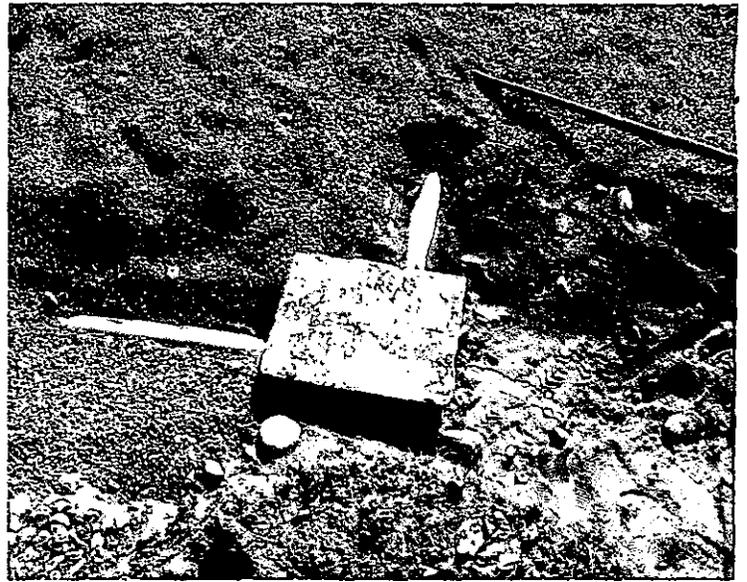
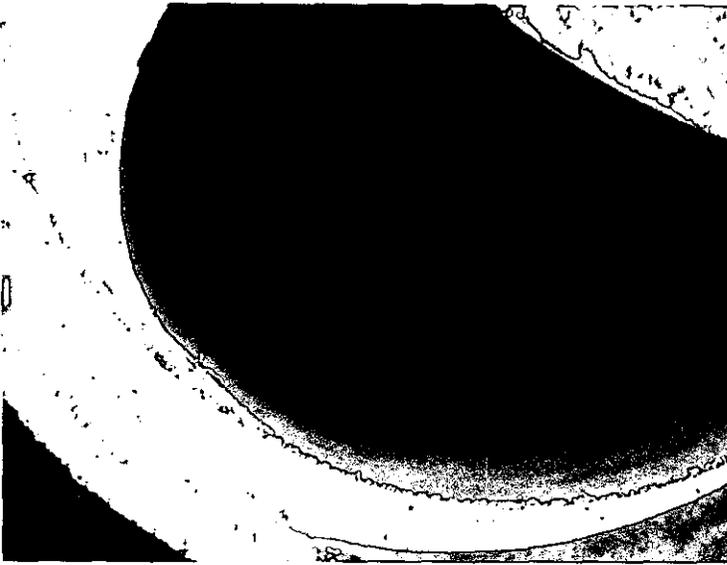
555 BAY ROAD





555 Bay Road Inspection 11/9/01





555 Bay Road inspection 11/9/01

