265 Leverett Rd.

DAVE:

9/26/03

THE DIFFERENCE BETWEEN THE INLET AND OUTLET TEES IN THE SEPTIC TANK AT 265 LEVERETT ROAD WAS ½" IT SHOULD BE 3" ACCORDING TO THE PLAN.

~~I TOLD IT~~ THE INSTALLER SAID HE WILL CORRECT IT I TOLD HIM NOT TO COVER THE TANK UNTIL AFTER HE TALKS TO YOU.

PLEASE CALL HIM MONDAY MORNING 413-665-3788 I THINK HIS NAME IS LARRY.

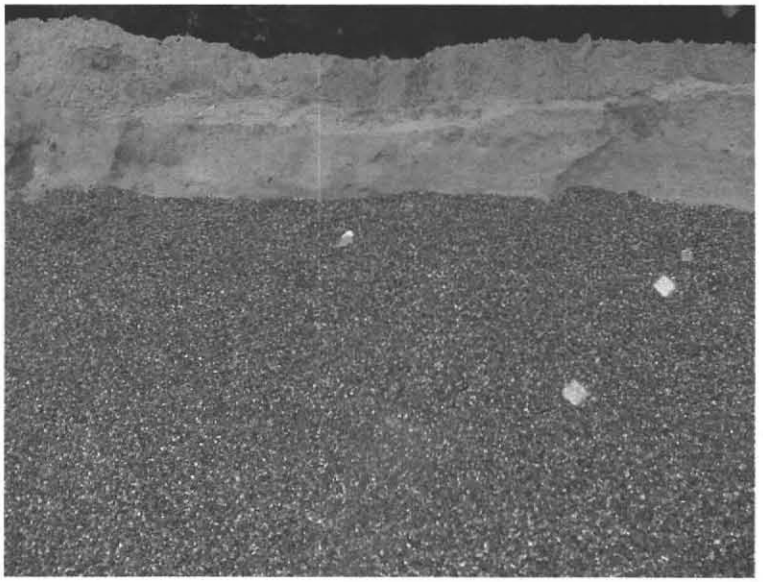
DOUG MACLEAY SAID HE WILL SEND US AN AS BUILT WITH THE TYES AND GRADES ON IT.

TOM

LML Construction, Inc.
d/b/a/ L&F Construction

608 Long Plain Road (Route 63)
Leverett, MA 01054
Phone: (413) 665-3788 • Fax (413) 665-9186

Excavating, Gravel Products



265 Leverett Road 9/26/03
Installer: L & F Construction
Engineer: Doug MacLeay

265 Leverett Road 9/26/03
Installer: L & F Construction
Engineer: Doug MacLeay

9/26/03

SEPTIC SYSTEM INSTALLATION CHECKLIST (310 CMR 15.030)

Applicant _____

Address 265 LAVERETT ROAD Map _____ Lot 9

Disposal System Construction Permit # 03-10

Installer ~~DOUG MACLEAY~~ L+F CONSTRUCTION

Designer DOUG MACLEAY

BOH Representative TOM DION

Inspection Dates

Tank 9/26/03

Leach Area 9/26 03

Final 9/26 03

Other _____

Pre Construction Conference	Approved	N/A	Problem
Seive analysis supplied for sand	____	____	____
Current approved plans (3 copies)	____	____	____
System staked prior to construction	____	____	____
On site check for tank water tightness	____	____	____
Abandonment of existing system (Repairs)	____	____	____
Plan revision(s)	____	____	____
Conditions/Approvals	____	____	____
O/M Plan on file	____	____	____
DEP approval on file	____	____	____

Construction Inspection		Approved	N/A	Problem
Building Sewer 310 CMR 15.222				
All waste pipes tied into building sewer	Basement check	1ST 10' is Plumbing		
Schedule 40 PVC 4" or cast iron	Verify by reading pipe			
Minimum slope of 0.01-0.02	Sight verification	Eng-		
Pipe laid in continuous straight line	Sight verification			
Pipe laid on compact, firm base	Sight verification			
Cleanouts precede all changes in alignment/grade	Verify by visual & tape			
Cleanout provided every 100'	Verify by visual & tape			
Backfill material clean	Sight verify			
Septic Tank 310 CMR 15.223				
Tank is set level with 6" stone under (15.228)	Ck w/level	✓		
Tank is required size/loading per plan	Verify w/plan	✓		
Inlet and outlet are at proper location(15.227)	Verify w/plan	~~✓~~		✓
Tank is water tight(15.226)	Test			
Outlet tees extend 6" above flow line	Verify by visual/tape			
Approved filter device placed at outlet	DEP list	✓		
Gas baffle installed at outlet tee	Visual	✓ Sched 40 Pipe		
Inlet and outlet tees on center line	Visual	✓		
Tank is backfilled with acceptable material	Visual	✓		

Minimum Cover 9" ~~AT~~
MAX Cover 36" Need Risers

Notes: ½" Difference between INLET AND OUTLET TEES MUST BE 3" PER PLAN.

		Approved	N/A	Problem
Distribution Box 310 CMR 15.232				
All outlet pipes at same elevation	Ck by adding water			
Number of outlets 3	Number of laterals 3 (per plan)			
Inlet tee min. 1" over outlet	Visual & w/tape	✓		
D box set on level base	Visual	✓		
Top of D box 36" max depth	Visual & w/tape	✓		
D box is water tight	Add water	✓		
D box has a minimum of 2" thick wall and is at least 12"		✓		
Pump Chamber 310 CMR 15.231				
Tank is set level	Visual & w/level			
Proper volume is provided	Ck plan & tank			
Float elevations set per plan	Measure w/tape			
Min. 2" delivery line to D box	Visual			
Number of pumps				
Specified pump provided or designers approval for equal pump				
Correct pump sequence				
Covers set to grade				
Electrical permit provided				
6" of stone beneath chamber	Visual			
Chamber is water tight	Test			
Min. 9" cover provided	Visual			
Correct loading provided per plan	Visual on tank			

Notes:

Leaching Facility *310 CMR 15.240*		*Approved*	*N/A*	*Problem*
No frozen material used including back fill	Visual	✓		
No clay, tailings or stones larger than 6" for cover material		✓		
Soil at bottom/sides of excavation matches info on deep holes				
All impervious layers removed	Visual			
No remaining A/B horizons	Visual	/		
Groundwater conditions match plan and deep holes	Visual/ck plan			
Vented if under impervious cover per plan (15.241)				
Vent is protected from precipitation and animal entry				
Cover of a minimum of 9" over leach area MAX 3'		✓		
Pipe slope equal to 0.005	Ck w/transit			
Leach area per design (15.241)				
Excavation is level and at required depth	Visual/ck plan			
Removal of 5' material and replacement (if in fill)	Visual			
Back fill material is acceptable	Visual			
Final contours correct per plan	Ck w/plan			
Surface/subsurface drainage away from leach area				
✓ Final grade and side slopes are stable 15' OUT FROM END 3 TO 1 SLOPE TO GROUND				
Distribution lines are capped, vented, or connected together				
Impermeable barrier (15.255[2])				
Retaining wall inspected by PE				
Retaining wall is water proofed				
Retaining wall/barrier is at correct depth/height				

		Approved	N/A	Problem
Leaching trenches 310 CMR 15.251				
Number of trenches _____				
Depth of trenches _____				
Width of trenches _____				
Trench spacing per plan				
Stone is double washed [3/4" to 1 ½ "] (15.247)				
Leaching Fields 310 CMR 15.242				
Length of field 46'		✓		
Width of field 16'		✓		
Min. of 2 distribution lines		✓		
Separation distance conforms to plan		✓		
Stone is double washed [3/4" to 1 ½"] (15.247)		✓		
Leaching Pits 310 CMR 15.253				
Number of pits _____				
Depth of pits _____				
Stone is double washed [3/4" to 1 ½"] (15.247)				
Each pit has min. 1 20" access cover				
Piping network and configuration of pits/chambers per plan				
Tight Tank 310 CMR 15.260				
Tank is set level with 6" stone under	Visual & w/level			
Tank is proper size per plan	Visual w/plan			
Pumping contract has been provided				
Covers to grade	Visual			
A/V alarm set at 3/5 tank capacity	Ck floats by raising			
A/V alarm test on separate circuit	Set off alarm			

Certificate of Compliance 310 CMR 15.021

	Date
As Built Plan Submitted	_____
Signed by Installer	_____
Signed by Designer	_____
Certificate of Compliance Issued	_____

Notes:

_____

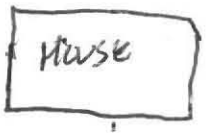
_____

_____

_____

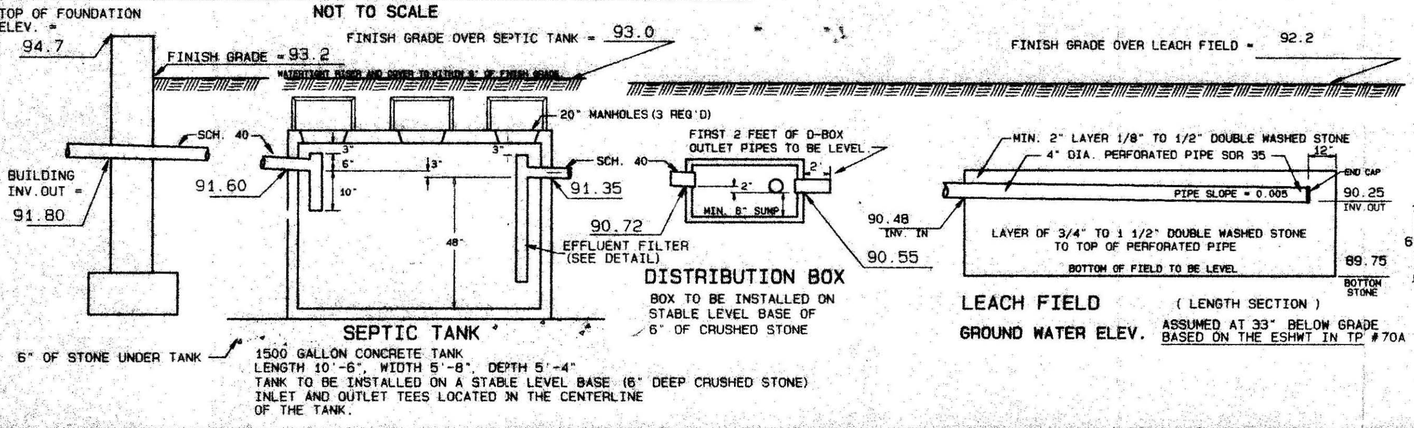
_____

_____


House

SANITARY SYSTEM PROFILE

NOT TO SCALE



SEPTIC TANK

1500 GALLON CONCRETE TANK
LENGTH 10'-6", WIDTH 5'-8", DEPTH 5'-4"
TANK TO BE INSTALLED ON A STABLE LEVEL BASE (6" DEEP CRUSHED STONE)
INLET AND OUTLET TEES LOCATED ON THE CENTERLINE OF THE TANK.

