

150 Market Hill Rd

Alan Weiss 531-4015

2:30 Wed 11-19-08 PERC
pm

Mon 01-12-09 OK'd plans \square LWA

Fri 05-01-09 Final-OK

Edmund, Smith

From: Alan Weiss [aeweiss@charter.net]
Sent: Monday, June 13, 2011 1:50 PM
To: 'Alan Weiss'; Edmund, Smith
Cc: 'Karen Merrill'
Subject: RE: 150 Market Hill
Attachments: 150 Market Hill Road, fix.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Here is photo as well that I meant to attach.

Best.

Alan
Cold Spring Environmental Consultants Inc.

www.coldspringenvironmental.com

From: Alan Weiss [mailto:aeweiss@charter.net]
Sent: Sunday, June 12, 2011 2:08 PM
To: 'Edmund, Smith'
Cc: 'Karen Merrill'
Subject: 150 Market Hill

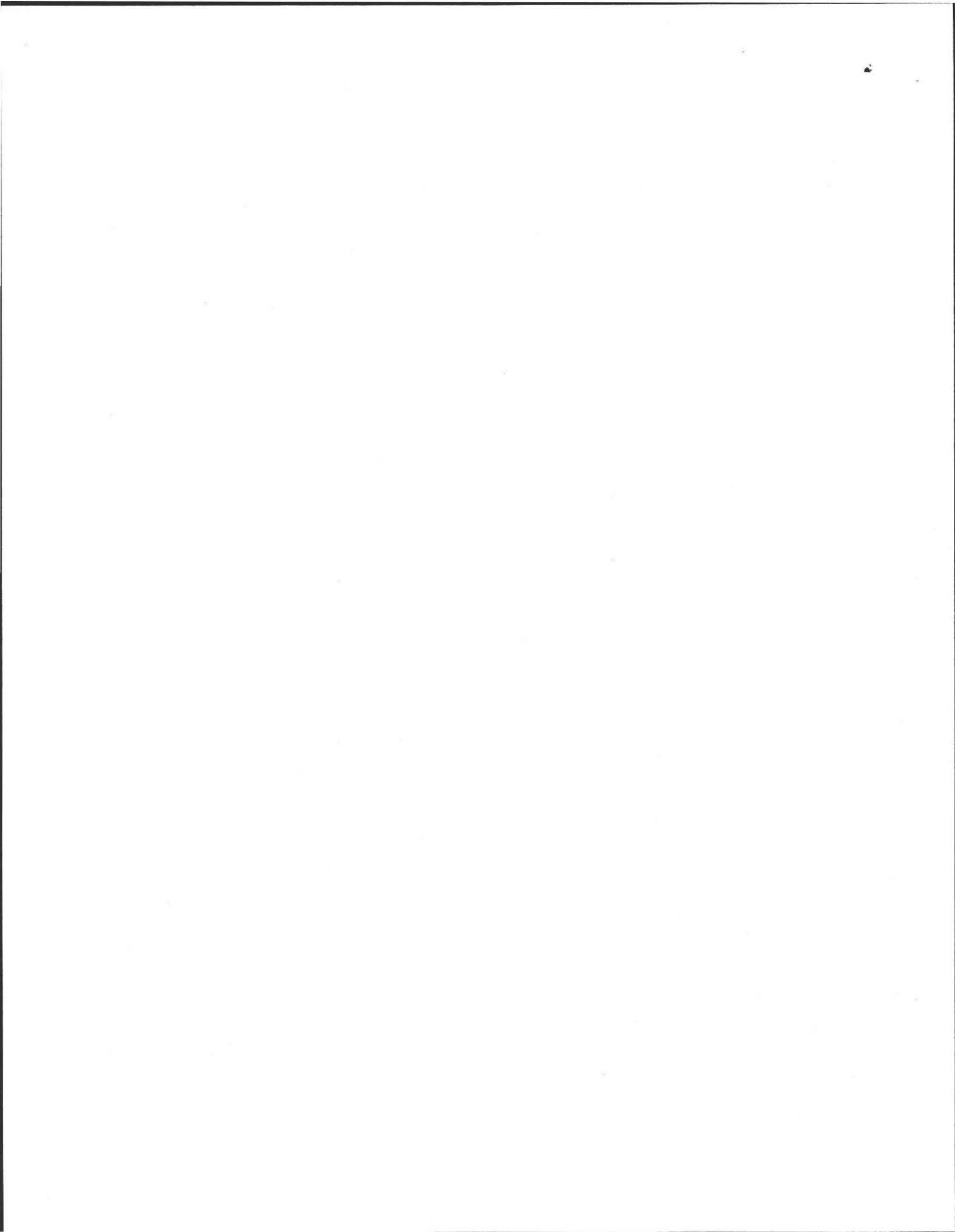
Greetings Ed & Karen,

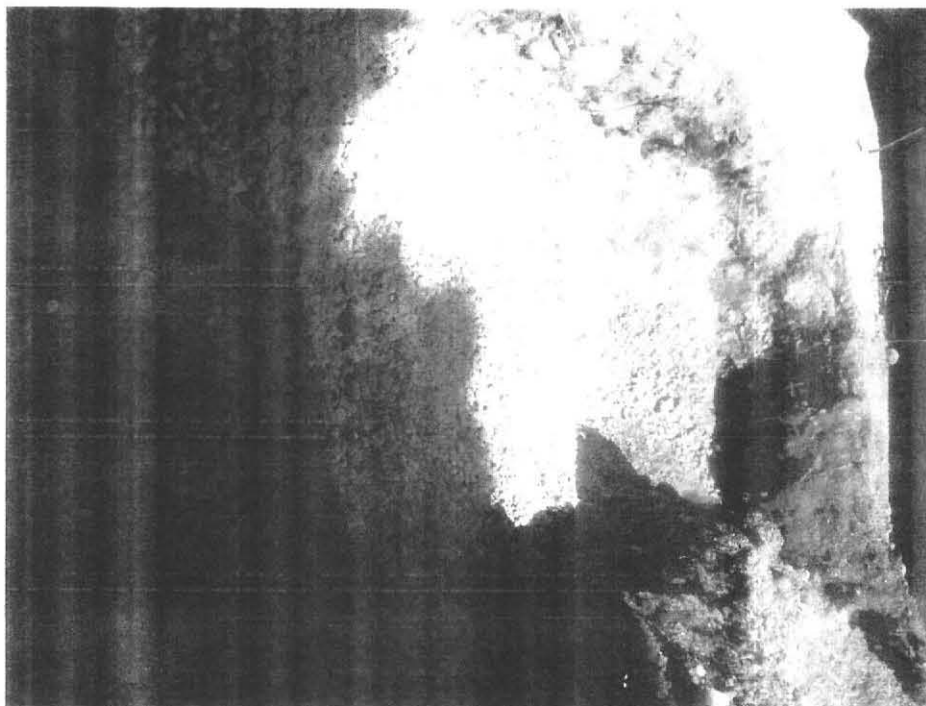
It turns out that roots were choking the pipe out of the septic tank at this "second" small system. Mike Uncovered and replaced the pipe and some of the surrounding stone. The stone was not saturated or failed and was only partially replace. The pipes and roots seem to have been the main problem. My understanding is that the "minor repair was completed last week. Here are a few photos, (the day I was called You, could not be reached.).

Feel free to contact me if you need anything further.

Alan
Cold Spring Environmental Consultants Inc.

