BOARD OF HEALTH, AMHERST, MASSACHUSETTS APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT No. 72-39 Date Mov. 16, 1972 Fee 3:00 Date Rec'd. "/16/72 Application is hereby made for a permit to Construct (X) or Repair () an Individual Sewage Disposal System at: System at: 8 Chapel Road Nuting Manor or Lot No. 3
Owner Girard Roberge Address Bay Rd. Amherst MA 01002 Owner Girard Roberge Contractor KANLS Size Lot 440 Govet Soul 183, \_\_\_\_ Dimensions Type of Building \_ Dwelling-No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder (4) 5 No. of persons \_\_\_ Showers ( Other fixtures \_ Town Water? 4es Type of Well \_ Design Flow 50 gallons per person per day. Total daily flow 300 gallons WMAH D\_ Septic Tank-Liquid capacity 1000 gallons Dimensions: L\_\_\_\_ Disposal Trench—No. 2 Width 3' Total Length #2663 Total leaching area Disposal Bed—No. \_\_\_ Diameter /0 x 30 Depth below inlet \_\_\_\_ Total leaching area 300 sq. ft. Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: \_\_\_\_ Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( ) (Depth of Soil Line Below finished grade at foundation \_ on Test Results Performed by Miles J. Hubler Date 17.
Test Pit No. 1 \_\_\_\_\_ minutes per inch use 2 min for Depth of Test Pit \_\_\_\_\_ Percolation Test Results Performed by Miles Test Pit No. 2 \_\_\_\_\_ minutes per inch design Depth of Test Pit \_\_\_\_ Description of Soil 1005e med. sand Depth to Ground Water none 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 aforedescribed 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. Owner or builder Application Approved H 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 Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit No. The issuance of this certificate shall not be construed as a guarantee that the system will function satisfactorily. DATE \_ Inspector \_ **BOARD OF HEALTH, AMHERST, MASSACHUSETTS** DISPOSAL WORKS CONSTRUCTION PERMIT

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 11-16-72

Board of Health

level

Top of Bank Septic Tank. Brook House Chapel Road To Bay Road. Bottom of trenches is SKETCH SHOWING See state sanitary Code SANITARY DISPOSAL Art. II for specifications SYSTEM FOR LOT #3 for seepage trenches. NUTING MANOR 11-14-72 no scale