

NEED TO Re-Inspect #85
 1) LINE FROM TANK TO P BOX NOT IN CENTER
 2) LINES 3 + 4 @ Hill

No. 92-6

FEE Pd 160.00
OK 1856
Pd 4/1/92

Pd. 30.00
Re-Inspection #
Karl's 2667

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF AMHERST

Application for Disposal Works Construction Permit

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

85 MECHANIC ST.
 Location - Address
SUSAN AND NEAL McBRIDE
 Owner
CHUCK WALKER
 Installer

or Lot No.
85 MECHANIC ST.
 Address
KINBALL ST., BELCHERTOWN
 Address
 Size Lot 28,600 Sq. feet

Type of Building
 Dwelling — No. of Bedrooms 4 Expansion Attic (N) Garbage Grinder (N)
 Other — Type of Building RES. No. of persons Showers () — Cafeteria ()
 Other fixtures

Design Flow 55/110 gallons per person per day. Total daily flow 720 gallons.
 Septic Tank — Liquid capacity gallons Length 102" Width 36" Diameter — Depth 64"
 Disposal Trench — No. 1 Width 24" Total Length 30' Total leaching area 720 sq. ft.
 Seepage Pit No. Diameter Depth below inlet Total leaching area sq. ft.

Other Distribution box (✓) Dosing tank (N)
 Percolation Test Results Performed by A. WEISS, RS. #933 Date 4/3/92
 Test Pit No. 1 2 minutes per inch Depth of Test Pit 10' Depth to ground water 7' MOIST
 Test Pit No. 2 minutes per inch Depth of Test Pit 10' Depth to ground water 8' MOIST

Description of Soil C. SAND AND GRAVEL UNDERLAIN BY FINE-MED. SAND.

Nature of Repairs or Alterations — Answer when applicable new leach field.

Agreement:
 The undersigned agrees to install the aforescribed Individual Sewage Disposal System in accordance with the provisions of TITLE 5 of the State Environmental Code — The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by the board of health.

Signed A. E. Weiss, RS. #933 Date 4/1/92
 Application Approved By Paul J. Jurgens, P.E. Date 4/16/92

Application Disapproved for the following reasons:

Permit No. 92-6 Issued 4/16/92 Date

Karl's
for Karl's

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF AMHERST

Certificate of Compliance



THIS IS TO CERTIFY That the Individual Sewage Disposal System constructed () or Repaired (✓) by Charles Walker at 85 Mechanic St. Installer

has been installed in accordance with the provisions of TITLE 5 of The State Environmental Code as described in the application for Disposal Works Construction Permit No. 92-6 dated

THE ISSUANCE OF THIS CERTIFICATE SHALL NOT BE CONSTRUED AS A GUARANTEE THAT THE SYSTEM WILL FUNCTION SATISFACTORY.

