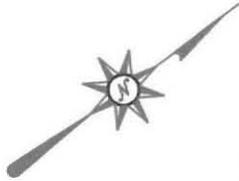


71 LARKSPUR DR.



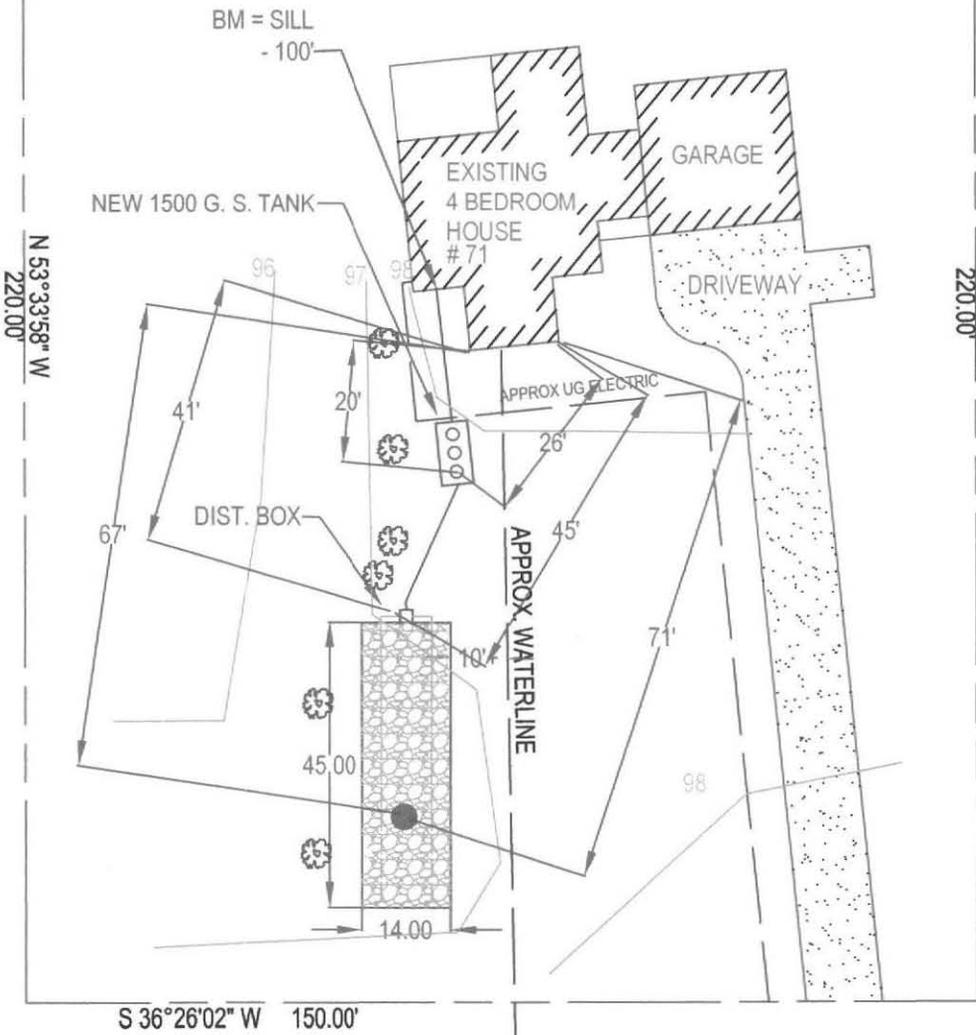
AS BUILT  
 07.02.2008  
 MAP 21B LOT 48  
 SCALE: 1"=30'  
 33,000± Sq. Ft.  
 0.758± Ac.

N 36°26'02" E  
 150.00'



