POTWINE Unknowns

FOUNINE LANE

? 125 Potwine Ln

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. _____ Date _____ Fee _____ Date Rec'd. _____ By _____

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

Location—Address Potwine Lane or Lot No. _____

Owner Robert W. Adair Address 125 Potwine Lane

Contractor _____ Address _____

Type of Building Dwelling Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic (✓) Garbage Grinder (✓)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? YES Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 500 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. 1 Width 15 Total Length 26 Total leaching area 390 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 Kendall G. Pond Date April, 1971

Test Pit No. 1 2½ minutes per inch Depth of Test Pit 30"

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

Description of Soil SP-SW Depth to Ground Water > 8.0'

Will *disposal area* be filled? No 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 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.

_____ Owner or builder _____ date

Application Approved by [signature] 4/28/71 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. 71-

Permission is hereby granted ROBERT ADAIR to construct (X) or repair ( ) an Individual Sewage Disposal System at POTWINE LANE

as shown on the application for Disposal Works Construction Permit No. _____

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 4/28/71. [signature] Board of Health

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. _____ Date _____ Fee _____ Date Rec'd. _____ By _____

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

Location—Address Potwine Lane or Lot No. _____

Owner Robert W. Adair Address 125 Potwine Lane

Contractor _____ Address _____

Type of Building Dwelling Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic (2) Garbage Grinder (✓)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? YES Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 500 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. 1 Width 15 Total Length 26 Total leaching area 390 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 Kendall G. Pond Date April, 1971

Test Pit No. 1 2½ minutes per inch Depth of Test Pit 30"

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

Description of Soil SP-SW Depth to Ground Water > 8.0'

Will *disposal area* be filled? No 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 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.

_____ Owner or builder _____ date

Application Approved by [signature] 4/28/71 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. 71-

Permission is hereby granted ROBERT ADAIR to construct (X) or repair ( ) an Individual Sewage Disposal System at POTWINE LANE

as shown on the application for Disposal Works Construction Permit No. _____

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 4/28/71 [signature]

Board of Health

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. _____ Date _____ Fee _____ Date Rec'd. _____ By _____

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

Location—Address Potawine Lane or Lot No. _____

Owner Robert W. Adair Address 125 Potawine Lane

Contractor _____ Address _____

Type of Building Dwelling Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic (2) Garbage Grinder (✓)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? Yes Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 500 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. 1 Width 15 Total Length 26 Total leaching area 390 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 Kendall G. Pond Date April 1971

Test Pit No. 1 3½ minutes per inch Depth of Test Pit 30"

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

Description of Soil SP-SW Depth to Ground Water >8'

Will *disposal area* be filled? No 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 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.

_____ Owner or builder _____ date

Application Approved by [signature] 4/21/71 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. 71-

Permission is hereby granted Robert Adair to construct (✓) or repair ( ) an Individual Sewage Disposal System at (1) Potawine Lane

as shown on the application for Disposal Works Construction Permit No. _____

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 4/21/71 [signature] Board of Health

BOARD OF HEALTH

TOWN OF AMHERST, MASSACHUSETTS

11 FOXGLOVE

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner ROBERT ADAIR Address POTWINE DR

Installer ROBERT ADAIR Address POTWINE LA.

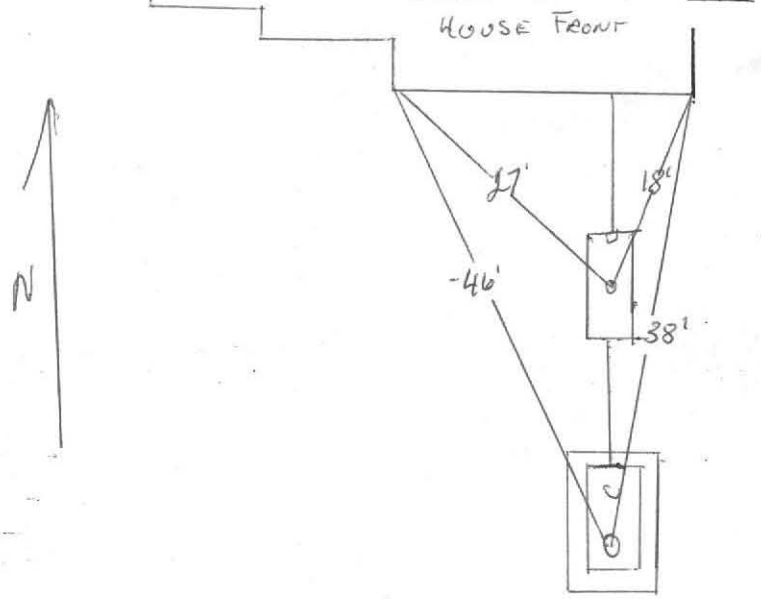
Date Installation Inspected and Approved 3-28-85

Description of System: Tank Capacity: 1500

Leach Field ( ) Bed ( ) Seepage Pit (X) Square Feet: 17

Garbage Grinder Yes (X) No ( ) No. Bedrooms: 3 No. People 6

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.

Town of

AMHERST Massachusetts

AMHERST HEALTH DEPARTMENT
(413) 253 - 7077

February 15, 1984

Mr. Robert Adair
89 Potwine Lane
Amherst, MA 01002

Dear Mr. Adair:

This will confirm my conversation with you on two occasions recently regarding the installation of a leaching facility to serve the house at 125 Potwine Lane, Amherst.

It was agreed that an 800-1000 square foot leach bed would be constructed in an area south (rear) of the dwelling toward the east end of the building. The existing septic tank would be allowed to be utilized and that the installation would be considered as a "repair" of an existing system.

Should this information be inaccurate please feel free to contact me.

Very Truly Yours,

Charles E. Drake
Sanitarian

CED/mw

? 231 MIDDLE ST.

No. 83-20 FEE $90

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town OF Amherst

COMMONWEALTH OF MASSACHUSETTS FREDERICK J. FILIOS, R.S. 688

Application for Disposal Works Construction Permit

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

Potwine & Middle St — Location - Address
5 — or Lot No.
Ress Building Corp Ltd. — Owner
Rt. 66 Westhampton Mass — Address
KARLS EXCAVATING — Installer
RIVER DR. HADLEY — Address

Type of Building — Size Lot 29,500 ± Sq. feet

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 660 gallons.

Septic Tank — Liquid capacity 1500 gallons Length ..... Width ..... Diameter ..... Depth .....

Disposal ~~Trench~~ Bed — No. 1 Width 24' Total Length 42' Total leaching area 1008 sq. ft.

Seepage Pit No. ..... Diameter ..... Depth below inlet ..... Total leaching area ..... sq. ft.

Other Distribution box (✓) Dosing tank ( )

Percolation Test Results Performed by Mr O'Keefe Date Dec 1975

Test Pit No. 1 11 minutes per inch Depth of Test Pit ..... Depth to ground water 78"

Test Pit No. 2 11.5 minutes per inch Depth of Test Pit ..... Depth to ground water .....

Description of Soil Enclosed

Nature of Repairs or Alterations — Answer when applicable .....

Agreement:

The undersigned agrees to install the aforedescribed 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.

X Signed Robert E Shrader 8/16/83 Date

Application Approved By ..... Date

Application Disapproved *for the following reasons:* .....

Permit No. 83-20 Issued Sept. 16-83 Date

CHECK OR FILL IN WHERE APPLICABLE

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

OF .....

Certificate of Compliance

THIS IS TO CERTIFY, That the Individual Sewage Disposal System constructed ( ) or Repaired ( ) by ..... Installer

at .....

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. ..... dated .....

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

DATE ..... Inspector .....

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

No. 83-20 Town OF Amherst FEE $90

Disposal Works Construction Permit

Permission is hereby granted Ress Const - Karls Excavating

to Construct (X) or Repair ( ) an Individual Sewage Disposal System

at No. Lot 5 - Corner Middle - Potwine Street

as shown on the application for Disposal Works Construction Permit No. 83-20 Dated 9-16-83

Board of Health

DATE 9-16-83

FORM 1255 HOBBS & WARREN, INC., PUBLISHERS

No..... Fee.....

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town of Amherst

Application for Disposal Works Construction Permit

COMMONWEALTH OF MASSACHUSETTS FREDERICK W. FILIOS, R.S. 688

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

Potwine + Middle St — Location - Address

5 — Lot No.

Ress Building Corp Ltd. — Owner

Rt 66 Westhampton Mass — Address

Installer — Address

Type of Building — Size Lot 29,500 ± Sq. feet

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 660 gallons.

Septic Tank — Liquid capacity 1500 gallons Length ..... Width ..... Diameter ..... Depth .....

Disposal ~~Trench~~ Bed — No. 1 Width 24 Total Length 42' Total leaching area 1008 sq. ft.

Seepage Pit No. ..... Diameter ..... Depth below inlet ..... Total leaching area ..... sq. ft.

Other Distribution box (✓) Dosing tank ( )

Percolation Test Results Performed by Mr O'Keefe Date Dec 1975

Test Pit No. 1 11 minutes per inch Depth of Test Pit ..... Depth to ground water 78"

Test Pit No. 2 11.5 minutes per inch Depth of Test Pit ..... Depth to ground water .....

Description of Soil Enclosed

Nature of Repairs or Alterations — Answer when applicable .....

Agreement:

The undersigned agrees to install the aforedescribed 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 ..... Date .....

Application Approved By ..... Date .....

Application Disapproved *for the following reasons:* .....

Date .....

Permit No. ..... Issued ..... Date

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

OF .....

Certificate of Compliance

THIS IS TO CERTIFY, That the Individual Sewage Disposal System constructed ( ) or Repaired ( ) by .....

Installer

at .....

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. ..... dated .....

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

DATE ..... Inspector .....

CHECK OR FILL IN WHERE APPLICABLE

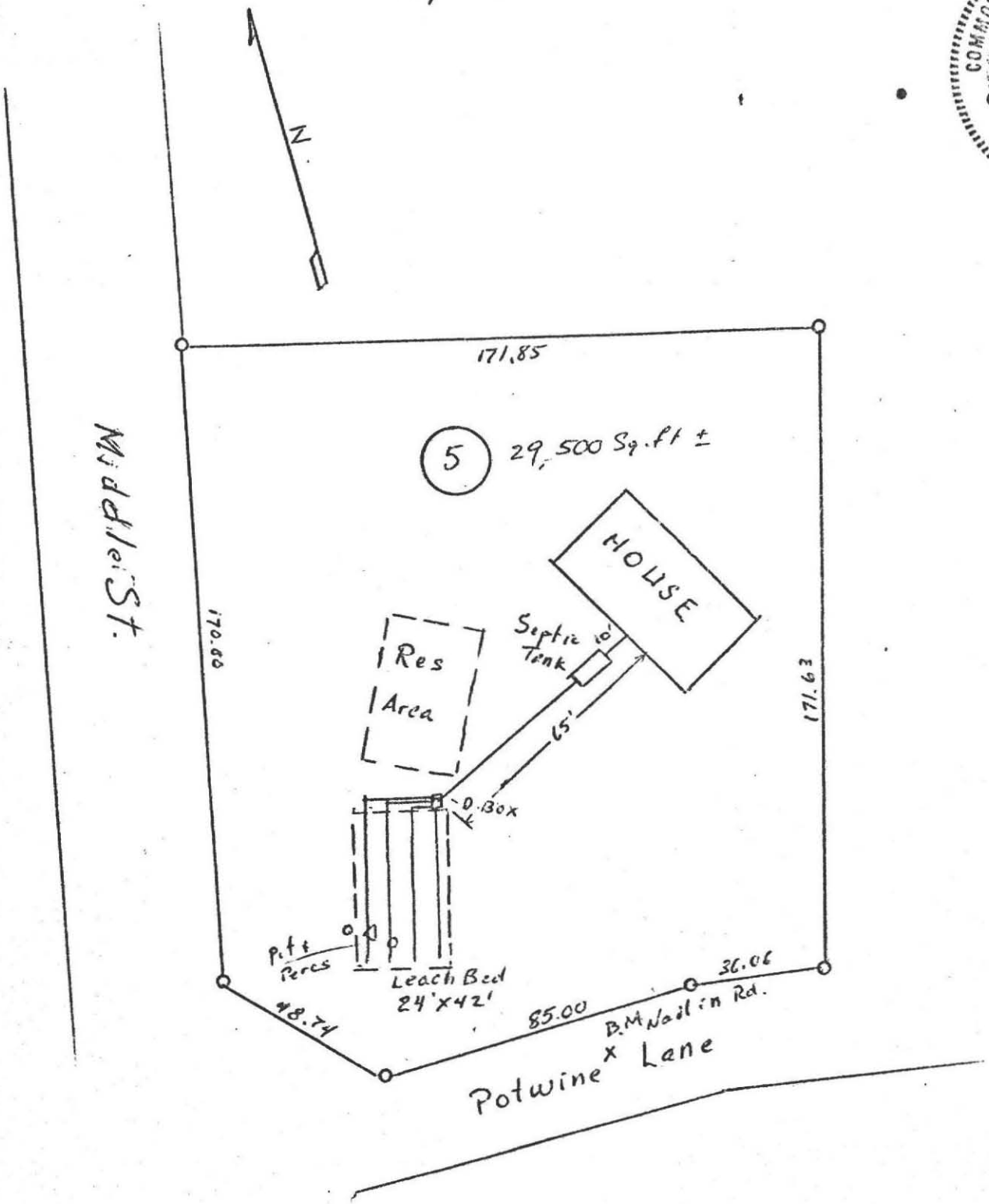
PLAN SHOWING SEWAGE DISPOSAL

For: Ress Building Corp. Ltd.
Robert Skrocki, Pres.
Rt. 66 Westhampton Ma.