DISTRIBUTION BOX

BOX TO BE INSTALLED ON STABLE LEVEL BASE OF 6" OF CRUSHED STONE

LEACH FIELD (LENGTH SECTION)

GROUND WATER ELEV. ASSUMED AT 33" BELOW GRADE BASED ON THE ESHWT IN TP #70A

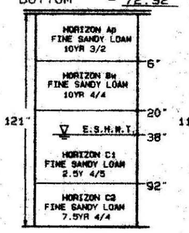
LEACHING FIELD
(CROSS SECTION)
AT INVERT OUT

TEST PIT DATA

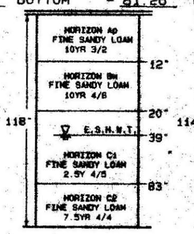
BOARD OF HEALTH WITNESS: DAVID ZAROZINSKI
DATE: NOVEMBER 20, 2002
SOIL EVALUATOR: CHRISTIAN BOYSEN & DOUGLAS J. MacLEAY, P.E.

PERC TEST ID	PERC RATE (MIN/IN)	PERC DEPTH (IN)
69	6	42
70	10	46
70A	2	40

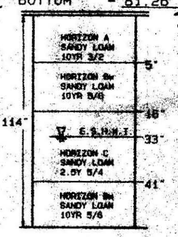
TEST PIT # 69
ELEV. TOP = 81.75
ESHWT = 79.08
OBS. H20 = NONE
BOTTOM = 72.92



TEST PIT # 70
ELEV. TOP = 89.93
ESHWT = 86.85
OBS. H20 = NONE
BOTTOM = 81.26



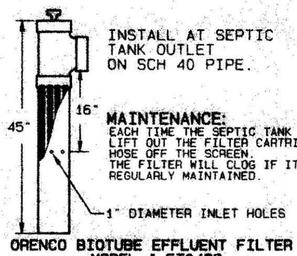
TEST PIT # 70A
ELEV. TOP = ~~89.33~~ 89.81
ESHWT = 86.85 86.06
OBS. H20 = NONE
BOTTOM = 81.26 81.81



NOTES:

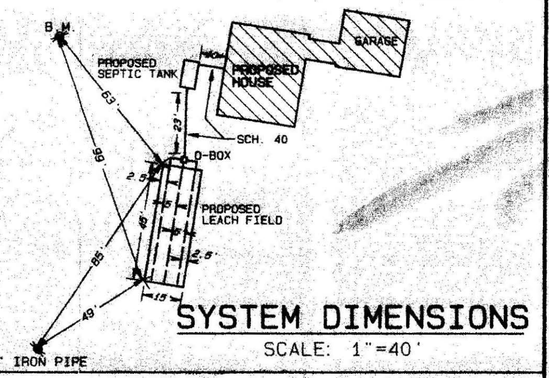
1. REMOVE TOPSOIL & SUBSOIL BENEATH THE LEACHING FIELD AND TO 5' ON ALL SIDES OF THE FIELD. REPLACE WITH FILL MATERIAL MEETING THE SPECIFICATIONS OF 310 CMR 15.255(3). (TITLE 5, 310 CMR 15.255(5).)
2. TITLE 5 REQUIRES OBSERVATION OF THE INSTALLED SYSTEM BY THE DESIGN ENGINEER AND A BOARD OF HEALTH MEMBER OR AGENT FOR THE BOARD OF HEALTH. THE SYSTEM MUST NOT BE BACKFILLED PRIOR TO OUR OBSERVATION. CONTACT OUR OFFICE AND THE BOARD OF HEALTH TWO BUSINESS DAYS BEFORE REQUESTED DATE FOR OBSERVATION.
3. ALL DISTURBED AREAS SHOULD BE LOAMED, RAKED, FERTILIZED, SEEDED AND MULCHED AT THE COMPLETION OF CONSTRUCTION.

PROPERTY LINE REFERENCE:
PROPERTY LINES AS SHOWN ARE BASED ON A PLAN OF LAND IN AMHERST, MASSACHUSETTS. PREPARED FOR NORTHAMPTON ASSOCIATES, INC. PREPARED BY H.L. EATON ASSOC. DATED OCTOBER 21, 2002.



MAINTENANCE:
EACH TIME THE SEPTIC TANK IS PUMPED, LIFT OUT THE FILTER CARTRIDGE AND HOSE OFF THE SCREEN. THE FILTER WILL CLOG IF IT IS NOT REGULARLY MAINTAINED.

ORENCO BIOTUBE EFFLUENT FILTER MODEL # FT0436
AVAILABLE FROM WASTEWATER TECHNOLOGIES, INC., 18 PRECAST ROAD, MILTON, VT. 05468 (802) 869-3219



SYSTEM DIMENSIONS
SCALE: 1"=40'

DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE
DESIGN FLOW 110 GALLON PER DAY PER BEDROOM
TOTAL DESIGN FLOW 330 GALLON PER DAY.

SEPTIC TANK
330 (GALLONS X 200% = 660 GALLONS DESIGN CAPACITY.
USE 1500 GALLON SEPTIC TANK.

LEACHING FIELD
BOTTOM:
45' LENIGTH X 15' WIDTH = 675 SQUARE FEET.
675 SQ. FT. X .53 GAL. PER SQ.FT. = 357 GAL. LEACHING.
TOTAL LEAICHING CAPACITY = 357 GALLONS PER DAY.

NOTE: PER TITLE 5, 310 CMR 15.240(6): A FIELD IS DESIGNED FOR THIS SITE DUE TO THE AREA LIMITATIONS CAUSED BY THE HOUSE LOCATION AND PROPERTY LINES.

GENERAL NOTES

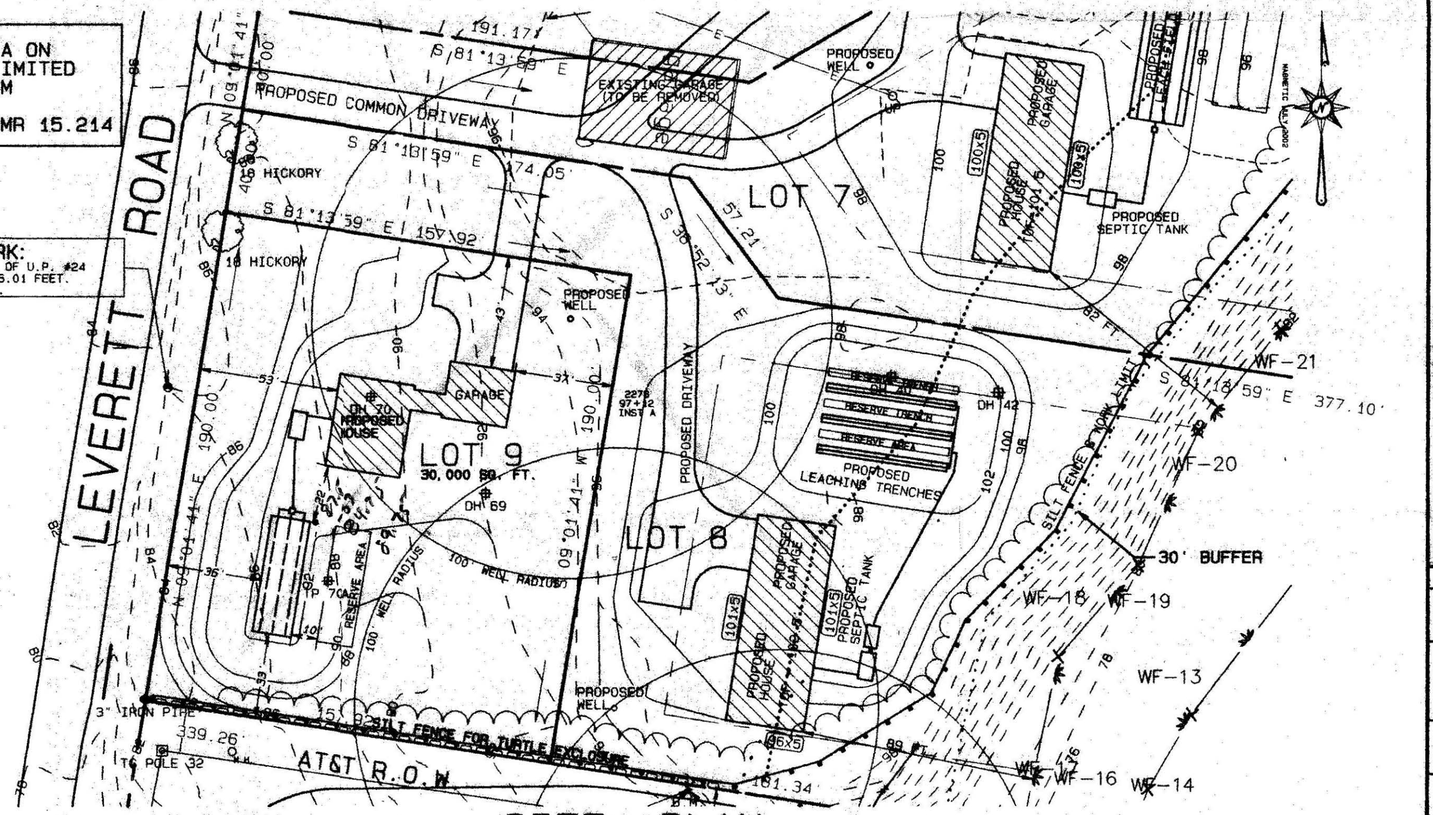
1. 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM EXCEPT WHERE OTHERWISE NOTED.
2. 4" SDR 35 PERFORATED PIPE TO BE USED IN LEACHING AREA.
3. 1500 GALLON REINFORCED CONCRETE SEPTIC TANK.
4. AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
5. ELEVATIONS BASED ON ASSUMED DATUM
6. UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 5 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
7. ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
8. THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- 100 EXISTING CONTOURS
- 100 PROPOSED CONTOURS
- 4" SDR 35 PERFORATED PIPE
- 4" SDR 35 SOLID PIPE
- WATER LINE
- FENCE
- EDGE OF WETLAND
- CENTERLINE STREAM
- PROPERTY LINE
- STONEWALL

THE LEACH AREA ON THIS LOT IS LIMITED TO A 3 BEDROOM CAPACITY
TITLE 5 310 CMR 15.214

BENCHMARK:
SPIKE IN BASE OF U.P. #24
ELEVATION = 86.01 FEET.
ASSUMED DATUM.



SITE PLAN

GRAPHIC SCALE 1"=40'
0 40 80 120

SHEET NO. 1 OF 1.					
SCALE AS SHOWN	APPROVED:	REV.	DATE	BY	DESCRIPTION / APPR.
DRN. BY S.K.					
CHECKED D.M.					

