

~~371~~ FLAT HILLS 371

~~371~~ Flat hills

1



Plan:

1104

Designed by:

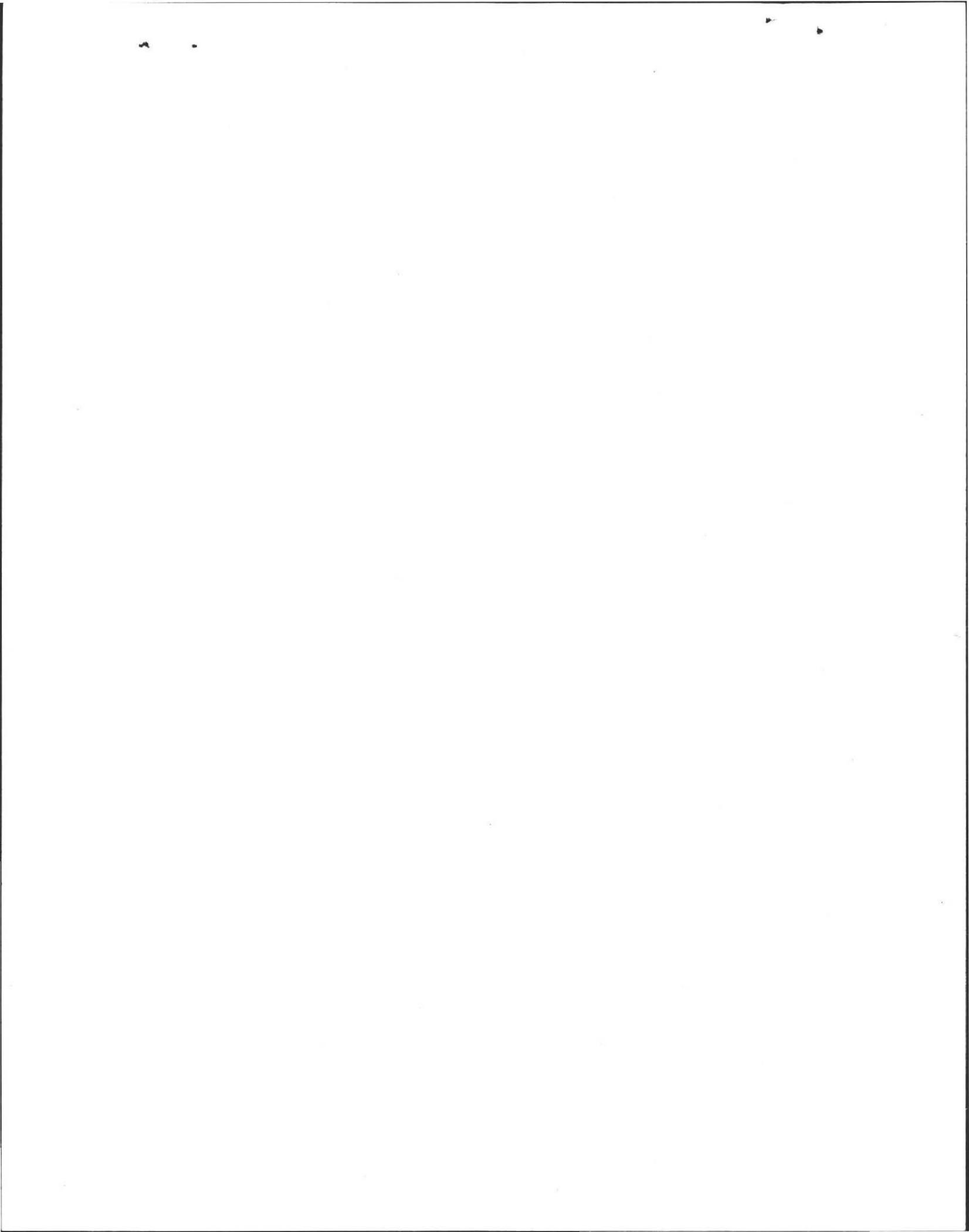
Amblerst Civil Eng.  
Robert Stover

CHECK LIST FOR SEPTIC PLANS

- Application page attached to plan
- PE or RS stamp, date, signature
- Variances to property line setback distances must have Surveyor Stamp 15220 (3) (NA)
- Legal boundaries noted
- Easements noted (NA)
- Dwellings and buildings existing or proposed noted
- Location of driveway or parking areas, other impervious areas
- Location and dimensions of reserve area (new) CMR 15.248(1), 15.104(4) Repair
- System design calculations
- Garbage grinder Y or N
- Benchmark not disturbed during construction, within 75 feet of facility CMR 15.220 (4)(q)
- North arrow CMR 15.200 (4) (g)
- Contours
- Deep hole location and data
- Perc hole location and data
- Elevations
- Names of approving authority and soil evaluator CMR 15.211 p. 49
- Location of every water supply, public and private CMR 15.220(k):
  - Within 400 feet of system in case of surface water and gravel packed public water supply
  - Within 250 feet of system in case of tubular public water supply
  - Within 150 feet of private supply wells - 100' septic sys. & S tank
- Well statement if applicable (NA)
- Location of any surface waters, rivers, vegetated wetlands
- Location of water lines and other subsurface utilities
- Observed and adjusted ground water elevation in the vicinity of system 15.220 (4)(n)
- Profile of system
- Locus plan to show location of facility, including nearest street
- Materials of construction and specs for system
- Gas Baffle 15.227.4
- Pipe in center line of tank 310 CMR 15.227, 15.06(8)
- Double washed stone
- Schedule 40 PVC for trafficked areas, house to tank
- Distances noted from house to tank, etc.
- If dosing is proposed, design and specs of dosing system (NA)
- When alternative technology is required, complete plan and specs, including hydraulic profile
- Trenches preferred over beds CMR 15.240 (6) (Infiltrator)
- Buoyancy calculations for tanks or components partly below H2O table 15.221(8) p. 56 (NA)
- 3 to 1 slope outside of mound, toe ending 5 feet from property line
- Local upgrade requests on the plan (NA)
- Local upgrade forms attached to application (NA)
- Note on plan listing all variances sought in conjunction with the plan (NA)

NOTES:

approved plan 12/9/10 Jayl Carstanache  
SE # 13267





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee \_\_\_\_\_

DEP has provided this form for use by local Boards of Health if they choose to do so. Before using the form, check with your local Board of Health to make sure that they will accept it.

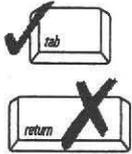
**A. Facility Information**

**Important:**  
 When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.

Application is hereby made for a permit to:  Construct a new on-site sewage disposal system  
 Repair or replace an existing on-site sewage disposal system  
 Repair or replace an existing system component

1. Location of Facility:

371 Flat Hills Rd.  
 Address or Lot #  
 Amherst MA 01002  
 City/Town State Zip Code



2. Owner Information

Edward J. and Alexis H. Connolly  
 Name  
 381 Flat Hills Rd.  
 Address (if different from above)  
 Amherst MA 01002  
 City/Town State Zip Code  
 (413) 256-8815  
 Telephone Number

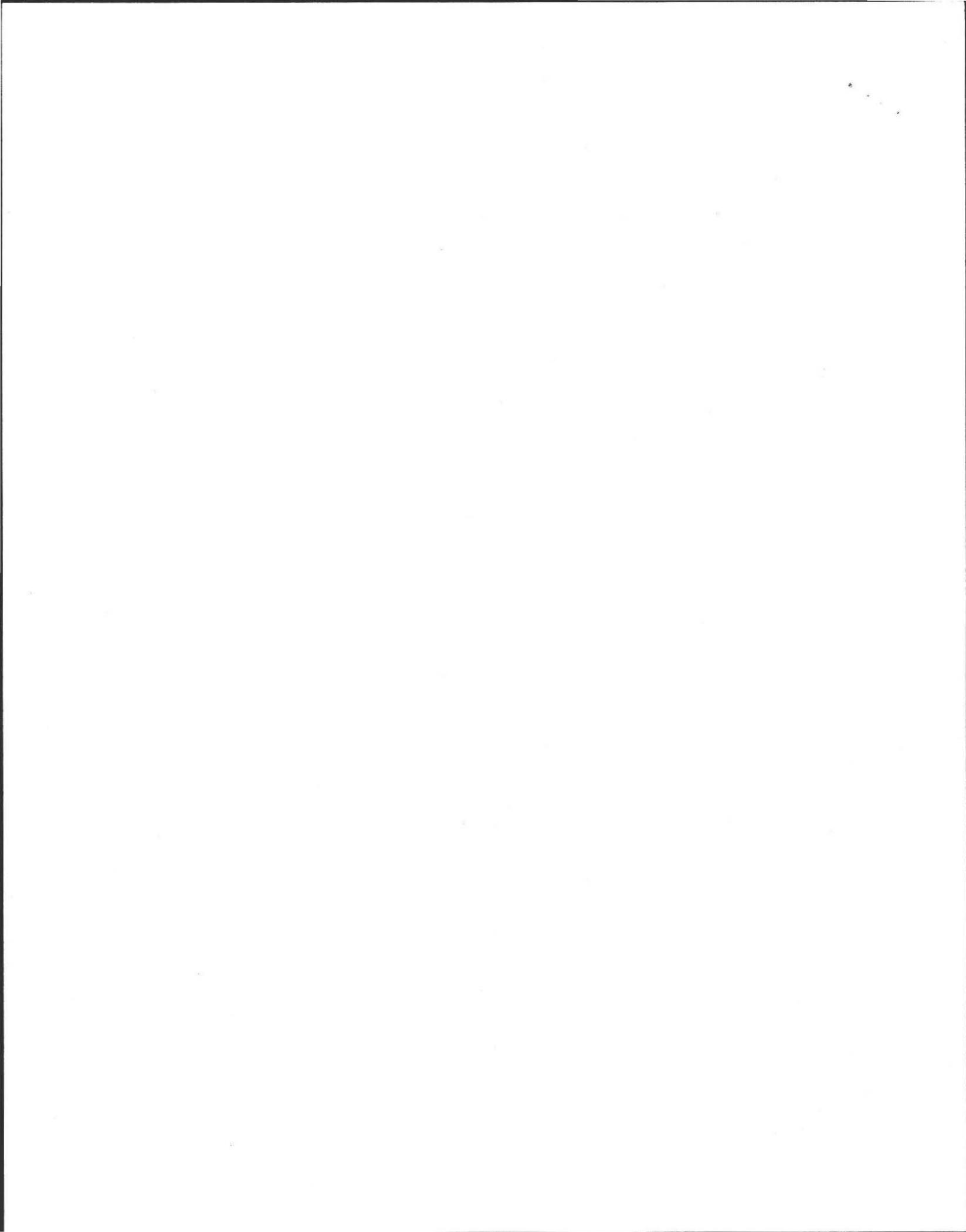
3. Installer Information

Bill Clark W. W. Clark Excavating  
 Name Name of Company  
 27 Pratt Corner Rd.  
 Address  
 Shutesbury MA 01072  
 City/Town State Zip Code  
 (413) 259-1411  
 Telephone Number

4. Designer Information

Richard E. Costa, P. E. / Robert Stover Amherst Civil Engineering  
 Name Name of Company  
 P. O. Box 3312  
 Address  
 Amherst MA 01004-3312  
 City/Town State Zip Code  
 (413) 256-3400  
 Telephone Number







Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee

**A. Facility Information** (continued)

5. Type of Building:

Dwelling

Garbage Grinder (check if present)

Other: Type of Building \_\_\_\_\_

Number of Persons Served \_\_\_\_\_

Showers

Number of showers \_\_\_\_\_

Cafeteria

Other fixtures

Specify other fixtures: \_\_\_\_\_

6. Design Flow:

550.00

Gallons per Day

Calculated Daily Flow:

640.51

Gallons

7. Plan:

11/22/10

Date of Original

one

Number of Sheets

Revision Date

"Plan of Septic System Repair"

Title of Plan

8. Description of Soil:

attached

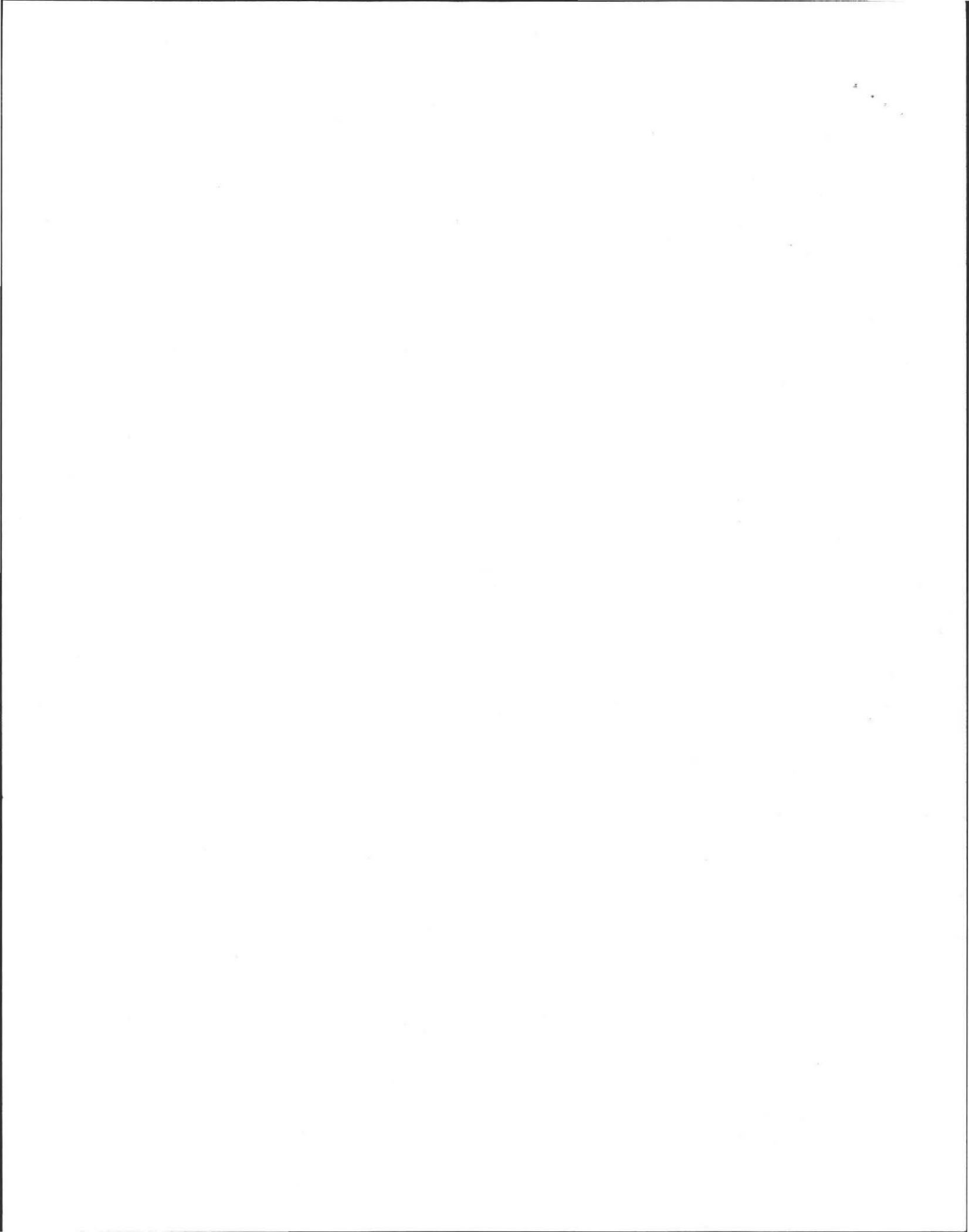
9. Nature of Repairs or Alterations (if applicable):

replace system with 1500 gallon precast septic tank and an "Infiltrator" chamber leach bed.

10. Date last inspected:

not apply

Date





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee \_\_\_\_\_

**B. Agreement**

The undersigned agrees to ensure the construction and maintenance of the aforescribed on-site sewage disposal system in accordance with the provisions of Title 5 of the Environmental Code and not to place the system in operation until a Certificate of Compliance has been issued by this Board of Health

*[Handwritten Signature]*  
 Signature \_\_\_\_\_

*11/29/10*  
 Date \_\_\_\_\_

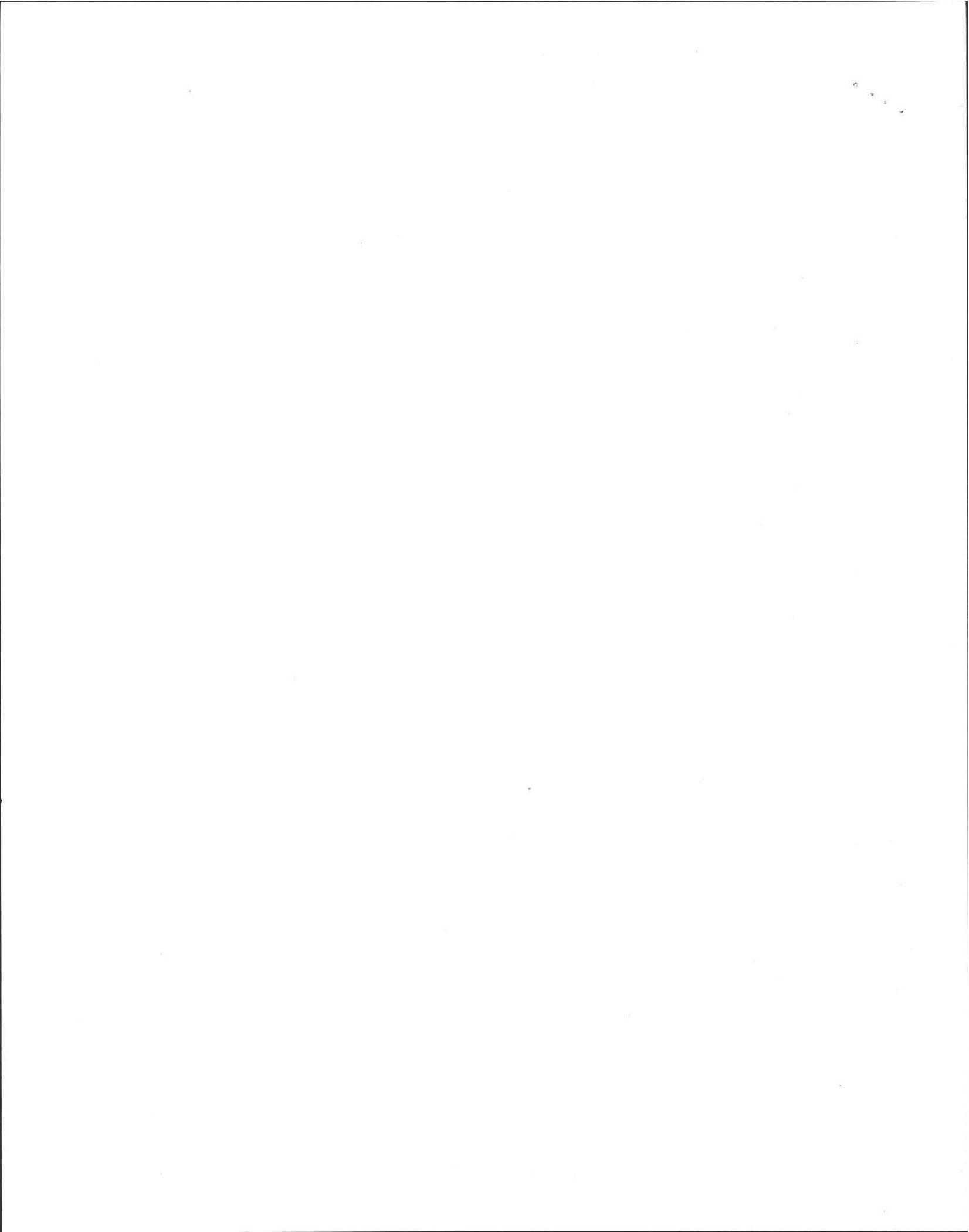
Application Approved By:

*[Handwritten Signature]*  
 Name \_\_\_\_\_

*12/9/10*  
 Date \_\_\_\_\_

Application **Disapproved** for the following reasons:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_





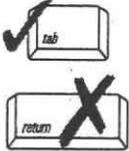
Commonwealth of Massachusetts  
 City/Town of Amherst  
**Disposal System Construction Permit**  
 Form 2A

Number \_\_\_\_\_

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

**Permission is hereby granted to:**

**Important:**  
 When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Edward J. and Alexis H. Connolly \_\_\_\_\_ not apply \_\_\_\_\_  
 Name Name of Company  
 381 Flat Hills Rd. \_\_\_\_\_  
 Address  
 Amherst \_\_\_\_\_ MA \_\_\_\_\_ 01002 \_\_\_\_\_  
 City/Town State Zip Code

to perform the following work on an on-site sewage disposal system:

- Construction
- Repair or replacement
- Repair or replacement of system components

