

33 FLAT HILLS



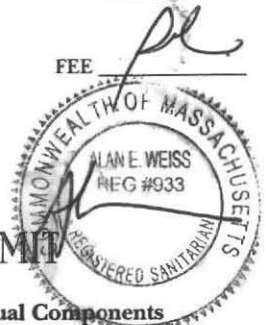
No. \_\_\_\_\_

FEE pl

# 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 Components

Location	<u>33 Flat Hills Rd</u>	Owner's Name	<u>David Koplan, (aka Rick Sawicki)</u>
Map/Parcel#	<u>9A / 10</u>	Address	<u>33 Flat Hills Rd.</u>
Lot#	<u>#10</u>	Telephone#	<u>(549-2600)</u>
Installer's Name	<u>KACI'S Excavating</u>	Designer's Name	<u>Alan Weiss RS</u>
Address	<u>Hoch, MA.</u>	Address	<u>Belchertown, MA.</u>
Telephone#	<u>549-5396</u>	Telephone#	<u>413-323-5957</u>

Type of Building Existing Residence Lot Size 2.224 AC sq. ft.  
 Dwelling - No. of Bedrooms 3 BR. Garbage grinder No  
 Other - Type of Building \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( ), Cafeteria ( )  
 Other Fixtures \_\_\_\_\_  
 Design Flow (min. required) 110 gpd Calculated design flow \_\_\_\_\_ Design flow provided \_\_\_\_\_ gpd  
 Plan: Date 4/29/11 Number of sheets 1 Revision Date \_\_\_\_\_  
 Title Septic Tank + Dist. Box Replacement Plan  
 Description of Soil(s) Existing  
 Soil Evaluator Form No. \_\_\_\_\_ Name of Soil Evaluator \_\_\_\_\_ Date of Evaluation \_\_\_\_\_

DESCRIPTION OF REPAIRS OR ALTERATIONS Dist. Box + Septic Tank Replacement

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 Alan Weiss Date 5/1/11

Inspections S tank + D. Box (only) Replacement 5/25/11

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

FEE pl

# COMMONWEALTH OF MASSACHUSETTS

Board of Health, \_\_\_\_\_, 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: KACI'S Excavating  
at 33 Flat Hills Rd.

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. \_\_\_\_\_ dated \_\_\_\_\_ Approved Design Flow \_\_\_\_\_ (gpd)

Installer [Signature]

Designer: [Signature] Inspector: Edward P. Switzer Date: 5/24/2011

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

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

FEE \_\_\_\_\_

# COMMONWEALTH OF MASSACHUSETTS

Board of Health, \_\_\_\_\_, MA.

## DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct ( ) Repair ( ) Upgrade ( ) Abandon ( ) an individual sewage disposal system at \_\_\_\_\_ as described in the application for Disposal System Construction Permit No. \_\_\_\_\_, dated \_\_\_\_\_.