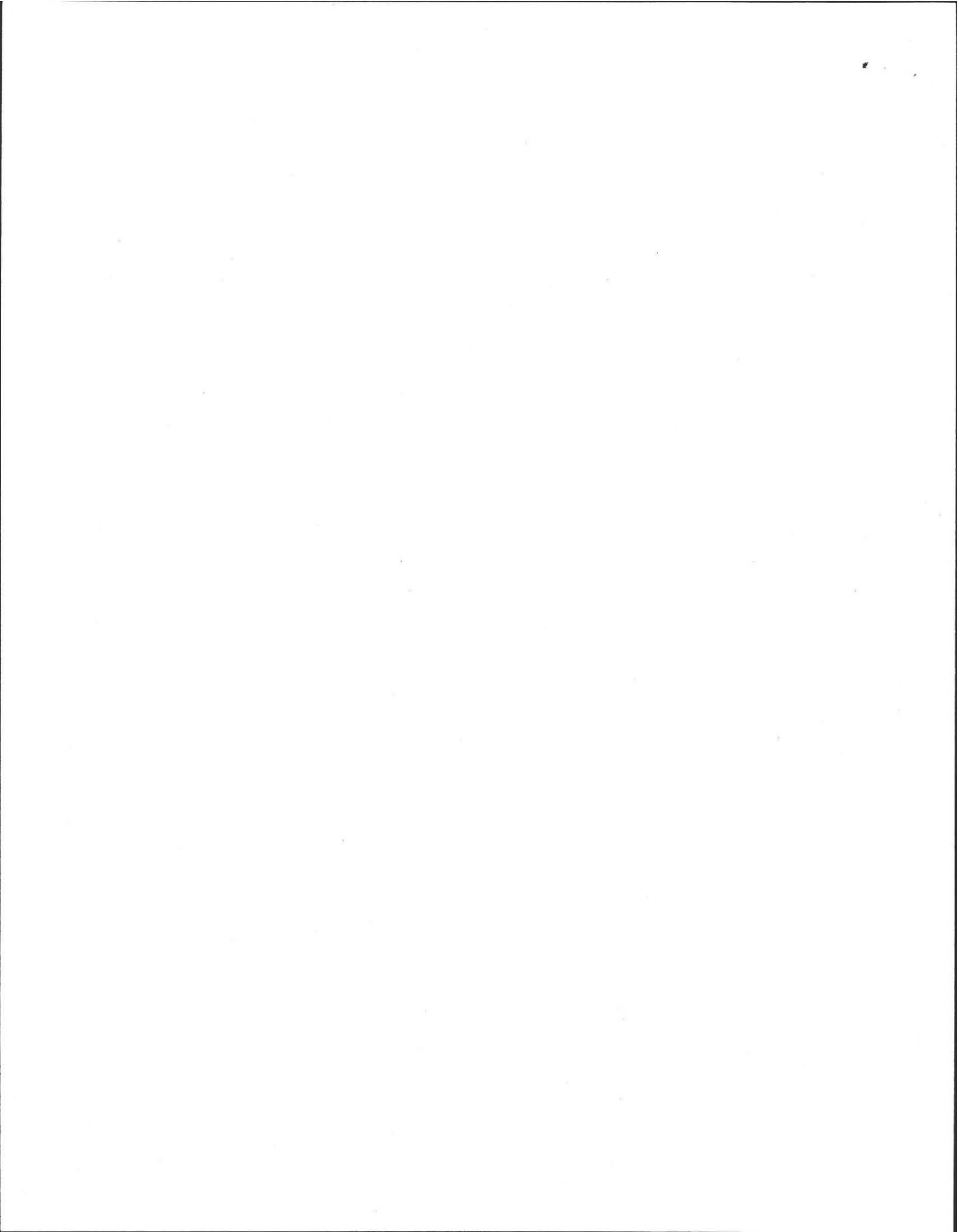
www.coldspringenvironmental.com

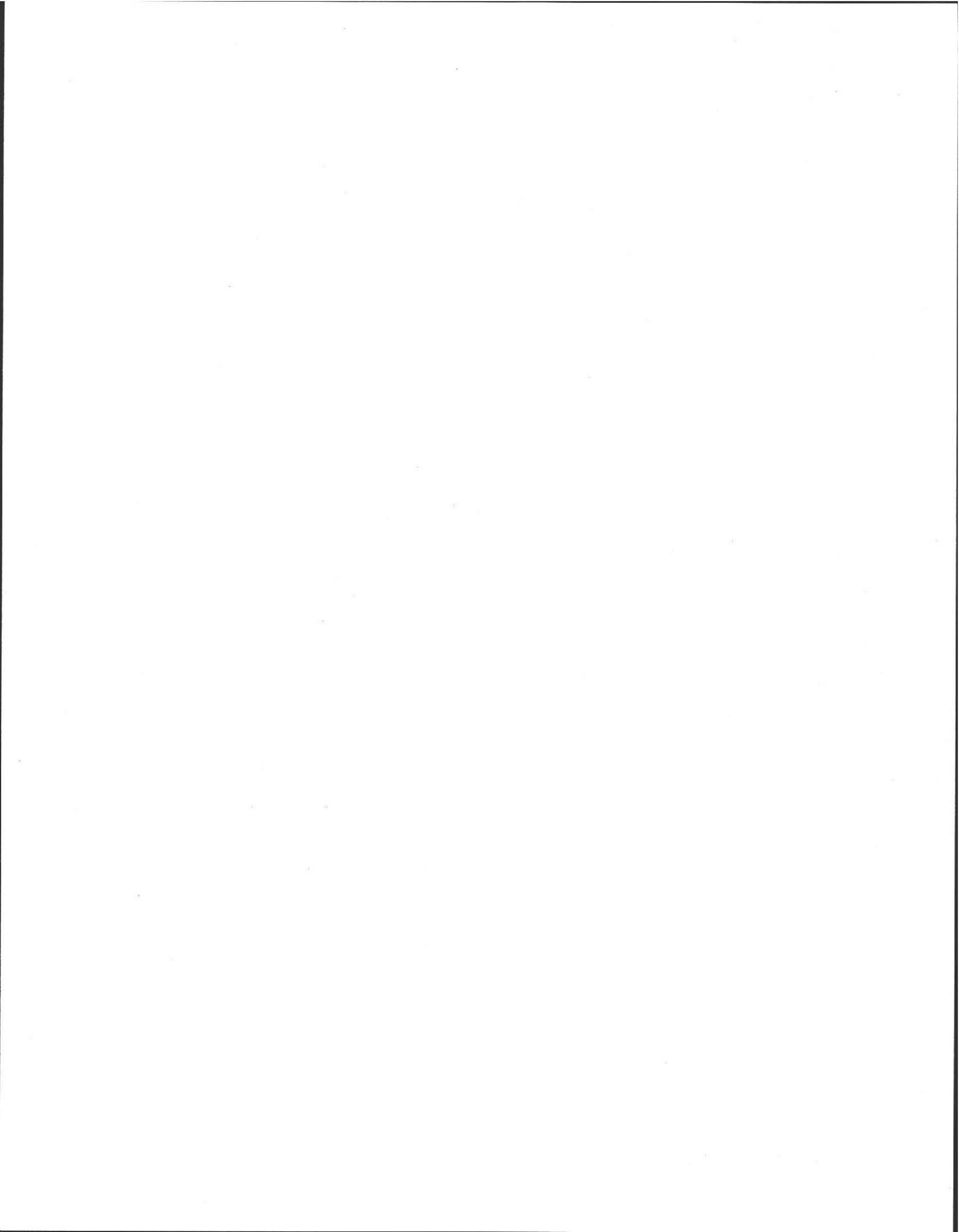




150 Market Hill Road
Amherst, MA
06.06.2011

from Alan Weiss





No. _____

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

Cl. Mike Stocz 413-374-4715

Location <u>150 Market Hill Rd.</u>	Owner's Name <u>Betty Scavened</u>
Map/Parcel# <u>3c/21</u>	Address <u>150 Market Hill Rd.</u>
Lot# <u>21</u>	Telephone# <u>549-3822</u>
Installer's Name <u>Mike Stocz</u>	Designer's Name <u>Alan Weiss</u>
Address <u>Amherst, MA</u>	Address <u>Beldersham</u>
Telephone# _____	Telephone# <u>323-5957</u>

Type of Building 3 BR Reside Lot Size 26,429 +/- sq. ft.

Dwelling - No. of Bedrooms 3 Garbage grinder

Other - Type of Building _____ No. of persons _____ Showers (), Cafeteria ()

Other Fixtures _____

Design Flow (min. required) 110 gpd Calculated design flow 530 Design flow provided 330 gpd

Plan: Date 12/12/08 Number of sheets 1 Revision Date _____

Title SEPTIC SYSTEM REPAIR PLAN

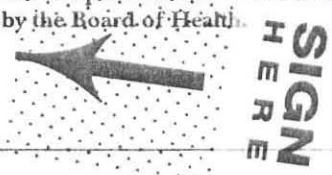
Description of Soil(s) _____

Soil Evaluator Form No. _____ Name of Soil Evaluator A. Weiss Date of Evaluation 11-19-08

DESCRIPTION OF REPAIRS OR ALTERATIONS Complete New SAS.

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 _____ Date _____



Inspections _____

No. _____

COMMONWEALTH OF MASSACHUSETTS

Board of Health, _____, MA.

FEE _____

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: _____

at _____

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. _____, dated _____, Approved Design Flow _____ (gpd)

Installer _____

Designer: _____ Inspector: _____ Date: _____

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

No. _____

COMMONWEALTH OF MASSACHUSETTS

Board of Health, _____, MA.

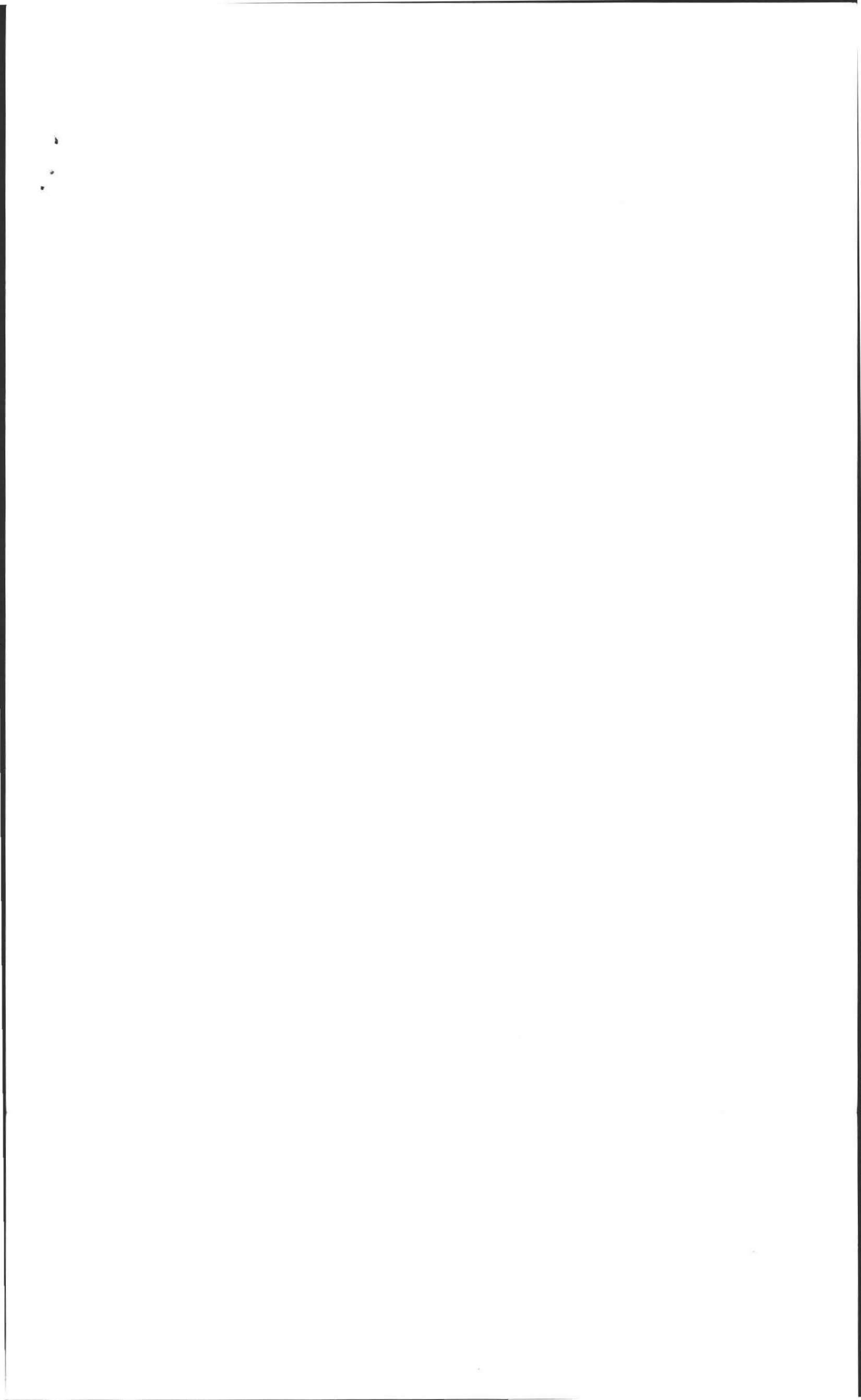
FEE _____

DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct () Repair () Upgrade () Abandon () an individual sewage disposal system at _____ as described in the application for

Disposal System Construction Permit No. _____, dated _____.

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





**COLD SPRING ENVIRONMENTAL
CONSULTANTS INC.**

- 2IE Site Investigations
 - Subsurface Investigations
 - Pollution Remediation
 - LSP on Staff
 - Forensic Septic Investigations
- December 11, 2008

- Percolation Tests
- Septic Designs
- Regulatory Compliance
- Recycling and Solid Waste
- Second Opinions

Ms. Ellen Bokina, Town Sanitarian
Amherst Board of Health
Amherst, MA 01002

**RE: Septic System Repair, Local Upgrade Approval
150 Market Hill Road, Amherst**

Dear M. Bokina

Based on recent data collected and confirmation with the attached survey, & in accordance with 310 CMR 15.402-405 and intent with full compliance with 310 CMR 15.000, (Sanitary Septic Code, Title V), and the understanding that maximum feasible upgrade should be achieved to maximize protection of public health and safety and the environment, **a Local Upgrade Approval (LUA)** for the repair of the system at the above mentioned property. It is opined by the writer that strict enforcement of the code would be manifestly unjust (310 CMR 15.410). The following approval request is forwarded (as there are no other options beyond wetland Buffer & zoning setback requirements):

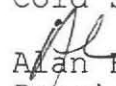
-lack of 10 feet of property line separation to the sides of the septic tank (310 CMR 15.405(1A), 1-1.5' proposed; The Abutters have been notified by Certified mail of request herein*. (310 CMR 15.405(1A), 1-1.5 feet proposed).

-lack of 10 foot offset of foundation/slab to 4 ft. given
Because of the confined conditions, An infiltrator system is used (mimimizing size, maximizing storage and using a 40 ml poly liner on the northwest most end. It is my opinion that given all the possible scenarios for a new disposal system, and due to spatial constraints, this plan best meets the intent on the Sanitary Code.

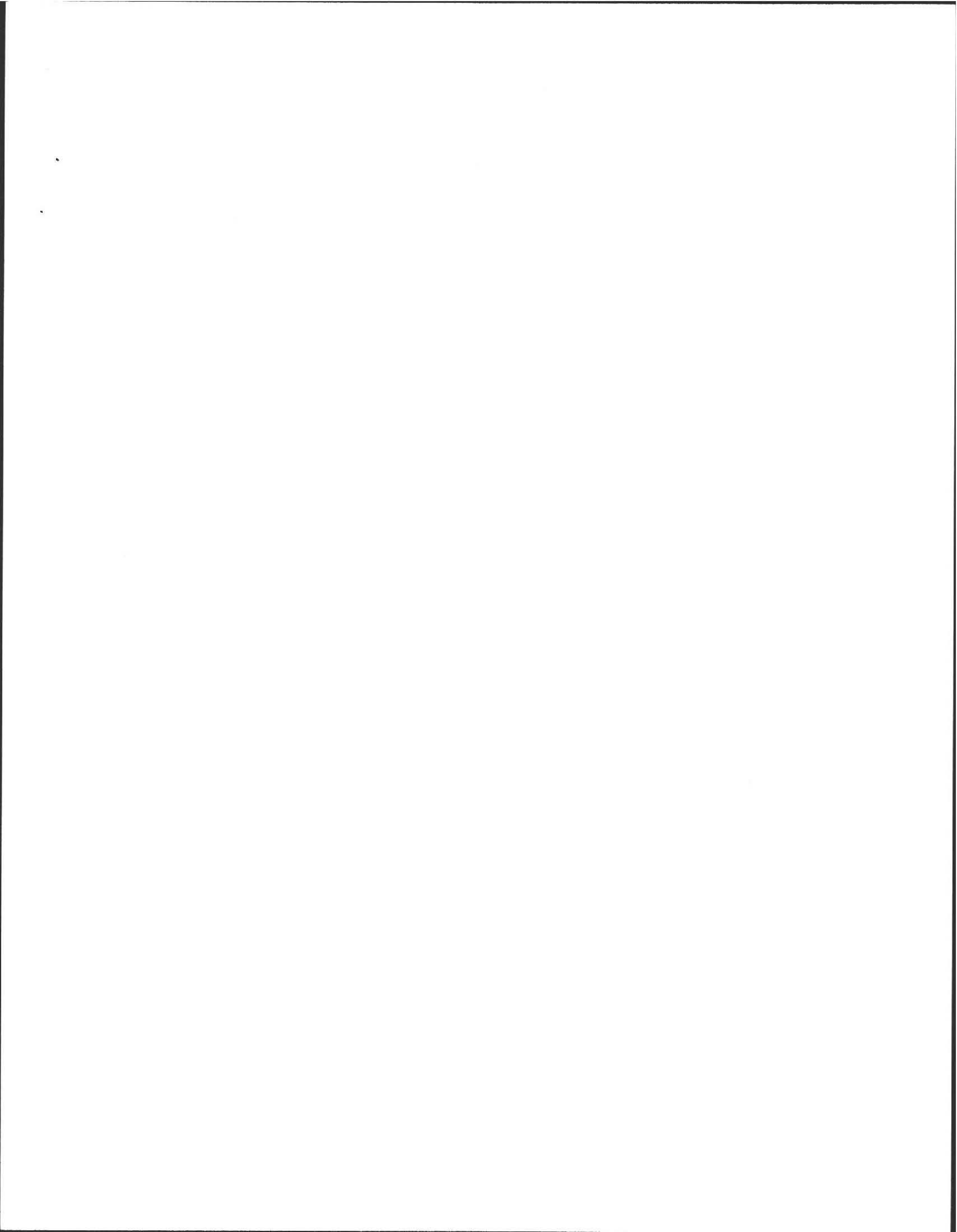
It is understood that my client must provide you this letter. In addition, a copy of (Form 9B) Local Upgrade Approval from your board and a Plan copy must be sent to Mass. DEP, 436 Dwight St., Springfield, 01103..

