

127 LEVERETT ROAD

ni@ecs.umass.edu



No. 05-21

Title V Stand > 4' under 3rd (127)

FEE 375

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	127 Leverett Rd.	Owner's Name	Roy Hart
Map/Parcel#	3c 182	Address	127 Leverett Rd.
Lot#	#3 (old #)	Telephone#	730-2682 (w)
Installer's Name	River Drive Ex. corp.	Designer's Name	Alan Weiss, P.S.
Address	Hadley, MA.	Address	Belchertown, MA
Telephone#	584-1814	Telephone#	323-5957

Type of Building Residence Lot Size 19,071 sq. ft.
 Dwelling - No. of Bedrooms 3 BR. Garbage grinder ()
 Other - Type of Building _____ No. of persons _____ Showers (), Cafeteria ()
 Other Fixtures _____
 Design Flow (min. required) 110 gpd Calculated design flow 330 Design flow provided 361 gpd
 Plan: Date 11/28/05 Number of sheets 1 Revision Date _____
 Title Septic System Repair plan
 Description of Soil(s) Class 2 SL
 Soil Evaluator Form No. _____ Name of Soil Evaluator A. Weiss Date of Evaluation 10-31-05

DESCRIPTION OF REPAIRS OR ALTERATIONS New S. tank + L. Field

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 Roy Hart Date 11/29/05

Inspections _____

No. 05-21

COMMONWEALTH OF MASSACHUSETTS

FEE 375

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: River Drive
at 127 Leverett Rd

has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. 05-21, dated _____ Approved Design Flow _____ (gpd)

Installer William Phelps
Designer: [Signature] Inspector: [Signature] Date: 11/16/05

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

No. 05-21

COMMONWEALTH OF MASSACHUSETTS

FEE 375

Board of Health, Amherst, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct () Repair () Upgrade () Abandon () an individual sewage disposal system at 127 Leverett Rd as described in the application for Disposal System Construction Permit No. 0521, dated 11/28/05 Rec 11/30/05

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

Date 12/2/05 Board of Health [Signature]

1872

1872

1872

1872

1872

1872

NO: _____

Commonwealth of Massachusetts
Town of Hopkinton

Soil Suitability Assessment : On-Site Sewage Disposal

Performed By: AL Weiss Date: 10/31/08
Witnessed By: Daniel J. ...

Location Address of: Lot #	Owner's Name: <u>Roy Lawrence Ham</u> Address of: <u>127 Coonsett Rd</u> Telephone: <u>549-0606</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 Reference Reviewed:
18" Rm. in inst. man.

11/30/05
CHK# 9806
PL 375⁰⁰

Pave Test 250
Plans 125
375

UP

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

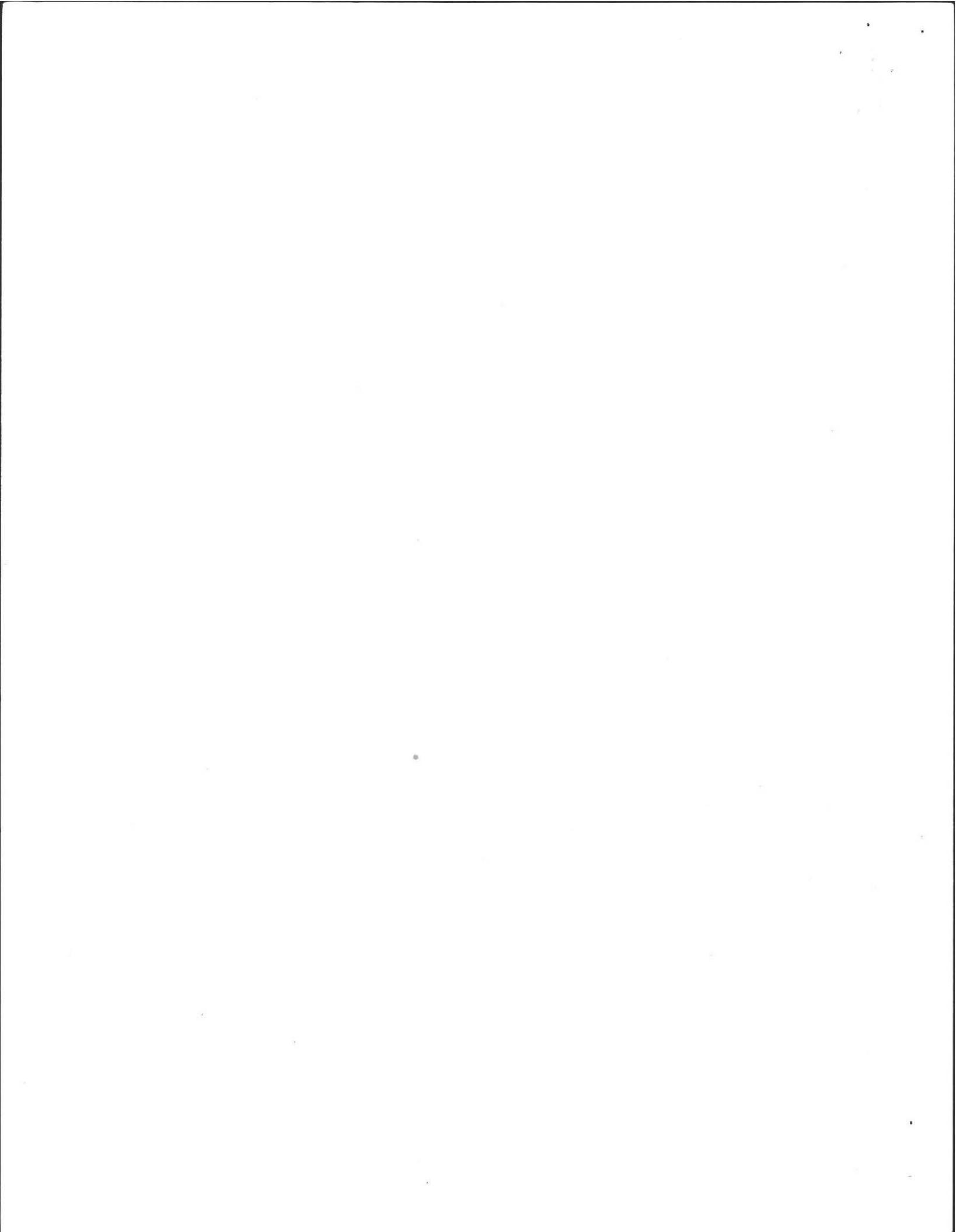
Does at least four feet of naturally occurring previous materials exist in all areas observed throughout the area proposed for this soil absorption system? _____

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 _____
Date _____



157 Lovett K ↓

On-Site Review

Deep Hole Number 1 Date: 10/31/05 Time _____
Weather Sunny 60°
Location (identify on site plan) _____
Land Use Residential Slope (%) 5
Surface Stone granite
Vegetation: Deciduous

Landform: knoll

Position on Landscape (sketch on back) _____

Distances from:

Open Water Body 100 feet Drainageway 20 feet
Possible Wet Area 100 feet Property Line 30 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, % gravel
8	FSL	A	10YR 3/2		frumble
26"	SL	B _w	2.5Y 5/4	10YR 3/2 30"	frumble
105	SL	C ₁	2.5Y 5/4	10YR 4/8 2.5Y 4/8 4/4" weeping	firm fine med sand 15% cobbles Boulders

Parent Material (geologic) granite
Depth to Bedrock 105
Depth to Groundwater :
Standing Water in the Hole 100
Weeping from Pit Face 44"
Estimated Seasonal High Water 30"

On-Site Review

Deep Hole Number 2 Date: 10/31/05 Time _____
Weather _____
Location (identify on site plan) _____
Land Use _____ Slope (%) _____
Surface Stone _____
Vegetation: _____

Landform: _____

Position on Landscape (sketch on back) _____

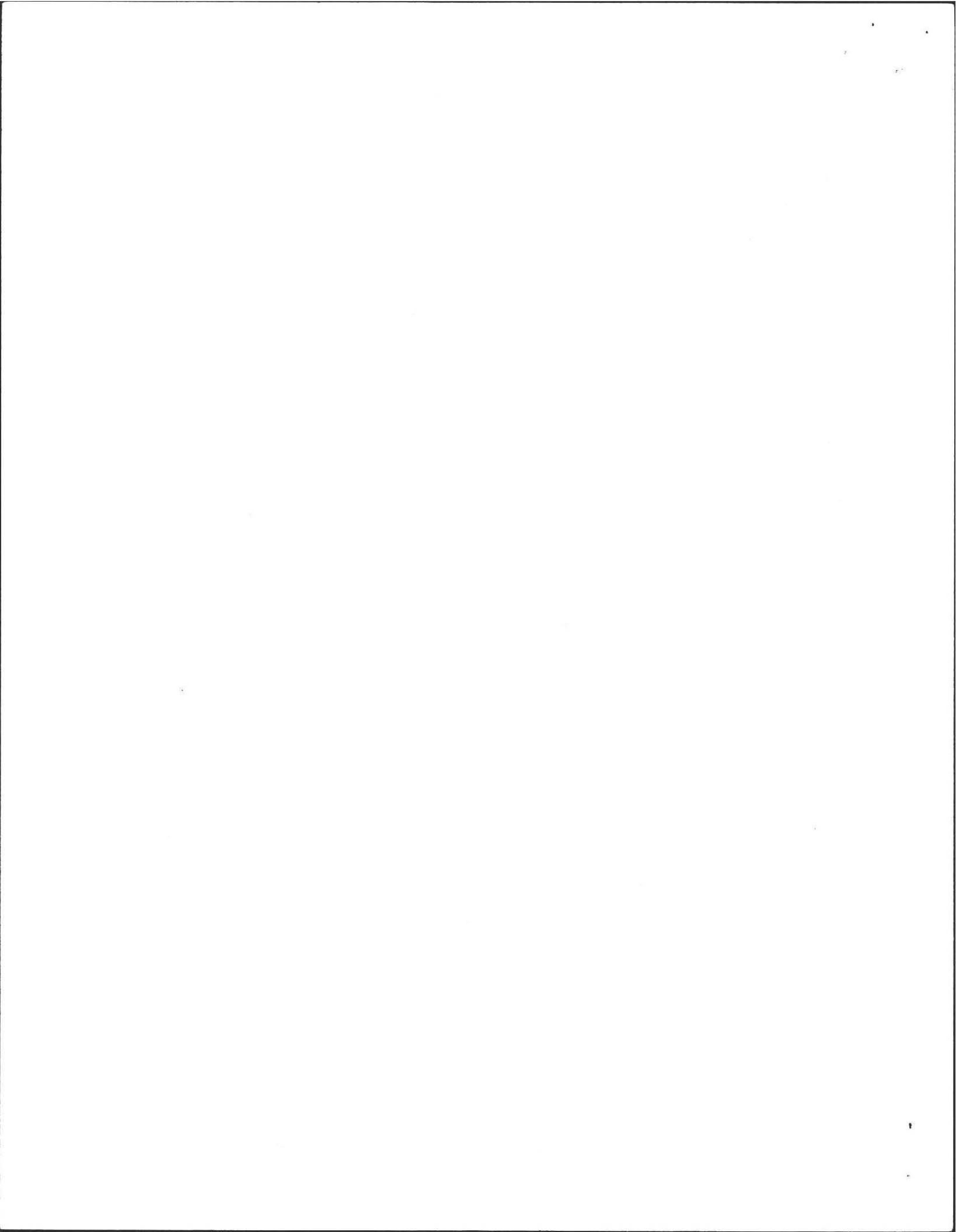
Distances from:

Open Water Body _____ feet Drainageway _____ 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, % gravel
8"	FSL	A	10YR 3/2		frumble
24	SL	B _w	2.5Y 5/4	10YR 3/2 30"	frumble
104	C ₁		2.5Y 5/4	10YR 4/8 2.5Y 4/8 4/4" weeping	firm fine med sand 15% cobbles Boulders

Parent Material (geologic) granite
Depth to Bedrock 104
Depth to Groundwater :
Standing Water in the Hole _____
Weeping from Pit Face _____
Estimated Seasonal High Water 30



127 Levee Rd

FORM 12: Percolation Test
Location Address or Lot #

Ankerst

Commonwealth of Massachusetts

Town of Ankerst

PERCOLATION TEST *

DATE: 10/31/05 TIME:

Observation Hole #	①	
Depth of Perc	44"	
Start Pre-soak	1:30	
End Pre-soak	1:45	
Time at 12"	1:45	
Time at 9"	1:52	
Time at 6"	2:01	
Time (9"-6")	9	
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 AL Weiss

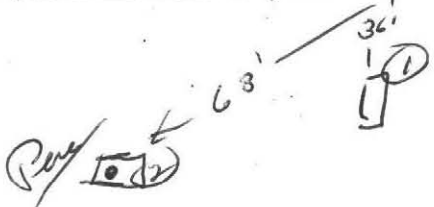
Witnessed by David Zarow

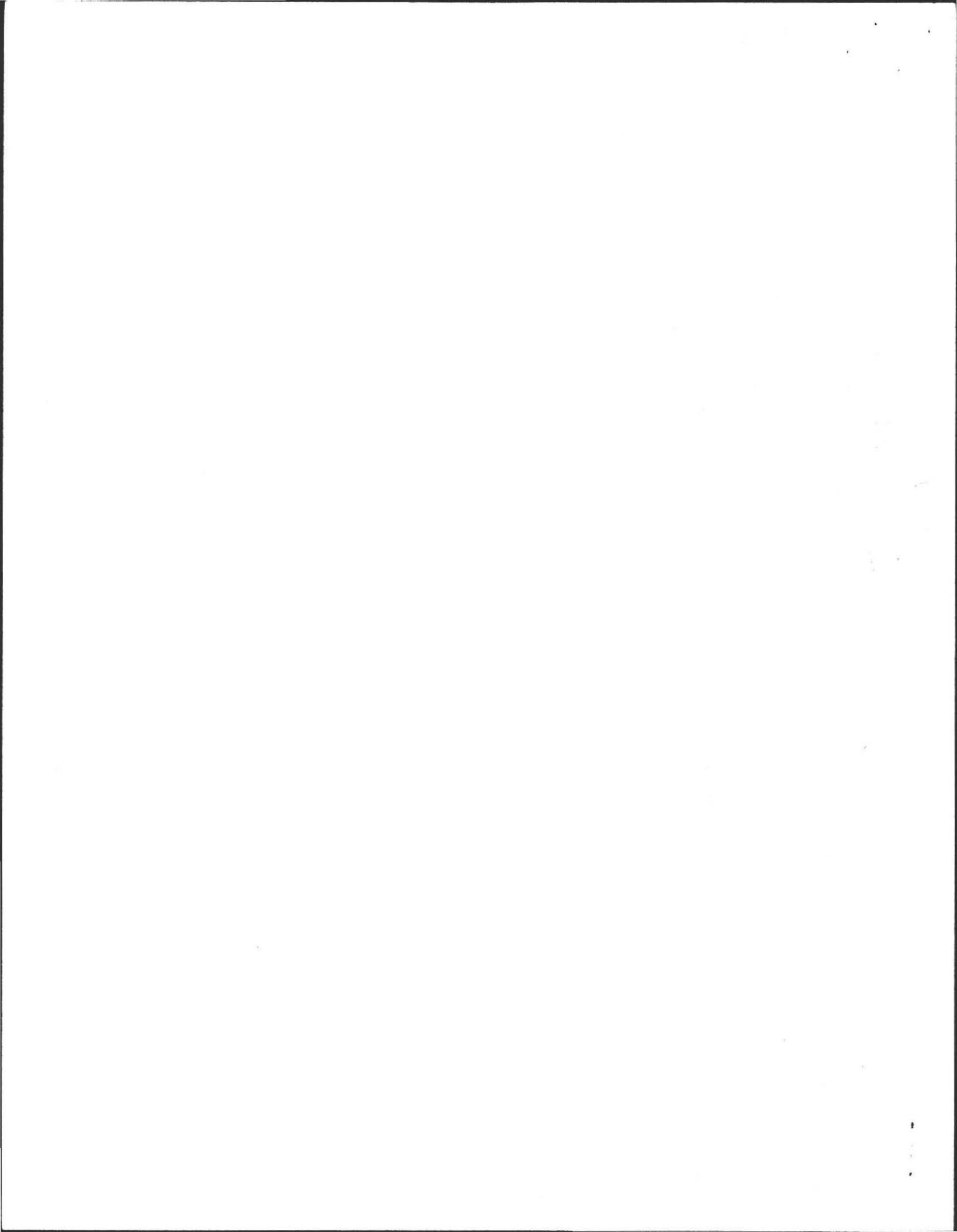
Comments:

U. D. Case / S
dis. brass
away

Tower water

3 Bed rooms
NO 9/9







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

Licensed Site Professional
Registered Sanitarian
Hydrogeologist
President

- Subsurface Investigations
- 21E Site Investigations
- Pollution Remediation
- Percolation Tests and Septic Designs

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

Date: 10/31/05

Commonwealth of Massachusetts
Amherst, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: A. Weiss
Witnessed By: D. Zarozinski

Date: 10/31/05

Location Address or Lot # 127 Leverett Rd	Owner's Name, Address, and Telephone # 127 Leverett Rd Amherst, MA. 730-2682
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)

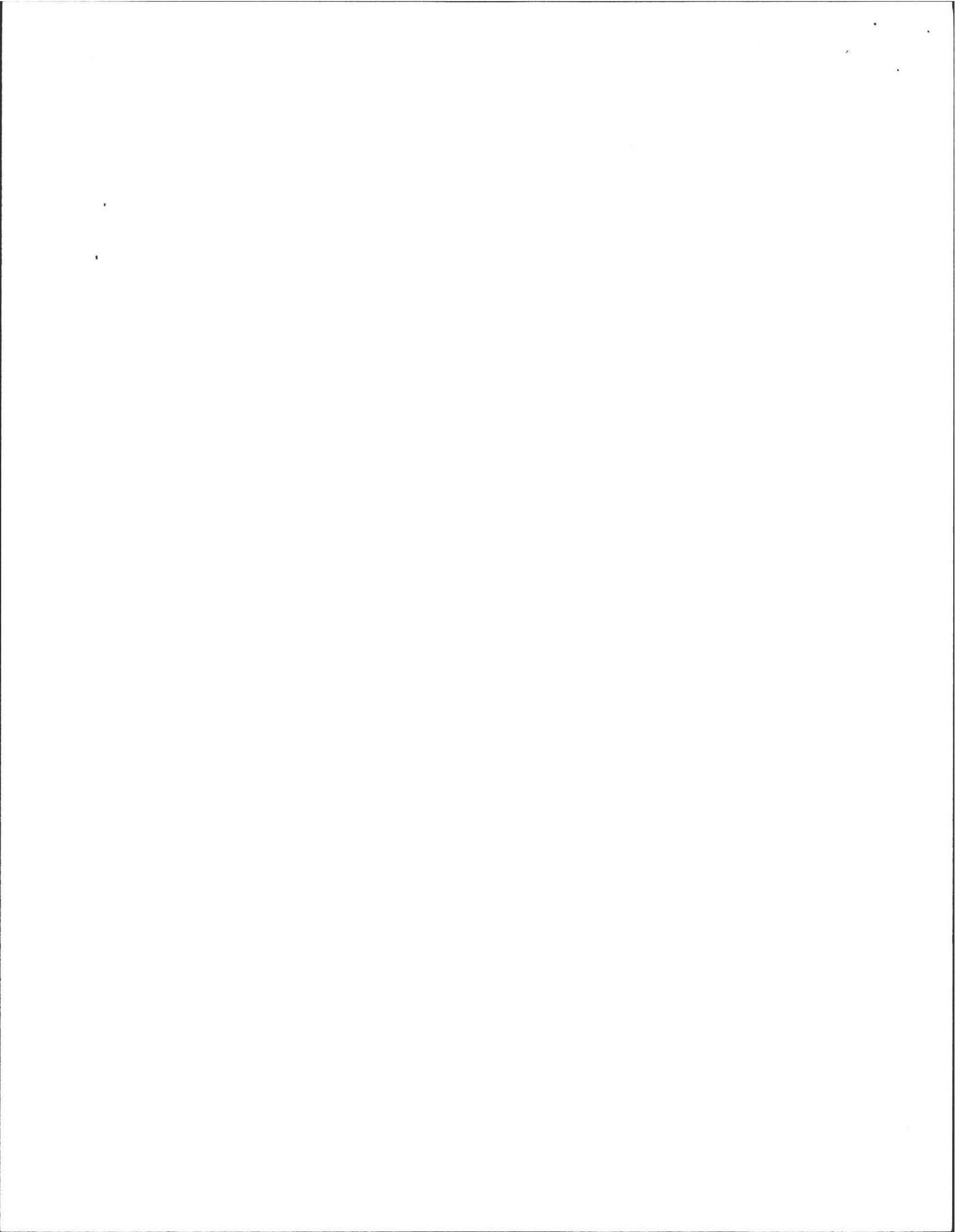
Current Water Resource Conditions (USGS): Month

Range : Above Normal Normal Below Normal

Other References Reviewed:

(18" rain in last month)





Location Address or Lot No. 127 Leveett Rd., Amherst

On-site Review

Deep Hole Number 112 Date: 10/3/05 Time: 12:00 Weather SUN 60°F

Location (identify on site plan) _____

Land Use _____ Slope (%) 5 Surface Stones Many

Vegetation Deciduous

Landform Terraced

Position on landscape (sketch on the back) _____

Distances from:

Open Water Body 100' feet Drainage way 75' feet

Possible Wet Area 100' feet Property Line 30' feet

Drinking Water Well 100' feet Other _____
Town

DEEP OBSERVATION HOLE LOG*

Depth from Surface (Inches)	Soil Horizon	Soil Texture (USDA)	Soil Color (Munsell)	Soil Mottling	Other (Structure, Stones, Boulders, Consistency, % Gravel)
<u>0-8"</u>	<u>FSL</u>	<u>A</u>	<u>10YR 3/2</u>		<u>Friable.</u>
<u>8"-26"</u>	<u>SC</u>	<u>Bw</u>	<u>2.5Y 5/4</u>	<u>30</u>	<u>Friable.</u>
<u>26"-105"</u>	<u>SC</u>	<u>C₁</u>	<u>2.5Y 5/4</u>	<u>10YR 6/8</u> <u>2.5Y 4/1</u>	<u>Firm. F.M. Sandy till.</u> <u>15% cobbles + Boulders</u>
<u>0-8"</u>	<u>FSL</u>	<u>A</u>	<u>10YR 3/2</u>		
<u>8-24"</u>	<u>SC</u>	<u>Bw</u>	<u>2.5Y 5/4</u>		
<u>24"-105"</u>	<u>SC</u>	<u>C₁</u>	<u>2.5Y 5/4</u>	<u>30"</u> <u>10YR 6/8</u> <u>2.5Y 4/1</u>	<u>Firm. F.M. Sandy till.</u>

TP-1

TP-2
see

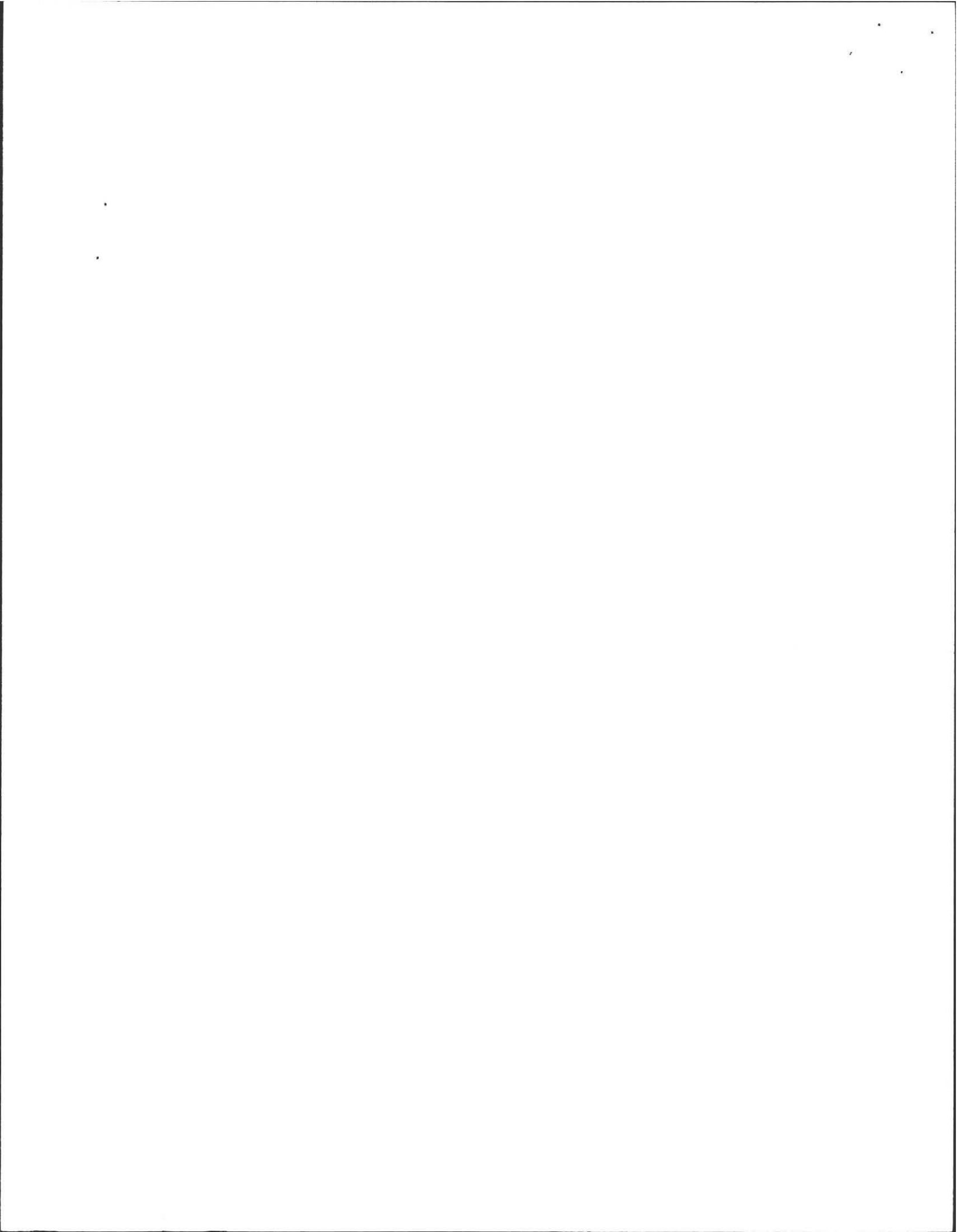
* MINIMUM OF 2 HOLES REQUIRED AT EVERY PROPOSED DISPOSAL AREA

Parent Material (geologic) 6. till Depth to Bedrock: 105" +

Depth to Groundwater: Standing Water in the Hole: 100" Weeping from Pit Face: 44"

Estimated Seasonal High Ground Water: _____





Location Address or Lot No. _____

COMMONWEALTH OF MASSACHUSETTS

, Massachusetts

Percolation Test*		
Date: ... 10/31/05		Time: 1:30..
Observation Hole #	Hole 1	Repair ↓
Depth of Perc	46"	
Start Pre-soak	1:30	
End Pre-soak	1:45	
Time at 12"	1:45	
Time at 9"	1:52	
Time at 6"	2:01	
Time (9"-6")	9 min	
Rate Min./Inch	3 min/in	

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

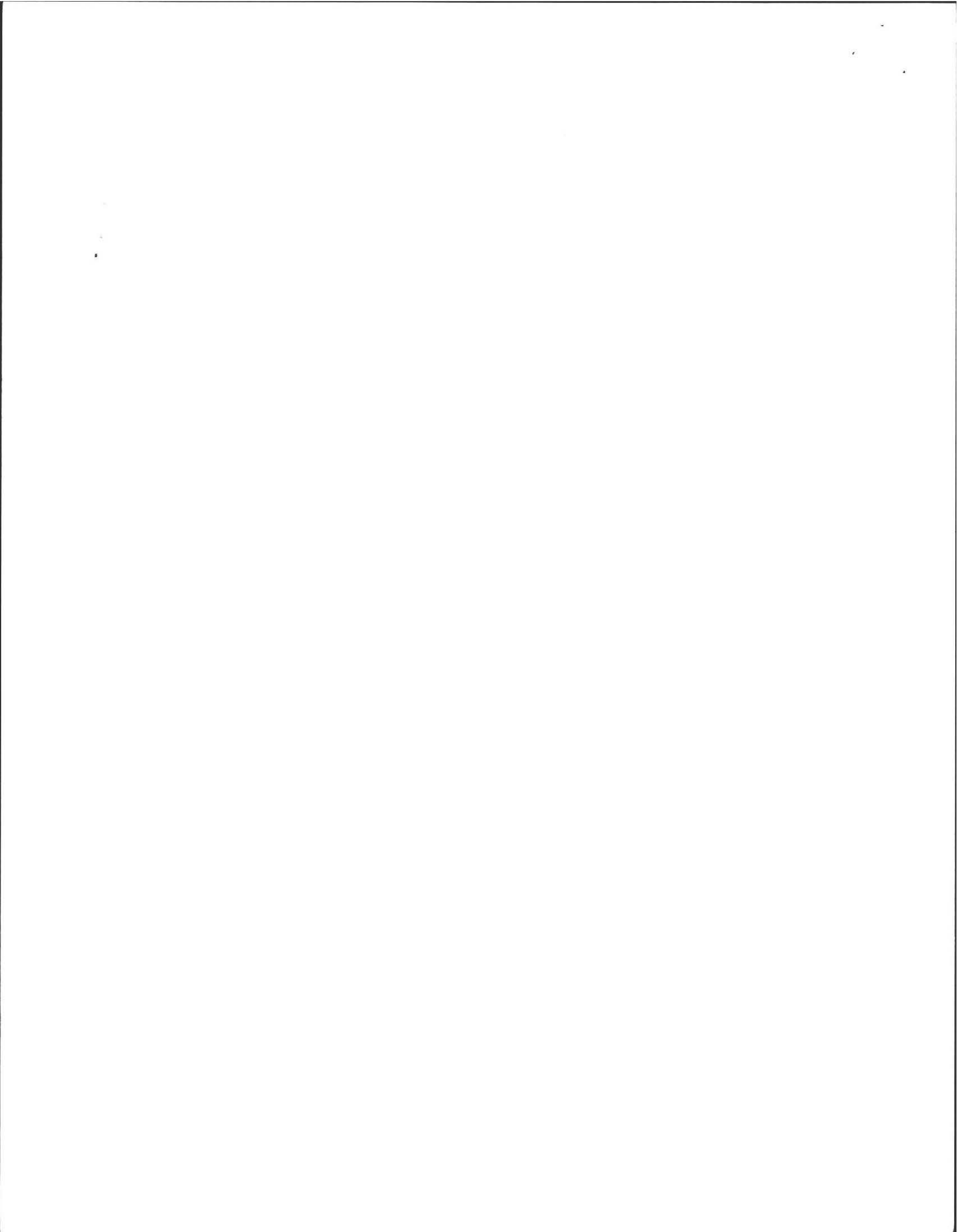
Site Passed Site Failed

Performed By: A. Weiss

Witnessed By: D. Zarozinski

Comments: _____





Location Address or Lot No. 127 Lewertt 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 30 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

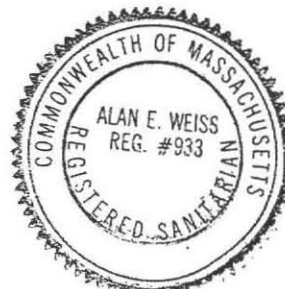
Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system? yes