Sept 1983

Scale: 1" = 40'
By: Frederick Filios

COMMONWEALTH OF MASSACHUSETTS
FREDERICK A. FILIOS, R.S.
688



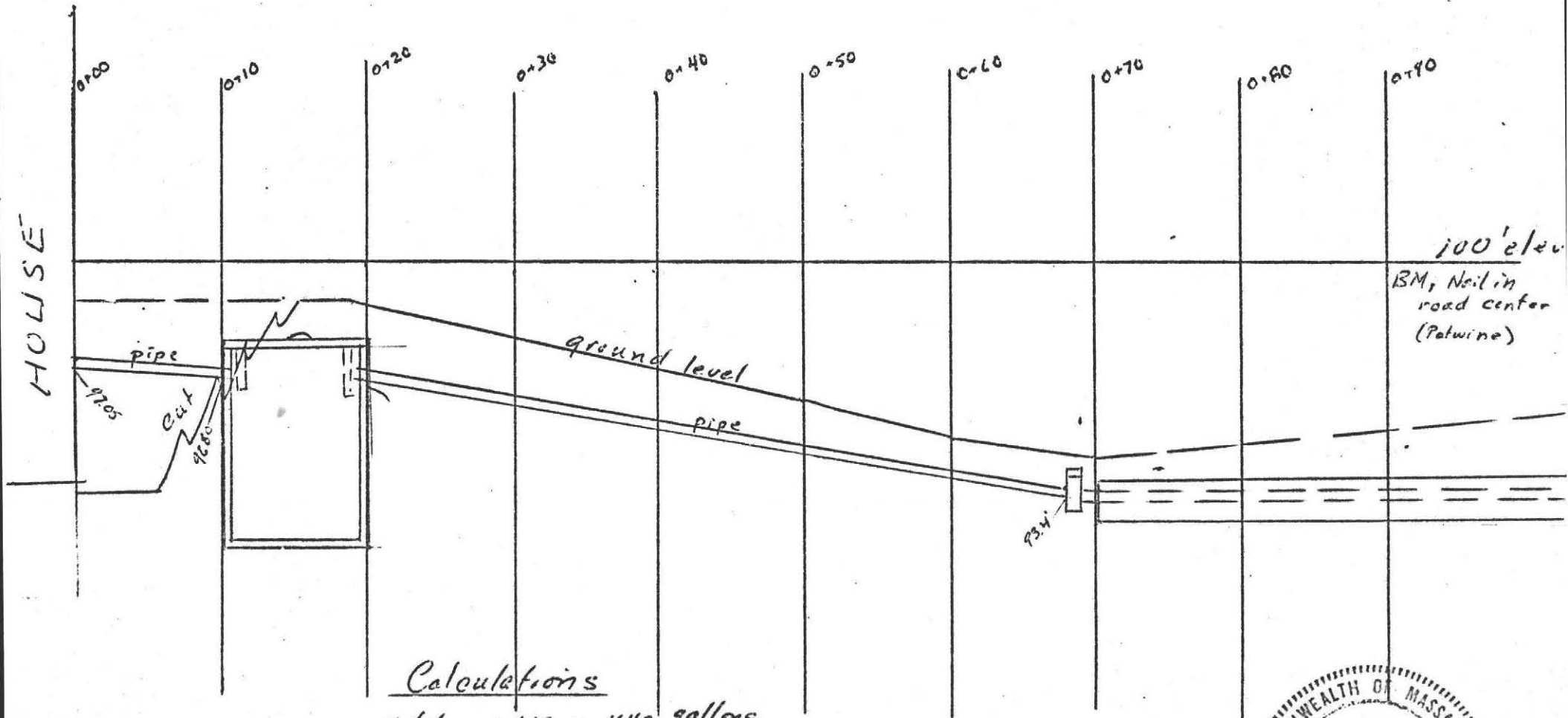
PROFILE OF SEPTIC SYSTEM

Sept. 1983

For: Ress Building Corp
Rt 66 Westhampton Ma

Scale: Horizontal; 1" = 10'
Vertical; 1" = 4'

By: Frederick Filios



Calculations

4 bdm. x 110 = 440 gallons
+ 50% (garbage grndr) 220
660 gallons

$\frac{660}{.66}$ gallon/sq ft = 1000 Sq. ft required

24' x 42' = 1008 Sq. ft. proposed

COMMONWEALTH OF MASSACHUSETTS
FREDERICK FILIOS, R.S.
688

Town of

AMHERST Massachusetts

BOARD OF HEALTH

December 19, 1975

Mr. Chris Riddle
147 North Whitney St.
Amherst, MA. 01002

Dear Mr. Riddle:

This is to certify that a percolation test and deep soil observation test has been completed on a lot located on the northeast corner of Middle Street and Potwine Lane in South Amherst owned by the Cook Estate. The percolation rates established were 11 and 11.5 minutes per inch, well within the acceptable range specified in Article XI of the Massachusetts State Sanitary Code.

Any system to be installed must be located in the area where the tests were conducted unless testing on another portion of the lot indicates satisfactory results.

I am in possession of a copy of a plan showing the location of the test and Mr. O'Keefe's letter certifying the test.

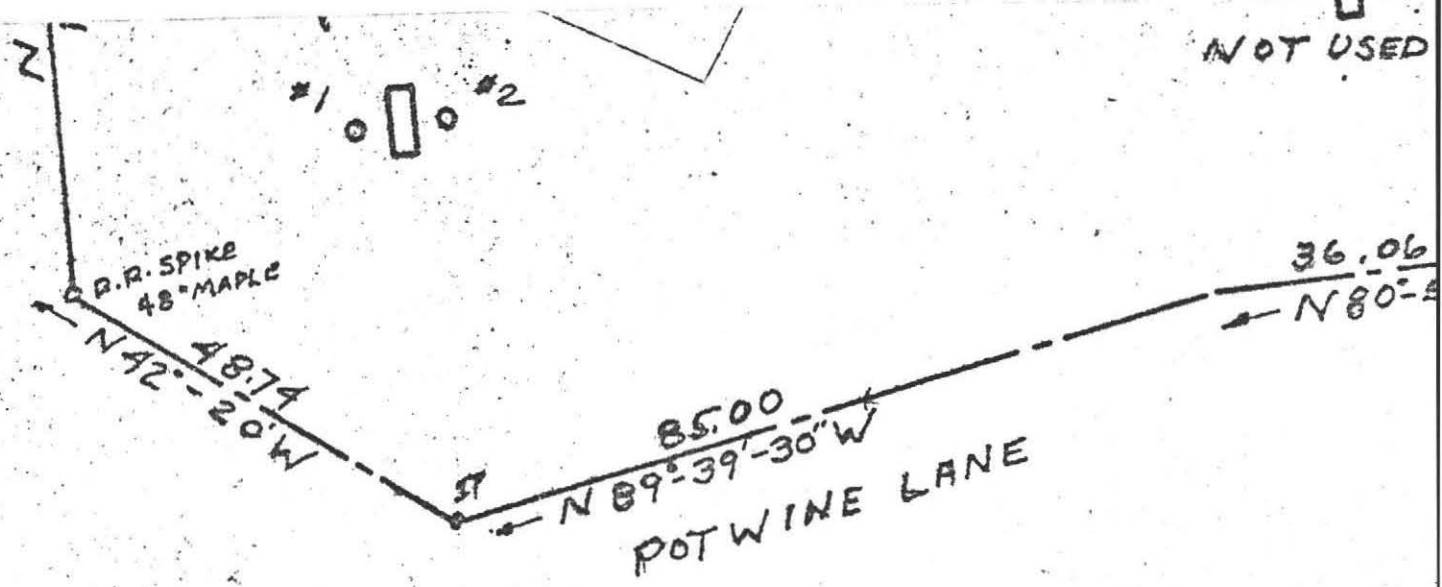
Very truly yours,

Charles E. Drake, Jr.
Director of Public Health

CED:dgf

cc: Mr. O'Keefe

3:00



TIME VS DEPTH

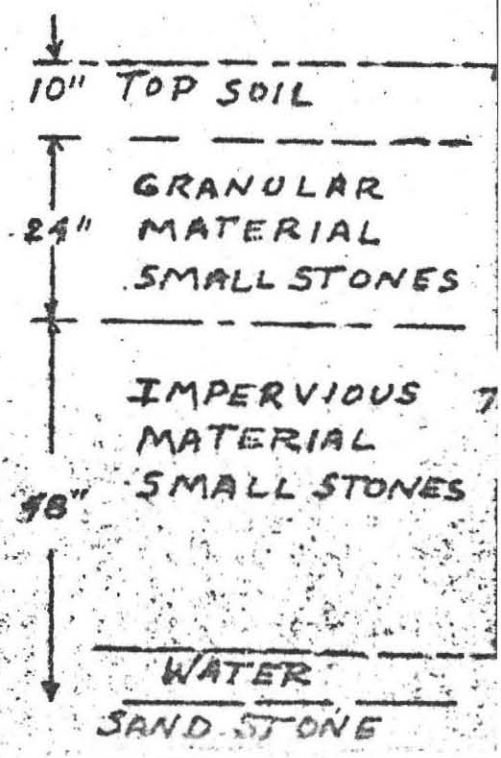
HOLE #1		HOLE #2		
1:12 PM	17 1/2"	1:04 PM	18 1/2"	START
1:22 PM	18 3/4"	1:14 PM	19 7/8"	
1:32 PM	20 3/4"	1:24 PM	21 1/8"	
1:42 PM	21 3/4"	1:34 PM	22"	
1:52 PM	22 5/8"	1:44 PM	22 5/8"	
2:02 PM	23 1/4"	1:54 PM	23 3/4"	
2:12 PM	24"	2:04 PM	24 5/8"	

NOTE BOTH HOLES FILLED AT 12PM
HOLE #2 REFILLED 12:30PM
BOTH HOLES REFILLED PRIOR TO TEST

TEST CONDUCTED 12/16/75 IN PRESENCE
OF AMHERST HEALTH OFFICER
CHARLES E. DRAKE JR.

SCALE 1" = 20'

SOIL PROFILE



BOARD OF HEALTH

TOWN OF AMHERST, MASSACHUSETTS

CORNER POTWINE + MIDDLE ST

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner RESS. BLDG. CORP. Address RTE 66 WESTHAMPTON

Installer KARL'S EXC. Address RIVER DR HADLEY

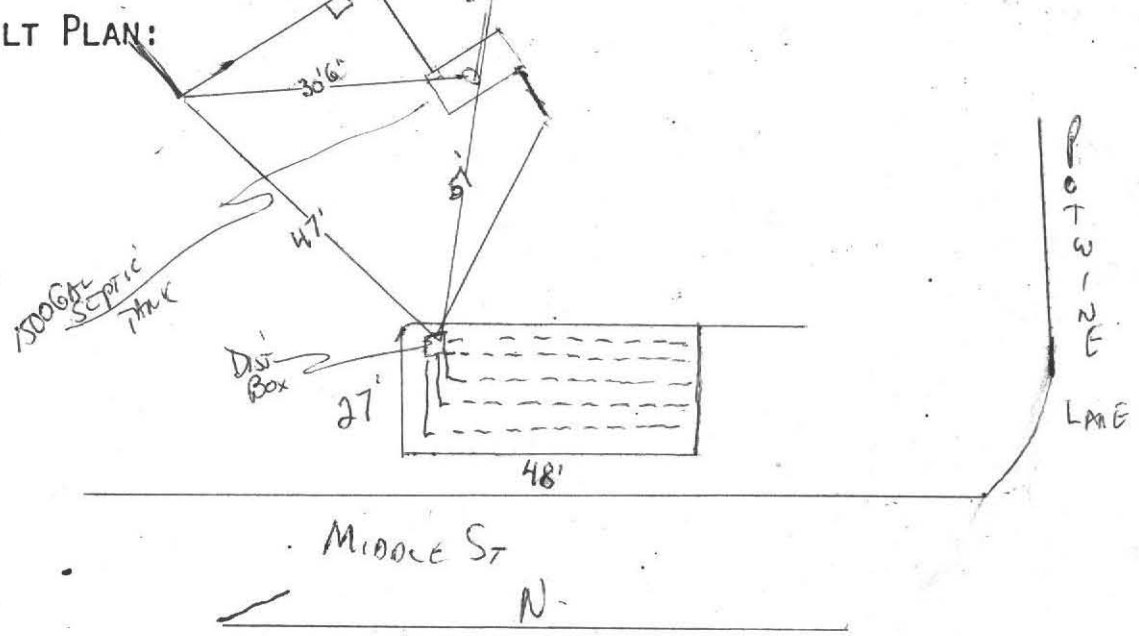
Date Installation Inspected and Approved 10-28-83

Description of System: Tank Capacity: 1500

Leach Field ( ) Bed (X) Seepage Pit ( ) Square Feet: _____

Garbage Grinder Yes ( ) No ( ) No. Bedrooms: ____ No. People _____

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 _____ 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.

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 79-6 Date 6 APRIL 79 Fee 15.00 Date Rec'd. 4-30-79 By CED

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

Location—Address POTWINE LANE or Lot No. 2

Owner JOSEPH WALLACE Address Potwine Lane

Contractor Joseph Walas Address 335 MIDDLE ST

Type of Building Ranch Dimensions 34 x 58 Size Lot 10 A.

Dwelling—No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder (NO)

Other _____ No. of persons 5 Showers (2)

Other fixtures _____

Town Water? yes Type of Well _____

Design Flow ____ gallons per person per day. Total daily flow 330 gallons

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

Disposal Trench—No. 1 Width 12 Total Length 55 Total leaching area 660 sq. ft. MIN

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 KENDALL G LUND Date 6 APRIL '79

Test Pit No. 1 12 minutes per inch Depth of Test Pit 24"

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

Description of Soil SM SILTY SAND Depth to Ground Water 3.5'

Will *disposal area* be filled? YES 1.5' MINUS 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 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.

Joseph W. Walas 4-9-79
Owner or builder date

Application Approved by CEDrake Jr. 4/30/79
date

Application Disapproved *for the following reasons:* AREA MUST BE FILLED IN ACCORDANCE WITH PLAN.