Please feel free to contact me should you have any questions.
Sincerely,

Cold Spring Environmental Consultants, Inc.


Alan E. Weiss, M.S.
President
Principal Hydrogeologist
Registered Sanitarian Lic. #933

CC:
Owner/Applicant, Ms. Erica and Betty Saveried
Affected Abutter, C/O Carman Assoc, 60 Ward Ave. Northampton, MA 01060





Form 9A – Application for Local Upgrade Approval

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with your local Board of Health to determine the form they use.

Form 9A is to be submitted to the Local Board of Health for the upgrade of a failed or nonconforming septic system with a design flow of less than 10,000 gpd, where full compliance, as defined in 310 CMR 15.404(1), is not feasible.

System upgrades that cannot be performed in accordance with 310 CMR 15.404 and 15.405, or in full compliance with the requirements of 310 CMR 15.000, require a variance pursuant to 310 CMR 15.410 through 15.415.

NOTE: Local upgrade approval shall not be granted for an upgrade proposal that includes the addition of a new design flow to a cesspool or privy, or the addition of a new design flow above the existing approved capacity of an on-site system constructed in accordance with either the 1978 Code or 310 CMR 15.000.

A. Facility Information

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Facility Name and Address:

Betty Saveried

Name

150 Market Hill Road

Street Address

Amherst

City/Town

MA

State

01002

Zip Code

2. Owner Name and Address (if different from above):

Name

Street Address

City/Town

State

Zip Code

Telephone Number

3. Type of Facility (check all that apply):

Residential Institutional Commercial School

4. Describe Facility:

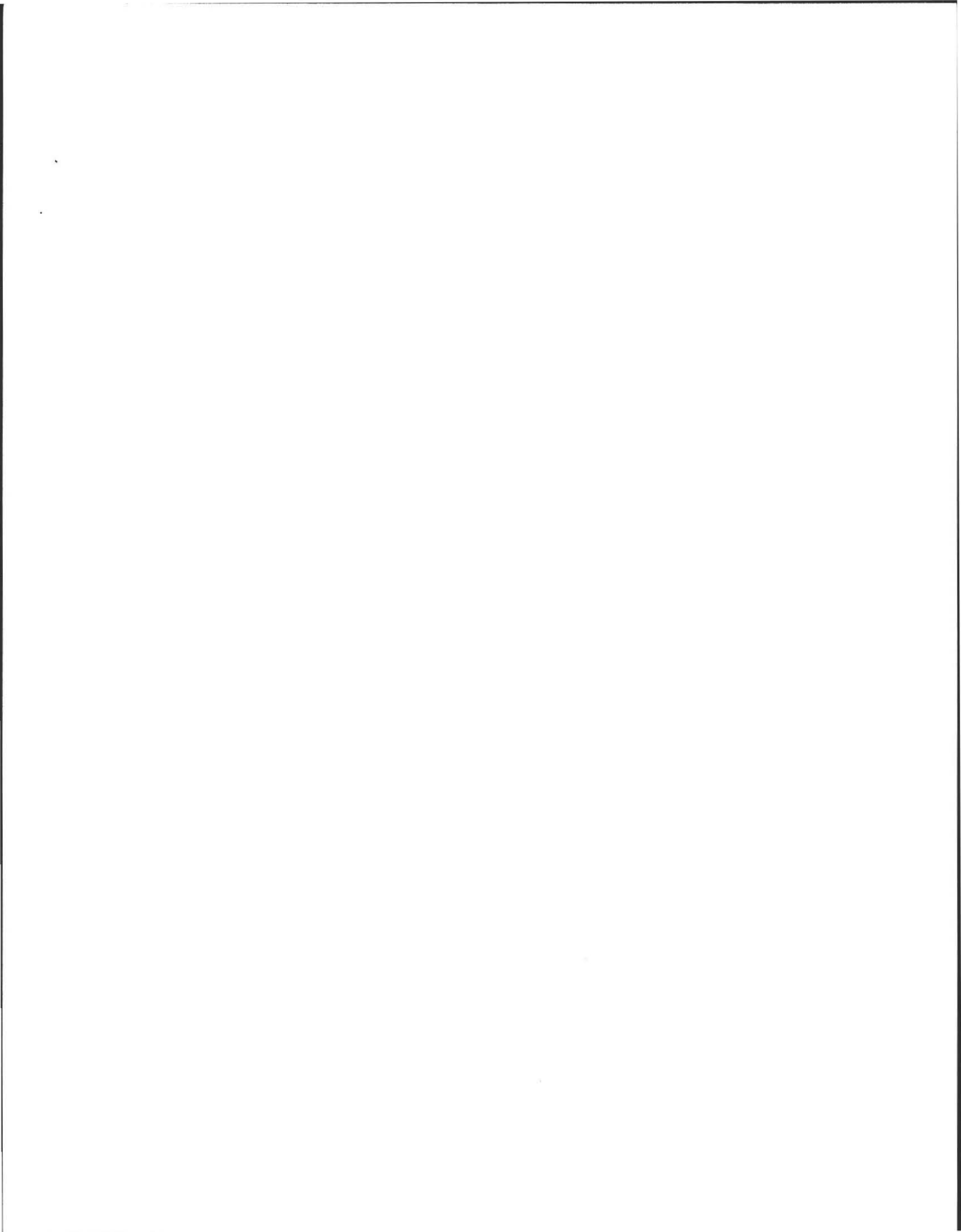
Existing 3 Bedroom

5. Type of Existing System:

Privy Cesspool(s) Conventional Other (describe below):

6. Type of soil absorption system (trenches, chambers, leach field, pits, etc):

L. chambers (2)





Form 9A – Application for Local Upgrade Approval

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with your local Board of Health to determine the form they use.

A. Facility Information (continued)

7. Design Flow per 310 CMR 15.203:

Design flow of existing system:	330
	gpd
Design flow of proposed upgraded system	330
	gpd
Design flow of facility:	430
	gpd

B. Proposed Upgrade of System

1. Proposed upgrade is (check one):

Voluntary Required by order, letter, etc. (attach copy)

Required following inspection pursuant to 310 CMR 15.301: _____
date of inspection

2. Describe the proposed upgrade to the system:

New s. tank and L. field (Infiltrators)

3. Local Upgrade Approval is requested for (check all that apply):

Reduction in setback(s) – describe reductions:

Septic Tank to slab foundation From 10 ft. to 4 ft (310 CMR 15.404b) Reduction from P. line at north 10 ft. to 1.0-1.5 ft. (310 cmr 15405 1a), survey attached, abutter notified. .

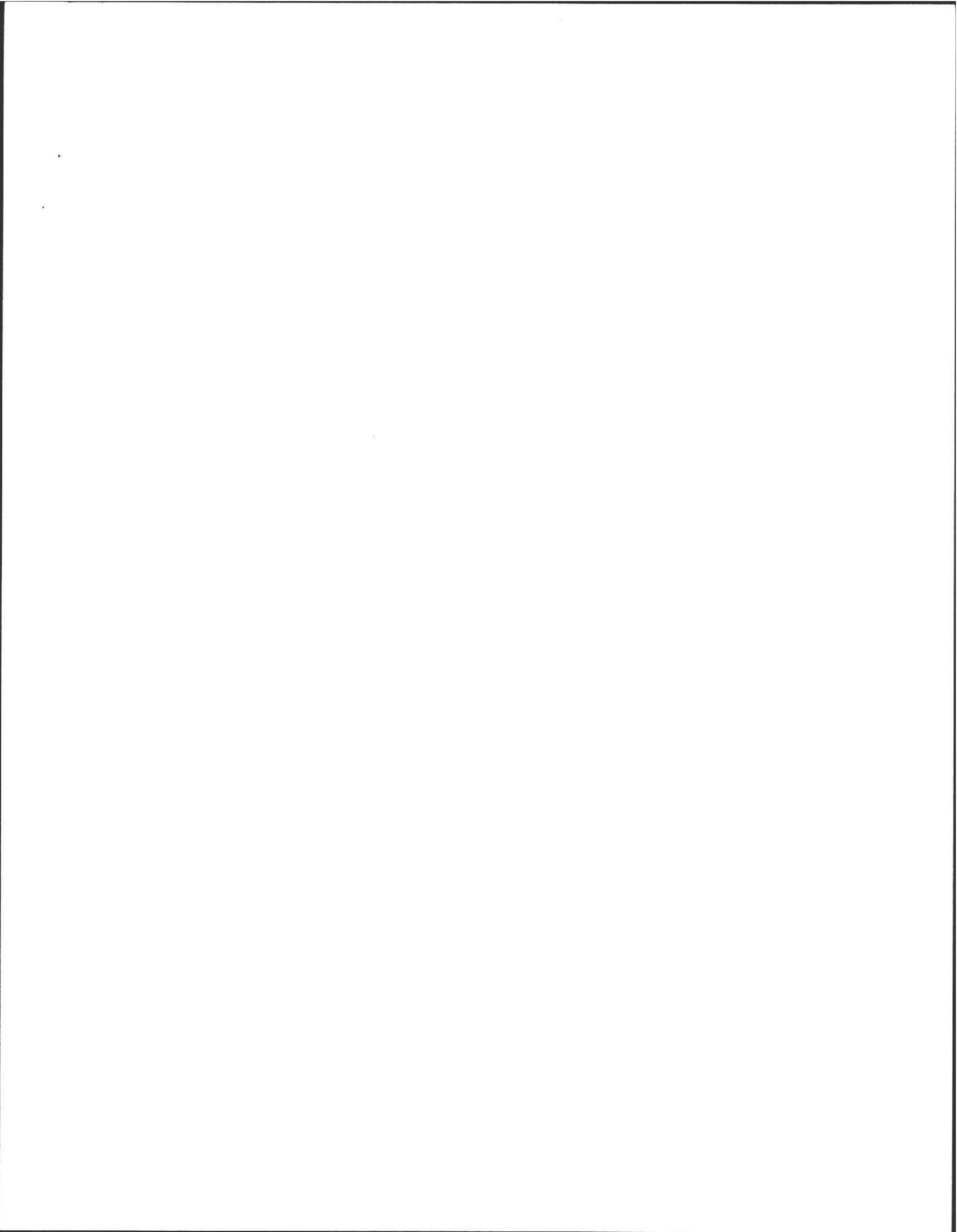
Reduction in SAS area of up to 25%: SAS size, sq. ft. % reduction

Reduction in separation between the SAS and high groundwater:

Separation reduction _____
ft.

Percolation rate _____
min./inch

Depth to groundwater _____
ft.





Form 9A – Application for Local Upgrade Approval

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with your local Board of Health to determine the form they use.

