

T3 HULST ROAD'S
~~XXXXXXXXXXXXXXXXXXXX~~



*x/Pls for back
* 323-4916*



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

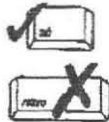
DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

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

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

- 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):



DSCP Number _____ DSCP Date _____
 Carol Perez _____
 Facility Owner
 73 Hulst Road _____
 Street Address or Lot #
 Amherst _____ MA _____ 01002
 City/Town State Zip Code

Designer Information:

Alan Weiss, RS, # 933 _____ Cold Spring Environmental, Inc. _____
 Name Name of Company

 Signature Date

Installer Information:

Tom Wanzych _____ River drive Excava. _____
 Name Name of Company

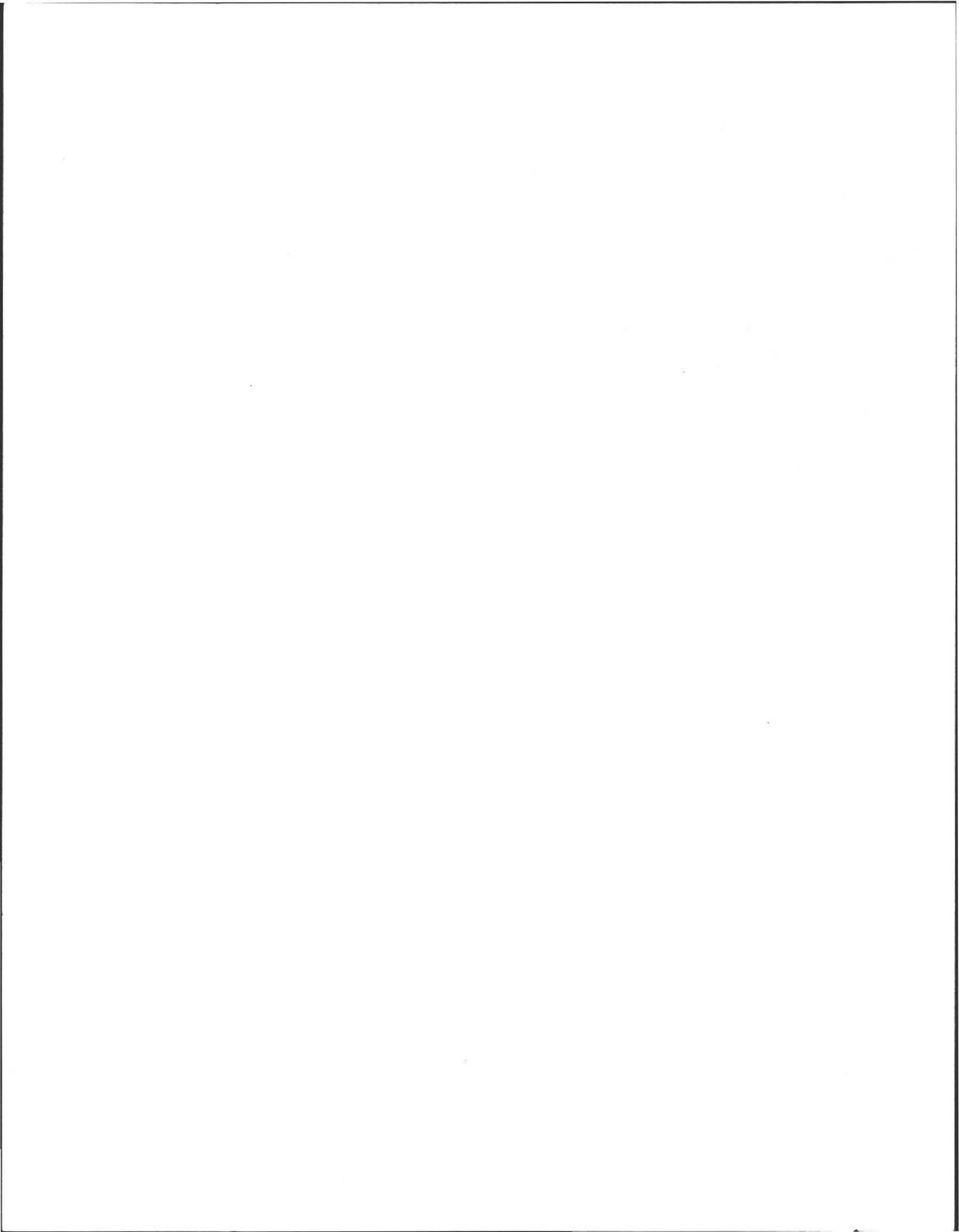
 Signature Date

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

New septic tank and leach area (field) installed. Pump S. tank every two years.

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

AMHERST HEALTH DEPT.
 Approving Authority _____
 Signature _____ Date 5/4/2012



No. 12-13

FEE \$ 650

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct () Repair Upgrade () Abandon () - Complete System Individual Components



Location <u>73 Hulst Rd.</u>	Owner's Name <u>Carroll Perez</u>
Map/Parcel# <u>30 B / 78</u>	Address <u>73 Hulst Rd.</u>
Lot# <u>AKA (#241)</u>	Telephone# <u>413-253-5190</u>
Installer's Name <u>River Drive Excav.</u>	Designer's Name <u>Alan Weiss</u>
Address <u>Hadley, MA</u>	Address <u>Belchertown, MA.</u>
Telephone# <u>413-584-1814</u>	Telephone# <u>413-373-5957</u>

Type of Building 4 BR Dwelling Lot Size 0.92 Ac +/- sq. ft.
Dwelling - No. of Bedrooms 4 BR. Garbage grinder No
Other - Type of Building _____ No. of persons _____ Showers (), Cafeteria ()
Other Fixtures _____

Design Flow (min. required) 810 gpd Calculated design flow 440 min Design flow provided 504 gpd
Plan: Date 4/22/2012 Number of sheets 1 Revision Date _____

Title Sepic System Repair P.W.

Description of Soil(s) Sand, silt

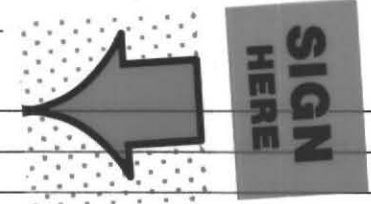
Soil Evaluator Form No. _____ Name of Soil Evaluator A. Weiss (Revised) Date of Evaluation 4/20/2012

DESCRIPTION OF REPAIRS OR ALTERATIONS Complete new system. perc rate on file 2.6 min/in. (B. Sionta) 1991

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees to not place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed [Signature] Date _____

Inspections _____



No. 12-13

FEE \$ 650

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 (), Upgraded (), Abandoned ()

by: _____
at _____

has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. _____, dated _____ Approved Design Flow _____ (gpd)

Installer _____
Designer: _____ Inspector: _____ Date: _____

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

No. 12-13

FEE \$ 650

COMMONWEALTH OF MASSACHUSETTS

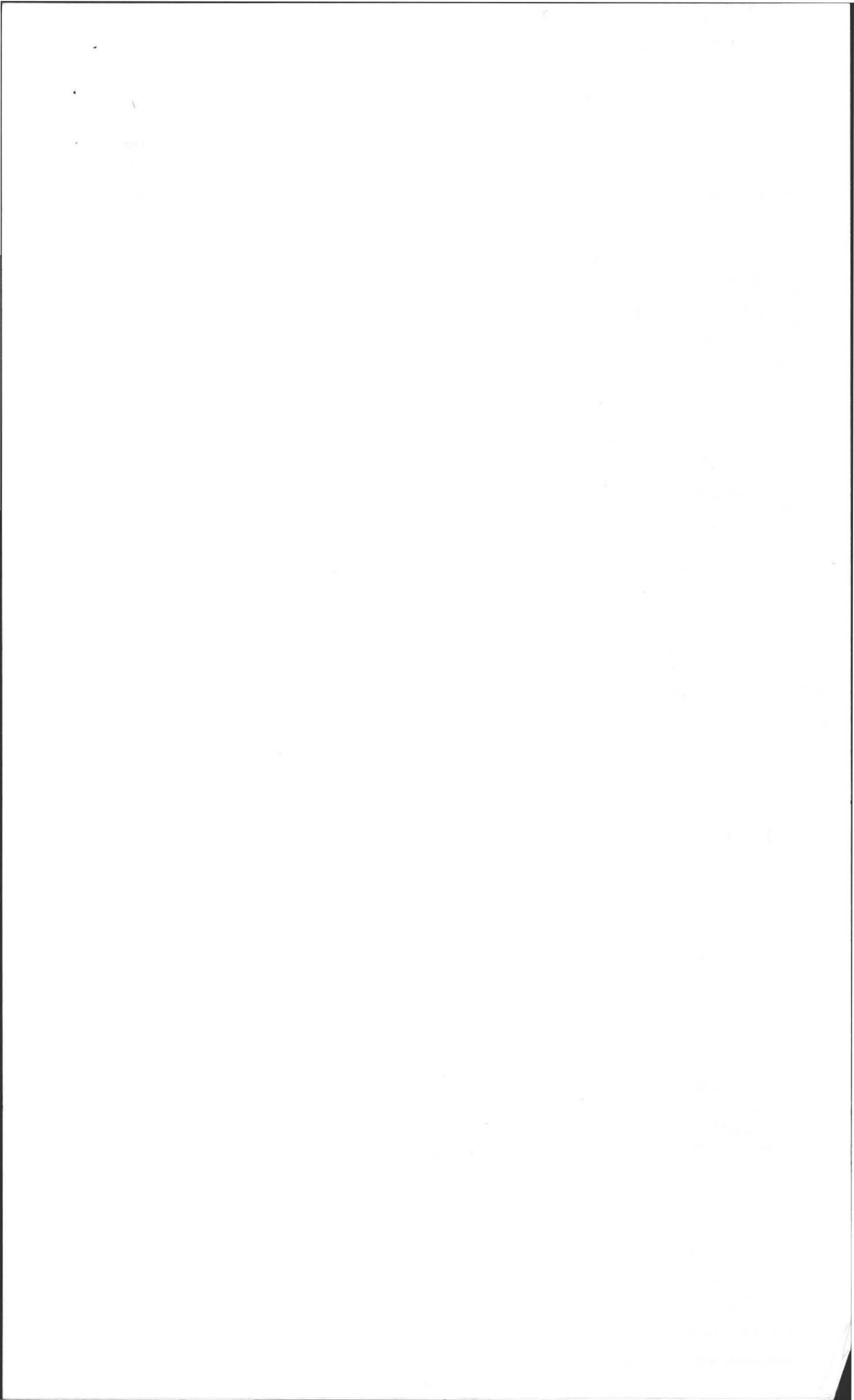
Board of Health, AMHERST, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct () Repair Upgrade () Abandon () an individual sewage disposal system at 73 HULST ROAD as described in the application for Disposal System Construction Permit No. 12-13, dated 4/27/2012.

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

Date 4/27/2012 Board of Health [Signature]





ALAN E. WEISS, M.S., R.S., L.S.P.

Licensed Site Professional
Registered Sanitarian
Hydrogeologist
President

- Wetland Consults
- Soil and Water Testing
- 21E Site Investigations
- Percolation Tests and
- Septic Designs
- Title 5 Inspections

350 Old Enfield Rd.
Belchertown, MA 01007
(413) 323-5957 & 323-4916 (FAX)

aeweiss@charter.net

Date: 4-20-12

Commonwealth of Massachusetts

Amherst, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: A. Weiss

Witnessed By: E. Smith

Append: R. Sivertz Date: 4/20/12
+D. Zornowski per. (9/17/91)

Location Address or Lot # <u>73 Hulst RD.</u>	Owner's Name, Address, and Telephone # <u>Carol Perez</u> <u>73 Hulst RD.</u>
New Construction <input type="checkbox"/> Repair <input checked="" type="checkbox"/>	

Office Review

Published Soil Survey Available: No Yes

(renewal only) (per data from 1991)*

Year Published Publication Scale Soil Map Unit

Drainage Class Soil Limitations

Surficial Geologic Report Available: No Yes

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)

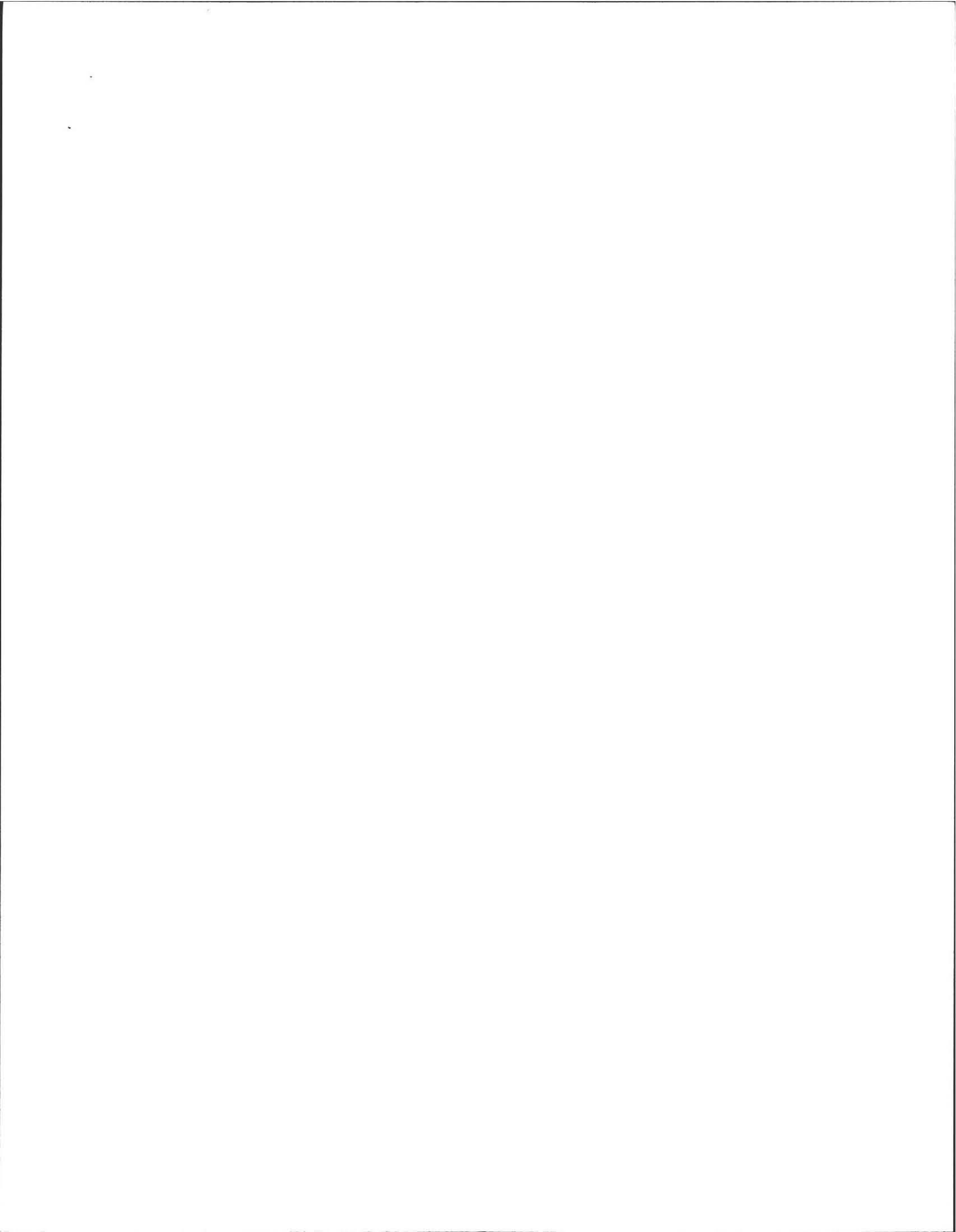
Wetlands Conservancy Program Map (map unit)

Current Water Resource Conditions (USGS): Month

Range :Above Normal Normal Below Normal

Other References Reviewed: _____





Location Address or Lot No. 73 Hurst Rd

COMMONWEALTH OF MASSACHUSETTS

, Massachusetts

Percolation Test*		
Date:	Time:	
Observation Hole #		
Depth of Perc		
Start Pre-soak	See Perc	
End Pre-soak	R. Sientka	
Time at 12"	(1991)	
Time at 9"		
Time at 6"		
Time (9"-6")		
Rate Min./Inch	2.66 $\frac{min}{in}$	

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

Design For 6 $\frac{min}{in}$

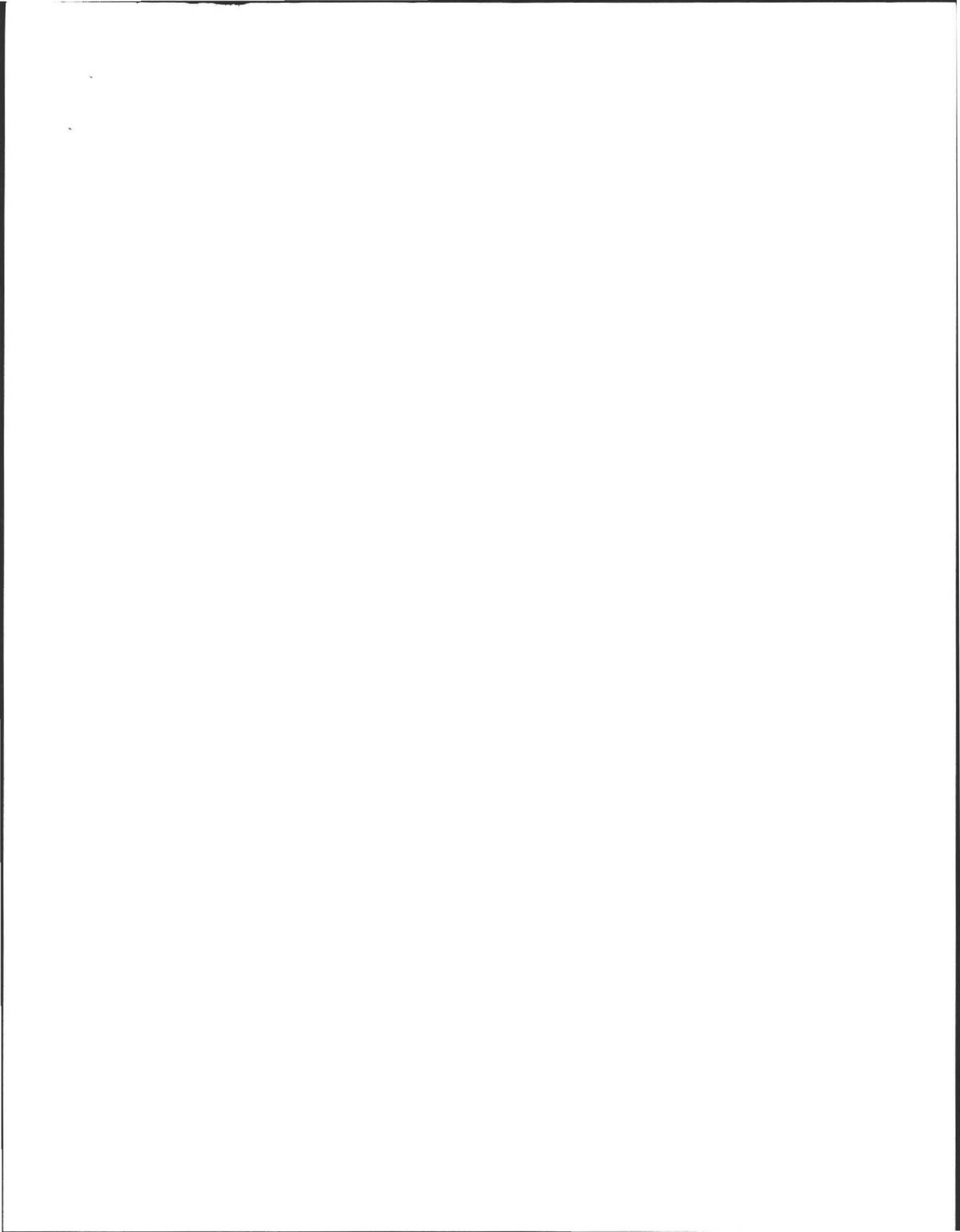
Site Passed Site Failed

Performed By: Alan Weiss, RS

Witnessed By: _____

Comments: _____





Location Address or Lot No. 73 HULST RD.

