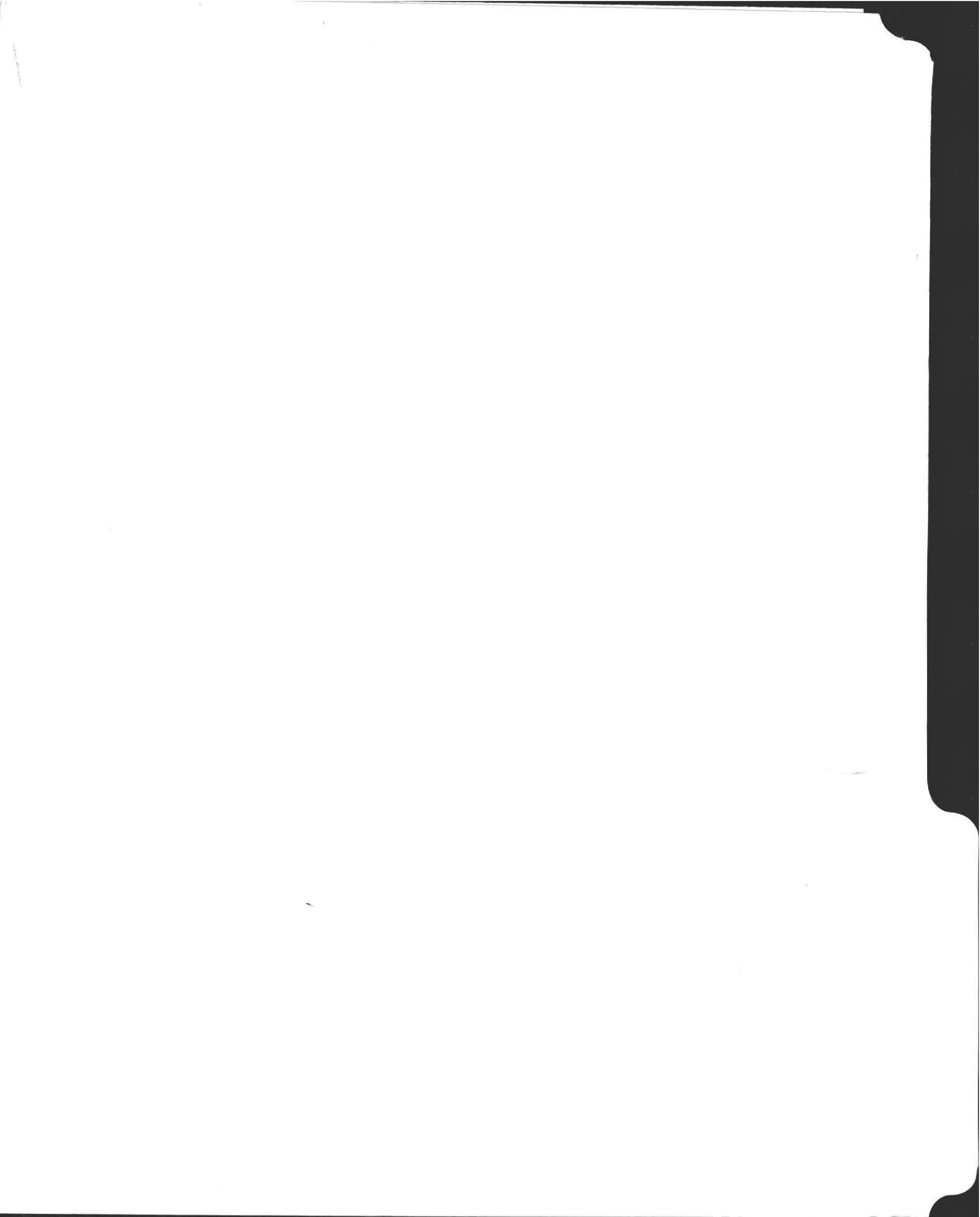


483 Montague Rd.
David + Nancy Patterson

Perc Test 11/30/04



No. 90-9 Revised

#483

FEE 30 Revision

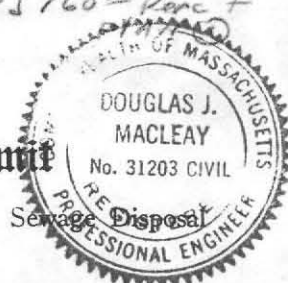
PS 160⁰² Permit

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 (x) an Individual Sewage Disposal System at:

483 MONTAGUE ROAD Location - Address
DAVID & NANCY PATTERSON Owner
WILLIAM CLARK Installer

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

Design Flow 55 gallons per person per day. Total daily flow 440 gallons.
Septic Tank - Liquid capacity 1000 gallons Length 10'-0" Width 5'-0" Diameter - Depth 8'-4"
Disposal Trench - No. 2 Width 2.5' Total Length 65' Total leaching area 540 sq. ft.
Seepage Pit No. Diameter Depth below inlet Total leaching area sq. ft.