B. Proposed Upgrade of System (continued)

Relocation of water supply well (explain):

Reduction of 12-inch separation between inlet and outlet tees and high groundwater

Use of only one deep hole in proposed disposal area

Use of a sieve analysis as a substitute for a perc test

Other requirements of 310 CMR 15.000 that cannot be met – describe and specify sections of the Code:

If the proposed upgrade involves a reduction in the required separation between the bottom of the soil absorption system and the high groundwater elevation, an Approved Soil Evaluator must determine the high groundwater elevation pursuant to 310 CMR 15.405(1)(h)(1). ***The soil evaluator must be a member or agent of the local approving authority.***

High groundwater evaluation determined by:

Evaluator's Name (type or print)

Signature

Date of evaluation

C. Explanation

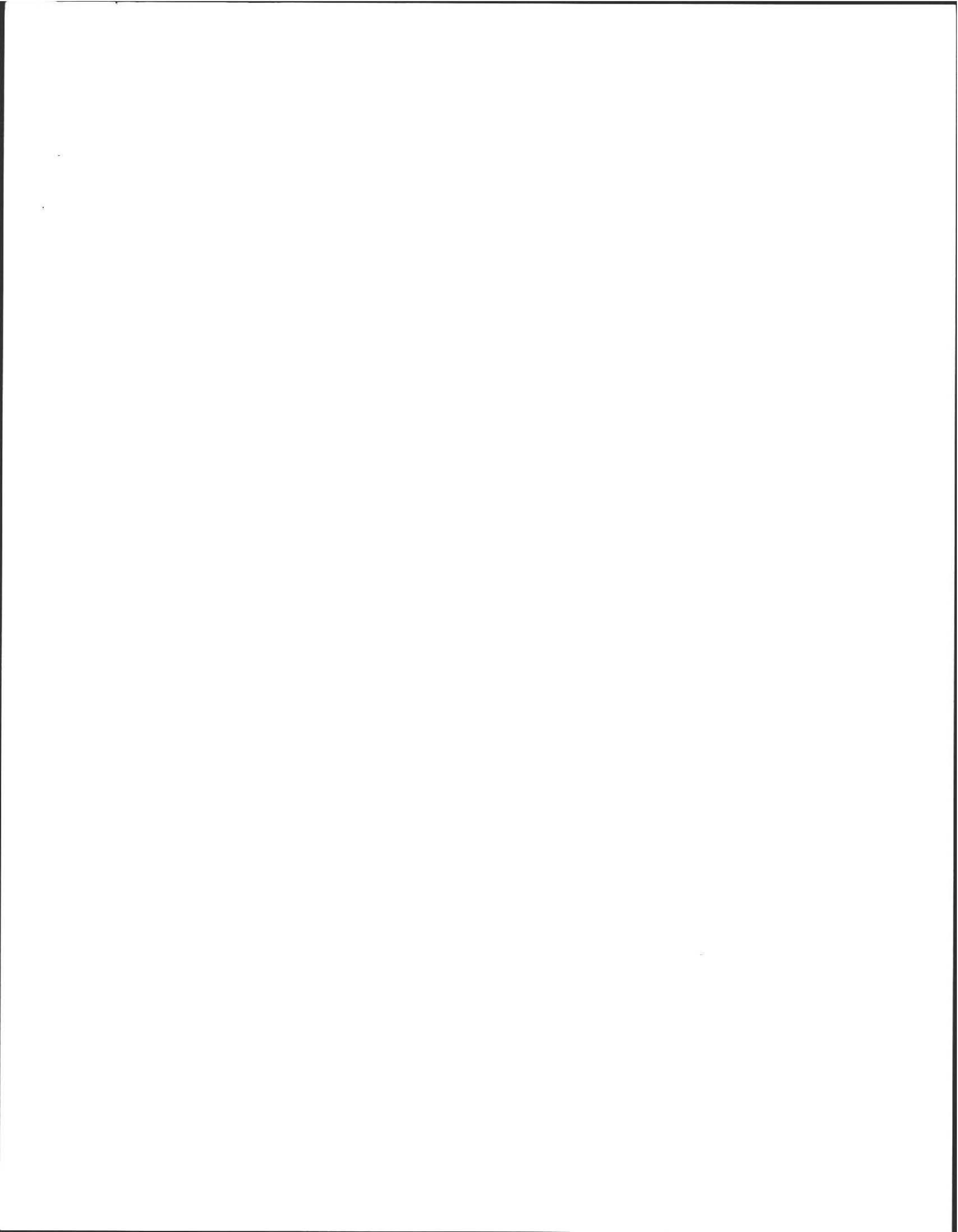
Explain why full compliance, as defined in 310 CMR 15.404(1), is not feasible. (Each section must be completed)

1. An upgraded system in full compliance with 310 CMR 15.000 is not feasible:

Due to available space, lake & P.L.

2. An alternative system approved pursuant to 310 CMR 15.283 to 15.288 is not feasible:

Would not change need offset Request





Commonwealth of Massachusetts

City/Town of Amherst, MA

Form 9A – Application for Local Upgrade Approval

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with your local Board of Health to determine the form they use.

C. Explanation (continued)

3. A shared system is not feasible:

Not Available

4. Connection to a public sewer is not feasible:

Not Available

5. The Application for Local Upgrade Approval must be accompanied by all of the following (check the appropriate boxes):

Application for Disposal System Construction Permit

Complete plans and specifications

Site evaluation forms

A list of abutters affected by reduced setbacks to private water supply wells or property lines. Provide proof that affected abutters have been notified pursuant to 310 CMR 15.405(2).

Other (List):

Abutter: Henry & Paul Lyman, C/O Carman Assoc. 60 Ward Ave. Northampton, MA 01060

D. Certification

"I, the facility owner, certify under penalty of law that this document and all attachments, to the best of my knowledge and belief, are true, accurate, and complete. I am aware that there may be significant consequences for submitting false information, including, but not limited to, penalties or fine and/or imprisonment for deliberate violations."



Facility Owner's Signature

Betty Saveried

Print Name

Alan E Weiss, Cold Spring Environmental

Consultants Inc.

350 Old Enfield Road

Preparer's address

MA 01007

State/ZIP Code

Date

12.11.2008

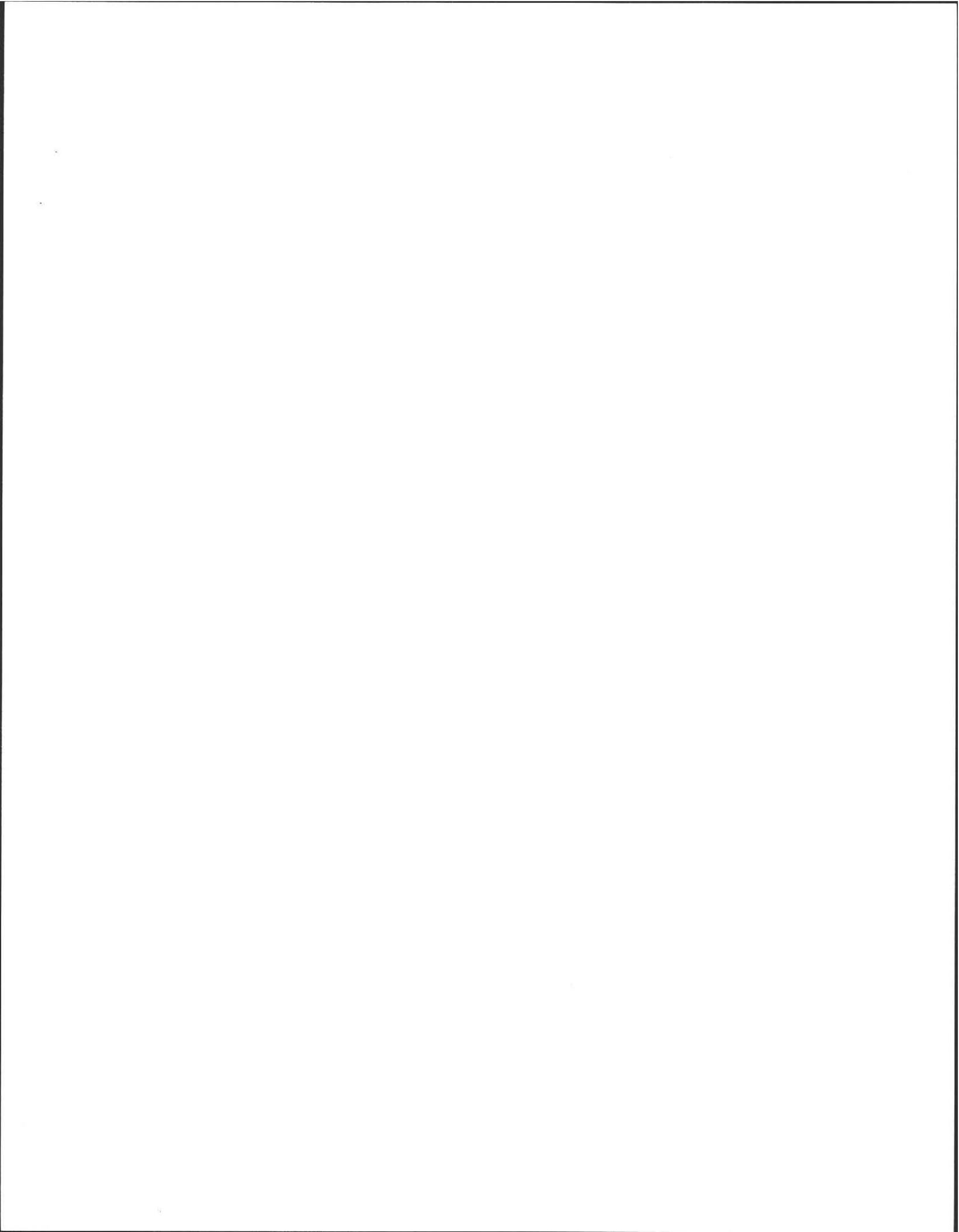
Date

Belchertown

City/Town

413.323.5957

Telephone



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: 11/19/02

Commonwealth of Massachusetts

Amherst, Massachusetts

Soil Suitability Assessment for On-site Sewage Disposal

Performed By: A. Weiss
Witnessed By: E. B. King

Date: 11/19/02

c/o Mike Stosz 374-4715

Location Address or Lot # <u>150 Market Hill Rd</u>	Owner's Name, Address, and Telephone # <u>Ms. Seaman 150 Mkt. Hill Amherst, MA 01002</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)

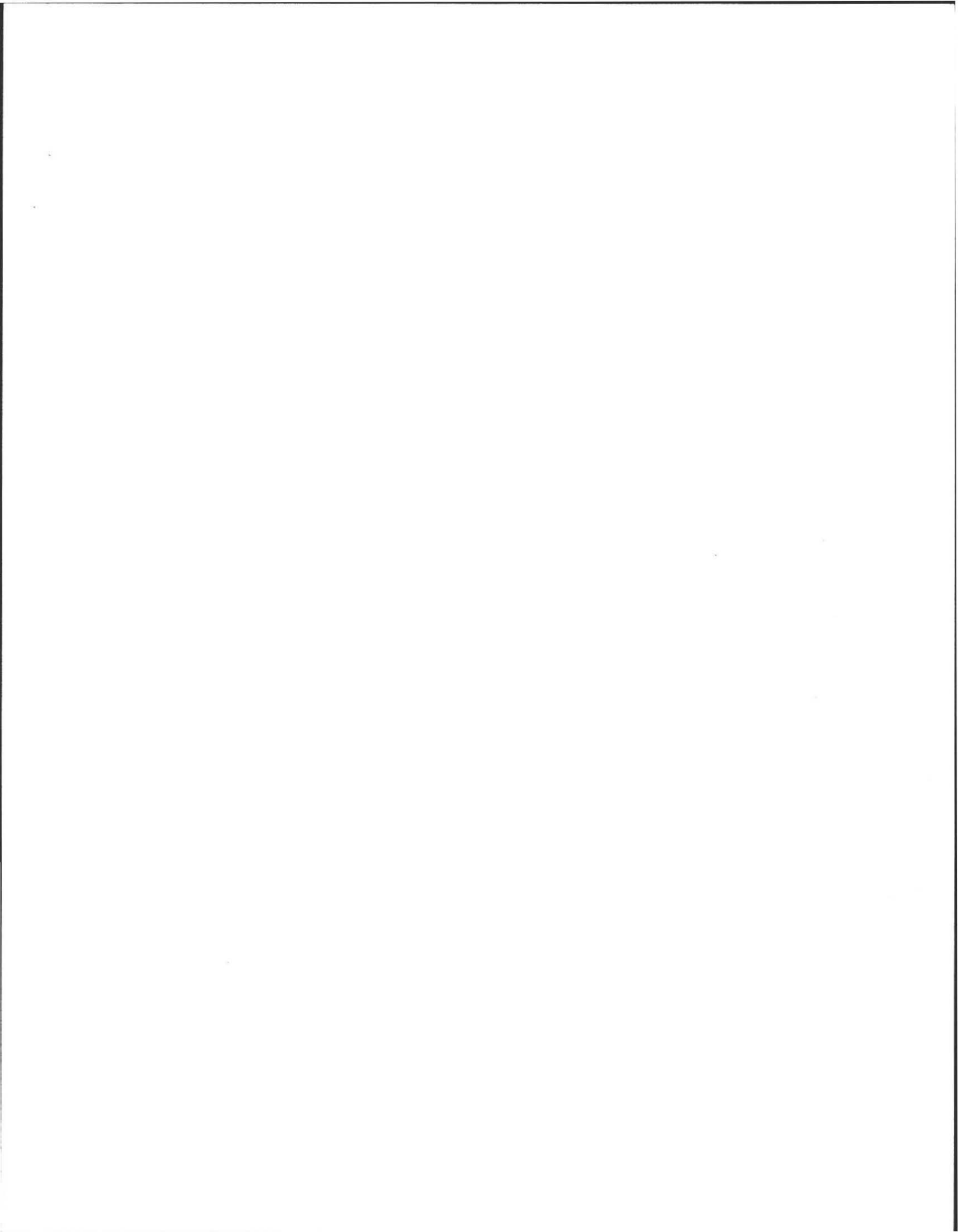
Current Water Resource Conditions (USGS): Month

