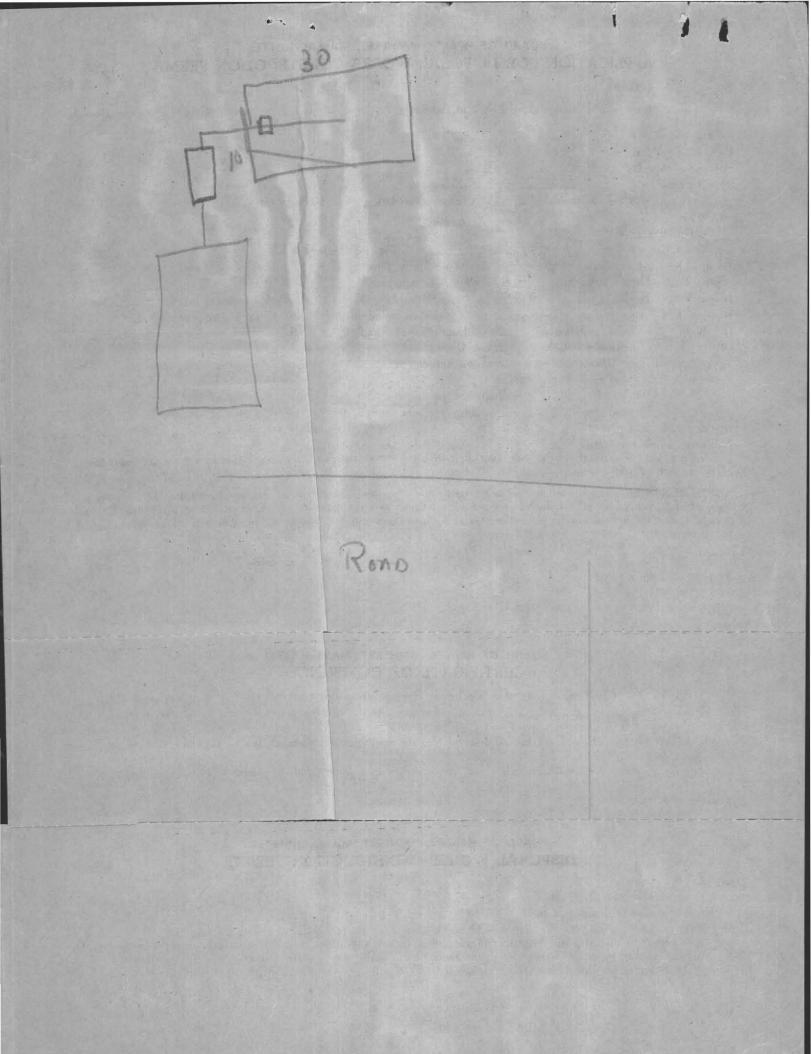
BOARD OF HEALTH, AMHERST, MASSACHUSETTS
APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

68-20

	MSTRUCTION PERIVIT
No. 68-20 Date Dec. 3, 1969 Fee 3.00 Date Rec'	d. 12-3-69 By CO
Application is hereby made for a permit to Construct (X) or I	tepair () an Individual Sewage Disposal
System at: Location—Address Next to 234 Henry St.	
Owner Clayton Pratt	Address 234 Henry St.
Contractor Dwelling Dimensions 26 * x 38	Sime Lat Almost acre
Dwelling—No. of Bedrooms Expansion Attic (19)	Carbago Crinder (NO)
Other No. of persons	_ Silowers ()
Town Water? Type of Wel	
Design Flow gallons per person per day. Total daily flow	gallons
Septic Tank—Liquid capacity gallons Dimensions: L	WD
Disposal Trench—No. 2 Width 2 Total Length _/	Total leaching area 200 sq. ft.
Disposal Bed—No Diameter 10 x 30 Depth below inlet _	Total leaching area 300 sq. ft.
Dry Well—No Diameter Depth below inlet	Dimensions: x x
Other: Distribution box () No Dosing tank ()	
(Depth of Soil Line Below finished grade at foundation Percolation Test Results Performed by minutes per inch)
Percolation Test Results Performed by	Date 12-3-67
100 110 1 minutes per anon	Deput of Test III
Test Pit No. 2minutes per inch	Depth of Test Pit
Description of Soil COARSE GRAVEL Depth to Gr	our Water 1212
Will disposal area be filled? A/D Cut down?	
(On reverse side or separate sheet, show plot plan with building. Include	le imensions, distances from all boundaries.
Show location of wells, streams, ledge, large trees, etc.)	
AGREEMENT: The undersigned agrees to construct the aforedescribed	irividual sewage disposal system in accord
ance with the provisions of Article XI of the Sanitary Code and regulat	ior of the Amherst Board of Health The un
dersigned further agrees not to place the system in operation until a C	Cerficate of Compliance has been issued by this
board of health.	to 8 10 14 123.10
ma de le	Oner or builder date
11 Collaboration	
Application Approved by	12-3-69
Application Disapproved for the following reasons:	date
Application Disapproved for the following reasons.	
BOARD OF HEALTH, AMHERST, MAS	SCHUSETTS
CERTIFICATE OF COMPI	INCE
THIS IS TO CEPTIEV That the individual Sawage Dienocel	
THIS IS TO CERTIFY, That the individual Sewage Disposal	stem installed () or repaired () by
athas been const	stem installed () or repaired () by
at has been const	stem installed () or repaired () by red in accordance with the provisions of
at has been const	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No.
at has been const	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No.
at has been const INSTALLER Article XI of the State Sanitary Code as described in the application	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No.
at has been const	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No.
Article XI of the State Sanitary Code as described in the application dated The issuance of this certificate shall not be construed as a guara	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No.
Article XI of the State Sanitary Code as described in the application dated The issuance of this certificate shall not be construed as a guara DATE DATE	stem installed () or repaired () by red in accordance with the provisions of Disposal Works Construction Permit No. he that the system will function satisfactorily. Inspector
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HUNTLEY

ALMER HUNTLEY, JR. & ASSOCIATES, INC. SURVEYORS · ENGINEERS · LANDSCAPE ARCHITECTS

January 26, 1999

RECEIVED JAN 2 7 1900

Amherst Health Department Bangs Community Center 70 Boltwood Avenue Amherst, MA 01002

RE: Installation of the Repair System

Marie H. Pratt

228 Henry Street, Amherst MA

Huntley No. 98-108

Dear Board of Health:

Based on the inspections performed by our office during the installation of the repair system for Marie H. Pratt at 228 Henry Street, Amherst MA. The system appears to have been constructed conforming to the Title V, Sanitary Code requirements.

We have enclosed the Certificate of Compliance and request that the Board issue their certificate. Thank you for your attention to this matter. Please find enclosed one (1) copy of the record plans and the certificate. Should you have any questions please do not hesitate to contact our office.

Very truly yours,

ALMER HUNTLEY, JR. & ASSOCIATES, INC.

Rebecca Sherer, P.E.