On-site Review

Deep Hole Number A * (Attachment Deeps + Per date) Date: _____ Time: _____ Weather SUN 60°F

Location (identify on site plan) _____

Land Use _____ Slope (%) _____ Surface Stones _____

Vegetation _____

Landform _____

Position on landscape (sketch on the back) _____

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*

P-A

Depth from Surface (Inches)	Soil Horizon	Soil Texture (USDA)	Soil Color (Munsell)	Soil Moisture	Other (Structure, Stones, Boulders, Consistency, % Gravel)
0 - 12"	A	FSL	10YR 3/3		- Frable
12 - 24"	Bw	SL	2.5Y 4/6	72"	- Frable, F Sndy.
24" - 78"	C ₁	LS	2.5Y 4/8	2.5Y 4/1	- F. Sand sure Silt.
78 - 90"	C ₂	FSL			- SILTY.

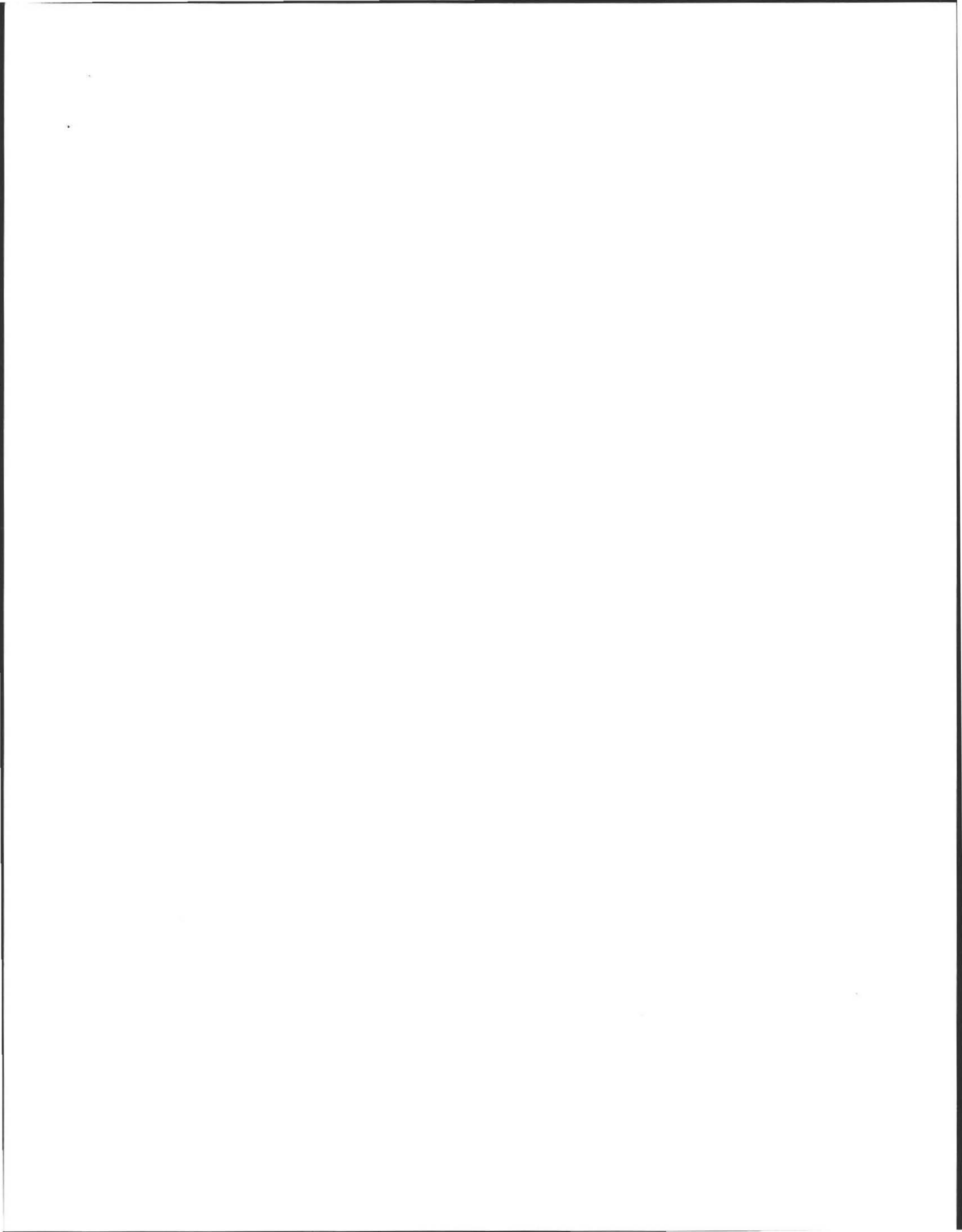
* MINIMUM OF 2 HOLES REQUIRED AT EVERY PROPOSED DISPOSAL AREA

Parent Material (geologic) outwash. Depth to Bedrock: _____

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

Estimated Seasonal High Ground Water: _____





Percolation Test

Test No. <u>perc test</u>	Fast No. _____
Reading _____	Reading _____
Saturation (15 min) <u>9:13 - 9:28</u>	Saturation (15 min) _____
<u>12</u> _____ <u>9:28 932</u>	_____
<u>11</u> _____ <u>934</u>	_____
<u>10</u> _____ <u>936</u>	_____
<u>9</u> _____ <u>938</u>	_____
<u>8</u> _____ <u>941</u>	_____
<u>7</u> <u>8/3 = 2.66</u> <u>943</u>	_____
<u>6</u> _____ <u>940</u>	_____
<u>DESIGN RATE</u>	
Perc Rate <u>6.0 Min/inch</u>	Perc. Rate _____ Min/inch
Ground Elev. _____	Ground Elev. _____
Depth of Hole <u>48</u>	Depth of Hole _____

Test Pit <u>TP-1</u>	Deep Test Pit/s <u>TP-2</u>
Depth Soil Description	Depth Soil Description
<u>0-20 LOAM</u>	<u>0-14 OTS LOAM</u>
<u>20-32 MED SAND</u>	<u>14-22 MED SAND</u>
<u>32-55 SAND & SILT</u>	<u>32-80 CLAY & SILT</u>
<u>55-120 CLAY</u>	<u>STOPPED</u>
Groundwater Depth <u>24'</u> Elev. <u>OXIDIS</u>	Groundwater Depth _____ Elev. _____
Bedrock Depth _____ Elev. _____	Bedrock Depth _____ Elev. _____
Ground Elev. <u>page 55</u>	Ground Elev. <u>OXIDIS 24</u>

S.C.S. Soil Description SAND Seasonal High Water Table? OXIDIS 24

Bench Mark: Elev. _____ Description _____

COMMENTS:

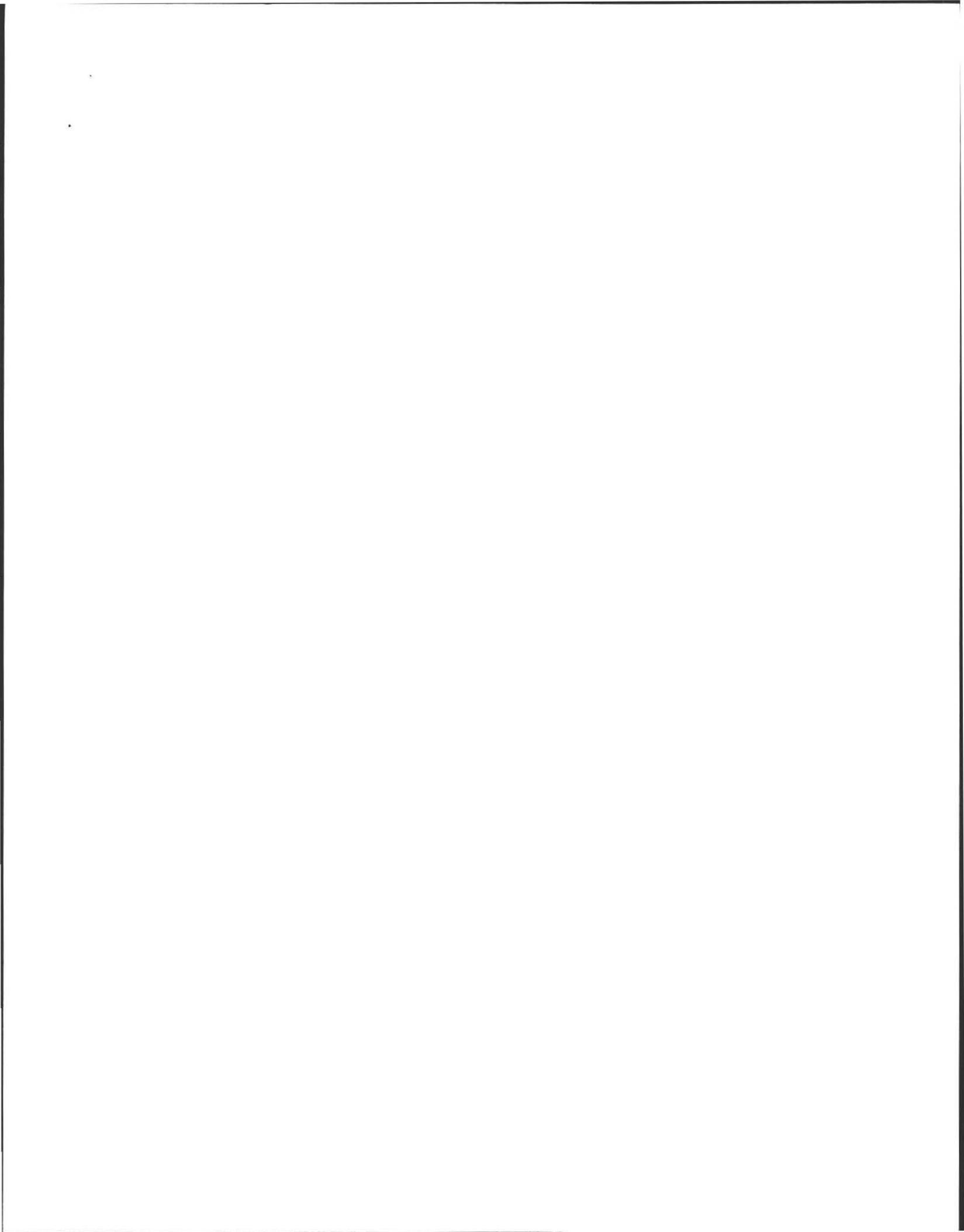
BEDROOMS
4
FULL BMT
WITH DRAINS

DISPOSAL TO BE
REMOVED.

Date: SEPT 17 1991
 Client: CARROLL PEREZ
73 MILST ROAD
50 AMHERST MASS
 Engineer: WJ SIERUTA
 Witness: D ZARAZINSKI
 Location of Perc: 73 MILST ROAD



0-10 A
10-24 B
24-78 C SANDY
78-90 C2 (MORE CLAY) SILTY SAND (COMPACTED)



Location Address or Lot No. 73 Hulst. Rd

Determination for Seasonal High Water Table

Method Used:

- Depth observed standing in observation hole inches
- Depth weeping from side of observation hole inches
- Depth to soil mottles . 72 inches
- Ground water adjustment feet

Index Well Number Reading Date Index well level

Adjustment factor Adjusted ground water level

Depth of Naturally Occurring Pervious Material

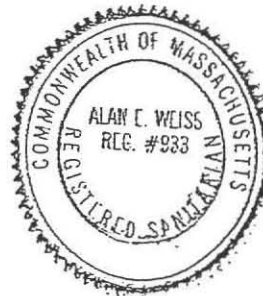
Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system? yes

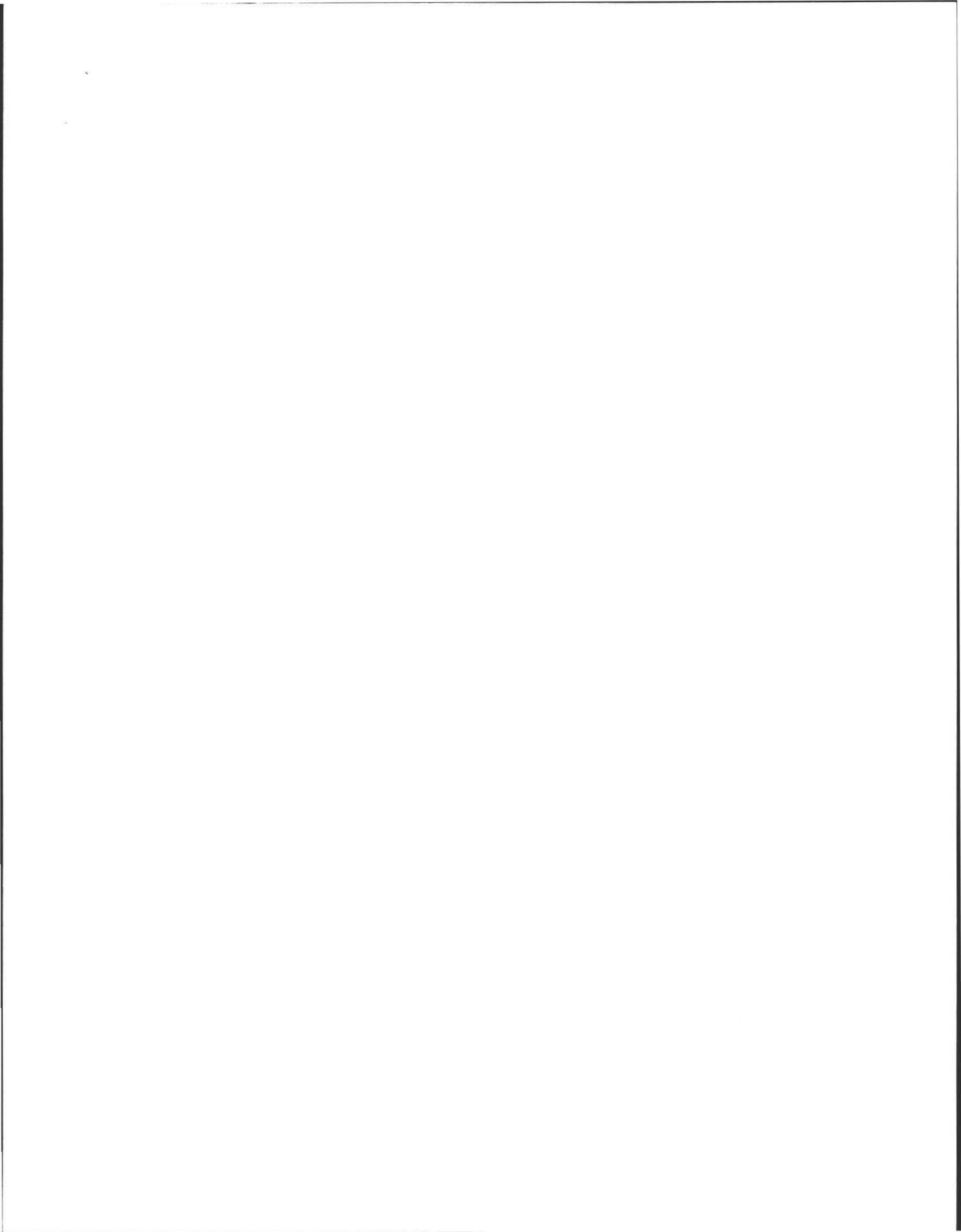
If not, what is the depth of naturally occurring pervious material? _____

Certification

I certify that on 6/95 (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 *Al* Date 4/20/12





PRECIPITATION TEST
INFORMATION

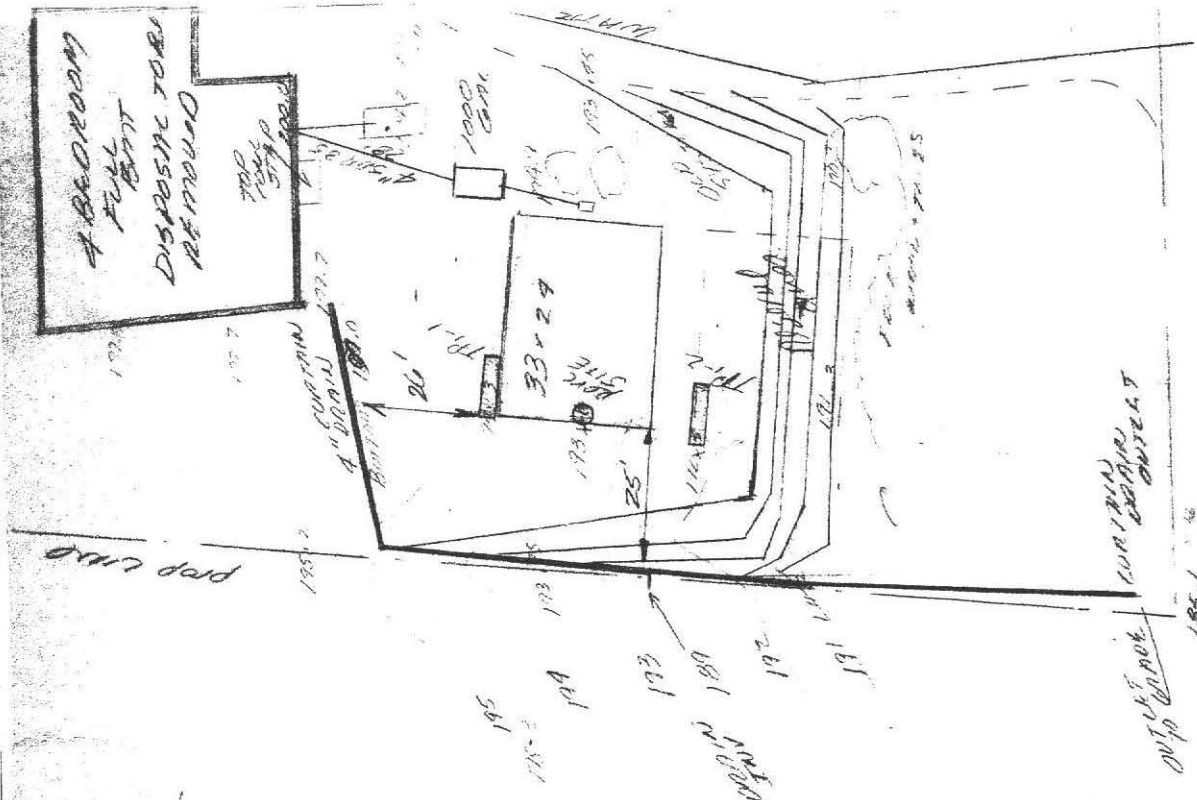
TEST #1
77-1

TEST #2
77-2



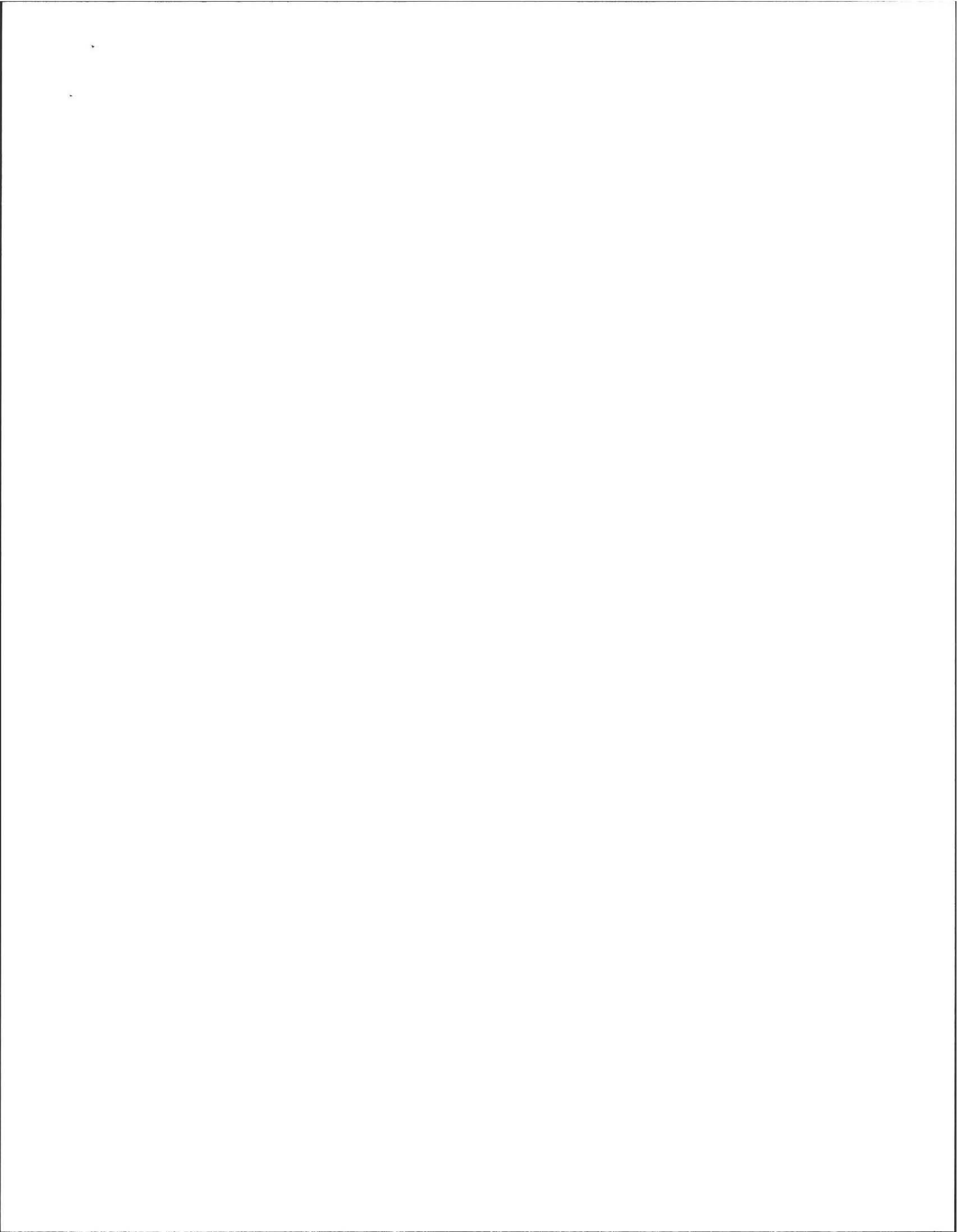
DATE SEPT 17, 1971

CORRAL PEREZ
78 HULST ROAD
50 ADJ. HERST MASS



HULST ROAD

OUTSIDE GRADE CURTAIN CHAIRS OUTLET





FEE 1

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF AMHARST MASS

Application for Disposal Works Construction Permit

Application is hereby made for a Permit to Construct () or Repair (X) an Individual Sewage Disposal System at:

CARROLL PEREZ 73 HULST ROAD AMHARST MASS

Location - Address: CARROLL PEREZ 73 HULST ROAD Amharst MA

Owner: _____ Address: _____
Installer: 4 BED ROOMS Address: EAST Sq. feet _____

Dwelling - No. of Bedrooms: _____ Expansion Attic: NO Garbage Grinder: NO
Other - Type of Building: RESIDE No. of persons: 2 Showers: 2 - Cafeteria: NO
Other fixtures: FULL BMT WITH DRAINS

Design Flow: 110 gallons per person per day. Total daily flow: 110 x 125 = 550 gallons.

Septic Tank - Liquid capacity: 1100 gallons Length: 26 Width: 5 Diameter: _____ Depth: 5

Disposal Trench - No. 1 Width: 24" Total Length: 33' Total leaching area: 792 sq. ft.

Seepage Pit No. _____ Diameter: _____ Depth below inlet: 10" Total leaching area: _____ sq. ft.

Other Distribution box: () Dosing tank: ()
Percolation Test Results: Performed by WILLIAM SIARUTA Date SOPT 17 1991

Test Pit No. 1: 0-0 minutes per inch Depth of Test Pit: 48 Depth to ground water: 55"
Test Pit No. 2: _____ minutes per inch Depth of Test Pit: _____ Depth to ground water: _____

Description of Soil: Tp-1 0-20 Old loam 20-32 med sand
32-55 sand & silt 55-120 clay
seepage @ 55 oxide 29"

Nature of Repairs or Alterations - Answer when applicable: Tp-2 0-14 Old loam 14-32 med sand
32-86 clay silt
stopped 6694

Agreement: oxide 29" Boyon

The undersigned agrees to install the aforescribed Individual Sewage Disposal System in accordance with the provisions of TITLE 5 of the State Sanitary Code - The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by the board of health.

Application Approved By: Carroll Perez Signed 10/24/91
David J. Jorgensen for G. H. O. Date 11/1/91

Application Disapproved for the following reasons: _____

Permit No. 91-14 Issued 11/1/91 Date _____

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amharst

Certificate of Compliance

THIS IS TO CERTIFY, That the Individual Sewage Disposal System constructed () or Repaired (X) by _____

at 73 Hulst Road Installer _____

has been installed in accordance with the provisions of TITLE 5 of The State Sanitary Code as described in the application for Disposal Works Construction Permit No. 91-14 dated _____

THE ISSUANCE OF THIS CERTIFICATE SHALL NOT BE CONSTRUED AS A GUARANTEE THAT THE SYSTEM WILL FUNCTION SATISFACTORILY.

DATE 5/13/92 Inspector: David J. Jorgensen

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amharst

No. 91-14

Disposal Works Construction Permit

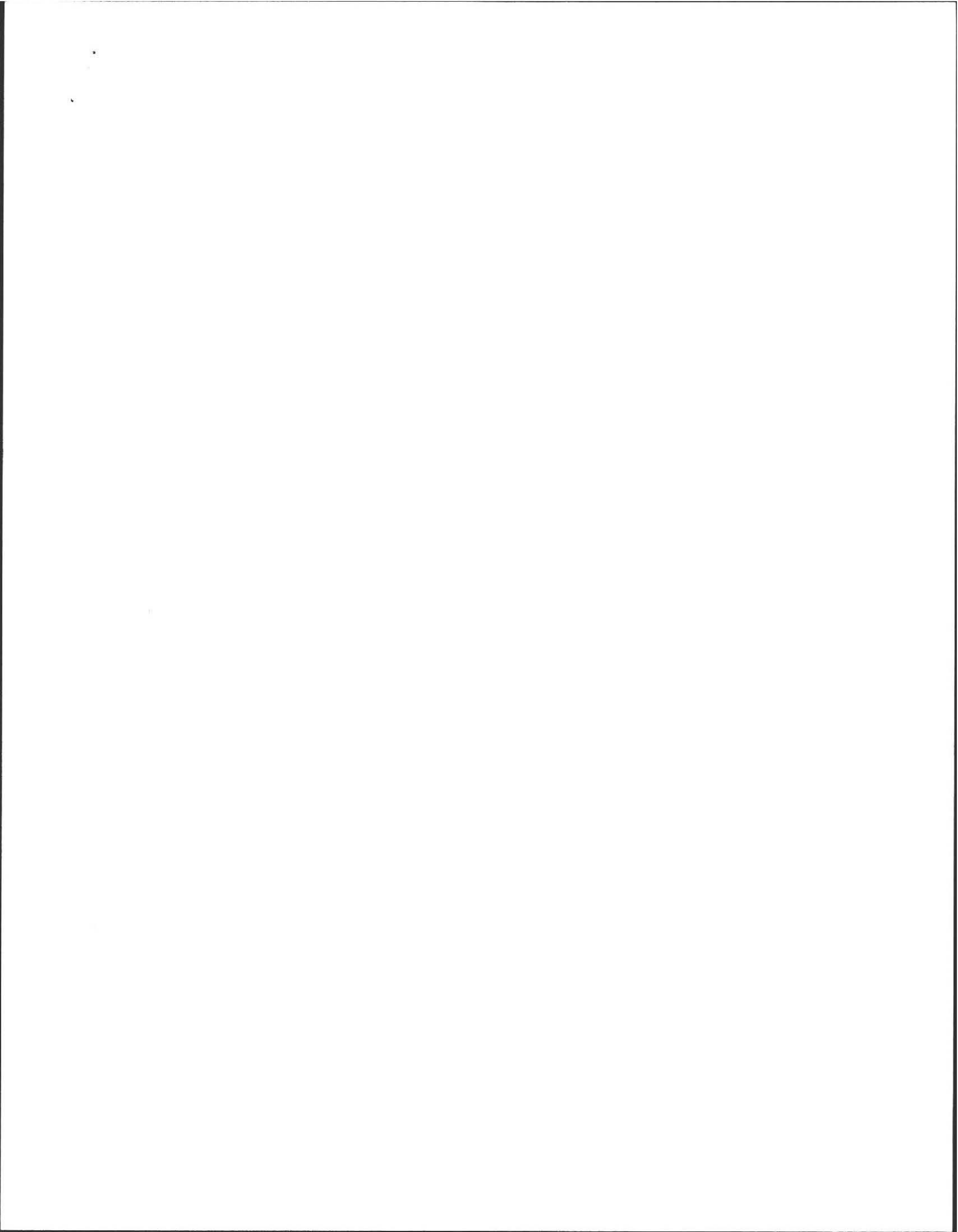
FEE 160.00

Permission is hereby granted Carroll Perez
to Construct () or Repair (X) an Individual Sewage Disposal System
at No. 73 Hulst Road

as shown on the application for Disposal Works Construction Permit No. 91-14 Dated 11/1/91

DATE 11/1/91 Board of Health: David J. Jorgensen for G. H. O.

CHECK OR FILL IN WHERE APPLICABLE



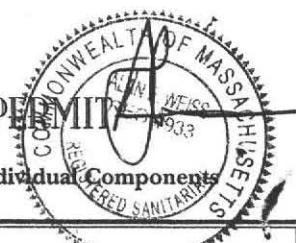
No. _____

FEE _____

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT



Application for a Permit to Construct() Repair() Upgrade() Abandon() - Complete System Individual Components

Location <u>73 Hulst Rd.</u>	Owner's Name <u>Carroll Perez</u>
Map/Parcel# <u>30 B / 78</u>	Address <u>73 Hulst Rd.</u>
Lot# <u>AKA (#241)</u>	Telephone# <u>413-253-5190</u>
Installer's Name <u>River Drive Exca.</u>	Designer's Name <u>Alan Weiss</u>
Address <u>Hadley, MA</u>	Address <u>Belchertown, MA.</u>
Telephone# <u>413-584-1814</u>	Telephone# <u>413-373-5957</u>

Type of Building 4 BR Dwelling Lot Size 0.92 Ac +/- sq. ft.
 Dwelling - No. of Bedrooms 4 BR. Garbage grinder No
 Other - Type of Building _____ No. of persons _____ Showers (), Cafeteria ()
 Other Fixtures _____

Design Flow (min. required) 810 gpd Calculated design flow 440 min Design flow provided 504 gpd
 Plan: Date 4/22/2012 Number of sheets 1 Revision Date providat

Title Septic System Repair P.W.

Description of Soil(s) Sand, Silt

Soil Evaluator Form No. _____ Name of Soil Evaluator A. Weiss Date of Evaluation 4/20/2012
 (Revised)

DESCRIPTION OF REPAIRS OR ALTERATIONS Complete new system. perc rate on file 2.6 min/in. (B. Sienta.) 1991

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees to not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed _____ Date _____

Inspections _____

No. _____

FEE _____

COMMONWEALTH OF MASSACHUSETTS

Board of Health, _____, MA.

CERTIFICATE OF COMPLIANCE

Description of Work: Individual Component(s) Complete System

The undersigned hereby certify that the Sewage Disposal System: Constructed (), Repaired (), Upgraded (), Abandoned ()

by: _____
 at _____

has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. _____, dated _____, Approved Design Flow _____ (gpd)

Installer _____

Designer: _____ Inspector: _____ Date: _____

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

No. _____

FEE _____

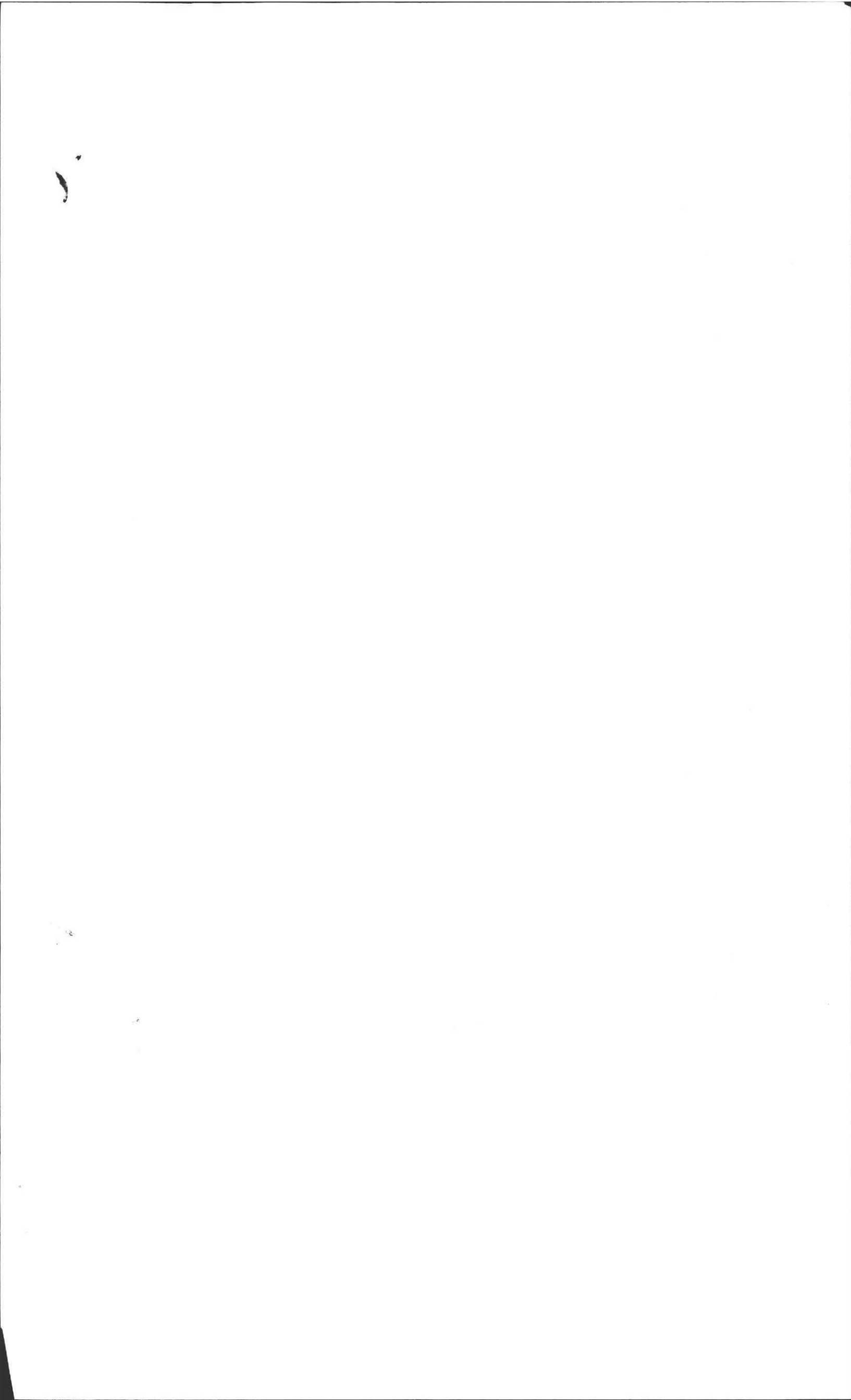
COMMONWEALTH OF MASSACHUSETTS

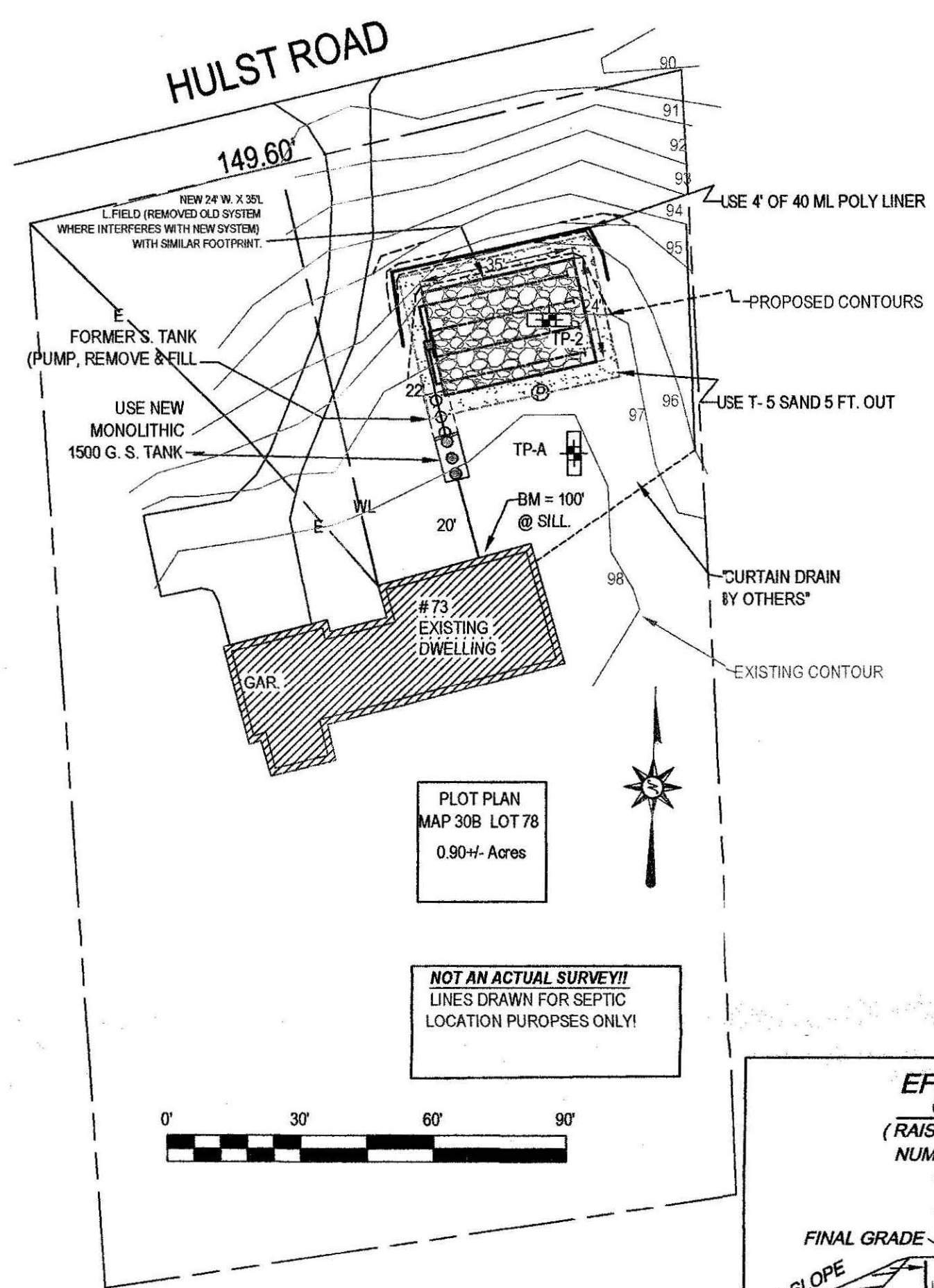
Board of Health, _____, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