Range: Above Normal Normal Below Normal

Other References Reviewed: _____



X Survey
X Flood Insurance Map
X USGS - Topographic & PL
X 10/1/02



Location Address or Lot No. 150 Mt Hill

256-4077
3077 (PAW) 4:30

On-site Review

Deep Hole Number 147 Date: 11/19/06 Time: 2:00 Weather Sun 35°F

Location (identify on site plan) _____

Land Use Rural Ls Slope (%) 2 Surface Stones _____

Vegetation Wooded

Landform _____

Position on landscape (sketch on the back) _____

Distances from:

Open Water Body 100' feet
Possible Wet Area 70' feet
Drinking Water Well Low feet
Drainage way 50' feet
Property Line 20' 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)
0-10"	A	FSC	10YR3/3		Fricole F. Sandy Med. Sand, well sorted. g. till. mod. compacted 10% stones
10"-26"	B	FS	10YR4/6		
26"-90"	C1	S	2.5Y4/4		
90"-108"	C2	FSC	2.5Y4/3	90" 2.5Y4/1	
0-10"	A	FSC	same		↓ ↓ Smeas #1
10"-26"	B	FS	e	90"	
26"-90"	C1	S	#1		
90"-108"	C2	FSC			

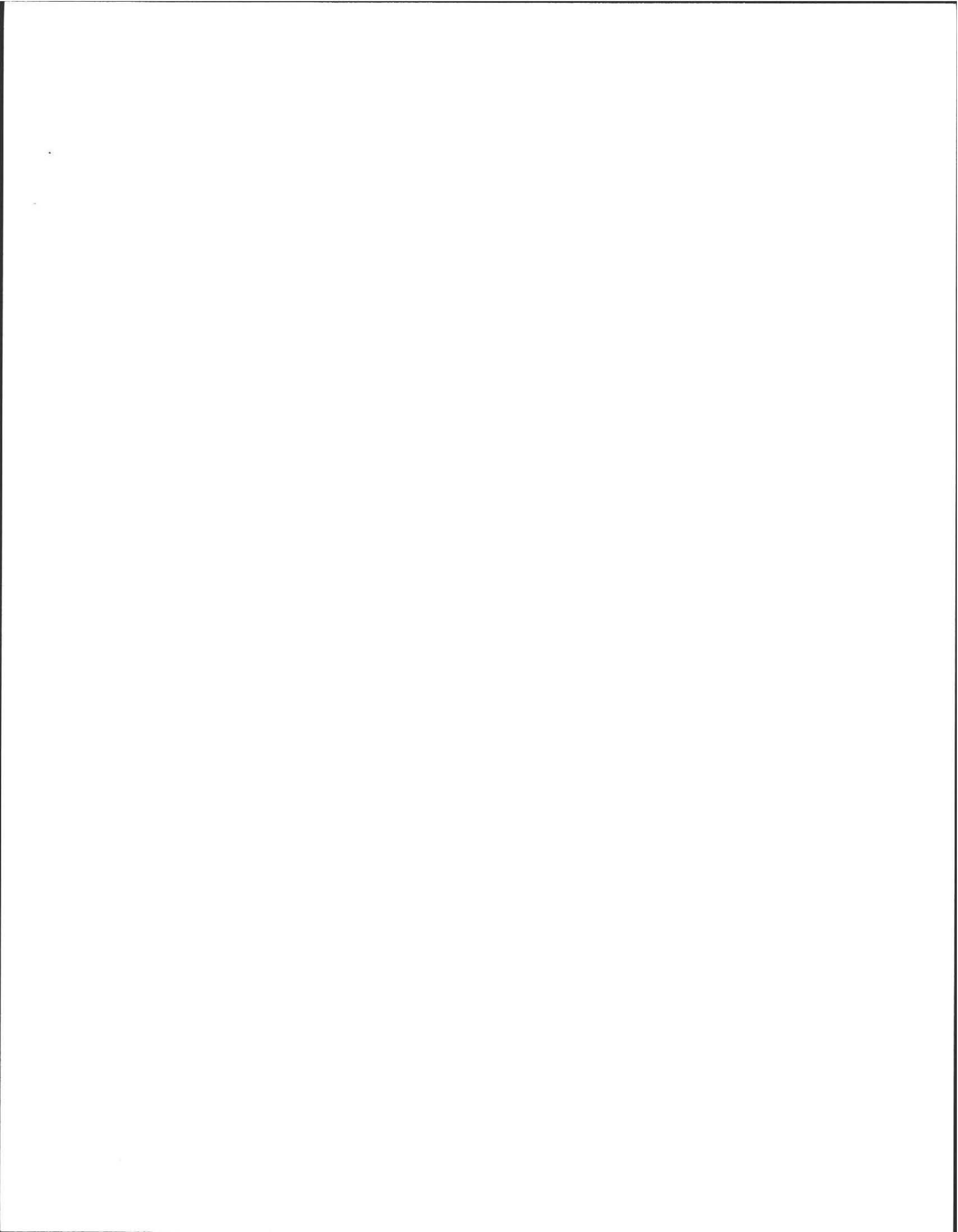
* MINIMUM OF 2 HOLES REQUIRED AT EVERY PROPOSED DISPOSAL AREA

Parent Material (geologic) Stratified over Till Depth to Bedrock: 108"

Depth to Groundwater: Standing Water in the Hole: Not Weeping from Pit Face: Not

Estimated Seasonal High Ground Water: _____





Location Address or Lot No. 150 Mt Hill Rd

COMMONWEALTH OF MASSACHUSETTS

Amherst, Massachusetts

Percolation Test*		
Date: <u>11/19/08</u>		Time: <u>2:30</u>
Observation Hole #	<u>P1</u>	
Depth of Perc	<u>46"</u>	
Start Pre-soak	<u>2:35</u>	
End Pre-soak	<u>2:50</u>	
Time at 12"	<u>2:50</u>	
Time at 9"	<u>2:57</u>	
Time at 6"	<u>3:12</u>	
Time (9"-6")	<u>13^{min}</u>	
Rate Min./Inch	<u>5^{min} / IN</u>	

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

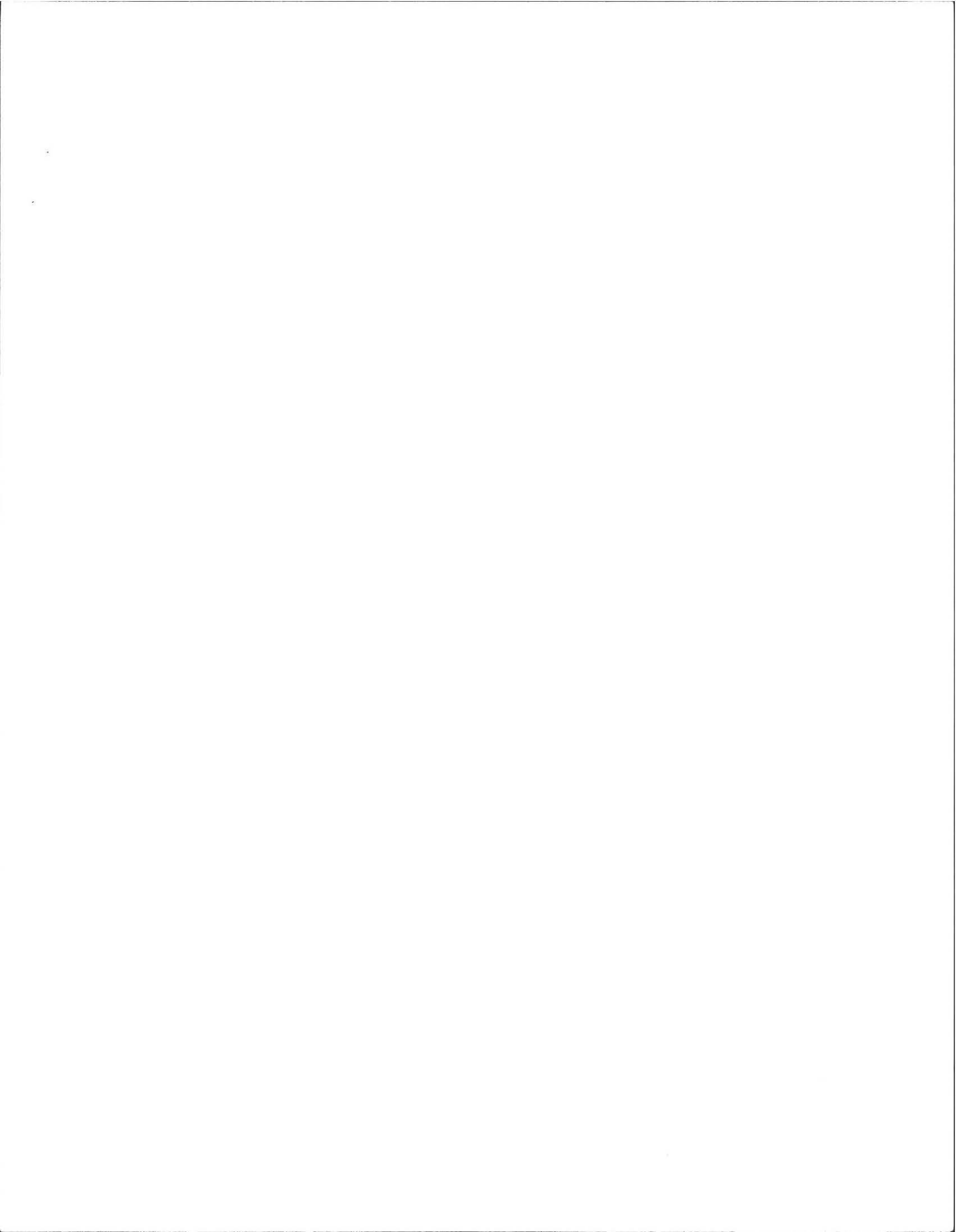
Site Passed Site Failed

Performed By: A. Weiss

Witnessed By: E. Brennan

Comments: _____





Location Address or Lot No. 150 Mt + Hill 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 90" 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

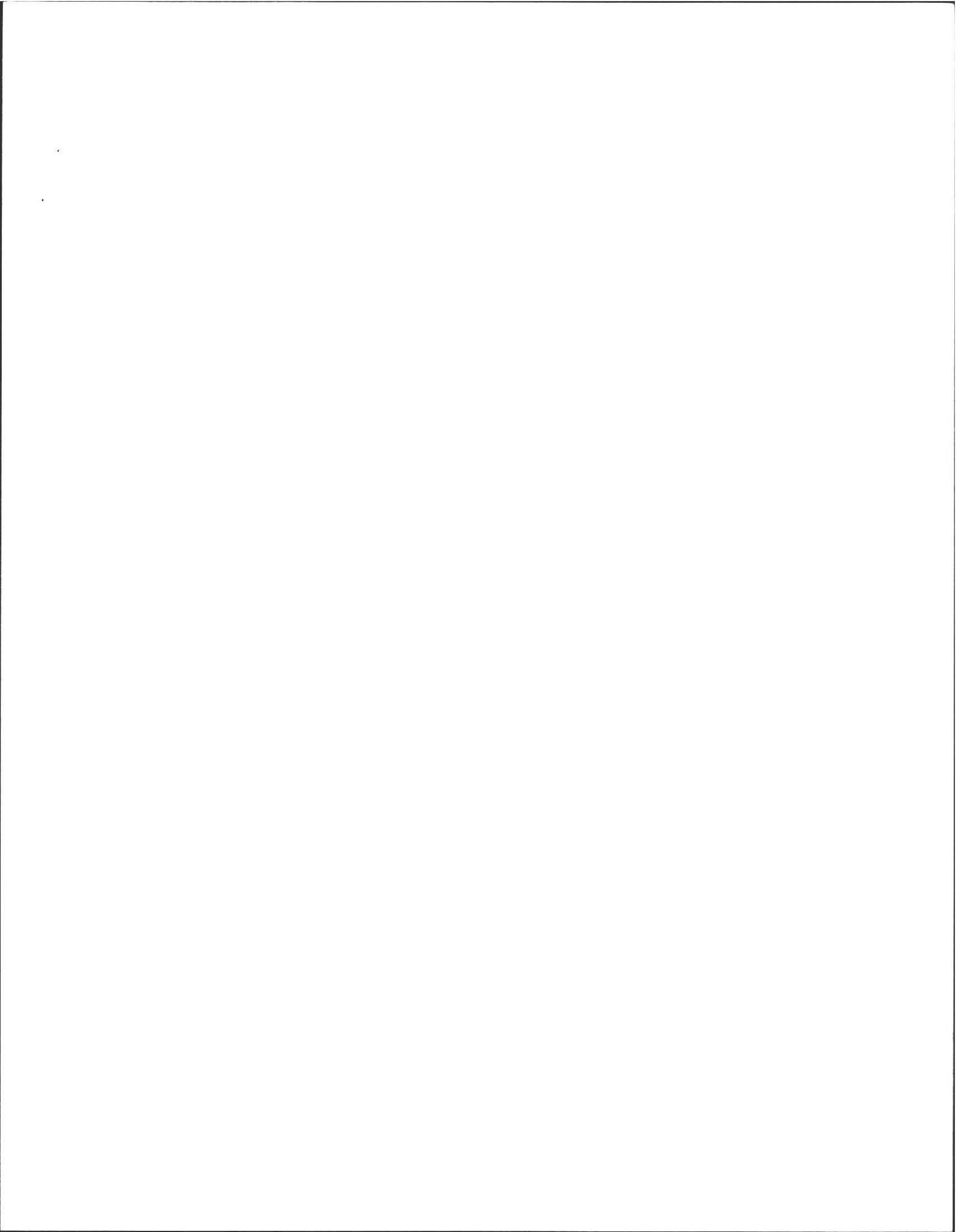
If not, what is the depth of naturally occurring pervious material? _____