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. 79-6

Permission is hereby granted JOSEPH WALAS to construct (X) or repair ( ) an Individual Sewage Disposal System at POTWINE LANE LOT 2

as shown on the application for Disposal Works Construction Permit No. 79-6

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 4/30/79

CEDrake Jr.
Board of Health

BOARD OF HEALTH

TOWN OF AMHERST, MASSACHUSETTS

POTWINE LANE

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner JOE WALAS Address MIDDLE ST

Installer Bob Adair + SELF Address

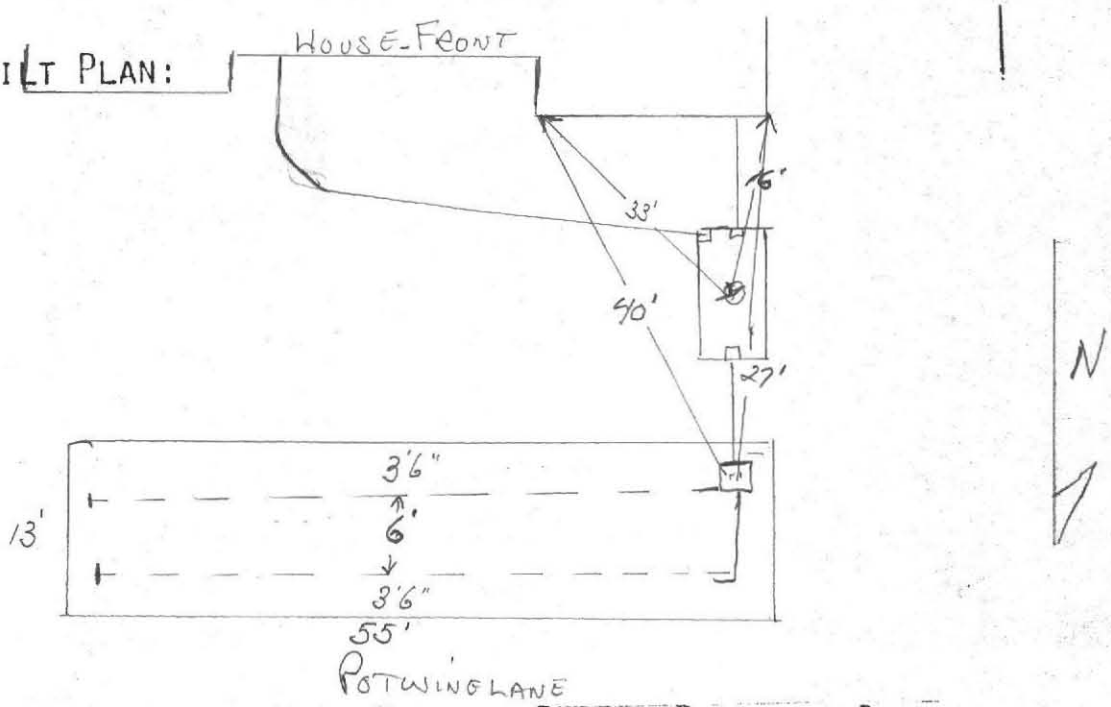
Date Installation Inspected and Approved 7/27/79 CED.

Description of System: Tank Capacity: 1000

Leach Field ( ) Bed (X) Seepage Pit ( ) Square Feet: 715

Garbage Grinder Yes ( ) No (X) No. Bedrooms: 3 No. People 6

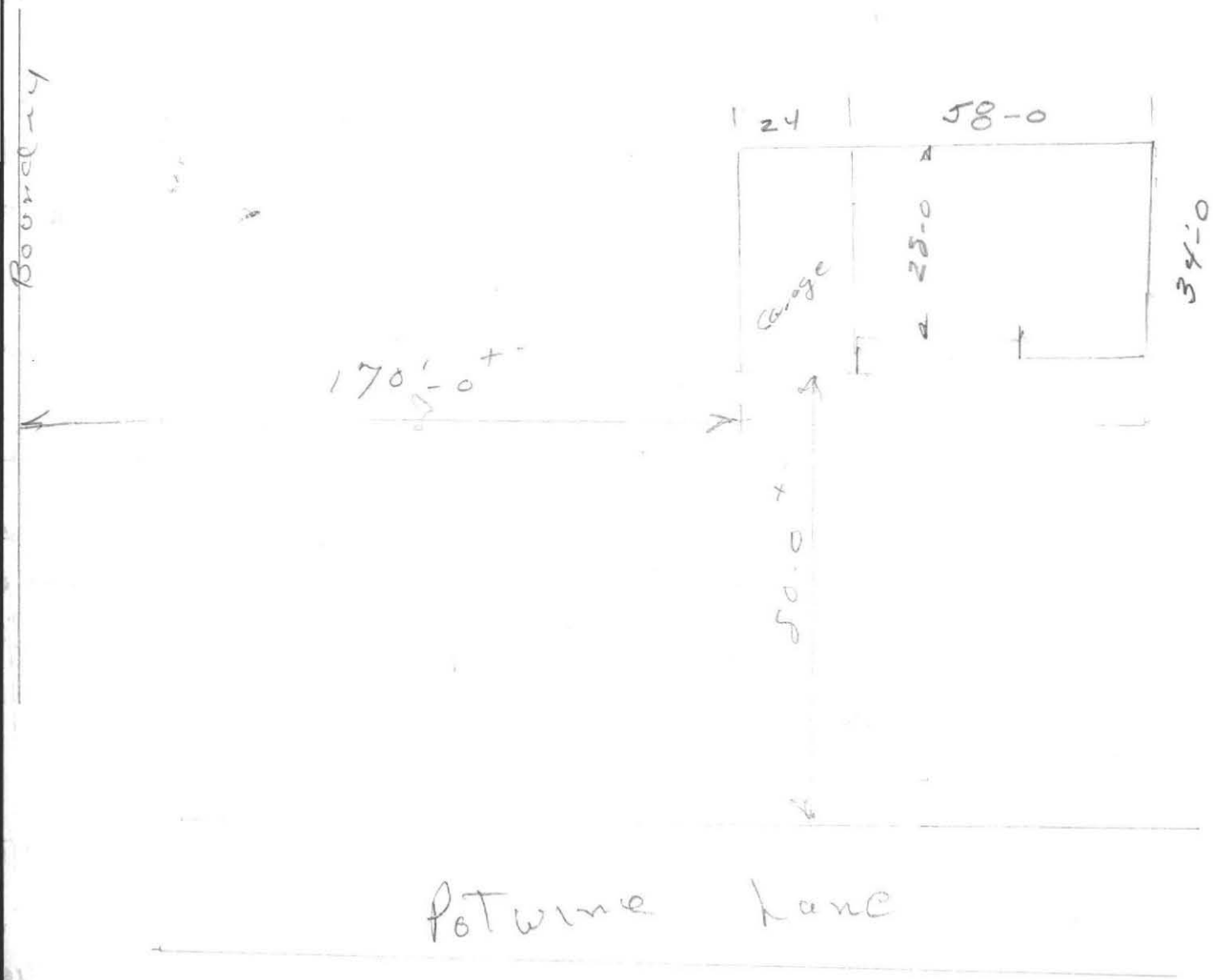
AS - BUILT PLAN:



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. MAXIMUM
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.

Living Area
1728 sq. ft



SUBSURFACE DISPOSAL STUDY

JOSEPH WALLACE POTWINE LANE LOT 2

AMHERST MA. 6 APRIL 1979

LOG OF DEEP TEST

0.0 TOPSOIL

0.5 SM, SAND SILTY, FINE SAND WITH TRACE OF MEDIUM SAND & ABOUT 15% NON PLASTIC FINES, YELLOW BROWN, DAMP TO WET @ 3.5'

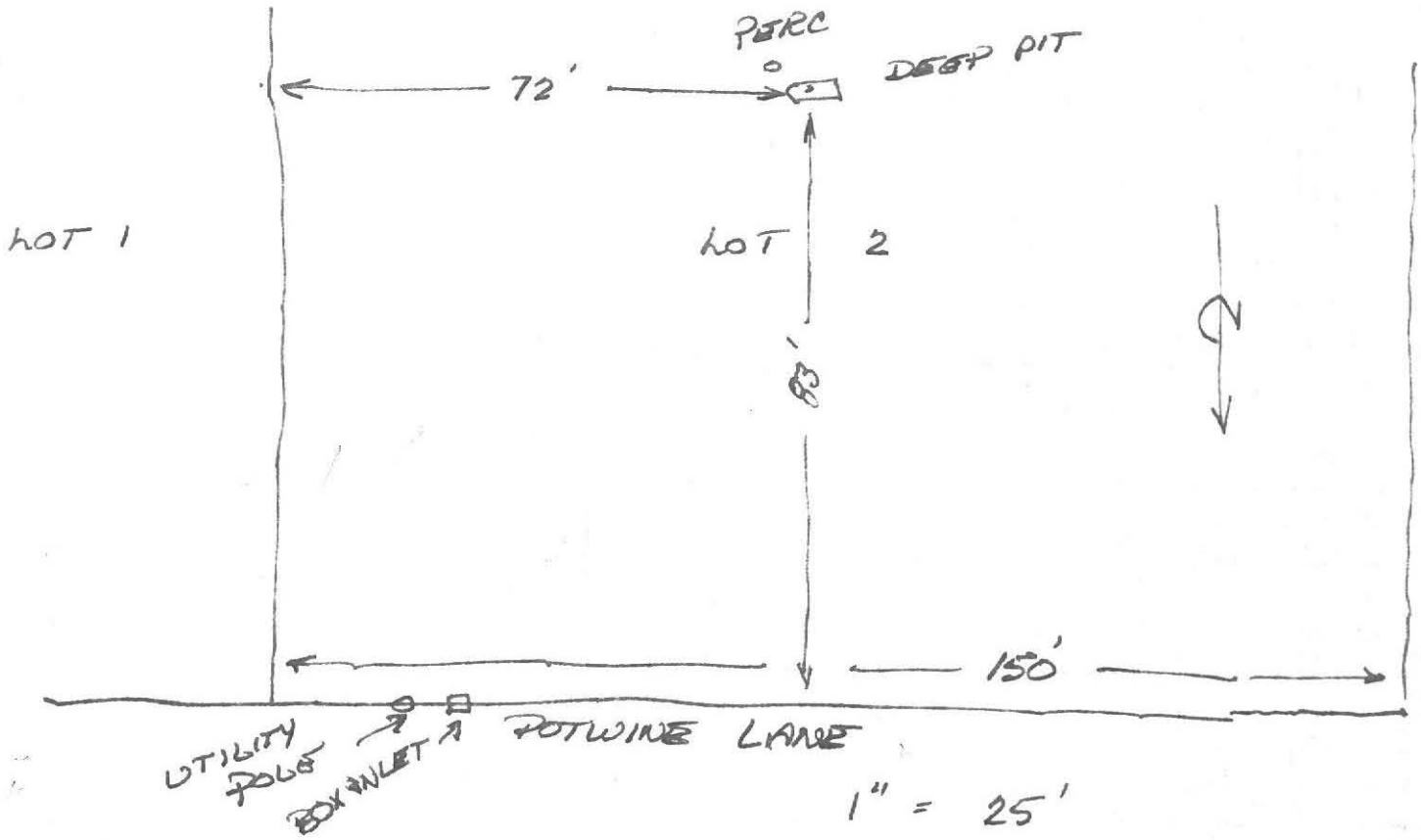
▼ 4.0

ML-CL, SILT & CLAY WITH FINE SAND, GRAY, MOIST, SLIGHTLY PLASTIC VARVED

8.0 8.0 T.D.