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

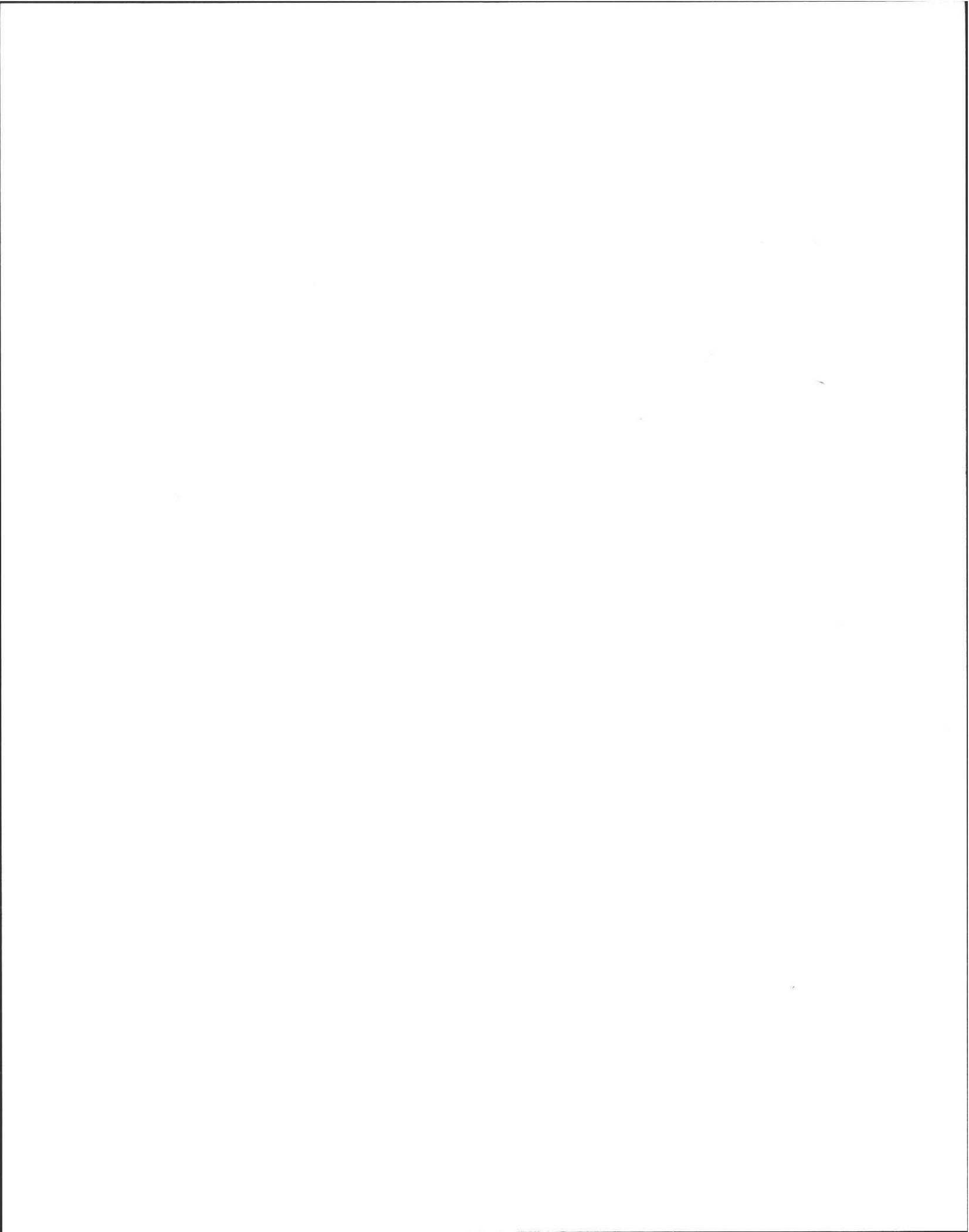
A  
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G  
M  
1.  
2.  
3.  
4.  
5.

S 36°26'02" W 150.00'

LARKSPUR DRIVE



No. 08-06

FEE

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT



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

Table with 2 columns: Field and Value. Fields include Location, Map/Parcel#, Lot#, Installer's Name, Address, Telephone#, Owner's Name, Address, Telephone#, Designer's Name, Address, Telephone#.

Type of Building: Residence, Lot Size: 33,000 sq. ft., Dwelling - No. of Bedrooms: 4 Bedroom, Garbage grinder: (x), Design Flow: 110 gpd, Calculated design flow: 440, Design flow provided: 466 gpd, Title: Septic System Repair Plan, Description of Soil(s): Class I (C. Sand), Name of Soil Evaluator: A. Weiss, Date of Evaluation: 6/17/08

DESCRIPTION OF REPAIRS OR ALTERATIONS: Install New Septic System, Clean outlet FILTER ANNUALLY

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: Pamela Dietz, Date: 6-20-08

Inspections

No. 08-06

FEE \$150.00

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

CERTIFICATE OF COMPLIANCE

Description of Work: [ ] Individual Component(s) [x] Complete System

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

by: [Signature] at 71 Larkspur Dr.

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. [blank], dated [blank], Approved Design Flow 440 (gpd)

Installer: [Signature], Designer: [Signature], Inspector: [Signature], Date: 07-02-08

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

No. 08-06

FEE \$300.00

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Amherst, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct ( ) Repair (x) Upgrade ( ) Abandon ( ) an individual sewage disposal system at 71 Larkspur Dr as described in the application for Disposal System Construction Permit No. 08-06, dated 6-27-08.