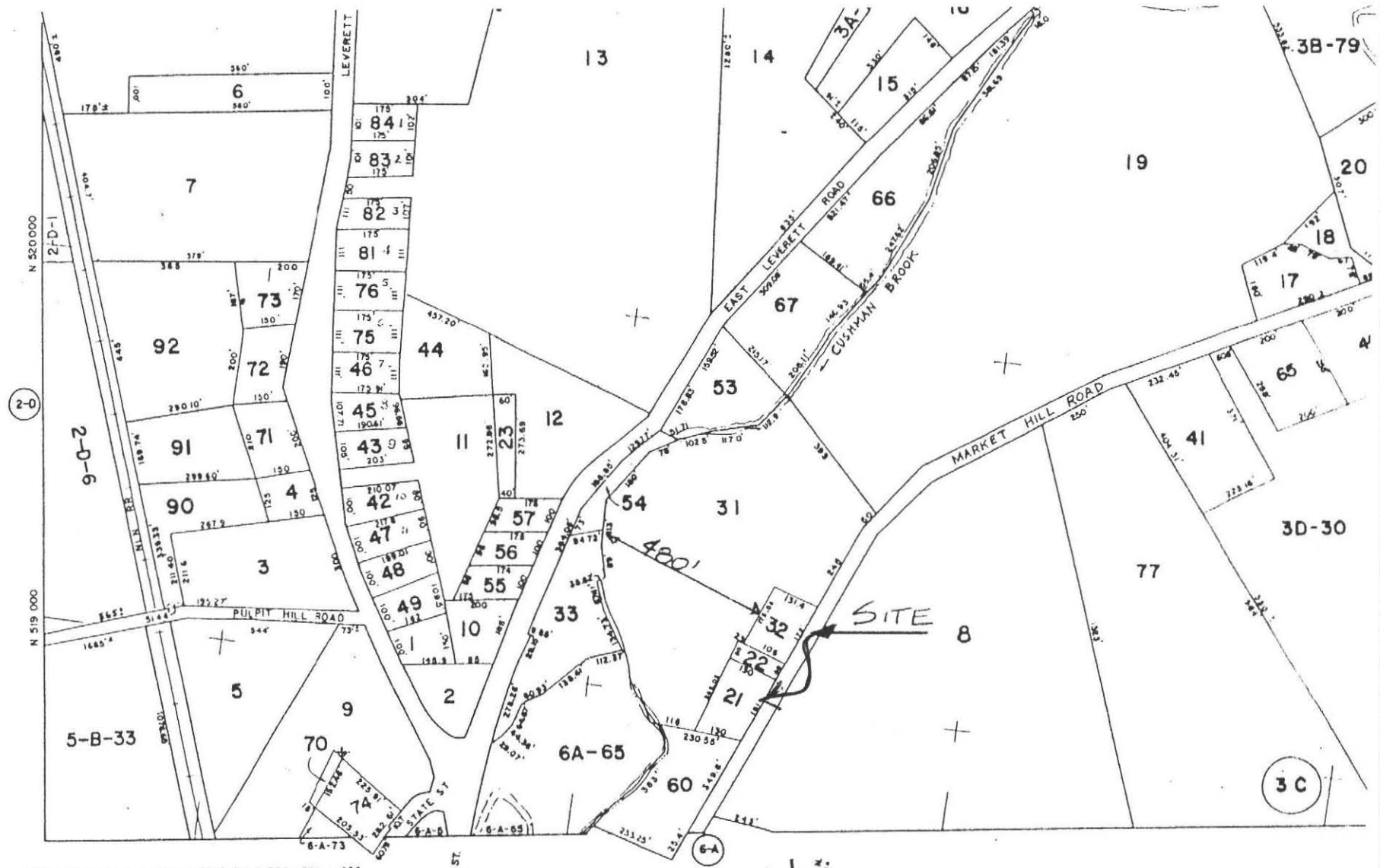
Certification

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 Al Date 11/19/08



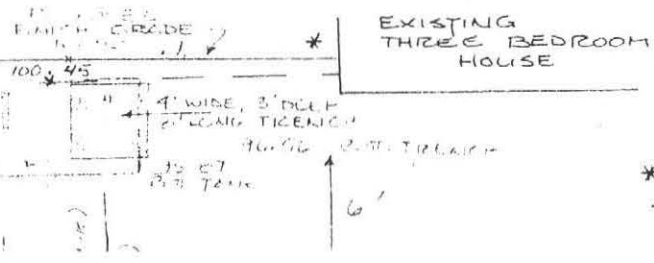




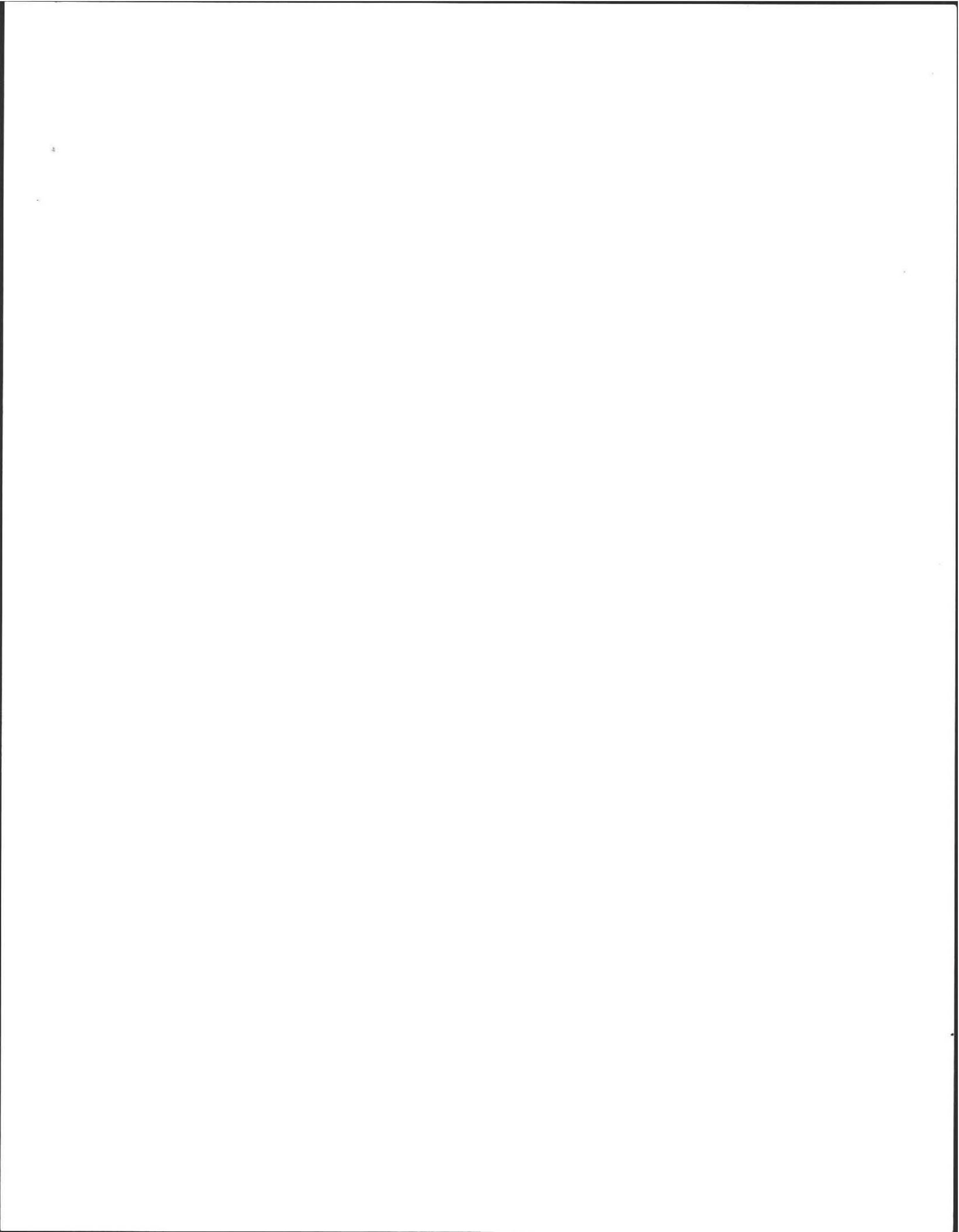
MAP PREPARED FROM AERIAL PHOTOGRAPHY DATED APRIL - 1956
 PROPERTY DATA PREPARED FROM HAMPSHIRE COUNTY REGISTRY
 OF DEEDS RECORDS AS OF JANUARY-1957.

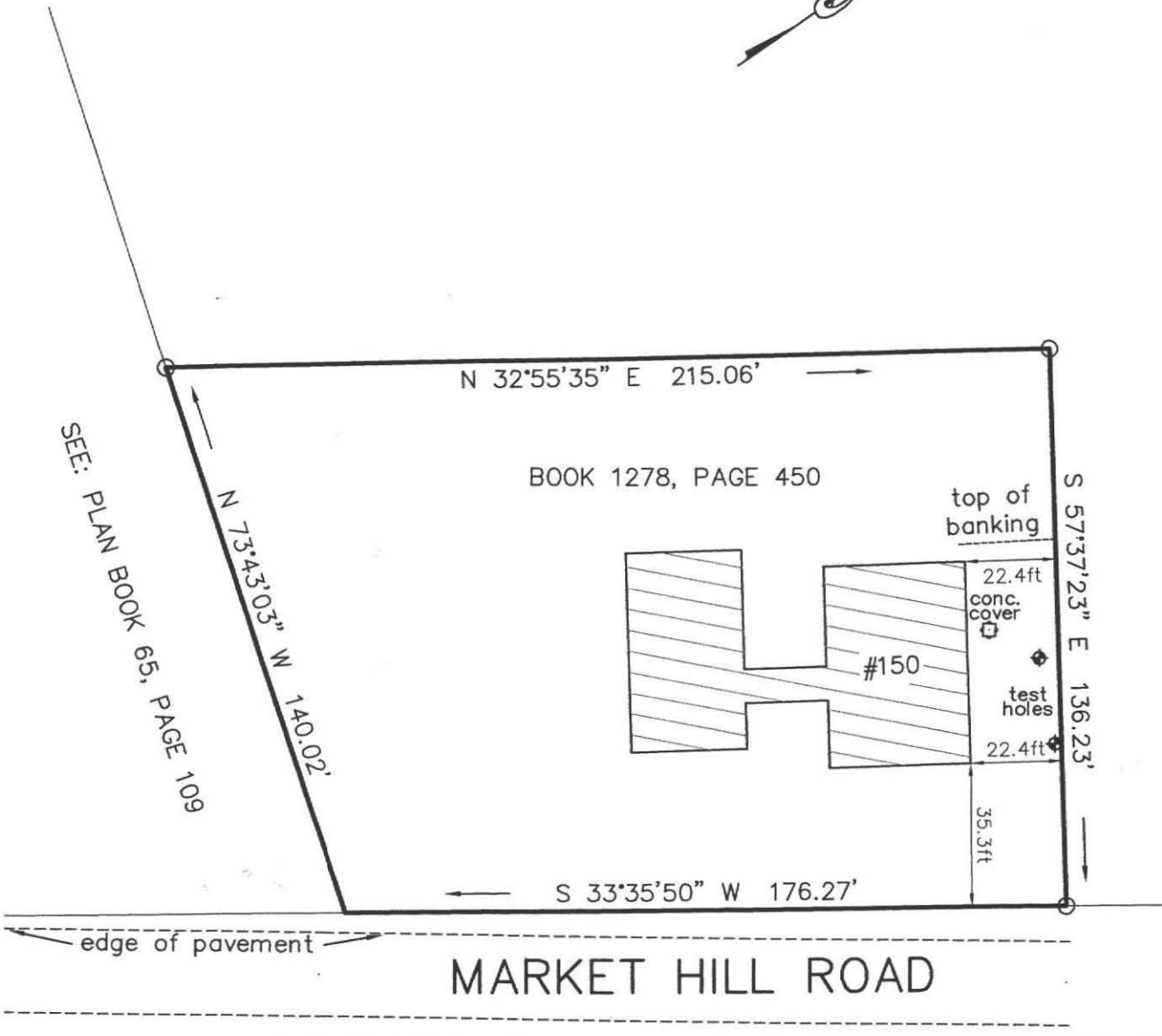
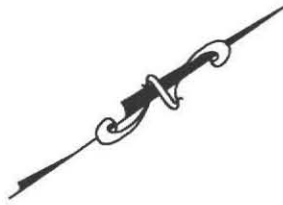
TOW