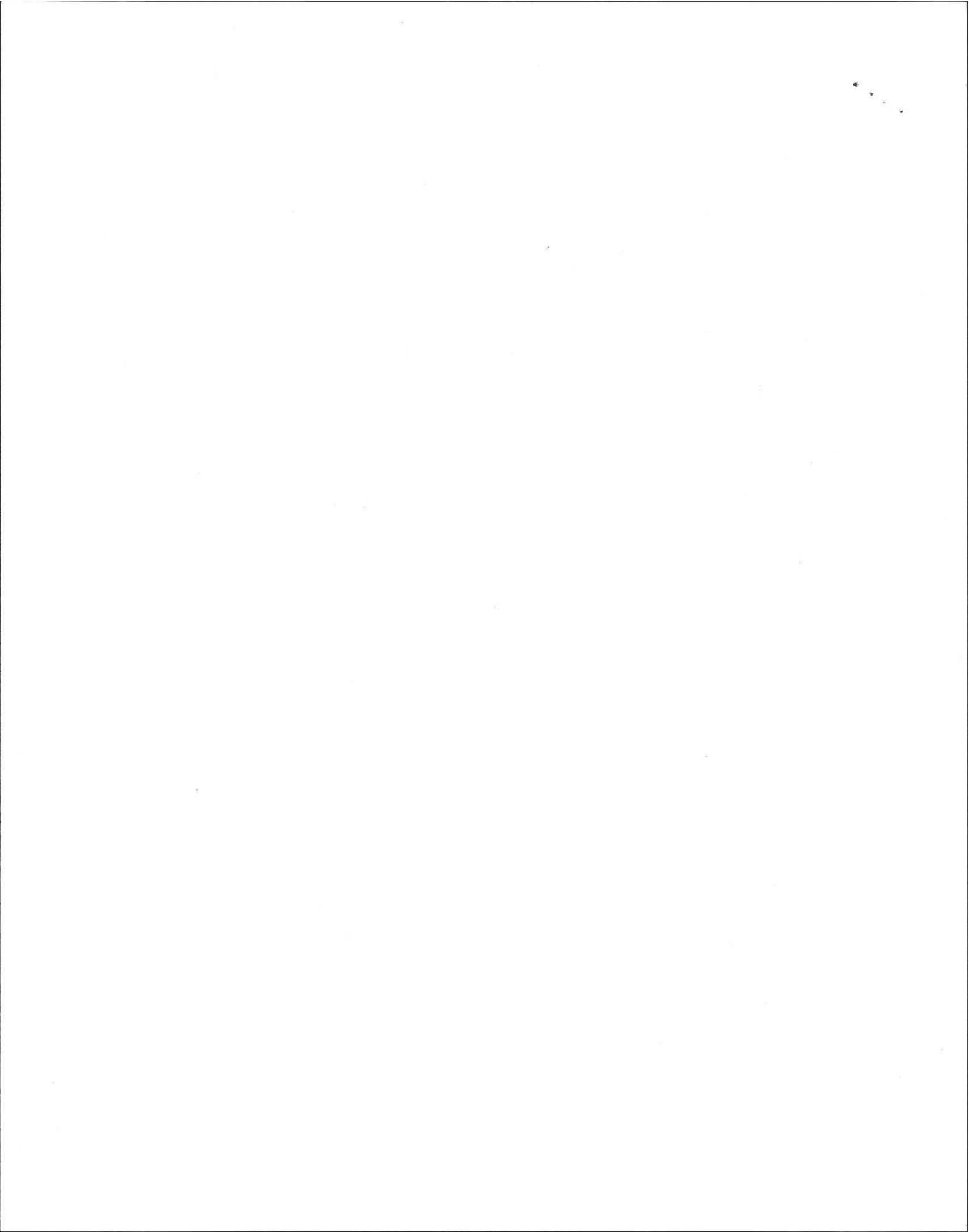
371 Flat Hills Rd. \_\_\_\_\_  
 Facility Address  
 Amherst \_\_\_\_\_ MA \_\_\_\_\_ 01002 \_\_\_\_\_  
 City/Town State Zip Code  
 Edward and Alexis Connolly \_\_\_\_\_ 256-8815 \_\_\_\_\_  
 Owner Telephone Number

The work to be performed is further described in the Application for Disposal System Construction Permit. The applicant recognizes his/her duty to comply with Title 5 and the following local provisions or special conditions:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**All construction must be completed within three years of the date below.**

Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 Title \_\_\_\_\_





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Certificate of Compliance**  
 Form 3

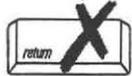
DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

**This is to Certify** that the following work on an On-Site Sewage Disposal System

- Construction of a new system
- Repair or replacement of an existing system
- Repair or replacement of an existing system component

Has been done in accordance with Title 5 and the Disposal System Construction Permit (DSCP):

**Important:**  
 When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



DSCP Number		DSCP Date	
Edward J. and Alexis H. Connolly			
Facility Owner			
371 Flat Hills Rd.			
Street Address or Lot #			
Amherst	MA	01002	
City/Town	State	Zip Code	

Designer Information:

Richard E. Costa, P.E. / Robert Stover	Amherst Civil Engineering
Name	Name of Company
Signature	Date

Installer Information:

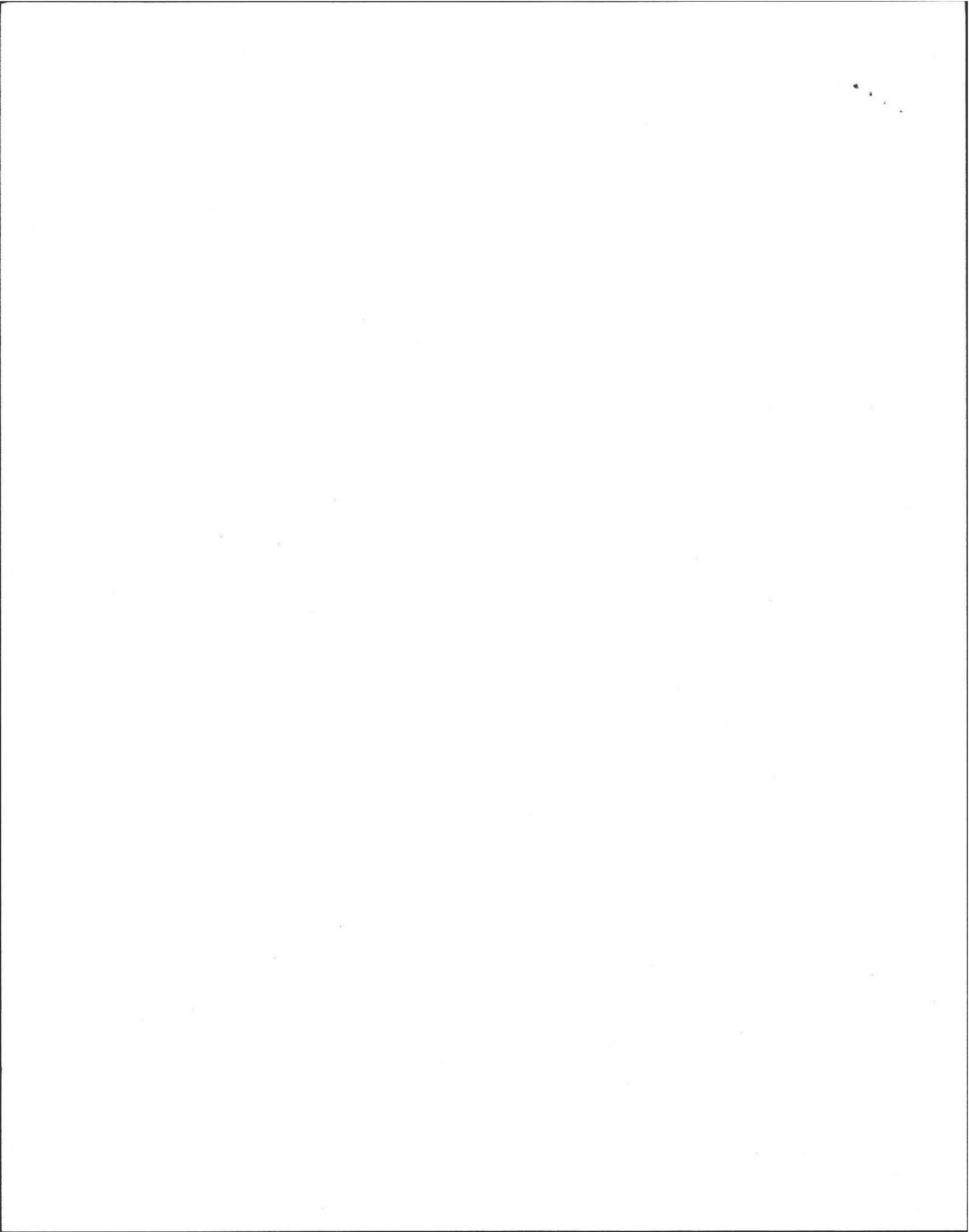
Name	Name of Company
Signature	Date

Use of this system is conditioned on compliance with the provisions set forth below:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

Approving Authority	
Signature	Date



PERMITS/INSP PAYMENT RECPT#: 11049279  
\*\*\*TOWN OF AMHERST\*\*\*  
TOWN HALL  
4 BOLTWOOD AVENUE  
AMHERST MA 01002

DATE: 12/09/10 TIME: 13:47  
CLERK: courteman DEPT:

PAID BY:  
PAYMENT METH: CHECK 1405

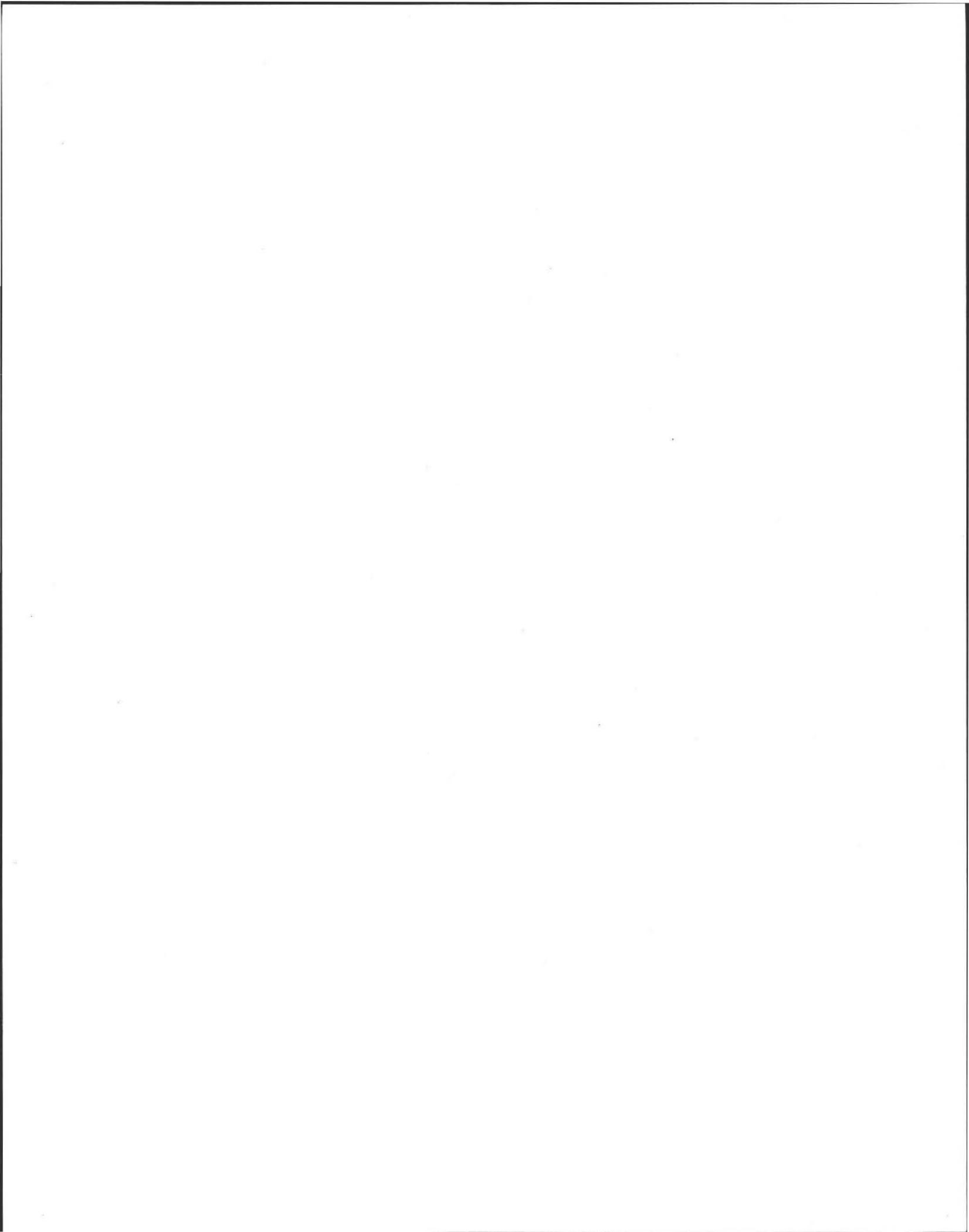
REFERENCE:

AMT TENDERED: 150.00  
AMT APPLIED: 150.00  
CHANGE: .00

SITE ADDRESS: CONNOLLY

FEES:  
HEA017 SEPTIC TANK PER 150.00

TOTAL PAID: 150.00



PERMITS/INSP PAYMENT RECPT#: 11049279  
\*\*\*TOWN OF AMHERST\*\*\*  
TOWN HALL  
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DATE: 12/09/10 TIME: 13:47  
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PAYMENT METH: CHECK 1405

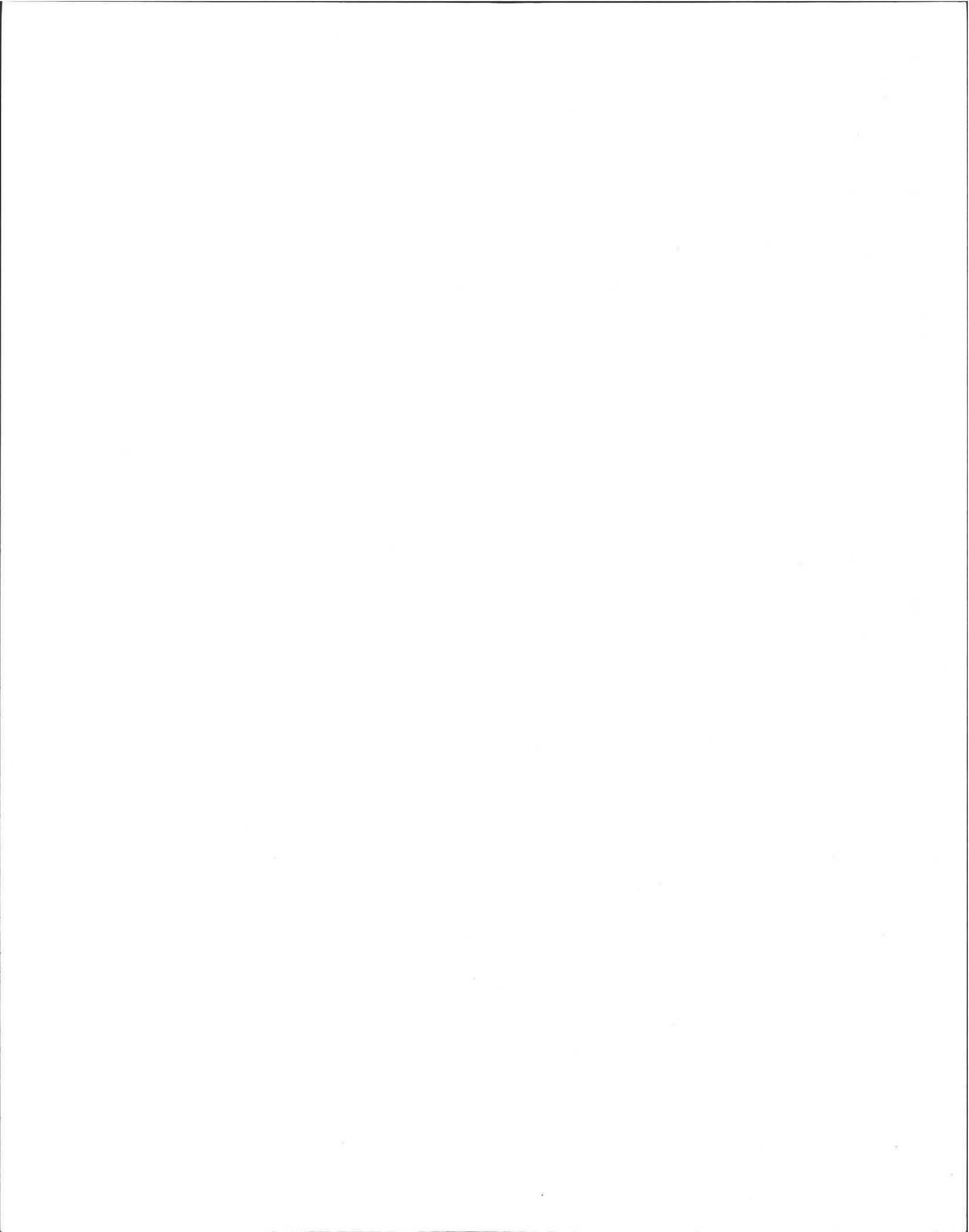
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HEA017 SEPTIC TANK PER 150.00

TOTAL PAID: 150.00





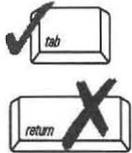
Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number 1104  
 \$ 150.00  
 Fee

DEP has provided this form for use by local Boards of Health if they choose to do so. Before using the form, check with your local Board of Health to make sure that they will accept it.

**A. Facility Information**

**Important:**  
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Application is hereby made for a permit to:  Construct a new on-site sewage disposal system  
 Repair or replace an existing on-site sewage disposal system  
 Repair or replace an existing system component

1. Location of Facility:

371 Flat Hills Rd.  
 Address or Lot #  
Amherst MA 01002  
 City/Town State Zip Code

2. Owner Information

Edward J. and Alexis H. Connolly  
 Name  
381 Flat Hills Rd.  
 Address (if different from above)  
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(413) 256-8815  
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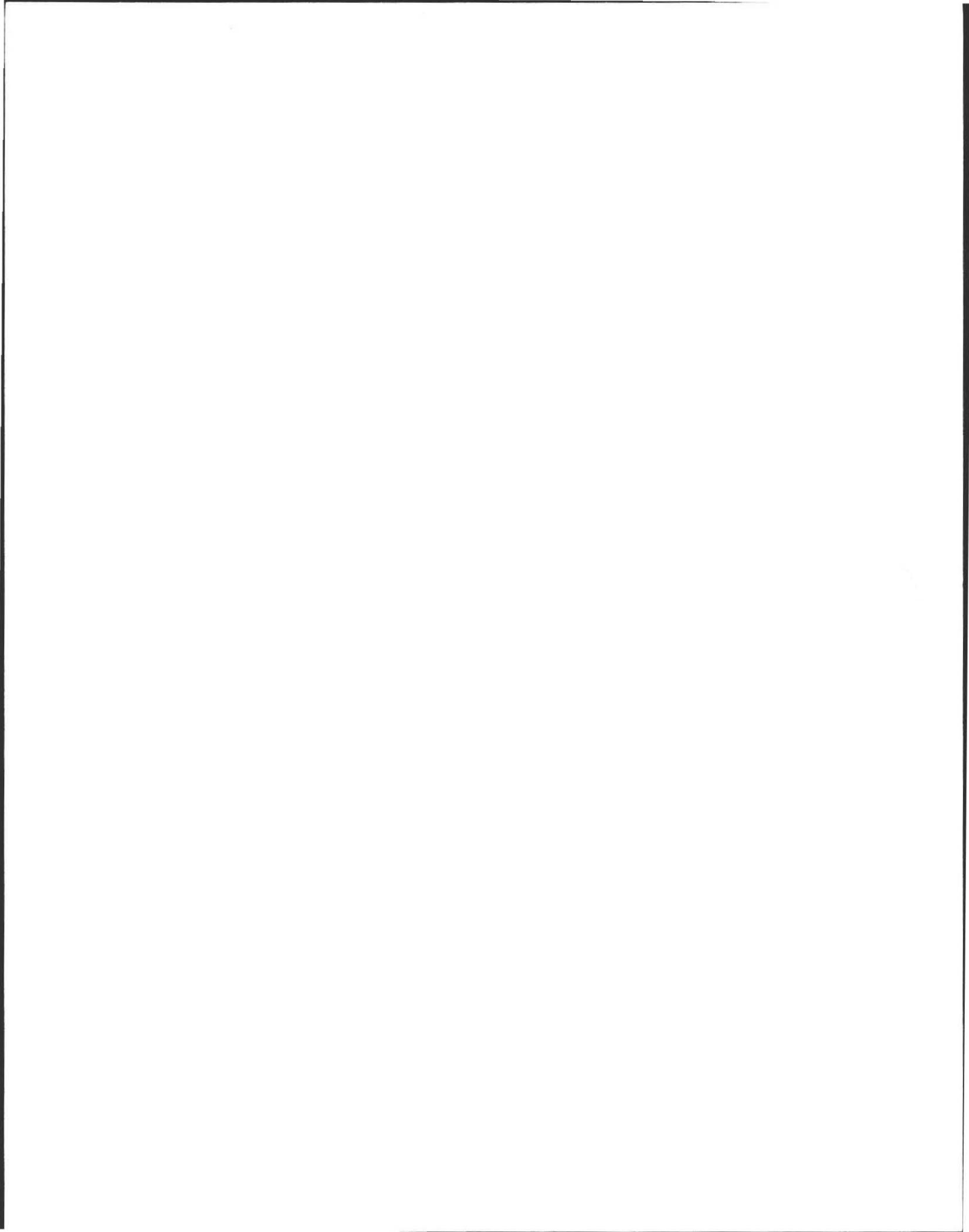
*RE St*  
 12/7/10

3. Installer Information

Bill Clark W. W. Clark Excavating  
 Name Name of Company  
27 Pratt Corner Rd.  
 Address  
Shutesbury MA 01072  
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Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee

**A. Facility Information** (continued)

5. Type of Building:

- Dwelling  Garbage Grinder (check if present)