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



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

1d Enfield Rd.  
town, MA 01007  
323-5957 & 323-4916 (FAX)  
aweiss@charter.net

Date: 6-17-08

Commonwealth of Massachusetts

Aubost, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: A. Weiss

Date: 6-17-08

Witnessed By: F. B.

4 BR. No Disposal

Location Address of Lot # <u>Jones + Parck - Dietz</u> <u>71 Larkspur DR.</u>	Owner's Name, Address, and Telephone # <u>71</u> <u>LARKSPUR</u>
New Construction <input type="checkbox"/> Repair <input checked="" type="checkbox"/>	

Office Review:

Published Soil Survey Available: No  Yes

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)

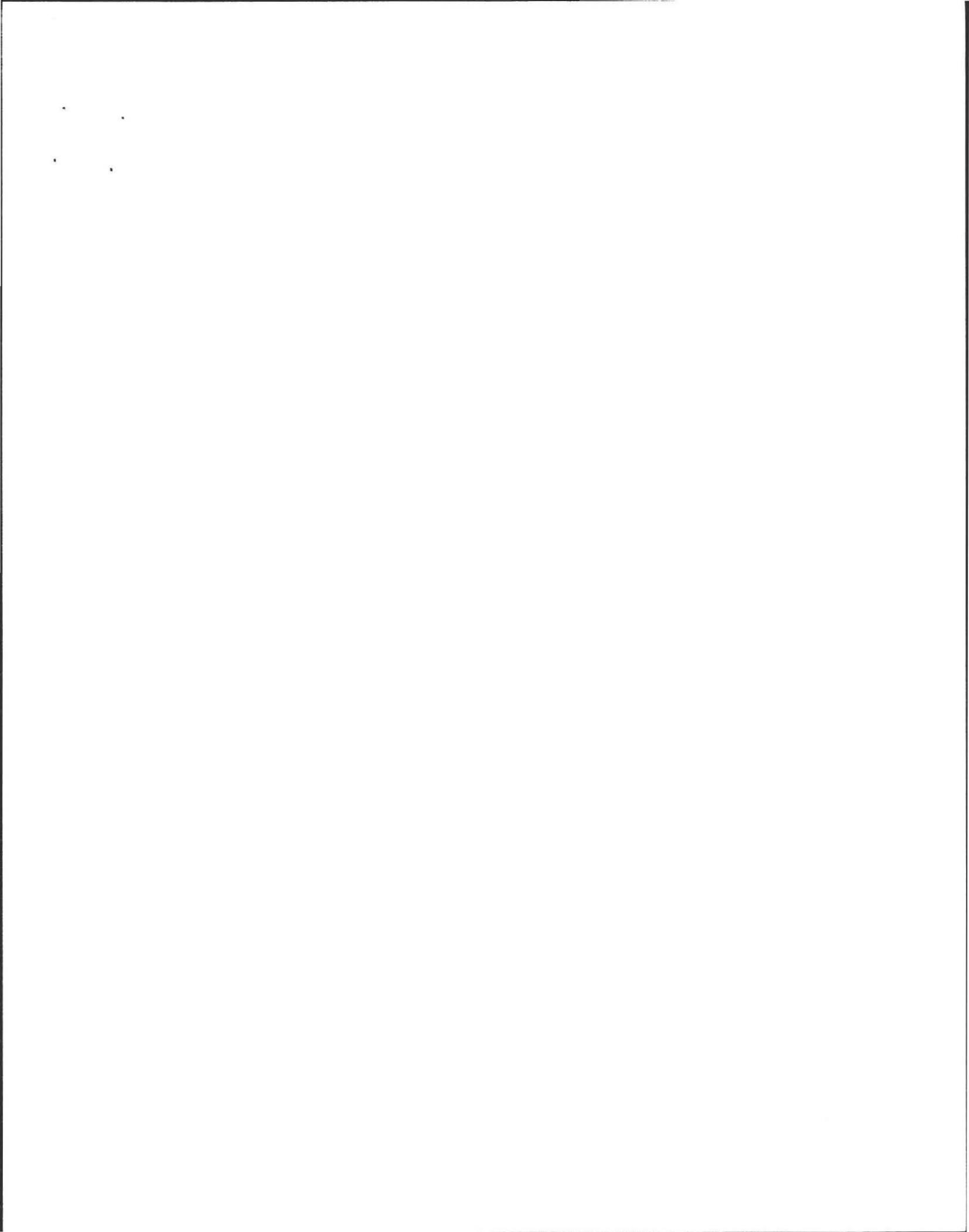
Wetlands Conservancy Program Map (map unit)