TITLE: SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS.
FOR: AMHERST BUILDING COMPANY, LLC
LEVERETT ROAD
DATE: MAY 14, 2002
JOB NO. 2002-072-9

COMMONWEALTH OF MASSACHUSETTS — DOUGLAS J. MACLEAY — No. 31203 CIVIL — REGISTERED PROFESSIONAL ENGINEER

MacLeay Associates, Inc. civil engineers
102 Bridge Street, Shelburne Falls, MA 01370
phone: (413) 625-9774 fax: (413) 625-9704 email: macleay@crocker.com

MacLeay Associates, Inc. civil engineers
102 Bridge Street, Shelburne Falls, MA 01370
phone (413) 625-9774
fax (413) 625-9704
email: macleay@crocker.com

SYSTEM INSTALLATION OBSERVATION REPORT

SITE INFORMATION

LOT # 9 DATE: 10/02/03
STREET LEVERETT ROAD
TOWN AMHERST
JOB # 2002-072-9

OWNER INFORMATION

PROPERTY OWNER AMHERST BUILDING CO.
STREET ADDRESS 25 MAIN STREET; SUITE 445
TOWN NORTHAMPTON, MA 01060

INSTALLER INFORMATION

NAME OF INSTALLER L & F CONSTRUCTION
STREET ADDRESS 608 LONG PLAIN ROAD
TOWN LEVERETT, MA 01054

OBSERVATION RESULTS

DATE OF OBSERVATION: *09/26/03*

(X) THE SYSTEM APPEARED TO BE INSTALLED SUBSTANTIALLY IN ACCORDANCE WITH THE APPROVED PLAN, AND IS IN COMPLIANCE WITH TITLE 5.

( ) THE SYSTEM DOES NOT APPEAR TO HAVE BEEN INSTALLED ACCORDING TO THE APPROVED PLAN, AND IS NOT IN COMPLIANCE WITH TITLE 5.

DEFICIENCIES: _____

( ) THE SYSTEM DOES NOT APPEAR TO HAVE BEEN INSTALLED ACCORDING TO THE APPROVED PLAN, BUT IS IN COMPLIANCE WITH TITLE 5. ENCLOSED IS A COPY OF THE PLAN SHOWING "*AS BUILT*" LOCATIONS AND ELEVATIONS.

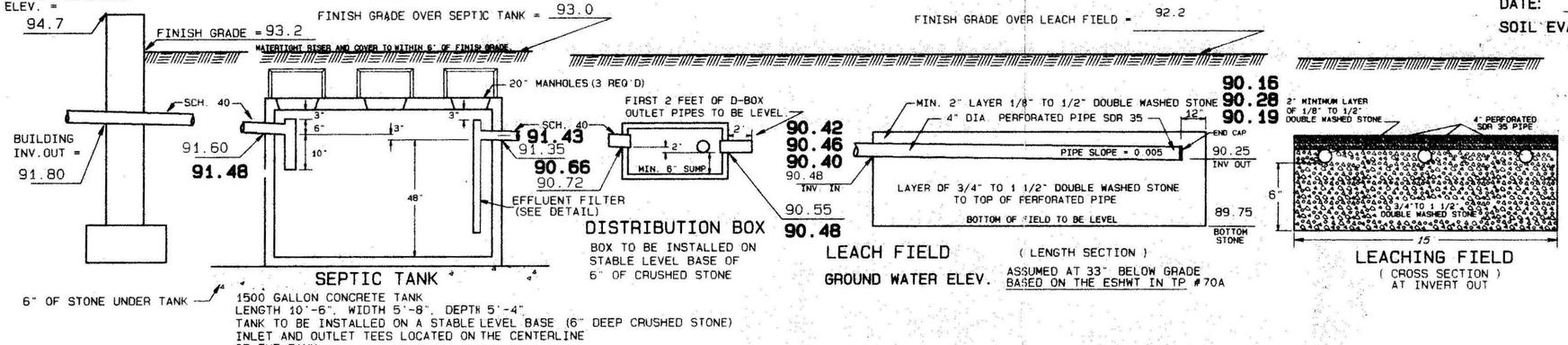
COMMENTS: _____

DOUGLAS J. MacLEAY, P.E.
PRESIDENT

SEND COPIES TO: BOARD OF HEALTH
L & F
AMHERST BUILDING

SANITARY SYSTEM PROFILE

NOT TO SCALE



TEST PIT DATA

BOARD OF HEALTH WITNESS: DAVID ZAROZINSKI
DATE: NOVEMBER 20, 2002
SOIL EVALUATOR: CHRISTIAN BOYSEN & DOUGLAS J. MacLEAY, P.E.

PERC TEST ID	PERC RATE (MIN/IN)	PERC DEPTH (IN)
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70	10	46
70A	2	40

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ESHWT = 79.08
OBS. H2O = NONE
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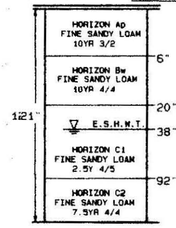

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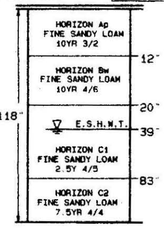
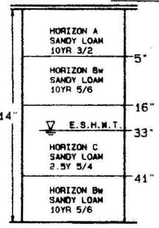
BOTTOM = 81.26



TEST PIT # 70A
ELEV. TOP = 87.81
ESHWT = 85.06
OBS. H2O = NONE
BOTTOM = 78.31



NOTES:

1. REMOVE TOPSOIL & SUBSOIL BENEATH THE LEACHING FIELD AND TO 5' ON ALL SIDES OF THE FIELD. REPLACE WITH FILL MATERIAL MEETING THE SPECIFICATIONS OF 310 CMR 15.255(3). (TITLE 5, 310 CMR 15.255(5).)
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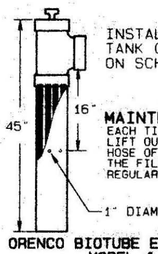
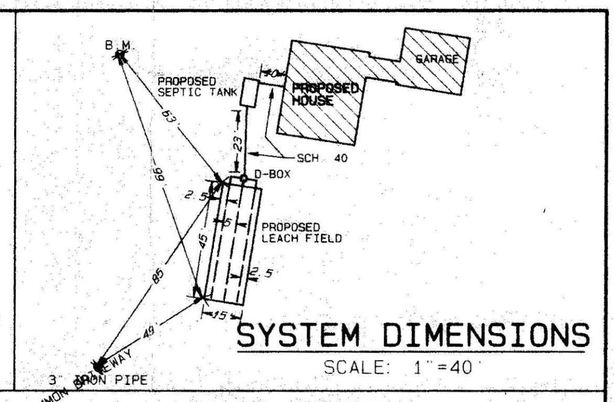


MAINTENANCE:
EACH TIME THE SEPTIC TANK IS PUMPED, LIFT OUT THE FILTER CARTRIDGE AND HOSE OFF THE SCREEN. THE FILTER WILL CLOG IF IT IS NOT REGULARLY MAINTAINED.

ORENCO BIOTUBE EFFLUENT FILTER MODEL # FT0436
AVAILABLE FROM WASTEWATER TECHNOLOGIES, INC., 18 PRECAST ROAD, MILTON, VT 05468 (802) 869-3219



SYSTEM DIMENSIONS

SCALE: 1"=40'

DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE
DESIGN FLOW 110 GALLON PER DAY PER BEDROOM
TOTAL DESIGN FLOW 330 GALLON PER DAY.

SEPTIC TANK
330 GALLONS X 200% = 660 GALLONS DESIGN CAPACITY.
USE 1500 GALLON SEPTIC TANK.

LEACHING FIELD
BOTTOM:
45' LENGTH X 15' WIDTH = 675 SQUARE FEET.
675 SQ. FT. X .53 GAL. PER SQ.FT. = 357 GAL. LEACHING.
TOTAL LEACHING CAPACITY = 357 GALLONS PER DAY.

NOTE: PER TITLE 5, 310 CMR 15.240(6): A FIELD IS DESIGNED FOR THIS SITE DUE TO THE AREA LIMITATIONS CAUSED BY THE HOUSE LOCATION AND PROPERTY LINES.

GENERAL NOTES

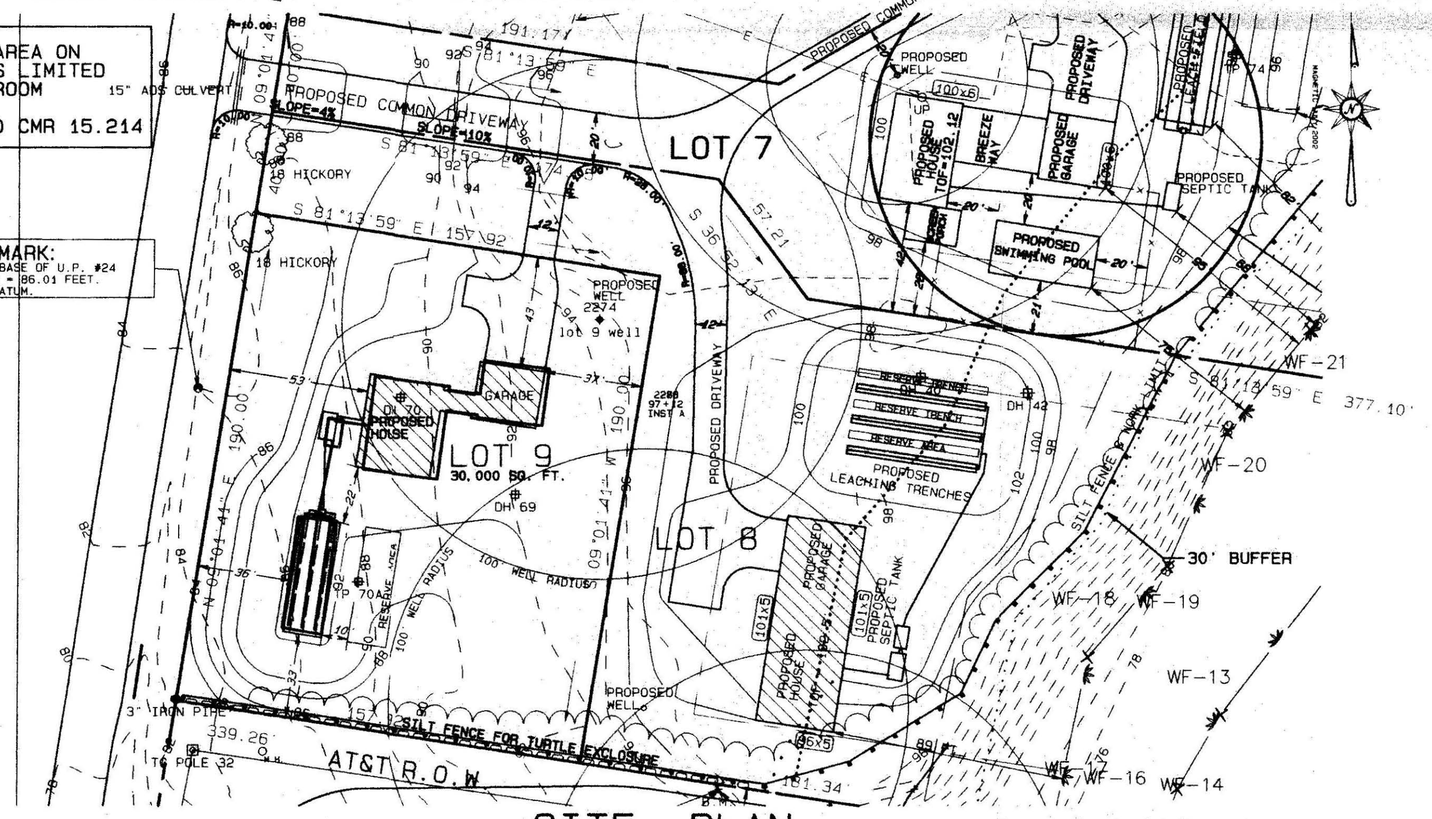
1. 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM EXCEPT WHERE OTHERWISE NOTED
2. 4" SDR 35 PERFORATED PIPE TO BE USED IN LEACHING AREA.
3. 1500 GALLON REINFORCED CONCRETE SEPTIC TANK.
4. AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
5. ELEVATIONS BASED ON ASSUMED DATUM
6. UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 5 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
7. ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
8. THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- EXISTING CONTOURS
- PROPOSED CONTOURS
- 4" SDR 35 PERFORATED PIPE
- 4" SDR 35 SOLID PIPE
- WATER LINE
- FENCE
- EDGE OF WETLAND
- CENTERLINE STREAM
- PROPERTY LINE
- **AS-BUILT**