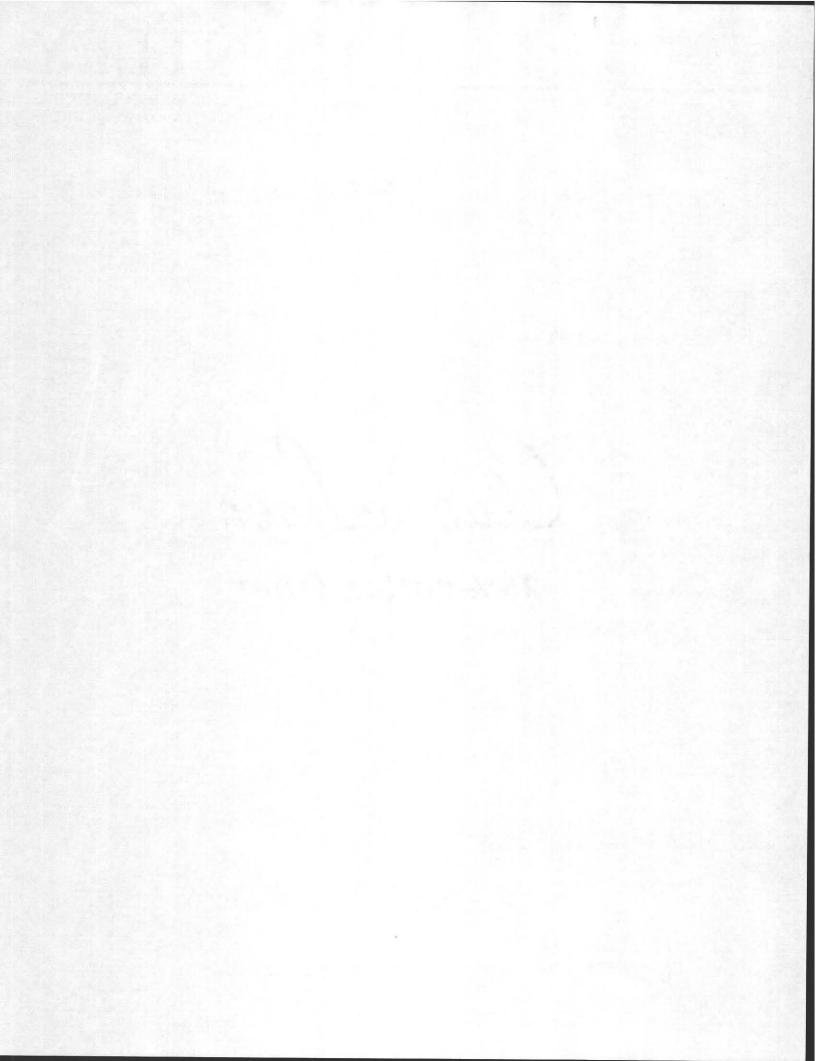
Project Manager

RLS: cjm

cc: Marie H. Pratt

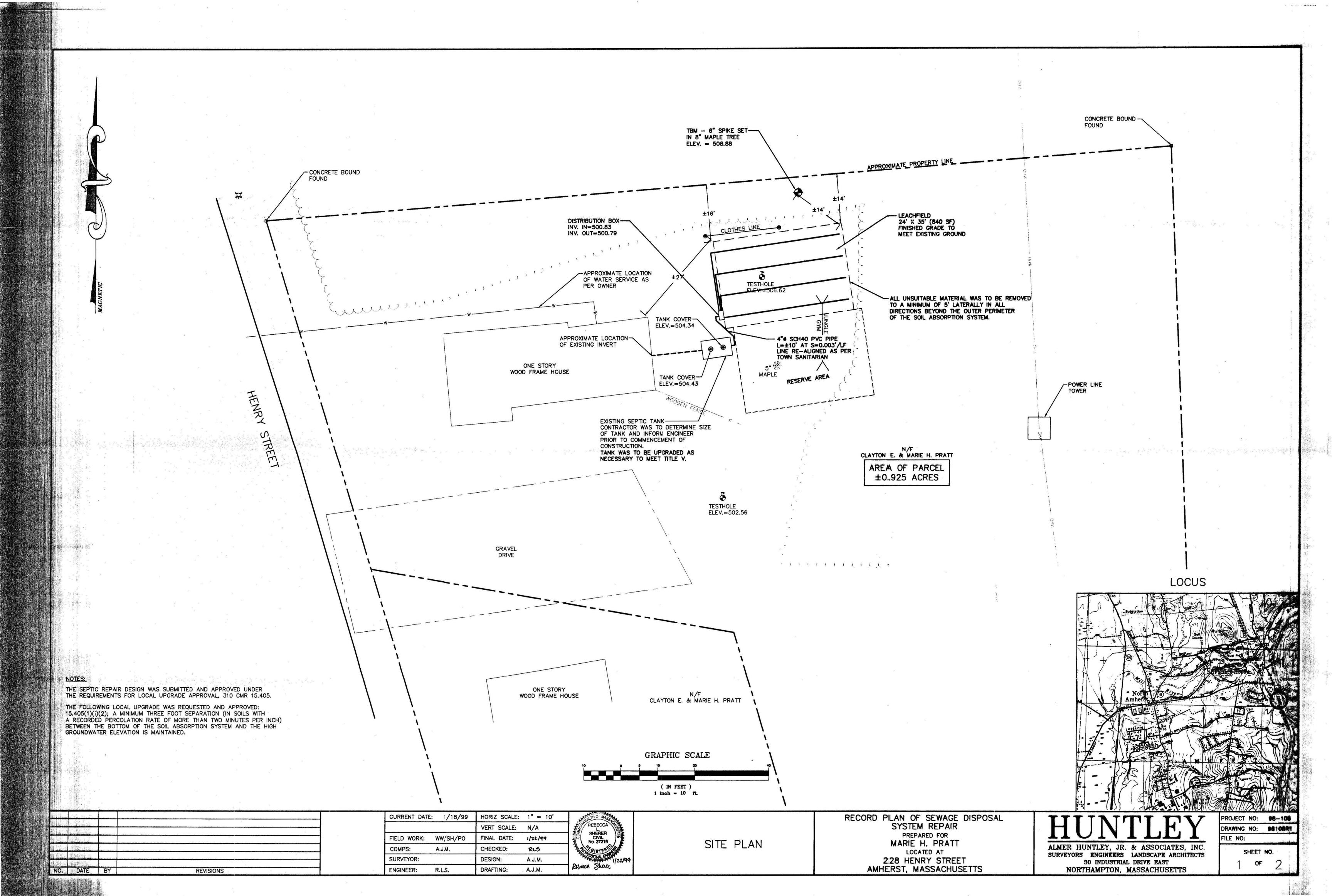
Enclosure

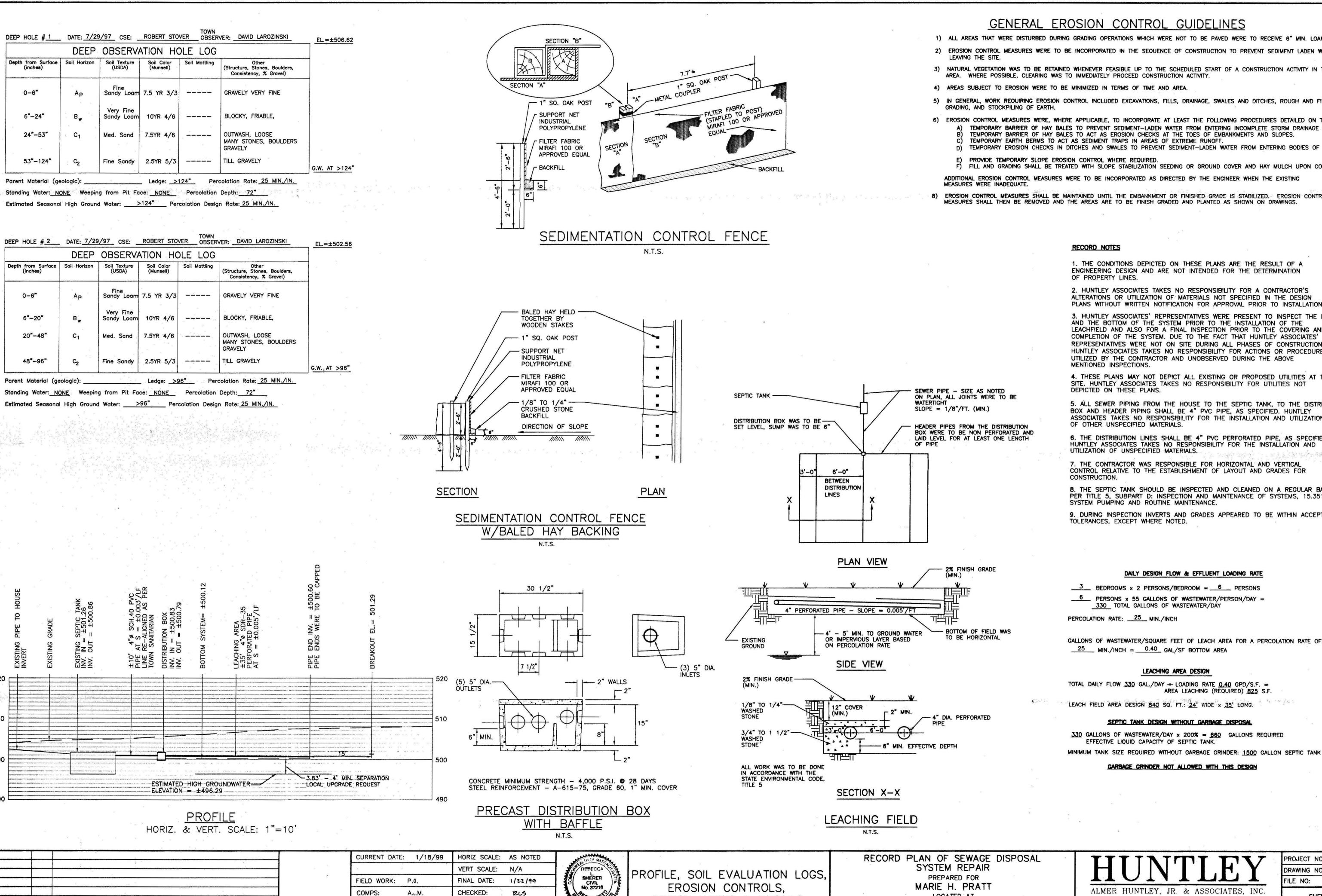
Huntley\projinfo\projects\98-108\TtileV



No
COMMONWEALTH OF MASSACHUSETTS 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 (x), Upgraded (), Abandoned ()
by: Marie H. Pratt
at: 228 Henry Street
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_330_ (gpd)
Installer Karl's Excavating
Rebuta & Shere Designer: Huntley Associates Inspector
Date January 26, 1999
The issuance of this permit shall not be construed as a guarantee that the system will function as designed.







SURVEYOR:

ENGINEER:

R.L.S.

NO. DATE BY

REVISIONS

DESIGN:

DRAFTING:

A.J.M.

A.J.M.

Robert Sheren

DESIGN NOTES & DETAILS

- 1) ALL AREAS THAT WERE DISTURBED DURING GRADING OPERATIONS WHICH WERE NOT TO BE PAVED WERE TO RECEIVE 6" MIN. LOAM AND SEED.
- 2) EROSION CONTROL MEASURES WERE TO BE INCORPORATED IN THE SEQUENCE OF CONSTRUCTION TO PREVENT SEDIMENT LADEN WATER FROM
- 3) NATURAL VEGETATION WAS TO BE RETAINED WHENEVER FEASIBLE UP TO THE SCHEDULED START OF A CONSTRUCTION ACTIVITY IN THE
- 5) IN GENERAL, WORK REQUIRING EROSION CONTROL INCLUDED EXCAVATIONS, FILLS, DRAINAGE, SWALES AND DITCHES, ROUGH AND FINISH
- 6) EROSION CONTROL MEASURES WERE, WHERE APPLICABLE, TO INCORPORATE AT LEAST THE FOLLOWING PROCEDURES DETAILED ON THIS DRAWING. TEMPORARY BARRIER OF HAY BALES TO PREVENT SEDIMENT-LADEN WATER FROM ENTERING INCOMPLETE STORM DRAINAGE SYSTEM.