Other: Type of Building \_\_\_\_\_ Number of Persons Served \_\_\_\_\_

- Showers Number of showers \_\_\_\_\_  Cafeteria  Other fixtures \_\_\_\_\_

Specify other fixtures: \_\_\_\_\_

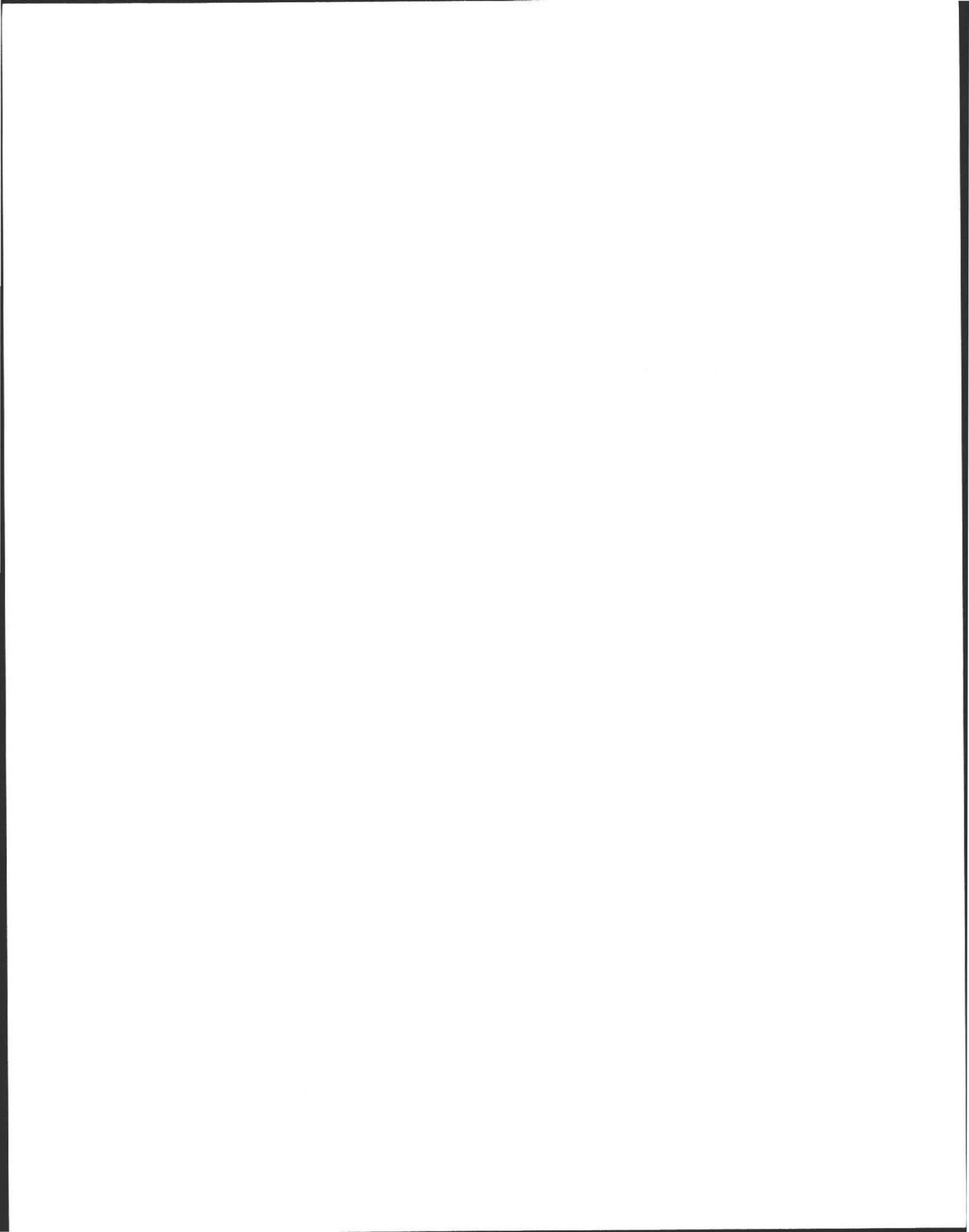
6. Design Flow: 550.00  
 Gallons per Day  
 Calculated Daily Flow: 640.51  
 Gallons

7. Plan: 11/22/10  
 Date of Original  
one  
 Number of Sheets  
"Plan of Septic System Repair"  
 Title of Plan  
 Revision Date \_\_\_\_\_

8. Description of Soil:  
attached

9. Nature of Repairs or Alterations (if applicable):  
replace system with 1500 gallon precast septic tank and an "Infiltrator" chamber leach bed.

10. Date last inspected: not apply  
 Date





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee \_\_\_\_\_

**B. Agreement**

The undersigned agrees to ensure the construction and maintenance of the aforescribed on-site sewage disposal system in accordance with the provisions of Title 5 of the Environmental Code and not to place the system in operation until a Certificate of Compliance has been issued by this Board of Health.

*[Handwritten Signature]*  
 \_\_\_\_\_  
 Signature

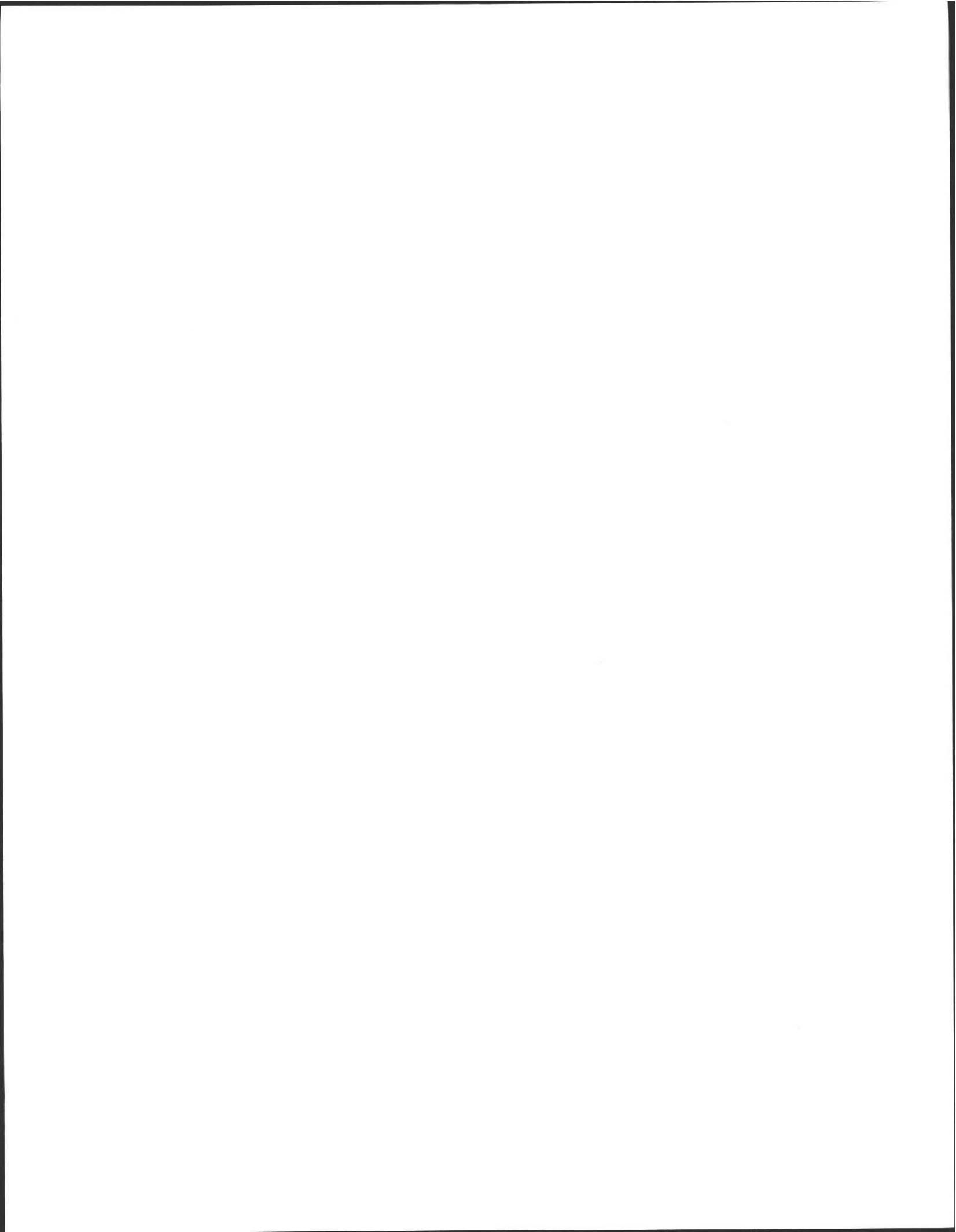
*11/29/10*  
 \_\_\_\_\_  
 Date

Application Approved By:  
*[Handwritten Signature]*  
 \_\_\_\_\_  
 Name *SE#13267*

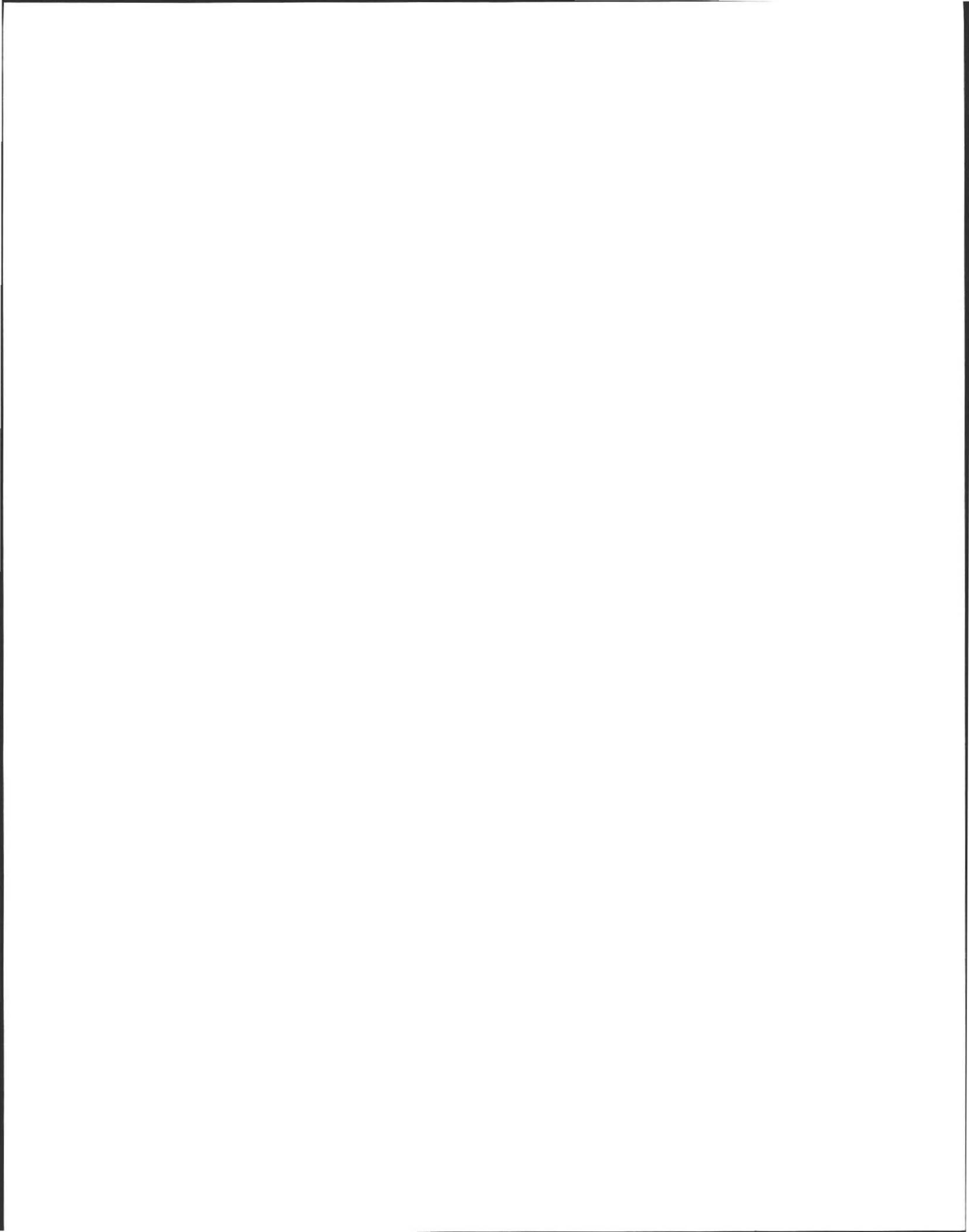
*12/9/10*  
 \_\_\_\_\_  
 Date

Application **Disapproved** for the following reasons:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_









Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
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 Fee \_\_\_\_\_

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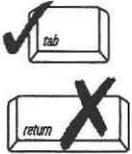
**A. Facility Information**

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Application is hereby made for a permit to:  Construct a new on-site sewage disposal system  
 Repair or replace an existing on-site sewage disposal system  
 Repair or replace an existing system component

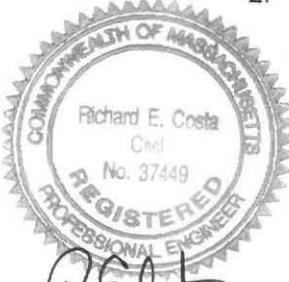
1. Location of Facility:

371 Flat Hills Rd.  
 Address or Lot #  
Amherst MA 01002  
 City/Town State Zip Code



2. Owner Information

Edward J. and Alexis H. Connolly  
 Name  
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 Address (if different from above)  
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 City/Town State Zip Code  
(413) 256-8815  
 Telephone Number



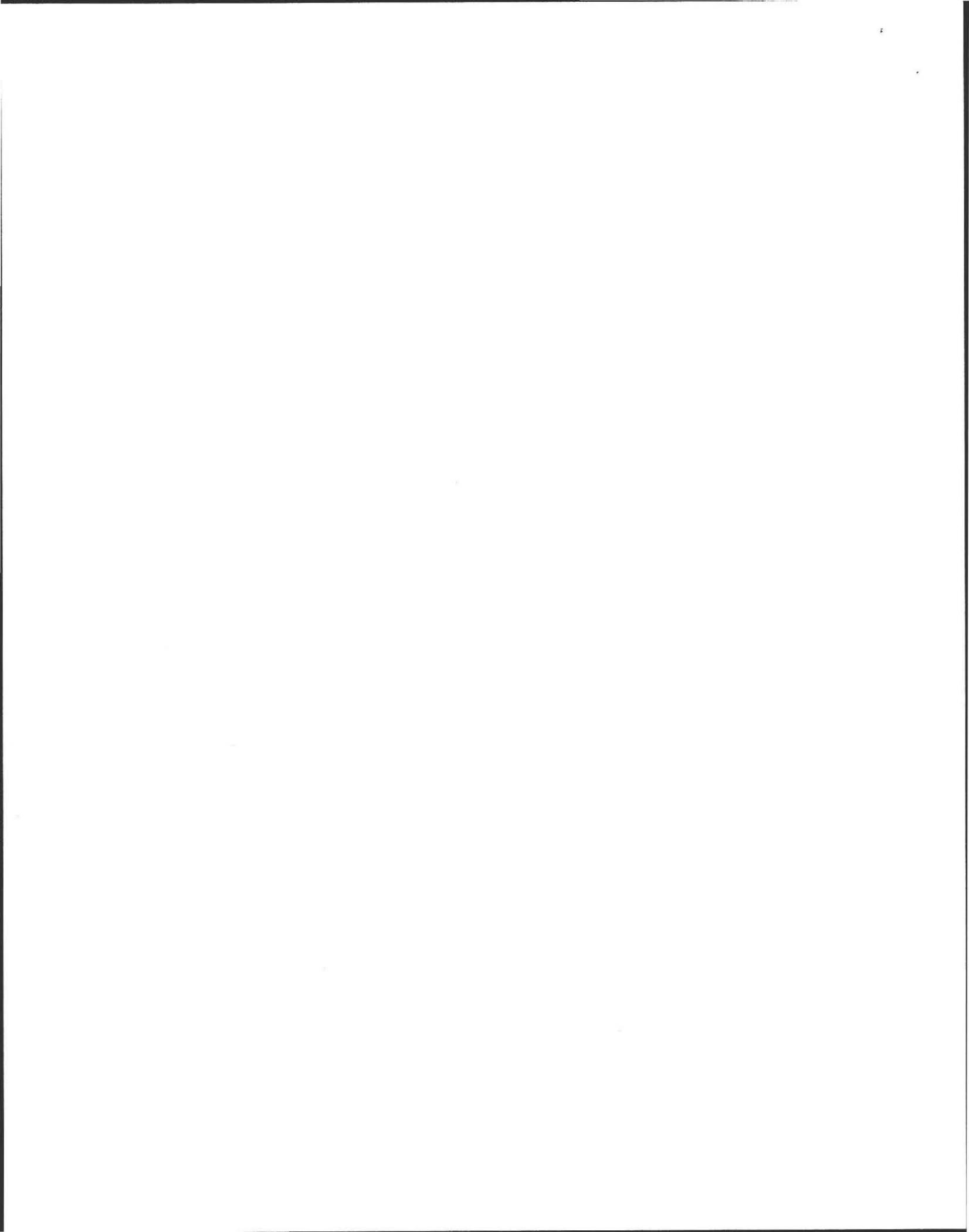
*RE Costa*  
 12/7/10

3. Installer Information

Bill Clark W. W. Clark Excavating  
 Name Name of Company  
27 Pratt Corner Rd.  
 Address  
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 City/Town State Zip Code  
(413) 259-1411  
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Richard E. Costa, P. E. / Robert Stover Amherst Civil Engineering  
 Name Name of Company  
P. O. Box 3312  
 Address  
Amherst MA 01004-3312  
 City/Town State Zip Code  
(413) 256-3400  
 Telephone Number





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee

**A. Facility Information** (continued)

5. Type of Building:

Dwelling

Garbage Grinder (check if present)

Other: Type of Building \_\_\_\_\_

Number of Persons Served \_\_\_\_\_

Showers

Number of showers \_\_\_\_\_

Cafeteria

Other fixtures

Specify other fixtures: \_\_\_\_\_

6. Design Flow:

550.00

Gallons per Day

Calculated Daily Flow:

640.51

Gallons

7. Plan:

11/22/10

Date of Original

one

Number of Sheets

Revision Date

"Plan of Septic System Repair"

Title of Plan

8. Description of Soil:

attached

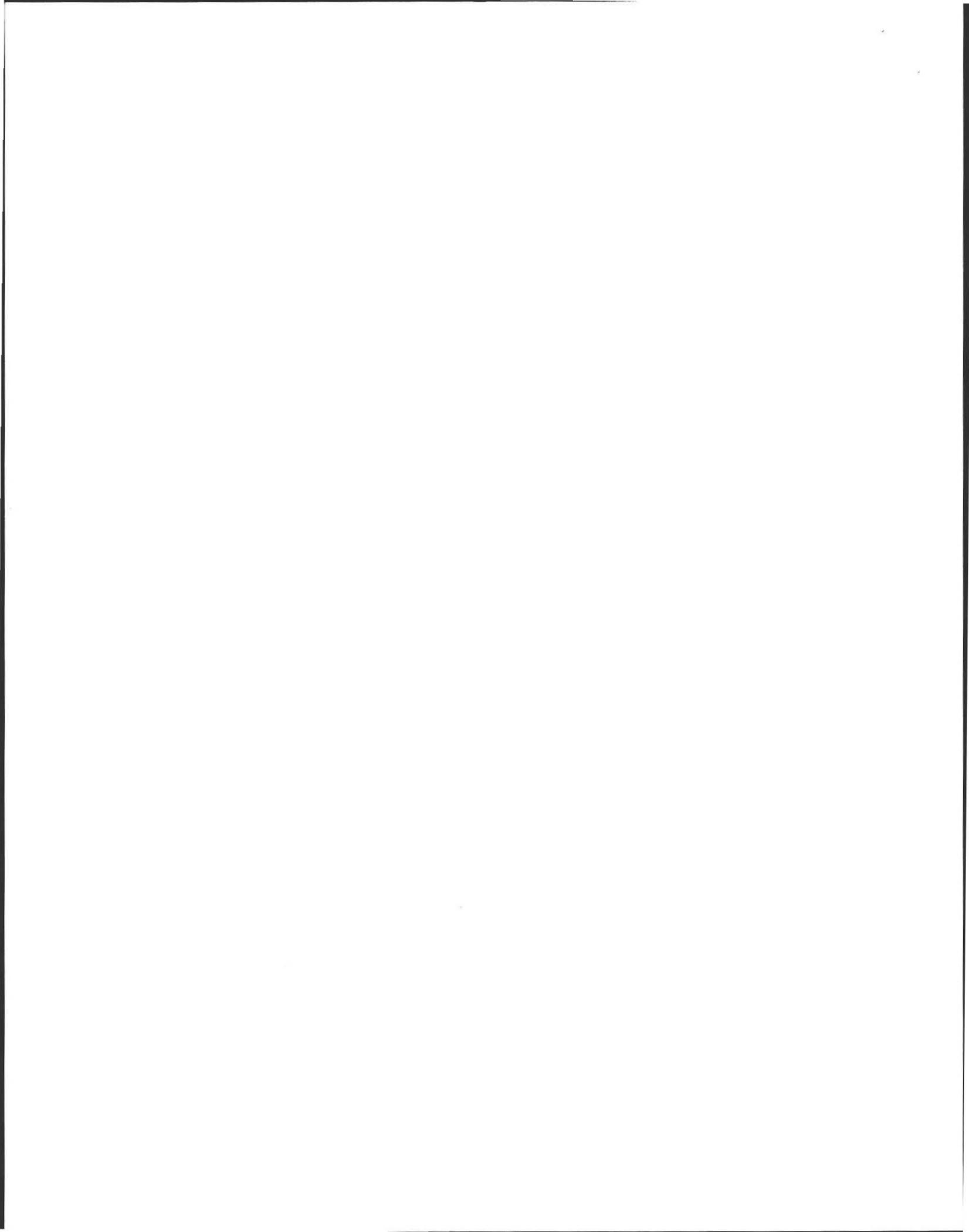
9. Nature of Repairs or Alterations (if applicable):

replace system with 1500 gallon precast septic tank and an "Infiltrator" chamber leach bed.

