

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 774-14 Date 11-14-74 Fee \$ 2.00 Date Rec'd. 11-15-74 By CEH

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

Location—Address LEVERETT RD. Lot 5 or Lot No. _____

Owner PAUL JONES Address MONTEAUKE RD.

*Contractor _____ Address _____

Type of Building _____ Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic () Garbage Grinder (X)

Other _____ No. of persons _____ Showers ()

Other fixtures _____

Town Water? YES Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 300 gallons

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

Disposal Trench—No. 1 Width 20' Total Length 30' Total leaching area 600 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. BALEW & HUNTLEY ENGR Date 11-14-74

ON SECOND THREE INCHES Test Pit No. 1 10.0 minutes per inch Depth of Test Pit 3'-2"

Test Pit No. 2 _____ minutes per inch Depth of Test Pit _____

Description of Soil GLACIAL TILL Depth to Ground Water 7'

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.

CEH _____

 Owner or builder Paul Jones Date 11/19/74

Application Approved by _____ date 11-19-74

Application Disapproved for the following reasons: _____
 DEEP HOLE TEST WAS DONE BY MR. DRAKE (B/O/H) PLOT PLAN WILL BE DONE BY OWNER

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

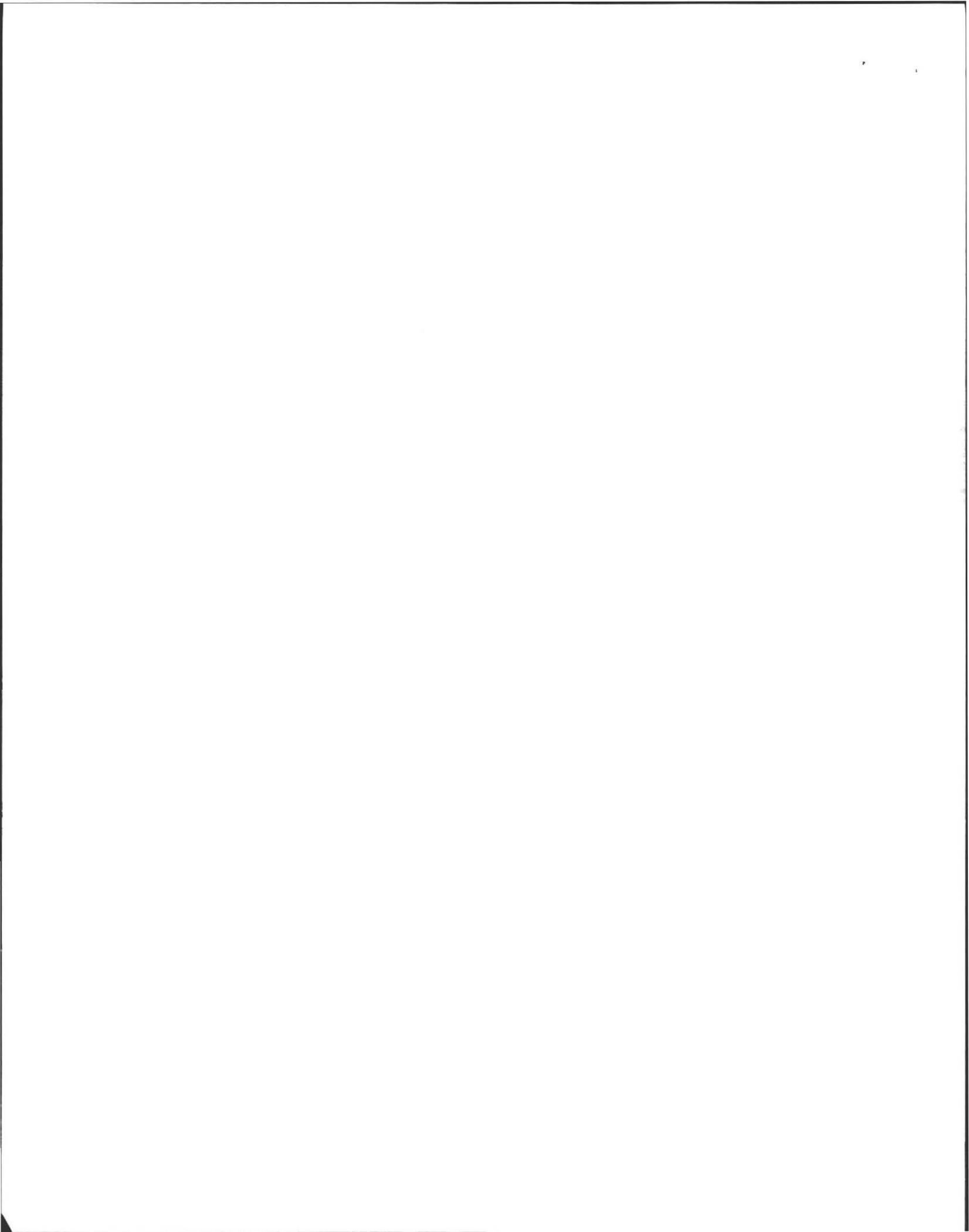
No. 774-14 Permission is hereby granted P. Jones to construct (X) or repair () an