DATE 5/8/92 Inspector Paul Jurgens

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF AMHERST

No. 92-6

FEE 160.00
Pd 4/17/92

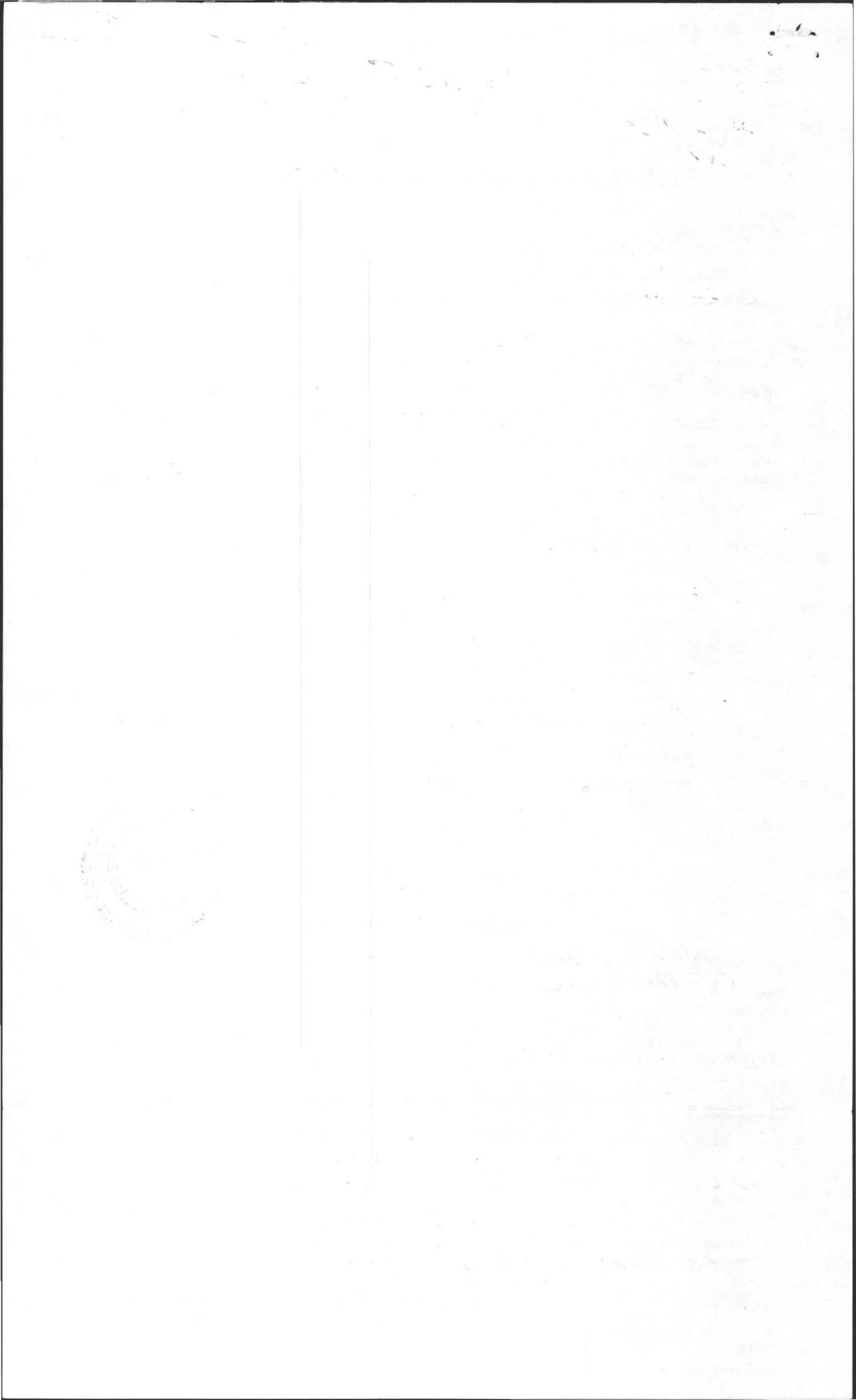
Disposal Works Construction Permit

Permission is hereby granted to Construct () or Repair () an Individual Sewage Disposal System at No. 85 Mechanic Street

as shown on the application for Disposal Works Construction Permit No. 92-6 Dated 4/16/92