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

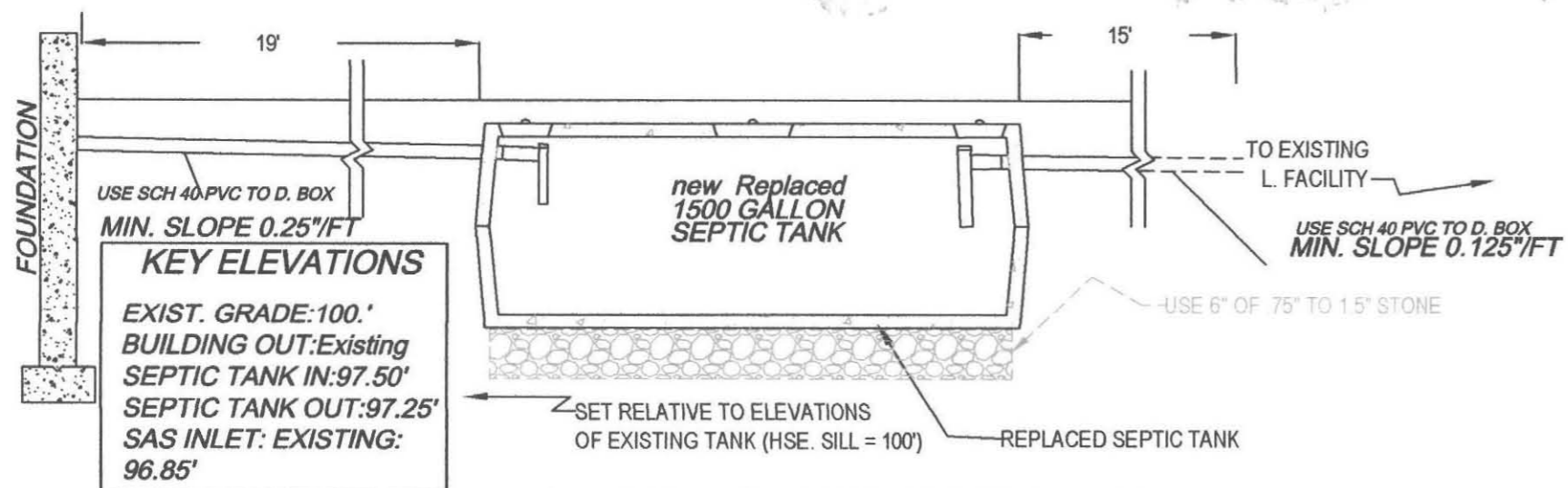


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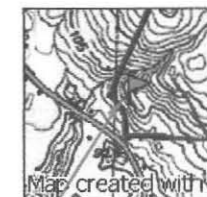
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91	92	93	94	95	96	97	98	99	100

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**EFFLUENT DISPOSAL SYSTEM (CROSS SECTION - NOT TO SCALE)**

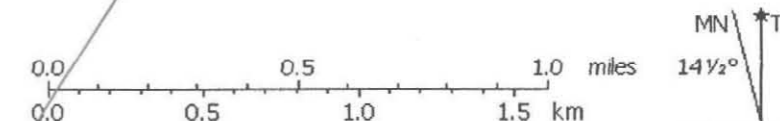


TOPO! map printed on 05/02/11 from "Untitled.tpo"



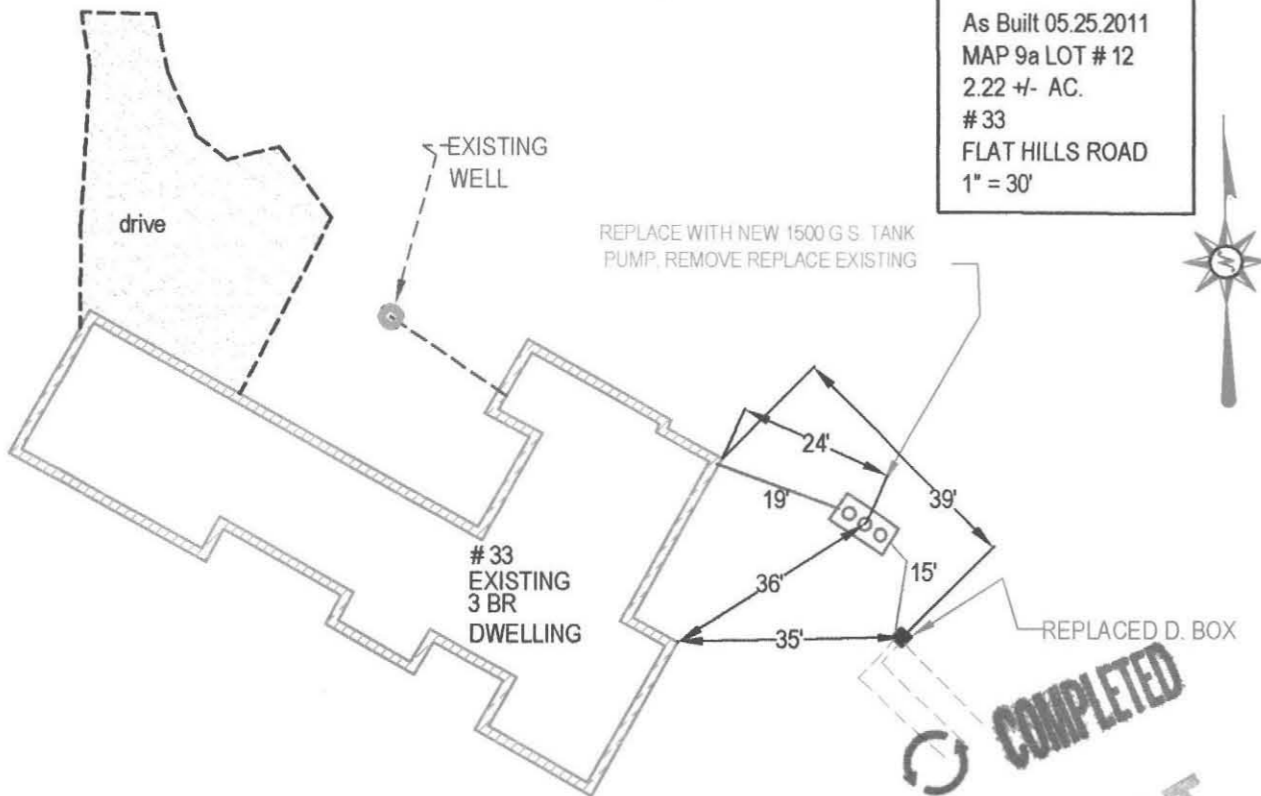
Map created with TOPO! © 2010 National Geographic; © 2007 T