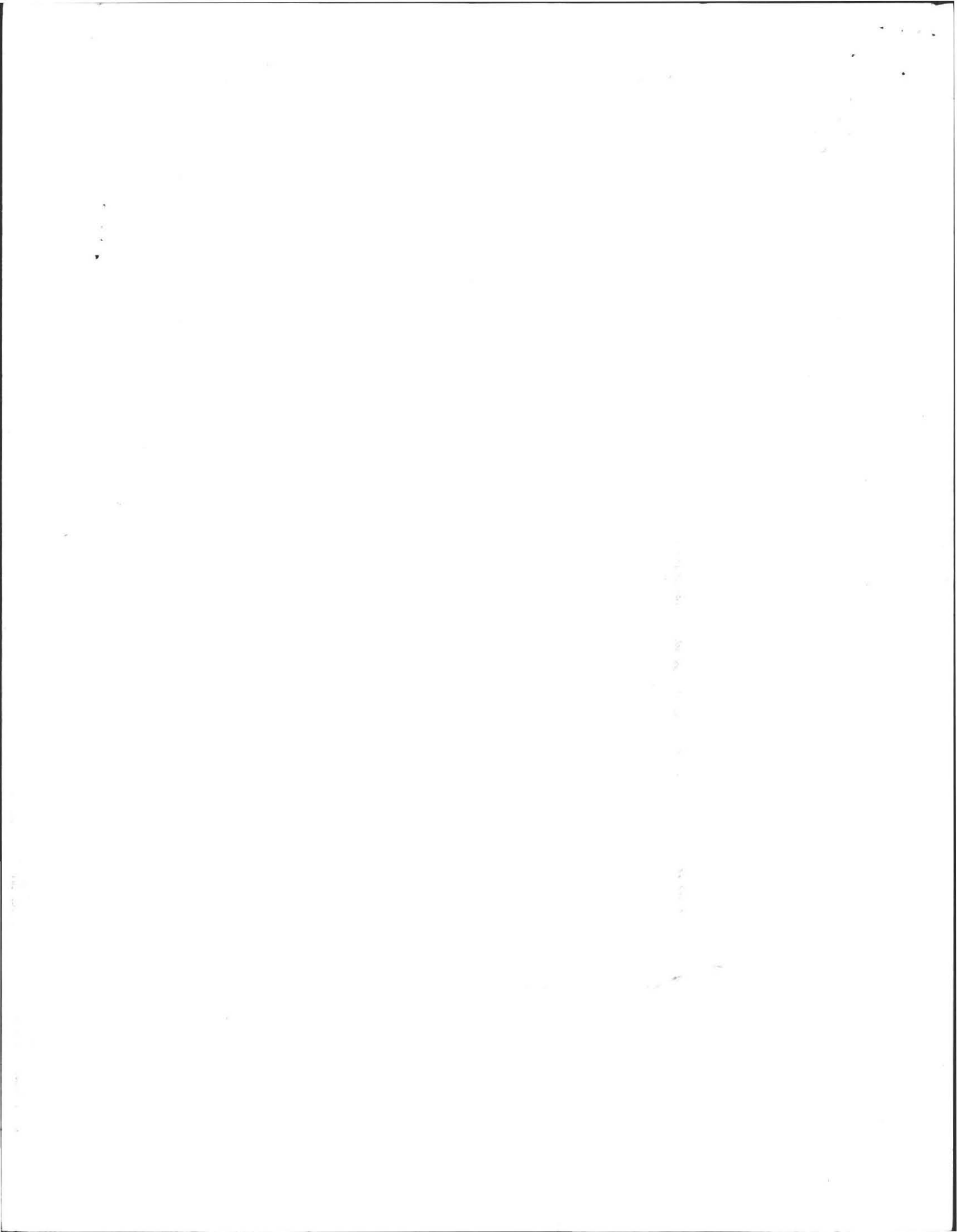
If not, what is the depth of naturally occurring pervious material? _____

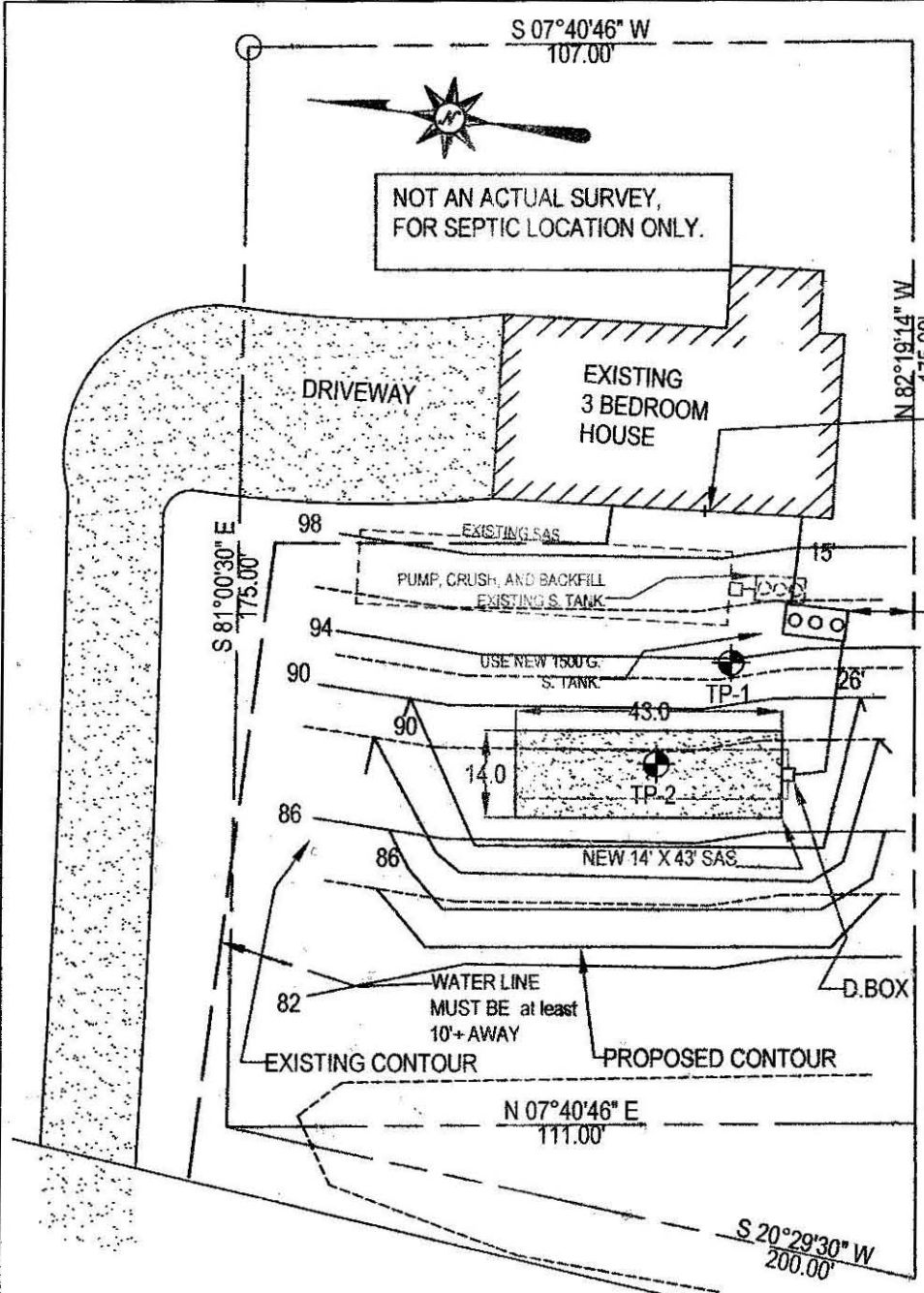
Certification

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 15.01

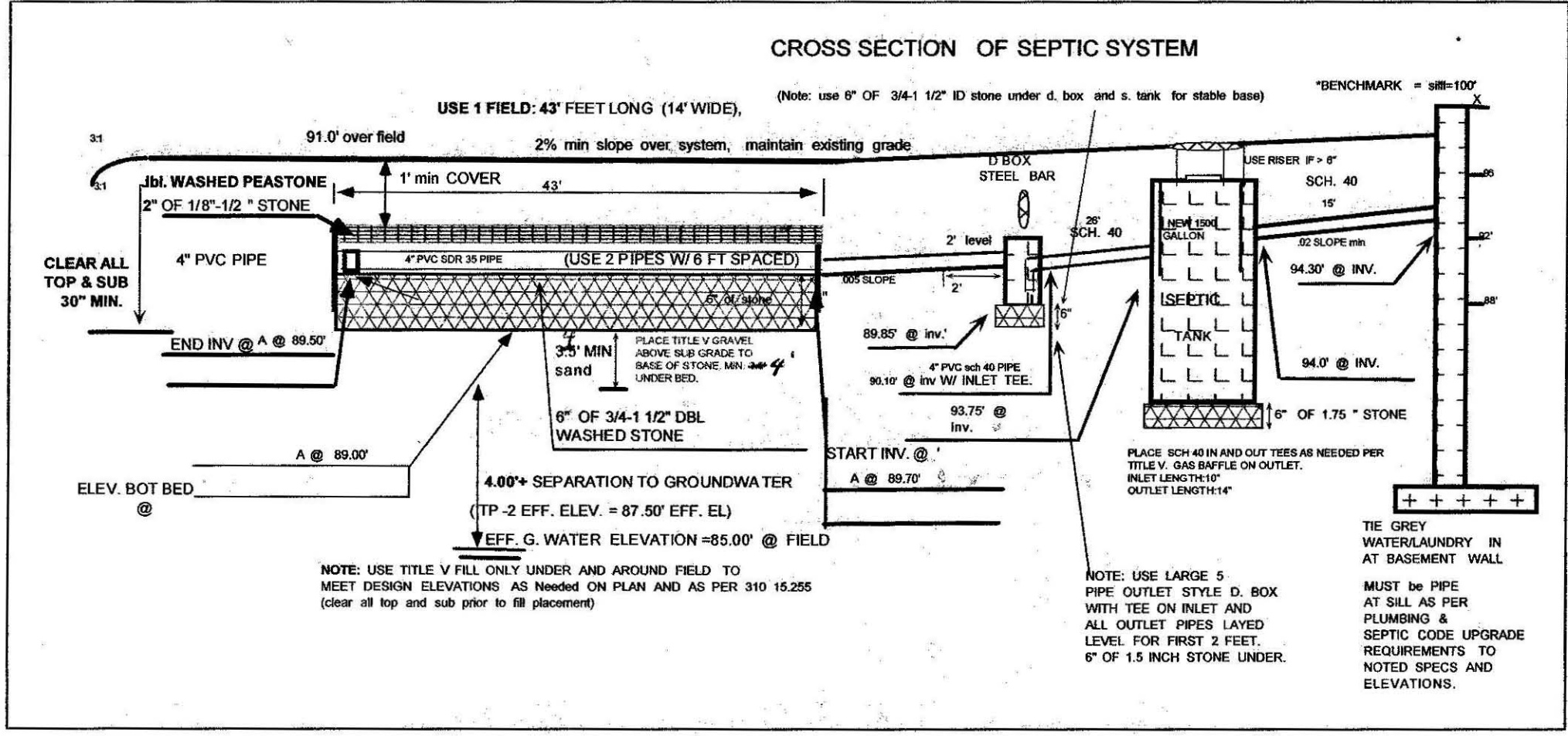
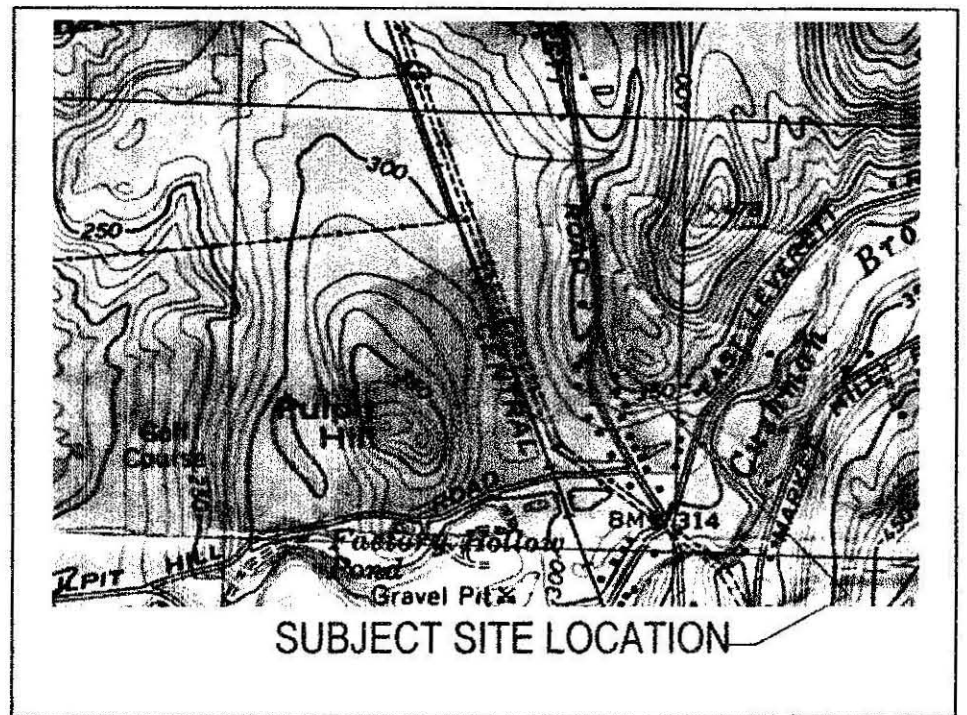
Signature [Signature] Date 10/31/05