DATE 4/16/92 Board of Health

CHECK OR FILL IN WHERE APPLICABLE



10 miles 92-6

TOWN OF AMHERST

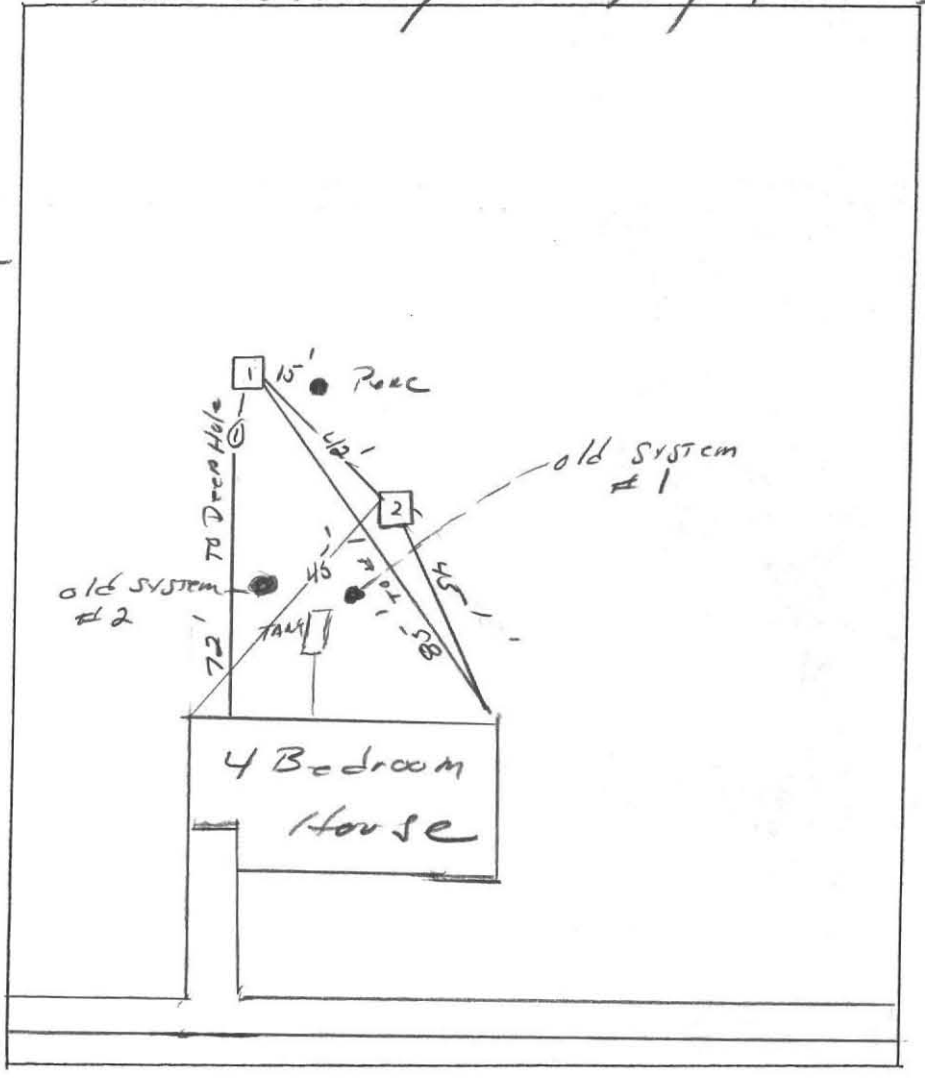
Pd. 160⁰⁰
Neil-Susan
McBride
CK # 1856

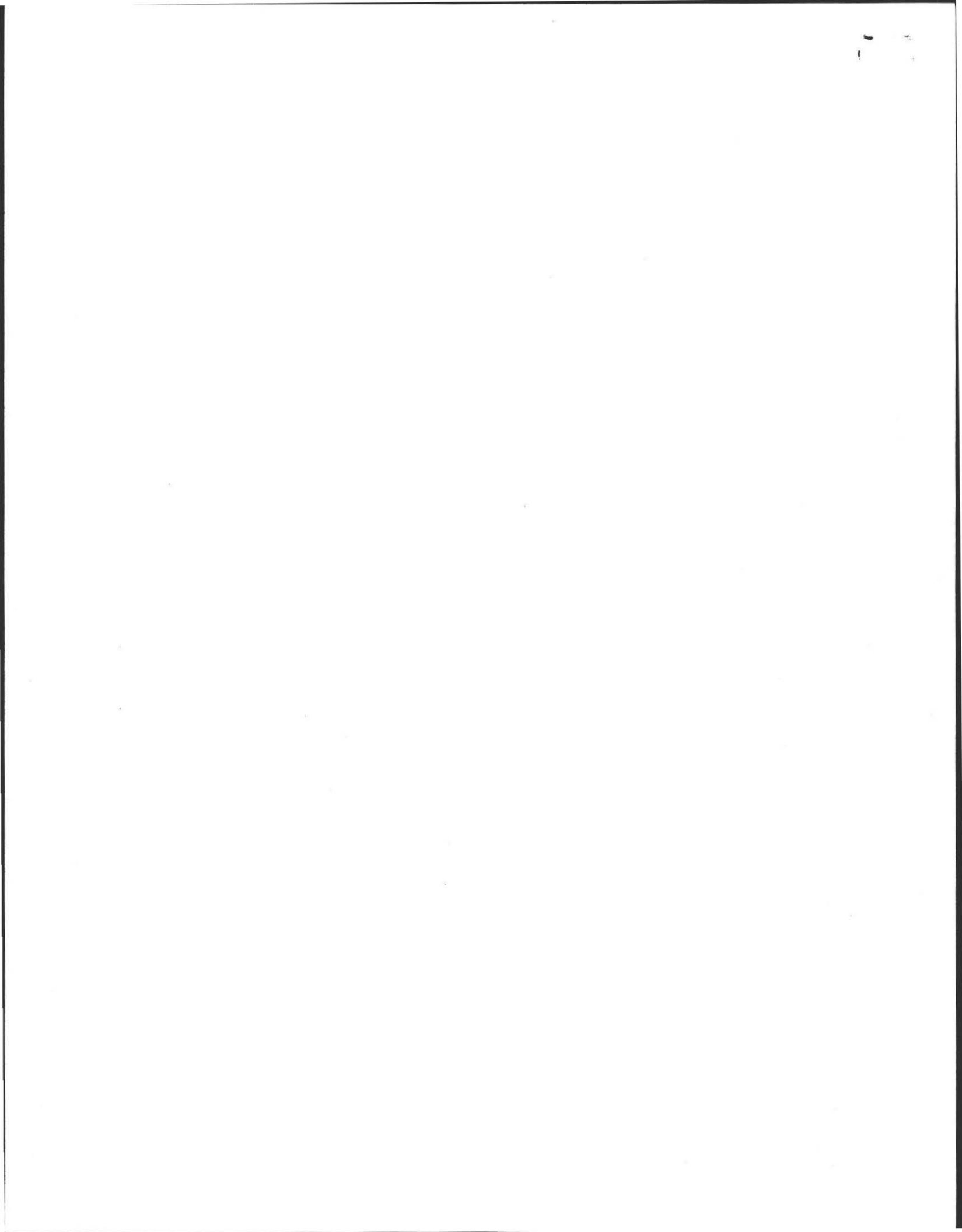
PERC TEST DATA SHEET

DATE 4/7/92 LOCATION 85 Mechanic Street LOT SIZE _____
 OWNER Neil McBride ADDRESS 85 Mechanic St TELE # 253-3680
545-2741
 P.E./RS Alan Weiss FIRM Cold Spring OBSERVED BY David Zarnack
 BACK HOE OPERATOR Charles Walker TELE _____ BENCH MARK _____
 PERC DEPTH 72" PRE SOAK TIME 9101 PERC DEPTH _____ PRE SOAK TIME _____
 TEST CANT
Hold
Water
 RATE (2) RATE _____

#1	#2
TOP 10"	TOP 10
NO SUB	SUB 24
COARSE SAND + GRAVEL 53"	COARSE SAND 50"
FINE TO med SAND moist	FINE-med SAND moist
SAND	SILTY SAND 10'
TOP	TOP
SUB	SUB
TOP	TOP
SUB	SUB

TOWN WATER / NO G/G / 4 Bedroom







COLD SPRING ENVIRONMENTAL CONSULTANTS