Individual Sewage Disposal System at LOT 5 - LEVERETT RD.

as shown on the application for Disposal Works Construction Permit No. 774-14

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 11-19-74 _____
 Board of Health



ALMER HUNTLEY, JR., & ASSOCIATES, INC.

SURVEYORS - ENGINEERS - PLANNERS

P.O. Box 568
125 PLEASANT STREET
NORTHAMPTON, MASS. 01060
(413) 584-7444

11-15-74
(Date)

PAUL JONES

134 MONTAGUE RD

AMHERST, MASS

On 11-14-74 we completed percolation tests and observation pits for a proposed Individual Sewage Disposal System to be located at LEVERETT ROAD SITE.

Results and Recommendations

- See attached sheets for results of tests.
- Soil should be suitable if system is properly installed.
- 1200 gallon septic tank for a daily flow of 300 gallons.
- 600 square feet of leach area for a daily flow of 300 gallons.
- More percolation tests should be taken.
- More observation pits should be dug.
- Soils are not suitable for a leaching area.
- Contact your local Board of Health for additional information.
- Application attached.
- Plot Plan attached.
- System Detail sheets attached.

Remarks:

DEED HOLE TEST WAS DONE
BY MR. DRAKE (B/O/F/H),
PLOT PLAN WILL BE DONE
BY OWNER

Very truly yours,

ALMER HUNTLEY, JR. & ASSOCIATES, INC.