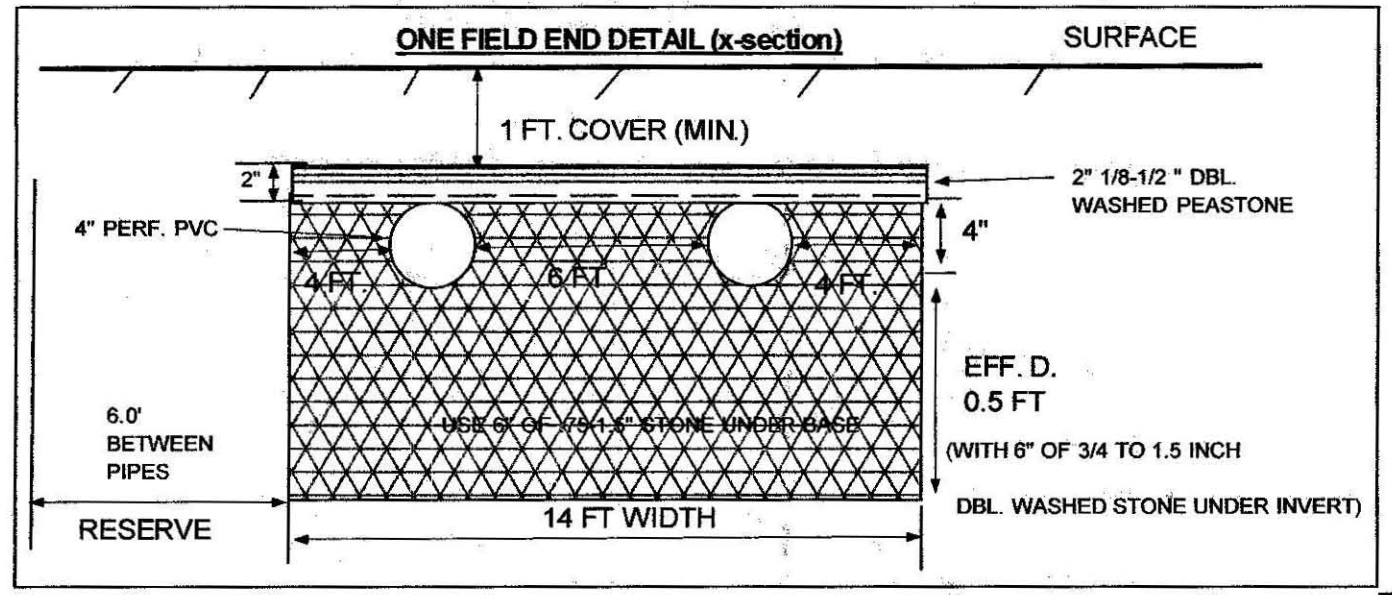
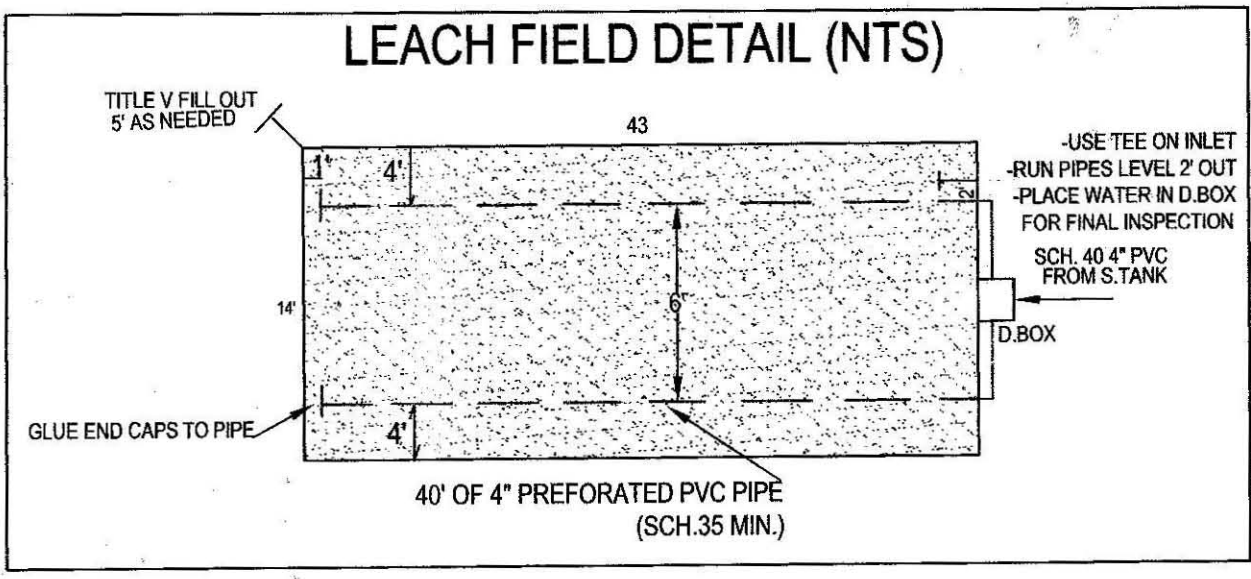
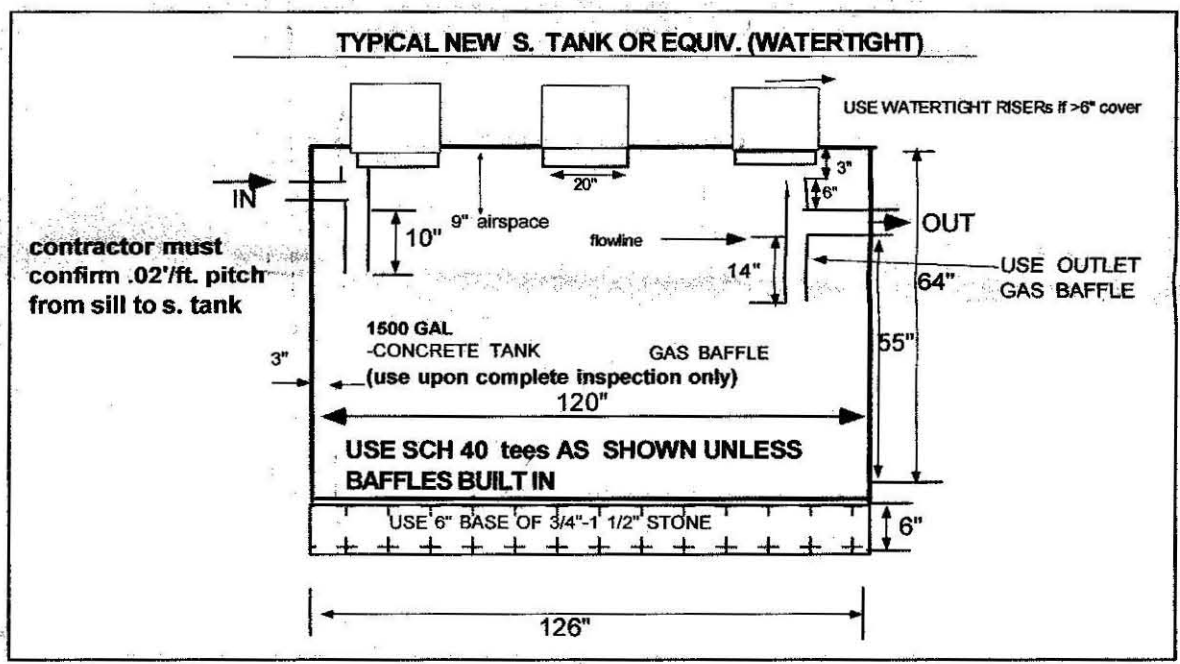
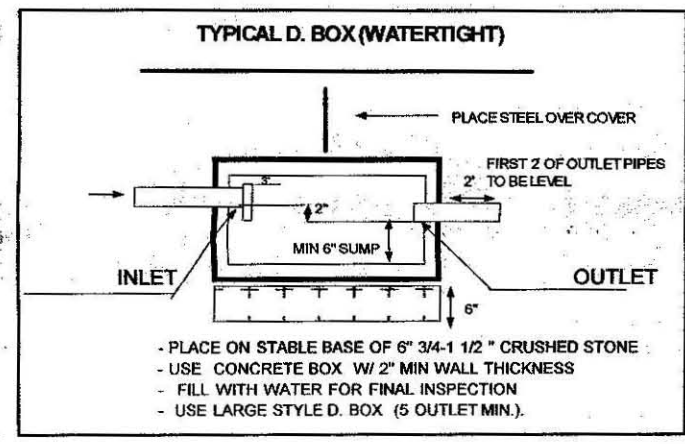