PERCOLATION TEST RATE 12 MIN/INCH

LOCATION



339- Potwine
Lane

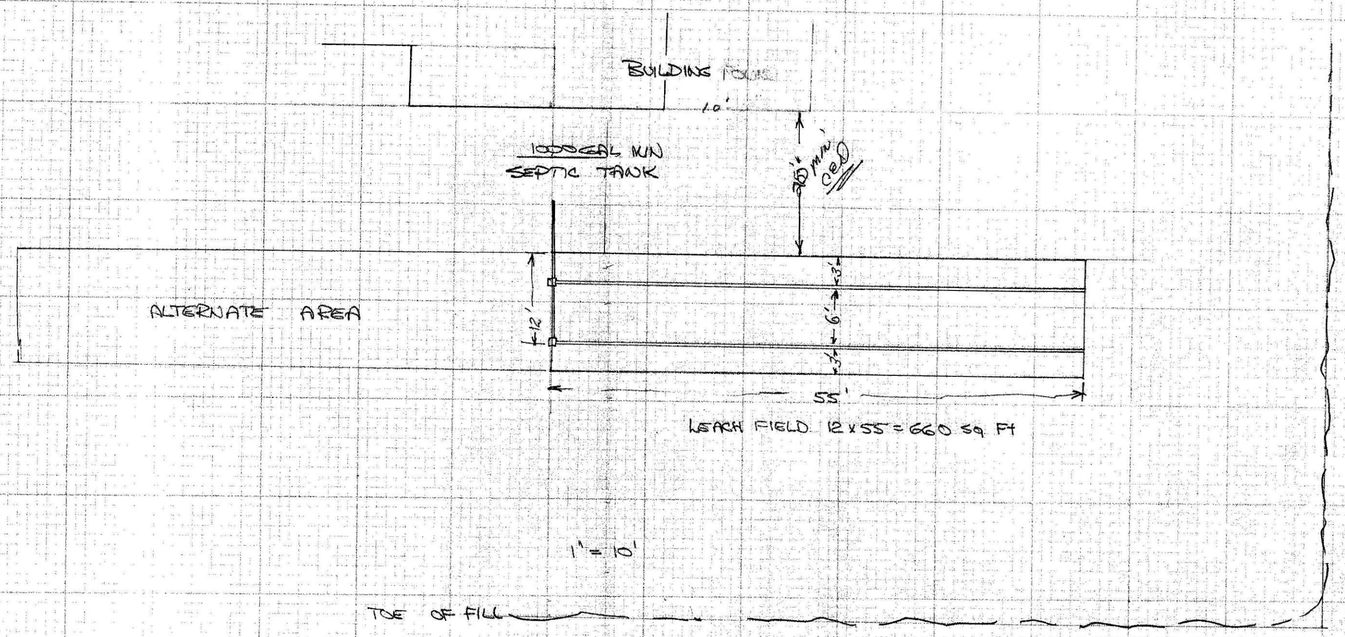
Louis Emly

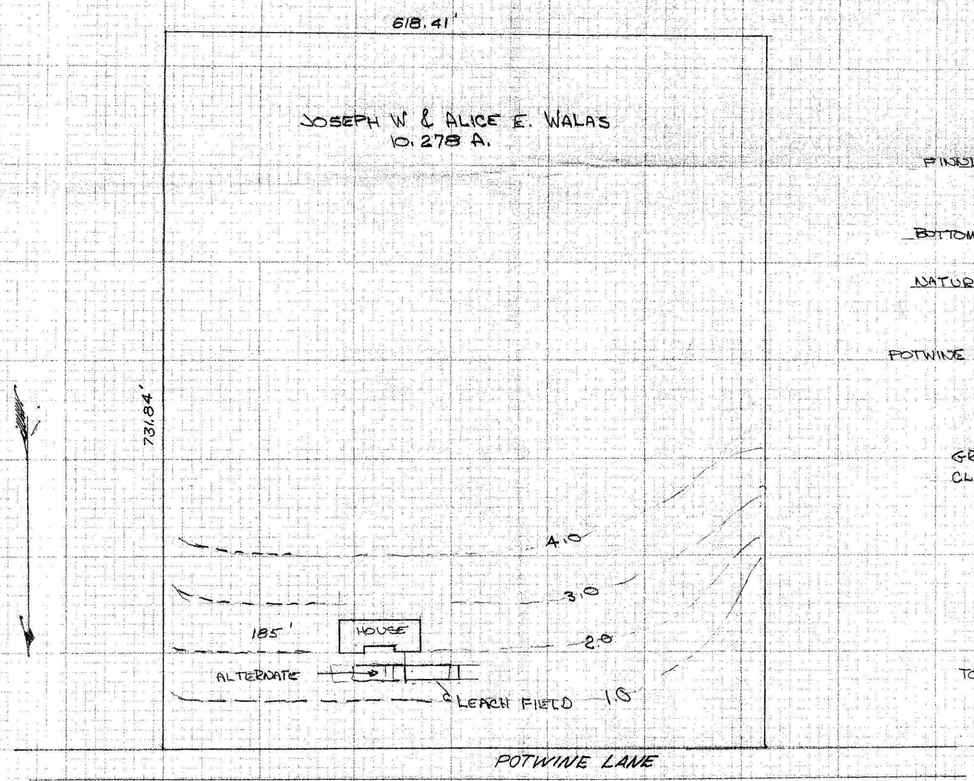
253-9167

413-598-7132

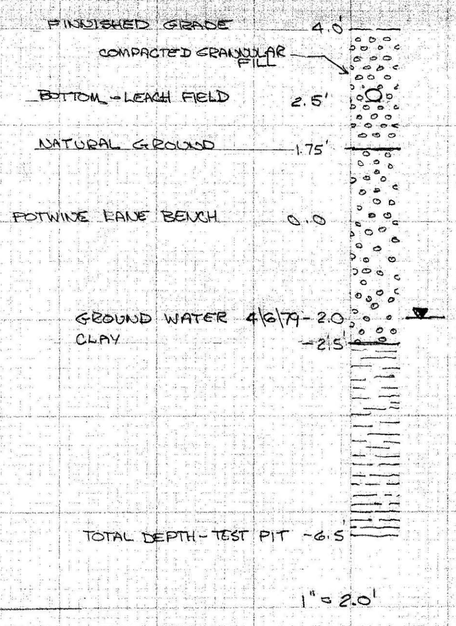
Hamil

268 Dunn





PROFILE THROUGH LEACH BED



LOT, PLAN & PROFILE
SUB-SURFACE DISPOSAL SYSTEM
JOSEPH & ALICE WALAS
MIDDLE ST AMHERST MA.
PLOT OF LAND ON POTWINE LANE
PREPARED BY K.G. LUND GEOLOGIST
DUBLIN NH

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 4-62

W. D. Cowles Inc. of No. Amherst
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a Residence
(residence, store, etc.)

which will be located at Potwine Lane to be installed by

? (address) (phone
(name)

Builder is W. D. Cowles Plumber is ?

Description of lot, building and fixtures as follows:

Lot: Dimensions 100 x Type of Soil Sandy Clay Well or Town Water? Town

Distance to Town Sewer Miles Depth to Ground Water Kind of Well —

Will Lot be Graded? Yes By Filling or Removing Soil? Fill

Building: Dimensions 24 x 36 No. Bedrooms 4 No. Occupants Spec.

Fixtures: No. Toilets 1 Urinals — Wash Basins 1 Bathtubs 1

Showers 1 Kitchen Sinks 1 Garbage Grinders

Auto Dishwasher Auto. Clotheswasher Other (basement)

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date 3/26/62 Denson H. [illegible]
(Signature of Applicant)

$3.00 fee Rec'd G.C.S.

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. 4-62

W. D. Cowles Inc. is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of 900 Gals. Liquid Capacity.

Leaching System: Trenches of not less than 300 Sq. Ft. bottom area. = 2 ft x 150 ft

Dry well ft. bottom area and ft. below the inlet.

Other Distribution Box plus System to be continuous - No closed end.

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.

To Conform to the dimensions on reverse side. G. C. Lima 3/30/62
for the Board of Health date

Inspected Approved

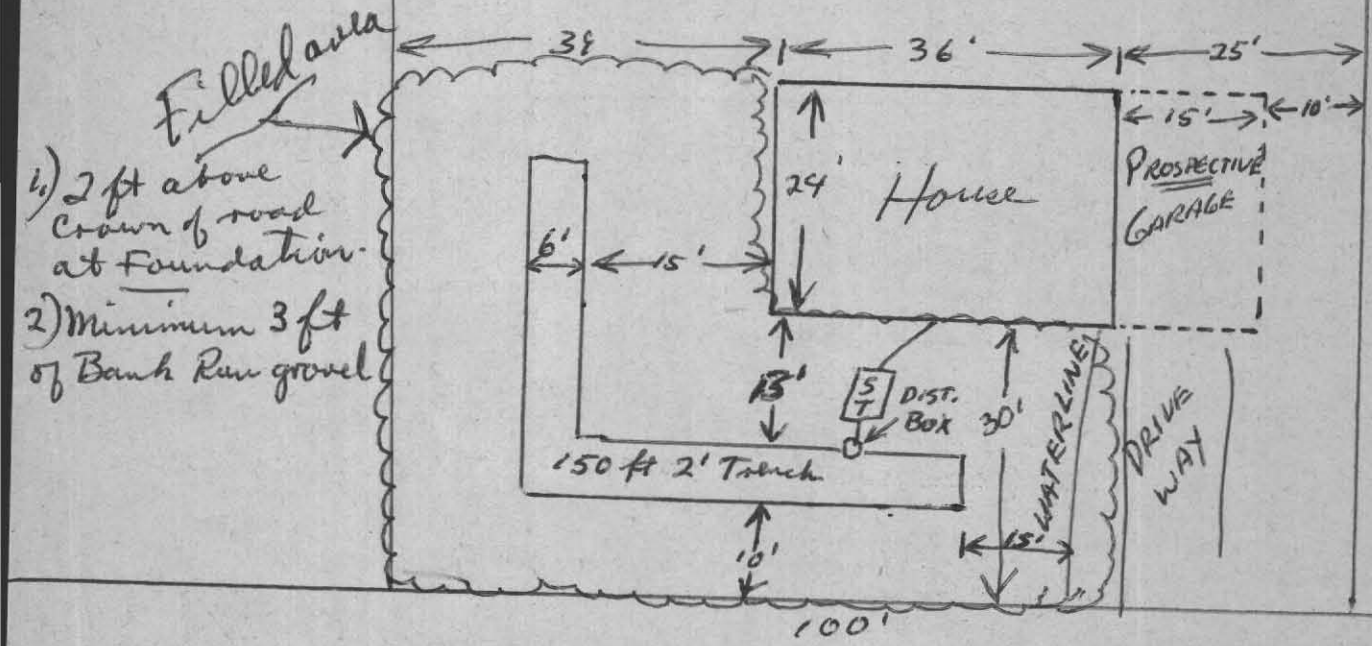
This system completed but not as in Plan

A.) Area to be filled as soon as possible - To be spread and compacted and allowed to settle before any part of disposal system is put in.

B). All roof and surface drains to be diverted away from disposal area.

C.) Disposal area to be graded to carry surface water away. ~~from~~

25'
36'
61'
39'
100'



Potwine Lane

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 6-62

W. D. COWLES INC. of MONTAGUE RD.
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a RESIDENCE
(residence, store, etc.)

which will be located at POTWINE LANE to be installed by

(name) (address) (phone

Builder is W. D. COWLES INC. Plumber is

Description of lot, building and fixtures as follows:

Lot: Dimensions 100 X Type of Soil CLAY Well or Town Water? TOWN

Distance to Town Sewer MILES Depth to Ground Water 1 ft Kind of Well —

Will Lot be Graded? YES By Filling or Removing Soil? FILLING

Building: Dimensions 24 X 36 No. Bedrooms 3-4 No. Occupants SPEC

Fixtures: No. Toilets 1 Urinals — Wash Basins 1 Bathtubs 1

Showers 1 Kitchen Sinks 1 Garbage Grinders — No

Auto Dishwasher No Auto. Clotheswasher Other (basement)

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date 3/26/62 Dennis H. [illegible]
(Signature of Applicant)

~~FEE DUE~~ Fee Coll. 4/3/62 FAY

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. 6-62

W. D. COWLES is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of 900 Gals. Liquid Capacity.

Leaching System: Trenches of not less than 300 Sq. Ft. bottom area.

Dry well ft. bottom area and ft. below the inlet.

Other

To correspond exactly to dimension of Permit #4-62

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.

G. A. Sirno 3/30/62
for the Board of Health date

Inspected Approved

See permit #4-62

This house not located as per request. Is lower than should be. System installed is O.K. but shortly after it was completed dump trucks were seen backing over the trenches (? The Tank). Builder added fill to Easterly part of lot for future expansion

April 30, 1963

D. H. Jones
120 Amity Street
Amherst, Massachusetts

Dear Mr. Jones:

This will confirm my verbal comments to you of some time ago regarding the easterly of two septic tank systems of the north side of Potwine Lane.

The area of the tank and leaching system failed to conform with the requirements of the permit issued in the terms of the area available and most important, in the depth of the fill put in. In addition, the house was supposed to be at least one foot higher and the water line better located. The result is that the area of disposal is short in several respects.

As to the system that was actually installed, it is structurally sound in size and construction.

A further problem that appeared after the system was put in was the fact that a truck with topsoil backed over this system several times. It is entirely possible that this system could be broken, crushed, or displaced in one or several places.

It is noted that some additional filled area was put in to expand the available leaching area for further expansion, if necessary.

Responsibility for the functioning of this system lies entirely with the builder in view of the foregoing. A Certificate of Occupancy is necessary under the new state law. One will be issued to you with the stipulation that you will correct any defects caused by damage to the system and the accumulation of surface or ground water, if needed.

Very truly yours,

Frederick A. Siino, M.S.P.H.
Director of Public Health

Verbal discussion followed but no action from builder

/sp

Have had discussion with Public Health
but no reply from Public Health

Neat

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR
A PRIVATE SEWAGE DISPOSAL SYSTEM

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 22-61

Edward J Miller of West St
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a .....
(residence, store, etc.)

which will be located at Pot Neck Lane to be installed by

.....
(name) (address) (phone

Builder is Edward J Miller Plumber is .....

Description of lot, building and fixtures as follows:

Lot: Dimensions ~~at least 100 x 100~~ 2 ~~24 x 36~~ Type of Soil ..... ~~Well~~ or Town Water? yes

Distance to Town Sewer Mile Depth to Ground Water ..... ~~Kind of Well~~ ——

Will Lot be Graded? yes By Filling or Removing Soil? Filling

Building: Dimensions 24 x 36 No. Bedrooms 4 Mr. Miller No. Occupants Spec

Fixtures: No. Toilets yes Urinals — Wash Basins 1 Bathtubs 1

Showers ..... Kitchen Sinks 1 Garbage Grinders No

Auto Dishwasher No Auto. Clotheswasher Yes Other (basement) No

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date Nov. 15, 1961 Edward J Miller
(Signature of Applicant)

This Reapplied for under new permit

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. .....

..... is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of ..... Gals. Liquid Capacity.

Leaching System: Trenches of not less than ..... Sq. Ft. bottom area.

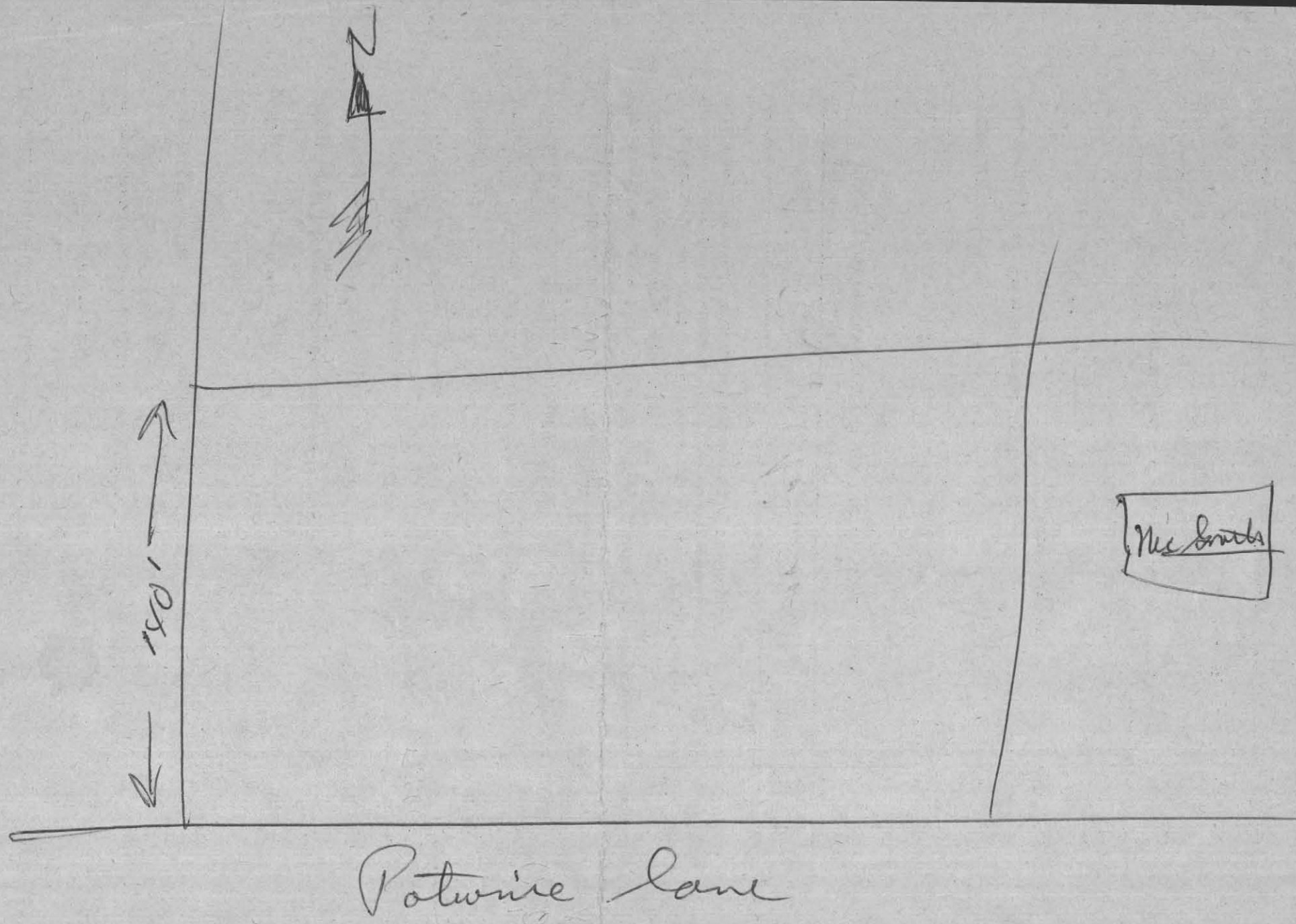
Dry well ..... ft. bottom area and ..... ft. below the inlet.