10. Date last inspected:

not apply

Date





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Application for Disposal System  
 Construction Permit**  
 Form 1A

Number \_\_\_\_\_  
 \$ \_\_\_\_\_  
 Fee

**B. Agreement**

The undersigned agrees to ensure the construction and maintenance of the aforescribed on-site sewage disposal system in accordance with the provisions of Title 5 of the Environmental Code and not to place the system in operation until a Certificate of Compliance has been issued by this Board of Health.

Signature *Eddy Condy*

Date 11/29/10

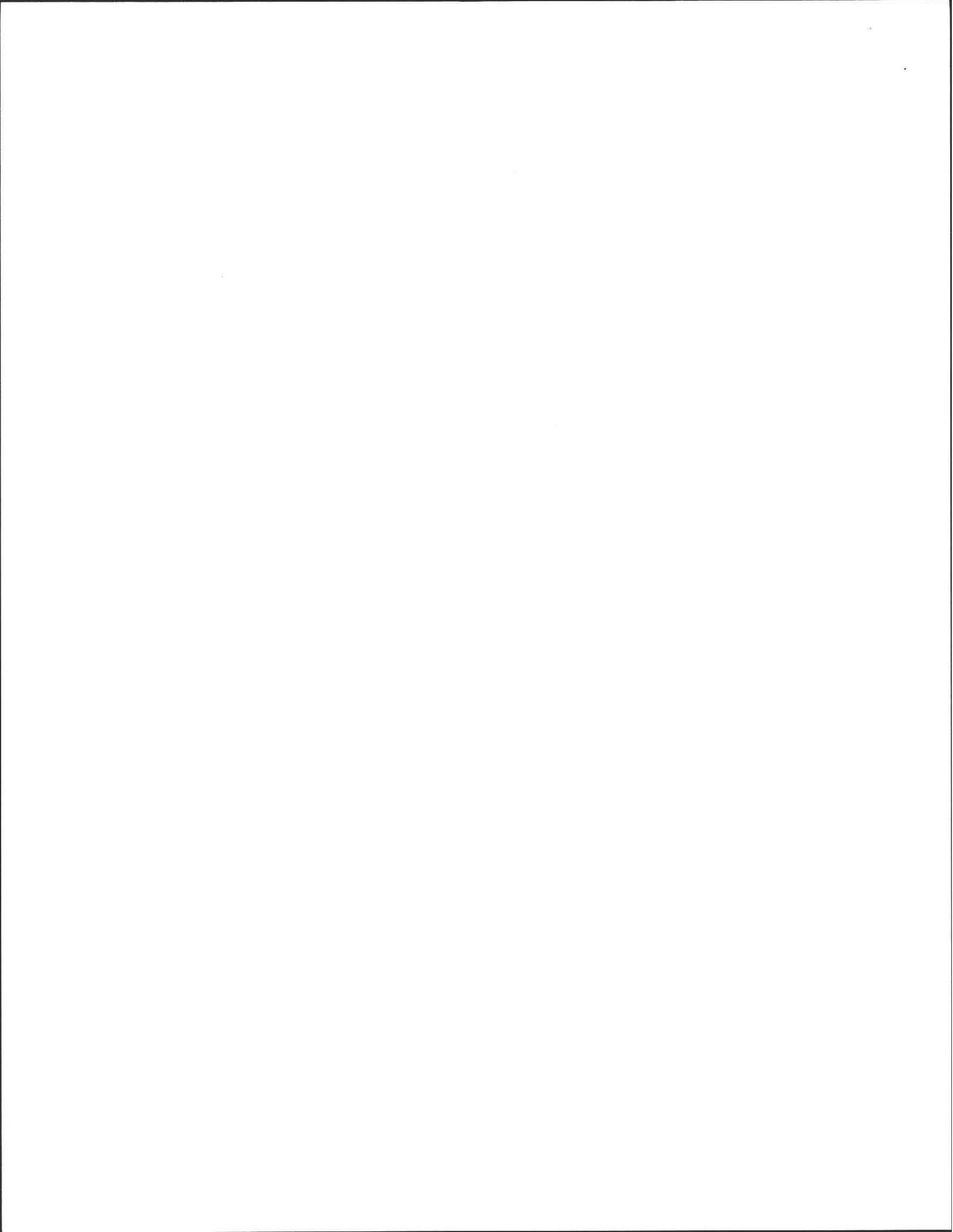
Application Approved By:

Name \_\_\_\_\_

Date \_\_\_\_\_

Application **Disapproved** for the following reasons:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_





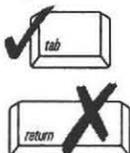
Commonwealth of Massachusetts  
 City/Town of Amherst  
**Disposal System Construction Permit**  
**Form 2A**

Number \_\_\_\_\_

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**Permission is hereby granted to:**

**Important:**  
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Edward J. and Alexis H. Connolly \_\_\_\_\_ not apply \_\_\_\_\_  
 Name Name of Company  
 381 Flat Hills Rd. \_\_\_\_\_  
 Address  
 Amherst \_\_\_\_\_ MA \_\_\_\_\_ 01002 \_\_\_\_\_  
 City/Town State Zip Code

to perform the following work on an on-site sewage disposal system:

- Construction
- Repair or replacement
- Repair or replacement of system components

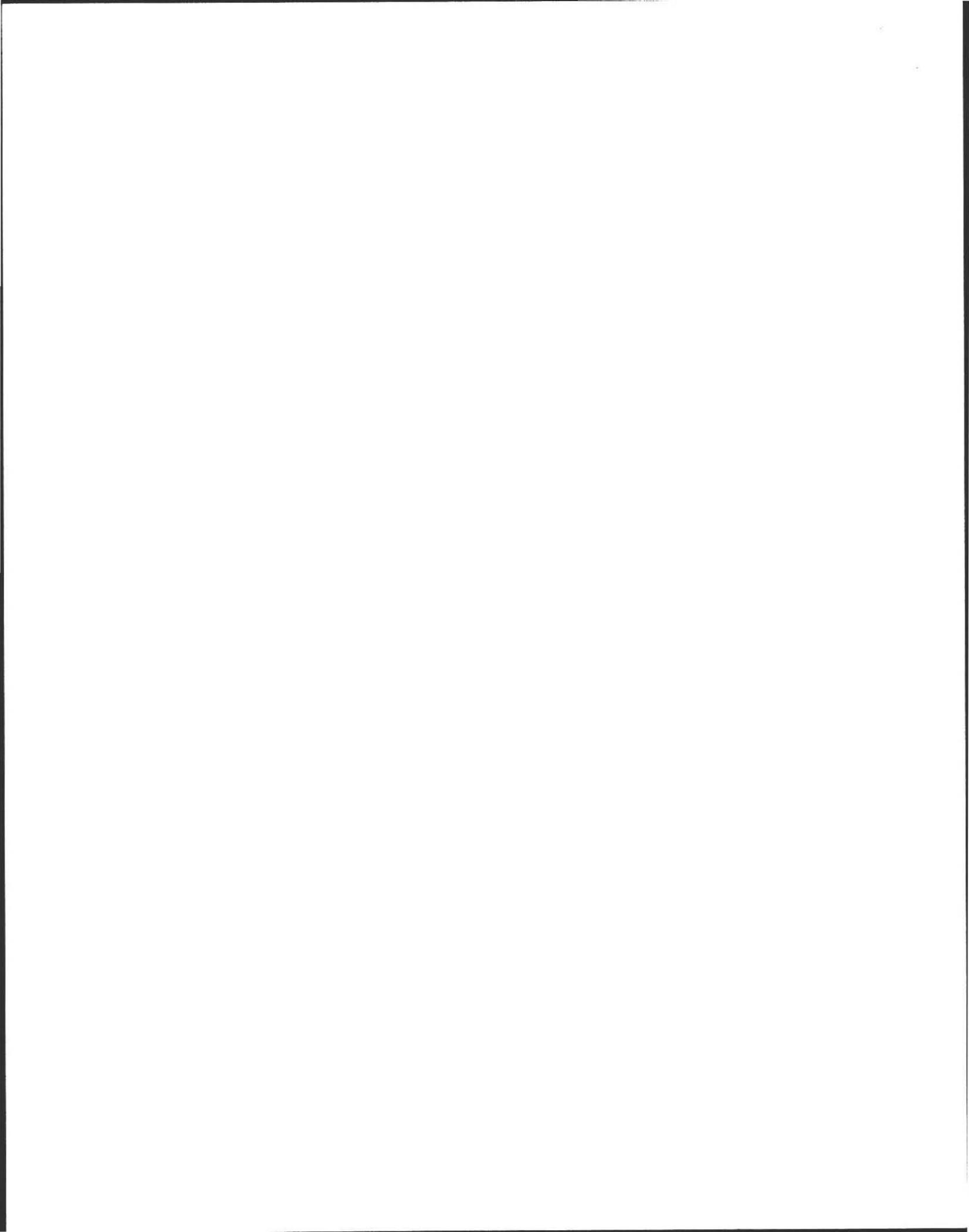
371 Flat Hills Rd. \_\_\_\_\_  
 Facility Address  
 Amherst \_\_\_\_\_ MA \_\_\_\_\_ 01002 \_\_\_\_\_  
 City/Town State Zip Code  
 Edwaed and Alexis Connolly \_\_\_\_\_ 256-8815 \_\_\_\_\_  
 Owner Telephone Number

The work to be performed is further described in the Application for Disposal System Construction Permit. The applicant recognizes his/her duty to comply with Title 5 and the following local provisions or special conditions:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**All construction must be completed within three years of the date below.**

Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 Title \_\_\_\_\_





Commonwealth of Massachusetts  
 City/Town of Amherst  
**Certificate of Compliance**  
 Form 3

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

**This is to Certify** that the following work on an On-Site Sewage Disposal System

- Construction of a new system
- Repair or replacement of an existing system
- Repair or replacement of an existing system component

Has been done in accordance with Title 5 and the Disposal System Construction Permit (DSCP):

**Important:**  
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DSCP Number \_\_\_\_\_ DSCP Date \_\_\_\_\_  
 Edward J. and Alexis H. Connolly  
 Facility Owner  
 371 Flat Hills Rd.  
 Street Address or Lot #  
 Amherst MA 01002  
 City/Town State Zip Code

Designer Information:

Richard E. Costa, P.E. / Robert Stover \_\_\_\_\_ Amherst Civil Engineering  
 Name Name of Company  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Installer Information:

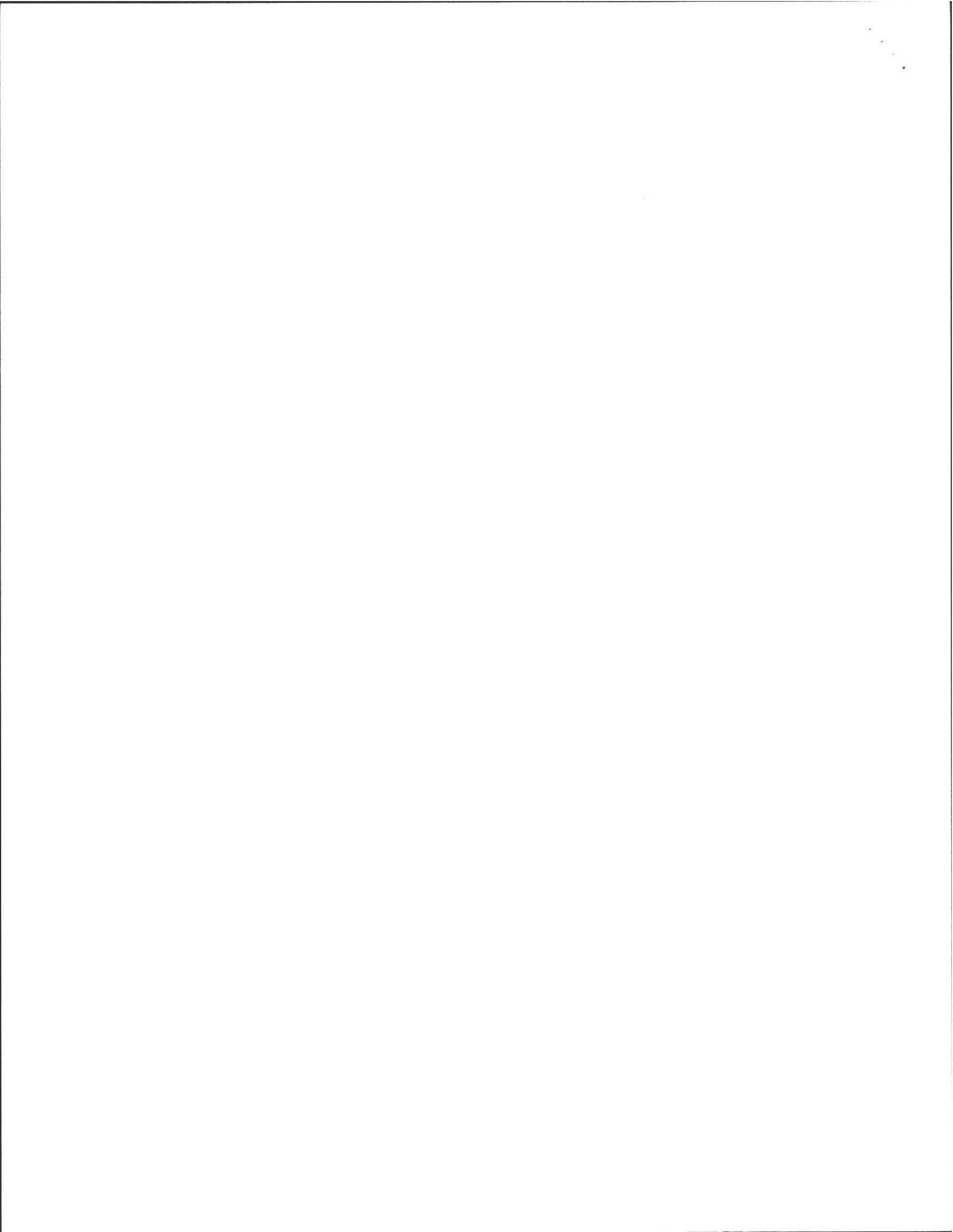
\_\_\_\_\_  
 Name Name of Company  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Use of this system is conditioned on compliance with the provisions set forth below:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

\_\_\_\_\_  
 Approving Authority  
 Signature \_\_\_\_\_ Date \_\_\_\_\_





# WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §

HEALTH DEPT

## A. General Information

**Important:**  
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



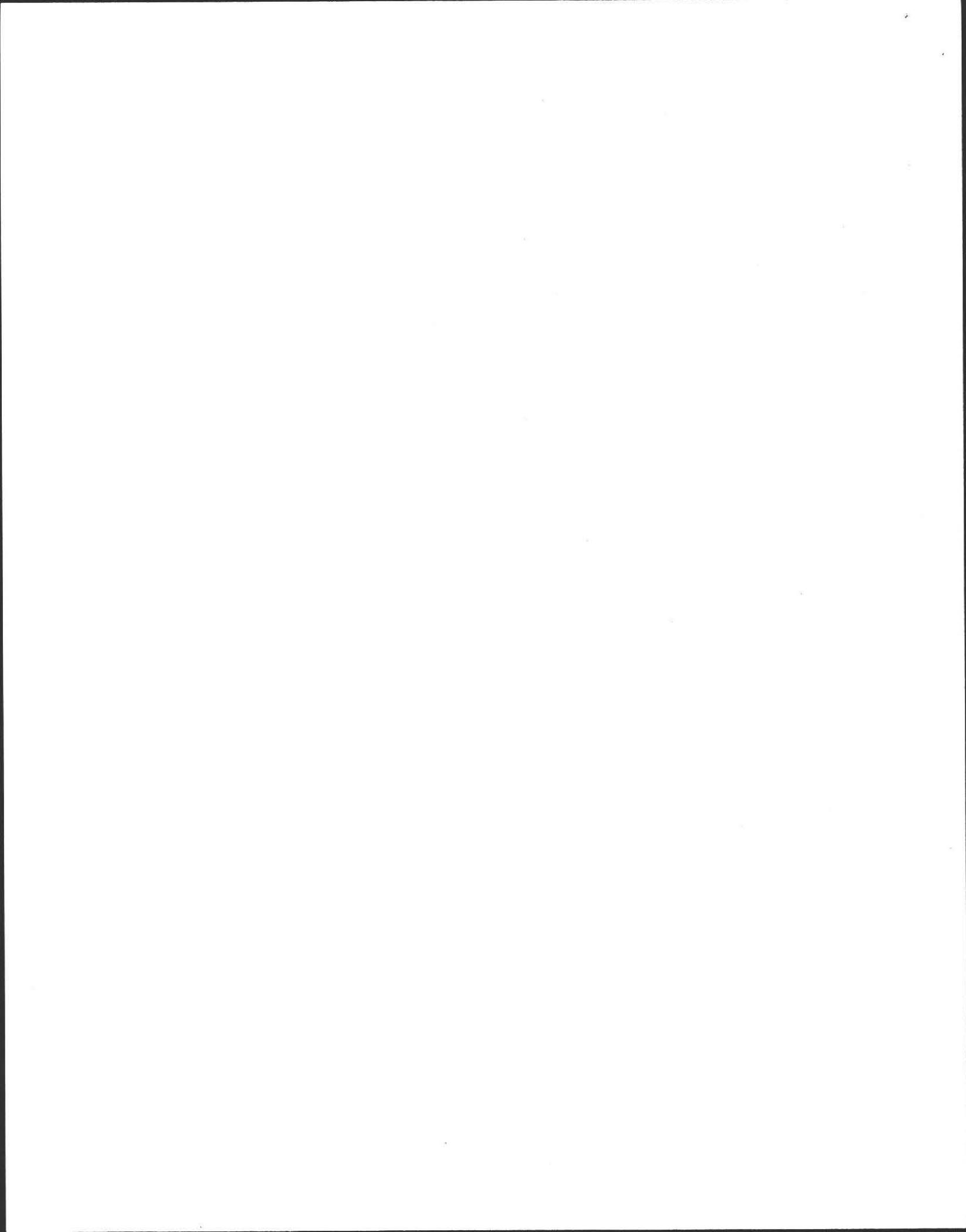
- Applicant:
 

<u>Edward J. and Alexis H. Connolly</u>		Name		E-Mail Address	
<u>381 Flat Hills Road</u>					
Mailing Address					
<u>Amherst</u>		<u>MA</u>	<u>01002</u>		
City/Town		State	Zip Code		
<u>(413) 256-8815</u>		Phone Number			
		Fax Number (if applicable)			
- Representative (if any):
 

<u>Amherst Civil Engineering</u>		Firm			
<u>Robert Stover</u>		Contact Name		<u>bobstover1@verizon.net</u>	
				E-Mail Address	
<u>P. O. Box 3312</u>					
Mailing Address					
<u>Amherst</u>		<u>MA</u>	<u>01004-3312</u>		
City/Town		State	Zip Code		
<u>(413) 256-3400</u>		Phone Number			
		<u>by arrangement</u>			
		Fax Number (if applicable)			

## B. Determinations

- I request the Amherst Conservation Commission make the following determination(s). Check any that apply:
  - a. whether the **area** depicted on plan(s) and/or map(s) referenced below is an area subject to jurisdiction of the Wetlands Protection Act.
  - b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced below are accurately delineated.
  - c. whether the **work** depicted on plan(s) referenced below is subject to the Wetlands Protection Act.
  - d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of any **municipal wetlands ordinance or bylaw** of:  
Amherst  
Name of Municipality
  - e. whether the following **scope of alternatives** is adequate for work in the Riverfront Area as depicted on referenced plan(s).  
does not apply





**WPA Form 1- Request for Determination of Applicability**  
Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

**C. Project Description**

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

371 Flat Hills Road	Amherst
Street Address	City/Town
Map 6B	17
Assessors Map/Plat Number	Parcel/Lot Number

b. Area Description (use additional paper, if necessary):

The area in questions is a shallow swale with a downhill gradient toward the south, southeast. It is vegetated with sensitive fern and red maples. Blue flags have been placed at the boundary of the vegetated wetland closest to the proposed work. This closest point is the beginning of the shallow swale which then flows away from the area of proposed work. At the point closest to the proposed work this resource area has a clear and distinct boundary.

c. Plan and/or Map Reference(s):

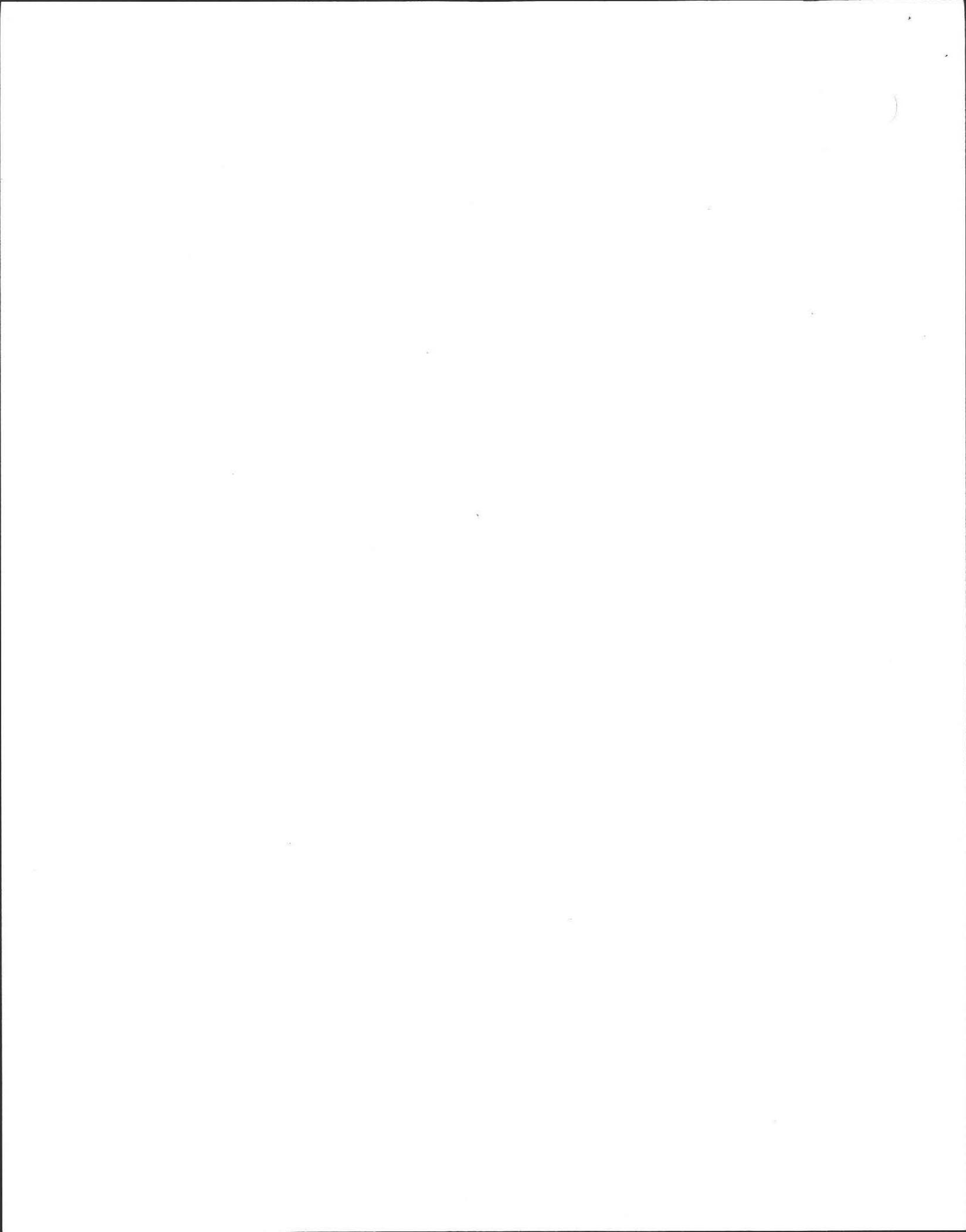
"Plan of Septic System Repair"	11-22-10
Title	Date
detail from USGS Shutesbury Quad	1990
Title	Date
Title	Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

Replace septic system because existing system functions poorly and requires frequent pumping. The work includes replacing the septic tank and soil absorption system and associated grading. An erosion barrier is proposed on the accompanying plan. At the closest point the leach bed is 81 ft. from the resource area. No work is proposed within 50 ft. of the resource area.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

371 Flat Hills  
Perk Test  
at this  
address  
APP - 7382  
Batch - 2343





# WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

## C. Project Description (cont.)

b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

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3. a. If this application is a Request for Determination of Scope of Alternatives for work in the Riverfront Area, indicate the one classification below that best describes the project.