THE LEACH AREA ON THIS LOT IS LIMITED TO A 3 BEDROOM CAPACITY. TITLE 5 310 CMR 15.214

BENCHMARK:
SPIKE IN BASE OF U.P. #24
ELEVATION = 86.01 FEET.
ASSUMED DATUM.



SITE PLAN

GRAPHIC SCALE 1"=40'
0 40 80 120

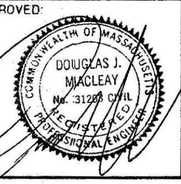
AS-BUILT LOCATIONS AND ELEVATIONS ARE BASED ON FIELD SURVEY BY MACLEAY ASSOCIATES, INC. ON SEPTEMBER 26, 2003.

SYSTEM INSTALLED BY:
L & F CONSTRUCTION
608 LONG PLAIN ROAD
LEVERETT, MA
(413) 665-3788

SHEET NO. 1 OF 1.

REV.	DATE	BY	DESCRIPTION	APPR.
2	9/29/03	S.K.	AS-BUILT	D.M.
1	6/9/03	S.K.	REVISED TEST PIT DATA	D.M.

SCALE: AS SHOWN
DRN. BY: S.K.
CHECKED: D.M.
APPROVED:



TITLE: SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS.
FOR: AMHERST BUILDING COMPANY, LLC
LEVERETT ROAD
DATE: MAY 14, 2002
JOB NO. 2002-072-9

MacLeay Associates, Inc. civil engineers
102 Bridge Street, Shelburne Falls, MA 01370
phone: (413) 625-9774 fax: (413) 625-9704 email: macleay@crocker.com

Massachusetts Department of Environmental Management
Office of Water Resources

122547

TYPE OR PRINT ONLY

Well Completion Report

1. WELL LOCATION GPS (OPTIONAL) LATITUDE _____ LONGITUDE _____

Address at Well Location: Leverett Road
Property Owner: Amherst Building Company LLC
Subdivision Name: _____
Mailing Address: 25 Main Street, Suite 445
City/Town: Amherst
City/Town: Northampton, MA 01060
Assessors Map _____ Assessors Lot #: 9
NOTE: Assessors Map and Lot # mandatory if no street address available
Board of Health permit obtained: Yes ☐ Not Required ☒ Permit Number _____ Date Issued _____

2. WORK PERFORMED
☒ New Well ☐ Abandon
☐ Deepen ☐ Recondition
☐ Replace ☐ Other _____

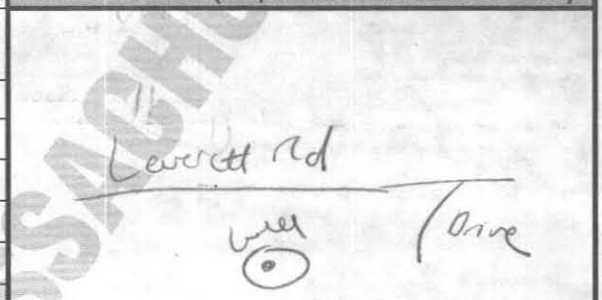
3. PROPOSED USE
☒ Domestic ☐ Irrigation
☐ Monitoring ☐ Municipal
☐ Industrial ☐ Other _____

4. DRILLING METHOD
☐ Cable ☐ Auger
☒ Air Hammer ☐ Direct Push
☐ Mud Rotary ☐ Other _____

5. WELL LOG

From (ft)	To (ft)	WATER	Permeability High	Permeability Low	Unconsolidated: Clay	Silt	Sand	Gravel	Cobbles	Boulders	Other	Consolidated: Rock Type
0	42							X				
42	465										Bedrock	

6. SITE SKETCH (Use permanent landmarks with distances)



7. WELL CONSTRUCTION
Total Depth Drilled 465'
Date Drilling Complete May 29, 2003

8. CASING

From (ft)	To (ft)	Casing Type and Material	Size O.D. (in)	Well Seal Type
	60'	17 lb Steel	6"	Drive Shoe

9. SCREEN

From (ft)	To (ft)	Slot Size	Screen Type and Material	Screen Diameter
		NONE		

10. FILTER PACK / GROUT / ABANDONMENT MATERIAL

From (ft)	To (ft)	Material Description	Purpose

11. ADDITIONAL WELL INFORMATION
Developed? ☒ Yes ☐ No
Fracture Enhancement? ☒ Yes ☐ No
Method Zone/2 packers
Disinfected? ☐ Yes ☐ No

12. WELL TEST DATA (PRODUCTION WELLS)

Date	Method	Yield (GPM)	Time Pumped (hrs & min)	Drawdown to (Ft. BGS)	Time (hrs & min)	Recovery to (Ft. BGS)
6/10/03	bucket	8	4h 0m	295'	0h 50m	30

13. STATIC WATER LEVEL (ALL WELLS)

Date Measured	Depth Below Ground Surface (FT)
6/10/03	30'

14. PERMANENT PUMP (IF AVAILABLE)
Pump Description _____ Horsepower _____
Pump Intake Depth _____ (ft) Nominal Pump Capacity _____ (gpm)

15. NAME/ADDRESS OF PUMP INSTALLATION COMPANY
MT Springs Pumps & Service
Pelham, MA

16. COMMENTS

17. WELL DRILLER'S STATEMENT
This well was drilled and/or abandoned under my supervision, according to applicable rules and regulations, and this report is complete and correct to the best of my knowledge.

Driller: Kenneth C. Lynde Supervising Driller Signature: Kenneth Lynde Registration #: 4801
Firm: Lynde Well Drilling, Inc. Date: 6/12/03 Rig Permit #: 114

NOTE: Well Completion Reports must be filed by the registered well driller within 30 days of well completion.

BOARD OF HEALTH COPY

122541

1 Dise

FORM 11: Soil Evaluation Form NO: _____

1 hole 70A

Commonwealth of Massachusetts
Town of _____

Soil Suitability Assessment : On-Site Sewage Disposal

Performed By: Doug Macleay Date: 9/6/02
Witnessed By: David Zaharkin

Location Address of: Northampton Assoc LLC
Lot #
Owner's Name:
Address of: 281 Locust Rd
Telephone:

New Construction ☑ Repair ☐

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:

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 _____
Date _____

70A

On-Site Review

Deep Hole Number 70A Date: 9/6/02 Time 8:00
Weather _____
Location (identify on site plan) _____
Land Use Pasture Slope (%) _____
Surface Stone _____
Vegetation:
Grasses

Landform:

Position on Landscape (sketch on back) _____
Distances from:
Open Water Body _____ feet Drainageway _____ feet
Possible Wet Ares _____ feet Property Line _____ feet
Drinking Water Well _____ feet Other _____

DEEP OBSERVATION HOLE LOG

depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders) Consistency, % gravel
5	A	SL	10YR 3/2		Fr 10% S, C, B
16	Bw	SL	10YR 4/6	33" 10YR 5/6	Fr 15% SCB,
41	C_1	SL	2.5Y 5/4		Firm 20% SCB
114	C_2	LS	10YR 5/6		Common 20% SCB

Parent Material (geologic) Basal Till
Depth to Bedrock 114
Depth to Groundwater :
Standing Water in the Hole —
Weeping from Pit Face —
Estimated Seasonal High Water 33

On-Site Review

Deep Hole Number _____ Date: _____ 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 Ares _____ feet Property Line _____ feet
Drinking Water Well _____ feet Other _____

DEEP OBSERVATION HOLE LOG

depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders) Consistency, % gravel

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

FORM 12: Percolation Test
Location Adrress or Lot # 70A 281 Lowell Rd.

Commonwealth of Massachusetts
Town of Amherst

PERCOLATION TEST *		
DATE:		TIME:
Observation Hole #	70A	
Depth of Perc	40"	
Start Pre-soak	8:30	
End Pre-soak	8:47	
Time at 12"	8:47	
Time at 9"	8:49	
Time at 6"	8:52	
Time (9"-6")	3	
Rate Min./Inch	<2	

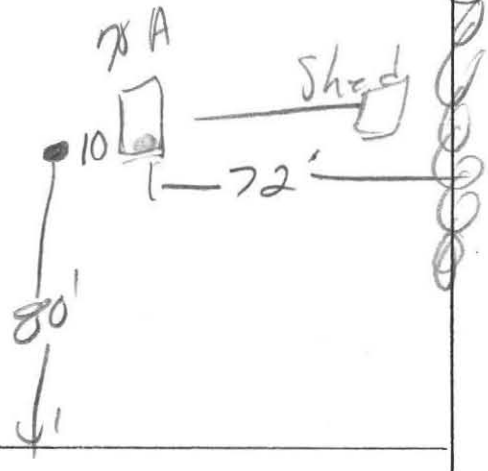
*Minimum of one percolation test must be performed in both the primary area and reserve area.