Other .....

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.

.....
for the Board of Health date

Inspected ..... Approved .....


N
140'
Mr Smith
Potwine lane

Rec'd $3.00, 9/12/62

COPY

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

COPY

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 5-62

E. J. MILLER of WEST ST
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a .....
(residence, store, etc.)

which will be located at POTWINE LANE to be installed by

SAME
(name) (address) (phone

Builder is SAME Plumber is ?

Description of lot, building and fixtures as follows:

Lot: Dimensions 110+ x 140 Type of Soil SANDY CLAY Well or Town Water? TOWN

Distance to Town Sewer MILES Depth to Ground Water 1 TO 2 FT Kind of Well —

Will Lot be Graded? YES By Filling or Removing Soil? BY FILLING

Building: Dimensions 24 X 36 No. Bedrooms 3 No. Occupants SPECULATION

Fixtures: No. Toilets 1 Urinals — Wash Basins 1 Bathtubs 1

Showers 1 Kitchen Sinks 1 Garbage Grinders NO

Auto Dishwasher NO Auto. Clotheswasher ..... Other (basement) .....

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date 3/28/1962 E. J. MILLER Copy
(Signature of Applicant)

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. 5-62

E. J. MILLER is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of 900 Gals. Liquid Capacity.

Leaching System: Trenches of not less than 400 Sq. Ft. bottom area. = 200 FT. TRENCH

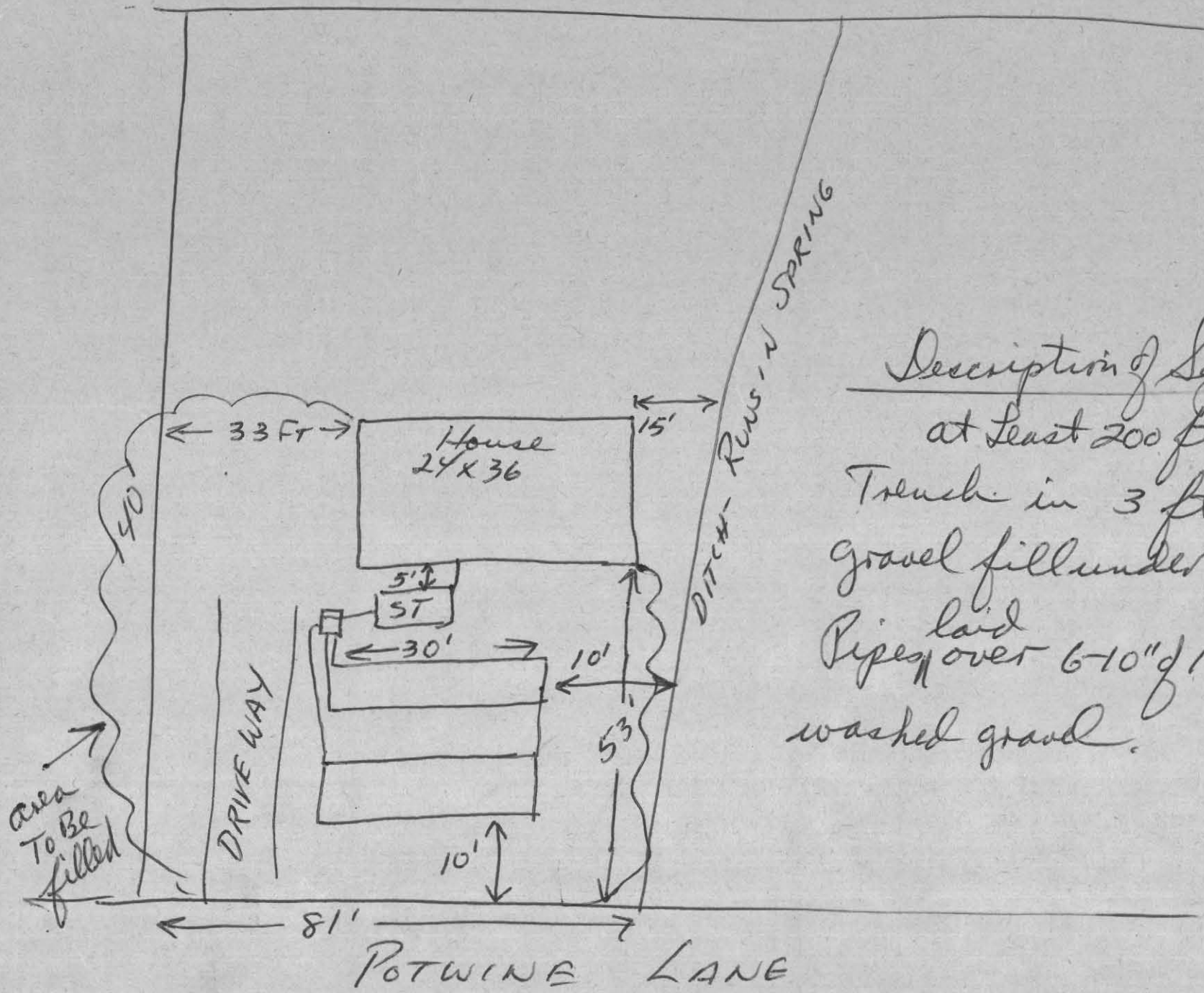
Dry well NO ft. bottom area and — ft. below the inlet.

Other DIST. BOX, SYSTEM TO BE LAID IN AREA of NOT LESS THAN 50'X70' of BANK RUN GRAVEL AT LEAST 3 FT DEEP.

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.

G. A. Sima 8/24/62
for the Board of Health date

Inspected 8/24/62 Approved 11/8/62 G. A. S.



Description of System

at least 200 ft of Trench in 3 ft of gravel fill under pipe. Pipes laid over 6-10" of 1"-1½" washed gravel.

November 16, 1961

Mr. Edward J. Miller
West Street
Amherst, Massachusetts

Dear Mr. Miller:

Upon receipt of your application for a permit to install a septic tank system at your proposed building on Potwine Lane the undersigned visited the site.

The excavator was at work and some stakes were in place.

Inspection of the soil conditions show a wet sandy clay for subsoil with a stream coming through the lot.

This lot poses a problem because of its depth, the wet soil and the stream.

No permit will be issued for this lot until you give complete information on the layout of the lot in relation to the stream and set back lines plus a dimension for width. We cannot go on the statement, "I don't know yet".

We wish to remind you further that no construction is to be done until a permit is issued for the septic tank system.

Very truly yours,

Frederick A. Siino
Agent

FAS/sp
cc: Chief G. A. Cavanaugh, Mr. A.L. Torrey, Bd. of Health Members

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 30-62

Edward J. Miller of North Pleasant 6 6064
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a ^
(residence, store, etc.)

which will be located at Potwayne Lane to be installed by
?

(name) (address) (phone

Builder is Edward J. Miller Plumber is

Description of lot, building and fixtures as follows:

Lot: Dimensions 110 x 140' Type of Soil Sandy Clay Well or Town Water? Town

Distance to Town Sewer 7 Mile Depth to Ground Water 6'+ Kind of Well —

Will Lot be Graded? yes By Filling or Removing Soil? by filling

Building: Dimensions 34 8" x 36 No. Bedrooms 4 No. Occupants

Fixtures: No. Toilets 2 Urinals 2 Wash Basins 2 Bathtubs 1

Showers None Kitchen Sinks 1 Garbage Grinders None

Auto Dishwasher No Auto. Clotheswasher yes Other (basement)

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date Sept 25 1962 Edward J. Miller
(Signature of Applicant)

Fee Rec'd $3.00 [illegible]

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. 30-62

E. J. Miller is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of 900 Gals. Liquid Capacity.

Leaching System: Trenches of not less than Sq. Ft. bottom area.

Dry well (10') ft. bottom area and 6 ft. below the inlet. = 10 x 10 x 80 lay

Other

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.

H. A. Sirio 10/2/62
for the Board of Health date

Inspected Approved 11/8/62 F.A.S.


DRY well
10X10X8'
House
24X36
DITCH
160'
McGrath
POTWINE LAN

APPLICATION FOR PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

$300 new
$100 Repair

TO: THE BOARD OF HEALTH, AMHERST, MASS. No. 27-62

STANLEY, Albert of West St.
(owner's name) (address) (phone)

hereby applies for a permit to construct or repair a private disposal system for a Residence
(residence, store, etc.)

which will be located at Patwine Lane to be installed by

Tobin (Tank) Owner & Trench
(name) (address) (phone

Builder is Main Plumber is R.D. Shipman (?)

Description of lot, building and fixtures as follows:

Lot: Dimensions 5 acres Type of Soil Sandy loam over clay Well or Town Water? Well

Distance to Town Sewer Miles Depth to Ground Water 4'+ Kind of Well Drilled

Will Lot be Graded? Yes By Filling or Removing Soil? filling

Building: Dimensions 40x26 No. Bedrooms 3 No. Occupants 5

Fixtures: No. Toilets 1 Urinals — Wash Basins 1 Bathtubs 1

Showers 1 Kitchen Sinks 1 Garbage Grinders 1

Auto Dishwasher ..... Auto. Clotheswasher 1 Other (basement) .....

(On reverse side show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

I certify that the above information is correct and that I will notify the Board of Health if any conditions are changed. I also declare that I have read and understand all the rules and regulations applying hereto and will comply with all requirements and stipulations as included in a permit if issued to me.

Date Sept 7, 1962 Albert M. Stanley
(Signature of Applicant)

Fee Rec'd - 3.00 F.A.S

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

No. .....

A. Stanley is hereby granted permission to proceed with the construction or repair of private sewage disposal system with the following minimum requirements:

Septic Tank: Must be of Cement and of 900 Gals. Liquid Capacity.

Leaching System: Trenches of not less than 150' Sq. Ft. bottom area.

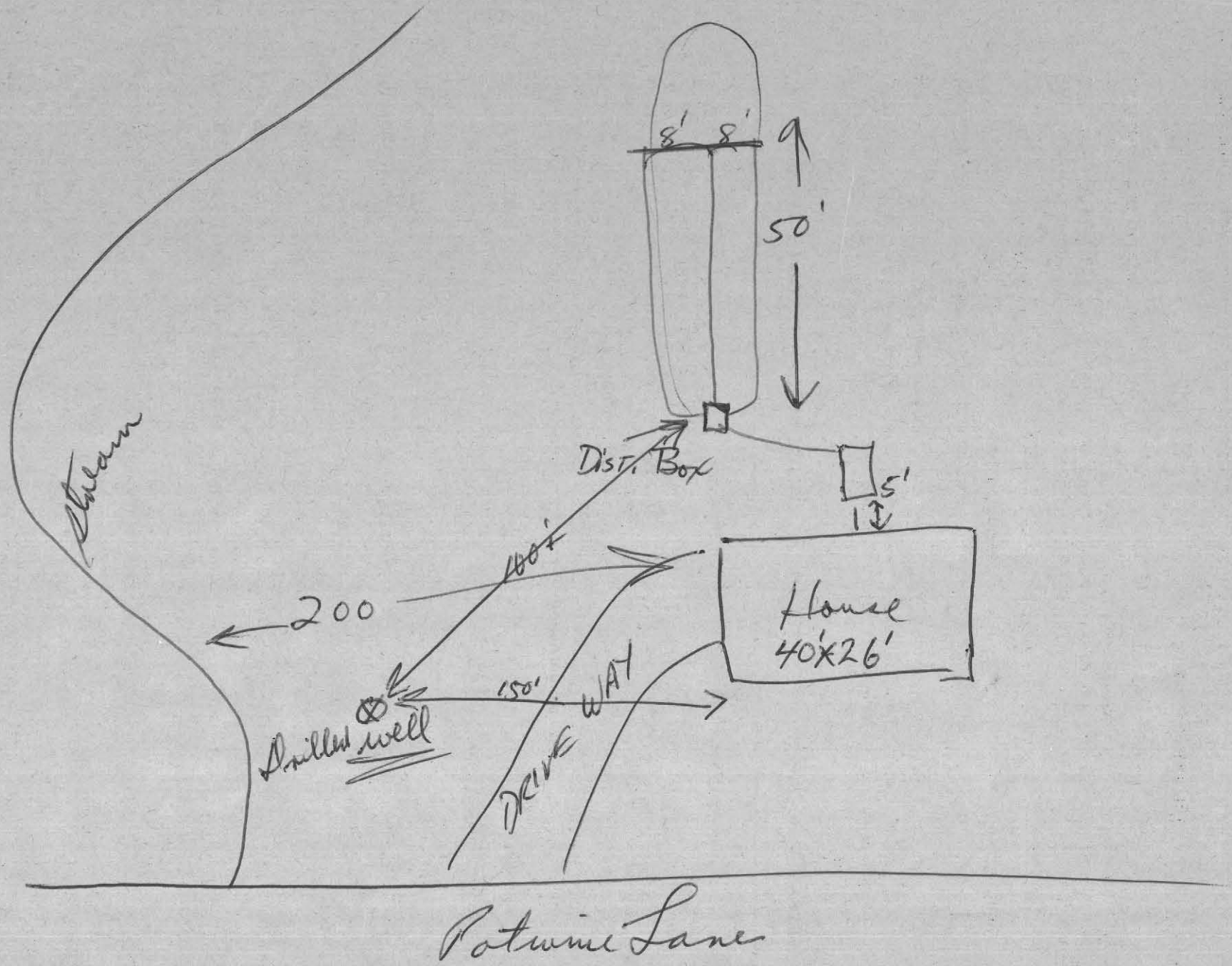
Dry well — ft. bottom area and — ft. below the inlet.