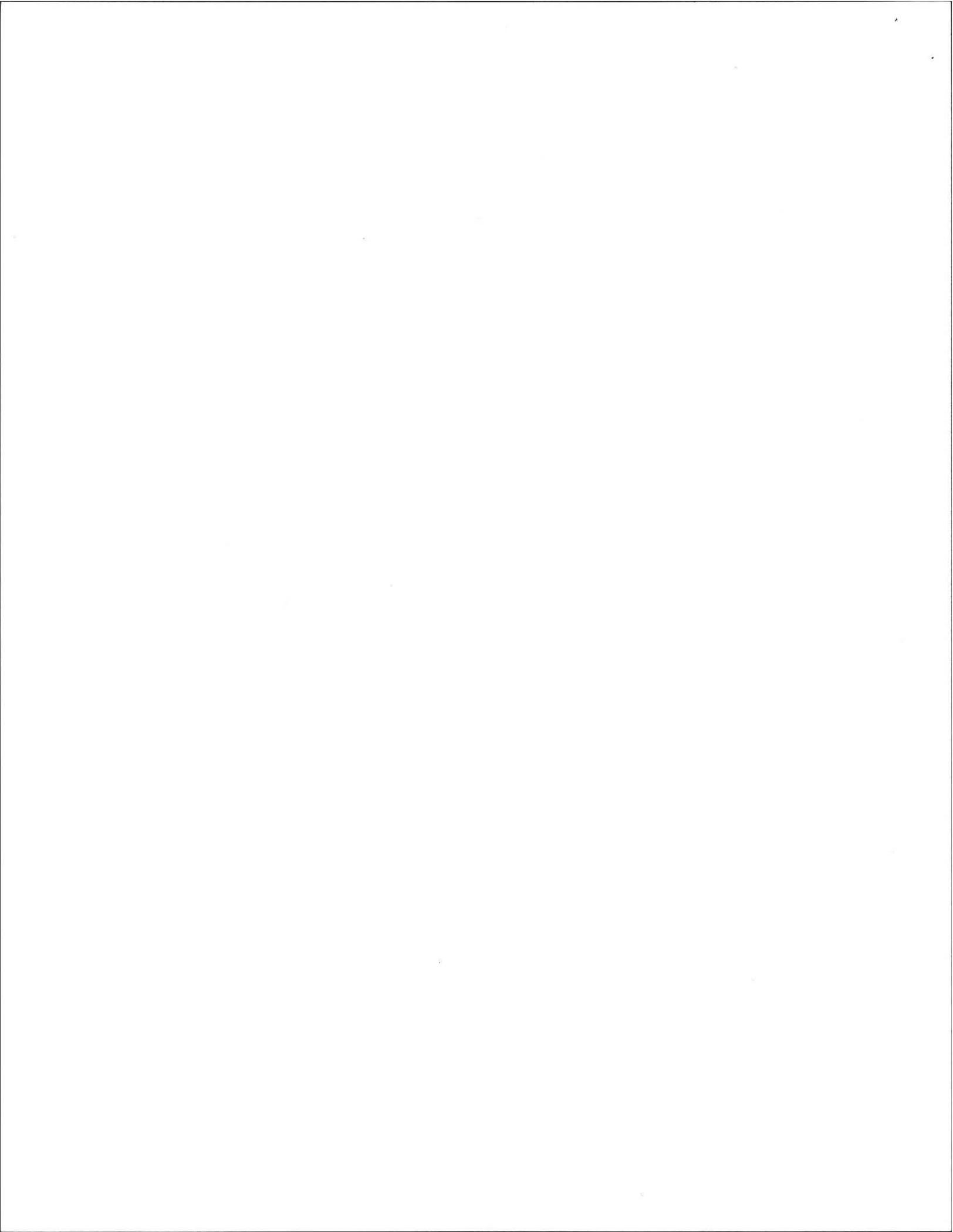
- Single family house on a lot recorded on or before 8/1/96
- Single family house on a lot recorded after 8/1/96
- Expansion of an existing structure on a lot recorded after 8/1/96
- Project, other than a single family house or public project, where the applicant owned the lot before 8/7/96
- New agriculture or aquaculture project
- Public project where funds were appropriated prior to 8/7/96
- Project on a lot shown on an approved, definitive subdivision plan where there is a recorded deed restriction limiting total alteration of the Riverfront Area for the entire subdivision
- Residential subdivision; institutional, industrial, or commercial project
- Municipal project
- District, county, state, or federal government project
- Project required to evaluate off-site alternatives in more than one municipality in an Environmental Impact Report under MEPA or in an alternatives analysis pursuant to an application for a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality Certification from the Department of Environmental Protection.

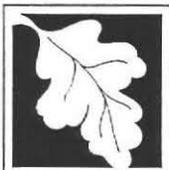
b. Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification above (use additional paper and/or attach appropriate documents, if necessary.)

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## WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

### D. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Request for Determination of Applicability and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge.

I further certify that the property owner, if different from the applicant, and the appropriate DEP Regional Office were sent a complete copy of this Request (including all appropriate documentation) simultaneously with the submittal of this Request to the Conservation Commission.

Failure by the applicant to send copies in a timely manner may result in dismissal of the Request for Determination of Applicability.

Name and address of the property owner:

Edward J. and Alexis H. Connolly

Name

381 Flat hills Road

Mailing Address

Amherst

City/Town

MA

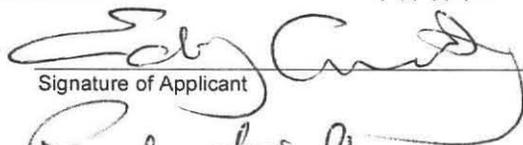
State

01002

Zip Code

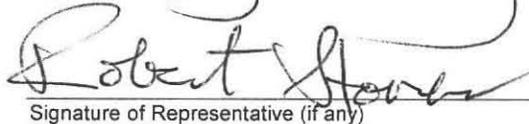
Signatures:

I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

  
Signature of Applicant

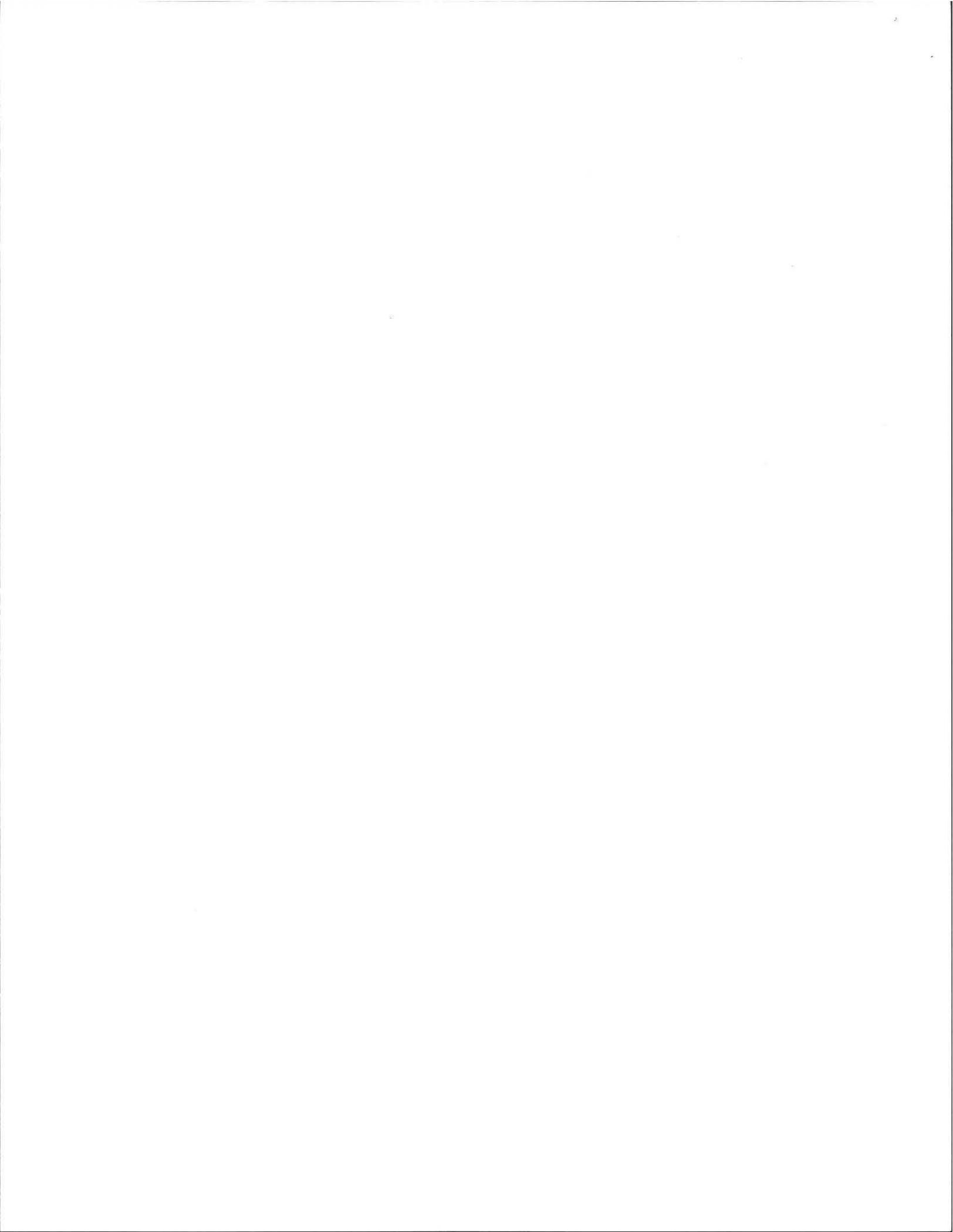
11-23-10

Date

  
Signature of Representative (if any)

11-23-10

Date



6B-9  
LABBE, RONALD B.  
NOLAN-LABBE, LINDA  
374 FLAT HILLS RD  
AMHERST, MA 01002

6B-1-5  
MACMULLEN EDITH  
344 FLAT HILLS RD  
AMHERST, MA 01002

6B-21  
MACMULLEN, EDITH  
344 FLAT HILLS RD  
AMHERST, MA 01002

6B-5  
MACMULLEN, EDITH  
344 FLAT HILLS RD  
AMHERST, MA 01002

6B-17  
CONNOLLY, EDWARD J & ALEXIS H  
381 FLAT HILLS RD  
AMHERST, MA 01002

6B-1  
LABBE, RONALD G & LINDA L  
374 FLAT HILLS RD  
AMHERST, MA 01002

6B-22  
CONNOLLY, EDWARD J & ALEXIS H  
381 FLAT HILLS RD  
AMHERST, MA 01002

6B-8  
LABBEE, RONALD G  
LABBEE, LINDA L  
374 FLAT HILLS RD  
AMHERST, MA 01002

6B-10  
SEEVE, LEONARD M & CARINE C  
SEEVE, CARINE C NOMINEE TRUST  
394 FLAT HILLS RD  
AMHERST, MA 01002

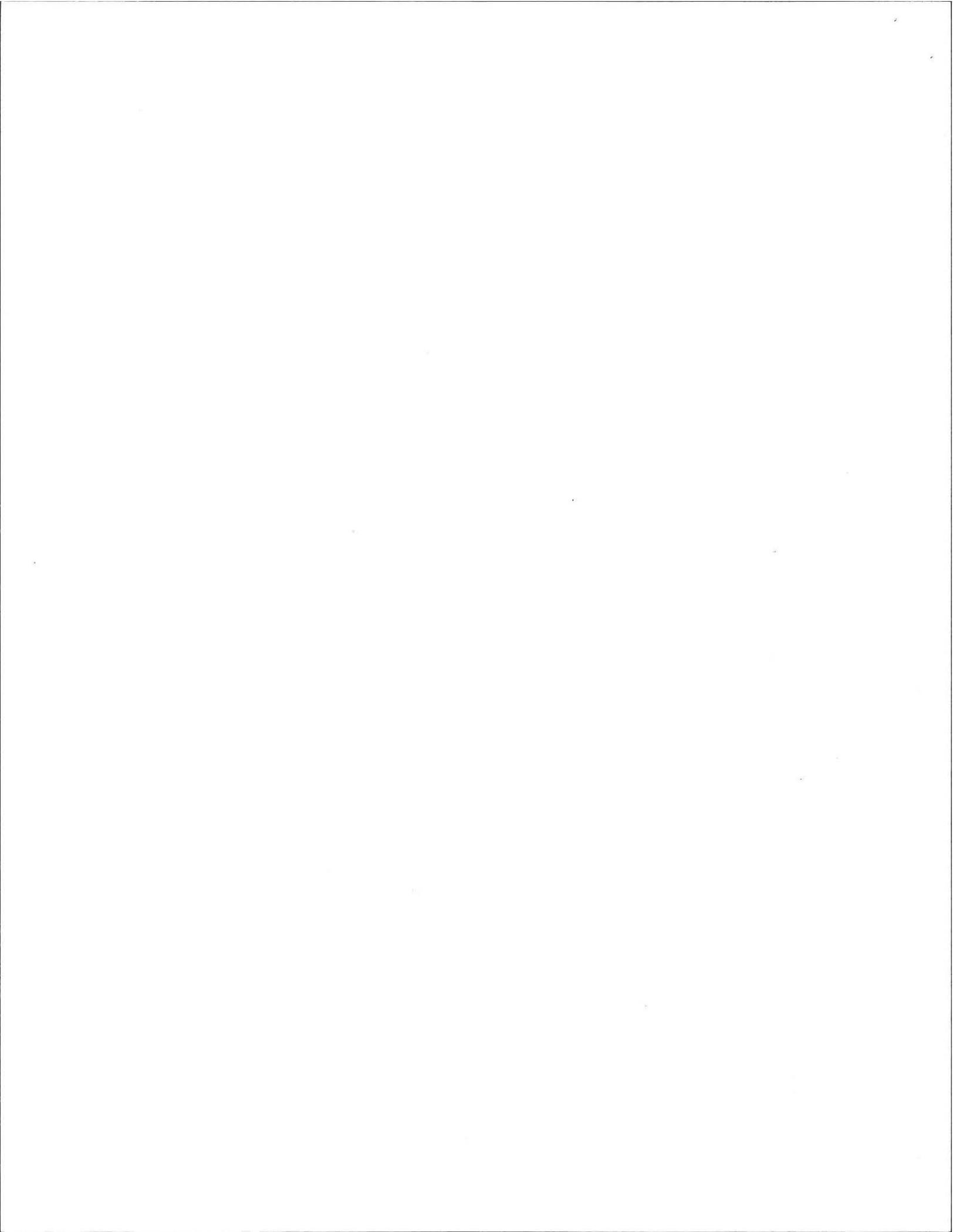
6B-24  
ELSON, MINOR B  
397 FLAT HILLS RD  
AMHERST, MA 01002

6B-11  
HIRSCH, AMY AUSLANDER TRUSTEE OF  
REV. TR  
400 FLAT HILLS RD  
AMHERST, MA 01002

6B-77  
WOOD, MARIANNE  
15 HIGH POINT DR  
AMHERST, MA 01002

6B-76  
PETERFREUND, ALAN & CATHERINE  
C/O CLEMENT, FREDRIKA P & WILLIA  
21 HIGH POINT DR  
AMHERST, MA 01002

6B-18  
TOWN OF AMHERST CONSERV COMM  
TOWN HALL  
AMHERST, MA 01002





- |  |   |
|--|---|
| <b>Property Map</b>  | <b>Landcover</b>  |
| <ul style="list-style-type: none"> <li>— Property Lines</li> <li>— Hydrographic Property</li> <li>— Right of Way Line</li> <li>— Town Boundary</li> <li>— Former Property Line</li> <li>— Subdivision Lot Line</li> <li>— Easements</li> </ul>   | <ul style="list-style-type: none"> <li>Brush and scrub vege</li> <li>Tree and forest vege</li> <li>Cultivated field</li> <li>Gravel pile</li> <li>Quarry</li> <li>Misc Impervious Surfa</li> <li>Arking</li> <li>Parking Paved</li> <li>Parking Unpaved</li> </ul>                |
| <b>Basemap</b>   | <b>Driveways</b>  |
| <ul style="list-style-type: none"> <li>--- Trails</li> <li>→ Rail Lines</li> </ul>   | <ul style="list-style-type: none"> <li>Driveway Paved</li> <li>Driveway Unpaved</li> <li>Sidewalks</li> </ul>   |
| <b>Structures</b>  | <b>Transportation</b>   |
| <ul style="list-style-type: none"> <li>Building</li> <li>Foundation or in const</li> <li>Outbuilding or Miscell</li> <li>Deck, Porch, Stairs or</li> <li>Mobile home, Trailer</li> <li>Swimming Pool</li> <li>Building Ruins</li> <li>Water storage tank</li> <li>Recreation Features</li> </ul> | <ul style="list-style-type: none"> <li>Paved street polygons</li> <li>Unpaved street polyg</li> <li>Idges</li> <li>Bridge decking and str</li> <li>Foot Bridge</li> <li>Rail Bridge</li> </ul>  |
| <b>Rivers and Streams</b>  | <b>Streets</b>  |
| <ul style="list-style-type: none"> <li>Streams</li> <li>Major Culverts</li> <li>Hydro Connector</li> <li>Headwalls, Floodwalls</li> </ul>  | <ul style="list-style-type: none"> <li>Local Roads</li> <li>Major Roads</li> <li>State Routes</li> <li>MHD Roads</li> <li>Limited Access Hwy</li> <li>Multi-lane Hwy, not II</li> <li>Other Numbered High</li> <li>Major Road, Collector</li> <li>Minor Road, Arterial</li> </ul> |
| <b>Water Bodies</b>  |   |
| <ul style="list-style-type: none"> <li>Dams</li> <li>Rivers, Ponds &amp; Rese</li> <li>Retention ponds/Flo</li> <li>Wetland</li> <li>Forested Wetland</li> </ul>   |   |

Horizontal Datum: MA Stateplane Coordinate System, Zone 4151, Datum NAD83, Feet  
 Vertical Datum: NAVD88, Feet

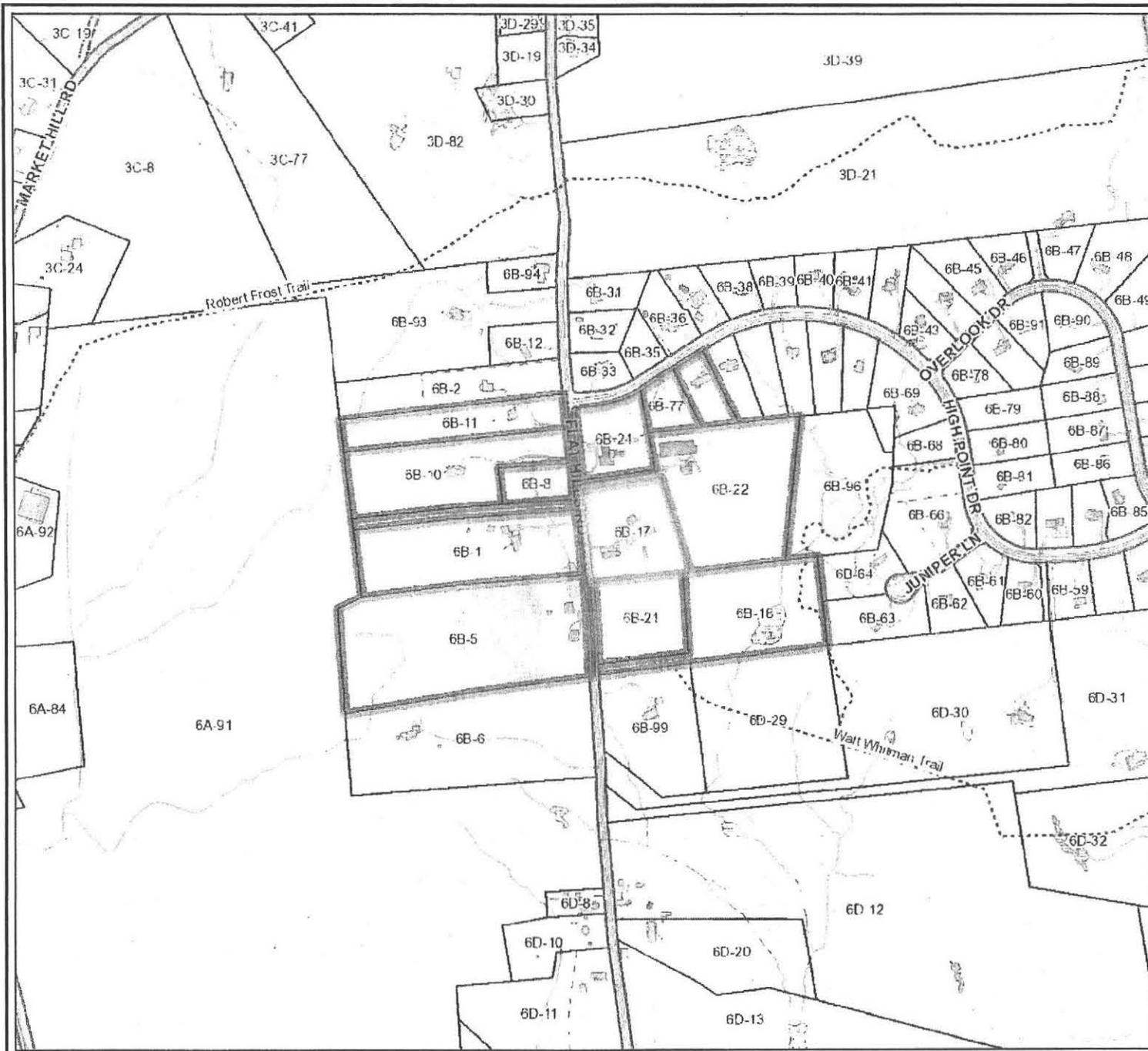
Planimetric & topographic basemap features compiled at 1"=40' scale from April, 2009 Aerial Photography. Parcels compiled to match the basemap; revisions are ongoing.