Percolation Test Results Performed by NAC LEAY ASSOCIATES Date 6/5/90
Test Pit No. 1 2 minutes per inch Depth of Test Pit 11'-6" Depth to ground water 10'-4"
Test Pit No. 2 2 minutes per inch Depth of Test Pit 10'-6" Depth to ground water 9'-10"

Description of Soil 10'-9" LOAM; 9'-54" GRAVEL; MEDIUM SAND 54"-138"
2'-0"-7" LOAM; 7"-50" GRAVEL W/STONES; 50"-126" MEDIUM SAND W/STONES

Nature of Repairs or Alterations - Answer when applicable

Agreement: The undersigned agrees to install the aforescribed Individual Sewage Disposal System in accordance with the provisions of TITLE 5 of the State Sanitary 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 [Signature] Date 7/11/90
Application Approved By [Signature] Date 7/12/90
Application Disapproved for the following reasons: Health Dept.

Permit No. 90-2 Revised Issued 7/12/90

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 (x) by W. W. Clark Installer at 483 MONTAGUE ROAD

has been installed in accordance with the provisions of TITLE 5 of The State Sanitary Code as described in the application for Disposal Works Construction Permit No. 90-2 Revised dated 7/12/90

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

DATE Aug 8, 1990 Inspector [Signature] 8/3/90 P.E. 31203

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

TOWN OF Amherst

No. 90-9 Revised Disposal Works Construction Permit FEE 30

Permission is hereby granted W. W. Clark to Construct () or Repair (x) an Individual Sewage Disposal System at No. 483 MONTAGUE ROAD

as shown on the application for Disposal Works Construction Permit No. 90-9 Revised Dated 7/12/90
DATE 7/12/90 Board of Health Health Dept.

CHECK OR FILL IN WHERE APPLICABLE

1873

Journal of the [illegible]

[illegible]

[illegible]