 - TEMPORARY EROSION CHECKS IN DITCHES AND SWALES TO PREVENT SEDIMENT-LADEN WATER FROM ENTERING BODIES OF SURFACE
- FILL AND GRADING SHALL BE TREATED WITH SLOPE STABILIZATION SEEDING OR GROUND COVER AND HAY MULCH UPON COMPLETION. ADDITIONAL EROSION CONTROL MEASURES WERE TO BE INCORPORATED AS DIRECTED BY THE ENGINEER WHEN THE EXISTING
- 8) EROSION CONTROL MEASURES SHALL BE MAINTAINED UNTIL THE EMBANKMENT OR FINISHED GRADE IS STABILIZED. ERCSION CONTROL
 - 1. THE CONDITIONS DEPICTED ON THESE PLANS ARE THE RESULT OF A ENGINEERING DESIGN AND ARE NOT INTENDED FOR THE DETERMINATION
 - 2. HUNTLEY ASSOCIATES TAKES NO RESPONSIBILITY FOR A CONTRACTOR'S ALTERATIONS OR UTILIZATION OF MATERIALS NOT SPECIFIED IN THE DESIGN PLANS WITHOUT WRITTEN NOTIFICATION FOR APPROVAL PRIOR TO INSTALLATION.
 - 3. HUNTLEY ASSOCIATES' REPRESENTATIVES WERE PRESENT TO INSPECT THE FILL AND THE BOTTOM OF THE SYSTEM PRIOR TO THE INSTALLATION OF THE LEACHFIELD AND ALSO FOR A FINAL INSPECTION PRIOR TO THE COVERING AND COMPLETION OF THE SYSTEM. DUE TO THE FACT THAT HUNTLEY ASSOCIATES' REPRESENTATIVES WERE NOT ON SITE DURING ALL PHASES OF CONSTRUCTION. HUNTLEY ASSOCIATES TAKES NO RESPONSIBILITY FOR ACTIONS OR PROCEDURES UTILIZED BY THE CONTRACTOR AND UNOBSERVED DURING THE ABOVE
 - 4. THESE PLANS MAY NOT DEPICT ALL EXISTING OR PROPOSED UTILITIES AT THE SITE. HUNTLEY ASSOCIATES TAKES NO RESPONSIBILITY FOR UTILITIES NOT
 - 5. ALL SEWER PIPING FROM THE HOUSE TO THE SEPTIC TANK, TO THE DISTRIBUTION BOX AND HEADER PIPING SHALL BE 4" PVC PIPE. AS SPECIFIED. HUNTLEY ASSOCIATES TAKES NO RESPONSIBILITY FOR THE INSTALLATION AND UTILIZATION
 - 6. THE DISTRIBUTION LINES SHALL BE 4" PVC PERFORATED PIPE, AS SPECIFIED. HUNTLEY ASSOCIATES TAKES NO RESPONSIBILITY FOR THE INSTALLATION AND
 - THE CONTRACTOR WAS RESPONSIBLE FOR HORIZONTAL AND VERTICAL CONTROL RELATIVE TO THE ESTABLISHMENT OF LAYOUT AND GRADES FOR
 - 8. THE SEPTIC TANK SHOULD BE INSPECTED AND CLEANED ON A REGULAR BASIS AS PER TITLE 5, SUBPART D: INSPECTION AND MAINTENANCE OF SYSTEMS, 15.351,
 - 9. DURING INSPECTION INVERTS AND GRADES APPEARED TO BE WITHIN ACCEPTABLE TOLERANCES, EXCEPT WHERE NOTED.

DAILY DESIGN FLOW & EFFLUENT LOADING RATE

GALLONS OF WASTEWATER/SQUARE FEET OF LEACH AREA FOR A PERCOLATION RATE OF:

330 GALLONS OF WASTEWATER/DAY x 200% = 660 GALLONS REQUIRED

MARIE H. PRATT LOCATED AT 228 HENRY STREET

AMHERST, MASSACHUSETTS

ALMER HUNTLEY, JR. & ASSOCIATES, INC

SURVEYORS ENGINEERS LANDSCAPE ARCHITECTS

30 INDUSTRIAL DRIVE EAST

NORTHAMPTON, MASSACHUSETTS

PROJECT NO: 98-108 DRAWING NO: 98108R2 FILE NO:

> SHEET NO. OF

228-234 Henry St. Christile Prest

JOHN CUHORY Ma. 01035



Jay Hower SI

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234 Henry 37

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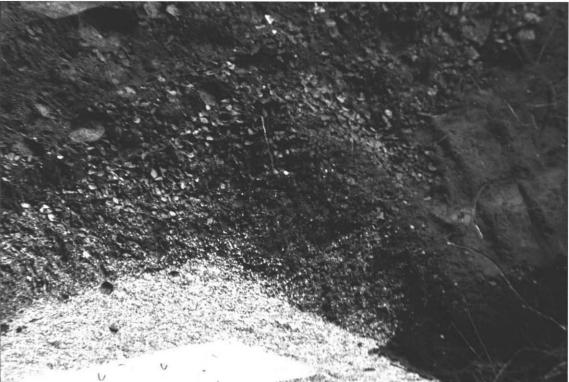
234 Henry ST 7/30/03

NOTES OF THE STATE OF THE PROPERTY OF THE PROP



KODAK PERFECT TOUCH Processing TWE/28/00 TOUCH Processing

534 HENRY ST (1/3/13)



XOUGH PERFECT TOUCH PROCESSING JULY HEXT

334 HERRY ST



NODAK PERFECT TOUCH PROCESSING DEL/ES/63 IDEMOSIS & 8 3 HAKI

23 years 5



KODAK PERFECT TOUCH Processing AUL/28/08 IDE28815 K 945 HF#1

234 Hemy 55



EB/BE/TES ENTEROOTS ROWOT TOTALS MADDIN

18 / HERRY ST

No. 03-02

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amherst

FEE _	275	01
	-10	1020
d	6413	-4

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

234 Henry Street Jimmy+Chris Prott
Location 234 Henry St N. Amherst ma
Map/Parcel # 586 - 7771 Address
Environmental Design Inc.
Installer's Name 1010ld Ferry Corthonology
Address 585-50 Address
Telephone # Telephone #
Type of Building: St. 1996 family Lot Size Sq. feet
Other — Type of BuildingNo. of persons Showers (), Cafeteria ()
Other fixtures
Design Flow (min. required) 330 gpd Calculated design flow gpd Design flow provided 355 gpd
Plan: Date 11-26-02 Number of sheets Revision Date Title Sewage Desposal Septem = Repair - Pratt
Description of Soil(s) See Soil Vejort S.
Soil Evaluator Form No. Name of Soil Evaluator 10-law 1914 Date of Evaluation 8-6-02
DESCRIPTION OF REPAIRS OR ALTERATIONS a New 32 X 12 Selfage gallery
Withanu 1500 god Siphetank.
The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of
TITLE 5 and further agrees not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.
Signed Oames & Gratt Date 61/18
Inspections MICHAEL CO.
NO/1203 OF
7 12 12 12 12 12 12 12 12 12 12 12 12 12
FORM 1 - APPLICATION FOR DSCP DEP APPROVED FORM 5/96
No 0.3 = 0.2 THE COMMONWEALTH OF MASSACHUSETTS FEE PC
THE COMMONWEALTH OF MASSACHUSETTS BOARD OF HEALTH CERTIFICATE OF COMPLIANCE
CERTIFICATE OF COMPLIANCE
Description of Work: BOARD OF HEALTH CERTIFICATE OF COMPLIANCE Individual Component(s) Complete System
BOARD OF HEALTH 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:
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Description of Work: Individual Component(s)

No	Date: 1-000
Commonwealth of M Am hewet, N Soil Suitability Assessment for	Massachusetts
Performed By: Michael Lawigne Witnessed By: Dave Zarazinski	
Location Address or 234 Henry St Address Teleph New Construction Repair 20	er's Name, Jimmy+Christial Pratt ess, and 234 Henry St with Amheust MA 01059
Office Review	*
Published Soil Survey Available: No Yes Yes	
Year Published Publication Scale	Soil Map Unit
Drainage Class Soil Limitations	· · · · · · · · · · · · · · · · · · ·
Surficial Geologic Report Available: No Yes L	* · ·
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	position locations, by
Range : Above Normal Normal Below Normal	_
Other References Reviewed:	



		ĝ:	
	*		

Location Address or Lot No. 234 Henry Street On-site Review

Deep Hole Number 1+2	Date: 8/6/02	Time: Moral	Weather cloudy
Location (identify on site plan	1) Dee Dlan	٠	A Committee of the Comm
Land Use law-	Slope (%)	- 2 Surface Ston	es Lew
Vegetation 9 005005		e in the second second	and the second s
Landform	SPACE ANAMORES A 1-	a state of the same	
Position on landscape (sketch	on the back) Se	e disign	vetoron, et al. Theorem
Distances from:		,	
Open Water Body	100 feet Dra	ainage way >50	feet
Possible Wet Area >	100 feet Pro	perty Line ~20	feet
Drinking Water Well	7/00 feet Oth	ner	

		DEEP OF	SERVAT	TION HO	LE LOG
Depth from Surface (Inches)	Soil Horizon	Soil Texture (USDA)	Soil Color (Munsell)	Soil Mottling	Other (Structure, Stones, Boulders, Consistency, % Gravel)
0-10"	A	SL	104R313	NONE	topsoil
10"-20"	B	SL	10484/6	NONE	SUBDOIL .
20"-108"	C	S	2.57413	whed	medium + course 60% gravel Lo+s 06 Copples
0-12"	A	SL	104R3/3	NON	topsoil
12"-24"	B	SL	10484/6	None	Subsoil
24"-108"	C	S	254413	None	Samas DHI
					Parkey states

Parent Material (geologic) Outwash Depth to Groundwater: Standing Water in the Hole: NO 11 Weeping from Pit Face: _/(Estimated Seasonal High Ground Water: 2108"



