

**BOARD OF HEALTH, AMHERST, MASSACHUSETTS  
APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT**

No. 64-22 Date 7-16-64 Fee \$200 Date Rec'd. 7-17-64 By CEO

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

Location—Address ~~80 East St LEOPOLD ROAD~~ or Lot No. \_\_\_\_\_

Owner W.D. Cowles Inc. Address No. Amherst

Contractor K. Henderson Address No. Amherst

Type of Building 1 Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_

Dwelling—No. of Bedrooms 1 Expansion Attic ( ) Garbage Grinder ( )

Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( )

Other fixtures \_\_\_\_\_

Town Water? \_\_\_\_\_ Type of Well \_\_\_\_\_

Design Flow  gallons per person per day. Total daily flow \_\_\_\_\_ gallons

Septic Tank—Liquid capacity 600 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

Disposal Trench—No. \_\_\_\_\_ Width \_\_\_\_\_ Total Length \_\_\_\_\_ Total leaching area 150 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 Dean Date \_\_\_\_\_

Test Pit No. 1 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_

Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_

Description of Soil Gravel - Sand Clay Depth to Ground Water 100 ft. test

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.

Application Approved by CEO Owner or builder W.D. Cowles Inc. date 7-17-64

Application Disapproved for the following reasons:

**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. 64-22 Permission is hereby granted W.D. Cowles Inc. to construct () or repair ( ) an Individual Sewage Disposal System at Leopold Rd.

as shown on the application for Disposal Works Construction Permit No. 64-22

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 7-17-64 Board of Health CEO

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