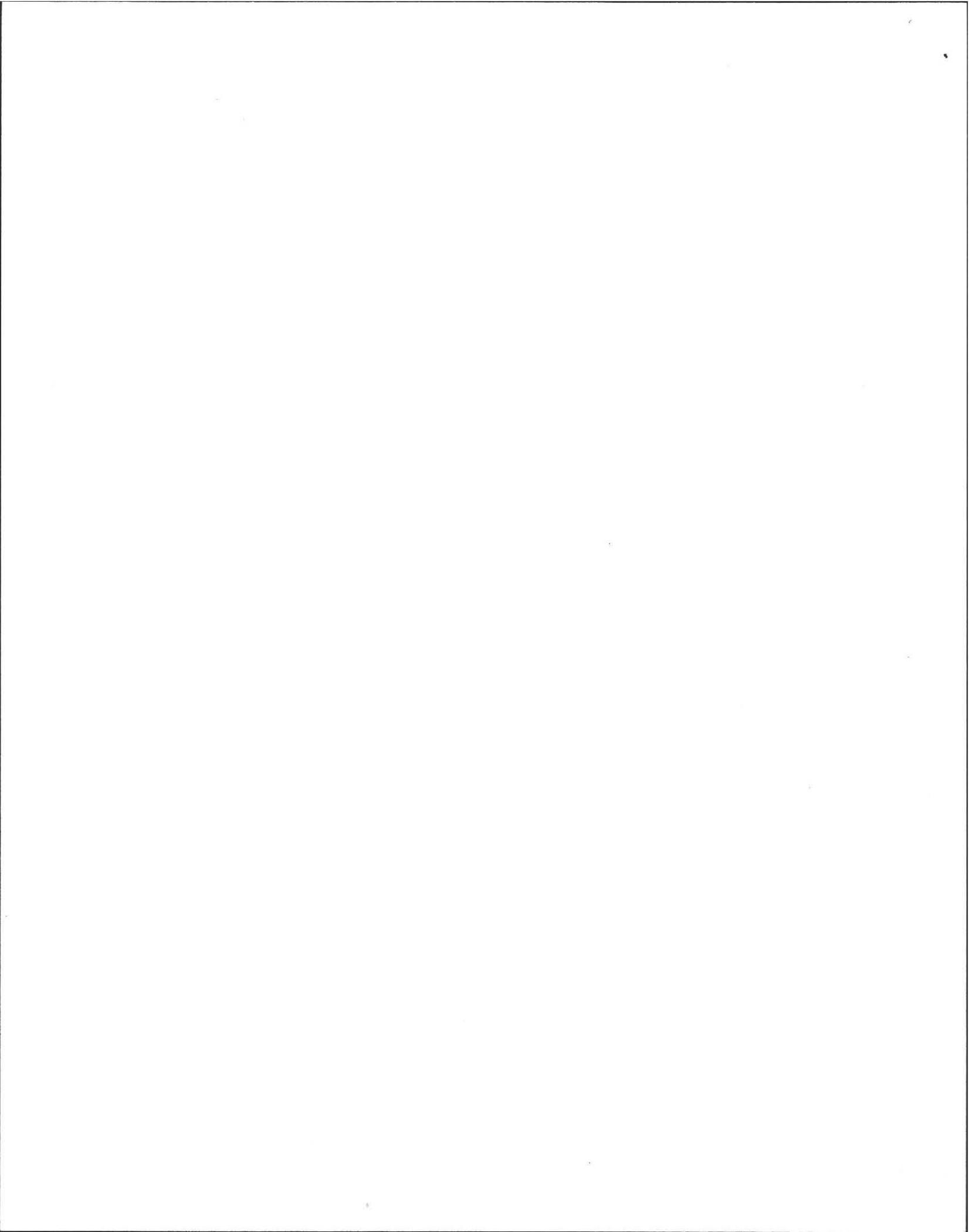
The information depicted on this map is for planning purposes only. It may not be adequate for legal boundary definition, regulatory interpretation, or property conveyance purposes. Utility structures and underground utility locations are approximate and require field verification.

THE TOWN OF AMHERST MAKES NO WARRANTIES, EXPRESSED OR IMPLIED, CONCERNING THE ACCURACY, COMPLETENESS, RELIABILITY, OR SUITABILITY OF THESE DATA. THE TOWN OF AMHERST DOES NOT ASSUME ANY LIABILITY ASSOCIATED WITH THE USE OR MISUSE OF THIS INFORMATION.

1" = 608 ft

Amherst GIS Viewer November 23, 2010





**ABUTTERS' NOTICE**  
**AMHERST CONSERVATION COMMISSION HEARING**

Landowner/Applicant: Edward J. and Alexis H. Connolly  
Address: 381 Flat Hills Road  
Amherst, MA 01002

Subject Property: 371 Flat Hills Rd., Amherst; Assessors Map 6B, Parcel 17

Date: November 24, 2010

To: Abutters of subject property.

Re: Septic system repair.

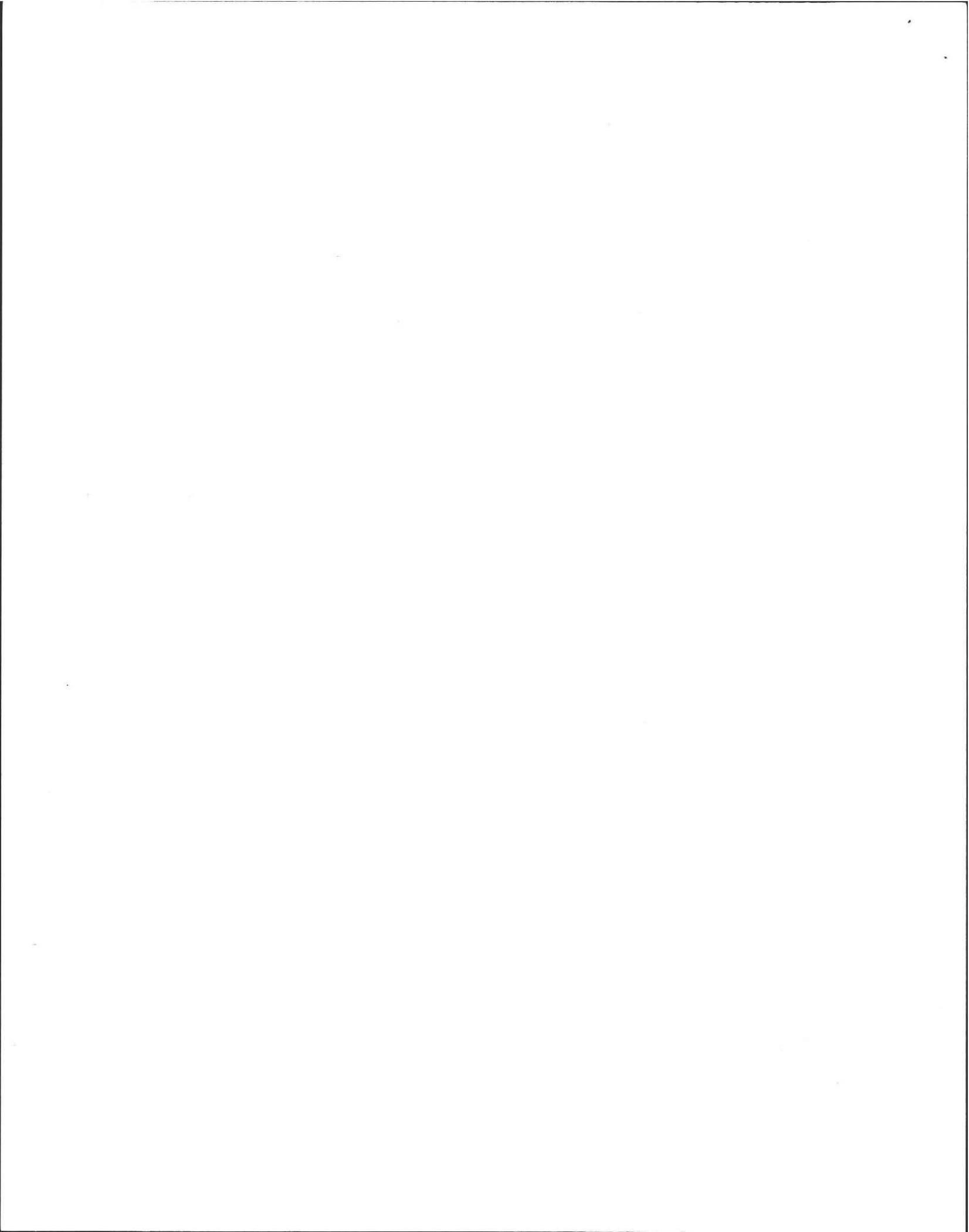
Please be advised that the applicants have filed a Request for a Determination of Applicability (RDA) with the Amherst Conservation Commission to construct a replacement septic system leaching bed within 100 ft. of a wetland on their property. The replacement septic system is to serve the existing house on the subject property.

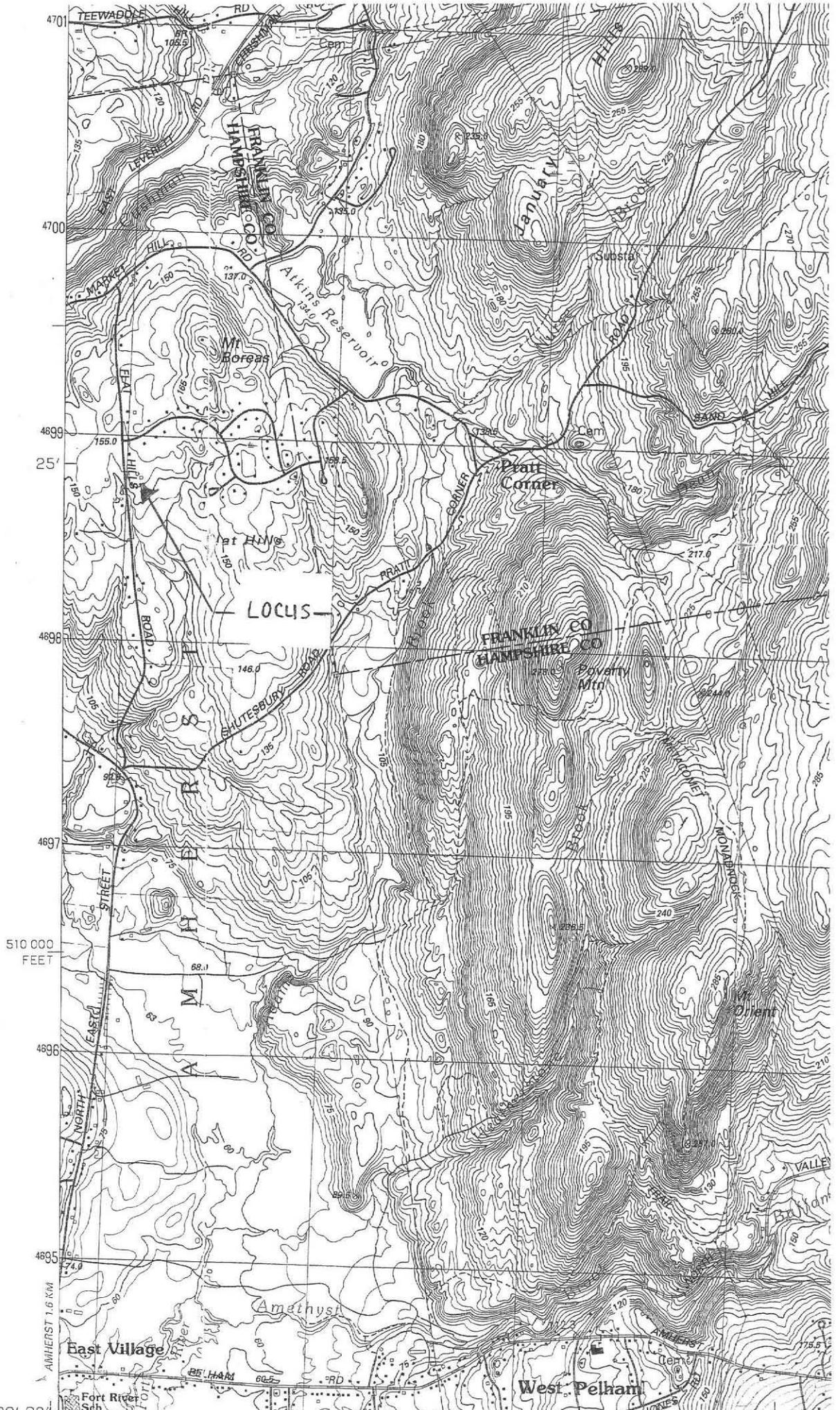
The Commission will consider this RDA at their regularly scheduled meeting on Wednesday, **December 8, 2010 at 7:45 PM.** The meeting will be held in the second floor meeting room in the Amherst Town Hall at 4 Boltwood Avenue, Amherst, MA.

Additional information regarding this RDA can be obtained from the Amherst Conservation Dept. by calling (413) 259-3045 during regular business hours.

This notice is for the abutters' information and places no obligations upon them.

Robert Stover  
Applicant's Representative





42° 22' 30"

510 000  
FEET

AMHERST 1.6 KM

East Village

Fort River Sch

Amethyst

West Pelham

LOCUS

FRANKLIN CO  
HAMPSHIRE CO

Poverty Pttn

Pratt Corner

Mt Boreas

Atkins Reservoir

TEEWADOCKS

4700

4699

4698

4697

4696

4695

330000

VALLEY

Pratt

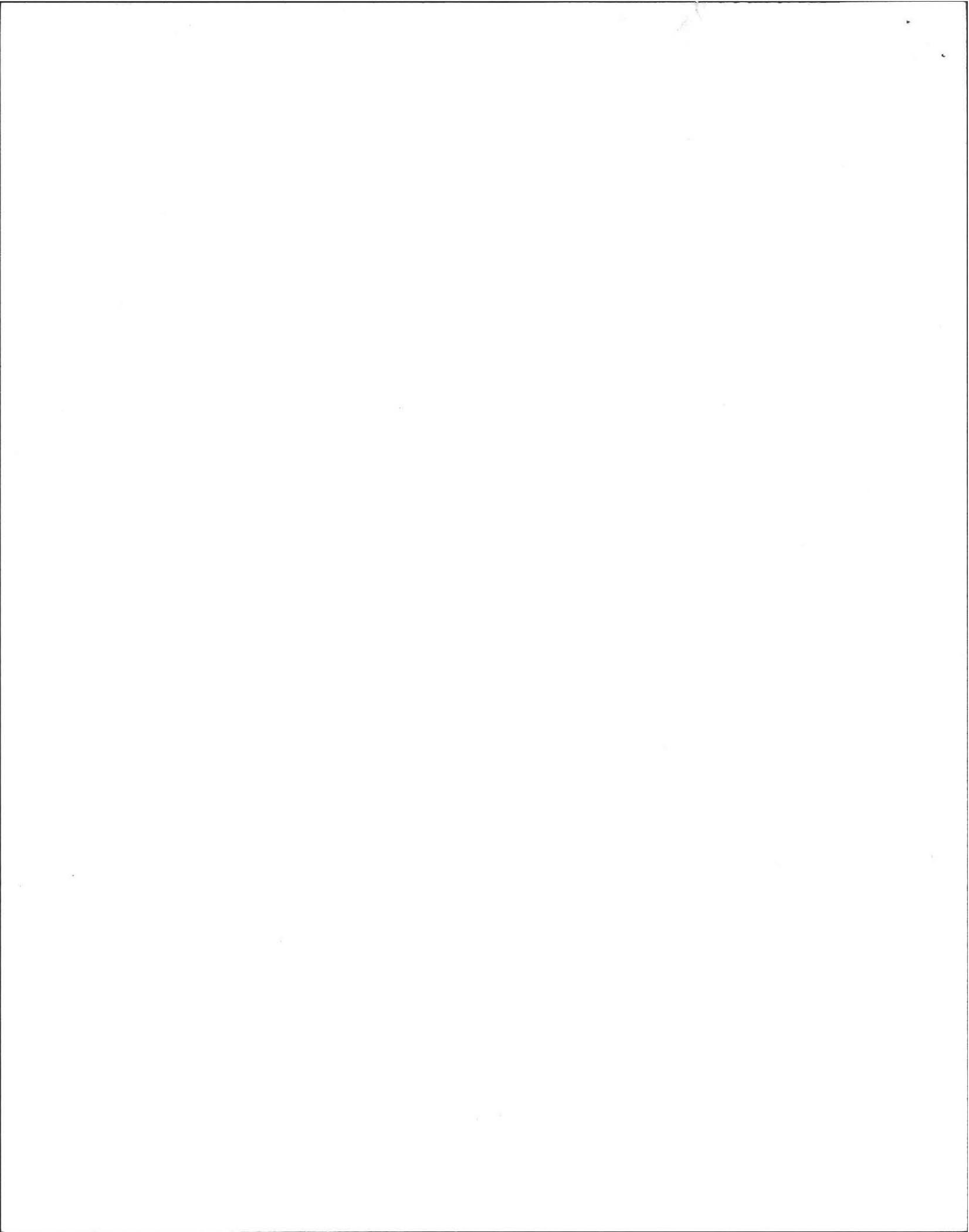
Pratt

Pratt

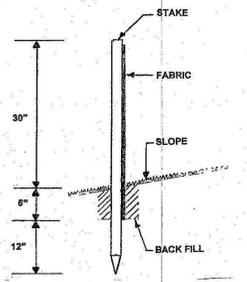
Pratt

Pratt

Pratt



- INSTALLATION OF FILTER FABRIC "SILT" FENCE**
- Install filter fabric fence to the locations shown on the plan view. Filter fabric consists of woven polypropylene, 30" wide and fastened to hardwood stakes with 3 one-inch (1") wide crown staples. Stakes shall be spaced 10' on center for the entire length of the filter fence. Stakes shall be driven a minimum 18" below natural grade.
  - The fabric shall be anchored by a trench dug on the upslope side of the stakes. The trench shall be at least 6" deep. The fabric shall be tied to the trench, which shall then be backfilled and compacted. This shall allow 6" of the filter fabric to be buried below grade. If the filter fabric is installed on a slope, the stakes shall be positioned on the down-slope side. If the filter fabric is installed on a level site, the stakes shall be installed to the outside of the work area.
  - Consolidation of all fences shall be completed by tightly overlapping the ends of the filter fabric a minimum of 12" or by overlapping the ends and securing the 2 stakes together tightly with plastic wire and/or steel balling wire.
  - Place maintenance: the filter fabric fence shall be inspected after every rainfall event and at least daily during prolonged rainfall. Any required repairs shall be made immediately. When sediment deposits reach approximately one-half the height of the fence, the sediment shall be removed and the fence restored.



