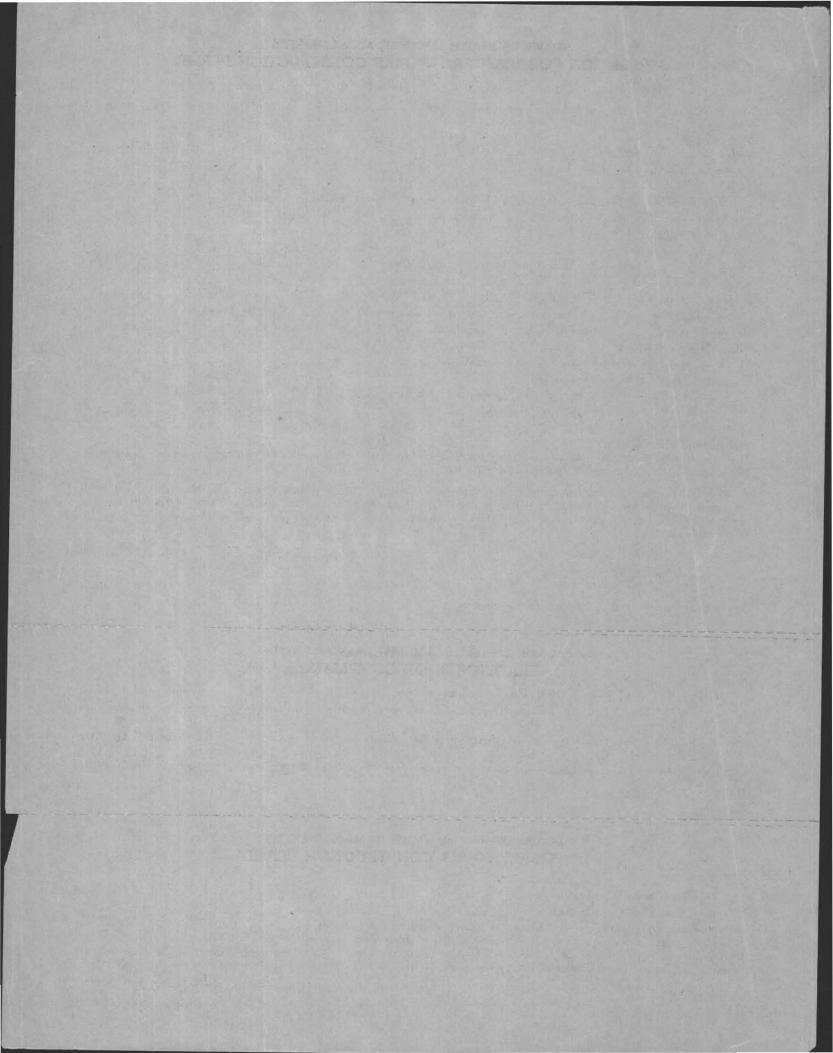
BOARD OF HEALTH, AMHERST, MASSACHUSETTS

FILE COPY

#475

|  | APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT   |                                 |  |
|--|--|---------------------------------|--|
| No. 68-2 Date March 28,1968 Fee 3. Date Rec'd. May 14, 18 By C. E. D. JR   |  |                                 |  |
|  |  |                                 |  |
|  | Application is hereby made for a permit to Construct (X) or Repair ( Y an Individual Sewage Disposal   |                                 |  |
|  | System at: Location—Address Owner Robert Zakaitis Address 9  Address 9   | or Lot No                       |  |
|  | Owner Robert Zakaitis  | 95 Crestview Apts. No. Pleasant |  |
|  | Contractor Ralph K. Farrick Address De   | epot Rd., Whately               |  |
|  |  |                                 |  |
| Type of Building Single Dwelling Dimensions 24 x 46 Ft. Size Lot 6 Acres   |  |                                 |  |
| Dwelling—No. of Bedrooms 4 Expansion Attic (NO Garbage Grinder (Ye)s   |  |                                 |  |
|  | Other No. of persons Showers (   |                                 |  |
| Other fixtures Type of Well ARTESIAN .   |  | >00.01                          |  |
|  | Town Water? Type of Well #RIGSIAN  |                                 |  |
|  | Design Flow gallons per person per day. Total daily flow gallons   |                                 |  |
|  | Septic Tank—Liquid capacity 1000 gallons Dimensions: L W D   |                                 |  |
|  | Disposal Trench—No 5 Width _ 2 Total Length _ 200 Total  | leaching area 700 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  Test Pit No. 1  Test Pit No. 2  minutes per inch  minutes per inch   | - (10.00                        |  |
|  | Percolation Test Results Performed by  | Date _4 \/ 10 - 01              |  |
|  | 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 HARD GRAVEL Depth to Ground Water VOT FOUND  |                                 |  |
|  | 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 aforedescribed individual sewage disposal system in accord-       |  |                                 |  |
|  | ance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The un-  |                                 |  |
|  | dersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this  |                                 |  |
| board of health. Robert & Pakairin march 25, 1960  |  |                                 |  |
| Application Approved by Conseles Robert Defeating March 25, 1968   |  |                                 |  |
|  | Application Approved by Challe ha  | 7-4-62                          |  |
|  | inplacement in the second seco | date                            |  |
|  | 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 nas been constructed in accordance with the provisions of  |                                 |  |
|  | 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, MASSACHUSETT   |                                 |  |
|  |  |                                 |  |
|  | No. 68-2 DISPOSAL WORKS CONSTRUCTION PERMIT  |                                 |  |
|  | No. Permission is hereby granted ROBERT ZACAIT/S to construct (N) or repair () an Individual Sewage Disposal System at   |                                 |  |
|  | Permission is hereby granted   | construct (X) or repair ( ) an  |  |
|  | Individual Sewage Disposal System at   |                                 |  |
|  | as shown on the application for Disposal Works Construction Permit No. 100   |                                 |  |
|  | 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 nuis  |                                 |  |
|  | permit the Board of Health assumes no responsibility for the future operation or m   | annenance of the system.        |  |
|  | CINHIGIO   | Calladol.                       |  |
|  | DATE 41/68   | Board of Health                 |  |
|  |  |                                 |  |



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413-585-8281

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