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TITLE V FEES

Owner: DAVID PATTERSON

Site: 483 MONTAGOE RD

Percolation Test: Per Lot

① Date: 6/5/90

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

Disposal Works Construction Permit

Plan Review Date _____

Final Inspection Date _____

Subsequent Plan Review

Date _____

Date _____

Date _____

Reinspection of Installation

Date _____

Date _____

Date _____

JUL 9 1990

100⁰ Perc Test
P# CH1214

TOWN OF AMHERST

PERC TEST DATA SHEET

DATE 6/5/90 LOCATION 483 MONTAGUE RD LOT SIZE _____

OWNER David Patterson ADDRESS 483 MONTAGUE TELE # 549-5987

P.E./RS Doug Mac Leay FIRM MacLeay Assoc OBSERVED BY David Zarcow
625-9774

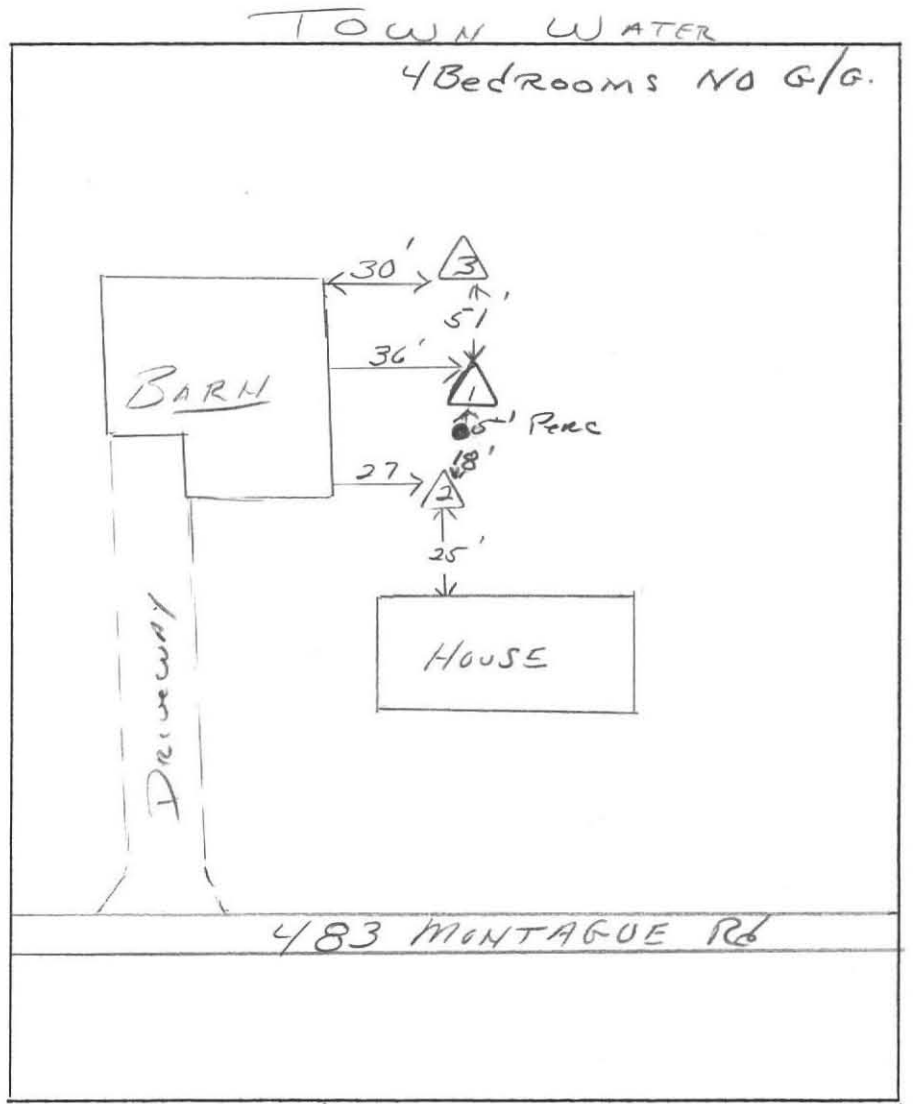
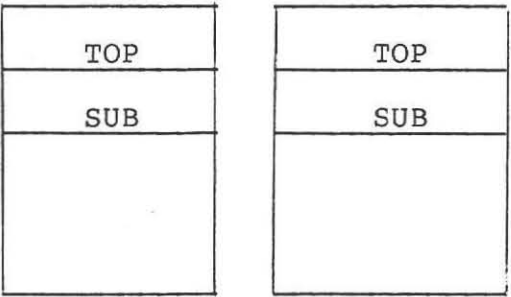
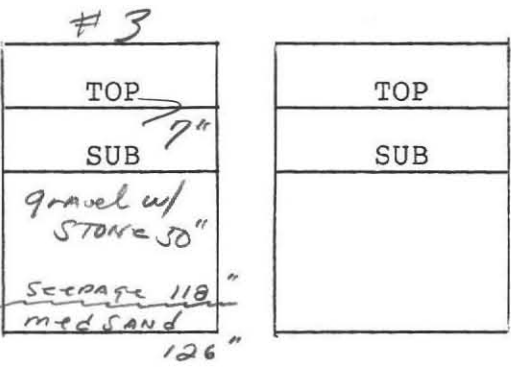
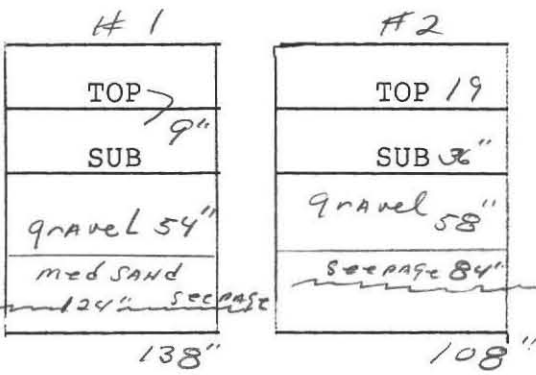
BACK HOE OPERATOR W.W. Clark BENCH MARK _____