DHI

DHZ

		3	
			3

Location Address or Lot No 234 Wenry Street

Determination for Seasonal High Water Table

Metho	od 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
Adjus	tment 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?
	If not, what is the depth of naturally occurring pervious material?
Certifi	cation
	I certify that on 1000.99 (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



*	•
* -	
•	

Location Address or Lot No. 234 Henry Street



COMMONWEALTH OF MASSACHUSETTS

Amnewst

, Massachusetts

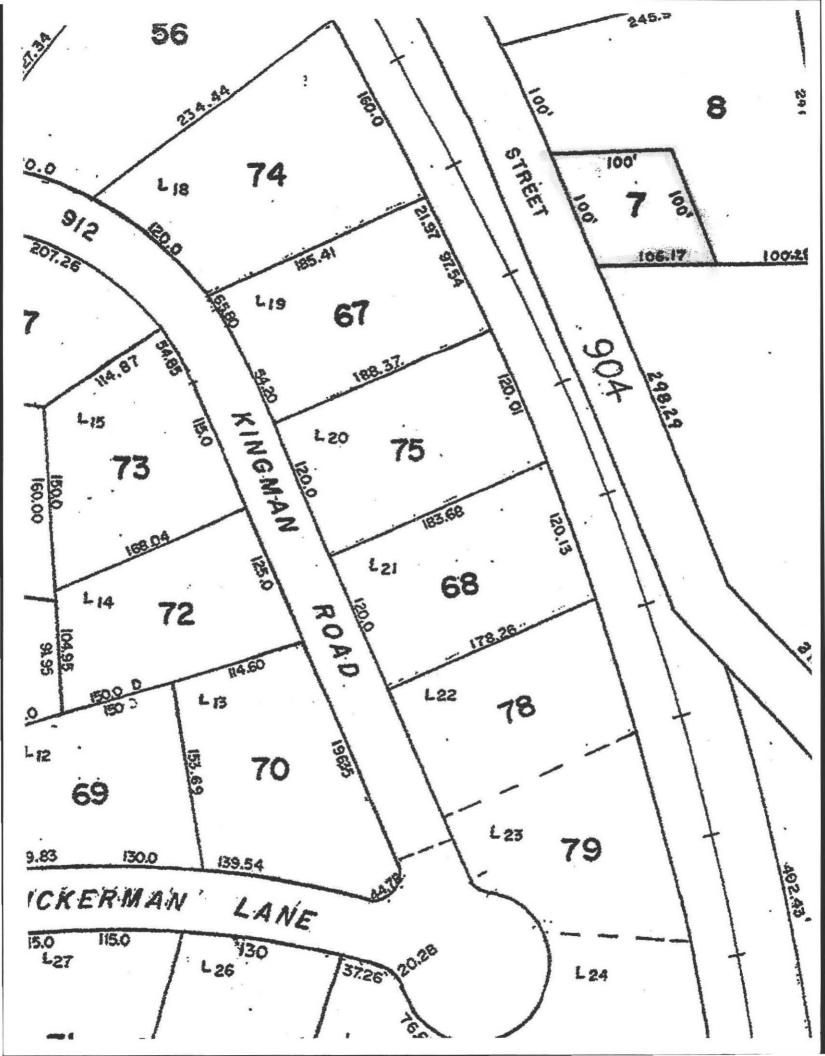
	Percolation Test*	* *
Date: 🖏	6/02 Time	moning
Observation Hole #	P-1	
Depth of Perc	42"	
Start Pre-soak	10:44	
End Pre-soak	1059	
Time at 12"	10:59	
Time at 9"	11:05 (Refined)	
Time at 6"	11:35	
Time (9"-6")	15	1 di 9
Rate Min./Inch	5	

reserve area.				Security and Security Property Security	
Site Passed D Site	Failed	¥	4		
Performed By: Mich	haullaw	ionl			
Witnessed By: Dow	e Zarazi	noki	30		
Comments:			·····		a de representant de la companya de

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



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	r. ,	4	

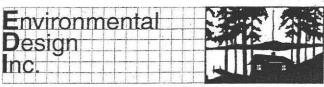


			1
			1
		*	•

- Do not flush bulky items such as throw-away diapers or sanitary pads into your system.
- Do not flush toxic materials such as paint thinner, pesticides, or chlorine into your system
 as they may kill the bacteria in the tank. These bacteria are essential to a properly
 operating septic system.
- Repair leaking fixtures promptly.
- Be conservative with your water use and use water-reducing fixtures wherever possible.
- Keep deep-rooted trees and shrubs from growing on your leaching area.
- Keep heavy vehicles from driving or parking on your leaching area.

For more information:

If you have any questions regarding your septic system, please contact:



Site Planning Perc Tests System Designs Title V Inspections

Michael J. Lavigne

101 Old Ferry Road Northampton, MA 01060 tel (413) 585-5020 fax (413) 582-0621



Site Planning ■ Perc Tests ■ System Designs ■ Title V Inspections







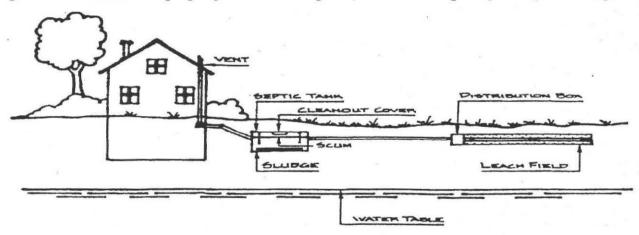




Care And Maintenance Of Your Septic System

What is a septic system?

- A septic system is a two part treatment and disposal system designed to condition untreated liquid household waste (sewage) so that it can be readily dispersed and percolated into the subsoil. Percolation through the soil accomplishes much of the final purification of the effluent, including the destruction of disease-producing bacteria.
- A septic tank provides the first step in the process by removing larger solid materials, decomposing solids by bacterial action, and storing sludge and scum. The liquid between sludge and scum is then passed along to the leaching area for final treatment and absorption into the ground. Remember: A properly maintained septic system will adequately treat your sewage.



What should I do to maintain my septic system?

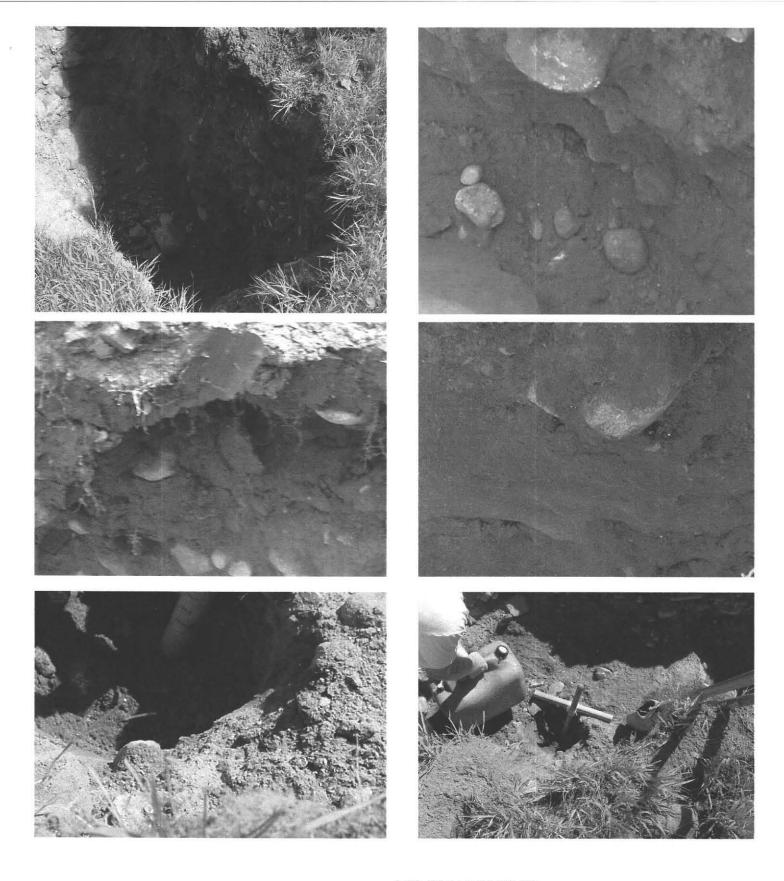
- Know the location of your septic tank and leaching area.
- Inspect your tank yearly and have the tank pumped as needed and at least every three
 years.