- Subsurface Investigations
- 21E Site Investigations
- Pollution Remediation

- Percolation Tests and Septic Designs
- Regulatory Compliance

PERCOLATION TEST DATA

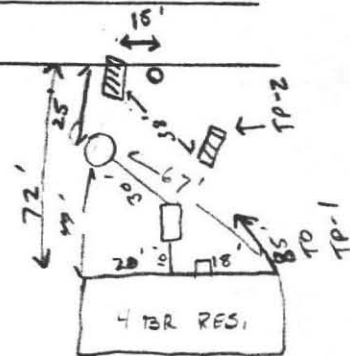
CLIENT SUSAN MCBRIDE

ADDRESS 85 MECHANIC ST., AMHERST

DATE 4/7/92

WEATHER CLOUDS 45°F.

DESCRIPTION OF TEST HOLE LOCATION
(GIVE DESCRIPTION AND PICTURE)



MECHANIC ST.

PERCOLATION DATA

TEST #1	12 INCH	9 INCH	8 INCH	7 INCH	6 INCH	TIME
(9.01)		9.04	9.05	9.06	9.07	

CAN'T HOLD WATER

AVERAGE PERC RATE = 2 MIN/INCH

DEPTH OF SMALL PERC TEST 72 IN.

TEST HOLE LOG

TP-1	TP-2
0-- 0-10"	10cm 10-10"
2'-- 10" 253"	10-24" - SUB
4'-- 53" 2753"	24" 250' C. SAND
6'-- 53" 2753"	50" F. M. SAND
8'-- 53" 2753"	27' SAND
10'-- 8'-moist	7' SILTY F. SAND
12'--	

* NOTE USE FIELD
* MOIST AT 7'

(NOTE: WATER SEEP @ None)