Site Passed ☑ Site failed ☐

Performed by Doug McCoy

Witnessed by David Jarzynski

Comments:



281 Leverett Road Hole #1 70A
Engineer: Doug Maclay
9/6/02

1 Disc Hole #69 + 70

FORM 11: Soil Evaluation Form NO: _____

Commonwealth of Massachusetts
Town of Ashby

Soil Suitability Assessment : On-Site Sewage Disposal

Performed By: _____ Date: _____
Witnessed By: _____

Location Address of:
Lot #

Owner's Name:
Address of: 281 Stowell Rd
Telephone:

New Construction ☑ Repair ☐

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:

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 _____
Date _____

On-Site Review

Deep Hole Number 69 Date: 12/6/01 Time _____
Weather SUNNY 65
Location (identify on site plan) _____
Land Use Field Slope (%) 3
Surface Stone NONE (SMALL)
Vegetation: GRASS

Landform: Till Terrace

Position on Landscape (sketch on back) _____
Distances from:
Open Water Body 200 feet
Possible Wet Ares 200 feet
Drinking Water Well 150 feet
Drainageway 100 feet
Property Line 95 feet TO FRONT
Other _____ will be Divided

DEEP OBSERVATION HOLE LOG

depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders) Consistency, % gravel
0 6"	Ap	FSL	10YR 3/2	—	LOOSE CRUMB MANY FINE ROOTS
6 20"	Bw	FSL	10YR 4/4	38" 5% 7.5YR 4/6	MASSIVE - FRIABLE 10% GRAVEL
20 92	C1	FSL	2.5Y 4/5 2.5Y 4/2		MASSIVE - FRIABLE 20% GRAVEL STONES
92 121	C2	FSL	7.5YR 4/4	7.5YR 4/6 5%	↓

Parent Material (geologic) Ablation Till
Depth to Bedrock 121 ±
Depth to Groundwater :
Standing Water in the Hole —
Weeping from Pit Face —
Estimated Seasonal High Water 38"

On-Site Review

Deep Hole Number 78 Date: 12/6/01 Time _____
Weather SUNNY 65
Location (identify on site plan) _____
Land Use Field Slope (%) 3
Surface Stone —
Vegetation: GRASS

Landform: Till Terrace

Position on Landscape (sketch on back) _____
Distances from:
Open Water Body 200 feet
Possible Wet Ares 200 feet
Drinking Water Well _____ feet
Drainageway 55 feet ROADSIDE
Property Line 50 feet
Other TO BE DIVIDED

DEEP OBSERVATION HOLE LOG

depth from surface (inches)	soil horizon	soil texture (USDA)	soil color (Munsel)	soil mottling	other (structure, stones, boulders) Consistency, % gravel
0 12	Ap	FSL	10YR 3/2	—	LOOSE CRUMB MANY FINE ROOTS
12 20	Bw	FSL	10YR 4/6	— 39	MASSIVE FRIABLE 10% GRAVEL
20 83	C1	FSL	2.5Y 4/5	10% 7.5YR 4/6	MASSIVE
83 118	C2	FSL	2.5Y 4/3	7.5YR 4/4 5%	(SAME AS 68)

Parent Material (geologic) Ablation Till
Depth to Bedrock 118 ±
Depth to Groundwater :
Standing Water in the Hole —
Weeping from Pit Face —
Estimated Seasonal High Water 39"

Stowell
Form

FORM 12: Percolation Test
Location Address or Lot # 281 Leverett Rd

Commonwealth of Massachusetts
Town of

PERCOLATION TEST * DATE: 12/6/01 TIME:		
Observation Hole #	69	70
Depth of Perc	42"	40
Start Pre-soak	10:02	10:00
End Pre-soak	10:17	10:15
Time at 12"	10:22	10:17
Time at 9"	10:34	10:36
Time at 6" 5"	10:51	11:17 11:54
Time (9"-6")	17	41
Rate Min./Inch	6	15

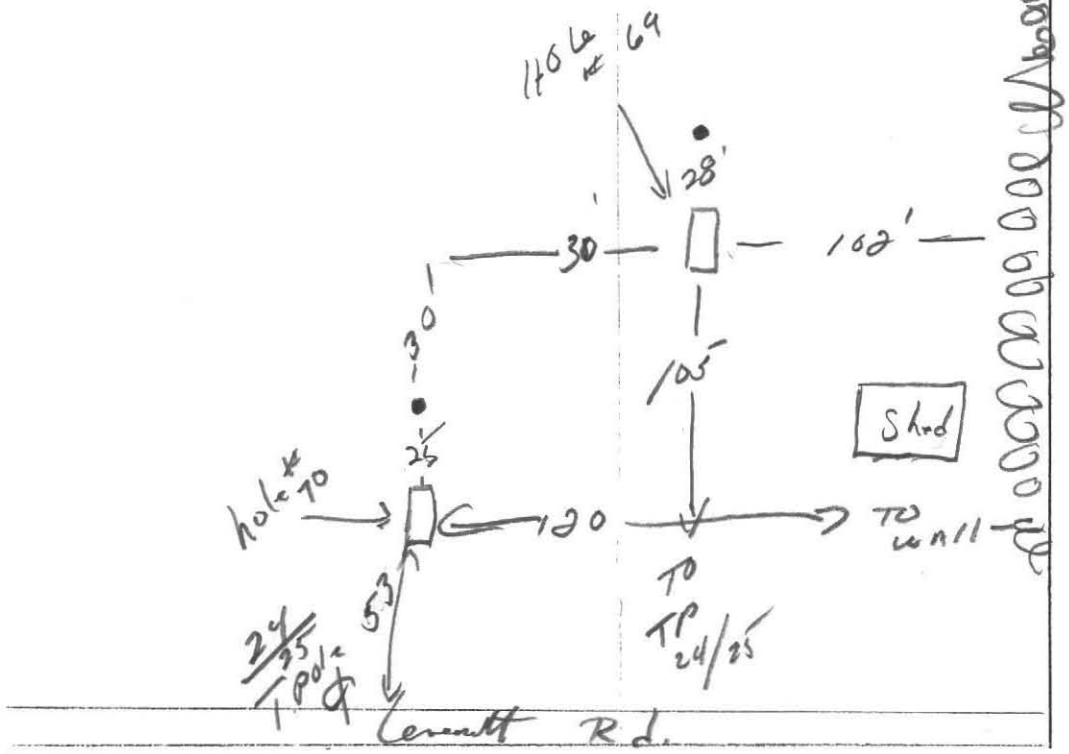
*Minimum of one percolation test must be performed in both the primary area and reserve area.

Site Passed ☑ Site failed ☐

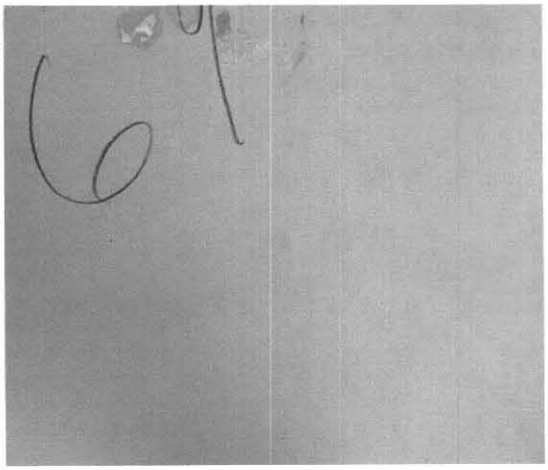
Performed by Christen Boysen

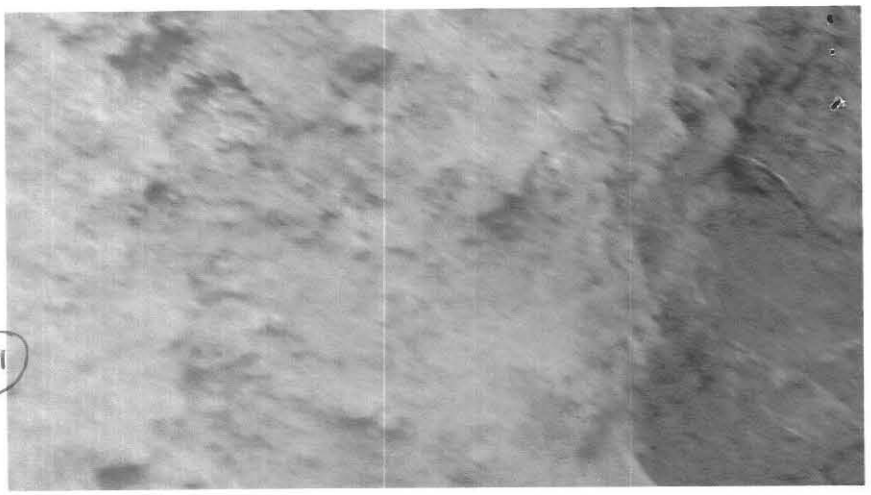
Witnessed by David Zaremski

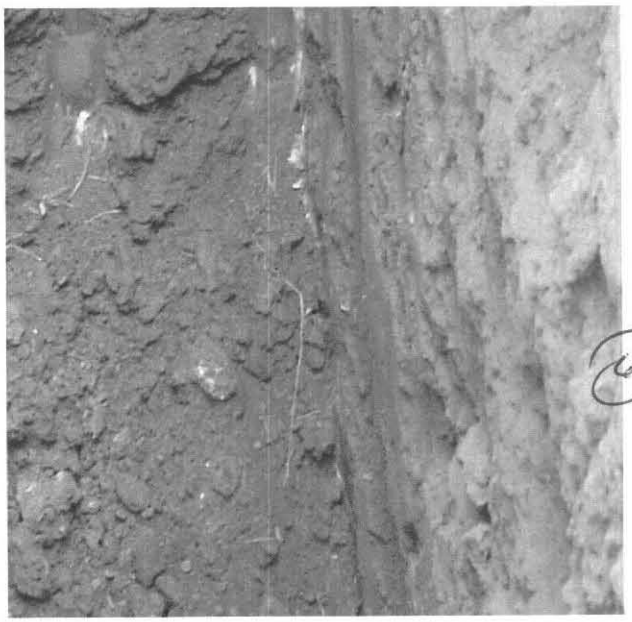
Comments:



69







Stowall Property 281 Leverett Road Holes #69 and 70
Engineer: Christian Boysen

Town of

AMHERST Massachusetts

TOWN HALL
4 BOLTWOOD AVENUE
AMHERST, MA 01002-2351

CONSERVATION COMMISSION
AND
CONSERVATION DEPARTMENT
(413) 256-4045

To: Dave Zarozinski, Health Inspections
From: Stephanie Ciccarello, Conservation
Date: June 16, 2003
RE: Septic installation on Lot 9 Leverett Road

Dave,

Thank you for sending a copy of the septic installation plan for Lot 9. The Conservation Commission reviewed and accepted plans for septic installation on both Lots 7 & 8. As Lot 9 is outside the 100 foot buffer zone of the Bordering Vegetated Wetlands, this project does not fall under the review jurisdiction of the Conservation Commission. Please let me know if you have any particular issues or concerns regarding the work in relation to the wetlands. – Stephanie

FORM 1-APPLICATION FOR DSCP

No 03-10 Fee PD

Commonwealth of Massachusetts

AMHERST, Massachusetts

Application for Disposal System Construction Permit

Application is hereby made for a Permit to Construct (X) or Repair () an On-site Sewage Disposal system at:

Location Address or Lot No.	Owner's Name, Address and Tel. #
#265 LOT 9 LEVERETT ROAD	AMHERST BUILDINGCOMPANY LLC 25 MAIN STREET SUITE 445 NORTHAMPTON, MA 01060 586-5340
Installer's Name, Address, and Tel. # LML CONSTRUCTION 608 LONG PLAIN ROAD LEVERETT, MA 01054 413-665-3788	Designer's Name, Address and Tel. # MacLeay Associates, Inc. 102 Bridge Street Shelburne Falls, MA 01370 (413) 625-9774

Type of Building:

Dwelling No. of Bedrooms 3 Garbage Grinder NO

Other Type of Building _____ No. of Persons _____ Showers__ Cafeteria_____
Other Fixtures _____

Design Flow 330 gallons per day. Calculated daily flow 357 gallons
Plan Date 05/14/03 Number of Sheets ONE Revision Date NONE
Title SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS FOR AMHERST BUILDINGCOMPANY LLC, LOT 9 LEVERETT ROAD.