-over-



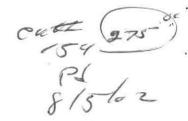
228-234 HENRY ST OWNER: CHRISTINE PRATT

	*



228-234 HENRY ST OWNER: CHRISTINE PRATT

FORM 11: Soil Evaluation Form	NO:
Commonwealth of	Massachusetts
Soil Suitability Assessment	: On-Site Sewage Disposal
Performed By: Mitte house Witnessed By:	
Location Address of: 234 Herry Lot# ESTAGE: MARIE PINCT	Owner's Name: Charstine Part Address of: P.O BUX 378 Telephone: P.O BUX 378
New Construction ☐ Repair ☐	01373
Office Review	1
Published Soil Survey Available? No Description Survey Available Surve	cale Soil Map Unit
8	
Surficial Geologic Report Available? No Year Published Publication Sca Geologic Material (map unit) Landform	le
Flood Insurance Rate Map: Above 500 year flood boundary Within 500 year flood boundary Within 100 year flood boundary	? No □ Yes □
Wetland Area: National Wetland Inventory Map (map uni Wetlands Conservancy Program Map (n	t)
Current Water Resource Conditions (us Range: Above Normal Normal	GS): monthBelow Normal □
Other Reference Reviewed:	



Determination: Seasonal High Water Table

Methods Used:
 □ Depth observed standing in observation hole inches □ Depth weeping from side of observation hole inches □ Depth to soil mottles inches □ Ground water adjustment feet
Index Well No Reading Date Index Well Level Adjustment factor Adjusted ground water level
Depth of Naturally Occurring Previous Material
Does at least four feed of naturally occurring previous materials exist in all areas observed throughout the area proposed for this soil absorption system? If not, what is the depth of naturally occurring previous material?
Certification
I certify that on (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

			*
			æ

234 Henry ST

On-Site Review

Deep Hole Number Date: 8 6	102 Time 10 AM
Location (identify on site plan)	
Land Use Signa Than	Slope (%) 2 - 4
Surface Stone Notice	
Vegetation:	
Landform:	
Position on Landscape (sketch on back) Distances from:	
Open Water Body feet	Drainageway/06 feet
Possible Wet Ares / feet	Property Line feet
Drinking Water Well feet	Other

		DEEP OBSE	RVATION	HOLE LO	3
depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders) Consistency, % gravel
10'	A	56	16+3/3		
20"	B	54	10 12/1		hed to
	C	SAN 1	25-1/13		Cobbles Steves
108					60 %, 7

Parent Material (geologic)	Tursi	4	
Depth to Bedrock 18 8		,	
Depth to Groundwater:			
Standing Water in the Hole	-		
Weeping from Pit Face	/		
Estimated Seasonal High W	/ater	-	

	~ <	la
1 .12	wa	
100	0	n-Site Review

pd 275 oc Chartine Part

Date:	Time	
olan)		
	Slope (%)	
10	11000	
\W		
ketch on back)		
<i>L</i>	All Property and the Control of the	
/ feet _/	Drainageway	feet
	Property Line	feet
/ell feet	Other	
	ketch on back)	/ feet Drainageway s feet Property Line

		DEEP OBSE	RVATION	HOLE LOG	•
depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders Consistency, % gravel
12	A	SL	10/1/3/3	_	
24	B	56	DYTHE		Red TO
	2	SANd	2,5+	_	Coh 6 65 Coh 6 65
9'			1/3	,	. 5 /

Parent Material (geologic)	WASh	
Depth to Bedrock		
Depth to Groundwater:		
Standing Water in the Hole		
Weeping from Pit Face		
Estimated Seasonal High Wa	ter/	

N.			
	*		
		,	

... 284 Henry STREET

FORM 12: Percolation Test Location Address or Lot # 234 Henry

Commonwealth of Massachusetts Town of

	PERCOLAT	ION TEST	*	
DAT	E: 5/6/0	7	TIME:	
Observation Hole #	(1			
Depth of Perc	1, 4	2"		
Start Pre-soak	10.44			
End Pre-soak	- MATE - STATE			
Time at 12" /	11:02			,
Time at 9"	11:03	11:20		
Time at 6"	ROCK Kell	11:35		
Time (9"-6")	IN YOU	15		
Rate Min./Inch		3		

*Minimum of one percolation test must be performed in both the primary area and reserve area.

Site Passed Site failed

Performed by MeHe Grove Swe Envi Dorige

Witnessed by Zaraz (2011)

Comments:

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		10		

*				

	- Managaran - Santanana	
154	S 2 Scan	\$
13/02	\$ DOLLA	
5-13/110 9453045333 DATE	The same	J. 5.1.
	Jane] #16662
R. PRATT x 378 D, MA 01373	of An Jersey	2 X/C 4 5 3 0 4
CHRISTINE R. PRATT P.O. BOX 378 SOUTH DEERFIELD, MA 01373	Contract Con	10 1381 94530
S.		MEMO 439 Herry Steps. 1:0110001381: 94530 453311" 0154
REIN PAPER	S BELLINE WALLET OR DUPLICATE S	¥ -

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TOWN OF AMHERST HEALTH PERMITS/INSPECTION SERVICES No. 2637

	HEALITH ERMITS/INS	ECHONSE	CVICES	
Received	of Chaisting R. I'mit	of	P.O. Rax 3	78
10001104	Name 228 Henry		SAddress Deer F.	e-11 013
For Prope	rty Located at: 234 Hours 57		MARIFORT	TESTETE
	Street Address		Owner	
HEA009	Bakery R6510 443508	HEA015	Sanitary Code Booklets	
HEA001	Bed & Breakfast	HEA016	Septic Tank Permit-Installers	
HEA002	Catering License	HEA017	Septic Tank Permit-Private	10 100
HEA003	Food Handler	HEA018	Septic Tank Reinspection Fee	
HEA004	Frozen Deserts R6510 443501	HEA019 R6510 432306	Sub-Division Review Fee	
HEA005	Health Dept. Housing Isp	HEA012 R6510 443512	Swimming Pool Permits	
HEA006	Massage Therapy License	HEA020	Tanning License	
HEA007	Milk & Cream License	HEA024	Funeral Director License R6510 443502	
HEA008	Motel License	HEA034	Immunization Clinic R6510 432307	
HEA010	Removal of Offal	HEA030	Car Seats 8407 258004	
HEA021	Removal of Rubbish	HEA026	Smoking & Tobacco Reg. Violations R6510 443518	
HEA011	Percolation Test Fees	HEA023	TB Clinic R6510 432303	
HEA013	Recreation Camp License	HEA022	Tobacco License R6510 443505	
HEA014	Retail Store Permit	HEA		
		HEA		
			<u> </u>	
	TOTAL FEE:	275.		2
(and Jagel		2/37	02
- In	speciton-Services/Health Department		Date	
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	The second secon			7
		5-13	3/110 154	
	CHRISTINE R. PRATT	94530	045333	
	P.O. BOX 378 SOUTH DEERFIELD, MA 01373	DATI	8/3/02	1
	NAPER .		\$ 2)50	0
	PAY TO THE TOWN OF ACLESTY	2.61	DOLLARS D South	Features on Back
	- lace luis fu	er j. je		
	Fleet		20	
	60808 South Deerfield Office South Deerfield, Massachusetts 01373	-flas	Wille	MP
Must be \	Validate 1 NEMO 234 Heary SEPTIC	3 3 11 0 1	54	
	MEMO 11:01:01:00013BI: 94530 453	13" U		CONTRACTOR

				4

Soil Evaluator: Michael Lavigne Dave Zarazinski Witness: August 06, 2002 Date:

Hole Name: DH1 Elevation: 95.0'

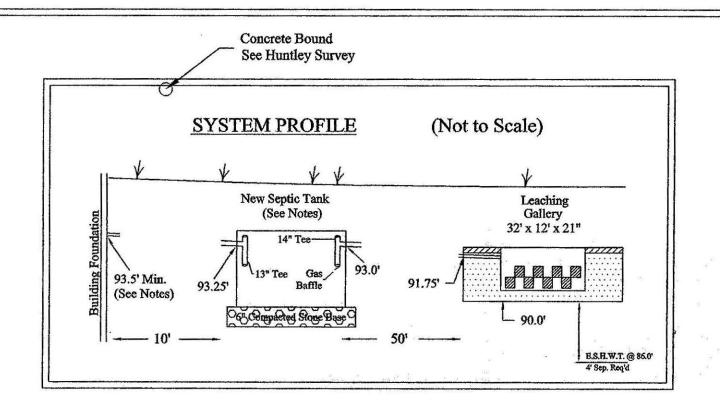
0"-10" 10YR3/3 10"-20" 10YR4/6 None 2.5Y4/3 None Noted

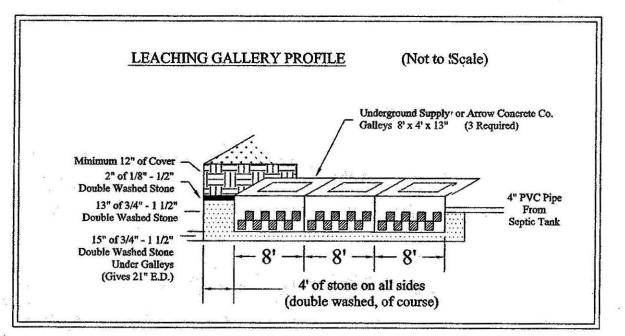
Estimated Seasonal High Water Table @ 108" or 86.0' Percolation Rate 5 min/inch

Hole Name: DH2 Elevation: 93.8'

Mottles 0"-12" 10YR3/3 12"-24" None 2.5Y4/3 24"-108" None Noted

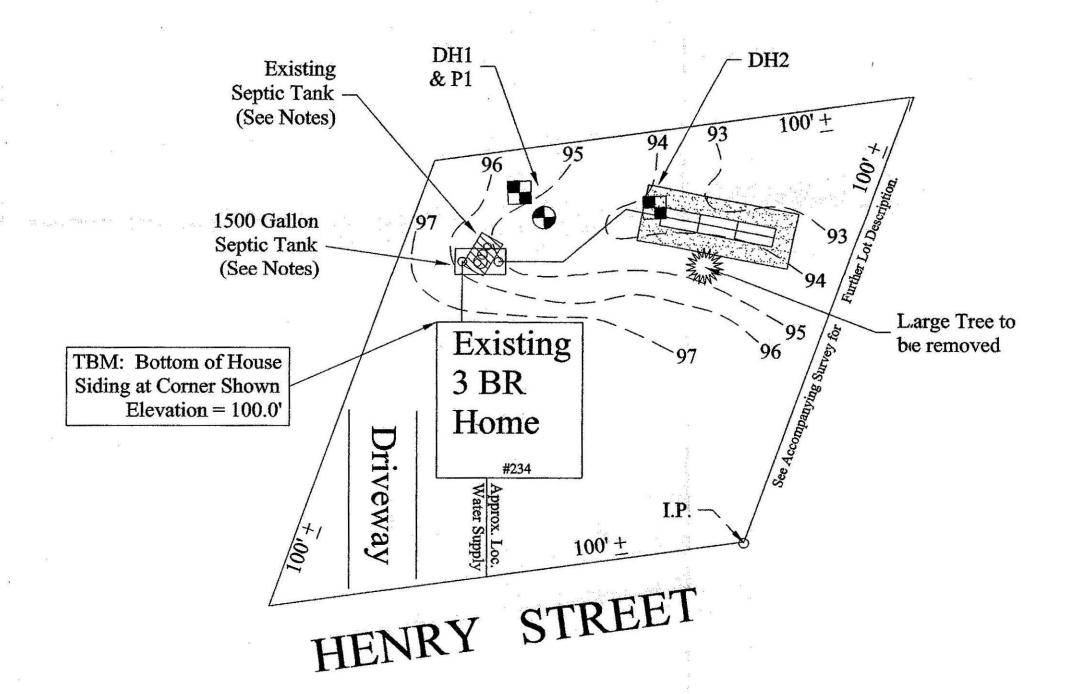
Estimated Seasonal High Water Table @ 108" or 84.8'