Current Water Resource Conditions (USGS): Month

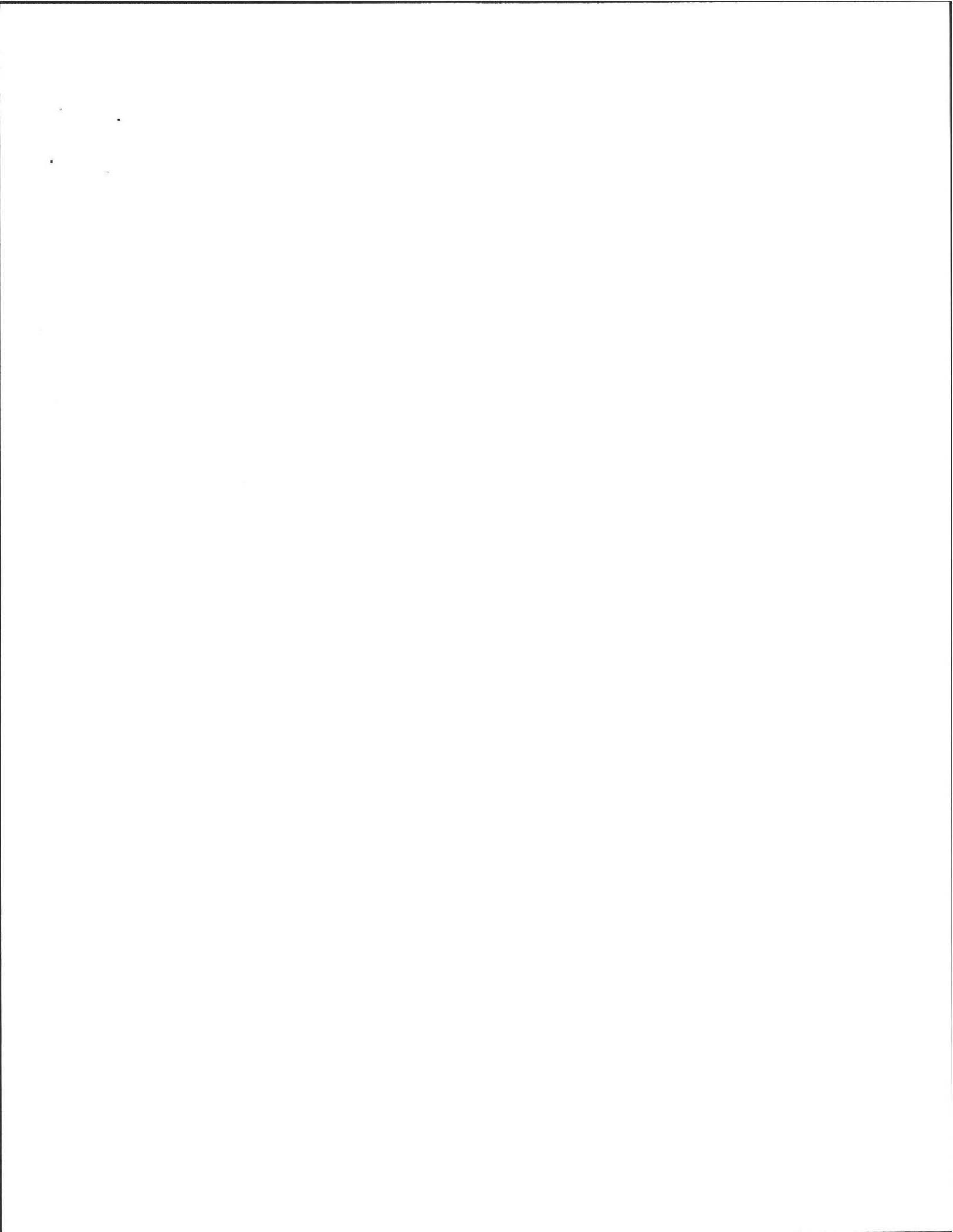
Range : Above Normal  Normal  Below Normal

Other References Reviewed: \_\_\_\_\_









Location Address or Lot No. 71 Larkspur Dr.

COMMONWEALTH OF MASSACHUSETTS

, Massachusetts

Percolation Test*		
Date:	<u>6/17/08</u>	Time: <u>11:30</u>
Observation Hole #	<u>P1</u>	
Depth of Perc	<u>48"</u>	
Start Pre-soak	<u>11:15</u>	
End Pre-soak	<u>11:30</u>	
Time at 12"	<u>11:30</u>	
Time at 9"		
Time at 6"		
Time (9"-6")	<u>2</u>	<u>(AJT HOLD H2O)</u>
Rate Min./Inch	<u>2</u>	<u>MIN IN</u>