NATIONAL GEOGRAPHIC



SUBJECT SITE LOCATION

As Built 05.25.2011  
MAP 9a LOT # 12  
2.22 +/- AC.  
# 33  
FLAT HILLS ROAD  
1" = 30'



**COMPLETED**  
**AS BUILT**

**NOTE TO INSTALLER:**  
LOCATE AND ESTABLISH L. AREA AS  
FUNCTIONING FIRST. IF FAILED, CONTACT  
DESIGNER IMMEDIATELY. STOP TANK  
INSTALL PLAN. OTHERWISE PROCEED  
WITH:

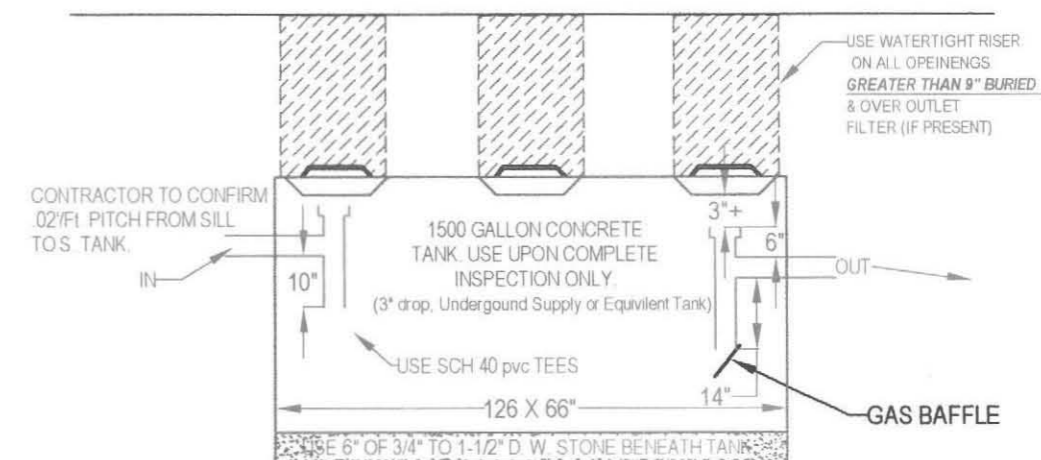
1. Pump, crush and remove old component.
2. Install new S. tank as noted on plan as per  
310 CMR 15.00, with proper Sch 40 tees  
and gas baffle or outlet filter.
3. Contact Designer and local Health official for  
proper inspection prior to backfill.

**NOTE: NO GAURANTEE OF  
LEGNTH OF FUNCTION OF L.  
FIELD IS ADDRESSED. FIELD  
FOUND FUNCTIONAL AT TIME  
OF COMPONENT  
CHANGEOUT.**

**NOTE: NOT A SURVEY  
FOR SEPTIC LOCATION ONLY:  
NO PROPERTY LINES  
WITHIN 25 FT OF PROPOSED  
TANK REPLACEMENT**



**TYPICAL NEW SEPTIC TANK (WATERTIGHT) OR EQUIVELANT.**



SEPTIC TANK & D. BOX REPLACEMENT PLAN FOR DAVID KAPLAN  
33 FLAT HILLS ROAD  
AMHERST, MA

**Cold Spring Environmental Consultants Inc.**  
350 Old Enfield Road  
Belchertown, MA. 01007

PHONE: (413) 323-5957  
FAX: (413) 323-4916

e-Mail: [AEWCES@charter.net](mailto:AEWCES@charter.net)

DATE: 04.29.2011	DRAWN BY: ALAN WEISS	REVISED: 05.25.2011 As Built
SCALE: 1"=30'		DRAWING NUMBER: 111-3569-0409

COMPLETED

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PERMITS/INSP PAYMENT RECPT#: 11104546  
\*\*\*TOWN OF AMHERST\*\*\*  
TOWN HALL  
4 BOLTWOOD AVENUE  
AMHERST MA 01002