HAMPTON MAP
 1" = 400'



* NOTE: SIDE
 GRADE RECORDS 1949
 DOES NOT APPLY





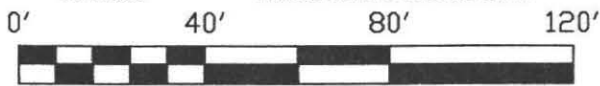
PLAN OF LAND IN
AMHERST, MASSACHUSETTS
 PREPARED FOR
SEVERT J. & BETTY J. SAVEREID

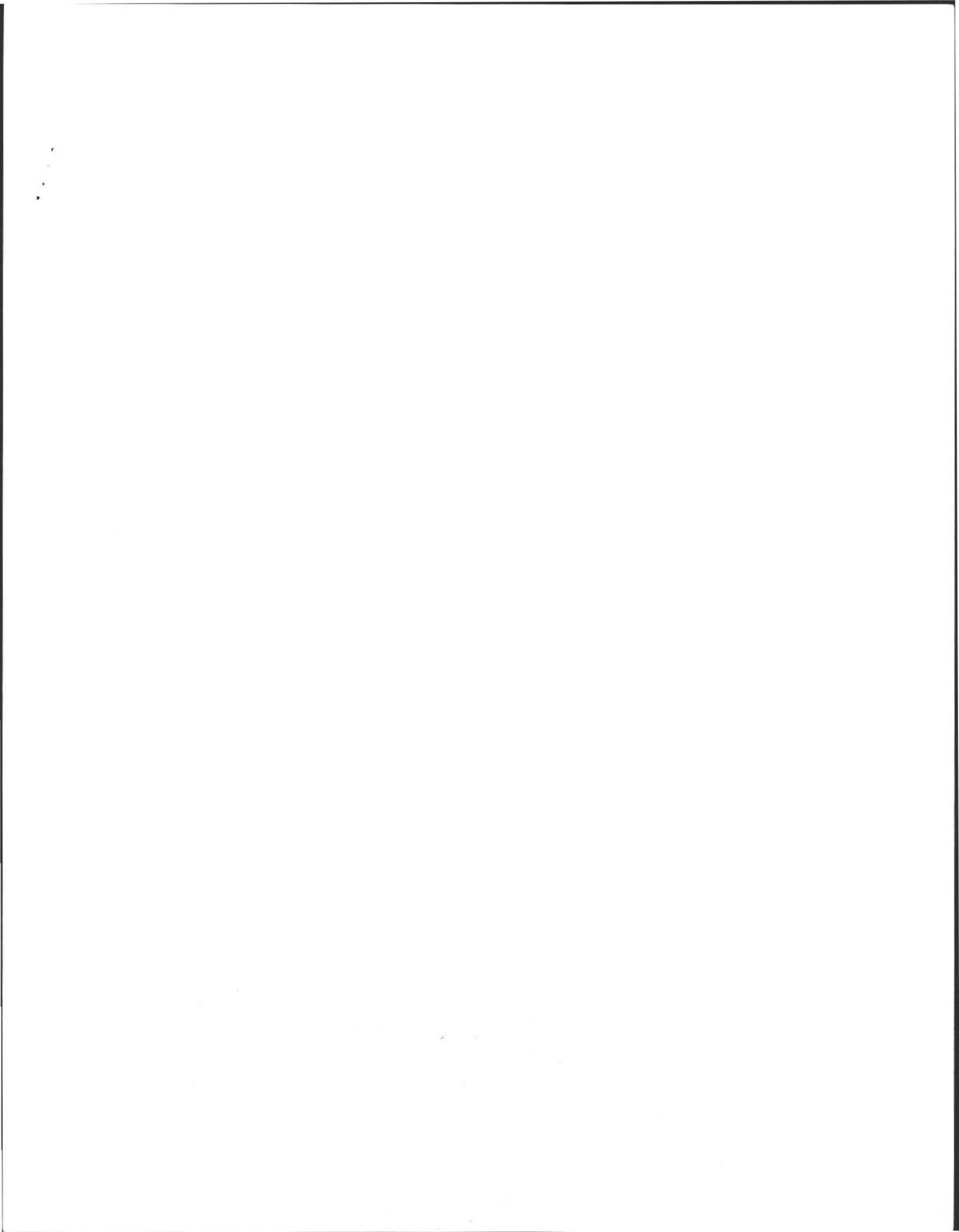
SCALE: 1"=40' DECEMBER 11, 2008
 HAROLD L. EATON AND ASSOCIATES, INC.
 REGISTERED PROFESSIONAL LAND SURVEYORS
 235 RUSSELL STREET - HADLEY - MASSACHUSETTS
 413-584-7599 413-585-5976 (fax)
 email - hleaton@aol.com



LEGEND

○ FOUND IRON PIN





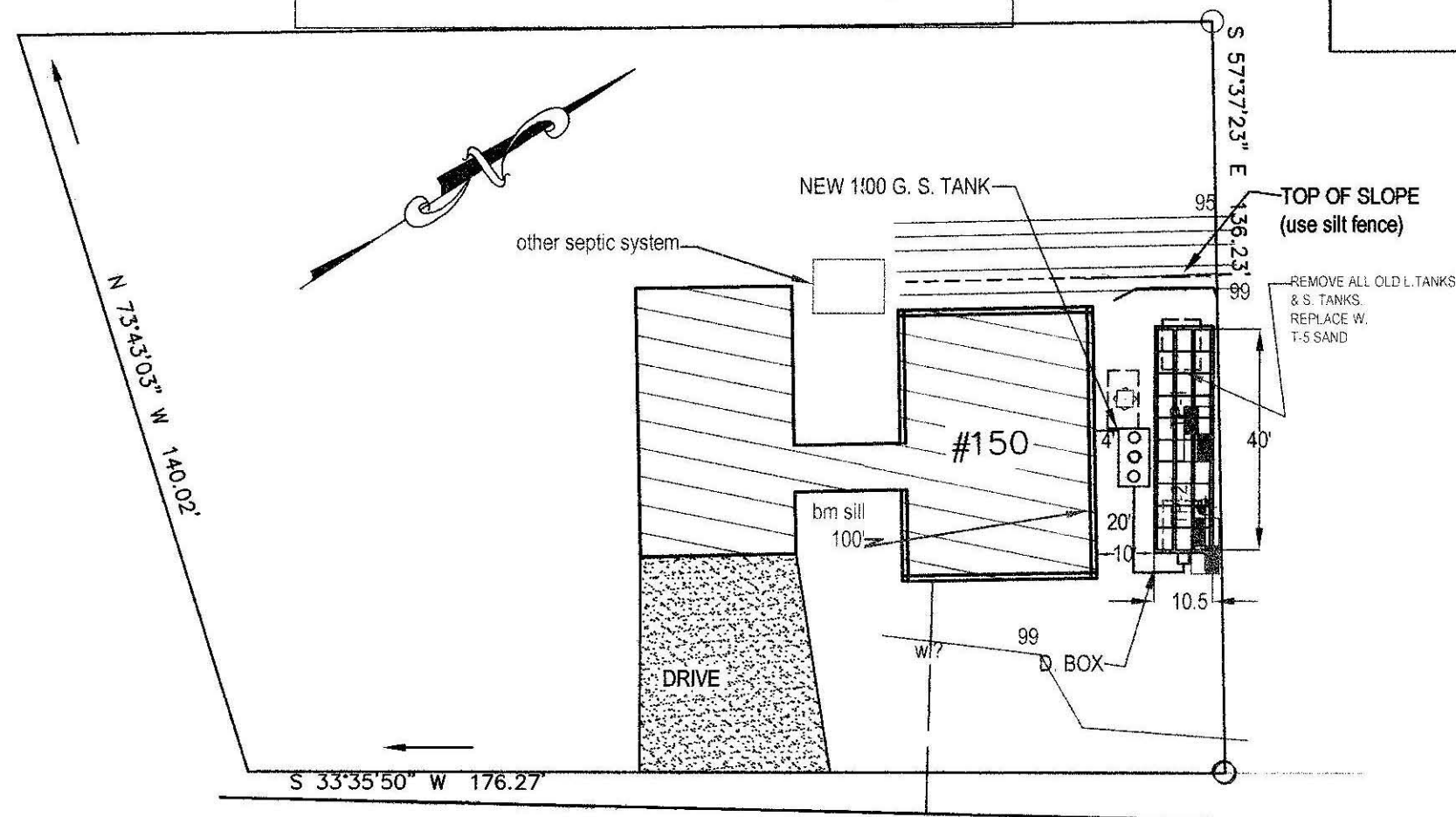
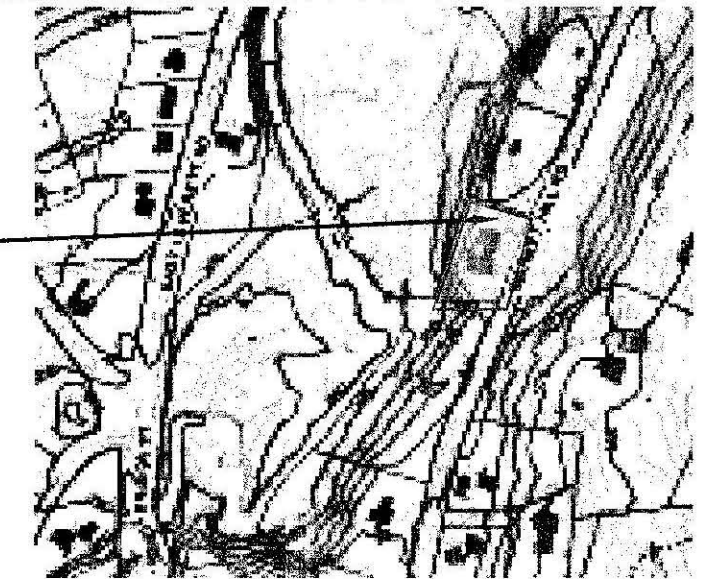
Plot Plan Provided by
HAROLD L. EATON AND ASSOCIATES, INC.

PLOT PLAN
MAP 3C LOT 21
SCALE: 1"=30'
26,429± Sq. Ft.

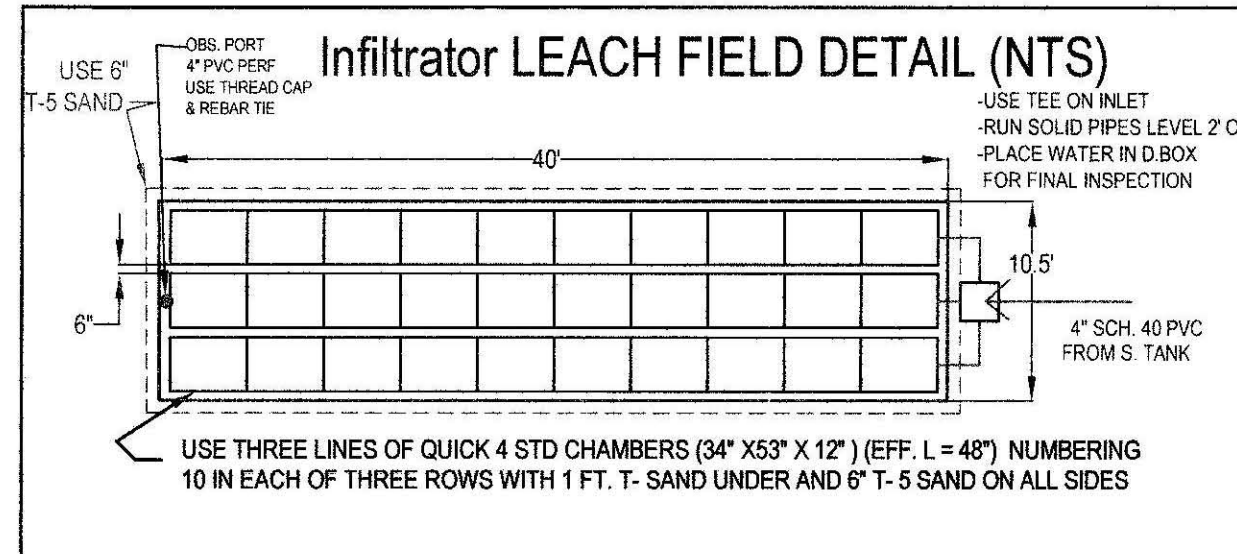
2008 SEPTIC PLAN ADDENDUM

DUE TO LATE REGULATION CHANGES 4-22-2006
ALL NEW SYSTEMS MUST:
1.) INSTALL PVC RISERS OVER D. BOX'S BURIED DEEPER THAN 9" AND PLACE IRON REBAR ON TOP.
2.) 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*
3.) 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.