Other Dist. Box

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.

F. A. Sims 9/7/62
for the Board of Health date

Inspected ..... Approved OK F.A.Sims


Stream
8'
8'
50'
Dist. Box
5'
1'
100'
200
House
40'X26'
150'
Drilled well
DRIVE WAY
Potumic Lane

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 66-12 Date Aug 17, 1966 Fee 3.00 Date Rec'd. August 22 1966 By CEH

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

Location—Address POTWINE LANE or Lot No. _____

Owner Wm. STANLEY Address FLORENCE MASS

Contractor Zumbrunski Address 11 Conz, Northampton

Type of Building _____ Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic (No) Garbage Grinder (No)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? No. Type of Well Dug

Design Flow 75 gallons per person per day. Total daily flow 450 gallons

Septic Tank—Liquid capacity 900 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. 3 Width 2 Total Length 225 Total leaching area 450 sq. ft. min

Disposal Bed—No. 1 Diameter _____ Depth below inlet _____ Total leaching area 450 sq. ft.

Dry Well—No. _____ Diameter _____ Depth below inlet _____ Dimensions: _____ x _____ x _____

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

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

Percolation Test Results Performed by Drake Date 8-18-66

Test Pit No. 1 15 minutes per inch Depth of Test Pit 36"

Test Pit No. 2 15 minutes per inch Depth of Test Pit 36"

Description of Soil CLAY - Depth to Ground Water _____

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 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.

William C. Zumbrunski 8-12-66
Owner or builder date

Application Approved by CEDrake 8-18-66
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

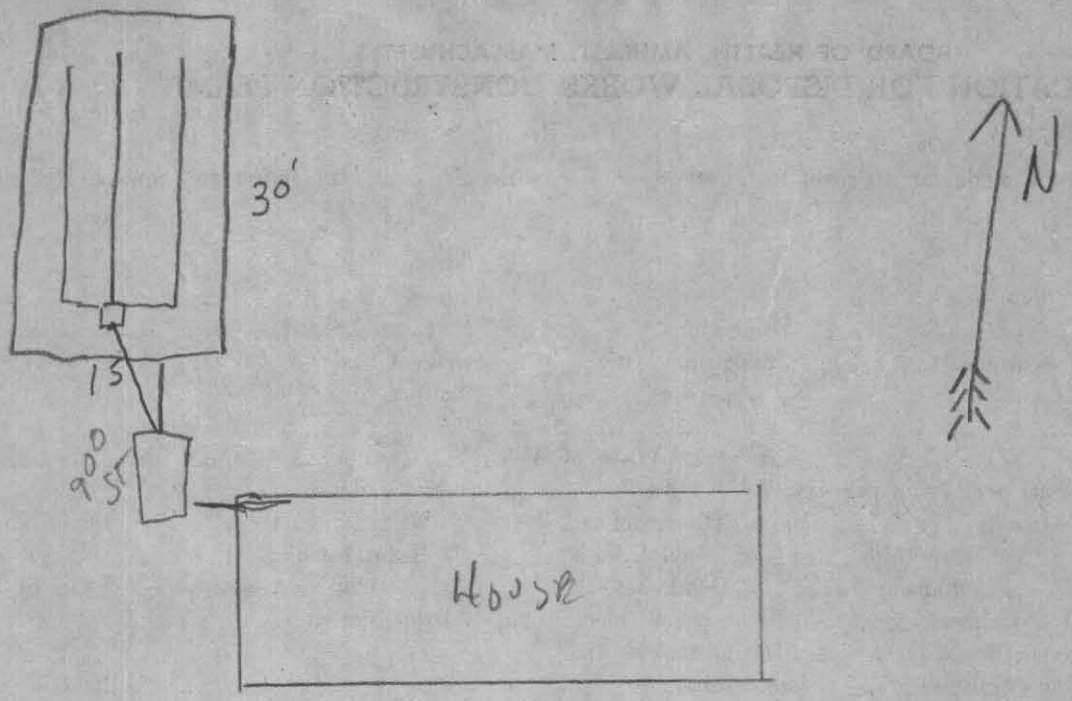
No. 66-12

Permission is hereby granted Wm. STANLEY to construct (X) or repair ( ) an Individual Sewage Disposal System at POTWINE LANE as shown on the application for Disposal Works Construction Permit No. 66-12

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 August 18, 1966

CEDrake
Board of Health



Potwine Lane

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 66-12 Date 8-17-66 Fee 8.00 Date Rec'd. 8-22-66 By CER

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

Location—Address Potwine Lane or Lot No.

Owner Wm. Stanley Address Florence, Mass.

Contractor Zumbriski Address 11 Conz, Northampton

Type of Building Residence Dimensions Size Lot

Dwelling—No. of Bedrooms 3 Expansion Attic (No) Garbage Grinder (No)

Other No. of persons Showers ( )

Other fixtures

Town Water? No Type of Well dug

Design Flow 75 gallons per person per day. Total daily flow 450 gallons

Septic Tank—Liquid capacity 900 gallons Dimensions: L W D

Disposal Trench—No. 3 Width 2 Total Length 225 Total leaching area 450 sq. ft.

Disposal Bed—No. 1 Diameter Depth below inlet Total leaching area 450 sq. ft.

Dry Well—No. Diameter Depth below inlet Dimensions: x x

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

(Depth of Soil Line Below finished grade at foundation)

Percolation Test Results Performed by C.E. Drake Jr. Date 8/18/66

Test Pit No. 1 15 minutes per inch Depth of Test Pit 36"

Test Pit No. 2 15 minutes per inch Depth of Test Pit 36"

Description of Soil clay Depth to Ground Water

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 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.

Wm. C. Zumbriski 8/12/66
Owner or builder date

Application Approved by C.E. Drake. 8/18/66
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 (X) or repaired ( ) by K. Konieczny (INSTALLER) at Potwine Lane has 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. 66-12 dated 8-17-66

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

DATE Dec 5, 1966 Inspector C.E. Drake Jr.

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

No. 66-12

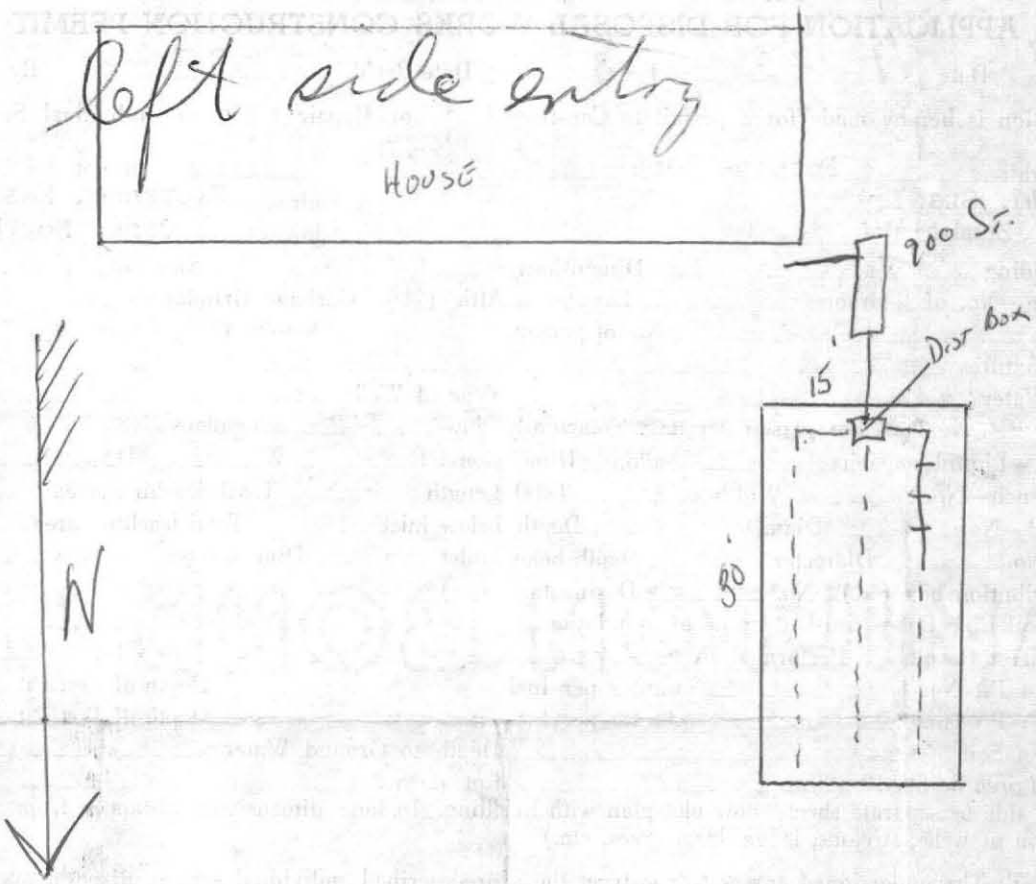
Permission is hereby granted Wm. Stanley to construct (X) or repair ( ) an Individual Sewage Disposal System at Potwine Lane as shown on the application for Disposal Works Construction Permit No. 66-12

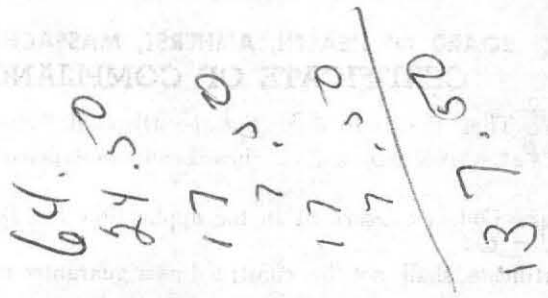
This permit is issued with the understanding that future alterations or additions will be made if necessary. This permit shall not be construed as permission to create or maintain any sewage nuisance and in the issuance of this permit the Board of Health assumes no responsibility for the future operation or maintenance of the system.

DATE Aug. 18/66

C.E. Drake Jr.
Board of Health

PORWINE LANE





BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-14 Date April 28, 1964 Fee $3.00 Date Rec'd. 4-28-64 By CEO

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

Location—Address Middle St at Potwine Lane or Lot No. _____

Owner Frank Beturney Address Taylor St.

Contractor Sanders + Roberge Address Bay Road

Type of Building Dwelling Dimensions 52'8" x 26 Size Lot 120 x 150

Dwelling—No. of Bedrooms 4 Expansion Attic (X) Garbage Grinder (X)/O

Other _____ No. of persons _____ Showers ( )

Other fixtures Standard Bath + 1/2

Town Water? Yes Type of Well _____

Design Flow 75 gallons per person per day. Total daily flow 600 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. _____ Width _____ Total Length _____ Total leaching area 600 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 (X) No. _____ Dosing tank ( )

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

Percolation Test Results Performed by Drake Date 4-27-64

Test Pit No. 1 10 minutes per inch Depth of Test Pit 30"

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

Description of Soil Sandy-Clay Depth to Ground Water 80"

Will *disposal area* be filled? Yes 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 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. Lot is Drained By Curtain Drain. Fill to be Removed Toward System 4' Above Water Table

Gerard Roberge — Owner or builder — 4-28-64 date

Application Approved by Drake — 4-28-64 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 K Kenney (INSTALLER) at Potwine Middle has 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. 64-14 dated ~~6-26-64~~ 4-28-64

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

DATE 6-24-64 Inspector CE Drake

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

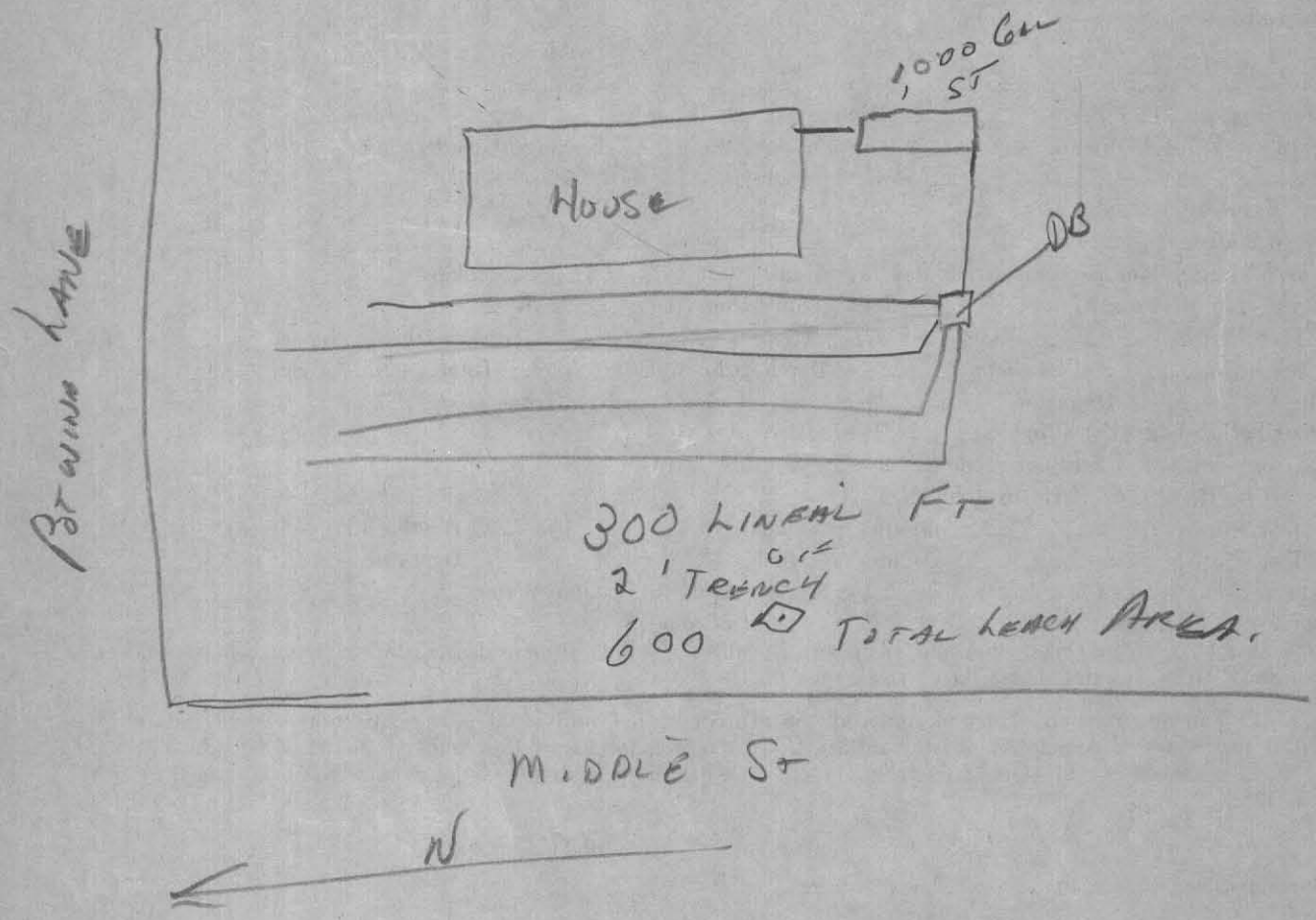
No. 64-14

Permission is hereby granted Sanders + Roberge to construct (X) or repair ( ) an Individual Sewage Disposal System at Middle St + Potwine Lane as shown on the application for Disposal Works Construction Permit No. 64-14