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

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

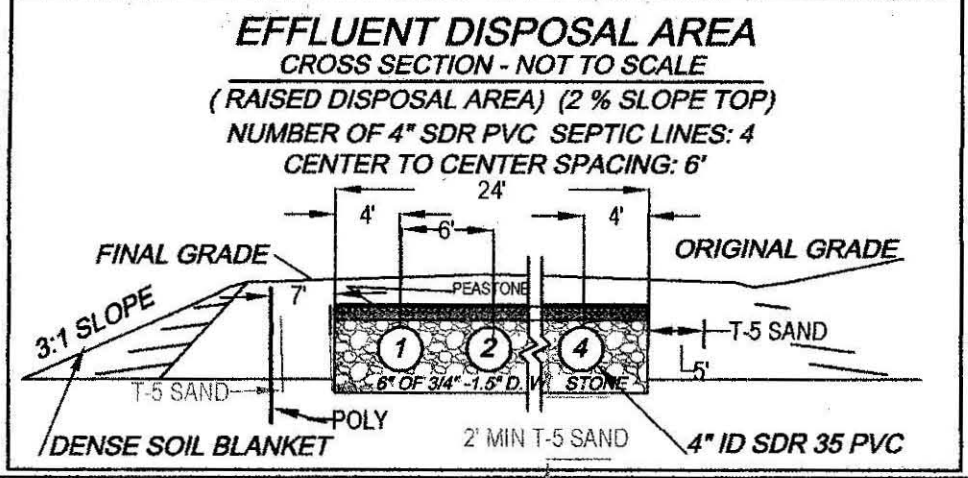
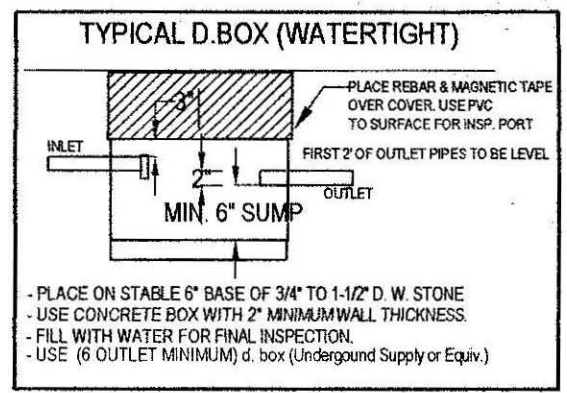
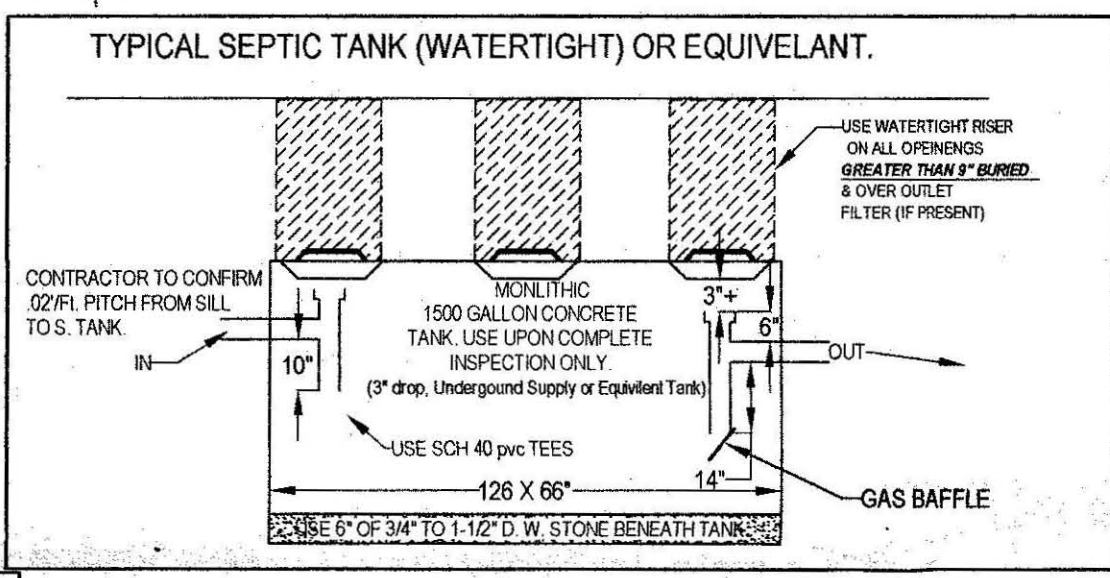
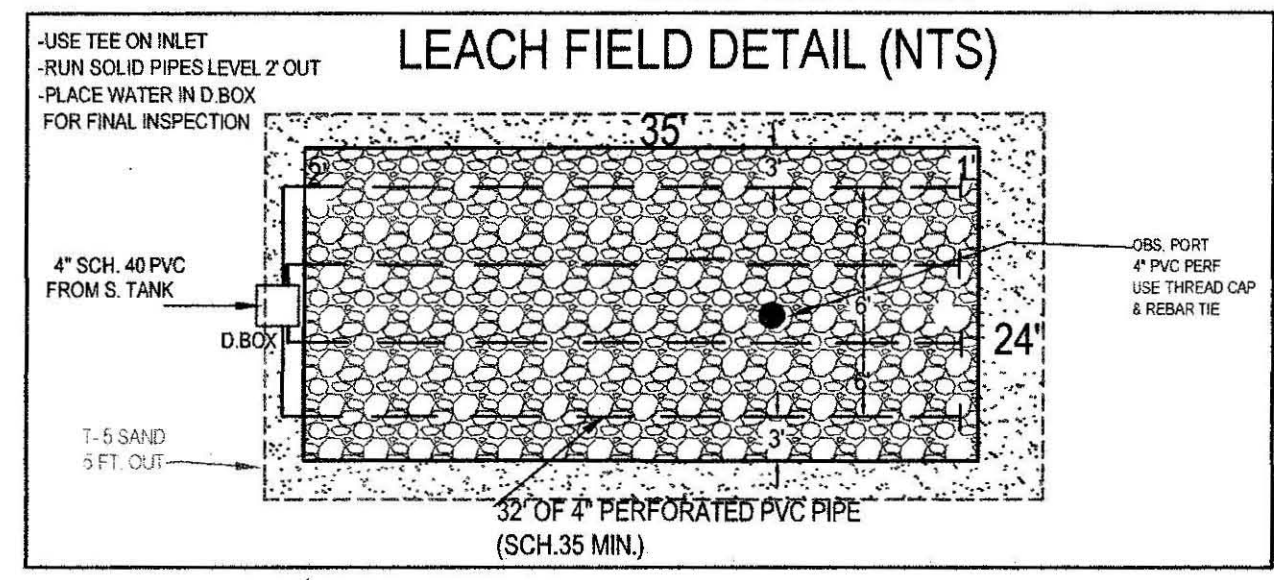
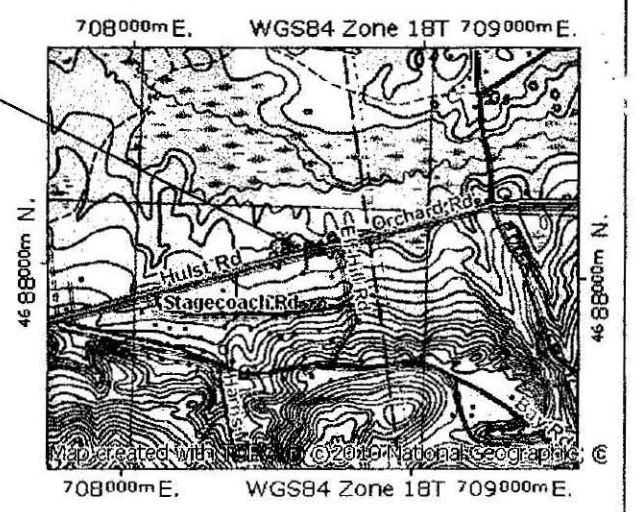




GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.

- HAVE TANK PUMPED EVERY 2 YEARS. PUMP & CHAMBER CHECKED ANNUALLY.
- MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER.
- DO NOT PLANT ANY TREES OR DEEP ROOTING SHRUBS WITHIN 10 FEET OF SYSTEM.
- USE ONLY LIQUID DETERGENTS & LOW FLOW WASHERS.
- WIPE ALL OIL AND GREASE FROM COOKWARE AND DISPOSE IN TRASH NOT SEPTIC.
- All Toilets and Faucets must be confirmed to not be leaking, because one leaking fixture can fail a septic system in ONE DAY.

SUBJECT SITE LOCATION



DESIGN NOTES AND CALCULATIONS:

1.) $4 \times$ (BEDROOM HOME) = 440 GPD MIN. REQUIRED.

- Use LEACHING FIELD 24' WIDE X 35' LONG WITH 6" OF $\frac{3}{4}$ TO $1\frac{1}{2}$ " DBL WASHED STONE BELOW INVERT :

- BOTTOM AREA: L. FIELD (24' W X 35' L) = 840 SF.

- TOTAL AREA: 840 SF X .60 GAL/SF = 504 GPD PROVIDED.

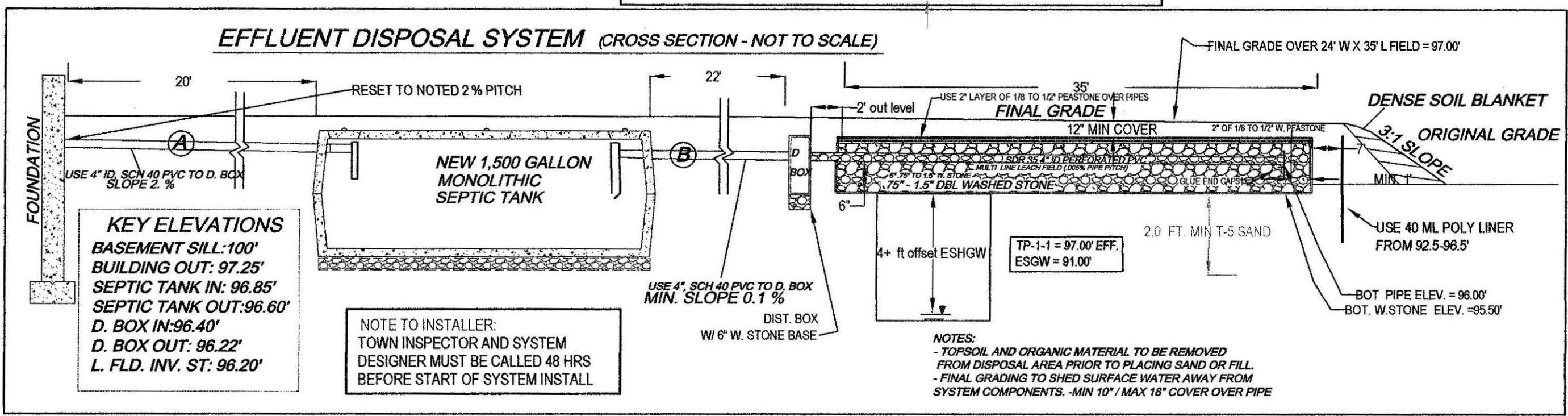
- GARBAGE DISPOSAL NOT PERMITTED. (A/C AND FURNACE CONDENSATE TUBES NOT ALLOWED)
- NO OTHER PRIVATE WELLS WITHIN 150 FEET OF SAS.
- NO OTHER WETLANDS WITHIN 100 FEET OF SAS.
- USE NEW S. TANK AS NOTED & MAINTAIN 0.02 PITCH FROM SILL TO S. TANK.
- INSTALL & INSPECT SCH. 40 TEES / BAFFLES (10" INLET, 14" OUTLET).

NOTE:

- ALL COMPONENTS OF NEW SYSTEM MUST BE MARKED WITH MAGNETIC TAPE. BE SURE TO MAINTAIN 3" CLEARANCE FROM TOP OF TEES TO BOTTOM OF TANK COVERS & BOXES.
- USE LARGE STYLE (6 OUTLET) D. BOX ONLY.
- ALL D. BOX OUTLET PIPES LEVEL FOR FIRST 2' BOXES MUST HAVE 2" CONC. WALLS

NOTE:

- D. BOXES WITH MORE THAN 9" OF COVER SOIL MUST HAVE RISERS TO 6" OF SURFACE.
- ANY /ALL GALLON CONCRETE RISERS MUST BE SECURED WITH STAINLESS STEEL SCREWS.
- USE (75"-1 1/2") STONE UNDER TANK & D. BOX FOR 6" FOR STABLE BASE.
- USE ONLY DBL. WASHED APPROVED (75"-1.5") FOR PLACEMENT IN LEACH AREA.
- USE PROPER SCH. 40 PVC TEES AS SHOWN.
- PRE & POST CONTOURS NOTED AS NECESSARY, RESERVE AS NOTED (not required for repairs).
- SLOPE CALCS (SEE CONTOURS). SUBGRADE INSP. REQD.
- USE FIELD DUE TO TOPOGRAPHY AND SPACE OF LOT WITH RESPECT TO LOCATION AND ELEVATION OF RESIDENCE & ESHGW (310 CMR 15.240)
- USE 2% MIN. SLOPE OVER SAS
- CLEAR TOP AND SUB TO 32" MIN. AS NEEDED (INSPECTION REQUIRED).
- CLEAR PAST BASE OF B (MIN. 32") & SCARIFY UNDER BED PRIOR TO TITLE V SAND/STONE PLACEMENT.
- EXCAVATE EXISTING LOAM, SUB AND ANY EXISTING DEBRIS, DIRTY FILL OR PRIOR SYSTEM IF PRESENT.
- SOIL EVALUATION BY A. WEISS, RS. (E. 314 JOH AGENT).
- DEPTH OF PERC. 48"
- PERC RATE = 2.6 MIN / IN (6.0 MIN/IN DESIGN RATE), PER B. SIERUTA 1991).
- CLASS 1, L. SAND SOIL RATING, CLASS 2 USED FOR DESIGN.
- NO TREES WITHIN 10 FT. OF NEW LEACH AREA.
- ENGINEER TO INSPECT SUBGRADE, TOWN AND ENGINEER INSPECT AT FINAL.
- BM=100.00 @ (SILL, as noted), CONFIRM PROPER PIPE SLOPES
- USE/INSPECT SCH. 40 PIPE FOR PIPE FROM HOUSE TO NEW OR EXISTING TANK
- GRADE MULCH AND SEED OVER SAS AS NOTED.
- INSTALLATION IN LOW GROUNDWATER SEASON RECOMMENDED.
- USE OBSERVATION PORT NEAR CENTER OF STONE BED HAVE 4" PERFORATED, PVC INSPECTION PORTALS TO BOTTOM OF STONE BED, WITH RISER TO 3" OF SURFACE & THREADED CAP & MARK WITH RE-BAR.



TEST PIT LOG: 04/20/2012

TP A (97.0')		SOIL EVALUATOR: A. WEISS, RS		DATE OF EVALUATION: 09.17.1991	
DEPTH	HORIZ.	TEXTURE	MOISTURE (%)	DEPTH	HORIZ.
0-12"	A	FSL	10 YR 3.3	0-20"	A
12-24"	Bw	LS	10 YR 5.8	20-32"	Bw
24-78"	C1	FS	2.5 Y 4.3	32-55"	C1
78-98"	C2	SILT	2.5 Y 4.1	55-120"	C2

OXIDES: 72" 2.5 Y 4.1, 10 YR 5.8

EHWT: 72"

STANDING H2O: -

WEEPING: -

BEDROCK: 120"+

SEPTIC SYSTEM REPAIR PLAN FOR CAROLL PEREZ
73 HULST ROAD
AMHERST, MA

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

PHONE: (413) 323-5957 FAX: (413) 323-4916
DATE: 04.22.2012 DRAWN BY: ALAN WEISS
SCALE: 1"=30' REVISIONS: 112-3856-0413

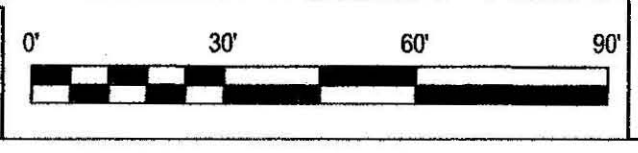
GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.

- HAVE TANK PUMPED EVERY 2 YEARS. 2.) MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER.
- DO NOT PLANT ANY TREES OR DEEP ROOTING SHRUBS WITHIN 10 FEET OF SYSTEM. 4.) USE ONLY LIQUID DETERGENTS & LOW FLOW WASHERS.

NOTE TO HOMEOWNER AND CONTRACTOR:
CONNECTIONS FROM HEATING SYSTEM, AIRCONDITIONERS, SUMP PUMPS, WATER WELL FILTRATION UNITS AND HEAT PUMPS ARE NOT ALLOWED, SANITARY WATER CONNECTIONS ONLY PERMITTED.

ATTENTION INSTALLER!!
CALL DIG SAFE BEFORE YOU DIG!! MASSACHUSETTS STATE LAW CHAPTER 82 SECTIONS 4) - 40E REQUIRE THAT PREMARKING OF GAS, ELECTRIC, WATER, TELEPHONE AND CABLE T.V. UTILITY LINES BE MADE A MINIMUM OF 72 HOURS PRIOR TO GROUND BREAK FOR ANY EXCAVATION.

NOTE: INSTALLER MUST CONTACT ENGINEER/BD OF HEALTH 48 HOURS PRIOR TO SUBGRADE INSPECTION. INSTALLER MUST HAVE ALL BREAK OUT FILL ON SITE AND IN PLACE PRIOR TO SIGN OFF BY ENGINEER AT TIME OF FINAL INSPECTION OR APPROVAL WILL NOT BE GIVEN TO BACKFILL.