DATE: 04/29/11 TIME: 15:39  
CLERK: mirj DEPT:

PAID BY:  
PAYMENT METH: CHECK 831

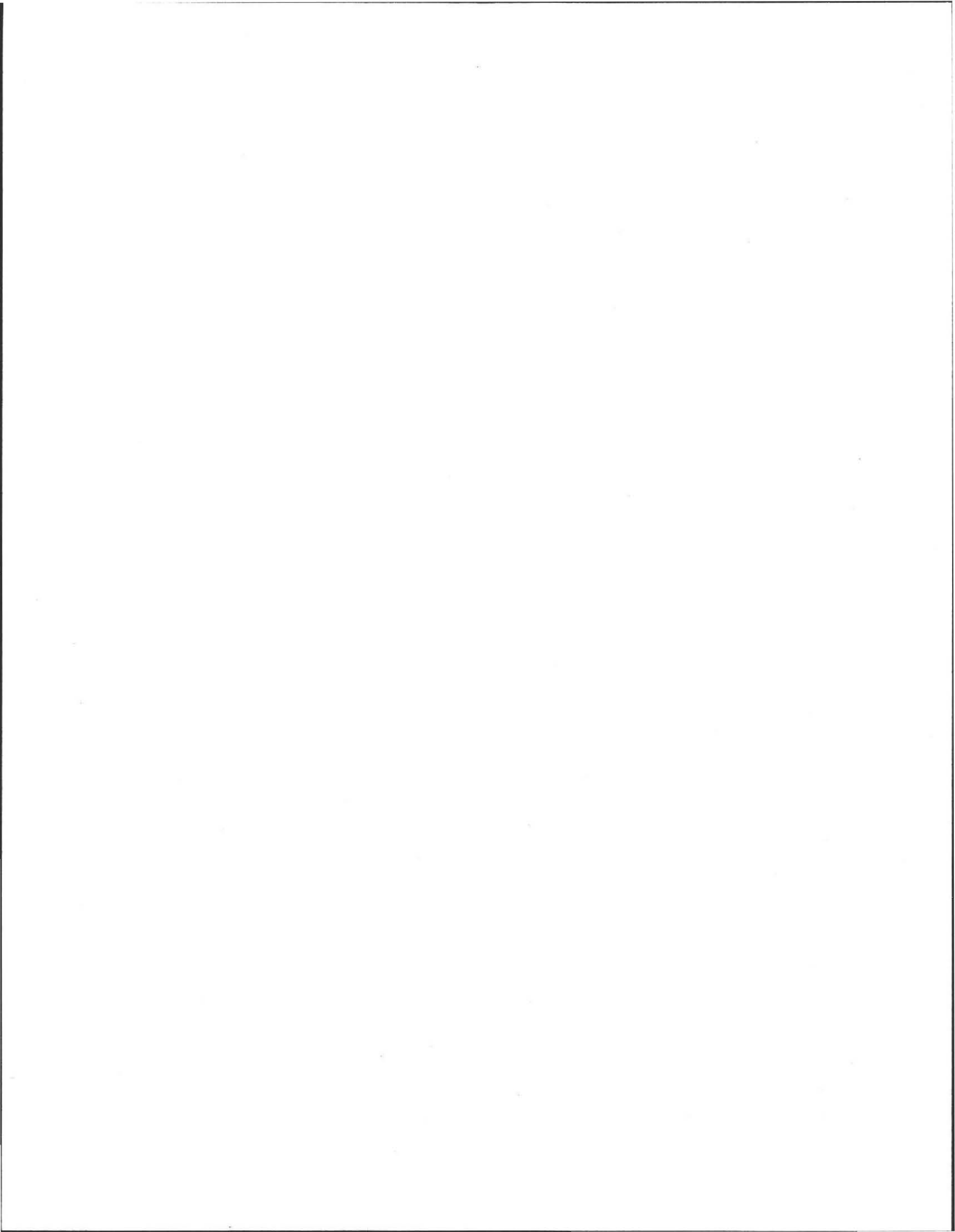
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AMT APPLIED: 200.00  
CHANGE: .00