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 4-28-64

CE Drake
Board of Health


1,000 Gal
ST
HOUSE
DB
BROWN LANE
300 LINEAL FT
OF
2' TRENCH
600 TOTAL LEACH AREA.
MIDDLE ST
N

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-16 Date MAY 12, 64 Fee 1.00 Date Rec'd. 5-12-64 By CEA

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

Location—Address POTWINE LANE or Lot No. _____

Owner CORA & ROY FAY Address BAY ROAD

Contractor KARL KONIECNY Address NO GRANBY

Type of Building _____ Dimensions _____ Size Lot 10 ACRES

Dwelling—No. of Bedrooms 2 Expansion Attic No Garbage Grinder (No

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? No. Type of Well ?

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

Septic Tank—Liquid capacity 750 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. 1 Width 3 Total Length 100 Total leaching area 300 sq. ft.

Disposal Bed—No. 1 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 12-14" ?)

Percolation Test Results Performed by _____ 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 _____ Depth to Ground Water 5-6' at wetness

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 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.

Cora C Fay — Owner or builder — 5-12-64 date

Application Approved by C E Drake — 5-12-64 date

Application Disapproved *for the following reasons:* keep system as near surface as possible.

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 5-20-64 Inspector CEA

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

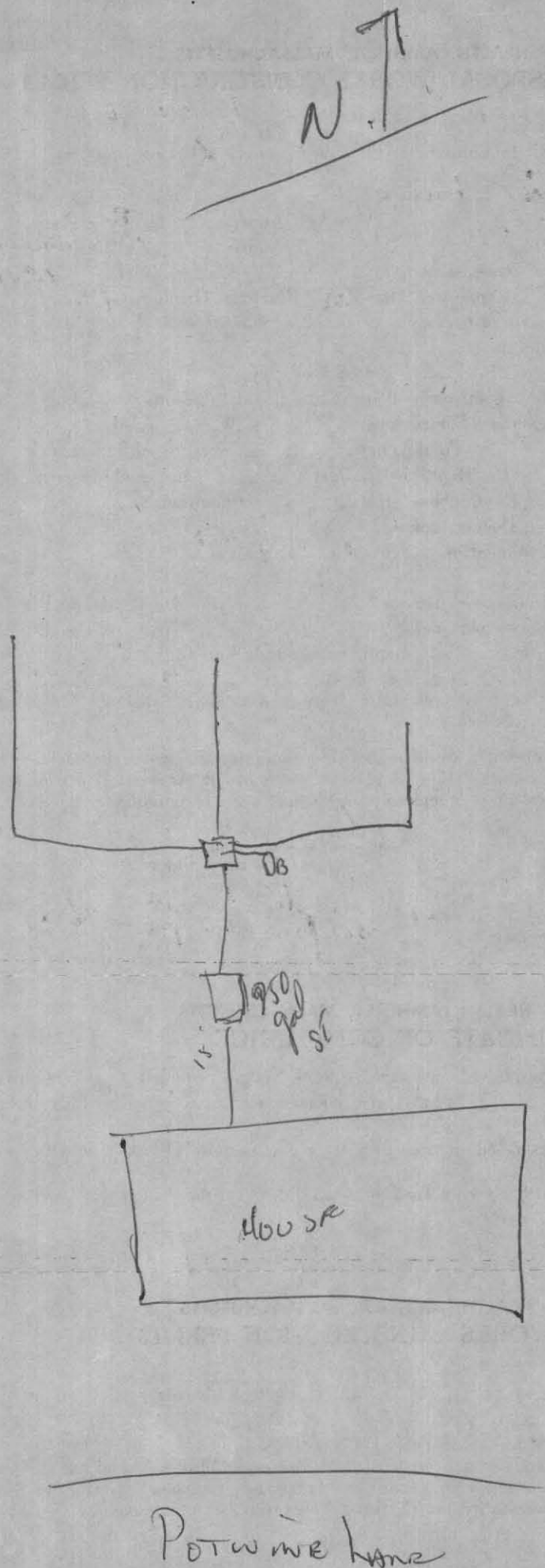
No. 64-16

Permission is hereby granted CORA + ROY FAY to construct ( ) or repair (X) an Individual Sewage Disposal System at POTWINE LANE as shown on the application for Disposal Works Construction Permit No. 64-16

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 5-12-64

C E Drake — Board of Health


N
DB
1500 gal st
15'
HOUSE
POTOWME LANE

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-18 Date 5-22-64 Fee 3.00 Date Rec'd. 6-7-64 By CEL

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

Location—Address Lot "D" Potwine Lane or Lot No. "D"

Owner Dan Fungaroli Address Main St - Amherst

Contractor K. Koniecny Address Wadley

Type of Building _____ Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder ( )

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? YES Type of Well _____

Design Flow 75 gallons per person per day. Total daily flow 450 gallons

Septic Tank—Liquid capacity 900 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. _____ Width _____ Total Length _____ Total leaching area 450 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 Drake Date 5-22-64

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

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

Description of Soil Sand - Depth to Ground Water 3'

Will *disposal area* be filled? 2' 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 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.

Daniel Fungaroli
Owner or builder — date

Application Approved by Drake Keep system on high as poss'ble — date 5-22-64

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 K. Koniecny (INSTALLER) at Potwine Ln has 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. 64-18 dated 5-22-64

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

DATE 8-10-64 Inspector Drake

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

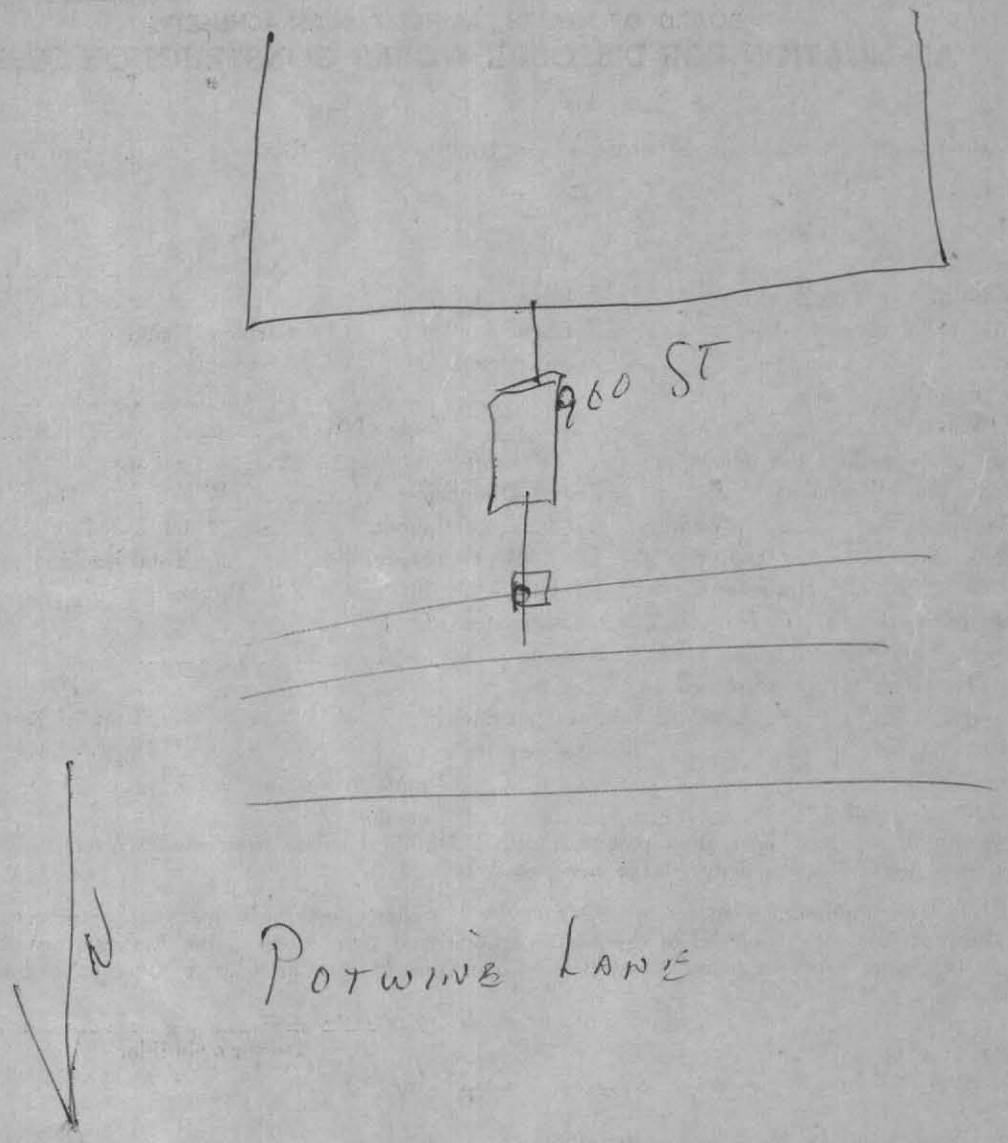
No. 64-18

Permission is hereby granted Dan Fungaroli to construct (X) or repair ( ) an Individual Sewage Disposal System at Lot "D" Potwine Lane as shown on the application for Disposal Works Construction Permit No. _____

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 5-29-64

C. E. Drake
Board of Health


900 ST
N
POTWINE LANE

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-24 Date August 18 1964 Fee $3.00 Date Rec'd. 8-18-64 By CEO

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

Location—Address Potwine Lane or Lot No. _____

Owner Mac Gress Address Jewett Farm, Hadley

Contractor Joe Wancyk Address Hadley Rutter Drive

Type of Building Dwelling Dimensions _____ Size Lot _____

Dwelling—No. of Bedrooms 3 Expansion Attic (No) Garbage Grinder (No)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? _____ Type of Well _____

Design Flow 75 gallons per person per day. Total daily flow 450 gallons

Septic Tank—Liquid capacity 900 gallons Dimensions: L — W — D —

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

Disposal Bed—No. one 1 Diameter _____ Depth below inlet _____ Total leaching area 450 sq. ft.

Dry Well—No. 1 Diameter 6' Depth below inlet 7' Dimensions: 6 x 8 x —

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

(Depth of Soil Line Below finished grade at foundation 3')

Percolation Test Results Performed by _____ Date _____

Test Pit No. 1 — 2 minutes per inch Depth of Test Pit 40"

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

Description of Soil Sand & Gravel Depth to Ground Water none

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 aforedescribed 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.

Mac Gress — Owner or builder 8-18-64 date

Application Approved by CEDrake 8-18-64 date

Application Disapproved *for the following reasons:*

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

CERTIFICATE OF COMPLIANCE

GRESS

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed ( ) or repaired ( ) by J. Wancyk (INSTALLER) at Potwine has 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. 64-24 dated 8-18-64

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

DATE Sept 1, 1964 Inspector [illegible]

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-24

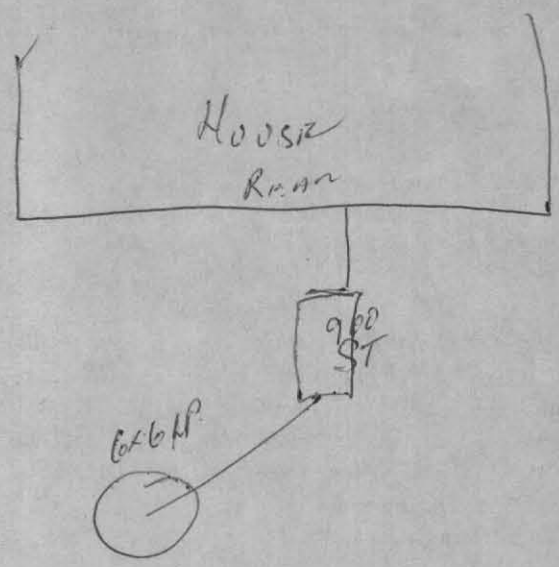
Permission is hereby granted Mac Gress to construct (X) or repair ( ) an Individual Sewage Disposal System at Potwine Lane as shown on the application for Disposal Works Construction Permit No. 64-24

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 8-19-64

CEDrake — Board of Health

1 POTWINE LANE



BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-38 Date 11-10-64 Fee 3.00 Date Rec'd. 11-10-64 By CEDe

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

Location—Address Potwine Lane or Lot No. —

Owner Robt Adair Address Potwine Lane

Contractor Self Address

Type of Building Dimensions Size Lot

Dwelling—No. of Bedrooms 2 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 750 gallons Dimensions: L W D

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

Disposal Bed—No. 1 Diameter Depth below inlet Total leaching area 450 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 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 Clay Depth to Ground Water

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 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.