Richard P. Berger

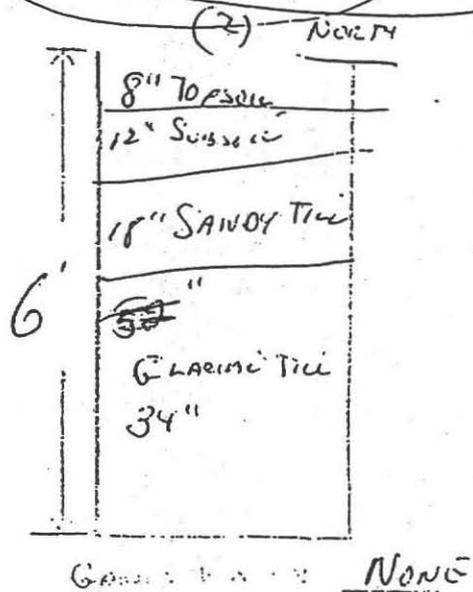
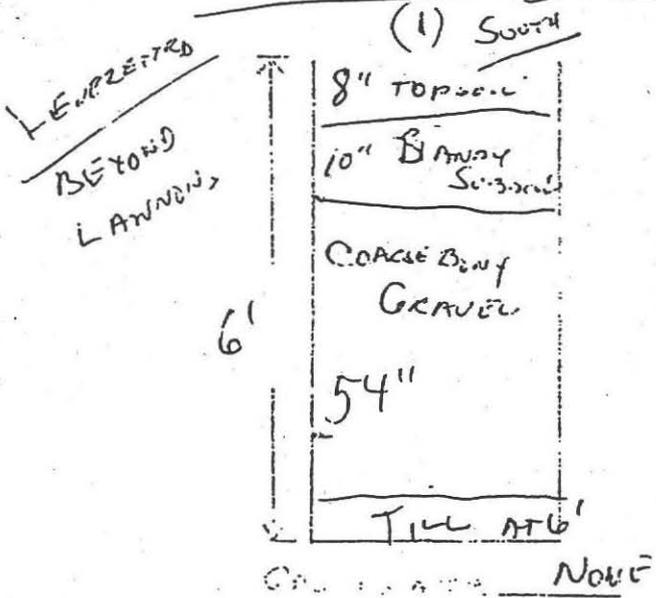
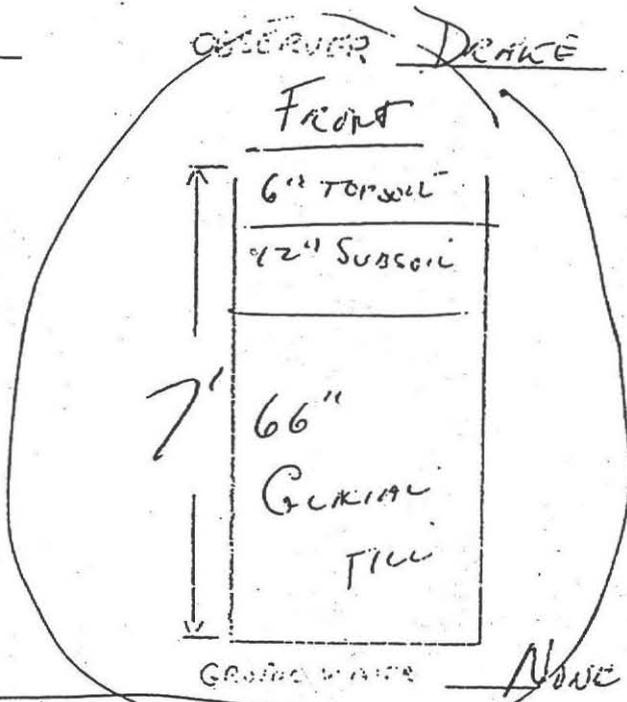
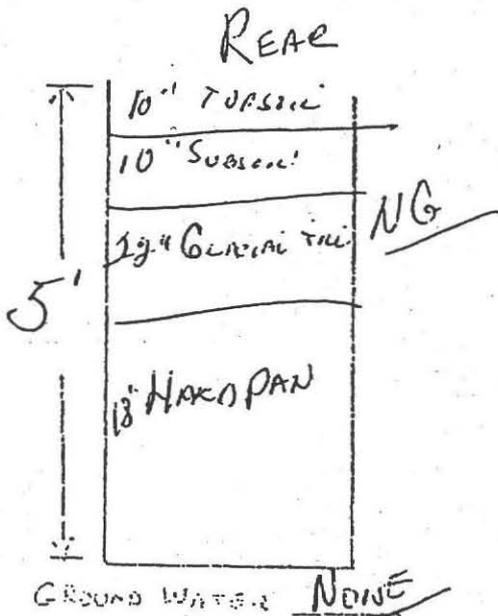
The above recommendations do not constitute approval or disapproval of a Sewage Disposal System.

DEEP SOIL LOGS

OWNER W. D. Cowles

DATE 4/26/74

LOCATION L-EVERETT RD



BOARD OF HEALTH
AMHERST, MASS.