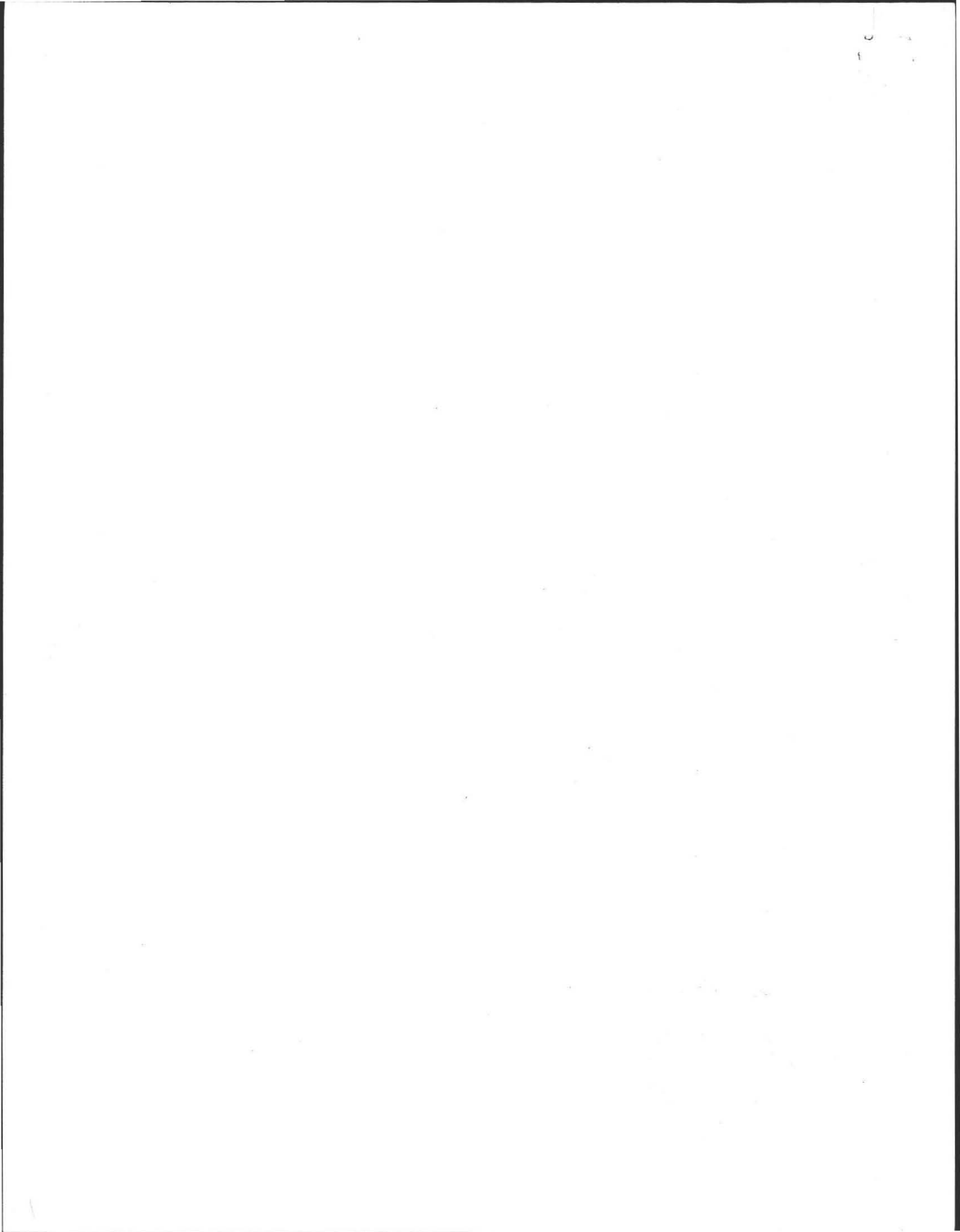
CLASSIFICATION OF PERCABLE MATERIAL: 10"-53"

NAMES OF PERSONS PRESENT: D. ZAROZINSKY

AL E. WEISS
 ALAN E. WEISS M.S., R.S. # 933
 HYDROGEOLOGIST

BARBARA B. WEISS
 GEOLOGIST





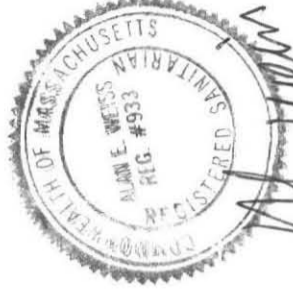
TEST PIT LOGS

TP-1 (94.00)	MAT'L	TP-2 (97.10 EL)
0-10"	← LOAM →	0-10"
10"-52"	← SUB-SOIL → ← C. SAND → ← GRAVEL →	10"-24" 24"-29.50"
52"-120"	← WELL SORTED F.-M. SAND →	50"-7' MOIST AT 7'
MOIST AT 8'	← SILTY F SAND →	7"-10' (120")

(A. WEISS, 4/7/92)

DESIGN NOTES

1. DESIGN BASED ON PERC OF 2 MIN IN, 4/7/92
2. DESIGN CRITERIA $4.8 \times 110 \frac{\text{GAL}}{\text{DAY}} \times 125 = 550 \frac{\text{GAL}}{\text{DAY}}$
3. ONE $30' \times 24'$ BED $\times 1.0 \frac{\text{GAL}}{\text{SQ. FT.}} \Rightarrow 750 \frac{\text{GAL}}{\text{DAY}}$
4. ASSUME 4 PIPES IN BED, 6' SPACING, 30' LONG.
5. NO GARBAGE DISPOSAL ALLOWED.
6. USE EXISTING TANK IF BARRELS IN-RACE AND STRUCTURALLY SOUND.
7. OUTLET PIPES FROM D BOX LEVEL FOR AT LEAST 2'
8. NO KNOWN WELLS IN AREA OF PUBLIC WATER.
9. SYSTEM INSTALLATION IN ACCORDANCE WITH TITLE V. AND AMHERST B.O.M. RULES.