**NOTE:** THERE ARE NO SURFACE WATER SUPPLIES OR GRAVEL PACKED PUBLIC WATER SUPPLY WELLS WITHIN 400' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TUBULAR WATER SUPPLY WELLS WITHIN 200' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 200' OF THE PROPOSED SYSTEM LOCATION OR WETLANDS BORDERING SURFACE WATER SUPPLIES OR TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 100' OF THE PROPOSED SYSTEM LOCATION. WETLAND RESOURCE AREAS AS SHOWN ON PLANVIEW.

**SOIL EVALUATION**

Soil Evaluator: Robert Stover  
 BOH Representative: Gary Courtemanche  
 Date of Evaluation: 10/20/2010

Ground elevation at soil evaluation test pit #1: 96.63'  
 Est. Seasonal High Ground Water Elev. 91.88'  
 Bedrock Elevation deeper than: 88.46'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 12"	Ap	FSL	10YR3/3	None	friable
12 - 24"	Bw	FSL	10YR4/6	None	loose, gravelly
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 4 - 5 % gravel and stones

Parent Material (Geologic): till  
 Standing Water in the Hole: none Weeping from Pit Face: none  
 Estimated Seasonal High Ground Water: 57"

Ground elevation at soil evaluation test pit #2: 98.00'  
 Est. Seasonal High Ground Water Elev. 91.25'  
 Bedrock Elevation deeper than: 87.83'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 24"	Fill and Ap	FSL	10YR3/3	None	friable, some stones
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 5% course

Parent Material (Geologic): till  
 Standing Water in the Hole: none Weeping from Pit Face: none  
 Estimated Seasonal High Ground Water: 57"

**DESIGN CRITERIA**

Design flow is for a 5-bedroom house without a garbage grinder

**DESIGN CALCULATION**

Design flow: 5-bedrooms, no garbage grinder: = 550 gpd.  
 Proposed septic tank: 1500 gallons.

Effluent Loading Rate: Percolation Rate = 20 minutes per inch  
 Class II soils.  
 Effluent loading rate = 0.53 gpd/sf.

Soil Absorption System: one leach bed.  
 45.10' long X 14.17' wide  
 5 rows each with 11 Infiltrator Quick4 low profile standard chambers for a total of 55 total chambers

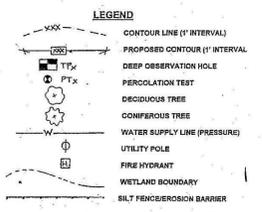
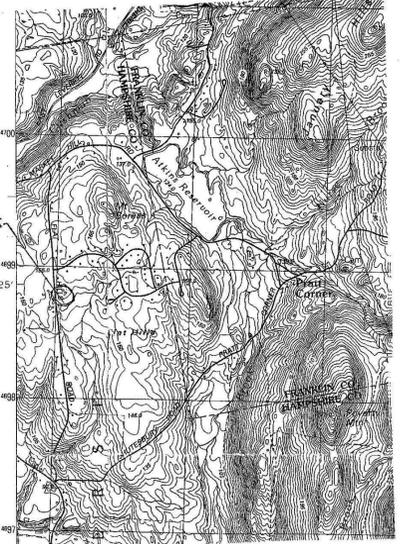
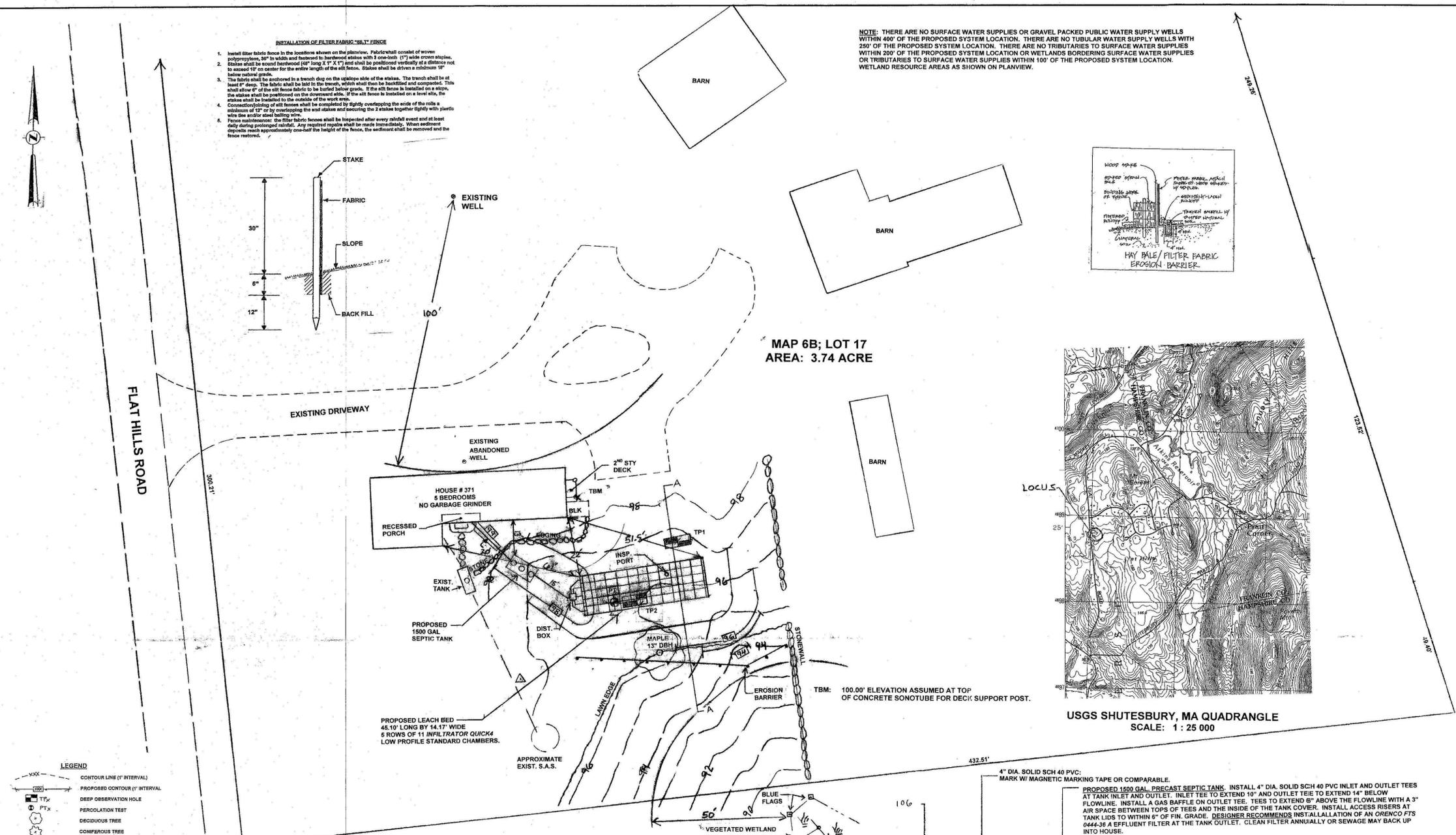
Each standard chamber (bed configuration): = 4.73 SF/LF.  
 55 chambers each 4.0 LF: = 220.0 LF.  
 Five sets of endcaps at 1.1 LF per set: = 5.5 LF.  
 225.5 LF X 4.73 SF/LF: = 1,208.51 SF.  
 Calculated Design Flow: 1,208.51 SF X 0.53 GPD/SF: = 640.51 gpd.  
 Total Required Design Flow: = 550.00 gpd (OK)

**GENERAL CONDITIONS**

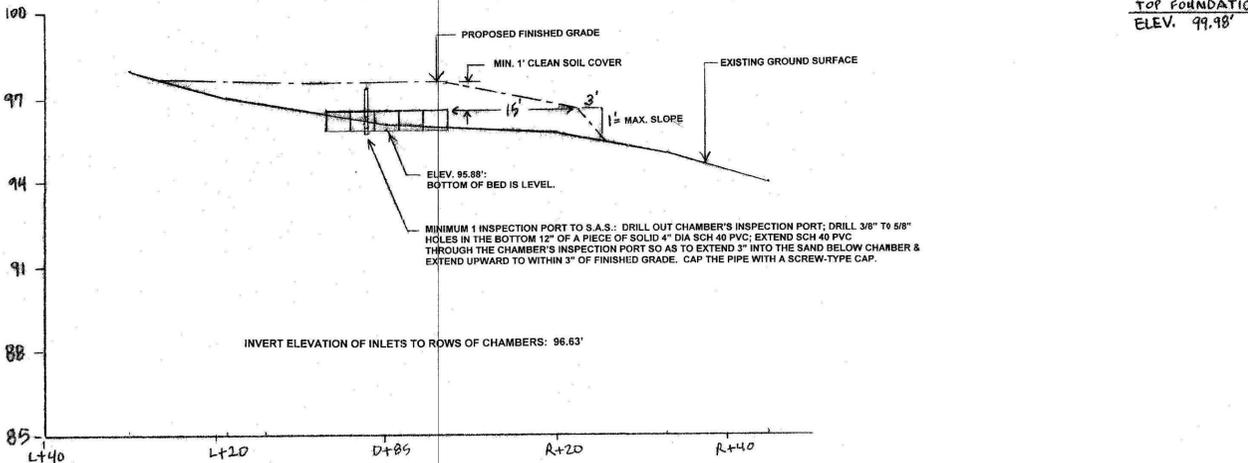
- This septic system repair plan is prepared in accordance with Title 5, 310 CMR 15.00. Construction shall conform to these regulations.
- Installer shall be certified by the manufacturer to install Infiltrator chambers.
- The installer shall inform the designer of any unusual conditions and shall not modify the plan without the written consent of the designer.
- All debris in the site area shall be removed and disposed of in accordance with the law.
- There is no guarantee expressed or implied to any user of a system installed pursuant to this plan. excavation is ready for inspection and again when the system installation is complete but not covered. The installer shall notify the designer when the finished grade is ready for inspection. Notification shall be 72 hours prior to the time of inspection.
- The septic tank shall be pumped and inspected as necessary and at least once every three years.

**CONSTRUCTION NOTES**

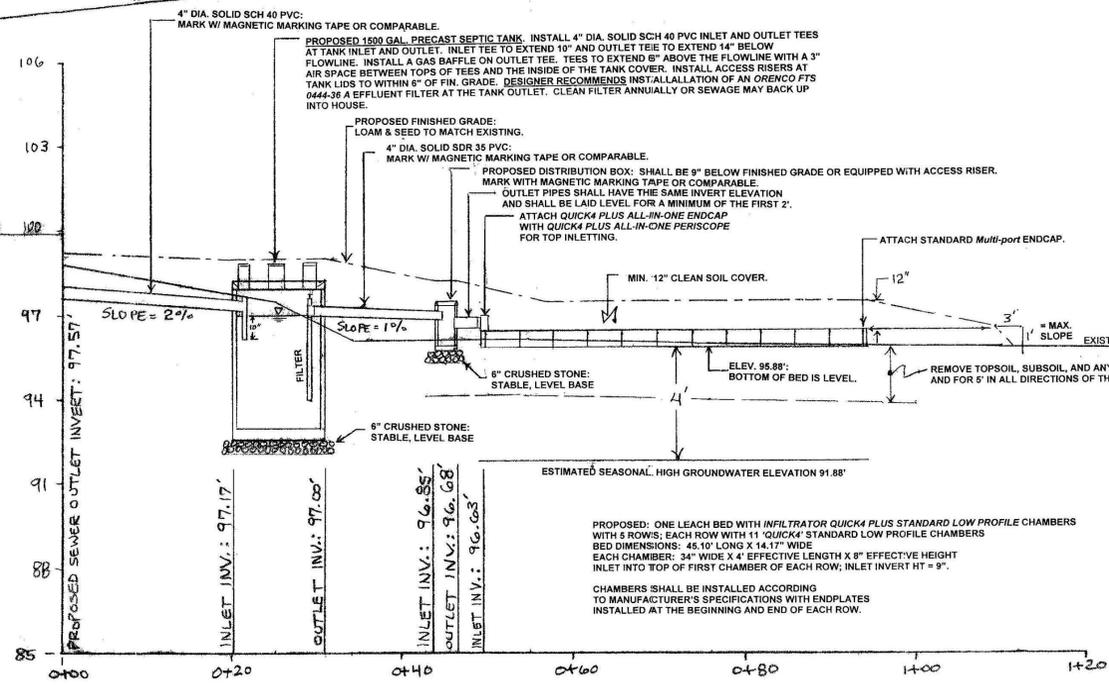
- Any topsoil, subsoil, old fill, or other impervious materials encountered during excavation shall be removed from the area of the soil absorption system, from five feet around the soil absorption system shall be a clean, granular sand and conform to the specifications of Title 5, 310 CMR 15.25(3).
- Pipes exiting the distribution box shall have the same invert elevation and be laid level for a minimum first two feet.
- The finished grade above the soil absorption system shall have a minimum two percent slope to the surface runoff away from the system.
- Disturbed areas shall be loamed, seeded and mulched until stable vegetation is established.



**PLANVIEW**  
 SCALE: 1" = 20'



**SECTION OF LEACH BED**  
 SCALE: H: 1" = 10' V: 1" = 3'

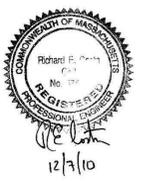


**PROFILE OF SYSTEM**  
 SCALE: H: 1" = 10' V: 1" = 3'

**PLAN OF SEPTIC SYSTEM REPAIR**  
 371 FLAT HILLS ROAD, AMHERST, MA 01002  
 ASSESSORS MAP 6B, LOT 17

**EDWARD J. AND ALEXIS H. CONNOLLY**  
 381 FLAT HILLS RD., AMHERST, MA 01002

SCALE: AS SHOWN APPROVED BY: DRAWN BY: RWS  
 DATE: 11/22/10 REVISIONS:  
**AMHERST CIVIL ENGINEERING**  
 RICHARD COSTA, P.E. / ROBERT STOVER  
 P. O. BOX 3312, AMHERST, MA 01004-3312 DRAWING NUMBER:  
 (413) 256-3400



- INSTALLATION OF FILTER FABRIC "SILT" FENCE**
1. Install filter fabric fence in the locations shown on the planview. Fabric shall consist of woven polypropylene, 36" in width and fastened to hardwood stakes with 3 one-inch (1") wide crown staples. Staples shall be spaced hardwood (4" long x 1/2" x 1/2") and shall be positioned vertically at a distance not to exceed 18" on center for the entire length of the silt fence. Staples shall be driven a minimum 18" below natural grade.
  2. The fabric shall be anchored in a trench dug on the up-slope side of the stakes. The trench shall be at least 6" deep. The fabric shall be laid in the trench, which shall then be backfilled and compacted. The silt fence shall be installed on a slope, the stakes shall be positioned on the down-slope side. If the silt fence is installed on a level site, the stakes shall be installed to the outside of the work area.
  3. Connections of silt fences shall be completed by slightly overlapping the ends of the rolls a minimum of 12" or by overlapping the ends and securing the 2 stakes together tightly with plants with the ends of the silt fence.
  4. Fence maintenance: The filter fabric fences shall be inspected after every rainfall event and at least daily during prolonged rainfall. Any required repairs shall be made immediately. When sediment deposits reach approximately one-half the height of the fence, the sediment shall be removed and the fence restored.

**NOTE: THERE ARE NO SURFACE WATER SUPPLIES OR GRAVEL PACKED PUBLIC WATER SUPPLY WELLS WITHIN 400' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TUBULAR WATER SUPPLY WELLS WITHIN 200' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 200' OF THE PROPOSED SYSTEM LOCATION OR WETLANDS BORDERING SURFACE WATER SUPPLIES OR TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 100' OF THE PROPOSED SYSTEM LOCATION. WETLAND RESOURCE AREAS AS SHOWN ON PLANVIEW.**

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Soil Evaluator: Robert Stover  
 BOH Representative: Gary Courtemanche  
 Date of Evaluation: 10/20/10

Ground elevation at soil evaluation test pit #1: 96.83'  
 Est. Seasonal High Ground Water Elev. 91.88'  
 Bedrock Elevation deeper than: 85.45'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 12"	Ap	FSL	10YR3/3	None	friable
12 - 24"	Bw	FLS	10YR4/6	None	loose, gravelly
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 4 - 5 % gravel and stones

Parent Material (Geologic): till  
 Standing Water in the Hole: none  
 Estimated Seasonal High Ground Water: 57"

Ground elevation at soil evaluation test pit #2: 96.00'  
 Est. Seasonal High Ground Water Elev. 91.25'  
 Bedrock Elevation deeper than: 87.83'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 24"	Fill and Ap	FSL	10YR3/3	None	friable, some stones
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 52 % coarse

Parent Material (Geologic): till  
 Standing Water in the Hole: none  
 Estimated Seasonal High Ground Water: 57"

**DESIGN CRITERIA**

Design flow is for a 5-bedroom house without a garbage grinder

**DESIGN CALCULATION**

Design flow: 5-bedrooms, no garbage grinder: = 550 gpd.  
 Proposed septic tank: 1500 gallons.

Effluent Loading Rate: Percolation Rate = 20 minutes per inch  
 Class II soils.  
 Effluent loading rate = 0.53 gpd/sf.

Soil Absorption System: one leach bed.  
 45.10' long X 14.17' wide  
 5 rows each with 11 Infiltrator Quick4 low profile standard chambers for a total of 55 total chambers

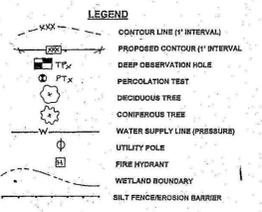
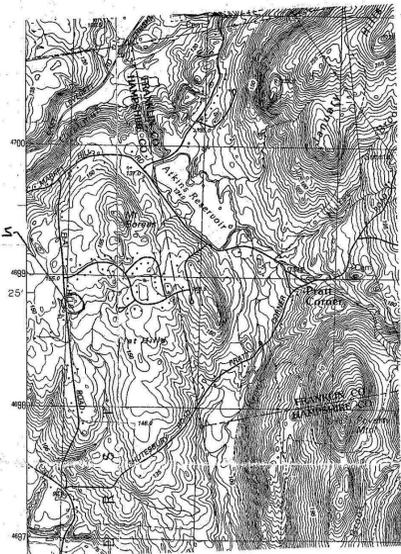
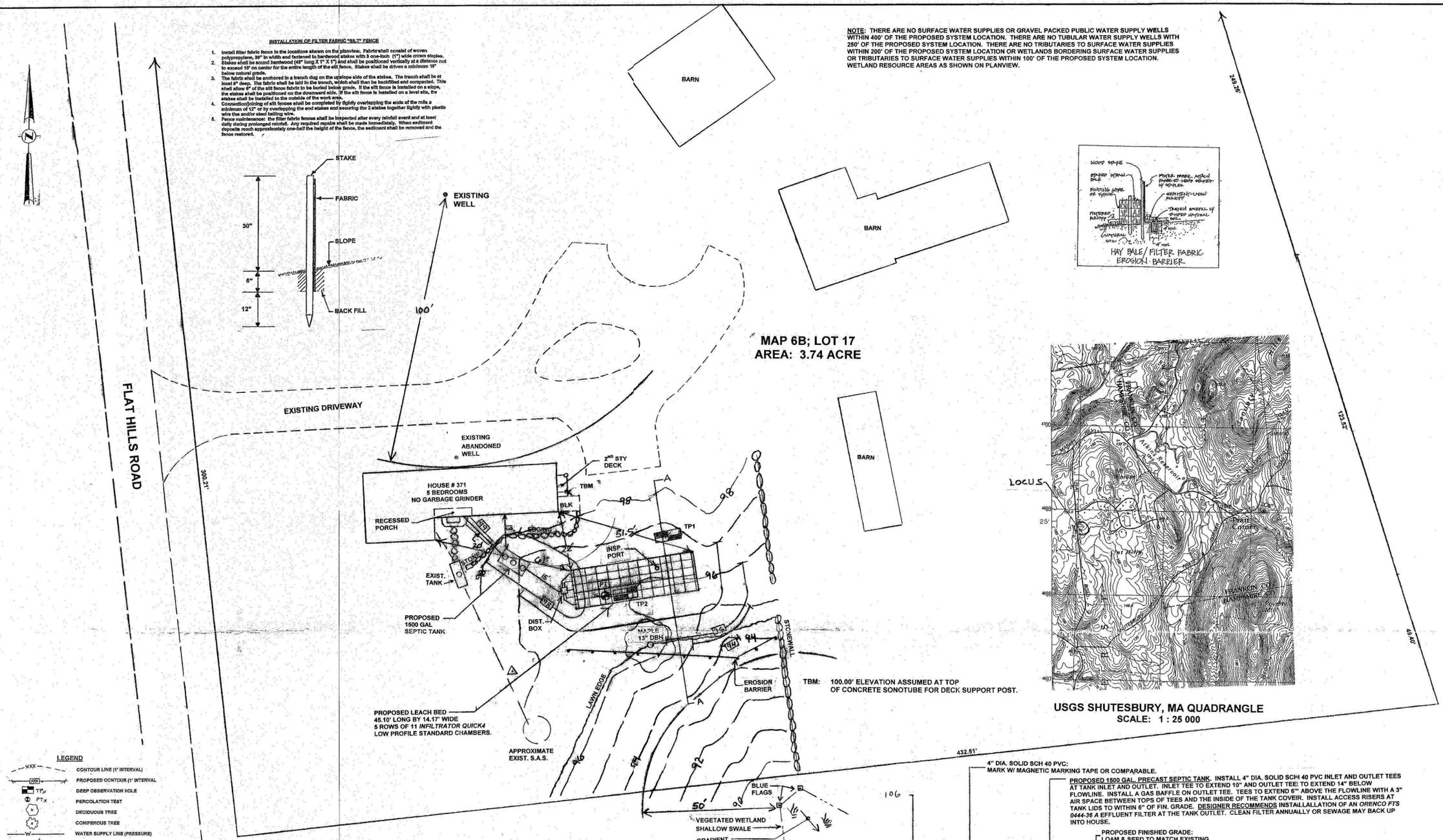
Each standard chamber (bed configuration): = 4.73 SF/LF.  
 55 chambers each 4.0 LF: = 220.0 LF.  
 Five sets of endcaps at 1.1 LF per set: = 5.5 LF.  
 225.5 LF X 4.73 SF/LF: = 1,208.51 SF.  
 Calculated Design Flow: 1,208.51 SF X 0.53 GPD/SF: = 640.51 gpd.  
 Total Required Design Flow: = 550.00 gpd (OK)

