

44 Chapel Rd

BOARD OF HEALTH, AMHERST, MASSACHUSETTS  
APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 68-1 Date 3-22-68 Fee 5.00 Date Rec'd. 3-28-68 By CEH

Application is hereby made for a permit to Construct (X) or Repair ( ) an Individual Sewage Disposal System at:  
Location—Address Lot 8 NOTTING MANOR or Lot No. \_\_\_\_\_  
Owner SANDERS & ROBERG Address Bay Road  
Contractor \_\_\_\_\_ Address \_\_\_\_\_  
Type of Building Dwelling Dimensions 150 x 200 Size Lot 30,179  
\* Dwelling—No. of Bedrooms 3 Expansion Attic (NO) Garbage Grinder (YES)  
Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( )

Other fixtures \_\_\_\_\_  
Town Water? YES Type of Well \_\_\_\_\_  
Design Flow \_\_\_\_\_ gallons per person per day. Total daily flow \_\_\_\_\_ gallons  
Septic Tank—Liquid capacity 1000 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_  
Disposal Trench—No. \_\_\_\_\_ Width \_\_\_\_\_ Total Length \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.  
Disposal Bed—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.  
Dry Well—No. 1 Diameter 6 Depth below inlet 8 Dimensions: 6 x 8 x \_\_\_\_\_  
Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( ) \_\_\_\_\_

(Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)  
Percolation Test Results Performed by Shake Date \_\_\_\_\_  
Test Pit No. 1 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
Description of Soil \_\_\_\_\_ Depth to Ground Water \_\_\_\_\_  
Will disposal area be filled? \_\_\_\_\_ Cut down? \_\_\_\_\_  
(On reverse side or separate sheet, show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

AGREEMENT: The undersigned agrees to construct the aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by [Signature] Owner or builder [Signature] Date 3-28-68  
[Signature] [Signature] date 3-22-68  
Application Disapproved for the following reasons:

BOARD OF HEALTH, AMHERST, MASSACHUSETTS  
CERTIFICATE OF COMPLIANCE

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed ( ) or repaired ( ) by \_\_\_\_\_ at \_\_\_\_\_ has been constructed in accordance with the provisions of \_\_\_\_\_ INSTALLER \_\_\_\_\_  
Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit No. \_\_\_\_\_ dated Nov 1967  
The issuance of this certificate shall not be construed as a guarantee that the system will function satisfactorily.  
DATE May 6, 1968 Inspector [Signature]

BOARD OF HEALTH, AMHERST, MASSACHUSETTS  
DISPOSAL WORKS CONSTRUCTION PERMIT

No. 68-1  
Permission is hereby granted Sanders & Roberg to construct (X) or repair ( ) an Individual Sewage Disposal System at Lot 8 Notting Manor  
as shown on the application for Disposal Works Construction Permit No. 68-1  
This permit is issued with the understanding that future alterations or additions will be made if necessary. This permit shall not be construed as permission to create or maintain any sewage nuisance and in the issuance of this permit the Board of Health assumes no responsibility for the future operation or maintenance of the system.

DATE 4-1-68 Board of Health [Signature]