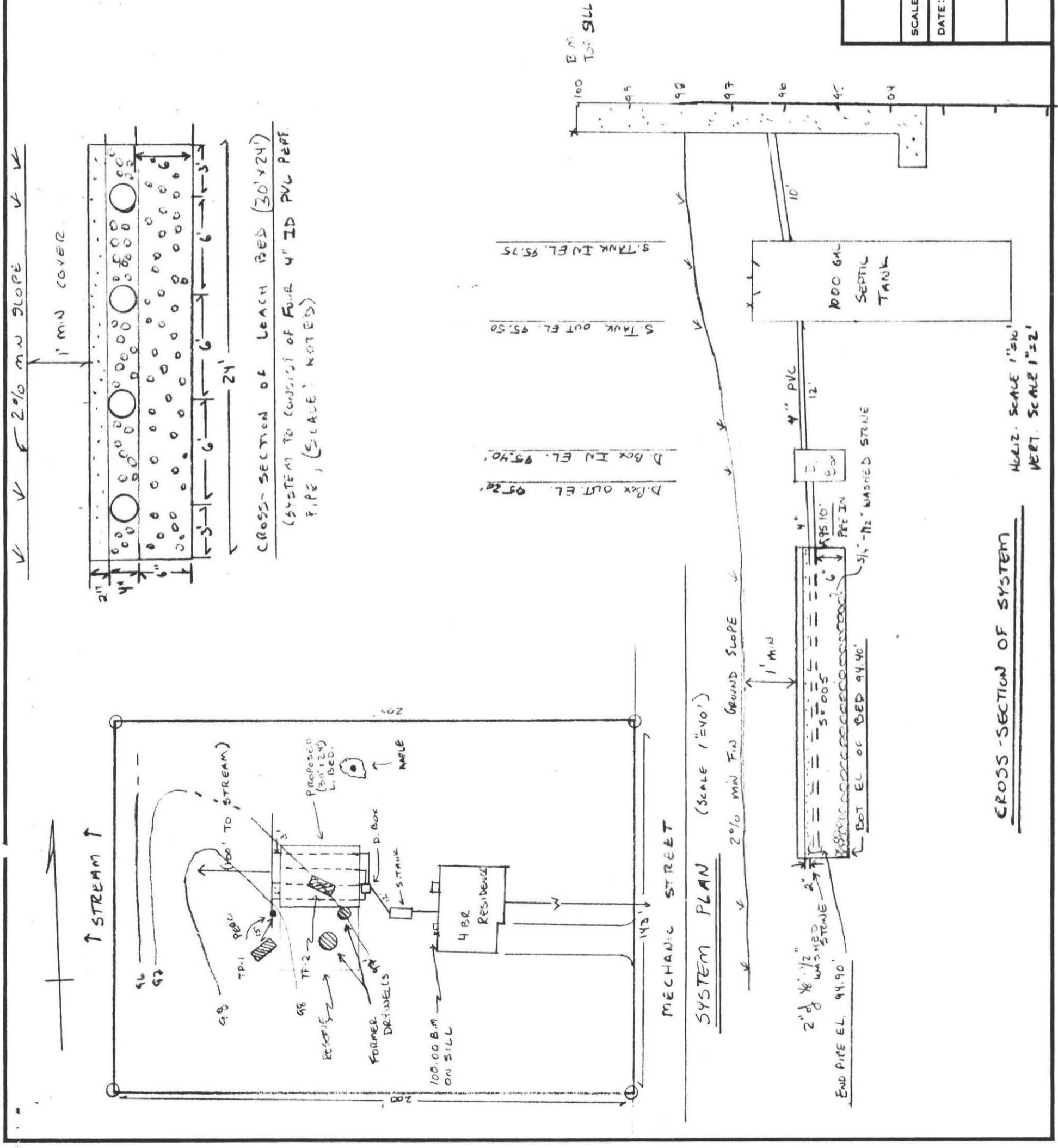
SUSAN AND NEAL McBRIDE
85 MECHANIC STREET
AMHERST, MA

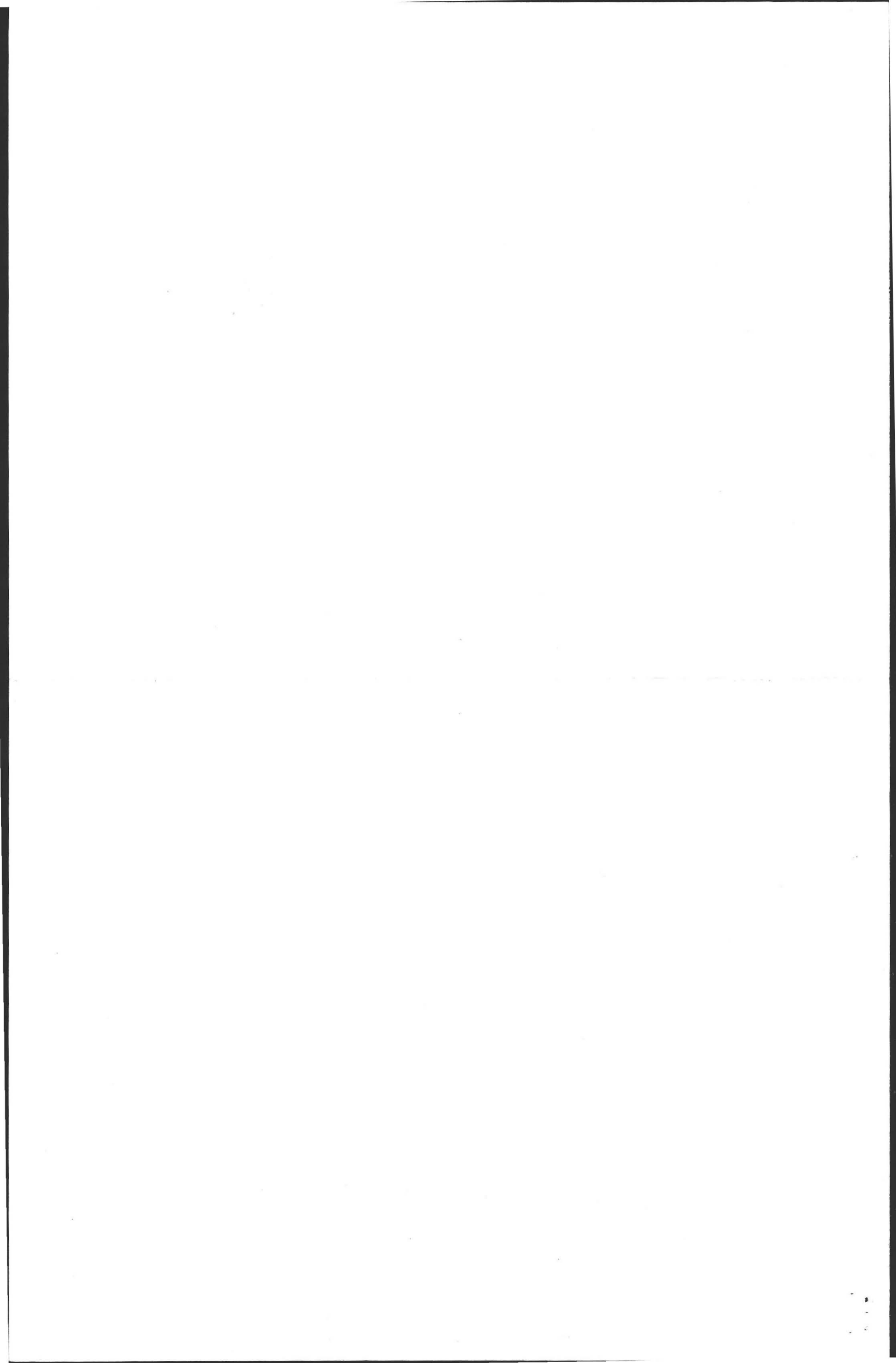
SCALE: NOTED
DATE: 4/14/92

APPROVED BY: AW

SEPTIC SYSTEM REPAIR PLAN

COLD SPRING ENVIRONMENTAL INC.
BELCHERTOWN, MA (413) 323-5957
DRAWING NUMBER 92-156-0331





BOARD OF HEALTH
TOWN OF AMHERST, MASSACHUSETTS

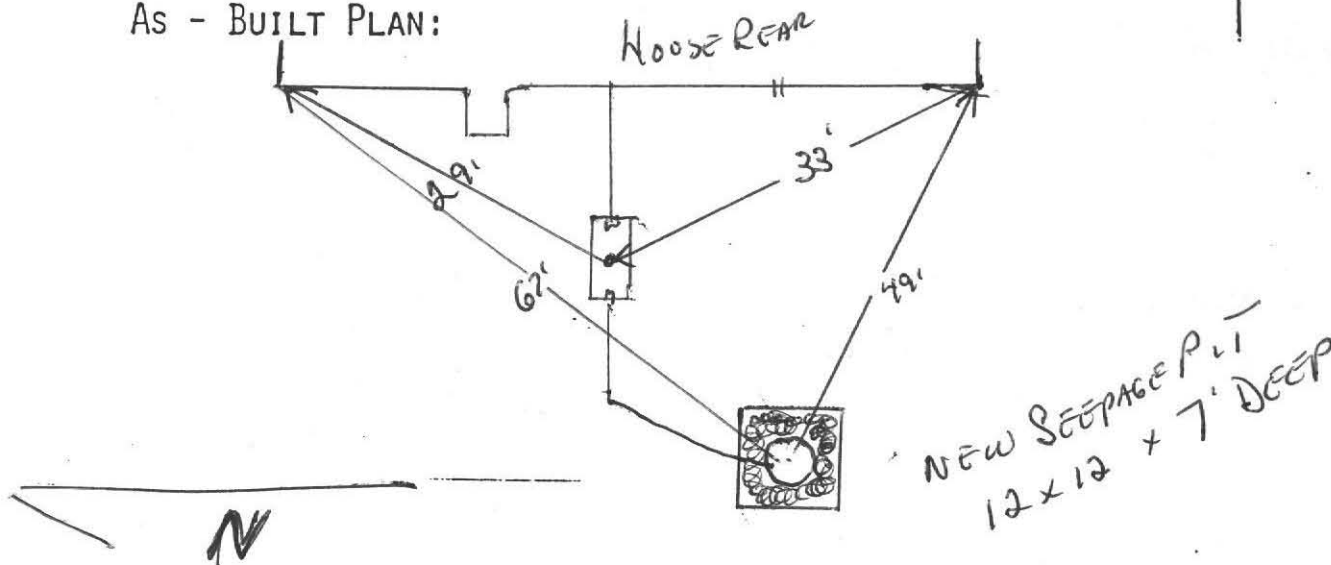
Repair

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner NEAL Mc BRIDE Address 85 MECHANIC ST
Installer J. WANCYK RIVER DE HAAR Address RIVER DE HAAR
Date Installation Inspected and Approved 7-12-84
Description of System: Tank Capacity: EXISTING - 1000 GAL TANK
Leach Field () Bed () Seepage Pit (X) Square Feet: 484
Garbage Grinder Yes () No (X) No. Bedrooms: 4 No. People 8

AS - BUILT PLAN:



PROPER MAINTENANCE OF YOUR PRIVATE SEWAGE DISPOSAL SYSTEM

1. This system must be inspected periodically and the tank pumped out at an interval not to exceed 3 years.
2. For your protection sanitary pumpers are licensed by the Amherst Board of Health.