**GENERAL CONDITIONS**

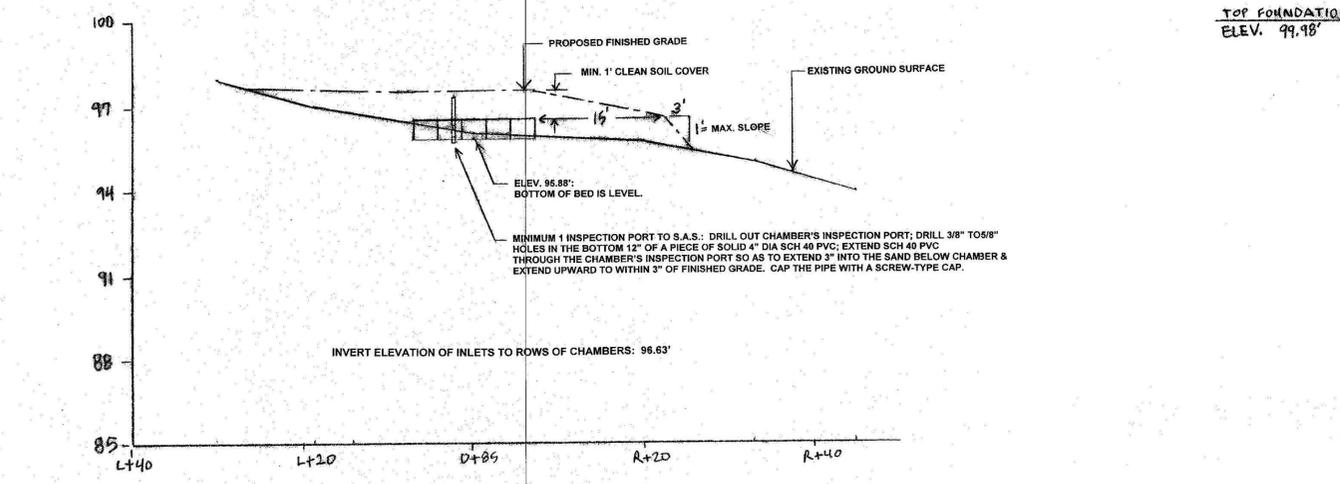
1. This septic system repair plan is prepared in accordance with Title 5, 310 CMR 15.00. Construction shall conform to these regulations.
2. Installer shall be certified by the manufacturer to install Infiltrator chambers.
3. The installer shall inform the designer of any unusual conditions and shall not modify the plan without the written consent of the designer.
4. All debris in the site area shall be removed and disposed of in accordance with the law.
5. There is no guarantee expressed or implied to any user of a system installed pursuant to this plan.
6. The installer shall notify the designer and the Board of Health Representative when the system excavation is ready for inspection and again when the system installation is complete but not covered. The installer shall notify the designer when the finished grade is ready for inspection. Notification shall be 72 hours prior to the time of inspection.
7. The septic tank shall be pumped and inspected as necessary and at least once every three years.

**CONSTRUCTION NOTES**

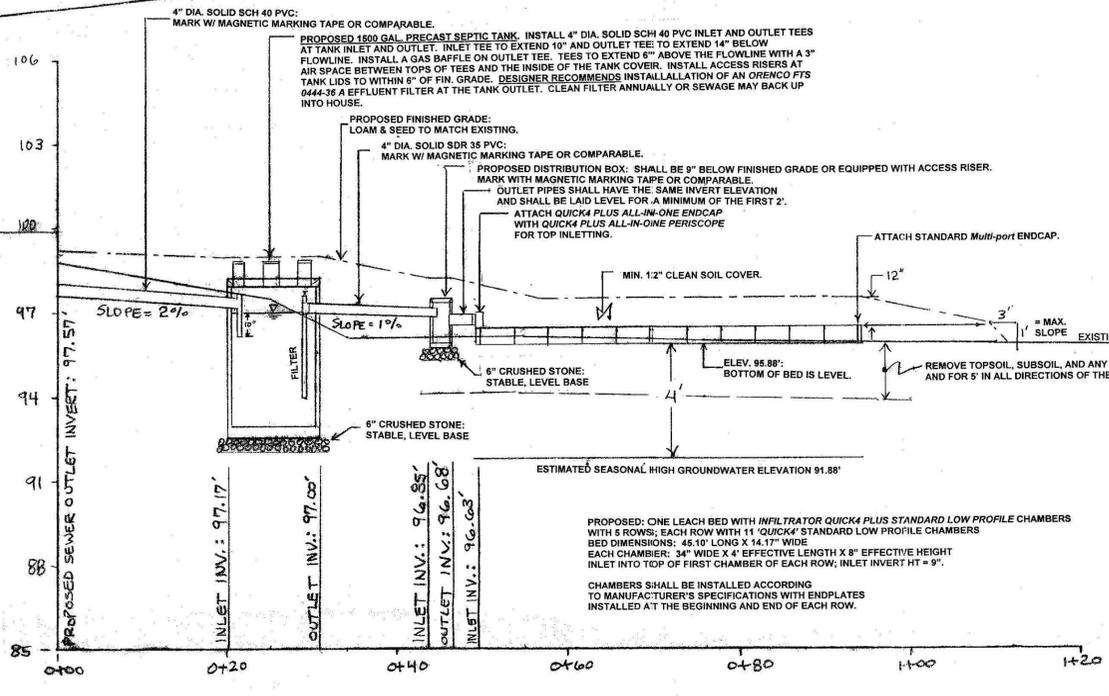
1. Any topsoil, subsoil, old fill, or other impervious materials encountered during excavation shall be removed from the area of the soil absorption system, from five feet around the soil absorption system and from wherever fill is to be placed. Any fill placed under or adjacent to the soil absorption system shall be a clean, granular sand and conform to the specifications of Title 5, 310 CMR 15.25(3).
2. Pipes exiting the distribution box shall have the same invert elevation and be laid level for a minimum of first two feet.
3. The finished grade above the soil absorption system shall have a minimum two percent slope to shed surface runoff away from the system.
4. Disturbed areas shall be loamed, seeded and mulched until stable vegetation is established.



**PLANVIEW**  
 SCALE: 1" = 20'



**SECTION OF LEACH BED**  
 SCALE: H: 1" = 10' V: 1" = 3'



**PROFILE OF SYSTEM**  
 SCALE: H: 1" = 10' V: 1" = 3'

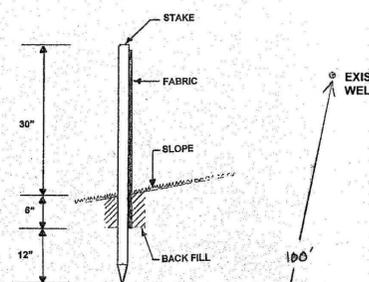


**PLAN OF SEPTIC SYSTEM REPAIR**  
 371 FLAT HILLS ROAD, AMHERST, MA 01002  
 ASSESSORS MAP 6B, LOT 17

**EDWARD J. AND ALEXIS H. CONNOLLY**  
 381 FLAT HILLS RD., AMHERST, MA 01002

SCALE: AS SHOWN  
 DATE: 11/22/10  
 APPROVED BY: [Signature]  
 DRAWN BY: RWS  
 REVISIONS: [None]  
**AMHERST CIVIL ENGINEERING**  
 RICHARD COSTA, P.E. / ROBERT STOVER  
 P. O. BOX 3312, AMHERST, MA 01004-3312  
 (413) 256-3400

- INSTALLATION OF FILTER FABRIC "BENT" FENCE**
1. Install filter fabric fence in the locations shown on the planview. Fabric shall consist of woven polypropylene, 36" in width and fastened to hardwood stakes with 3 one-inch (1") wide crown staples. Staples shall be spaced 18" on center and shall be positioned vertically at a distance not to exceed 10' on center for the entire length of the filter fabric. Staples shall be driven a minimum 1/2" into the ground.
  2. The filter fabric shall be anchored in a trench dug on the slope side of the stakes. The trench shall be at least 4" deep. The fabric shall be laid in the trench, which shall then be backfilled and compacted. This shall allow 4" of the filter fabric to be buried below grade. If the filter fabric is installed on a slope, the fabric shall be positioned on the down-slope side. If the filter fabric is installed on a level site, the fabric shall be installed to the outside of the work area.
  3. Compaction of all filter fabric shall be completed by gently overlapping the ends of the rolls a minimum of 12" or by overlapping the end stakes and securing the 2 stakes together tightly with plastic ties or similar fastening ties.
  4. Fabric maintenance: The filter fabric fence shall be inspected after every rainfall event and at least once during prolonged wetness. Any reached areas shall be made functional. When sediment deposits reach approximately one-half the height of the fence, the sediment shall be removed and the fence restored.



NOTE: THERE ARE NO SURFACE WATER SUPPLIES OR GRAVEL PACKED PUBLIC WATER SUPPLY WELLS WITHIN 400' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TUBULAR WATER SUPPLY WELLS WITHIN 250' OF THE PROPOSED SYSTEM LOCATION. THERE ARE NO TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 200' OF THE PROPOSED SYSTEM LOCATION OR WETLANDS BORDERING SURFACE WATER SUPPLIES OR TRIBUTARIES TO SURFACE WATER SUPPLIES WITHIN 100' OF THE PROPOSED SYSTEM LOCATION. WETLAND RESOURCE AREAS AS SHOWN ON PLANVIEW.

**SOIL EVALUATION**

Soil Evaluator: Robert Stover  
 BOH Representative: Gary Courtenanche  
 Date of Evaluation: 10/20/2016

Ground elevation at soil evaluation test pit #: 96.63'  
 Est. Seasonal High Ground Water Elev. 91.88'  
 Bedrock Elevation deeper than: 88.46'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 12"	Ap	FSL	10YR3/3	None	friable
12 - 24"	Bw	FSL	10YR4/6	None	loose, gravelly
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 4 - 5 % gravel and stones

Parent Material (Geologic): till  
 Standing Water in the Hole: none Weeping from Pit Face: none  
 Estimated Seasonal High Ground Water: 57"

Ground elevation at soil evaluation test pit #: 96.00'  
 Est. Seasonal High Ground Water Elev. 91.25'  
 Bedrock Elevation deeper than: 87.53'

Depth	Soil Horizon	Soil Texture	Soil Color	Mottling	Other
0 - 24"	Fill and Ap	FSL	10YR3/3	None	friable, some stones
24 - 98"	C	FSL	2.5Y5/4	@ 57" 7.5YR4/6	very firm 5 % course

Parent Material (Geologic): till  
 Standing Water in the Hole: none Weeping from Pit Face: none  
 Estimated Seasonal High Ground Water: 57"

**DESIGN CRITERIA**

Design flow is for a 5-bedroom house without a garbage grinder

**DESIGN CALCULATION**

Design flow: 5-bedrooms, no garbage grinder: = 550 gpd.  
 Proposed septic tank: 1500 gallons.

Effluent Loading Rate: Percolation Rate = 20 minutes per inch Class II soils.  
 Effluent loading rate = 0.53 gpd/sf.

Soil Absorption System: one leach bed.  
 45.10' long X 14.17 wide  
 5 rows each with 11 Infiltrator Quick4 low profile standard chambers for a total of 55 total chambers

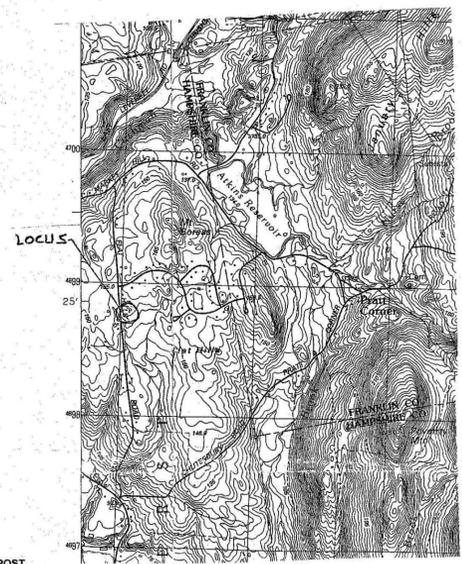
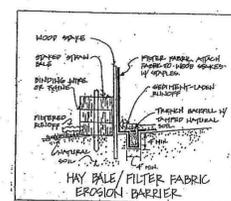
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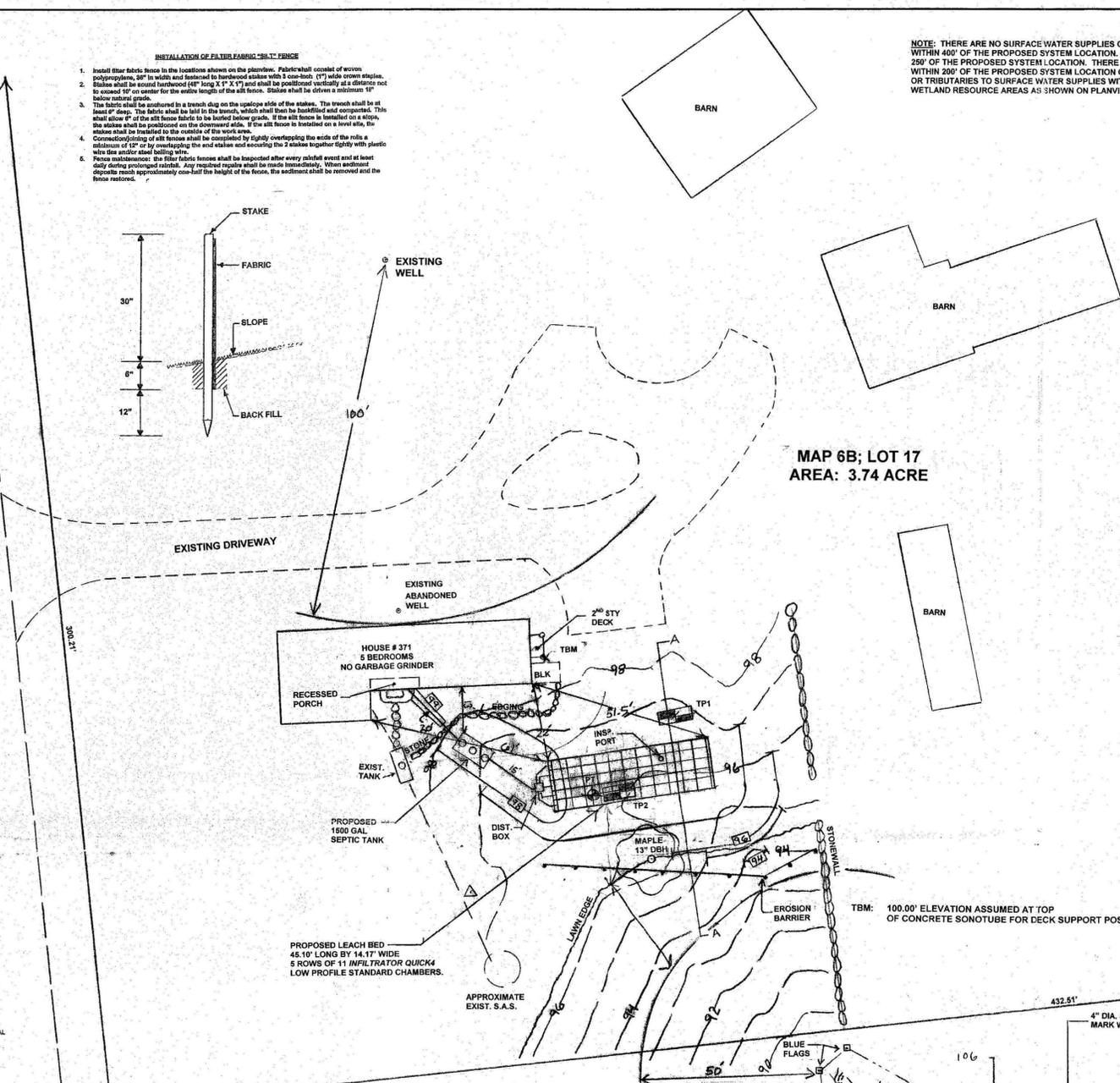
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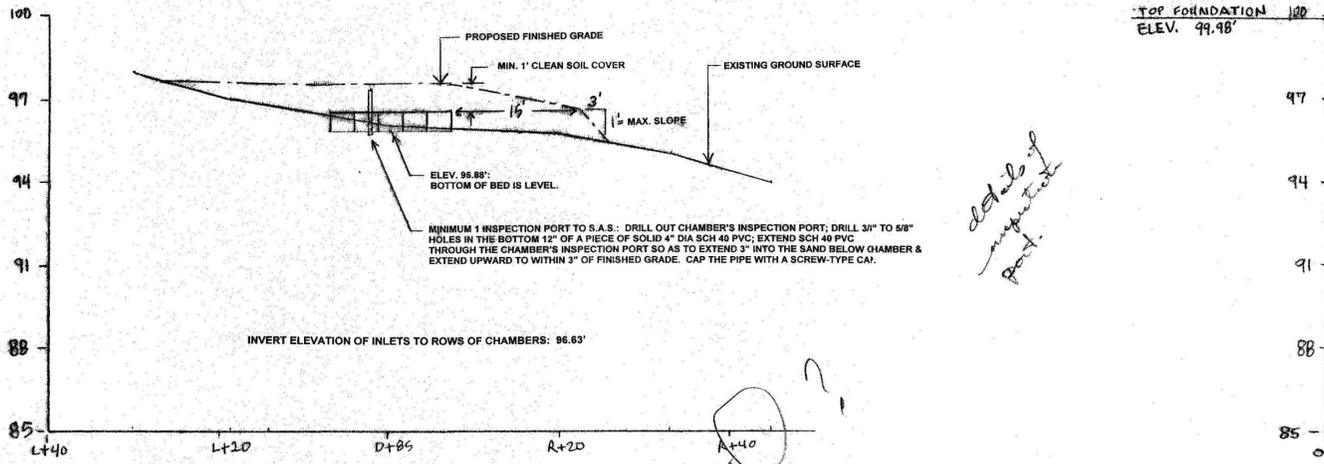


MAP 6B; LOT 17  
 AREA: 3.74 ACRE

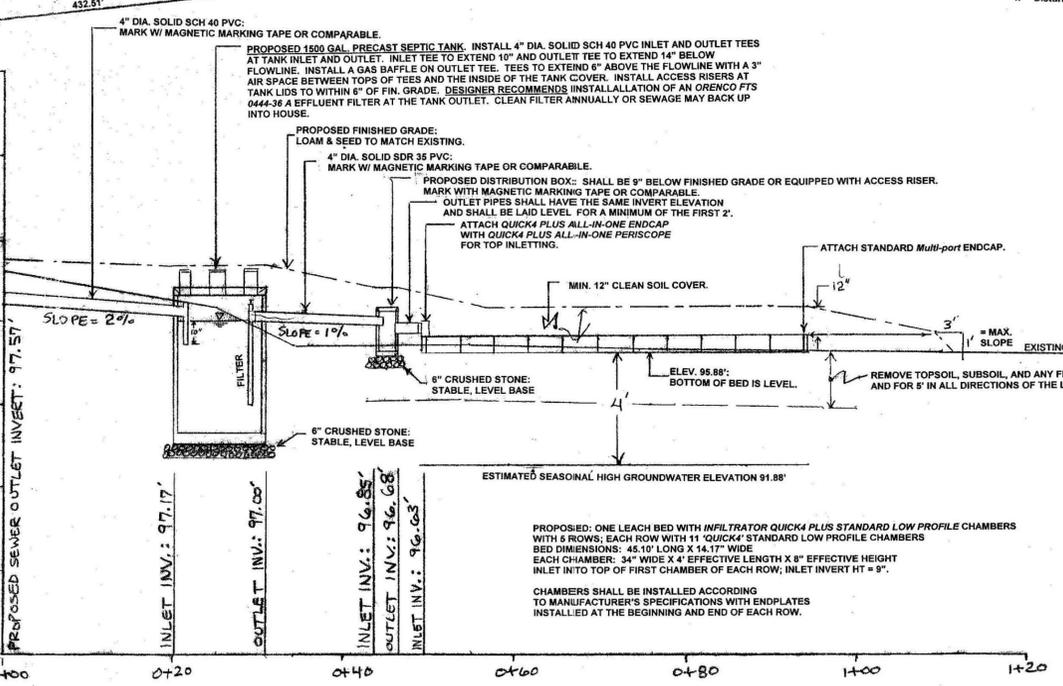


**PLANVIEW**  
 SCALE: 1" = 20'

- LEGEND**
- CONTOUR LINE (1' INTERVAL)
  - - - PROPOSED CONTOUR (1' INTERVAL)
  - DEEP OBSERVATION HOLE
  - PERCOLATION TEST
  - DECIDUOUS TREE
  - CONIFEROUS TREE
  - WATER SUPPLY LINE (PRESSURE)
  - UTILITY POLE
  - FIRE HYDRANT
  - WETLAND BOUNDARY
  - SILT FENCE/EROSION BARRIER



**SECTION OF LEACH BED**  
 SCALE: H: 1" = 10' V: 1" = 3'



**PROFILE OF SYSTEM**  
 SCALE: H: 1" = 10' V: 1" = 3'

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SCALE: AS SHOWN APPROVED BY: DRAWN BY: RWS  
 DATE: 11/22/10 REVISIONS:

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