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Description of Soil GLACIATED CLAY Depth to Ground Water 7'

Will disposal area be filled? _____ Cut down? _____

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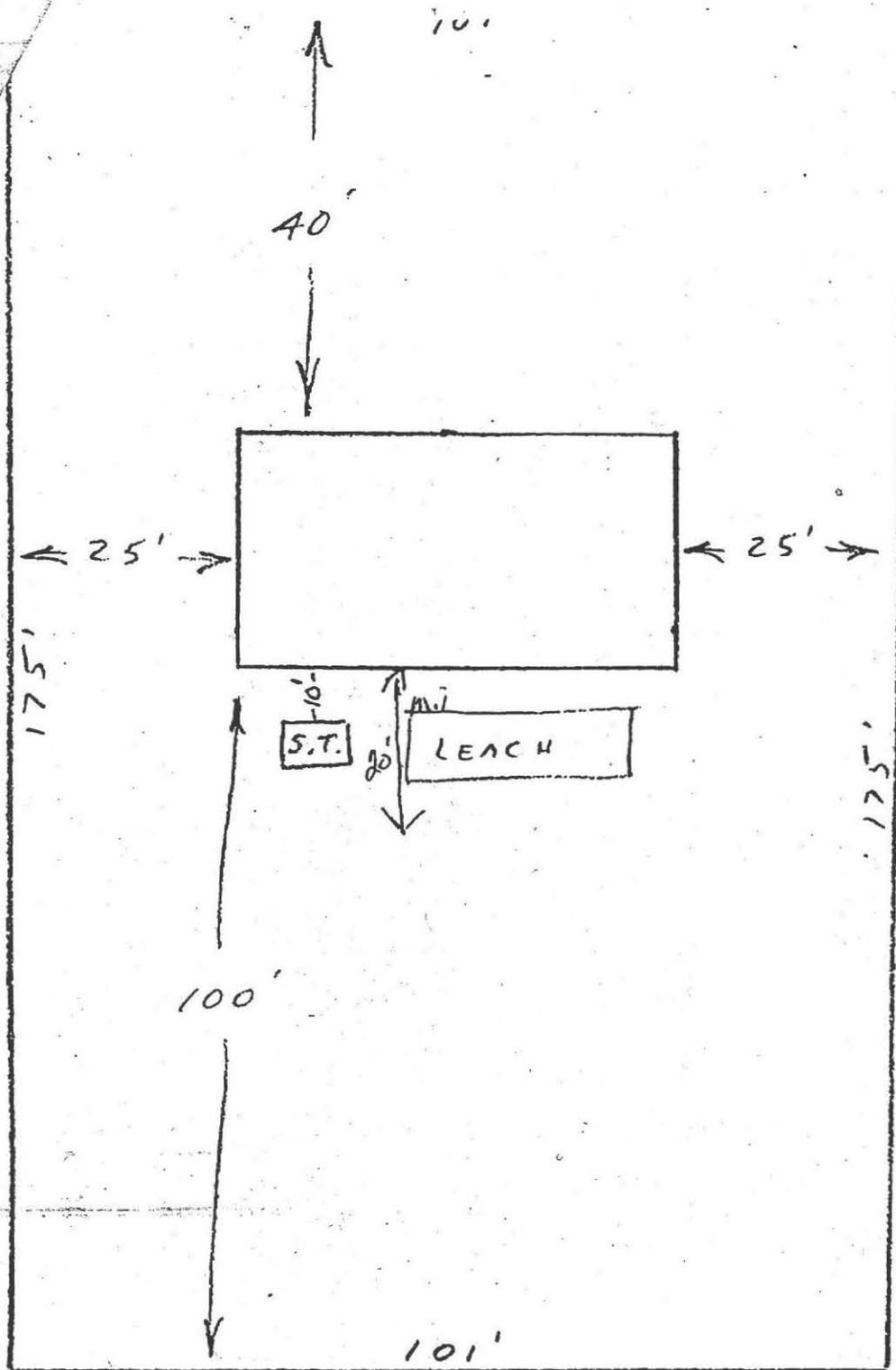
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DATE 11-19-74 Board of Health CEB





LEVERETT RD

W D COWLS INC