Description of Soil SANDY LOAM SEE PLAN FOR DETAILED TEST PIT DESCRIPTIONS. SEASONAL HIGH GROUNDWATER AT 33" PERC RATE 10 MIN./INCH. . WITNESSED BY DAVID ZAROZINSKI

Nature of Repairs or Alterations (Answer when applicable)INSTALL SEPTIC TANK, D-BOX AND LEACH FIELD .

Date last inspected: _____

-*Agreement:

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

Signed _____ Date 6/9/03

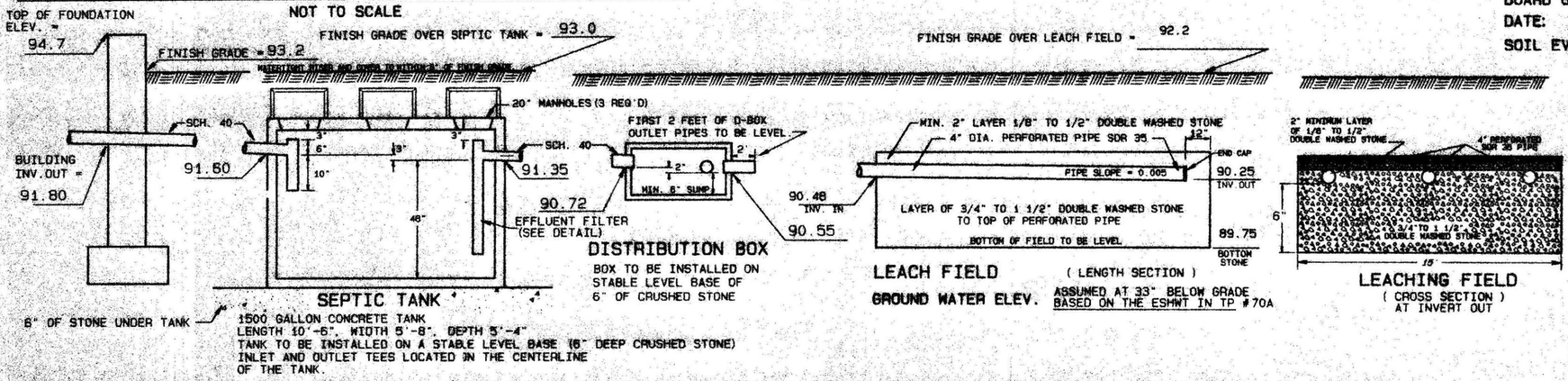
(Revised)
Application Approved by _____ Date 6/09/03

Application Disapproved for the following reasons_____

Permit No. 03-10 Date Issued 6/12/03

SANITARY SYSTEM PROFILE

NOT TO SCALE



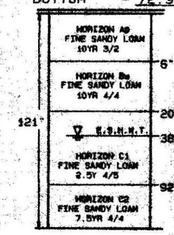
1500 GALLON CONCRETE TANK
LENGTH 10'-6", WIDTH 5'-8", DEPTH 5'-4"
TANK TO BE INSTALLED ON A STABLE LEVEL BASE (6" DEEP CRUSHED STONE)
INLET AND OUTLET TEES LOCATED IN THE CENTERLINE OF THE TANK.

TEST PIT DATA

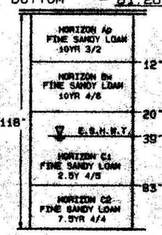
BOARD OF HEALTH WITNESS: DAVID ZAROZINSKI
DATE: NOVEMBER 20, 2002
SOIL EVALUATOR: CHRISTIAN BOYSEN & DOUGLAS J. MacLEAY, P.E.

PERC TEST ID	PERC RATE (MIN/IN)	PERC DEPTH (IN)
69	6	42
70	10	46
70A	2	40

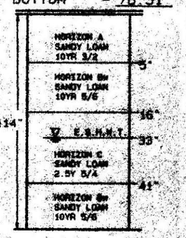
TEST PIT # 69
ELEV. TOP = 81.75
ESHWT = 79.08
OBS. H2O = NONE
BOTTOM = 72.92



TEST PIT # 70
ELEV. TOP = 88.93
ESHWT = 86.85
OBS. H2O = NONE
BOTTOM = 81.26



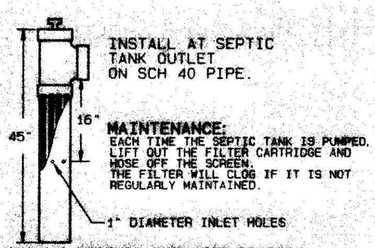
TEST PIT # 70A
ELEV. TOP = 87.81
ESHWT = 85.06
OBS. H2O = NONE
BOTTOM = 78.31



NOTES:

1. REMOVE TOPSOIL & SUBSOIL BENEATH THE LEACHING FIELD AND TO 5' ON ALL SIDES OF THE FIELD. REPLACE WITH FILL MATERIAL MEETING THE SPECIFICATIONS OF 310 CMR 15.255(3). (TITLE 5, 310 CMR 15.255(5).)
2. TITLE 5 REQUIRES OBSERVATION OF THE INSTALLED SYSTEM BY THE DESIGN ENGINEER AND A BOARD OF HEALTH MEMBER OR AGENT FOR THE BOARD OF HEALTH. THE SYSTEM MUST NOT BE BACKFILLED PRIOR TO OUR OBSERVATION. CONTACT OUR OFFICE AND THE BOARD OF HEALTH TWO BUSINESS DAYS BEFORE REQUESTED DATE FOR OBSERVATION.
3. ALL DISTURBED AREAS SHOULD BE LOAMED, RAKED, FERTILIZED, SEEDED AND MULCHED AT THE COMPLETION OF CONSTRUCTION.

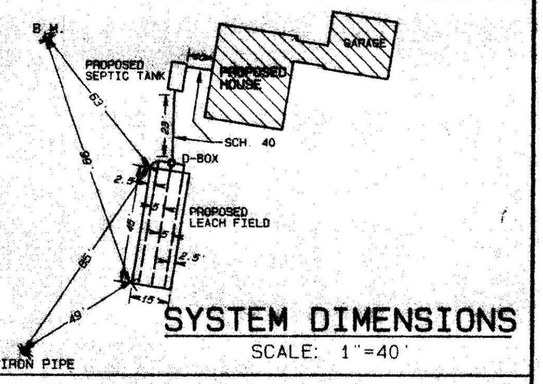
PROPERTY LINE REFERENCE:
PROPERTY LINES AS SHOWN ARE BASED ON A PLAN OF LAND IN AMHERST, MASSACHUSETTS, PREPARED FOR NORTHAMPTON ASSOCIATES, INC. PREPARED BY H.L. EATON ASSOC. DATED OCTOBER 21, 2002.



INSTALL AT SEPTIC TANK OUTLET ON SCH 40 PIPE.

MAINTENANCE:
EACH TIME THE SEPTIC TANK IS PUMPED, LIFT OUT THE FILTER CARTRIDGE AND HOSE OFF THE SCREEN. THE FILTER WILL CLOG IF IT IS NOT REGULARLY MAINTAINED.

ORENCO BIOTUBE EFFLUENT FILTER MODEL # FT0436
AVAILABLE FROM WASTEWATER TECHNOLOGIES, INC., 18 PRECAST ROAD, MILTON, VT. 05468 (802) 859-3219



SYSTEM DIMENSIONS

SCALE: 1"=40'

DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE
DESIGN FLOW 110 GALLON PER DAY PER BEDROOM
TOTAL DESIGN FLOW 330 GALLON PER DAY.

SEPTIC TANK
330 GALLONS X 200% = 660 GALLONS DESIGN CAPACITY.
USE 1500 GALLON SEPTIC TANK.

LEACHING FIELD
BOTTOM:
45' LENGTH X 15' WIDTH = 675 SQUARE FEET.
675 SQ. FT. X .53 GAL. PER SQ.FT. = 357 GAL. LEACHING.
TOTAL LEACHING CAPACITY = 357 GALLONS PER DAY.

NOTE: PER TITLE 5, 310 CMR 15.240(6): A FIELD IS DESIGNED FOR THIS SITE DUE TO THE AREA LIMITATIONS CAUSED BY THE HOUSE LOCATION AND PROPERTY LINES.