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

Site Passed  Site Failed

Performed By: A. Weiss

Witnessed By: E. Bokins

Comments: \_\_\_\_\_



4  
1  
2  
3

Location Address or Lot No. 71 Forest St

### 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 120" 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

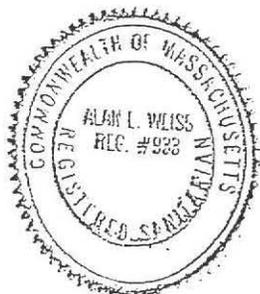
Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system? yes

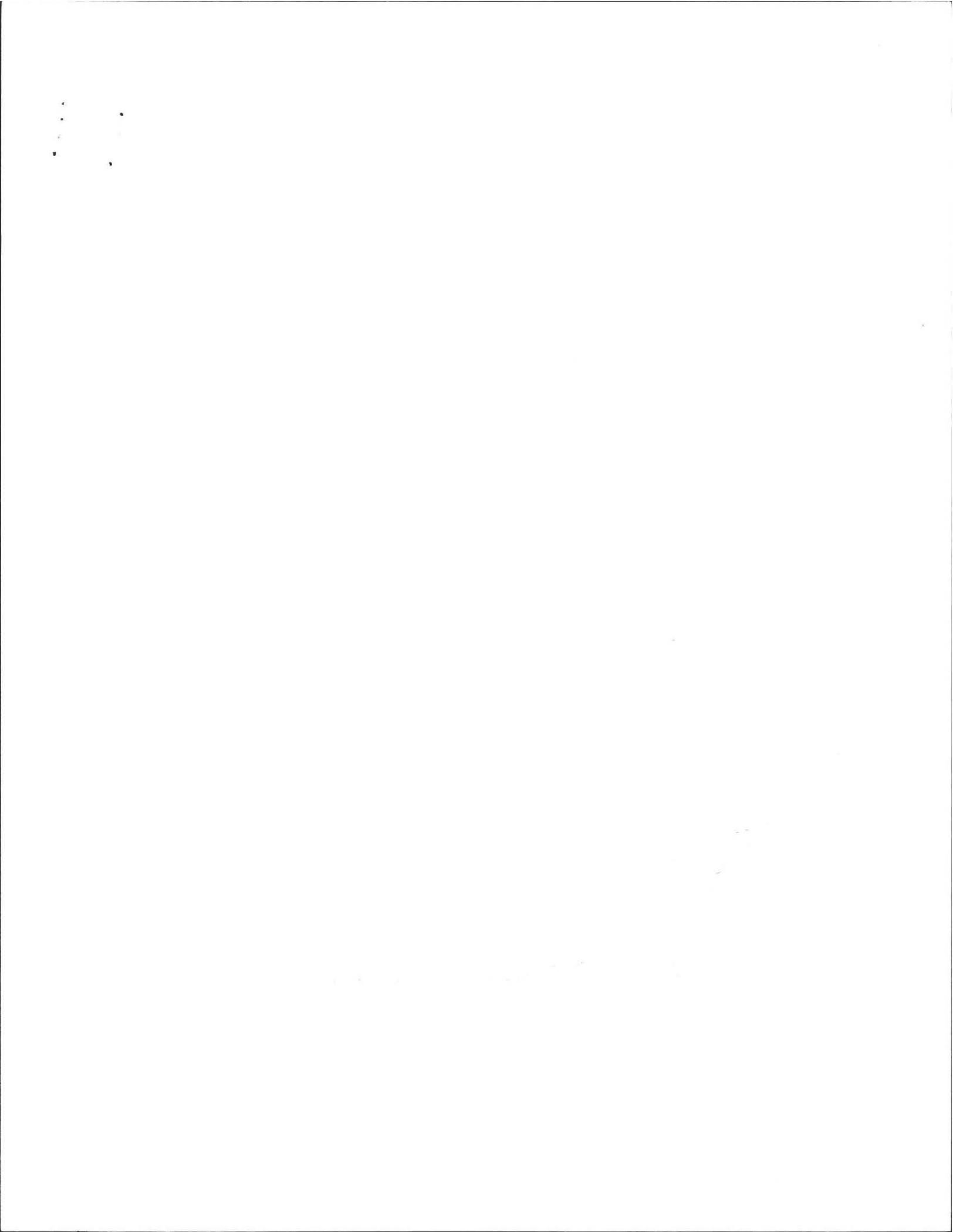
If not, what is the depth of naturally occurring pervious material? \_\_\_\_\_