PLOT PLAN
SCALE: 1"=30'
19,071 Sq. Feet
0.438 Acres



- DESIGN NOTES:**
- 3 BR X 110 GAL/PERSONS/DAY=330 GAL/DAY (3 bedroom design),
 - Use ONE FIELD 14' wide x 43' LONG W/6" of 0.5' of DBL washed stone below invert.
Bot. Area: 14' wide x 43' long=602 SF.
Side Area: - SF
Side End Area: SF
Tot. Area: 602 SF x 0.60 gal/sf. = 361 GAL/DAY
 - GARBAGE DISPOSAL NOT ALLOWED. must be removed..
 - ALL D. BOX OUTLET PIPES LEVEL FOR FIRST 2',
 - NO PRIVATE WELLS WITHIN 150 FEET OF SAS (AS NOTED)
 - NO WORK WITHIN 100 FEET OF BWV OR WETLAND.
 - PRE & POST CONITOURS NOTED AS NECESSARY.
 - SUBGRADE & FINIAL INSPECTION REEQUIRED
 - USE NEW 1500 GAL S. TANK AS NOTED & MAINTAIN 0.02 PITCH FROM SILL TO S. TANK
 - SLOPE CALCS (SEE CONTOURS). SUBGRADE INSP. REQ'D.
 - 2% MIN. SLOPE OVER SAS, CLEAR TOP AND SUB TO 30" MIN. AS NEEDED. CLEAR TO BASE OF B (MIN. 30") & SCARIFY SOIL UNDER BED PRIOR TO TITLE V SAND PLACEMENT (if needed).
 - SOIL EVALUATION BY A. WEISS 10/31/2005 (D. ZAROZINSKI, BOH MEMBER).
 - DEPTH OF PERCS: 46" BY A. WEISS 10/31/2005, D. ZAROZINSKI, HEALTH AGENT
 - PERC RATE = 3 MIN/IN, CLASS 2 SOIL RATING (SL)
 - INSTALL/INSPECT SCH. 40 TEES/BAFFLES (10" INLET, 14" OUTLET).
 - USE APPROVED! (1 1/2") DBL. WASHED STONE UNDER BED & D. BOX FOR 6". CONFIRM STONIE PROPERLY WASHED (WITH BUCKET /H2O TEST) PRIOR TO PLACEMENT.
 - NO TREES WITHIN 10 FT. OF NEW LEACH FIELD. USE TITLE V FILL 5' OUT.
 - ENGINEER TO INSPECT SUBGRADE, STUMPS AND BOULDERS WHERE INTERFERES WITH NEW SAS.
 - T.B.M.1. 100.00 AT CORNER PIN (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.
 - USE LEACHING FIELD DUE TO TOPOGRAPHY AND SPACE OF LOT WITH RESPECT TO LOCATION AND ELEVATION OF RESIDENCE (310 CMR 15.240)
 - INSTALLATION IN LOW GROUNDWATER SEASON RECOMMENDED.
 - SEPTIC TANKS AND PUMP CHAMBERS WITH RECEEDING COVERS ARE NOT ALLOWED. BE SURE TO MAINTAIN 3" CLEARANCE FROM TOP OF TEES TO BOTTOM OF TANK COVERS.
 - D. BOXES WITH COVERS AND WALLS LESS THAN 2" THICK ARE NOT ALLOWED PER DESIGN.

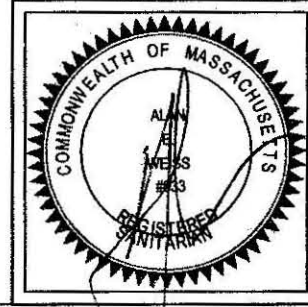
- GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.**
- HAVE TANK PUMPED EVERY 2 YEARS.
 - MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER.
 - DO NOT PLANT ANY TREES OR DEEP ROOTING SHRUBS WITHIN 10 FEET OF SYSTEM.
 - USE ONLY LIQUID DETERGENTS IN WASHERS.
 - CLEAN OUTLET FILTER ANNUALLY IF EQUIPPED.



NOTE TO HOMEOWNER: MOUNDS, WHERE USED, ARE REQUIRED BY STATE CODE TO MAXIMIZE THE DISTANCE OF EFFLUENT FILTRATION FROM THE BOTTOM OF THE FIELD TO THE ESTIMATED HIGH GROUNDWATER. THE "SEPARATION" FROM THE BOTTOM OF THE FIELD TO HIGH GROUNDWATER (3,4, OR 5 FEET), IS NOT THE SAME AS THE HEIGHT OF THE FINISHED MOUND SURFACE. THE ACTUAL FINISHED MOUND IS TYPICALLY HIGHER THAN THE "SEPARATION".

ATTENTION INSTALLER!!
CALL DIG SAFE BEFORE YOU DIG! MASSACHUSETTS STATE LAW CHAPTER 82 SECTIONS 10 - 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 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.



TEST PIT LOG:

TP-1 EFF. EL. 87.50' EFF. 1 ELEV.	TP-2 @ PERC:
0-8" A: F. SANDY LOAM (10 YR 3/2)	0-8"
8-26" Bw: SANDY LOAM (2.5 Y 5/4)	8-26"
26-105" C1: F-M. SANDY 15% cobbles/boulders (2.5 Y 5/4)	24"-105"

OXIDES : OBSERVED @ 30" ((2.5 Y 4/1 10 YR 6/6))
 ESHWT : ASSUMED @ 30"
 100": STANDING H2O
 44": WEEPING FROM FACE
 105": BEDROCK

SEPTIC SYSTEM REPAIR PLAN FOR ROY HART
 127 LEVERETT ROAD
 AMHERST, MA.

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

PHO.NE: (413) 323-5957
 FAX: (413) 323-4916
 e-Mail: AEWCS@charter.net

DATE: 11/28/05	DRAWN BY: ALAN WEISS	REVISED:
SCALE: 1"=30'		DRAWING NUMBER: 105-2344-0928

#127

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 73-21 Date MAY 8 1973 Fee 3.00 Date Rec'd. MAY 8 1973 By CEO

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

Location—Address LEVERETT RD. (127) or Lot No. _____

Owner W.D. Cowles Inc Address No. Amherst

Contractor KARL'S EXC. Address River Dr N HADLEY

Type of Building _____ Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 4 Expansion Attic () Garbage Grinder (X)

Other _____ No. of persons _____ Showers ()

Other fixtures _____

Town Water? _____ Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 400 gallons

Septic Tank—Liquid capacity 1200 gallons Dimensions: L 10'-0" W 5'-4" D 4'-10"

Disposal Trench—No. 1 Width 20 Total Length 40 Total leaching area 800 sq. ft.

Disposal Bed—No. _____ Diameter _____ Depth below inlet _____ Total leaching area _____ 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 R. BRAZEAU Date 4-24-73

Test Pit No. 1 9.3 minutes per inch Depth of Test Pit 2'-7"

Test Pit No. 2 - minutes per inch Depth of Test Pit 6'-6"

Description of Soil GLACIAL TILL Depth to Ground Water _____

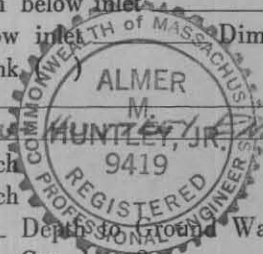
Will disposal area be filled? _____ Cut down? _____

(On reverse side or separate sheet, show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

AGREEMENT: The undersigned agrees to construct the aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health. Keep system shallow.

Application Approved by [Signature] W.D. Cowles Inc Owner or builder 5/8/73 date

Application Disapproved for the following reasons: _____ Paul Jones Inc 5-8-73 date



BOARD OF HEALTH, AMHERST, MASSACHUSETTS

CERTIFICATE OF COMPLIANCE

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed () or repaired () by _____ at _____ has been constructed in accordance with the provisions of

INSTALLER

Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit No. _____

dated _____

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

DATE _____

Inspector _____

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

No. 73-27 Permission is hereby granted W.D. Cowles Inc to construct (X) or repair () an

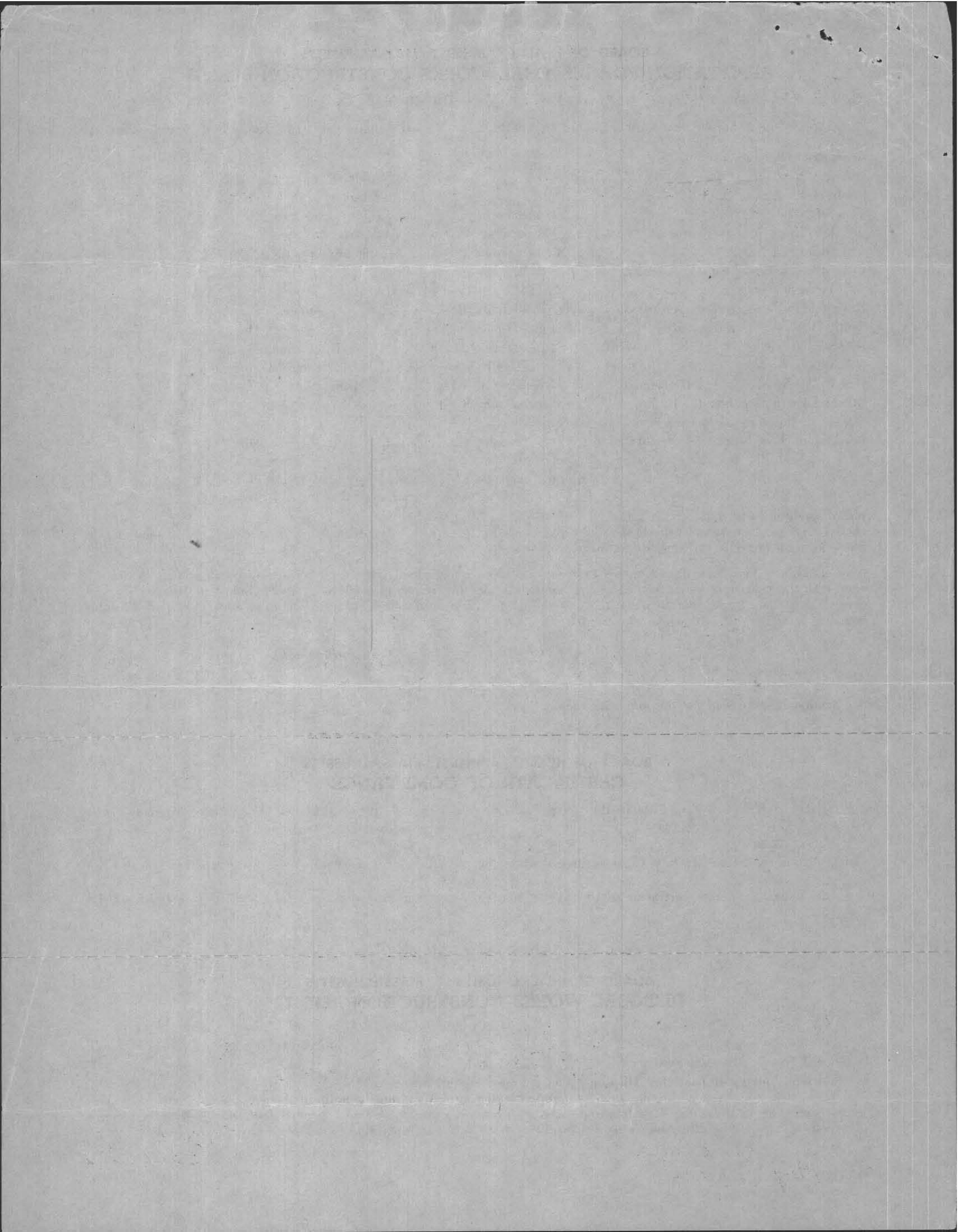
Individual Sewage Disposal System at 127 LEVERETT RD

as shown on the application for Disposal Works Construction Permit No. 73-27

This permit is issued with the understanding that future alterations or additions will be made if necessary. This permit shall not be construed as permission to create or maintain any sewage nuisance and in the issuance of this permit the Board of Health assumes no responsibility for the future operation or maintenance of the system.