PERC DEPTH 30 PRE SOAK TIME _____ PERC DEPTH _____ PRE SOAK TIME _____

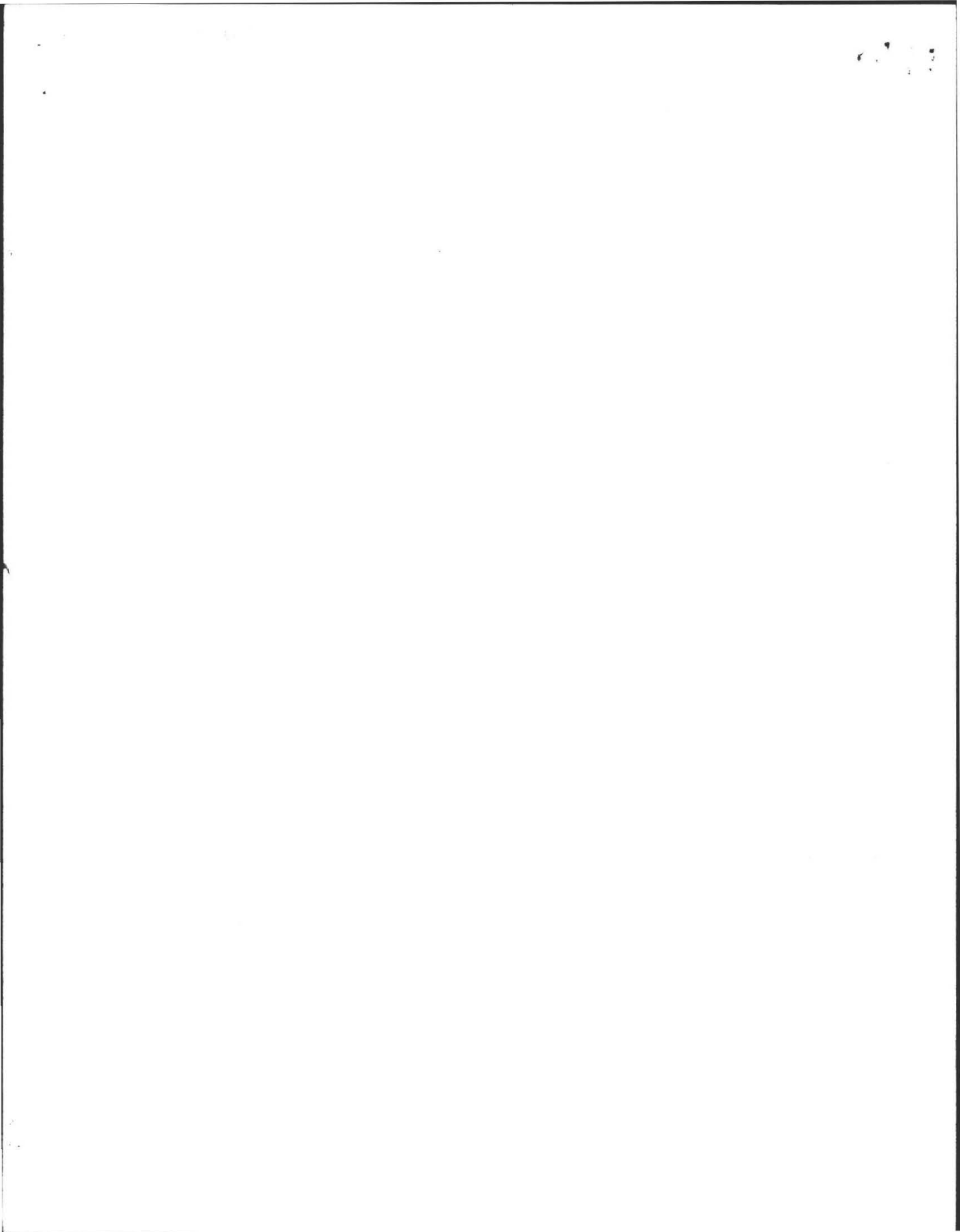
TEST _____

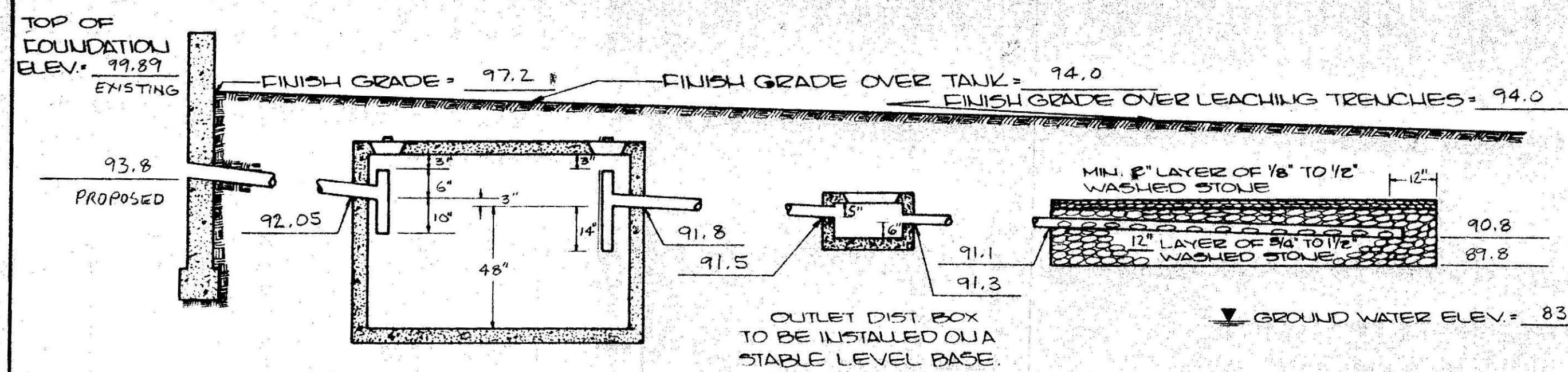
CANT Hold

RATE (2) RATE _____



Doug Mac Leay
102 Bridge St
Shelburne Falls 01378

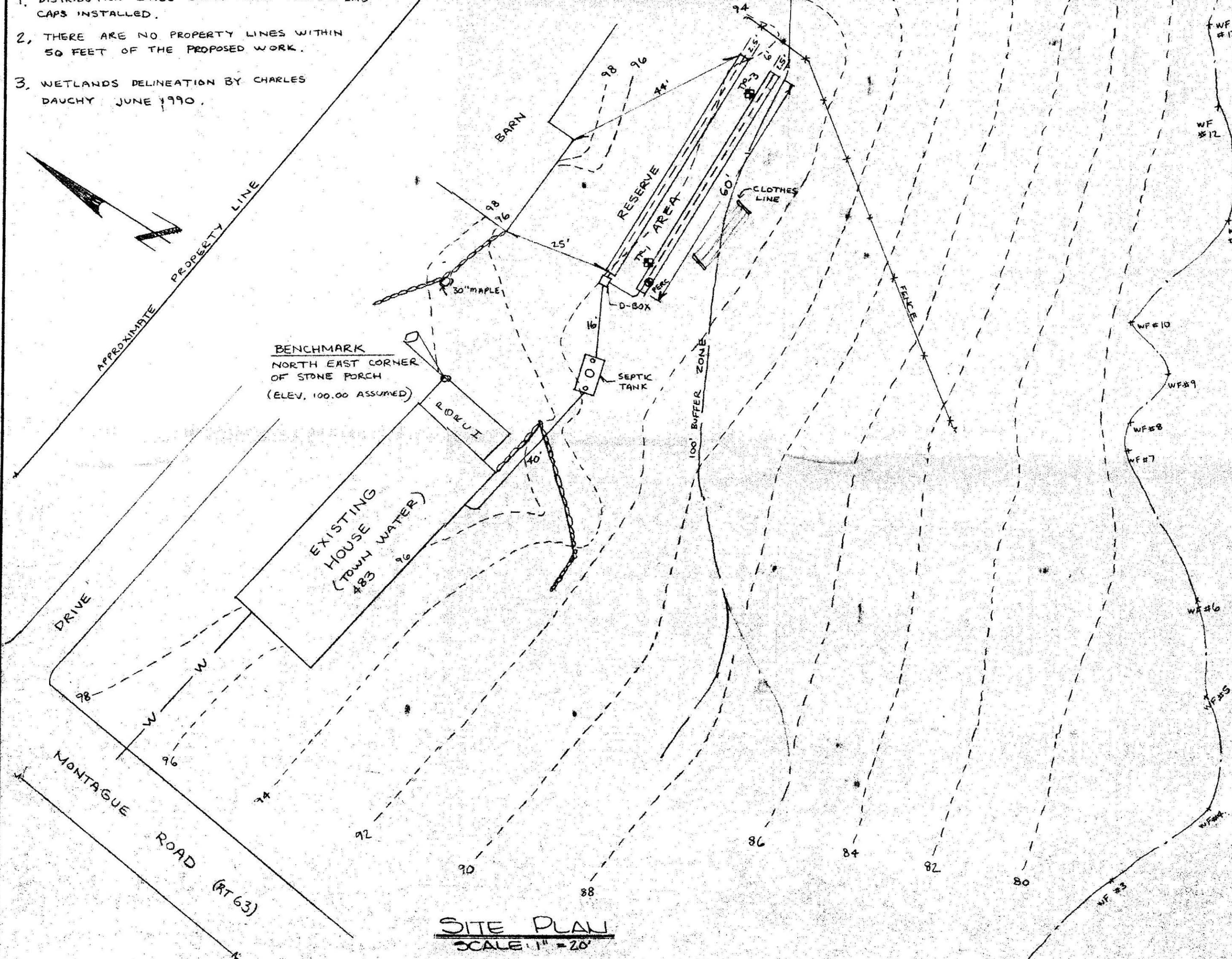




1250 GAL CONCRETE SEPTIC TANK
 LENGTH 10'-0" WIDTH 5'-0" DEPTH 5'-4"
 TANK TO BE INSTALLED ON A LEVEL STABLE BASE.

- NOTES**
1. DISTRIBUTION LINES SHALL HAVE PLASTIC END CAPS INSTALLED.
 2. THERE ARE NO PROPERTY LINES WITHIN 50 FEET OF THE PROPOSED WORK.
 3. WETLANDS DELINEATION BY CHARLES DAUCHY JUNE 1990.

TYPICAL SYSTEM PROFILE
 NOT TO SCALE



SITE PLAN
 SCALE: 1" = 20'

TEST PIT DATA
 INSPECTOR DAVE ZAROZINSKI
 DATE JUNE 5, 1990

TEST PIT #1		TEST PIT #3	
ELEV. TOP =	93.6	ELEV. TOP =	93.6
ELEV. H ₂ O =	83.3	ELEV. H ₂ O =	83.8
PERC. RATE =	2 MIN./INCH	PERC. RATE =	2 MIN./INCH

TEST PIT #1	ELEV.	TEST PIT #3	ELEV.