GENERAL NOTES

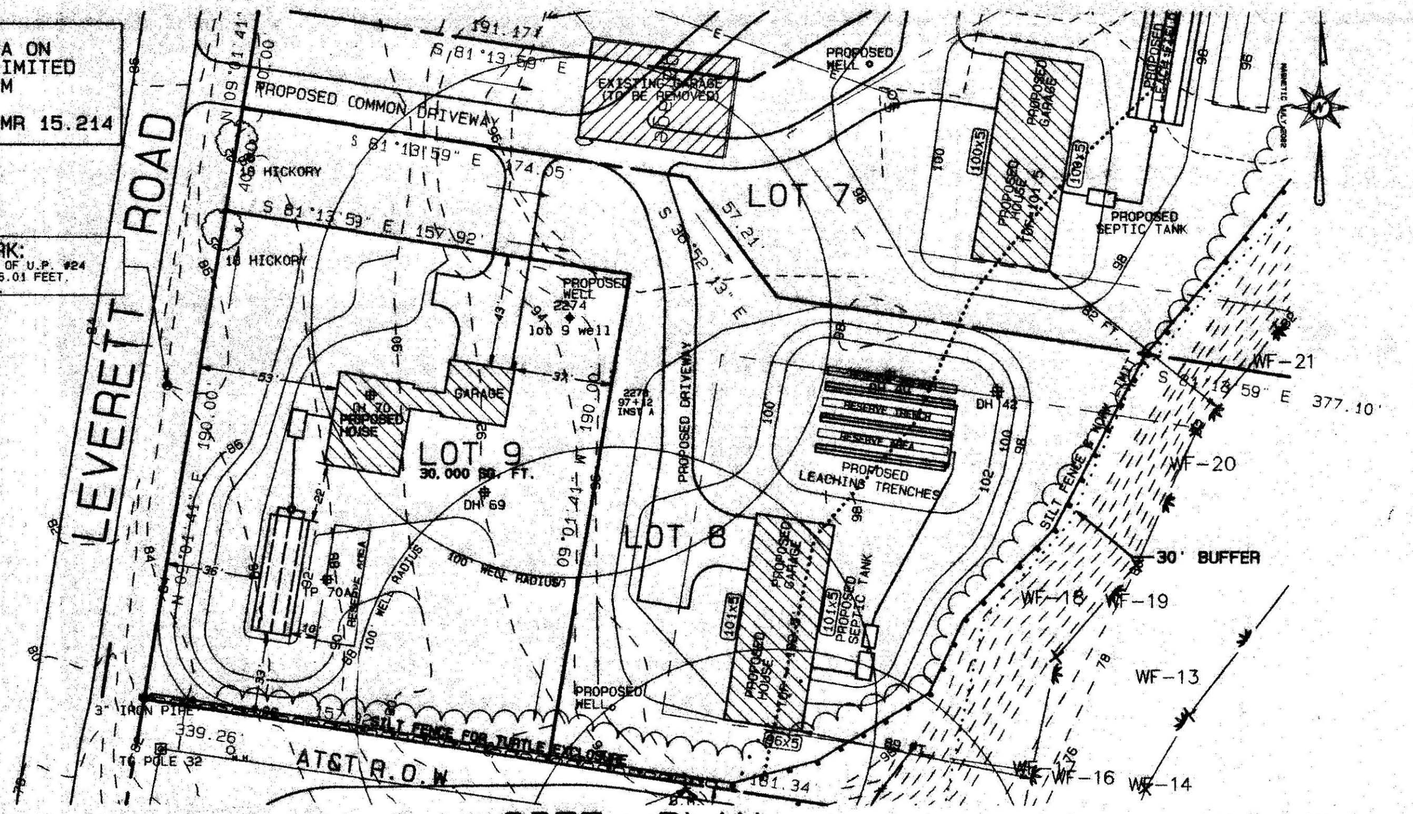
1. 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM EXCEPT WHERE OTHERWISE NOTED.
2. 4" SDR 35 PERFORATED PIPE TO BE USED IN LEACHING AREA.
3. 1500 GALLON REINFORCED CONCRETE SEPTIC TANK.
4. AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
5. ELEVATIONS BASED ON ASSUMED DATUM
6. UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 5 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
7. ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
8. THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- 100 EXISTING CONTOURS
- 100 PROPOSED CONTOURS
- 4" SDR 35 PERFORATED PIPE
- 4" SDR 35 SOLID PIPE
- WATER LINE
- FENCE
- EDGE OF WETLAND
- CENTERLINE STREAM
- PROPERTY LINE
- STONEWALL

THE LEACH AREA ON THIS LOT IS LIMITED TO A 3 BEDROOM CAPACITY.
TITLE 5 310 CMR 15.214

BENCHMARK:
SPIKE IN BASE OF U.P. #24
ELEVATION = 86.01 FEET.
ASSUMED DATUM.



SITE PLAN

GRAPHIC SCALE 1"=40'

0 40 80 120

SHEET NO. 1 OF 1.

REV.	DATE	BY	DESCRIPTION	APPR.
1	5/9/03	S.K.	REVISED TEST PIT 70A	D.M.

SCALE AS SHOWN
DRN. BY S.K.
CHECKED D.M.
APPROVED:

COMMONWEALTH OF MASSACHUSETTS DOUGLAS J. MACLEAY No. 31285 CIVIL REGISTERED PROFESSIONAL ENGINEER

TITLE: SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS.
FOR: AMHERST BUILDING COMPANY, LLC LEVERETT ROAD
DATE: MAY 14, 2002
JOB NO. 2002-072-9

MacLeay Associates, Inc. civil engineers
112 Bridge Street, Shutesbury, MA 01072
phone: (413) 625-9774 fax: (413) 625-9704 email: macleay@crocker.com

FORM 1-APPLICATION FOR DSCP

No 03-10

Fee 100.00 Plans 75
ck# 9913

Commonwealth of Massachusetts

AMHERST, Massachusetts

Application for Disposal System Construction Permit

Application is hereby made for a Permit to Construct (X) or Repair () an On-site Sewage Disposal system at:

Location Address or Lot No.	Owner's Name, Address and Tel. #
# 265 LOT 9 LEVERETT ROAD	AMHERST BUILDINGCOMPANY LLC 25 MAIN STREET SUITE 445 NORTHAMPTON, MA 01060 586-5340
Installer's Name, Address, and Tel. # LML CONSTRUCTION 608 LONG PLAIN ROAD LEVERETT, MA 01054 413-665-3788	Designer's Name, Address and Tel. # MacLeay Associates, Inc. 102 Bridge Street Shelburne Falls, MA 01370 (413) 625-9774

Type of Building:

Dwelling No. of Bedrooms 3 Garbage Grinder NO

Other Type of Building _____ No. of Persons _____ Showers__ Cafeteria_____
Other Fixtures _____

Design Flow 330 gallons per day. Calculated daily flow 357 gallons
Plan Date 05/14/03 Number of Sheets ONE Revision Date NONE
Title SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS FOR AMHERST BUILDINGCOMPANY LLC, LOT 9 LEVERETT ROAD.

Description of Soil SANDY LOAM SEE PLAN FOR DETAILED TEST PIT DESCRIPTIONS, SEASONAL HIGH GROUNDWATER AT 33" PERC RATE 10 MIN./INCH, . WITNESSED BY DAVID ZAROZINSKI

Nature of Repairs or Alterations (Answer when applicable)INSTALL SEPTIC TANK, D-BOX AND LEACH FIELD .

Date last inspected: _____

-*Agreement:

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

Signed _____ Date 6/9/03

Application Approved by _____ Date 6/12/03

Application Disapproved for the following reasons _____

Permit No. 03-10 Date Issued MAY 14, 2003

Revised * Rec June 9, 2003

Commonwealth of Massachusetts

AMHERST, Massachusetts

Disposal System Construction Permit

No. 03-10

Permission is hereby granted to **AMHERST BUILDINGCOMPANY LLC** to construct (**X**) or repair () an On-site Sewage System located at (265) **LOT 9 LEVERETT ROAD**

and as described in the above Application for Disposal System Construction Permit. The applicant recognizes his/her duty to comply with Title 5 and the following local provisions or special conditions.

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

Date _____

Approved by _____

Commonwealth of Massachusetts

AMHERST, Massachusetts

Certificate of Compliance

This is to Certify, that the On-site Sewage Disposal System installed (X) or repaired/replaced () on _____ by LML CONSTRUCTION for **AMHERST BUILDINGCOMPANY LLC** at (265) **LOT 9 LEVERETT ROAD** has been constructed in accordance with the provisions of Title 5 and the for Disposal System Construction Permit No. 03-10 dated _____ Use of this system is conditioned on compliance with the provisions set forth below:

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

Date 9/26/03 Inspector [signature]

ENGINEER [signature]

INSTALLER [signature]

Quabbin Analytical Laboratory

Box 1192 Stadler Street, Belchertown, MA 01007

(413)-323-7134

Name:	Amherst Building Company	Sample Date:	6-04-03
Address:	25 Main Street, Suite 445	Report Date:	6-05-03
	Northampton, MA 01060	Collected By:	Mt. Springs Pumps & Service
Sample Location:		Type Supply:	Well
	Amherst Building Company	Sample No.:	QAL 8936
	Lot 9, Leverett Road	Lab ID#:	M-02454
	Amherst, MA 01002		

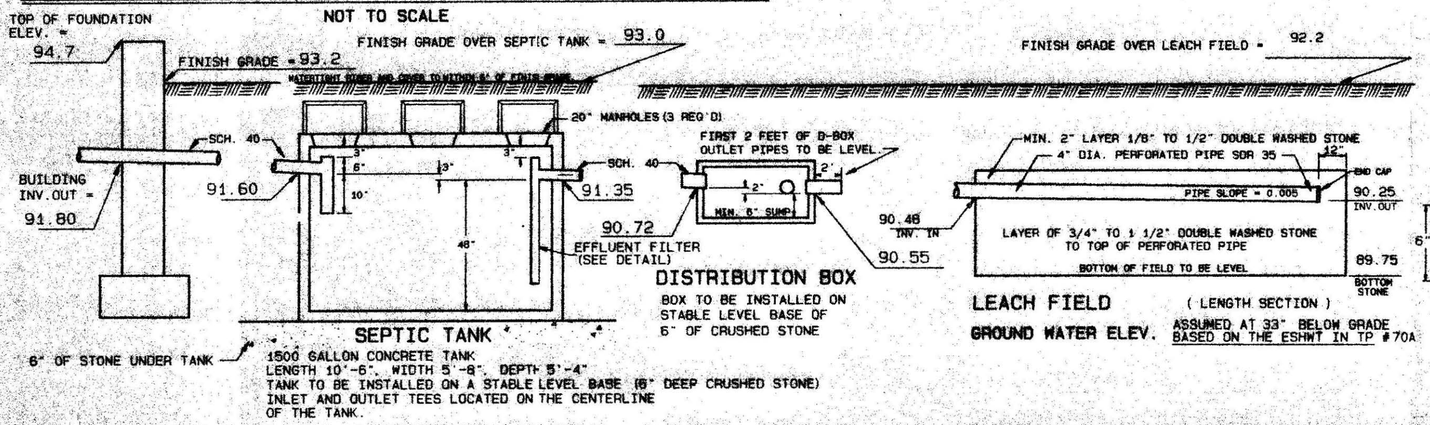
TESTED FOR	RESULTS	MAX. RECOMMENDED LEVELS
Total Coliform Bacteria	Absent	Present or Absent
Fecal Coliform Bacteria	Absent	Present or Absent
Nitrite	0	1.0 mg/l
Nitrate	.20	10.0 mg/l
pH	7.70	6.5-8.5
Alkalinity	30.0	No Limit
Iron	*1.0	.30 mg/l
Manganese	*.08	.05 mg/l
Copper	0	1.3 mg/l
Sulfate	18.0	250 mg/l
Chloride	32.3	250 mg/l
Hardness	72.0	No Limit
Conductivity	183.5	No Limit
Total Dissolved Solids	122.4	500 mg/l
Turbidity	4.5	5 NTU
Chlorine	0	No Limit
Sodium	8.0	No Limit

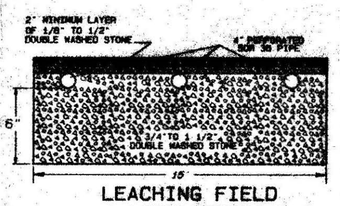
Results are only for those items listed above and on the above collected date. Except for the following *Iron & Manganese, the sample was found to be within acceptable levels for D.E.P. Drinking Water Standards. If there are any questions on this report, please do not hesitate to call this office.