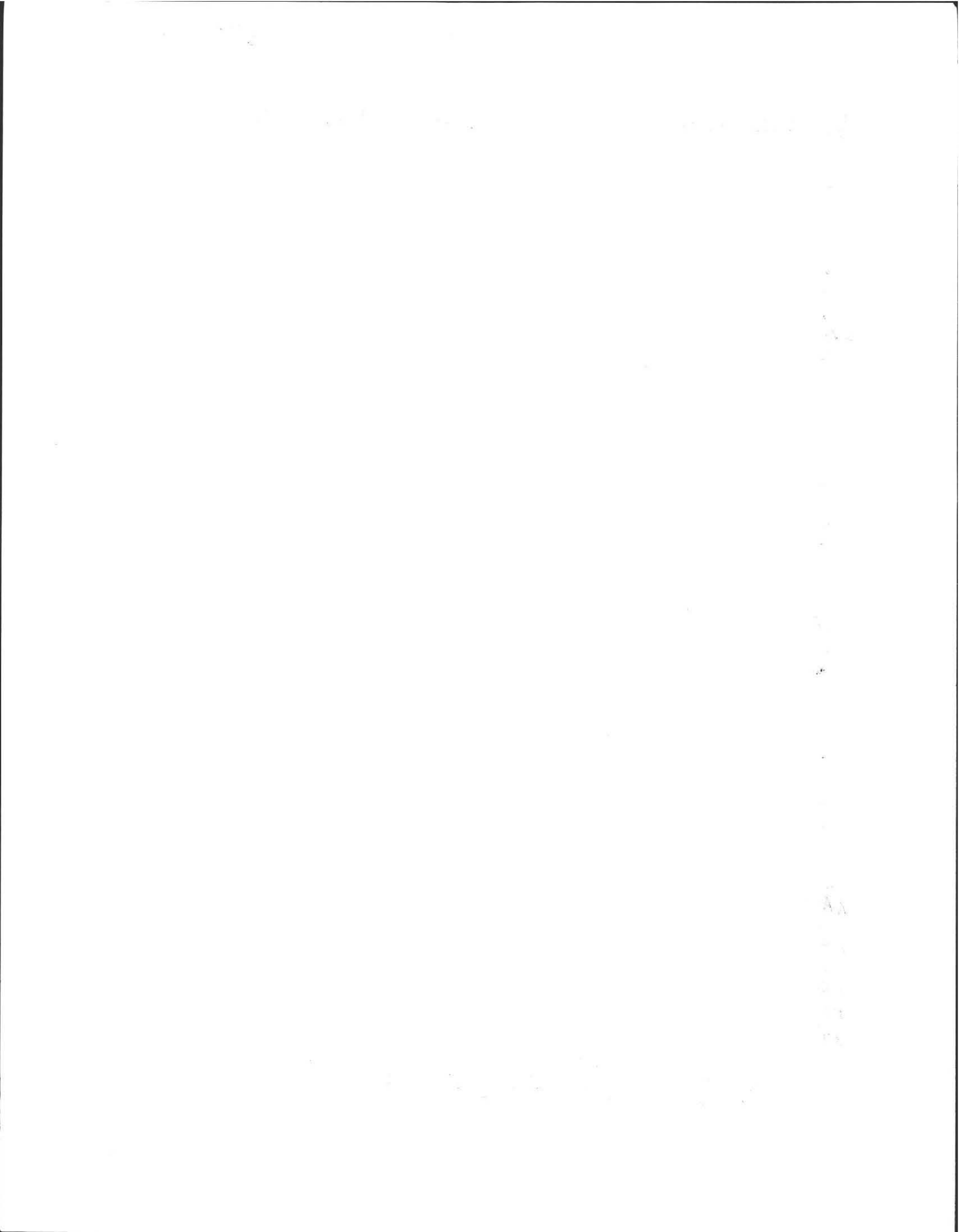


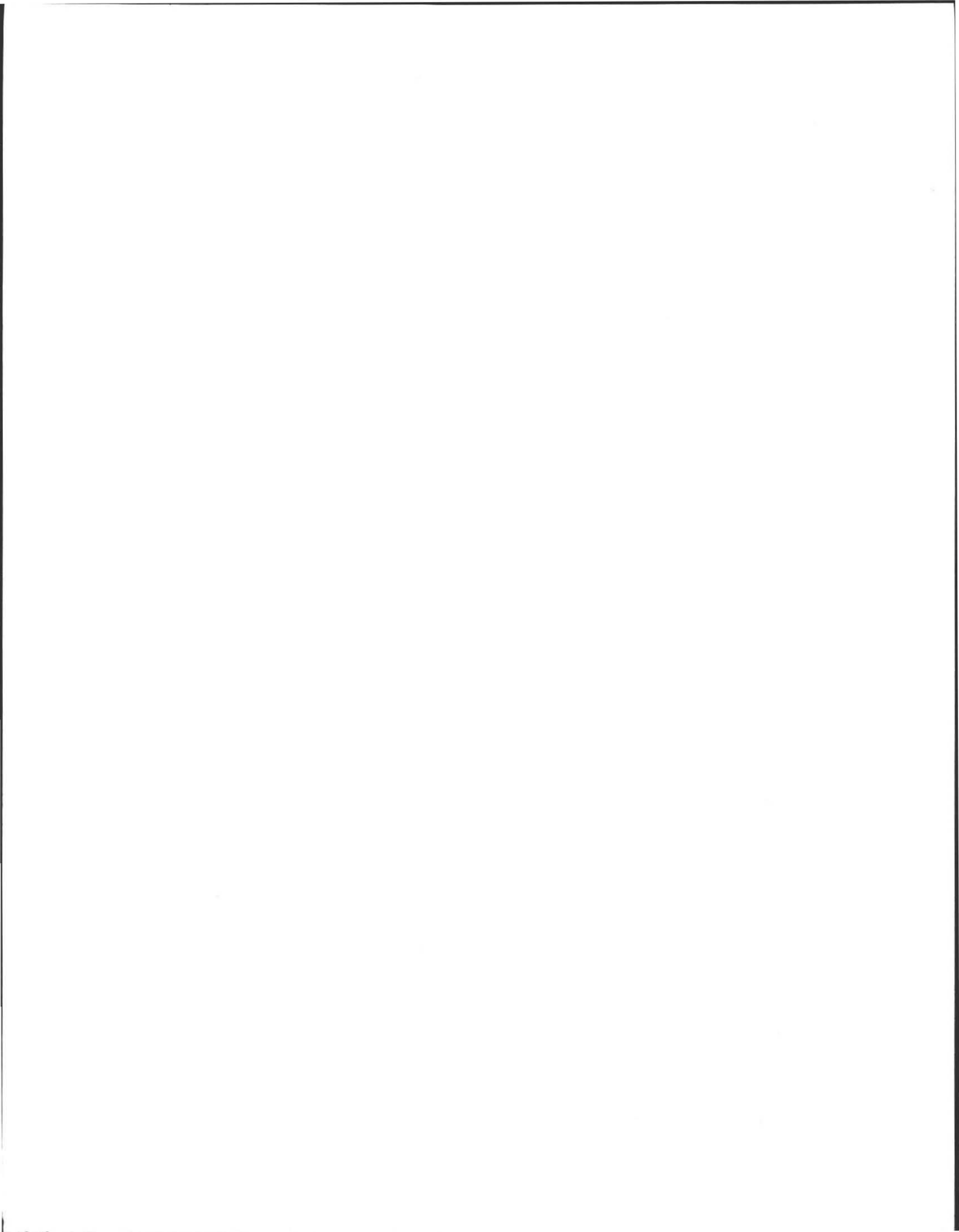
4/29/2012

Plan: 73 HULST ROAD Designed by: ALAN WEISS, RS
CHECK LIST FOR SEPTIC PLANS

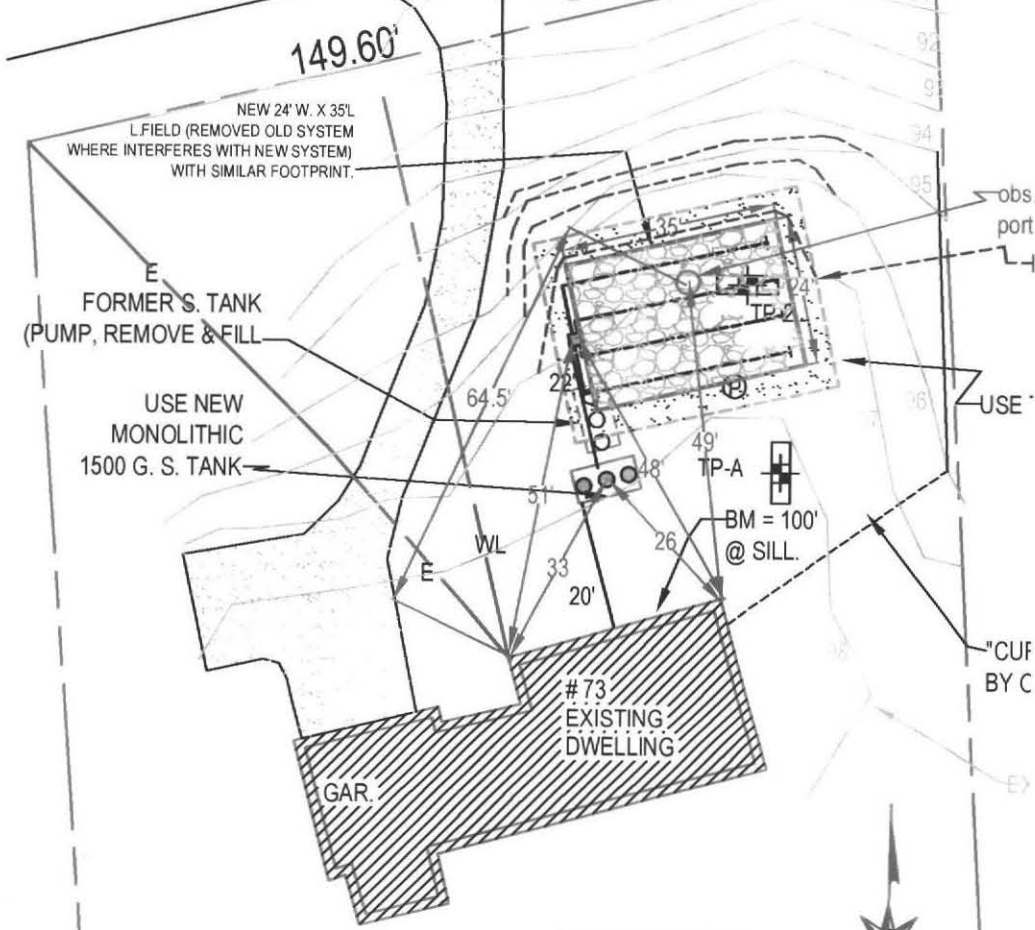
- Application page attached to plan
- PE or RS stamp, date, signature
- Variances to property line setback distances must have Surveyor Stamp 15220 (3)
- Legal boundaries noted
- Easements noted
- Dwellings and buildings existing or proposed noted
- Location of driveway or parking areas, other impervious areas
- Location and dimensions of reserve area (new) CMR 15.248(1), 15.104(4)
- 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. 5' Tank
- Well statement if applicable
- 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
- When alternative technology is required, complete plan and specs, including hydraulic profile
- Trenches preferred over beds CMR 15.240 (6)
- Buoyancy calculations for tanks or components partly below H2O table 15.221(8) p. 56
- 3 to 1 slope outside of mound, toe ending 5 feet from property line
- Local upgrade requests on the plan
- Local upgrade forms attached to application
- Note on plan listing all variances sought in conjunction with the plan

NOTES: 4/29/2012 Edward R. Spiller





HULST ROAD



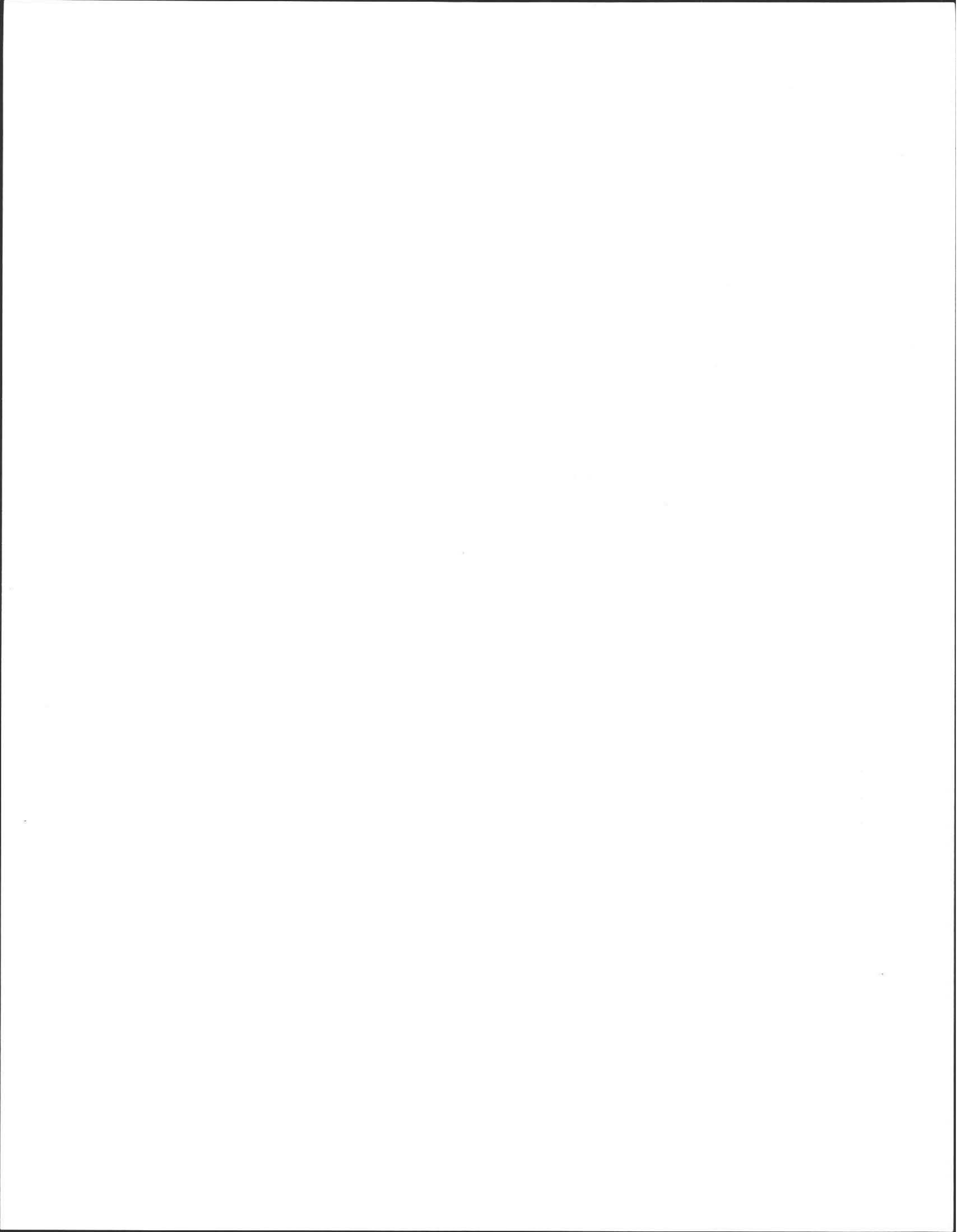
AS BUILT
05.03.2012
MAP 30B LOT 78
0.90+/- Acres



NOT AN ACTUAL SURVEY!!
LINES DRAWN FOR SEPTIC
LOCATION PURPOSES ONLY!







CUST NAME
4 BOLTWOOD AVENUE
05/08/12
CITY, ST, ZIP

***TOWN OF A TOWN HAL
AMHERST M REFERENCE
DATE/TIME 13:12

CUST NAME

0
DEPT

DE HEA011

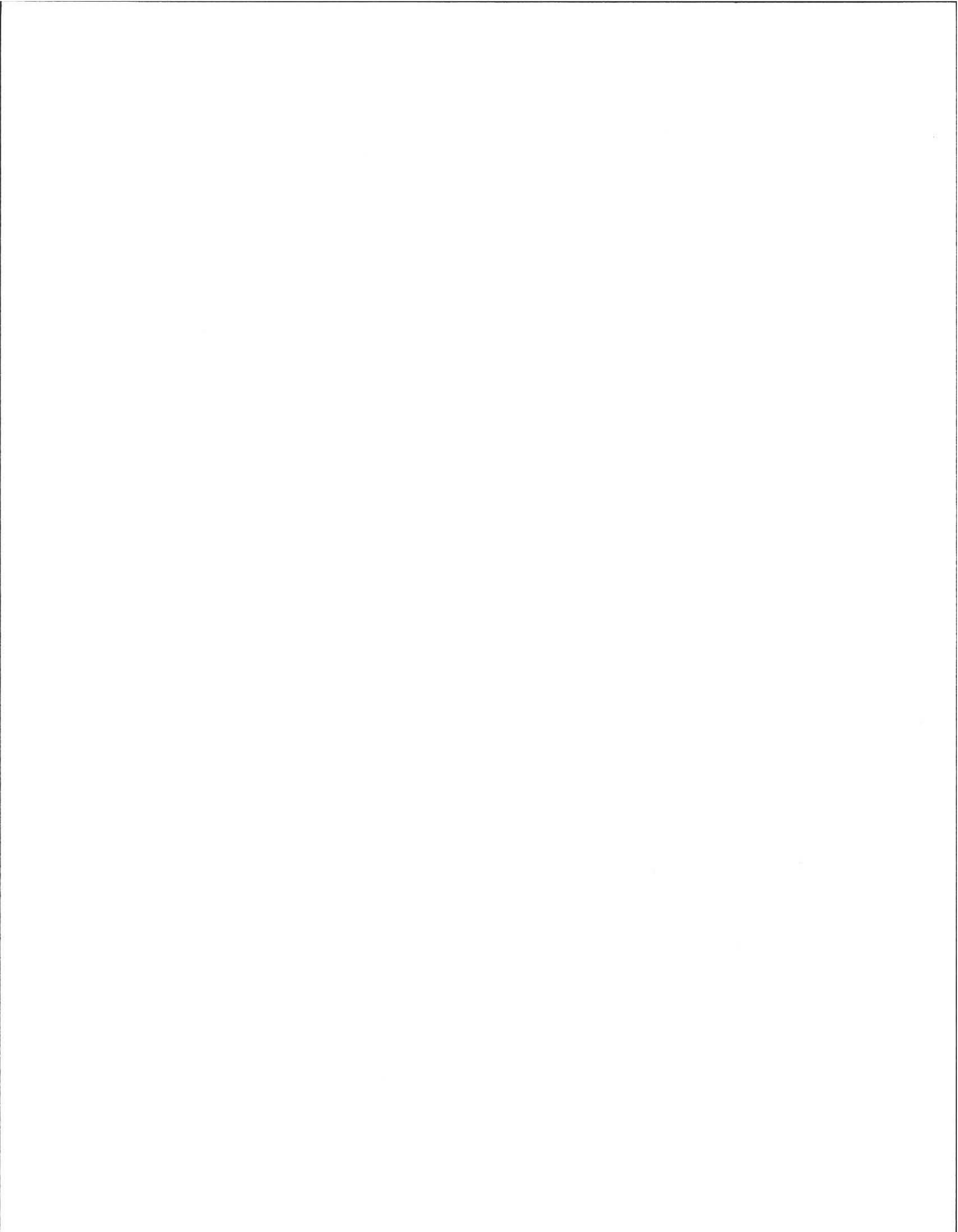
PERCOLATIO 300.

RECPT TOTAL

300.00
QUA CHECK

5360

AMOUNT



CUST NAME
4 BOLTWOOD AVENUE
05/08/12
CITY, ST, ZIP

***TOWN OF A TOWN HAL
AMHERST M REFERENCE
DATE/TIME 13:14

CUST NAME

0
DEPT

DE HEA017

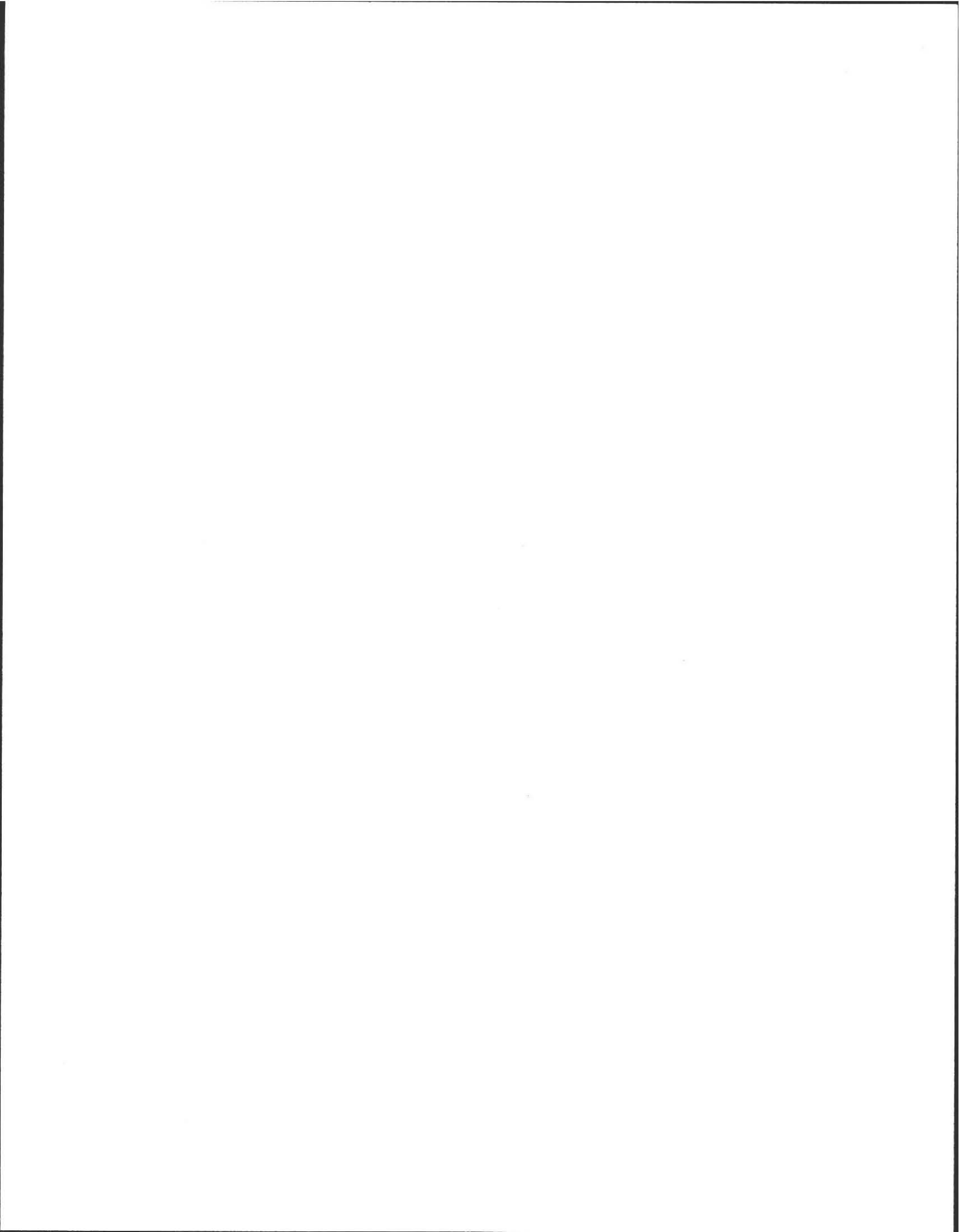
SEPTIC TAN 150.