DATE MAY 8, 1973

[Signature]
Board of Health



WALTER COWLS JONES
GERALD DENISON JONES

W. D. COWLS Inc.

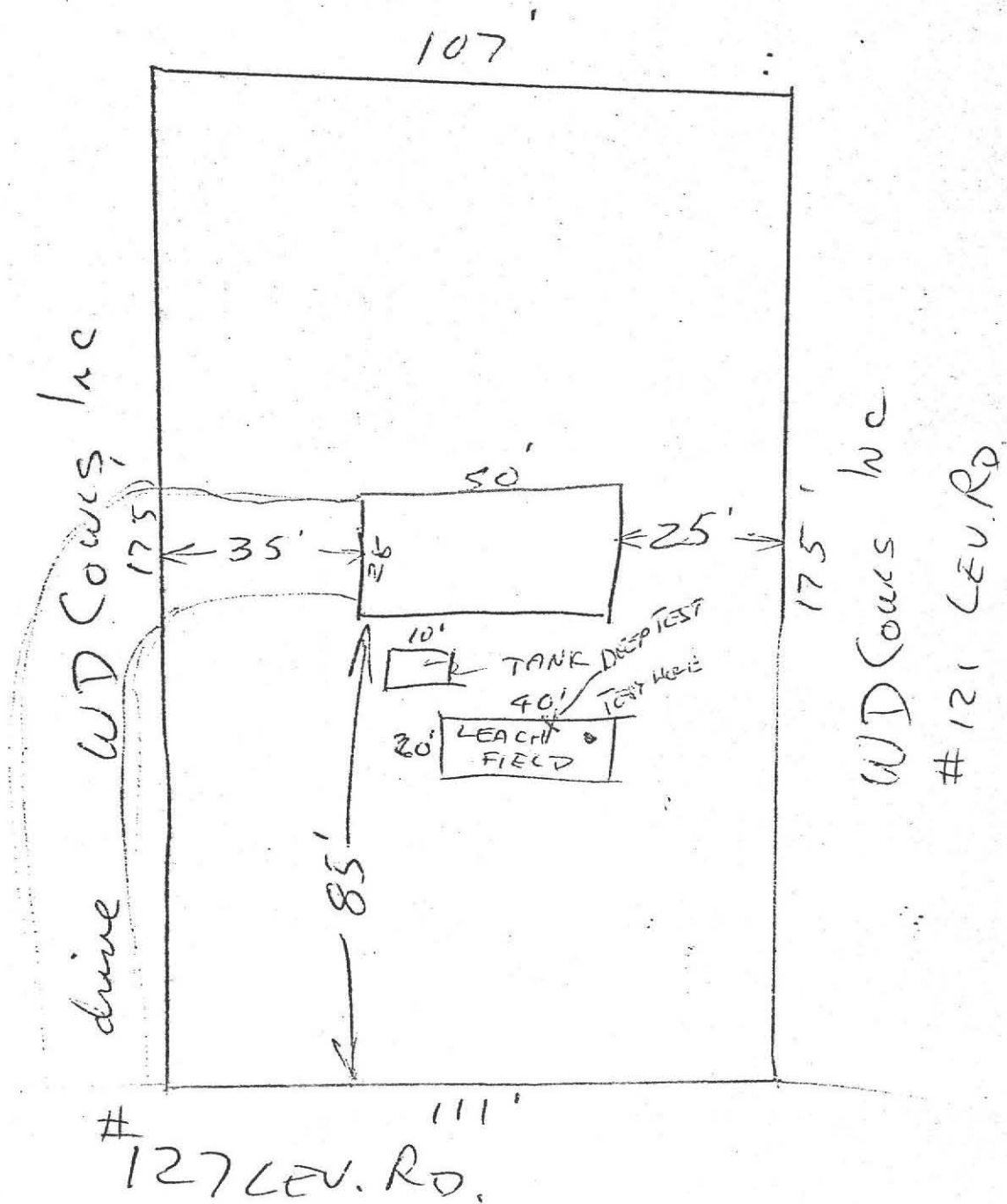
North Amherst, Massachusetts

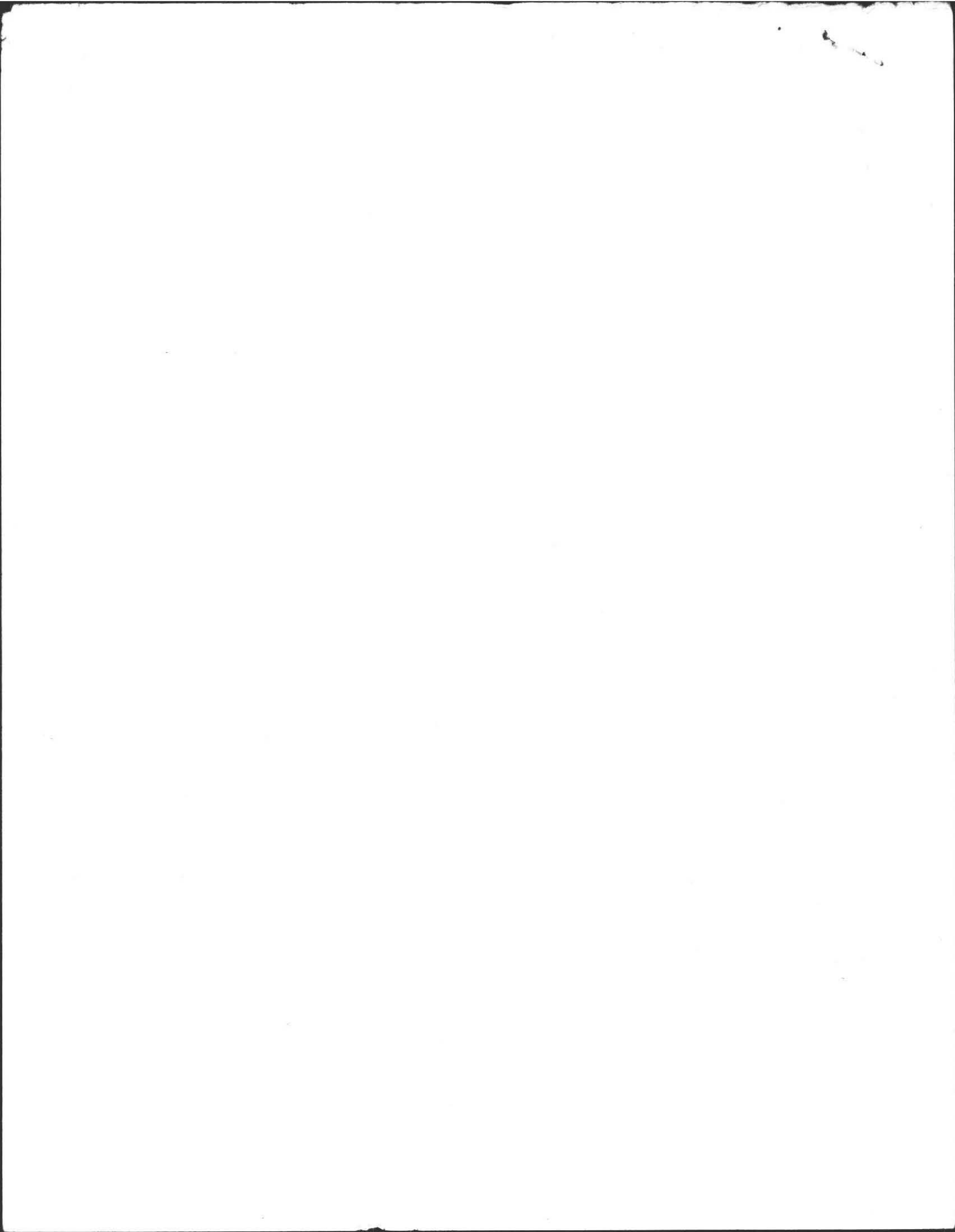
Same location since 1741

Lumbering
Farming
Real Estate

TELEPHONE AMHERST
ALPINE 3-2403

PLOT PLAN - LEVERETT RD #4



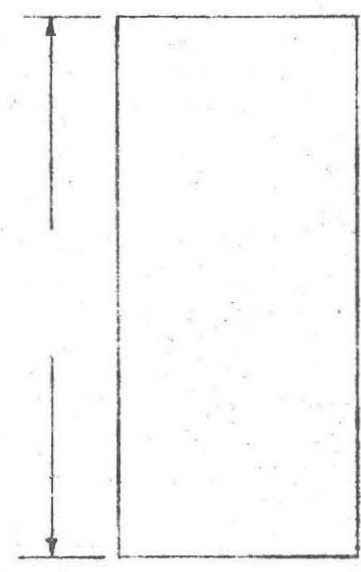
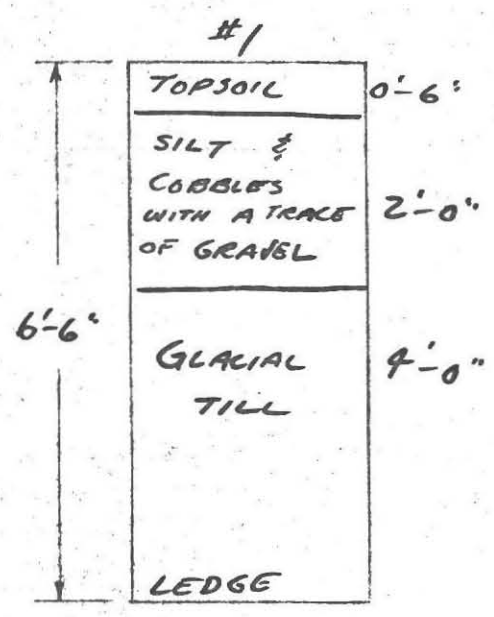


C. DEAR

OBSERVATION PIT

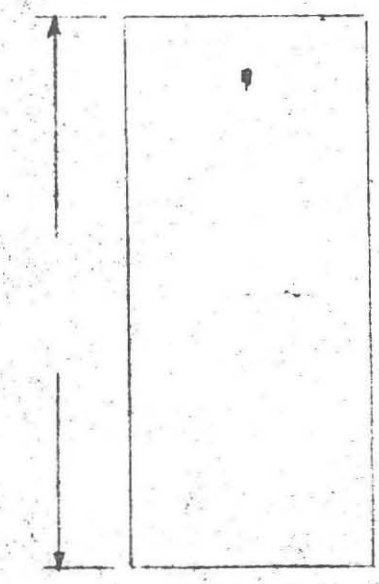
REQUESTED BY: PAUL JONES
 LOCATION: LEVERETT ROAD
AMHERST, MASS.
 MAIL ADDRESS: _____

DATE: 4/24/73
 OBSERVER: R. BRAZEAU



GROUND WATER NONE
 PERC. RATE = 9.3 MIN./IN.