CONSTRUCTION NOTES

- 1.) ONE RECTANGULAR SEEPAGE GALLERY, CONSISTING OF THREE (3) GALLEYS (UNDERGROUND SUPPLY OR ARROW CONCRETE 8' x 4 x 13"), SEE PROFILE 4' OF 3/4" - 1 1/2" DOUBLE WASHED STONE AROUND GALLEYS, 15" OF DOUBLE WASHED STONE BENEATH GALLEYS (EFFECTIVE SIZE 32' x 12' x 21") COVER SYSTEM WITH 2" OF 1/8" - 1/2" DOUBLE WASHED STONE.
- 2.) SYSTEM IS DESIGNED TO ACCOMMODATE A THREE BEDROOM HOME WITH NO DISPOSAL. ANY EXISTING DISPOSAL IS TO BE REMOVED.
- 3.) EXISTING SEPTIC TANK TO BE PUMPED, CRUSHED, AND FILLED WITH SAND. REPLACE WITH NEW 1500 GALLON TANK FITTED WITH 4" PVC SCH. 40 INLET AND OUTLET TEES. TANK TO BE SET ON A COMPACTED STONE BASE A MINMUM OF 6" DEEP.
- 4.) LOCATION AND ELEVATION OF SEPTIC TANK MAY BE MODIFIED AS NECESSARY TO ACCOMMODATE SEWER PIPE EXIT LOCATION. MAINTAIN NINIMUM SETBACKS AND PITCHES. NOTIFY ENGINEER IF ANY PROBLEMS ARE ENCOUNTERED.
- 5.) BUILDING EXIT LINE TO BE 4" PVC SCH. 40, WITH A MINIMUN SLOPE OF 2%.
- 6.) ALL OTHER PIPE CAN BE 4" PVC SDR 35 MINIMUM.
- 7.) SET GALLERY AT ELEVATION NOTED IN PROFILE, BACKFILL TC PROVIDE A MINIMUM OF 12" OF COVER AND RE-GRADE TO PRECONSTRUCTION CONDITION, LOAM AND SEED.
- 8.) THE LARGE TREE SHOWN WILL NEED TO BE REMOVED.
- 9.) ALL CONSTRUCTION TO BE I.A.W. TITLE V, THE STATE ENVIRONMENTAL CODE. 10.) NOTIFY ENGINEER AT LEAST 72 HOURS PRIOR TO THE TIME INSPECTION IS REQUIRED.



Design Calculations

Design Daily Flowrate: 110 GPD/BR x 3 BR = 330 GPD Design Perc. Rate: 8 min/inch (Tested @ 5 min/inch) System Leaching Area: Sidewall: $2 \times (1.75' \times 32') + 2 \times (1.75' \times 12') = 154 \text{ Sq. Ft.}$

Total: 154 Sq. Ft. + 384 Sq. Ft. = 538 Sq. Ft.

Bottom: $32' \times 12' = 384 \text{ Sq. Ft.}$

L.T.A.R.(Class 1 Soil): 538 Sq. Ft. x 0.66 GPD/Sq. Ft. = 355 GPD



ENVIRONMENTAL DESIGN, INC.

101 OLD FERRY ROAD NORTHAMPTON, MA 01060

PHONE: (413) 585-5020 FAX: (413) 582-0621

SEWAGE DISPOSAL SYSTEM - REPAIR

234 Henry Street North Amherst, MA

for

Jimmy & Chris Pratt 234 Henry Street North Amherst, MA

413-586-7771

FIELD 11/26/02 SURVEYOR ML/JP DESIGNER ML **CHECKER** ML/PS **DESIGN** 11/26/02

DESIGN REFERENCES SITE LOCATION

234 Henry Street North Amherst, MA

BENCHMARK Bottom of House Siding at Corner Shown. Elevation = 100.0'

LEGEND

SCALE: 1" = 20' EXISTING CONTOUR -----

PROPOSED (FILL) CONTOUR

SOIL EVALUATION HOLE

PERC HOLE

APPROVALS & REVISIONS

Rev. A SAS moved, notes changed. 01-10-03

ENVIRONMENTAL DESIGN, INC. 101 OLD FERRY ROAD NORTHAMPTON, MA 01060 1-413-585-5020

July 22, 2003

Board of Health Town Offices Amherst, MA 01002

re: Inspection of Septic System Repair Installation - Pratt Home, 234 Henry Street

Dear Board:

On July 22, 2003, a representative from our office performed a final inspection of the septic system repair installation referenced above. The system was installed by John Lashway of Hadley, MA.

Our representative found that the system appears to have been installed acceptably and in general accordance with our system plan dated 11-26-02. Risers were requested on the septic tank, and a small swath of Title V sand was requested along the downhill portion of the soil absorption system. The system will be backfilled upon completion of these two items. The as-built locations of relevant system components have been documented on the attached sketch.

If there are any questions, please contact our office.

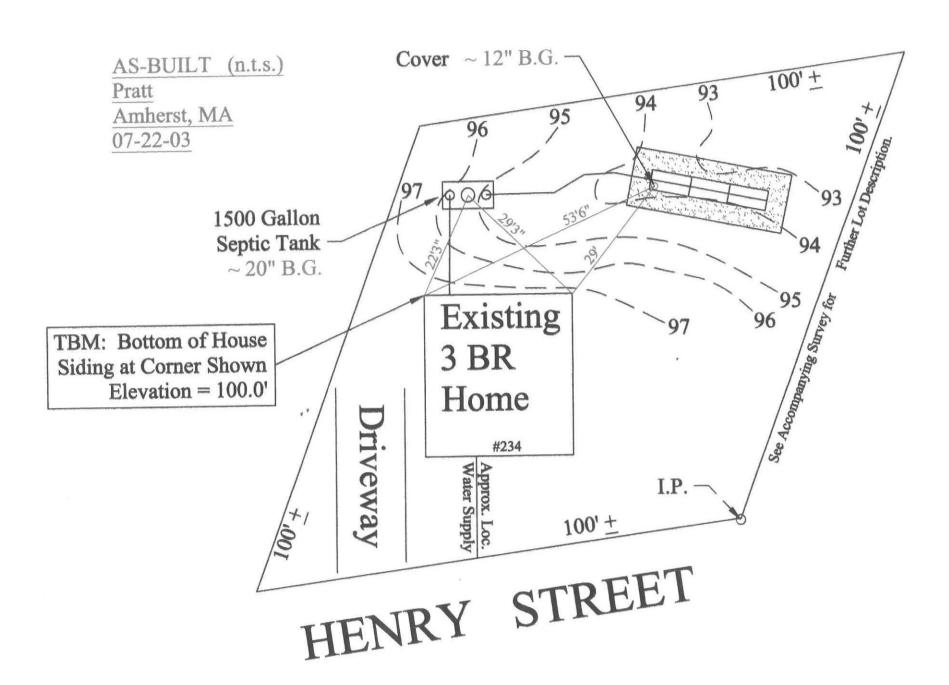
Sincerely yours.

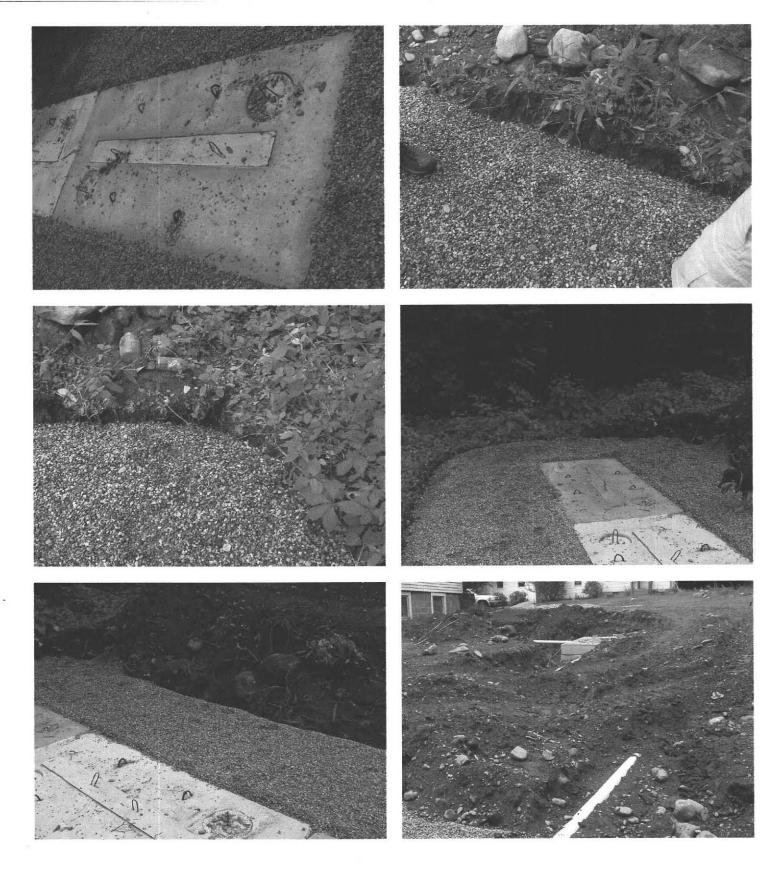
Michael J Lavigne

I hereby certify that the above referenced system was installed in accordance with Title V and the approved system design prepared by Environmental Design, Inc.