SITE ADDRESS: DAVID KAPLAN

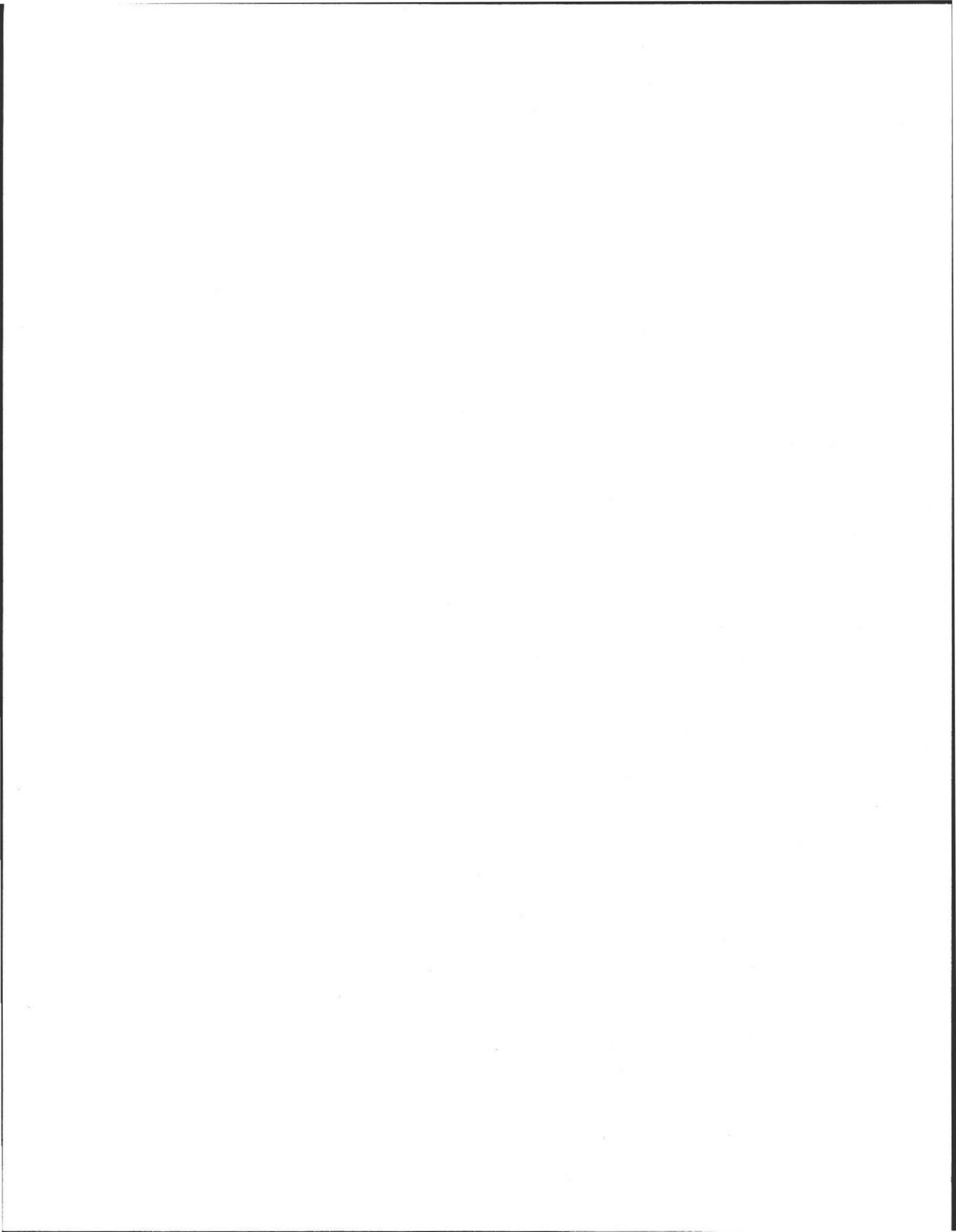
FEES:  
HEA058 TITLE V WITNESS 200.00

TOTAL PAID: 200.00









Town of



AMHERST Massachusetts

AMHERST HEALTH DEPARTMENT, 70 BOLTWOOD WALK, AMHERST, MA 01002

HEALTH INSPECTORS NOTES

33 FLAT HILLS, AMHERST MA 01002-T211

DAVID R. KAPLAN  
JANET M. RIFKIN

Date	Time	Progress Notes
4/29		rick @ ricksawicki.com (check for 200.00 need.) email receipt to B
		- send permit fee + all rates to Rick - copy Alan Weiss as well
		conditional pass
		- new D-Box
		- new tank
		subject to findings during replacement
		water softener discharge to be removed from septic line