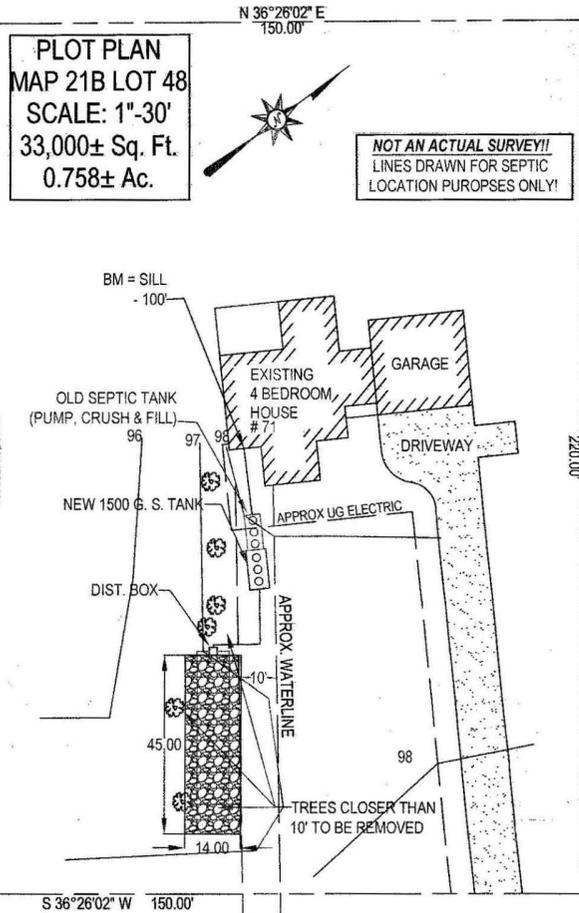
Certification

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 [Signature] Date 6/17/08

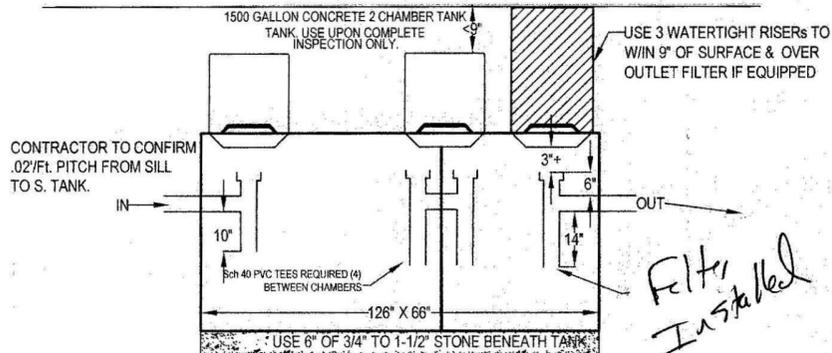






**ATTENTION INSTALLER!!**  
**THIS SITE CONTAINS UNDERGROUND ELECTRIC AND WATER UTILITIES WHICH MUST BE IDENTIFIED AND THOROUGHLY MARKED PRIOR TO ANY EXCAVATION. PRIVATE CONTRACTING MAY BE NECESSARY TO SUPPLEMENT DIGSAFE MARKINGS.**

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

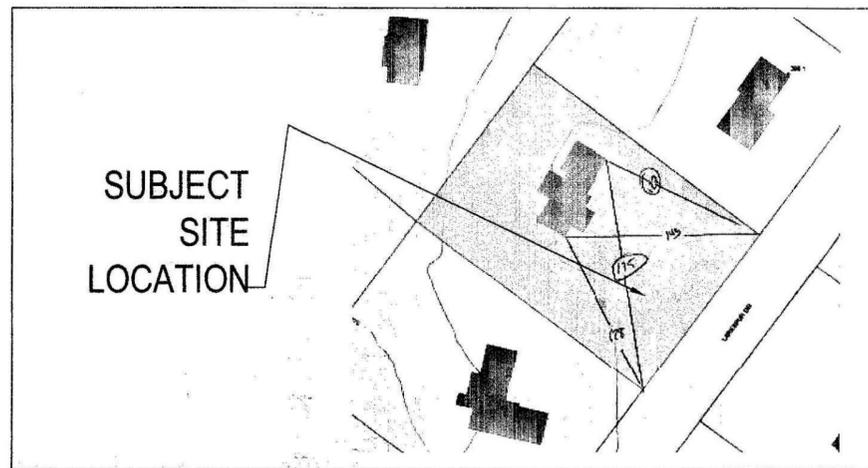


**GRAVITY SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.**

- HAVE TANK PUMPED EVERY 2 YEARS.
- 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.
- CLEAN TANK OUTLET FILTER ANNUALLY IF PRESENT