John Lashway, Hadley, MA

	>	į.





Owner: Jimmy & Christine Pratt 228-234 Henry St. Installer: John Lashway



Owner: Jimmy & Christine Pratt 228-234 Henry St.

Installer: John Lashway





Owner: Jimmy & Christine Pratt 228-234 Henry St. Installer: John Lashway

	ie:	



AMHERST Massachusetts

#234

AMHERST HEALTH DEPARTMENT 70 BOLTWOOD WALK AMHERST, MA 01002-2128 (413) 256-4077

Bettye Anderson Frederic, Director

OFFICE OF THE HEALTH DEPARTMENT

MISCELLANEOUS INSPECTIONS

	Inspection of 234 Henry
Name	Inspection of 334 Kensy of Date: 4/9/9-e-Time:
Owner	
Type of Business	(Street) - (City or Town)
Violation(s) and remar	KS: Received A CAH From Rim
(C.D.BG) C	entractu Broke Pipe From NK (Ornging), he will Replace esday april F, 1972
ROUSE TO TA	NK (Orregions), he will Replace
- ON Weda	esday april F. 1992
	*
1137	
	This Inspection Report is signed and certified Under the pains and penalties of perjury.
ignature of Inspector:	Clared Jary C.
gnature of Owner or Per	son in Charge:

				3 *

TOWN OF AMHERST HEALTH PERMITS/ INSPECTION SERVICES

MARIE H. For Property Located at: **HEA009** Bakery **HEA014** Retail Store Permit R6510 443508 R6510 443514 **HEA015** Sanitary Code Booklets HEA001 Bed & Breakfast R6510 432305 R6510 443516 **HEA016** Septic Tank Permit-Installers **HEA025** Burial Permits R6510 443517 R6510 443511 **HEA002** Catering License **HEA017** Septic Tank Permit-Private R6510 443507 R6510 443510 **HEA003** Food Handler **HEA018** Septic Tank Reinspection Fee R6510 443515 R6510 432301 **HEA004** Frozen Desserts HEA026 Smoking & Tobacco Reg. Violations R6510 443501 R6510 443518 **HEA019** Sub-Division Review Fee **HEA024** Funeral Director License R6510 443502 R6510 432306 HEA005 Health Dept. Housing Insp. **HEA012** Swimming Pool Permits R6510 432302 R6510 443512 **HEA023** TB Clinic **HEA006** Massage Therapy License R6510 443504 R6510 432303 HEA007 Milk & Cream License **HEA020** Tanning License R6510 443500 R6510 443509 **HEA008** Motel License **HEA022** Tobacco License R6510 443505 R6510 443506 **HEA010** Removal of Offal HEA R6510 443513 6 5 **HEA011** Percolation Test Fees HEA R6510 432300 HEA013 Recreation Camp License. R6510 443503 TOTAL FEE: Inspection Services/Health Department

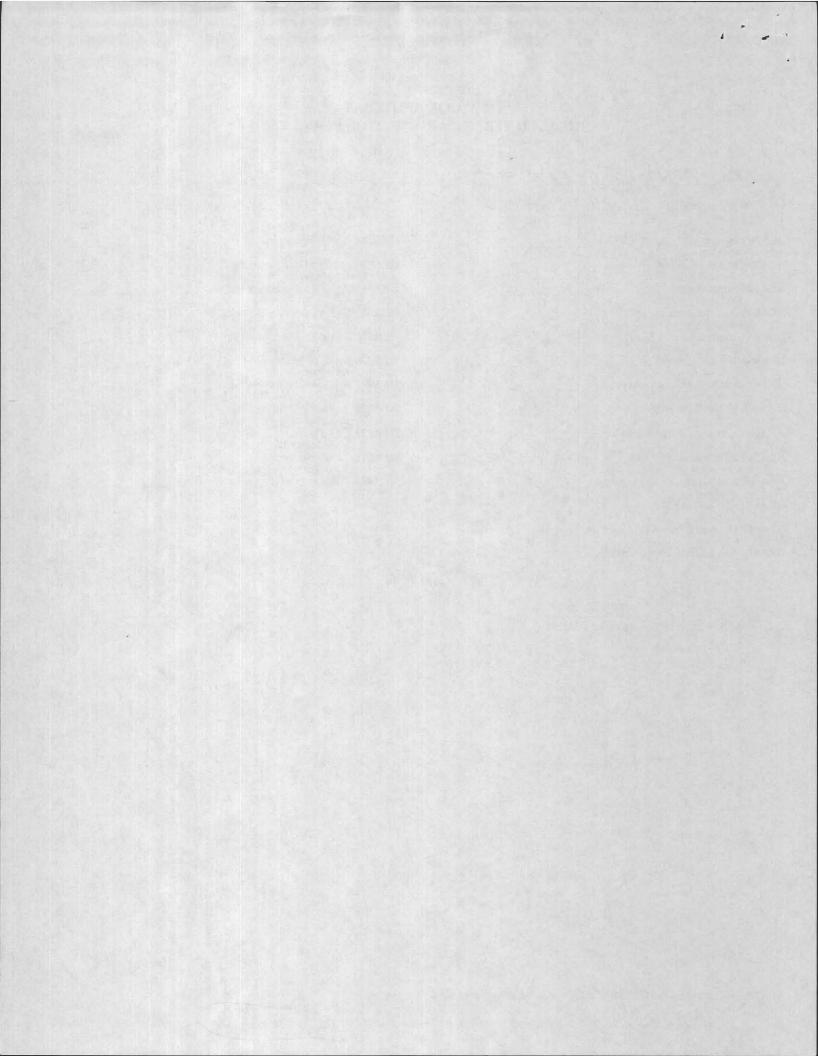
CH # 999

SMMIRST LIVE DATABREE MISC CAGN RECEIPTS Date / Time : 09/09/97 11:35:46 Payment : 1160.00 Check/Credit Card W:

Clerk

0100 : luciak

Must be validated by the Collector's Office to be considered paid.



TOWN OF AMHERST **HEALTH PERMITS/ INSPECTION SERVICES**

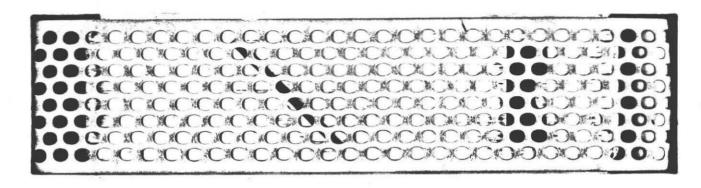
	E III I ERWIII S	INST ECTION SERVICES	No.	0100
Received of MARIE H.	PRATT	of 234 Hewry	5,	
For Property Located at: 2344	enay ST	M Address Owner	•	
HEA009 Bakery		HEA014 Retail Store Permit		
HEA001 Bed & Breakfast		HEA015 Sanitary Code Booklets	_	
R6510 443516 HEA025 Burial Permits R6510 443517	-	HEA016 Septic Tank Permit-Installers R6510 432305 HEA016 Septic Tank Permit-Installers		
HEA002 Catering License R6510 443507		HEA017 Septic Tank Permit-Private		60.00
HEA003 Food Handler R6510 443515		HEA018 Septic Tank Reinspection Fee		
HEA004 Frozen Desserts R6510 443501	1	HEA026 Smoking & Tobacco Reg. Vio R6510 443518	lations	
HEA024 Funeral Director License R6510 443502	3-0	HEA019 Sub-Division Review Fee	7	
HEA005 Health Dept. Housing Insp. R6510 432302 HEA006 Massage Therapy License		HEA012 Swimming Pool Permits R6510 443512	-	
R6510 443504 HEA007 Milk & Cream License		HEA023 TB Clinic R6510 432303 HEA020 Tanning License	10	
R6510 443500 HEA008 Motel License		HEA020 Tanning License R6510 443509 HEA022 Tobacco License	-	
R6510_443506		R6510 443505		
HEA011 Percolation Test Fees /6	0 00	НЕА		
HEA013 Recreation Camp License.	-			
NOSIU 43303	TOTAL FEE:	160.00		
Yaval Jew Zerski	<u> </u>	9/9	197	
Inspection Services/Health Departmen	t	Date		

CH# 999

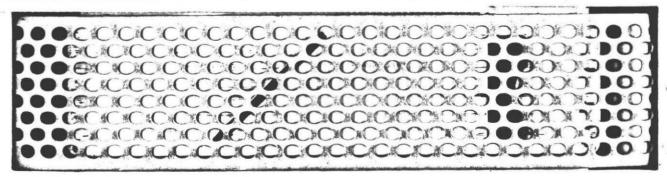
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RECEIVED SEP 0 8 1997



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DOLLARS 1 000	Hmhenst.	Found of Shruft	PAY TO THE ORDER OF
	5-13/110 502340506 3TAG	MARIE H. PRATT 234 HENRY ST. CUSHMAN, MA 01002	



			1.	

FORM 11 - SOIL EVALUATOR FORM Page 1 of 3

140.	Date:	1/29/97				
Commonwealth of Massachusetts , Massachusetts Soil Suitability Assessment for On-site Sewage Disposal						
Performed By: Robert Steven Witnessed By: 211021011	Date:	7/35/97				
Lot # Address, and 2	128 HEART ST.					
Office Review						
Published Soil Survey Available: No Yes						
Year Published Publication Scale Drainage Class Soil Limitations	Soil Map Unit					
Surficial Geologic Report Available: No Yes	1	* *				
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:						
		theoly				



16 - 9159 586-9159

	*

Location Address or Lot No.