SUBJECT
SITE
LOCATION

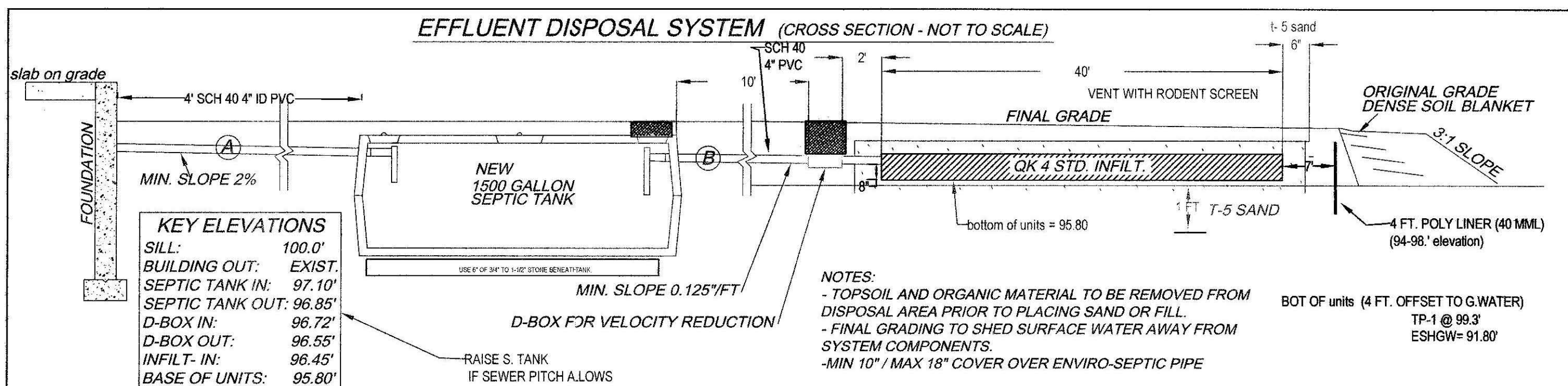
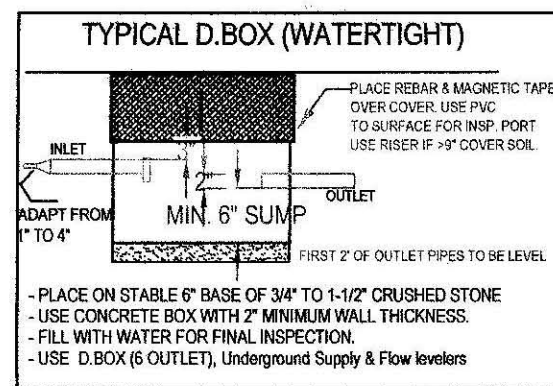
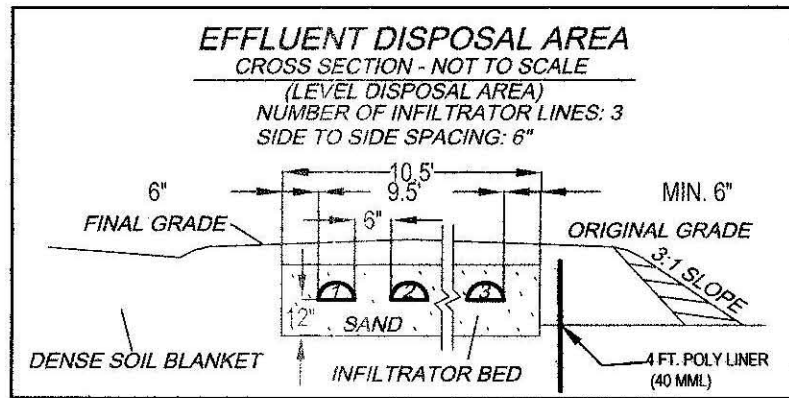
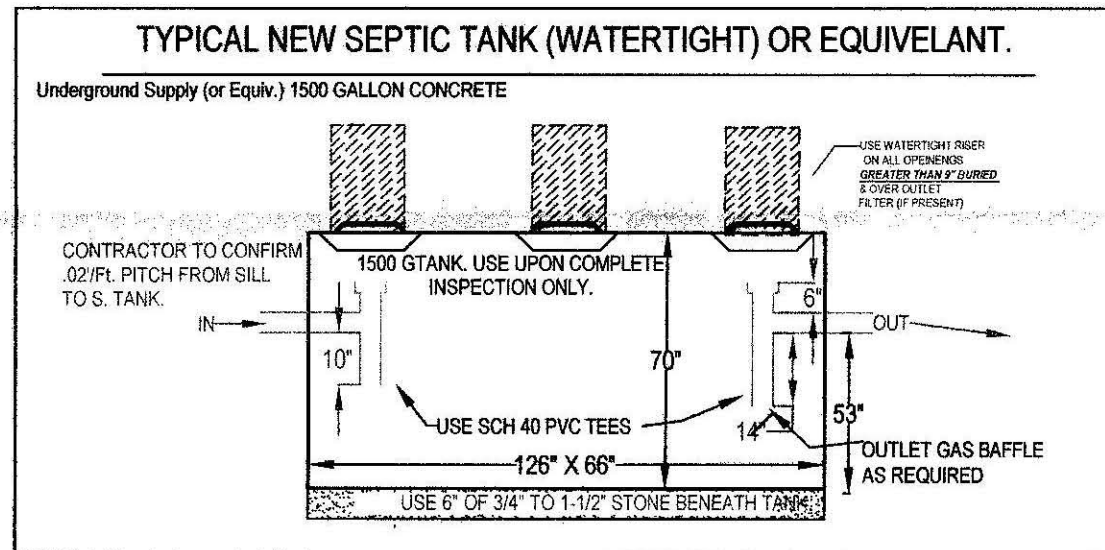


MARKET HILL ROAD



DESIGN NOTES AND CALCULATIONS:

- 3 BEDROOM HOUSE: USE **Quick 4 std. Infiltrator SYSTEM DESIGN** FOR 3 BEDROOMS @ 3 MIN/IN PERC = 120 LF WITH 6" side to side SPACING in T-5 sand.
-Use ONE FIELD: 10.5' WIDE X 40' LONG WITH ONE "bed" units 6" offset
- 120' lf of units => 3 LINES OF quick 4 standard chambers.
- = 120 LINEAR FEET TOTAL WITH 6" side spacing 120 lf x 72 sq/ft = 566 eff. sf.
- SAND BED SIZE: 10.5' W X 40' L = 420 Sq. Ft. (566 eff x .74 gal/sf = 419 gpd) l
- GARBAGE DISPOSAL NOT ALLOWED
- NO OTHER PRIVATE WELLS WITHIN 150 FEET OF SAS (town water)
- NO OTHER WETLANDS WITHIN 100 FEET OF SAS
- USE NEW 1,500 GAL S. TANK WITH FILTER AS NOTED & MAINTAIN 0.02 PITCH FROM SILL TO S. TANK
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.
- INSPECT SCH. 40 TEES / BAFFLES (10" INLET, 14" OUTLET).
- USE (6 Outlet Underground Supply, or Equiv.). D.BOX ONLY. ALL PIPING TO BE WATERTIGHT.
- ALL D. BOX OUTLET PIPES LEVEL FOR FIRST 2', use flow levelers.
NOTE:
- D. BOXES WITH COVERS AND WALLS LESS THAN 2" THICK ARE NOT ALLOWED PER DESIGN.
- USE WATERTIGHT RISER TO SURFACE AT D. BOX AND S. TANK OUTLET.
- USE APPROVED (1 1/2") DBL. WASHED STONE UNDER TANK & D. BOX FOR 6".
- 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 INFILTRATORS 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 SUB TO 36" MIN. AS NEEDED (INSPECTION REQUIRED).
- CLEAR TO BASE OF IB (MIN. 36") UNDER BED PRIOR TO T-5 SAND PLACEMENT.
- EXCAVATE EXISTING SYSTEM AND REMOVE AS NEEDED, MOVE WATER LINE AS NEEDED.
- SOIL EVALUATION BY A. WEISS 11/19/06 (E. Bokina, BOH AGENT).
- DEPTH OF PERC. 46"
- PERC RATE = 5 MIN // IN
- CLASS 1 SOIL RATINGS (SAND, fl. sand)
- NO TREES WITHIN 10' FT. OF NEW LEACH FIELD. USE TITLE V FILL 5' OUT.
- ENGINEER TO INSPECT SUBGRADE, AND FINAL.
- BM=100.00, SILL as noted, CONFIRM PROPER PIPE SLOPES
- USE/INSPECT SCH. 40 PIPE FOR PIPE FROM HOUSE TO NEW OR EXISTING TANK
- GRADE MULCH AND SIEED OVER LEACHFIELD AS NOTED.
- INSTALLATION IN LOW GROUNDWATER/NON FROZEN SOIL SEASON RECOMMENDED.
- USE OBSERVATION PORT NEAR CENTER OF SAND BED HAVE 4" PERFORATED, PVC INSPECTION PORTALS TO BOTTOM OF SAND BED, WITH RISER TO 3" OF SURFACE & THREADED CAP & REBAR MARKER.
*** See Local upgrade approval for slab offset 4 ft. to tank and Property line 1' (310 cmr 15.405)***
(survey attached and abuttler notified by Certified Mail)



TEST PIT LOG:				SOIL EVALUATOR: ALAN WEISS		DATE OF EVALUATION: 11.19.2008				
DEPTH:	HORIZ:	TEXTURE:	PERCENT MOISTURE:	MATERIAL:	DEPTH:	HORIZ:	TEXTURE:	PERCENT MOISTURE:	MATERIAL:	
0' - 10"	A	fsl	1/10 yr 3.3	NO SEEPS	0' - 10"	A	fsl	1/10 yr 3.3	NO SEEPS	
10-26"	Bw	fs	1/10 yr 4.6	SOME STONES	10-26"	Bw	fs	1/10 yr 4.6	SOME STONES	
26-90"	C1	s	2.5 y 4.4	med. LOOSE, WELL SORTED	26-90"	C1	s	2.5 y 4.4	med. LOOSE, WELL SORTED	
90-108"	C2	fsl	2.5 y 4.3	more compact f-crse sand	90-108"	C2	fsl	2.5 y 4.3	more compact f-crse sand	
OXIDES: 90" + 2.5 y 4.1				OXIDES: 90"				2.5 y 4.1		
EHWT: 90" = 91.80'				EHWT: 90"						
STANDING H2O: NOT OBSERVED				STANDING H2O: NOT OBSERVED						
WEEPING: NOT OBSERVED				WEEPING: NOT OBSERVED						
BEDROCK: 108" +				BEDROCK: 108" +						

SEPTIC SYSTEM REPAIR PLAN FOR BETTY SAVERIED
150 MARKET HILL ROAD
AMHERST, MA

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

PH: (413) 323-5957
FAX: (413) 323-4916
e-Mail: ALANWEISS@charter.net

DATE: 12.12.2008
SCALE: 1"=30'

DRAWN BY: ALAN WEISS
REVISED:

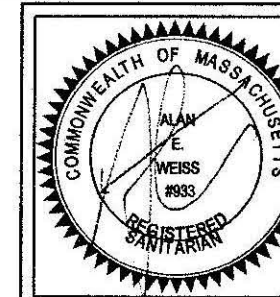
DRAWING NUMBER: 108-3072-1119

NOTE TO HOMEOWNER: MOUNDS, WHERE USED, ARE REQUIRED BY STATE CODE TO MAXIMIZE THE DISTANCE FROM THE BOTTOM OF THE LEACHING FIELD TO THE TOP OF THE ESTIMATED HIGH GROUNDWATER. THIS "SEPARATION" FROM 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". BY SIGNING PERMIT YOU ACKNOWLEDGE THAT COLD SPRING ENVIRONMENTAL CONSULTANTS INC. IS NOT RESPONSIBLE FOR THE AESTHETICS OF FILLED OR MOUNDED SYSTEMS.

NOTE: INSTALLER MUST CONTACT ENGINEER/LOCAL INSP. 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.

ATTENTION INSTALLER!!
CALL DIG SAFE BEFORE YOU DIG!! MASSACHUSETTS STATE LAW CHAPTER 82 SECTIONS 40 - 40E REQUIRE THAT REMARKING 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.

GRAVITY SLOPE SEPTIC SYSTEM OPERATION AND MAINTENANCE NOTES FOR HOMEOWNER.
1.) HAVE TANK PUMPED EVERY 2 YEARS. 2.) MAINTAIN AREA OVER SEPTIC SYSTEM AS GRASSY OR SIMILAR GROUND COVER. 3.) DO NOT PLANT ANY TREES OR DEEP ROOTING SHRUBS WITHIN 10 FEET OF SYSTEM. 4.) USE ONLY LIQUID DETERGENTS & LOW FLOW WASHERS.



Alan Weiss
01/12/09