**2006 SEPTIC PLAN ADDENDUM**

- DUE TO LATE REGULATION CHANGES 4-22-2006 ALL NEW SYSTEMS MUST:**
- INSTALL PVC RISERS OVER D. BOX'S BURIED DEEPER THAN 9" AND PLACE IRON REBAR ON TOP.
  - HAVE 4" PERFORATED, PVC INSPECTION PORTALS TO BOTTOM OF STONE BED, WITH SCREW RISER TO 3" OF SURFACE, MARKED WITH REBAR. *All OPENINGS & COMPONENTS marked with magnetic tape*
  - HAVE PERFORATIONS IN BED AT 4 AND 8 O-CLOCK POSITIONS. **NOTE: THESE ARE NEW STATE REGULATION REQUIREMENTS (4-22-06), NOT NECESSARILY THE OPINION OF THE DESIGNER.**

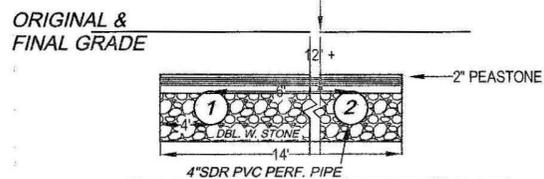


**DESIGN NOTES AND CALCULATIONS:**

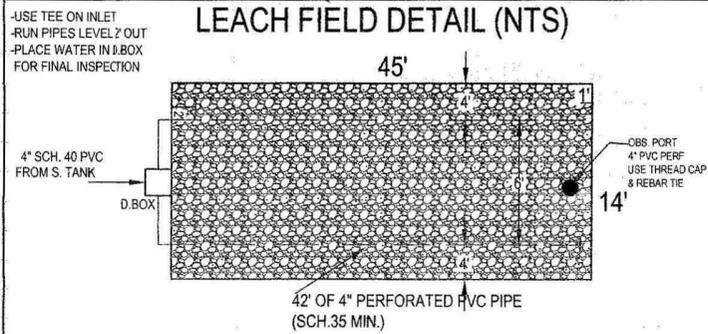
- 4 BR (BEDROOM HOME) X 110 GPD/BR = 440 GPD. REQUIRED  
- Use ONE FIELD: 14' WIDE X 45' LONG WITH 6" OF 3/4" TO 1-1/2" DBL WASHED STONE BELOW INVERT  
- BOTTOM AREA: 14' W X 45' L = 630 SF.  
- SIDE AREA: 0 SF.  
- TOTAL AREA: 630 SF X 0.74 GAL/SF = 466 GPD
- GARBAGE DISPOSAL NOT ALLOWED, TO BE REMOVED\*\*\*\*
- NO OTHER PRIVATE WELLS WITHIN 100 FEET OF SAS (TOWN WATER).
- NO OTHER WETLANDS WITHIN 100 FEET OF SAS
- USE NEW 1,500 GAL. 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 (5" 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.
- USE APPROVED (1 1/2") DBL. WASHED STONE UNDER TANK & D. BOX FOR 6".  
- CONFIRM STONE PROPERLY WASHED (WITH BUCKET / H2O TEST) PRIOR TO PLACEMENT.
- USE PROPER SCH. 40 PVC TEES AS SHOWN.
- PRE & POST CONTOURS NOTED AS NECESSARY, RESERVE AREA NOTED REQUIRED.
- SLOPE CALCS (SEE CONTOURS), SUBGRADE INSP. REQ'D.
- USE FIELD DUE TO TOPOGRAPHY AND SPACE OF LOT WITH RESPECT TO LOCATION AND ELEVATION OF RESIDENCE (310 CMR 15.240)
- USE 2% MIN. SLOPE OVER SAS  
- CLEAR TOP AND SLUB TO 28" MIN. AS NEEDED (INSPECTION REQUIRED).  
- CLEAR PAST BASE OF B (MIN. 28") & SCARIFY UNDER BED PRIOR TO TITLE V SAND PLACEMENT.  
- EXCAVATE EXISTING LOAM, SUB AND ANY EXISTING DEBRIS, DIRTY FILL OR PRIOR SYSTEM IF PRESENT.
- SOIL EVALUATION BY A. WEISS, RS. 6/17/08 (ELLEN B. BOH AGENT).  
- DEPTH OF PERC. 48"  
- PERC RATE = < 2 MIN / IN  
- CLASS I SOIL RATING (SAND)
- NO TREES WITHIN 110 FT. OF NEW LEACH FIELD. USE TITLE V FILL 5' OUT.
- ENGINEER TO INSPECT SUBGRADE, AND FINAL TOWN ENGINEER'S FINAL.
- BM=100.00 @ (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 LEACHFIELD 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.