RECPT TOTAL

150.00
CARROLL V. QUA CHECK

5360

AMOUNT



#73

JUN 02 1992

WILLIAM J. SIERUTA, P.E.
REGISTERED PROFESSIONAL ENGINEER
46 UPLAND ROAD
HOLYOKE, MASSACHUSETTS 01040
(413) 532-8525

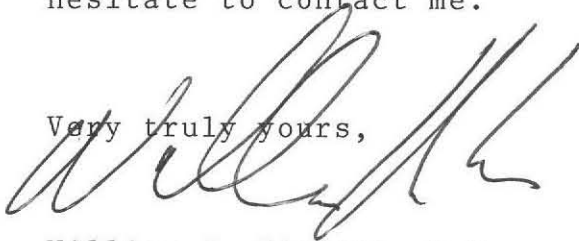
Board of Health
Boltwood Walk
Amherst, MA. 01002

Subject: Septic system installation
Carol Perez
73 Hulst Road
South Amherst, MA. 01002

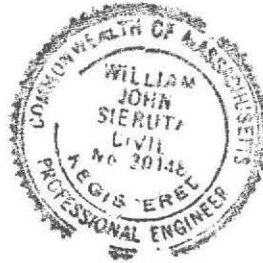
The subject septic system has been installed in accordance with the approved plans, 310 CMR 15 and local Board of Health regulations. The only noted change is the actual inlet line alignment as shown on print. (red lined)

If you need any additional information please do not hesitate to contact me.

Very truly yours,

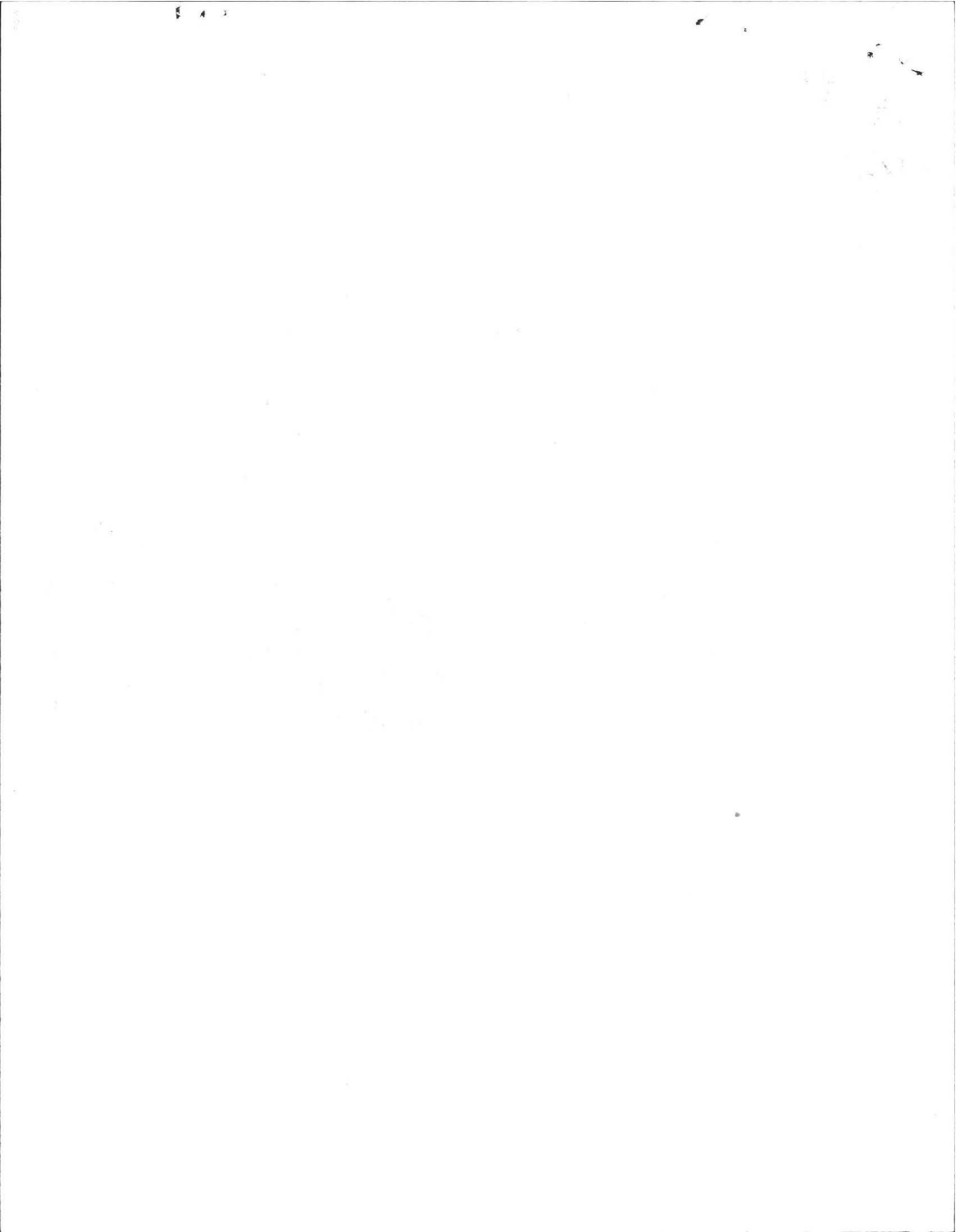


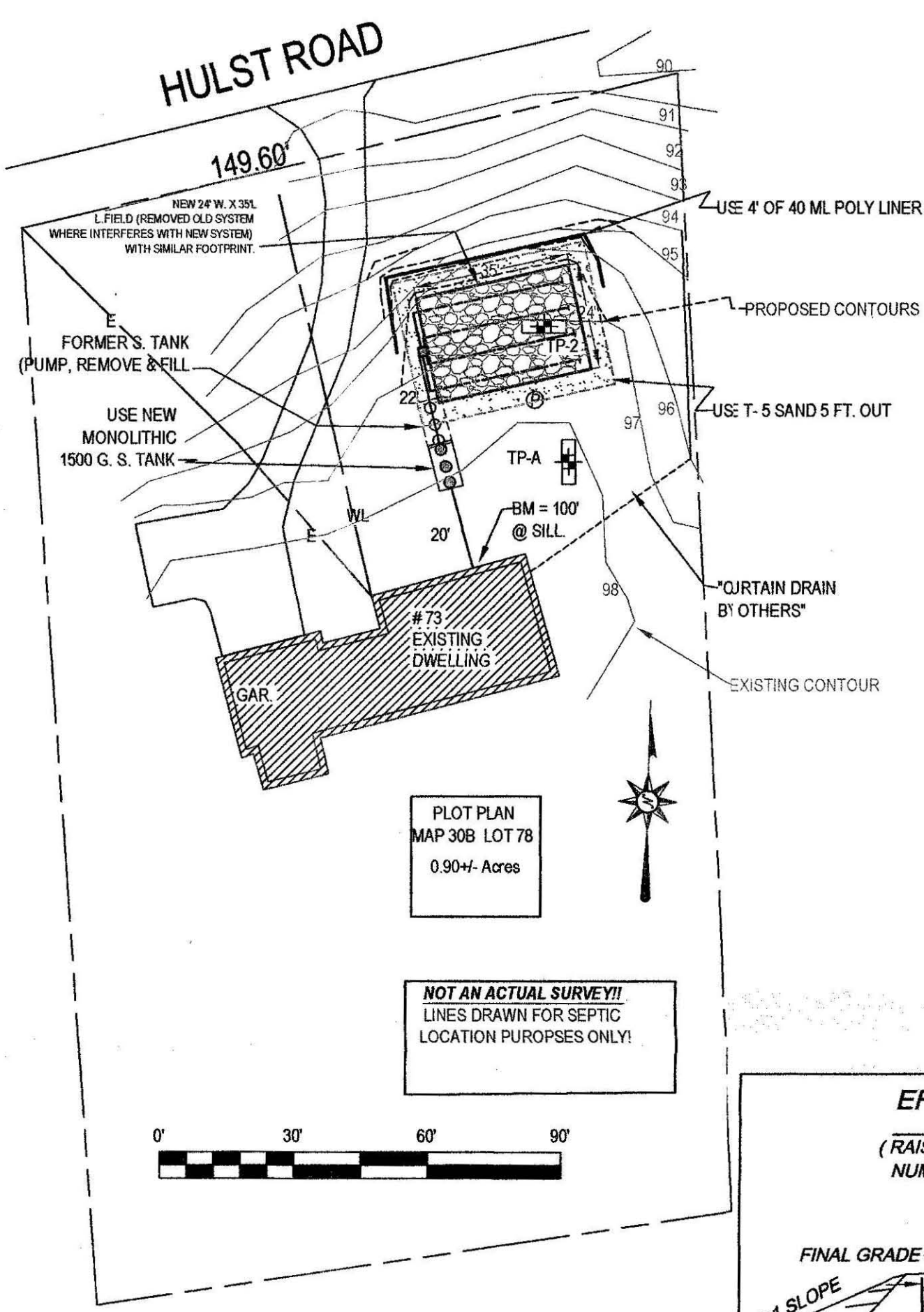
William J. Sieruta, P.E.



cc:C. Perez
File

WJS:mbs

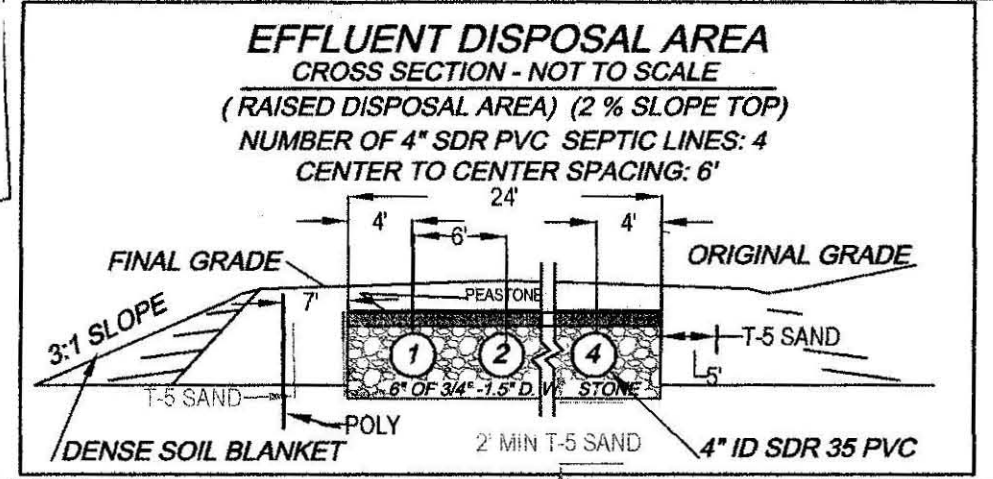
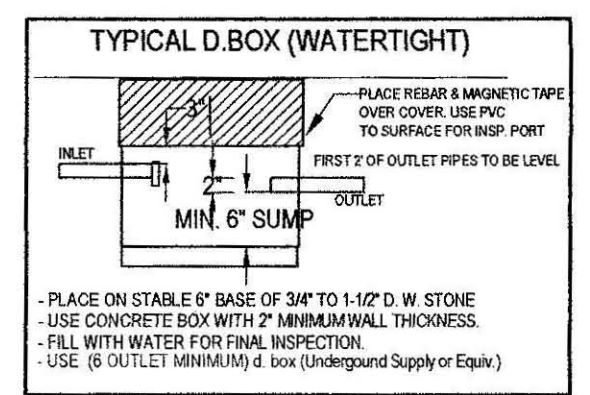
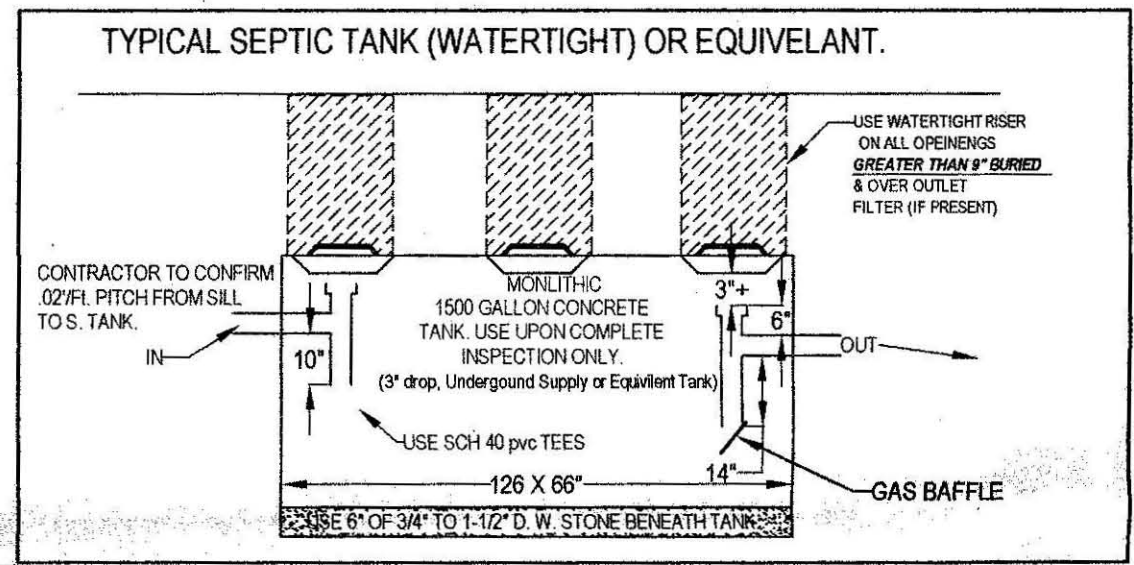
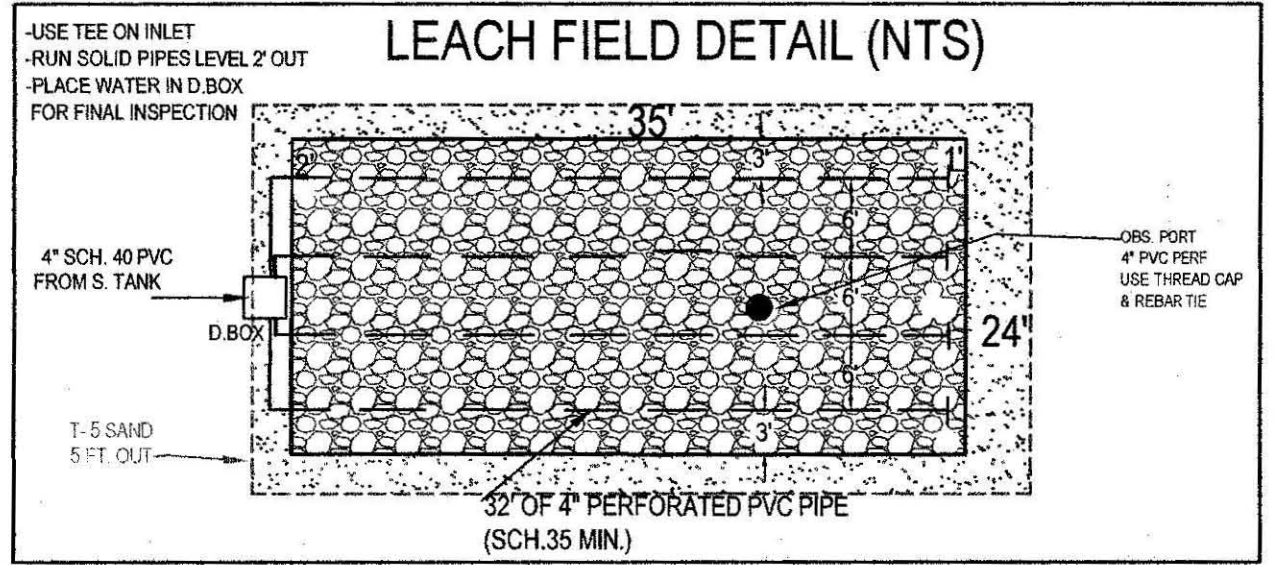
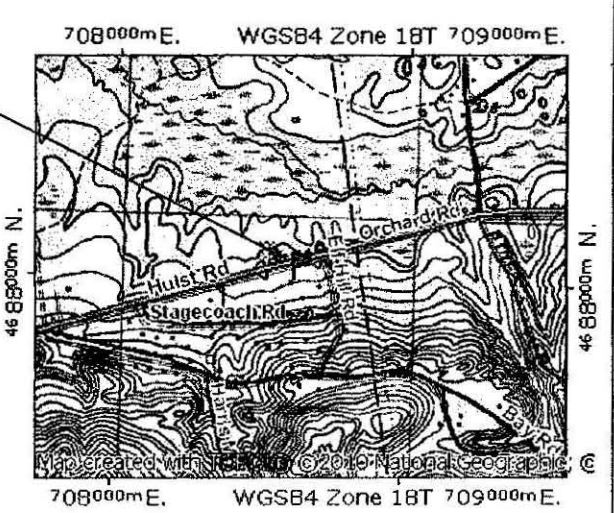




GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.

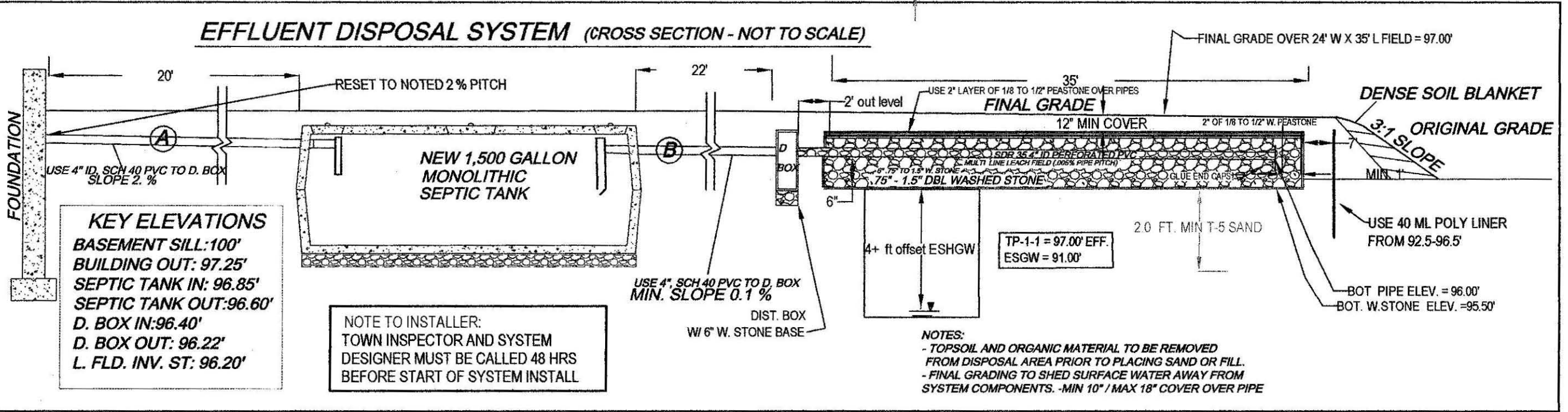
- 1.) HAVE TANK PUMPED EVERY 2 YEARS. PUMP & CHAMBER CHECKED ANNUALLY.
- 2.) MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER.
- 3.) DO NOT PLANT ANY TREES OR DEEP ROOTING SHRUBS WITHIN 10 FEET OF SYSTEM.
- 4.) USE ONLY LIQUID DETERGENTS & LOW FLOW WASHERS.
- 5.) WIPE ALL OIL AND GREASE FROM COOKWARE AND DISPOSE IN TRASH NOT SEPTIC.
- 6) All Toilets and Faucets must be confirmed to not be leaking, because one leaking fixture can fail a septic system in ONE DAY

SUBJECT SITE LOCATION



DESIGN NOTES AND CALCULATIONS:

- 1.) 4 (BEDROOM HOME) = 440 GPD MIN. REQUIRED,
 - Use LEACHING FIELD 24' WIDE X 35' LONG WITH 6" OF 3/4 TO 1/2" DBL WASHED STONE BELOW INVERT
 - BOTTOM AREA: L. FIELD (24' W X 35' L) = 840 SF.
 - TOTAL AREA: 840 SF X .60 GAL/SF = 504 GPD PROVIDED.
3. GARBAGE DISPOSAL NOT PERMITTED. (A/C AND FURNACE CONDENSATE TUBES NOT ALLOWED)
4. NO OTHER PRIVATE WELLS WITHIN 150 FEET OF SAS.
5. NO OTHER WETLANDS WITHIN 100 FEET OF SAS,
6. USE NEW S. TANK AS NOTED & MAINTAIN 0.02 PITCH FROM SILL TO S. TANK
 - INSTALL & INSPECT SCH. 40 TEES / BAFFLES (10" INLET, 14" OUTLET),
- NOTE:**
 - ALL COMPONENTS OF NEW SYSTEM MUST BE MARKED WITH MAGNETIC TAPE. BE SURE TO MAINTAIN 3" CLEARANCE FROM TOP OF TEES TO BOTTOM OF TANK COVERS & BOXES.
7. USE LARGE STYLE (6 OUTLET) D.BOX ONLY.
- 7A ALL D. BOX OUTLET PIPES LEVEL FOR FIRST 2'. BOXES MUST HAVE 2'+ CONC. WALLS
 - NOTE:**
 - D. BOXES WITH MORE THAN 9" OF COVER SOIL MUST HAVE RISERS TO 6" OF SURFACE.
- 7B ANY ALL PLASTIC RISERS MUST BE SECURED WITH STAINLESS STEEL SCREWS.
8. -USE (.75"-1 1/2") STONE UNDER TANK & D. BOX FOR 6" FOR STABLE BASE.
 - USE ONLY DBL. WASHED APPROVED (.75"-1.5") FOR PLACEMENT IN LEACH AREA.
9. USE PROPER SCH. 40 PVC TEES AS SHOWN.
10. PRE & POST CONTOURS NOTED AS NECESSARY, RESERVE AS NOTED (not required for repairs).
11. SLOPE CALCS (SEE CONTOURS), SUBGRADE INSP. REQD.
13. USE FIELD DUE TO TOPOGRAPHY AND SPACE OF LOT WITH RESPECT TO LOCATION AND ELEVATION OF RESIDENCE & ESHGW (310 CMR 15.240)
14. USE 2% MIN. SLOPE OVER SAS
 - CLEAR TOP AND SUB TO 32" MIN. AS NEEDED (INSPECTION REQUIRED).
 - CLEAR PAST BASE OF B (MIN. 32") & SCARIFY UNDER BED PRIOR TO TITL V SAND/STONE PLACEMENT.
 - EXCAVATE EXISTING LOAM, SUB AND ANY EXISTING DEBRIS, DIRTY FILL OR PRIOR SYSTEM IF PRESENT.
15. SOIL EVALUATION BY (A. WEISS, RS. & E. SMITH, BOH AGENT, 2012) (R. SIERUTA, AND D ZAROZINSKI, 1991.)
 - DEPTH OF PERC. 48"
 - PERC RATE = 2.6 MIN / IN (6.0 MIN/IN DESIGN RATE), PER B. SIERUTA 1991).
 - CLASS 1, L. SAND SOIL RATING, CLASS 2 USED FOR DESIGN.
16. NO TREES WITHIN 10 FT. OF NEW LEACH AREA.
17. ENGINEER TO INSPECT SUBGRADE, TOWN AND ENGINEER INSPECT AT FINAL.
18. BM=100.00 @ (SILL., as noted), CONFIRM PROPER PIPE SLOPES
 - USE/INSPECT SCH. 40 PIPE FOR PIPE FROM HOUSE TO NEW OR EXISTING TANK
19. GRADE MULCH AND SEED OVER SAS AS NOTED.
20. INSTALLATION IN LOW GROUNDWATER SEASON RECOMMENDED.
21. USE OBSERVATION PORT NEAR CENTER OF STONE BED HAVE 4" PERFORATED, PVC INSPECTION PORTALS TO BOTTOM OF STONE BED, WITH RISER TO 3" OF SURFACE & THREADED CAP & MARK WITH RE-BAR.



TEST PIT LOG: 09/20/2012

TP A (97.0')		SOIL EVALUATOR: A. WEISS, RS		DATE OF EVALUATION: 09.17.1991	
DEPTH	HORIZ	TEXTURE	COLOUR (MUNSELL)	DEPTH	HORIZ
0-12"	A	FSL	10 YR 3.3	0-20"	A
12-24"	Bw	LS	10 YR 5.8	20-32"	Bw
24-78"	C1	FS	2.5 Y 4.3	32-55"	C1
78-98"	C2	SILT	2.5 Y 4.1	55-120"	C2

OXIDES: 72" 2.5 Y 4.1, 10 YR 5.8
 EHWI: 72"
 STANDING H2O: --
 WEEPING: --
 BEDROCK: 120"+

SEPTIC SYSTEM REPAIR PLAN FOR CAROLL PEREZ
 73 HULST ROAD
 AMHERST, MA

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

PHONE: (413) 323-5957
 FAX: (413) 323-4916
 E-Mail: AWEISS@charter.net

DATE: 04.22.2012
 DRAWN BY: ALAN WEISS
 SCALE: 1"=30'

REVISIONS:
 REVISED: []
 DRAWING NUMBER: 112-3856-0413

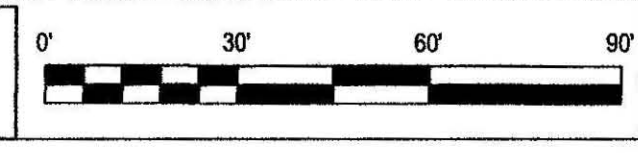
GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.

- 1.) HAVE TANK PUMPED EVERY 2 YEARS.
- 2.) MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER.
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NOTE TO HOMEOWNER AND CONTRACTOR:
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ATTENTION INSTALLER!!
 CALL DIG SAFE BEFORE YOU DIG!! MASSACHUSETTS STATE LAW CHAPTER 82 SECTIONS 41 - 40E REQUIRE THAT PREMARKING OF GAS, ELECTRIC, WATER, TELEPHONE AND CABLE T.V. UTILITY LINES BE MADE A MINIMUM OF 72 HOURS PRIOR TO GROUND BREAK FOR ANY EXCAVATION.

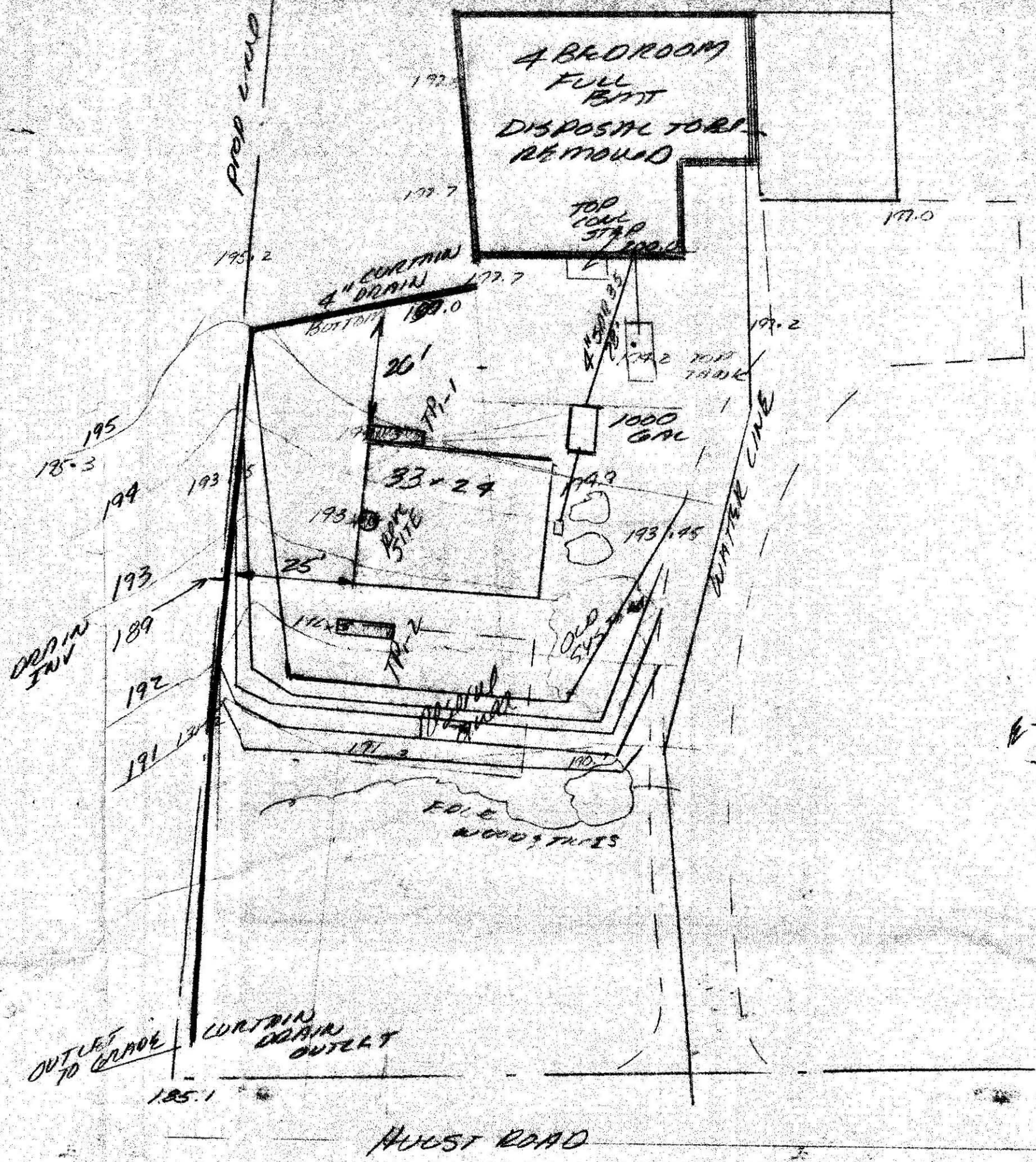
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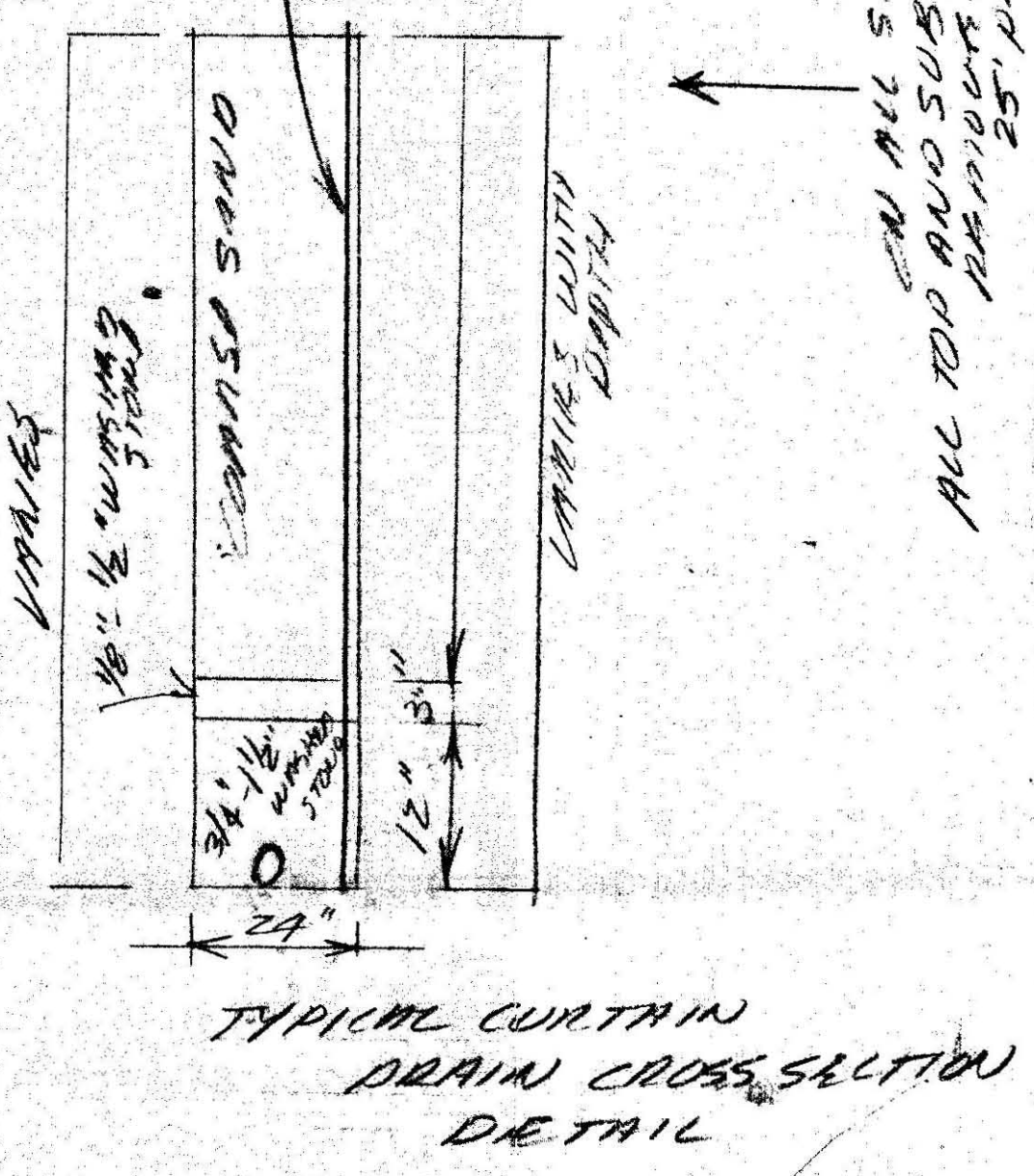
PERCOLATION TEST INFORMATION

TEST PIT TPI-1		TEST PIT TPI-2	
20"	0-20" O/S LOAM	14"	0-14" O/S LOAM
12"	20-32" MED SAND	18"	14-32" MED SAND
23"	32-55" SAND & SILT	57"	SILT & SILTY CLAY
65"	55-120" CLAY	32-86"	SILT CLAY

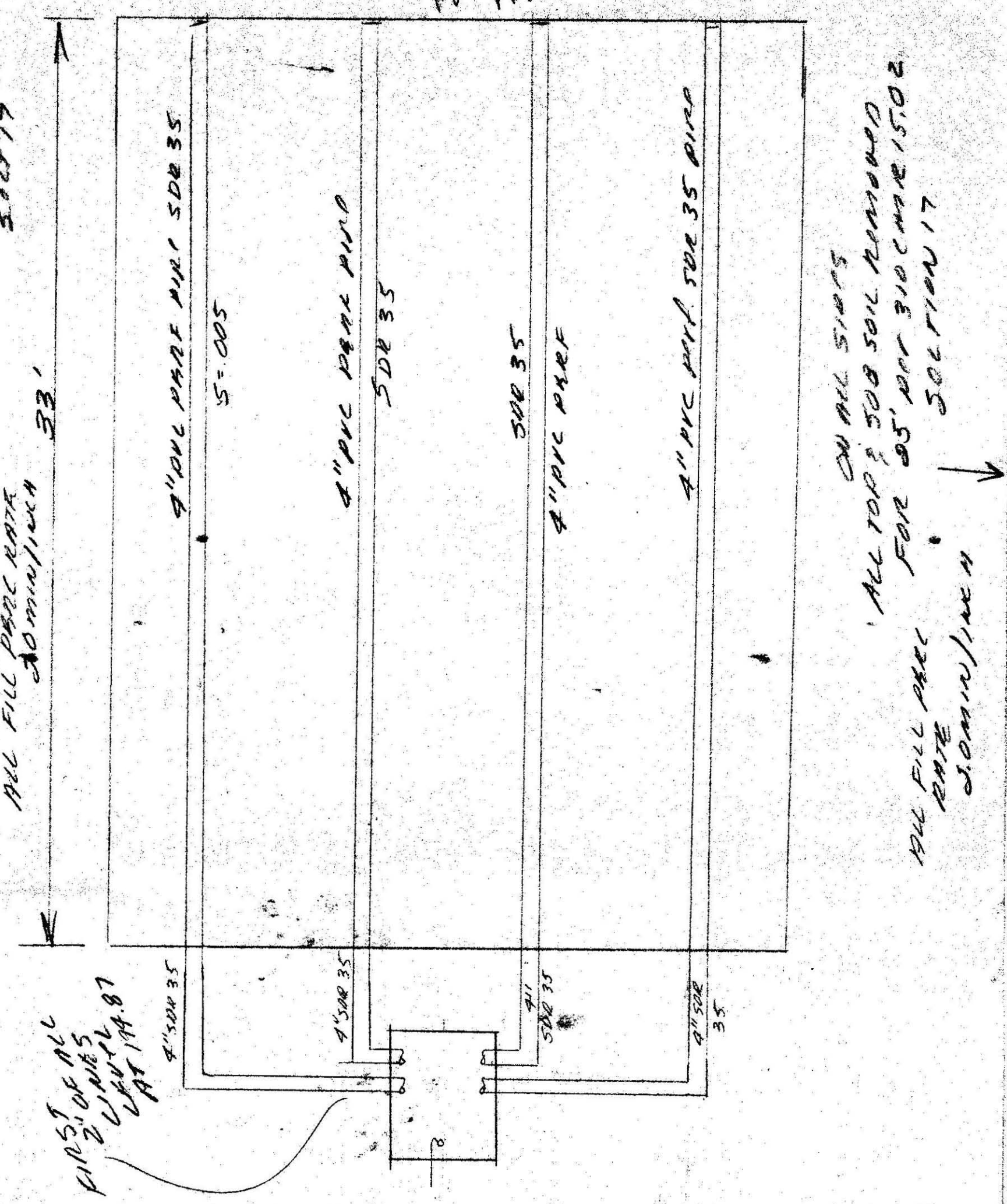
ONIDES @ 24"
 SCOPAZI @ 55"
 DATE SEPT 17, 1991
 CARROLL PEREZ
 73 HULST ROAD
 50 AMHERST MASS
 ENG WJ SIERUTA PE
 WITNESS D. ZARAZINSKI BOH
 PERMEABILITY TEST
 DEPTH 48"
 PERM RATE 2.66 MIN/INCH DESIGN RATE 6.0 MIN/INCH