3. Regular pumping is crucial to avoid early failure and costly repairs of the system.
4. DO NOT dispose into the system such items as rags, string, sanitary napkins, coffee grounds as they can cause it to clog and fail.
5. Further information can be obtained by contacting your Health Department at 253-7077.

100

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

No. 67-1 Date JAN 3, 1967 Fee 3.00 Date Rec'd. 1-3-67 By CEJ

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

Location—Address 85 MECHANIC ST or Lot No. _____

Owner Edward J. Miller Address No Pleasant St.

Contractor _____ Address _____

Type of Building _____ Dimensions _____ Size Lot 143 x 200

Dwelling—No. of Bedrooms 4 Expansion Attic NO Garbage Grinder NO

Other _____ No. of persons _____ Showers () _____

Other fixtures _____

Town Water? YES Type of Well _____

Design Flow 75 gallons per person per day. Total daily flow _____ gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L _____ W _____ D _____

Disposal Trench—No. _____ Width _____ Total Length _____ Total leaching area _____ sq. ft.

Disposal Bed—No. _____ Diameter _____ Depth below inlet _____ Total leaching area _____ sq. ft.

Dry Well—No. 1 Diameter 6 Depth below inlet 8' Dimensions: 6' x 6' x 8'

Other: Distribution box () No. _____ Dosing tank () _____

(Depth of Soil Line Below finished grade at foundation _____)

Percolation Test Results Performed by Not Done Date 1-3-67

Test Pit No. 1 2 minutes per inch Depth of Test Pit _____

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

Description of Soil Coarse gravel + sand Depth to Ground Water Not Found

Will disposal area be filled? No Cut down? No

(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 CE Drake Edward J. Miller Owner or builder date 1-3-67
 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

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. 67-1 Permission is hereby granted Edward J. Miller to construct (X) or repair () an Individual Sewage Disposal System at MECHANIC ST as shown on the application for Disposal Works Construction Permit No. 67-1

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 1-3-67 CE Drake Board of Health