LOAM	9"	LOAM	7"
GRAVEL	54"	GRAVEL W/ STONES	50"
MEDIUM SAND	124"	MEDIUM SAND W/ STONES	118"
H ₂ O	124"	H ₂ O	118"
	elev. 82.1		elev. 83.1

DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE
 DESIGN FLOW 110 GAL./DAY./BEDROOM
 TOTAL DESIGN FLOW 440 GAL./DAY.
SEPTIC TANK
 440 GALS. x 150% = 660 GALS. DESIGN CAPACITY
 USE 1250 GALLON SEPTIC TANK
LEACHING TRENCHES
 SIDEWALL:
 2 x 60' LENGTH x 1.0' DEPTH = 120 SQ. FT.
 120 SQ. FT. x 2.5 GAL./SQ. FT. = 300 GAL. LEACHING.
 BOTTOM:
 60' LENGTH x 2.5' WIDTH = 150 SQ. FT.
 150 SQ. FT. x 1.0 GAL./SQ. FT. = 150 GAL. LEACHING
 TOTAL NO. OF LEACHING TRENCHES = 2
 TOTAL LEACHING AREA = 540 SQ. FT.
 TOTAL LEACHING CAPACITY = 900 GAL./DAY.

GENERAL NOTES:

1. 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM, EXCEPT WHERE OTHERWISE NOTED.
2. 4" PERFORATED PIPE TO BE USED IN LEACHING TRENCHES.
3. 1250 GAL. REINFORCED CONCRETE SEPTIC TANK AND CONCRETE DISTRIBUTION BOX.
4. AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
5. ELEVATIONS BASED ON ASSUMED DATUM.
6. UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 8 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
7. ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE ENGINEER.
8. THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- EXISTING CONTOURS
- - - - - PROPOSED CONTOURS
- W --- WATER LINE
- o --- WELL
- --- TEST PIT LOCATION
- --- SEPTIC TANK
- --- DISTRIBUTION BOX
- 4" PERFORATED PIPE
- 4" PIPE TIGHT JOINTS (P.V.C.)
- 4" CAST IRON PIPE 1 7/8" DM 6 FOOT SEPARATION DM

SCALE: AS SHOWN	APPROVED:	REV. DATE BY DESCRIPTION APPD
DRN BY: BR	<i>Douglas J. Macleay</i>	SEWAGE SYSTEM DESIGN IN AMHERST, MA.
CHECKED: DP		FOR: DAVE & NANCY PATTESON
		DATE: JUNE 27, 1990 JOB NO. 90-090
MACLEAY ASSOCIATES PO. BOX 32, COLRAIN, MA 01340 OFFICE: 102 BRIDGE ST., SHELBURNE FALLS, MA 01370		