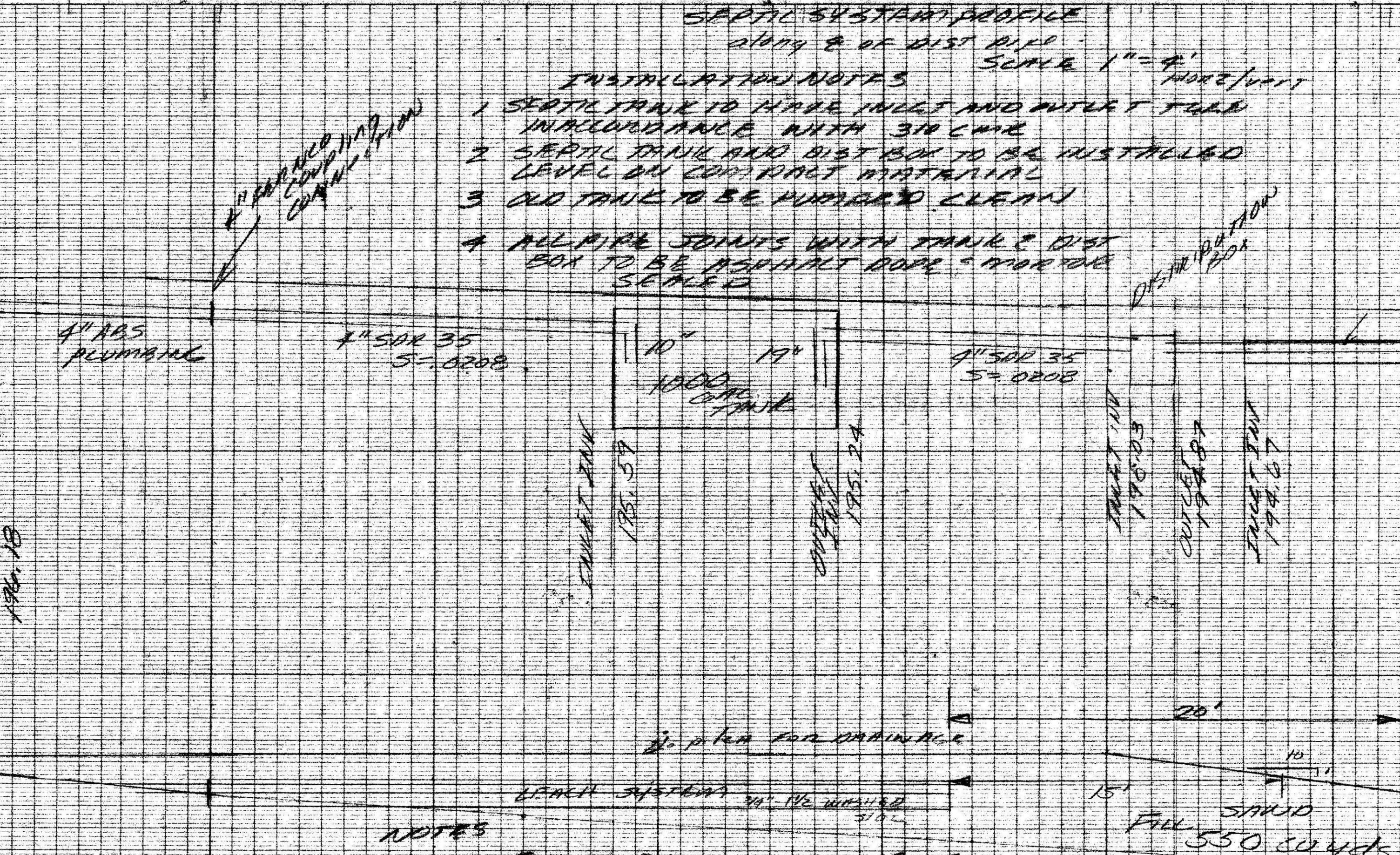
PLAN VIEW SCALE 1" = 20'



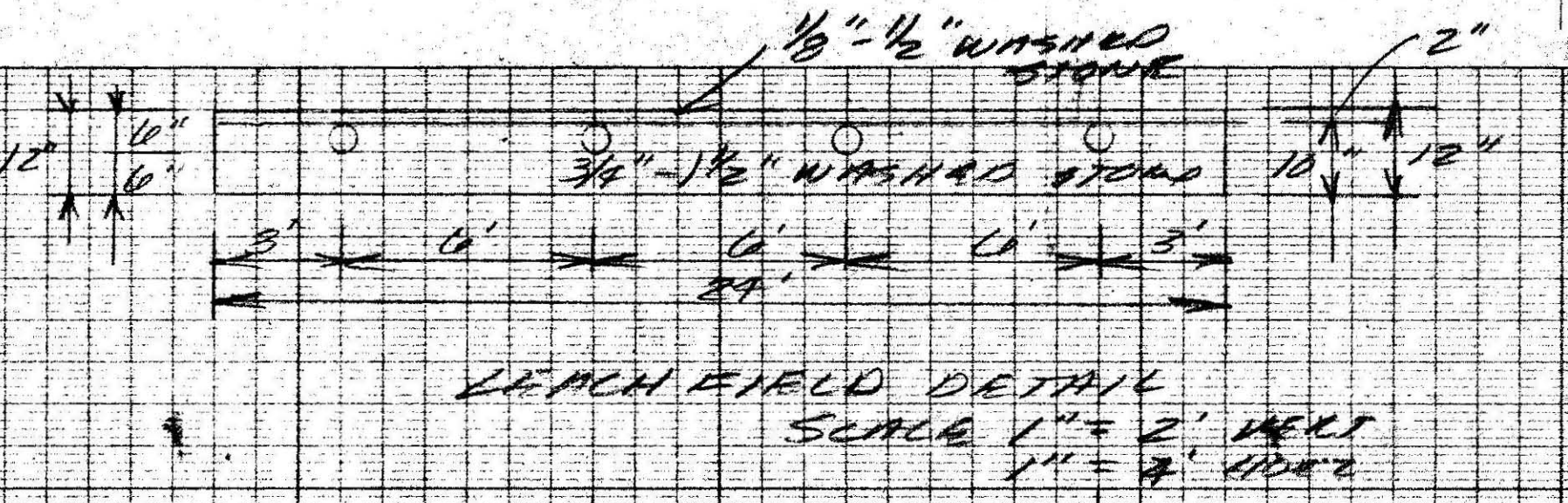
TYPICAL CURTAIN DRAIN CROSS SECTION DETAIL



DESIGN INFORMATION
 ALL CONSTRUCTION TO BE IN ACCORDANCE WITH 310 CMR 15.00 AND ALL LOCAL BOARD OF HEALTH REGULATIONS.
 FINISH GRADING TO BE AS SHOWN ON PLAN VIEW. ALL DISTURBED AREAS TO BE LOANED AND SEEDED.
DESIGN CRITERIA
 USE: SINGLE FAMILY RESIDENTIAL STRUCTURE
 4 BEDROOMS WITH FOUNDATION DRAINS
 DISPOSAL TO BE REMOVED
 DESIGN FLOW: 310 CMR 15.02
 4 x 110 GALS/BATH ROOM = 440 GALS
 PERMIST BOARD OF HEALTH REG
 440 x 125% = 550 GALS/DAY
 SEPTIC TANK: 310 CMR 15.02
 550 GALS x 150% = 825 GALS
 EXISTING TANK 1000 GALS
 IF NEW TANK USED 1000 GALS 8'6" x 15'5"
 57" FROM BISE TO INLET HW
LEACHING SYSTEM
 DUE TO SOIL CONDITIONS A LEACH FIELD DESIGN IS TO BE USED PER 310 CMR 15.15
 EFFECTIVE WIDTH 24'
 EFFECTIVE DEPTH 6"
 EFFECTIVE LENGTH 33'
 PERMEABILITY TEST RATE 6.0 BOTTOM 21' CAP/INCH



- SEPTIC SYSTEM PROFILE**
 along E of DIST PIPE SCALE 1" = 4'
- INSTALLATION NOTES**
1. SEPTIC TANK TO HAVE INLET AND OUTLET TRENCHES IN ACCORDANCE WITH 310 CMR
 2. SEPTIC TANK AND DIST PIPE TO BE INSTALLED LEVEL ON COMPACT MATERIAL
 3. ALL TRENCHES TO BE PARALLEL CLEAN
 4. ALL PIPE JOINTS WITH TANK & DIST PIPE TO BE ASPHALT ROPE & PROXIMITY SEALED



TRENCH FIELD DETAIL SCALE 1" = 2' HORIZ 1" = 4' VERT

TOTAL BOTTOM AREA
 33' x 24' = 792
 TOTAL PERMEABILITY
 792 x .71 = 562 GAL/DAY
 EXCEEDS REQUIRED FLOW

NOTES
 5. ALL FILL TO BE CLEAN SAND OR GRAVEL WITH PERM RATE LESS THAN 2.0 MIN/INCH PER 310 CMR 15.02 SECTION 17
 $100 \times 75 + 4 \times 13 \times 75 + 2 \times 8 \times 75$

6. ALL DISTURBED AREAS LOANED AND SEEDED WITH 2% PITCH AS SHOWN

SEPTIC SYSTEM DESIGN FOR
 CARROLL PEREZ
 73 HULST ROAD
 50 AMHERST, MASS
 ENG WJ SIERUTA, PE
 DATE OCT. 7, 1991



FEE 1

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF AMHARST MASS

Application for Disposal Works Construction Permit

Application is hereby made for a Permit to Construct () or Repair (X) an Individual Sewage Disposal System at:

CARROLL PEREZ 73 HULST ROAD AMHARST MASS

CARROLL PEREZ 73 HULST ROAD Amharst MA

Location - Address or No. Owner Address

Type of Building 4 BED ROOMS Address EAST Sq. feet

Dwelling - No. of Bedrooms Expansion Attic (NO) Garbage Grinder (NO)

Other - Type of Building RESID No. of persons 2 Showers (2) - Cafeteria (NO)

Other fixtures FULL BMT WITH DRAINS

Design Flow 110 gallons per person per day. Total daily flow 110 x 125 = 550 gallons.

Septic Tank - Liquid capacity 1000 gallons Length 29' Width 5' Diameter 5' Depth 5'

Disposal Trench - No. 1 Width 24' Total Length 33' Total leaching area 792 sq. ft.

Seepage Pit No. Diameter Depth below inlet 10" Total leaching area sq. ft.

Other Distribution box (1) Dosing tank ()

Percolation Test Results Performed by WILLIAM SIARUTA Date SEPT 17 1991

Test Pit No. 1 0.0 minutes per inch Depth of Test Pit 48" Depth to ground water 55"

Test Pit No. 2 minutes per inch Depth of Test Pit Depth to ground water

Description of Soil T1-1 0-20 OTS LOAM 20-32 med SAND 32-55 SAND & SILT 55-120 CLAY

seepage @ 55 oxide 29" T1-2 0-14 OTS LOAM 14-32 med SAND 32-86 CLAY SILT

Nature of Repairs or Alterations - Answer when applicable oxide 29" stopped CLAY

Agreement: The undersigned agrees to install the aforescribed Individual Sewage Disposal System in accordance with the provisions of TITLE 5 of the State Sanitary Code - The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by the board of health.

Signed Carroll Perez 10/24/91

Application Approved By David J. Jengels for A. H. O. 11/1/91

Application Disapproved for the following reasons:

Permit No. 91-14 Issued 11/1/91 Date

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amharst

Certificate of Compliance

THIS IS TO CERTIFY, That the Individual Sewage Disposal System constructed () or Repaired (X)

by 73 Hulst Road Installer

at 73 Hulst Road has been installed in accordance with the provisions of TITLE 5 of The State Sanitary Code as described in the application for Disposal Works Construction Permit No. 91-14 dated

THE ISSUANCE OF THIS CERTIFICATE SHALL NOT BE CONSTRUED AS A GUARANTEE THAT THE SYSTEM WILL FUNCTION SATISFACTORY.

DATE 5/13/92 Inspector David Jengels

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amharst

No. 91-14 Disposal Works Construction Permit FEE 160.00

Permission is hereby granted to Construct () or Repair () an Individual Sewage Disposal System at No. 73 Hulst Road

as shown on the application for Disposal Works Construction Permit No. 91-14 Dated 11/1/91

DATE 11/1/91 Board of Health

CHECK OR FILL IN WHERE APPLICABLE



C.A.M.I. 65

9/14

TOWN OF AMHERST

CK # 1121
PB 160.00

PERC TEST DATA SHEET

DATE 9/17/91 LOCATION 73 Hulst Road LOT SIZE .93 Ac.

OWNER Carrull Vincent Perez ADDRESS 73 Hulst Road TELE # 253-5190
BARBARA L. Perez

P.E./RS William Sieruta FIRM same OBSERVED BY David Zaroznik

BACK HOE OPERATOR Bill Sieruta TELE _____ BENCH MARK _____

PERC DEPTH 49" PRE SOAK TIME 9:13-9:32 PERC DEPTH _____ PRE SOAK TIME _____

TEST 9:32- 12" 8" 9:41 _____

11" 1" 9:43 _____

9:36 10" 6" 9:46 _____

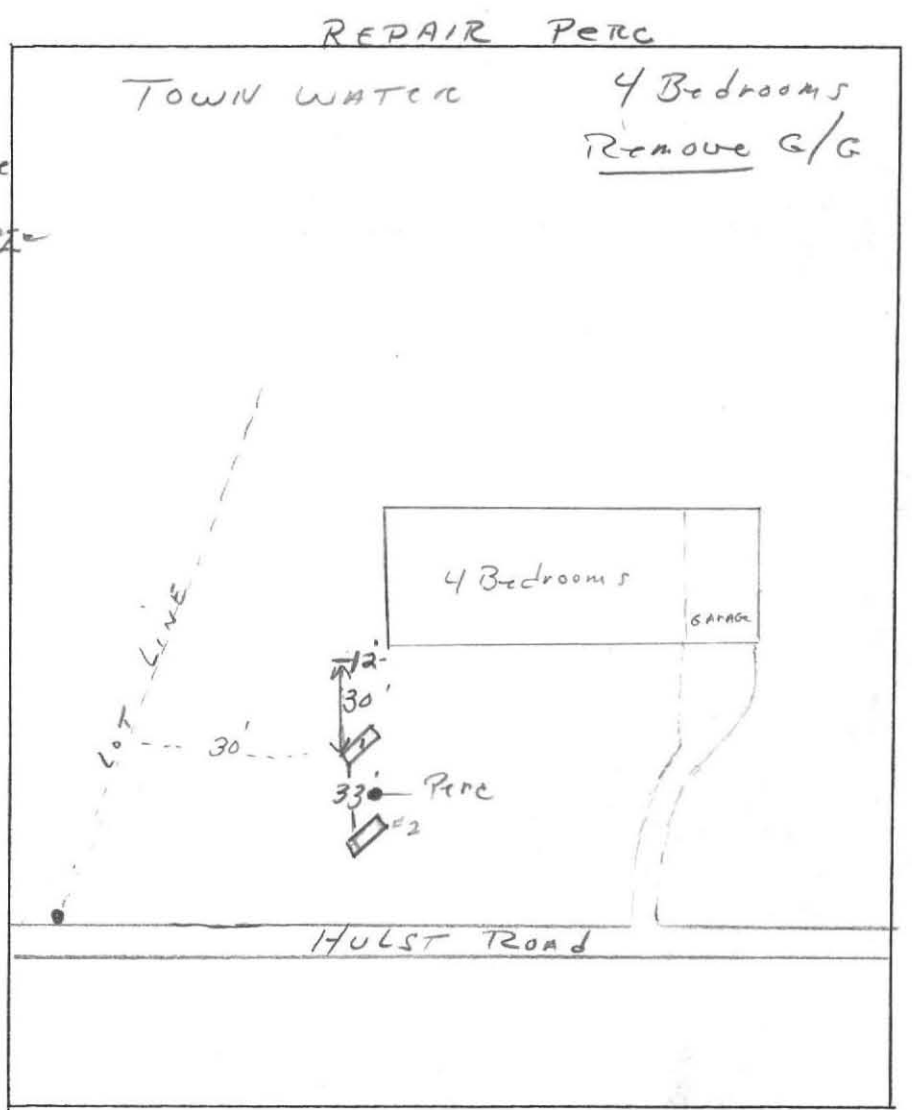
9:38 9" _____

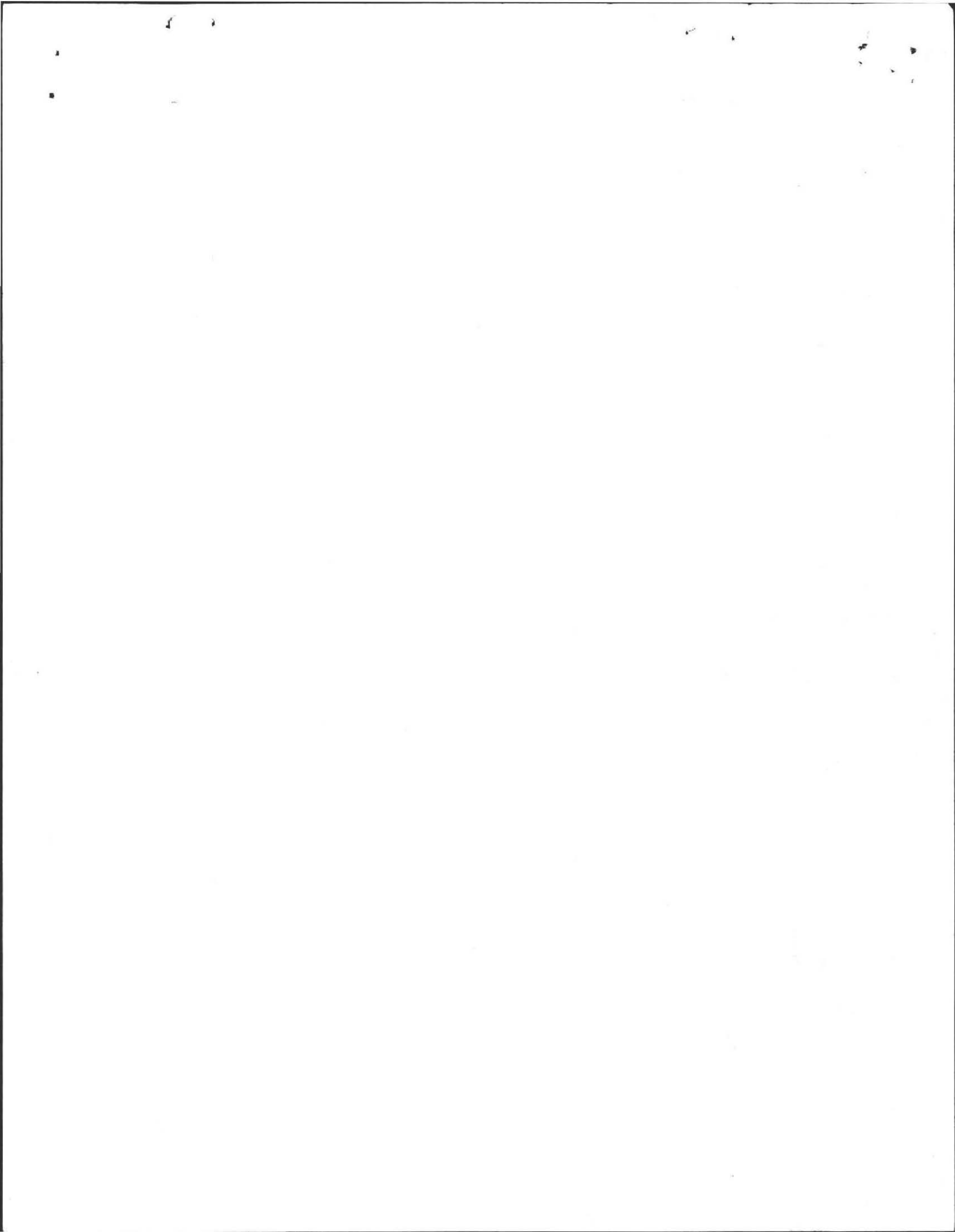
RATE DESIGN -> 6 RATE -4 RATE _____

#1	#2
TOP 14	TOP 20
SUB 24	SUB 24 oxide
med sand 32	med sand 32
clay-silt 86"	silt 55
	clay 120"

TOP	TOP
SUB	SUB

TOP	TOP
SUB	SUB





Percolation Test

Test No. perc test

Reading _____ Time 9:13 - 9:28
 Saturation (15 min) _____
12 _____ 9:32 9:32
11 _____ 9:34
10 _____ 9:36
9 _____ 9:38
8 _____ 9:41
7 _____ 9:43
6 _____ 9:46

Test No. _____
 Reading _____ Time _____
 Saturation (15 min) _____

$9/3 = 2.66$

DESIGN RATE

Perc Rate _____
 Ground Elev. _____
 Depth of Hole _____

6.0 Min/inch

48

Perc. Rate _____
 Ground Elev. _____
 Depth of Hole _____

Min/inch

Test Pit TP1-1
 Depth Soil Description
0-20 LOAM
20-32 MED SAND
32-55 SAND & SILT
55-120 CLAY

Deep Test Pit/s TP1-2
 Test Pit
 Depth Soil Description
0-14 OTS LOAM
14-22 med sand
32-86 CLAY & SILT
STOPPED

Groundwater Depth 24" Elev. OXIDES
 Bedrock Depth _____ Elev. _____
 Ground Elev. see page 55

Groundwater Depth _____ Elev. _____
 Bedrock Depth _____ Elev. _____
 Ground Elev. OXIDES 24

S.C.S. Soil Description SAND Seasonal High Water Table? OXIDES stain

Bench Mark: Elev. _____ Description _____

COMMENTS:

BEDROOMS
4
FULL BRIT
WITH DRAINS

DISPOSAL TO BE
REMOVED.

Date: SEPT 17 1991
 Client: CARROLL PEREZ
73 MULST ROAD
50 AMHERST MASS
 Engineer: WJ SIERUTA
 Witness: D ZARAZINSKI
 Location of Perc: 73 MULST ROAD