GROUND WATER _____

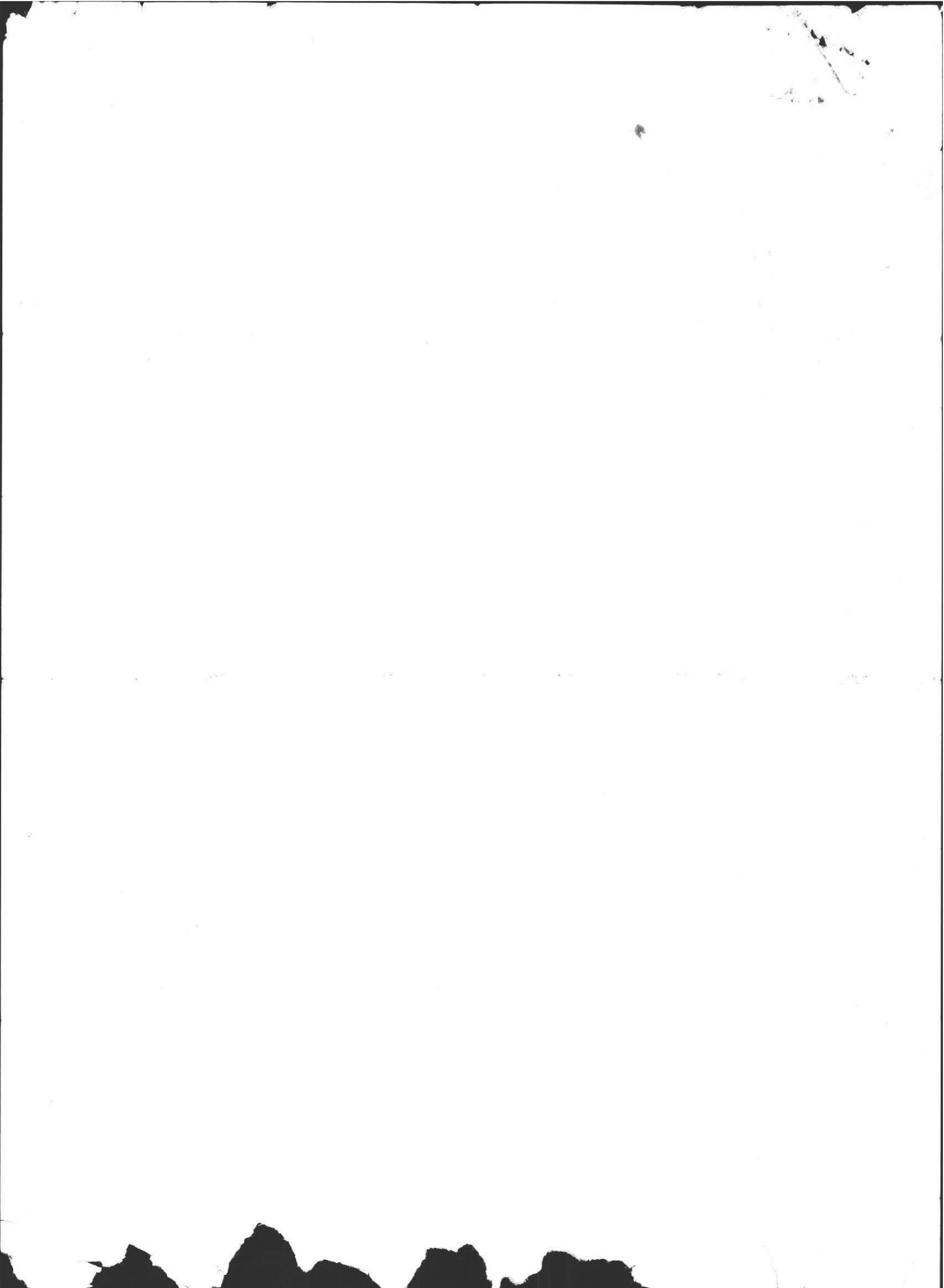


GROUND WATER _____



GROUND WATER _____

ALMER HUNTLEY, JR. & ASSOCIATES, INC.
 REGISTERED LAND SURVEYORS & CIVIL ENGINEERS
 238 BRIDGE STREET
 NORTHAMPTON, MASS.



BOARD OF HEALTH
TOWN OF AMHERST, MASSACHUSETTS

Important Information Regarding Your Private Sewage Disposal System

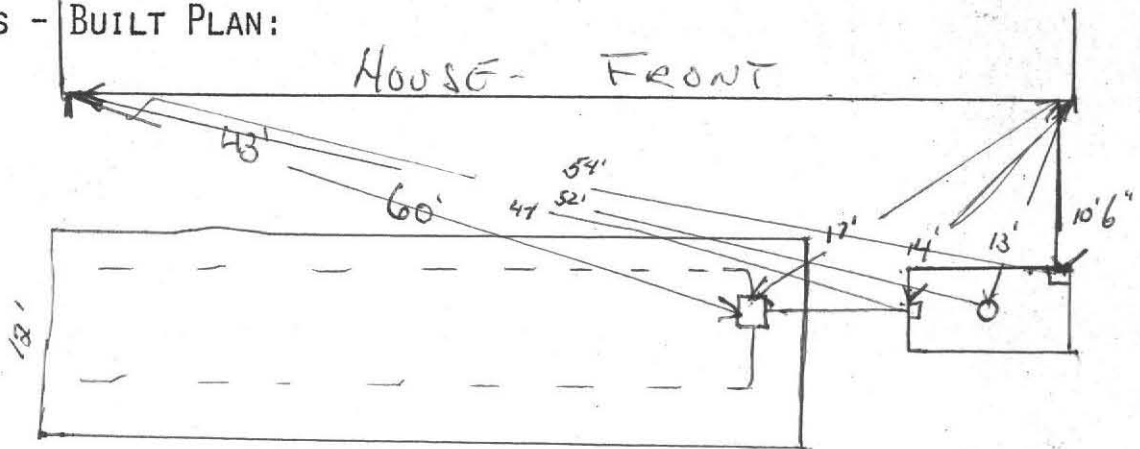
DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner PAUL JONES Address HEUERETT RD
Installer KARL'S INC. Address RIVER DE MADLEY
Date Installation Inspected and Approved 9-5-74
Description of System: Tank Capacity: 1000

Leach Field () Bed (x) Seepage Pit () Square Feet: 720

Garbage Grinder Yes (x) No () No. Bedrooms: 3 No. People 6

As - BUILT PLAN:



PROPER MAINTENANCE OF YOUR PRIVATE SEWAGE DISPOSAL SYSTEM

1. This system must be inspected periodically and the tank pumped out at an interval not to exceed 3 years.
2. For your protection sanitary pumpers are licensed by the Amherst Board of Health.
3. Regular pumping is crucial to avoid early failure and costly repairs of the system.
4. DO NOT dispose into the system such items as rags, string, sanitary napkins, coffee grounds as they can cause it to clog and fail.
5. Further information can be obtained by contacting your Health Department at 253-7077.

*App: 14966
Batch: 1216*

August 2012 INVOICE

AMHERST PUBLIC HEALTH DEPARTMENT

Bangs Community Center
70 Boltwood Walk
Amherst, MA 01002

DATE: August 28, 2012

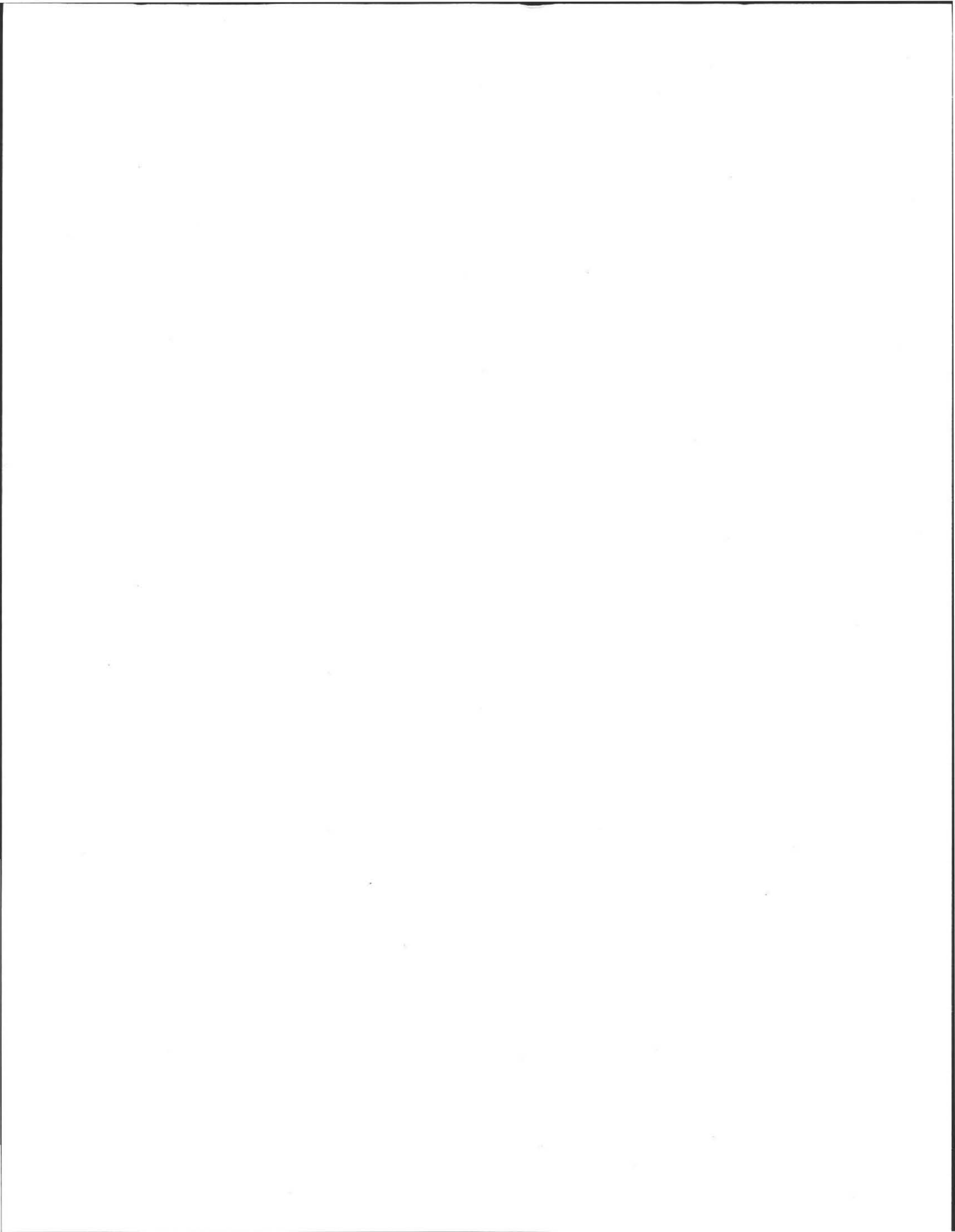
TO Daiheng Ni
 127 Leverett Rd.
 Amherst, MA 01002

RE: Invoice for **Septic Title V witness**

Services provided by **Edmund Smith**

PAYMENT TERMS: I Paid/th

QUANTITY	DESCRIPTION	UNIT PRICE	LINE TOTAL
1.00	Septic Title V witness	\$ 200.00	\$ 200.00
	Rec'd today your check #330 for \$200.00		
	this invoice is paid in full/thank you		
SUBTOTAL			\$ 200.00
SALES TAX			
TOTAL			\$ 200.00



CUST NAME
4 BOLTWOOD AVENUE
08/28/12
CITY, ST, ZIP

***TOWN OF A TOWN HAL
AMHERST M REFERENCE
DATE/TIME 10:12

CUST NAME

0
DEPT

DE HEA058

TITLE V WI 200.

RECPT TOTAL

200.00
DAIHENG NI QUA CHECK

330

AMOUNT