**EFFLUENT DISPOSAL AREA**  
CROSS SECTION - NOT TO SCALE  
(LEVEL DISPOSAL AREA)

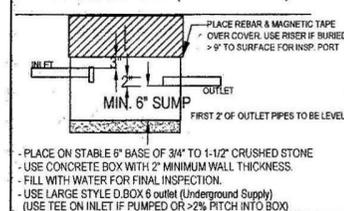
NUMBER OF SEPTIC LINES: 2  
CENTER TO CENTER SPACING: 6'



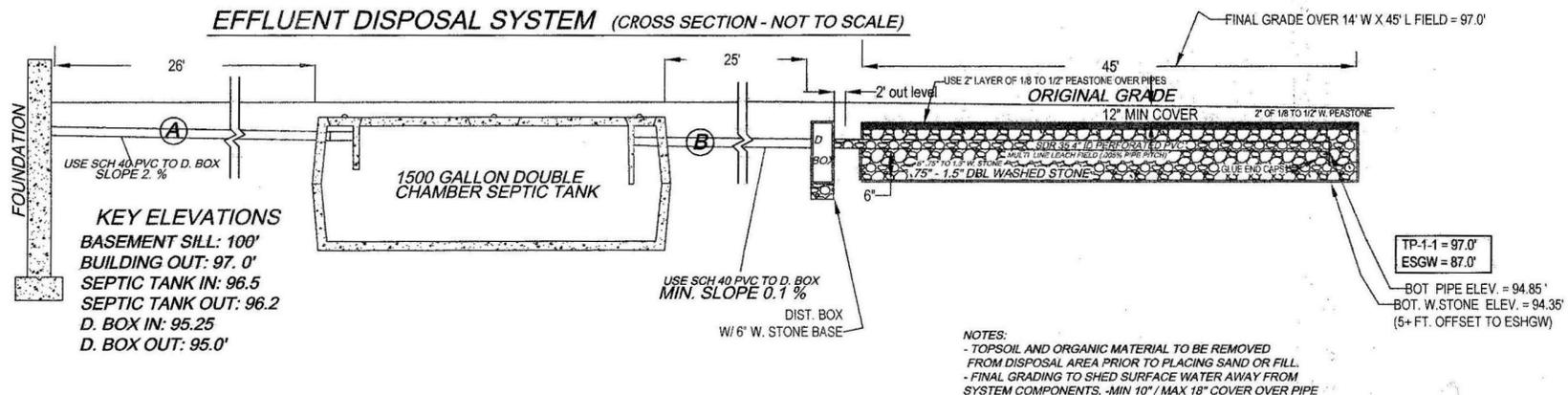
**LEACH FIELD DETAIL (NTS)**



**TYPICAL D. BOX (WATERTIGHT)**



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



**TEST PIT LOG:**

TP-1 EFF. ELEV: 97.0				SOIL EVALUATOR: A. WEISS, RS				DATE OF EVALUATION: 6/17/08	
DEPTH:	HORIZ:	TEXTURE:	PERC (MUSELL)	MATERIAL:	DEPTH:	HORIZ:	TEXTURE:	PERC (MUSELL)	MATERIAL:
0-10	A	FSL	10 YR 3/3	FRIABLE	0-12	A	FSL	10 YR 3/3	FRIABLE
10-26	Bw	LS	10 YR 4/6	FRIABLE	12-25	Bw	LS	10 YR 4/6	FRIABLE
26-100	C1	S	7.5 YR 5/4	COARSE SAND AND GRAVEL	25-120	C1	S	7.5 YR 5/4	COARSE SAND AND GRAVEL
				10% COBBLES, LOOSE					10% COBBLES, LOOSE
				GRANULAR					GRANULAR
OXIDES:		NOT OBSERVED			OXIDES:		NOT OBSERVED		
EHWT:		120"± = 87.0'			EHWT:		120"±		
STANDING H2O:		NOT OBSERVED			STANDING H2O:		NOT OBSERVED		
WEEPING:		NOT OBSERVED			WEEPING:		NOT OBSERVED		
BEDROCK:		100"±			BEDROCK:		120"±		

**SEPTIC SYSTEM REPAIR PLAN FOR JAMES AND PAM DIETZ**  
71 LARKSPUR DR  
AMHERST, MA.

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

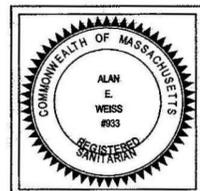
PHONE: (413) 323-5957  
FAX: (413) 323-4916  
DATE: 6/19/08  
SCALE: 1"=30'

REVISIONS: [None]

DRAWN BY: ALAN WEISS  
REVISED: [None]

DRAWING NUMBER: 108-2987-0617

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



**ATTENTION INSTALLER!!**

CALL DIG SAFE BEFORE YOU DIG!! MASSACHUSETTS STATE LAW CHAPTER 82 SECTIONS 40 - 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.