David Fredenburgh, Director

SANITARY SYSTEM PROFILE

NOT TO SCALE





LEACHING FIELD
(CROSS SECTION)
AT INVERT OUT

TEST PIT DATA

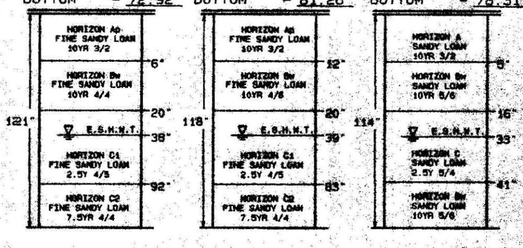
BOARD OF HEALTH WITNESS: DAVID ZAROZINSKI
DATE: NOVEMBER 20, 2002
SOIL EVALUATOR: CHRISTIAN BOYSEN & DOUGLAS J. MacLEAY, P.E.

PERC TEST ID	PERC RATE (MIN/IN)	PERC DEPTH (IN)
69	6	42
70	10	46
70A	2	40

TEST PIT # 69
ELEV. TOP = 81.75
ESHWT = 79.08
OBS. H20 = NONE
BOTTOM = 72.92

TEST PIT # 70
ELEV. TOP = 89.93
ESHWT = 86.85
OBS. H20 = NONE
BOTTOM = 81.26

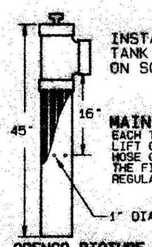
TEST PIT # 70A
ELEV. TOP = 87.81
ESHWT = 85.06
OBS. H20 = NONE
BOTTOM = 78.31



NOTES:

1. REMOVE TOPSOIL & SUBSOIL BENEATH THE LEACHING FIELD AND TO 5' ON ALL SIDES OF THE FIELD. REPLACE WITH FILL MATERIAL MEETING THE SPECIFICATIONS OF 310 CMR 15.255(3). (TITLE 5, 310 CMR 15.255(5).)
2. TITLE 5 REQUIRES OBSERVATION OF THE INSTALLED SYSTEM BY THE DESIGN ENGINEER AND A BOARD OF HEALTH MEMBER OR AGENT FOR THE BOARD OF HEALTH. THE SYSTEM MUST NOT BE BACKFILLED PRIOR TO OUR OBSERVATION. CONTACT OUR OFFICE AND THE BOARD OF HEALTH TWO BUSINESS DAYS BEFORE REQUESTED DATE FOR OBSERVATION.
3. ALL DISTURBED AREAS SHOULD BE LOAMED, RAKED, FERTILIZED, SEEDED AND MULCHED AT THE COMPLETION OF CONSTRUCTION.

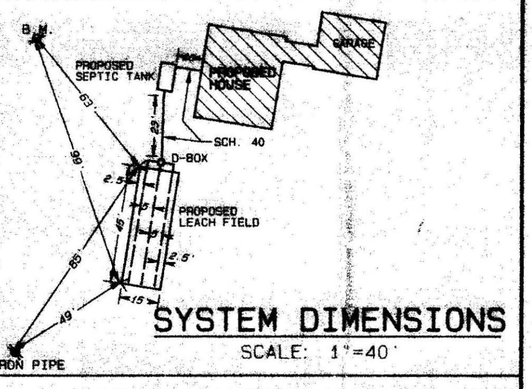
PROPERTY LINE REFERENCE:
PROPERTY LINES AS SHOWN ARE BASED ON A PLAN OF LAND IN AMHERST, MASSACHUSETTS, PREPARED FOR NORTHAMPTON ASSOCIATES, INC. PREPARED BY H.L. EATON ASSOC. DATED OCTOBER 21, 2002.



INSTALL AT SEPTIC TANK OUTLET ON SCH 40 PIPE.

MAINTENANCE:
EACH TIME THE SEPTIC TANK IS PUMPED, LIFT OUT THE FILTER CARTRIDGE AND HOSE OFF THE SCREEN. THE FILTER WILL CLOG IF IT IS NOT REGULARLY MAINTAINED.

ORENCO BIOTUBE EFFLUENT FILTER MODEL # FT0436
AVAILABLE FROM WASTEWATER TECHNOLOGIES, INC., 18 PRECAST ROAD, MILTON, VT. 05468 (802) 869-3219



SYSTEM DIMENSIONS

SCALE: 1"=40'

DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE
DESIGN FLOW 110 GALLON PER DAY PER BEDROOM
TOTAL DESIGN FLOW 330 GALLON PER DAY.

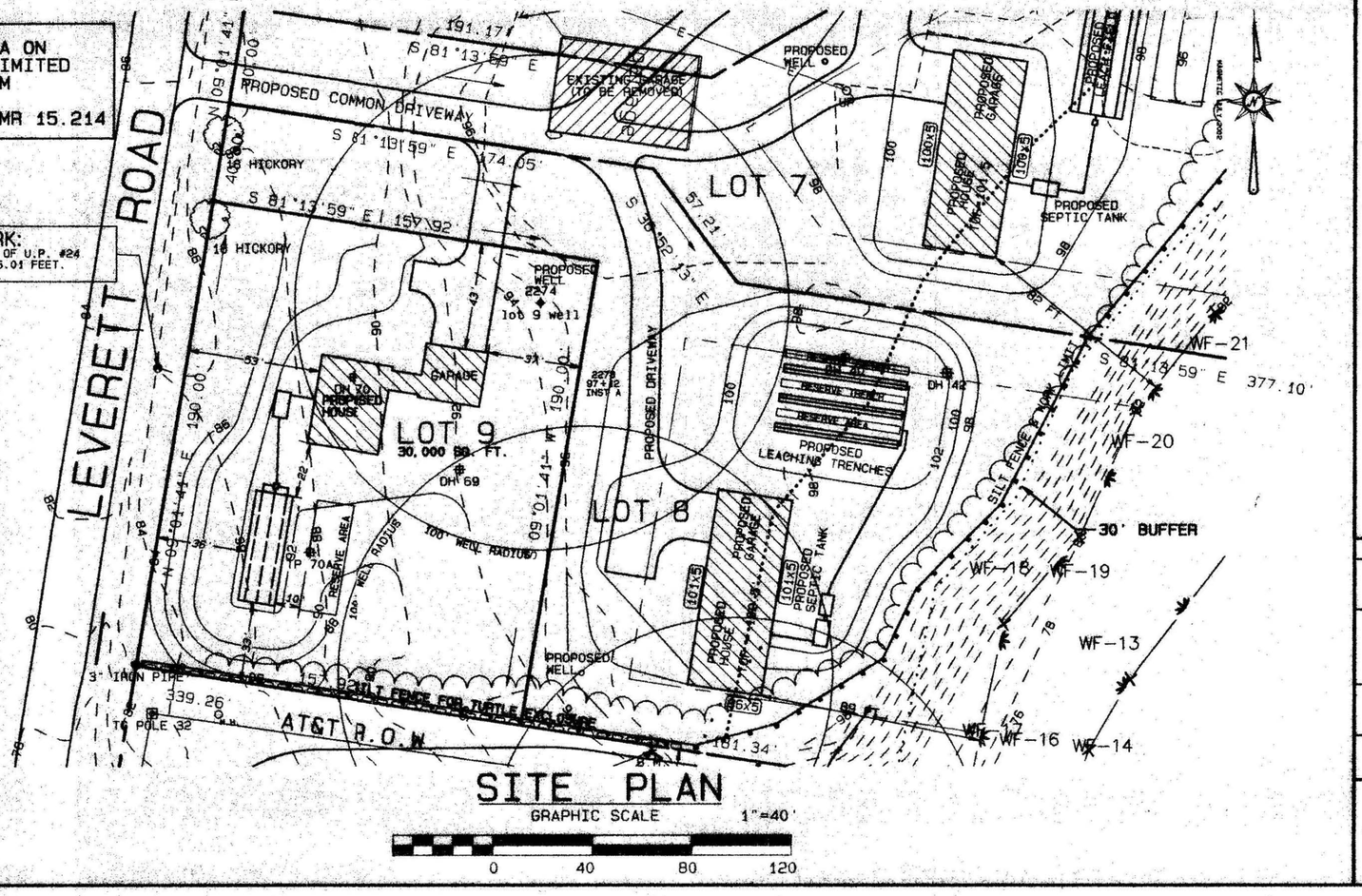
SEPTIC TANK
330 GALLONS X 200% = 660 GALLONS DESIGN CAPACITY.
USE 1500 GALLON SEPTIC TANK.

LEACHING FIELD
BOTTOM:
45' LENGTH X 15' WIDTH = 675 SQUARE FEET.
675 SQ. FT. X .53 GAL. PER SQ.FT. = 357 GAL. LEACHING.
TOTAL LEACHING CAPACITY = 357 GALLONS PER DAY.

NOTE: PER TITLE 5, 310 CMR 15.240(6): A FIELD IS DESIGNED FOR THIS SITE DUE TO THE AREA LIMITATIONS CAUSED BY THE HOUSE LOCATION AND PROPERTY LINES.

THE LEACH AREA ON THIS LOT IS LIMITED TO A 3 BEDROOM CAPACITY.
TITLE 5 310 CMR 15.214

BENCHMARK:
SPIKE IN BASE OF U.P. #24
ELEVATION = 86.01 FEET.
ASSUMED DATUM.



SITE PLAN

GRAPHIC SCALE 1"=40'
0 40 80 120

GENERAL NOTES

1. 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM EXCEPT WHERE OTHERWISE NOTED.
2. 4" SDR 35 PERFORATED PIPE TO BE USED IN LEACHING AREA.
3. 1500 GALLON REINFORCED CONCRETE SEPTIC TANK.
4. AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
5. ELEVATIONS BASED ON ASSUMED DATUM
6. UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 5 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
7. ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
8. THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- 100 EXISTING CONTOURS
- 100 PROPOSED CONTOURS
- 4" SDR 35 PERFORATED PIPE
- 4" SDR 35 SOLID PIPE
- WATER LINE
- FENCE
- EDGE OF WETLAND
- CENTERLINE STREAM
- PROPERTY LINE
- STONEWALL

87.89 - 3.3 = 84.51 / 5 = 79.51

SHEET NO. 1 OF 1.

REV.	DATE	BY	DESCRIPTION	APPR.
1	6/9/03	S.K.	REVISED TEST PIT 70A	D.M.

SCALE AS SHOWN
DRN. BY S.K.
CHECKED D.M.
APPROVED:

COMMONWEALTH OF MASSACHUSETTS DOUGLAS J. MACLEAY No. 31203 REGISTERED PROFESSIONAL ENGINEER

TITLE: SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS.
FOR: AMHERST BUILDING COMPANY, LLC LEVERETT ROAD
DATE: MAY 14, 2002
JOB NO. 2002-072-9

MacLeay Associates, Inc. civil engineers
102 Bridge Street, Shelburne Falls, MA 01370
phone: (413) 625-9774 fax: (413) 625-9704 email: macleay@crocker.com