228 Heren So.

COMMONWEALTH OF MASSACHUSETTS

, Massachusetts

Percolation Test*							
Date:	7/29/97	Time: 9.19					
Observation Hole #	1						
Depth of Perc	72"						
Start Pre-soak	9:19						
End Pre-soak	9: 34						
Time at 12"	9:36	*					
Time at 9"	10::21	16:37 At 8"					
Time at 6"		16:37 At 8"					
Time (9"-6")	ny min	ζ"					
Rate Min./Inch	25 mint.						

reserve area.	ž.		1341
Site Passed Site Failed [
Performed By: Robert S	stover		
Witnessed By: DZAROZ			
Comments:		**	

Minimum of 1 percolation test must be performed in both the primary area AND



				-0	· · · · · ·	· :

Location Address or Lot No. 228 Henry Street

On-site Review

Deep Hole Number	Date: 8/29/9) Time:	Weather
Location (identify on site plan)	- 1		Weather Rail Y
Land Use	Slope (%)	Surface	Stones
Vegetation	•	THE PERSON	Contraction of the Contract of
Landform			and the without the common of
Position on landscape (sketch	on the back)		1 5 20 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Distances from:			
Open Water Body	feet	Drainage way	feet
Possible Wet Area	feet	Property Line	feet
Drinking Water Well	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, 9 Gravel)			
6	Ap	FSL	7.5/x 3/3	Love	gracely very fine			
20	Bw	VFSL	10 YR 4/6		block x - FainBle			
48	CI	M s	7.54R 4/4	Kine	nong stantes - boole any stantes - boole			
96	C2	FSL	25 YR 573	140	· gravelly - Till gravelly - Study			

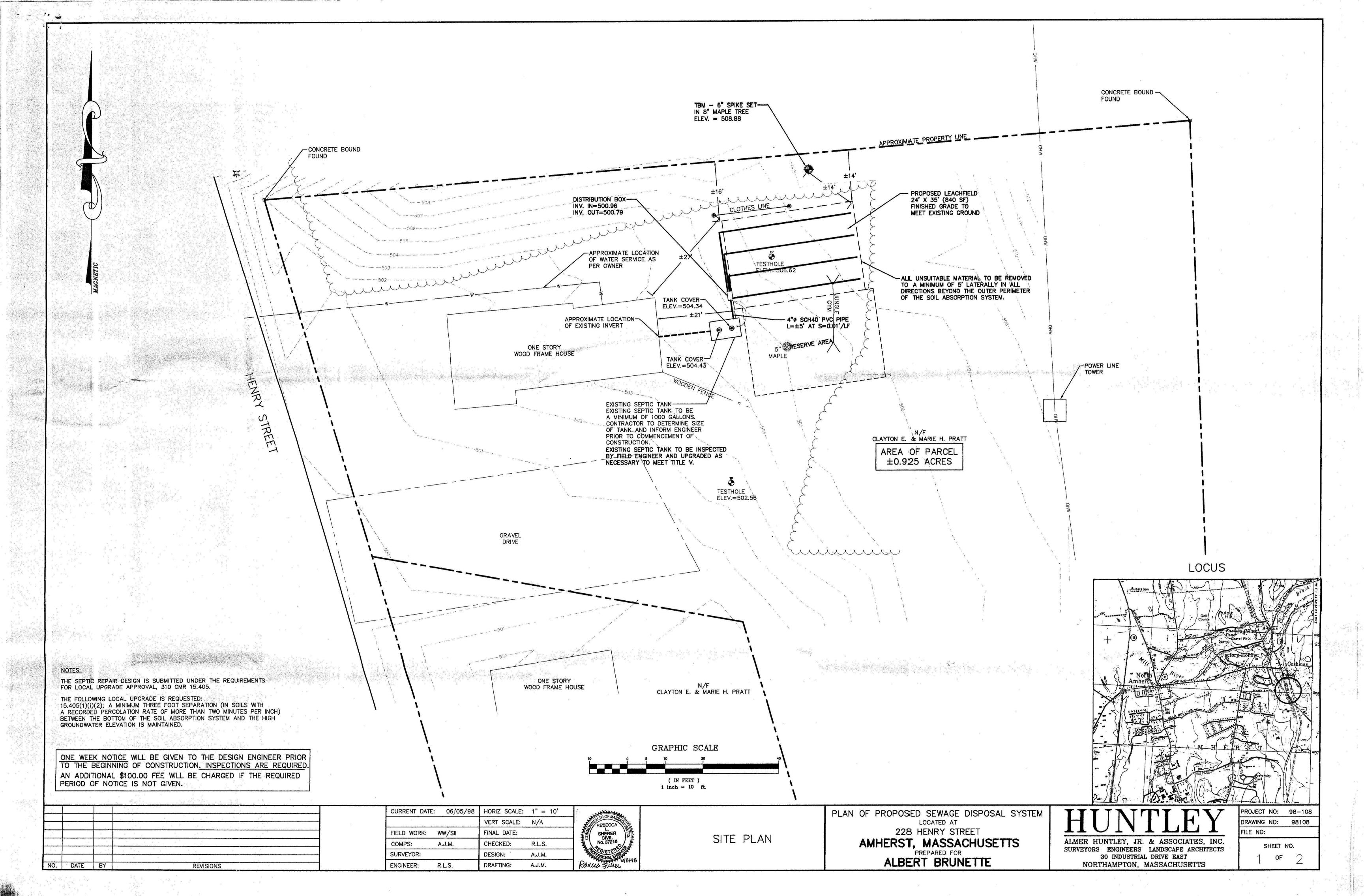
Parent Meserial (geologic)

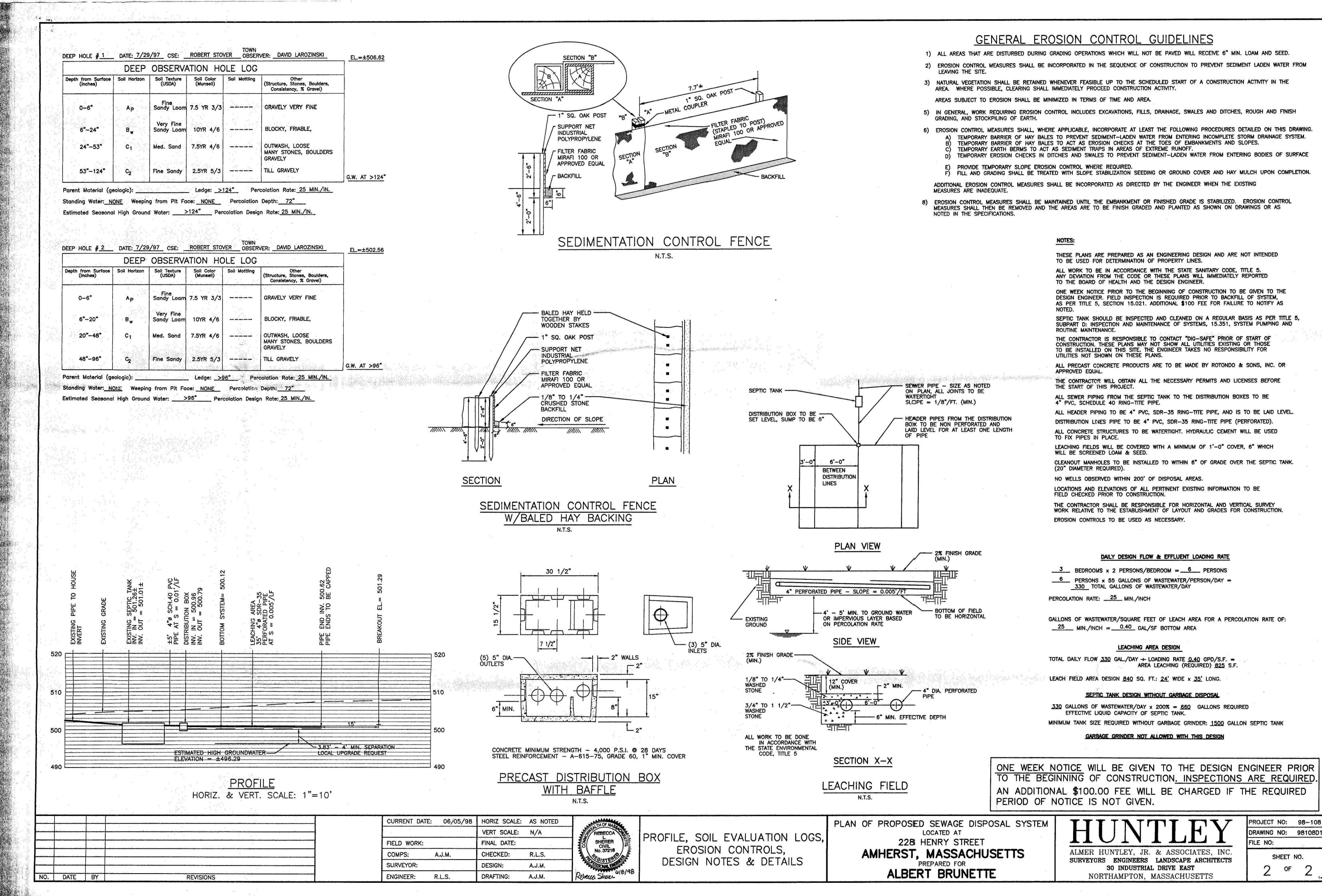
Depth to Groundwater: Standing Water in the Hole: Weeping from Pit Face:

Estimated Seasonal High Ground Water:



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	E II	





SHEET NO.

OF