Robert Adair
Owner or builder — date

Application Approved by Drake Aux. System for Apt. — date 10-20-64

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 (X) or repaired ( ) by R. Adair (INSTALLER) at Potwine Ln has 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. 38-64 dated 11-10-64

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

DATE ~~11-10-6~~ 10-20-65 Inspector CE Drake

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-38

Permission is hereby granted Robert Adair to construct (X) or repair ( ) an Individual Sewage Disposal System at Potwine Lane as shown on the application for Disposal Works Construction Permit No. 64-38

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 11-10-64

CE Drake
Board of Health

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 72-21 Date Aug. 17, 1972 Fee $3.00 Date Rec'd. 8/17/72 By dgf

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

Location—Address Potwine Lane or Lot No. #3)South Side-east of present structure

Owner E. J. Miller Address North Pleasant St.

Contractor " Address

Type of Building Dwelling Dimensions 25 x 46' Size Lot over 30,000 sq. ft.

Dwelling—No. of Bedrooms 3 Expansion Attic (no) Garbage Grinder (yes)

Other No. of persons Showers (2)

Other fixtures

Town Water? yes Type of Well

Design Flow 50 gallons per person per day. Total daily flow 300 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L 8 W 4 D 4½

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

Disposal Bed—No. 1 Diameter 10x30 Depth below inlet Total leaching area 500 sq. ft.

Dry Well—No. Diameter Depth below inlet Dimensions: x x

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

(Depth of Soil Line Below finished grade at foundation)

Percolation Test Results Performed by HAROLD MELLIN RPE Date 8-17-72

Test Pit No. 1 2 minutes per inch Depth of Test Pit 36"

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

Description of Soil CLAY - GRAVEL FILL Depth to Ground Water NOT FOUND 9-12-72 at 7'

Will *disposal area* be filled? YES 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.) See Att.

AGREEMENT: The undersigned agrees to construct the aforedescribed 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.

Edward J Miller Aug 17 1972
Owner or builder date

Application Approved by C E Drake Jr. * SYSTEM TO BE IN FRONT YARD. " " " " FILL GRAVEL 9-13-72
date

Application Disapproved *for the following reasons:* SYSTEM INSTALL TO GRADE AS SHOWN ON ATTACHED GRADE SHEET

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

CERTIFICATE OF COMPLIANCE

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed (X) or repaired ( ) by RiverDe. Exc. (INSTALLER) at Lot #3 S. Potwine has 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. 72-21 dated 9-13-72

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

DATE 8-23-73 Inspector C E Drake

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

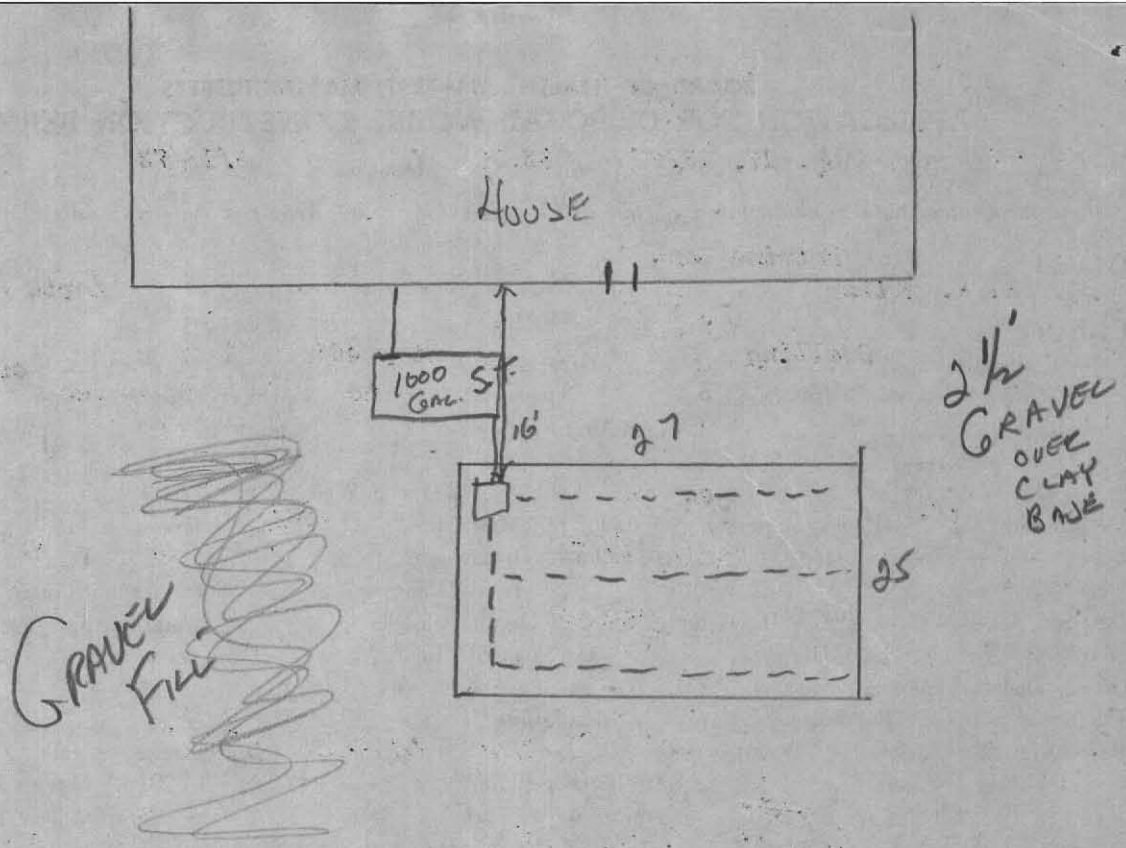
DISPOSAL WORKS CONSTRUCTION PERMIT

No. 72-21

Permission is hereby granted E. J. Miller to construct (X) or repair ( ) an Individual Sewage Disposal System at Potwine Lane Lot #3 South as shown on the application for Disposal Works Construction Permit No. 72-21

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 9-12-72 See attached sheets C E Drake Jr.
Board of Health


HOUSE
1000 GAL. S
16'
27
25
2½' GRAVEL OVER CLAY BASE
GRAVEL FILL

Richard H. Blow, Sr.
Real Estate Broker
162 South East. St.
AMHERST, MASS. 01002

FROM THE DESK OF:

Mr. Richard H. Blow, Sr.
162 South East Street,
Amherst, Ma., 01002

Dear Sir;

The following is a report of the percolation test conducted by me on August 17,1972 at Lot No. 3 , Potwine Lane, Amherst, Mass.

The aforementioned tests were conducted under the applicable provisions of Article XI of the State Sanitary Code and were observed by Mr. Karol Wisnieski of the Amherst Board of Health. The tests were conducted at the approximate location of the proposed subsurface absorption field, in fine gravel fill which had been compacted in layers mechanically.

The following data was obtained from the tests;

Depth of test hole------36"
Length of test--------- 15 min.
Prefilled and soaked test hole for ten minute period commencing at 2:00 PM

Time	Distance, Water to ref. stk.	Difference
2:16	18.75"	
2:21	24.25"	5.50"
2:26	26.75"	2.50"
2:31	27.50"	0.75"

15 min avge.-0.58"

It is my recommendation that a sub-surface absorption field with a minimum area (total bottom trench area) of 500 sq. ft. and a 1250 gal. capacity septic tank be included in the design of the disposal system.

Very truly yours
Harold E. Mellin
Harold E. Mellin, RPE
Reg..No. 15980

Harold E. Mellin

COMMONWEALTH OF MASSACHUSETTS
HAROLD EUGENE MELLIN
REGISTERED PROFESSIONAL ENGINEER

SYSTEM IN FRONT OF HOUSE
GRADES ACCORDING TO ATTACHED SHEET FROM R.H. BLOW
CE Dub. 9-13-72

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 70-14 Date July 22 1970 Fee 3.00 Date Rec'd. Jul 22 1970 By CEA

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

Location—Address Pot Wine La. or Lot No. 1

Owner Richard H Brow Sr Address So East St

Contractor Edward J. Miller Address No Pleasant

Type of Building _____ Dimensions _____ Size Lot 3/4 Acre

Dwelling—No. of Bedrooms 3 Expansion Attic (X) Garbage Grinder (No?)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? Yes Type of Well _____

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

Septic Tank—Liquid capacity 900 gallons Dimensions: L_____ W_____ D_____

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

Disposal Bed—No. 1 Diameter 15x40 Depth below inlet _____ Total leaching area 600 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 C.E. Dailey Date 7-23-70

Test Pit No. 1 49 minutes per inch Depth of Test Pit 42"

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

Description of Soil Sand-Clay Depth to Ground Water 36"

Will *disposal area* be filled? Yes 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 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.

~~Excess~~ EXISTING SOIL TO BE REMOVED TO DEPTH OF 36" REPLACE WITH COARSE GRAVEL SYSTEM TO BUILT ON TOP OF IT.

* Richard H. Brow Sr. 7/22/70
Owner or builder date

Application Approved by C.E. Dailey 7-23-70
BOARD 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

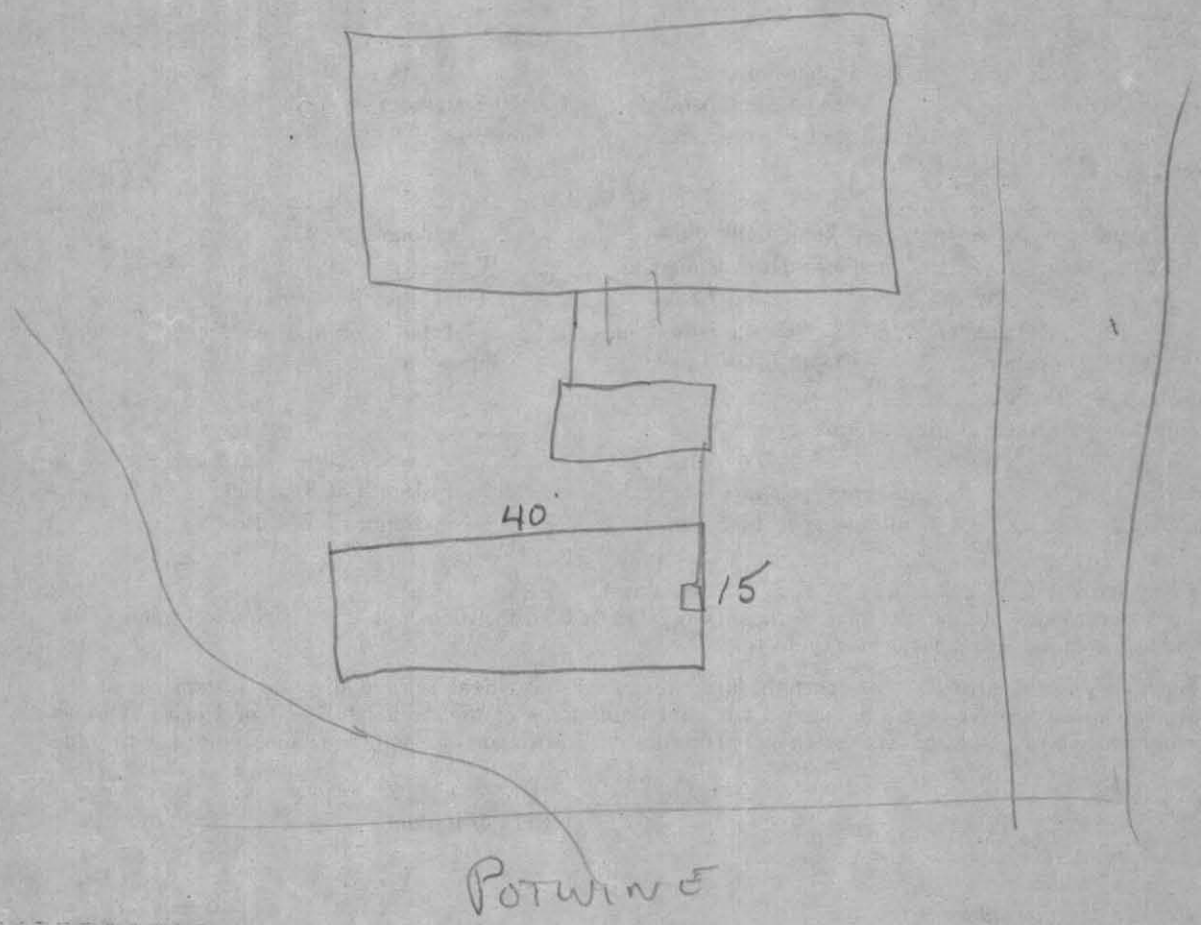
No. 70-14

Permission is hereby granted Richard H. Brow Sr. to construct (X) or repair ( ) an Individual Sewage Disposal System at Lot #1 Pot Wine Lane as shown on the application for Disposal Works Construction Permit No. 70-14

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 July 24, 1970

C.E. Dailey Jr.
Board of Health


40'
15
POTWINE

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 74-36 Date MAY 27 1974 Fee $3.00 Date Rec'd. MAY 30, 1974 By CED

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

Location—Address Potwine Lane or Lot No. 5,6,7,4

Owner John Rogalski Address Belchertown Road

Contractor KARL'S EXC. Address River Dr HADLEY

Type of Building _____ Dimensions _____ Size Lot 159,000 ± Sq ft

Dwelling—No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder (NO)

Other _____ No. of persons _____ Showers ( )

Other fixtures _____

Town Water? Yes Type of Well _____

Design Flow 50 gallons per person per day. Total daily flow 300 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L_____ W_____ D_____

Disposal Trench—No. _____ Width ~~12.5'~~ x 40' Total Length _____ Total leaching area ~~500~~ sq. ft.

Disposal Bed—No. 1 ~~Diameter~~ ~~10 x 30~~ Depth below inlet 1' Total leaching area ~~300~~ 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 Frederick A Filios Soil Scientist Date Apr. 24, 1974

Test Pit No. 1 4.8 minutes per inch 30" Depth of Test Pit 7'

Test Pit No. 2 7.8 minutes per inch 42" Depth of Test Pit 42"

Description of Soil See Attachment Depth to Ground Water None at 7'

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 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.

John Rogalski 5-28-74
Owner or builder date

Application Approved by C.E. Dahlen after Board of Health review. MUST BE INSTALLED ACCORDING ATTACHED PLANS. 5-30-74
date

Application Disapproved *for the following reasons:*
ANY DEVIATION FROM APPROVED PLANS WILL VOID ~~PERMIT~~. Fill must compacted

---

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

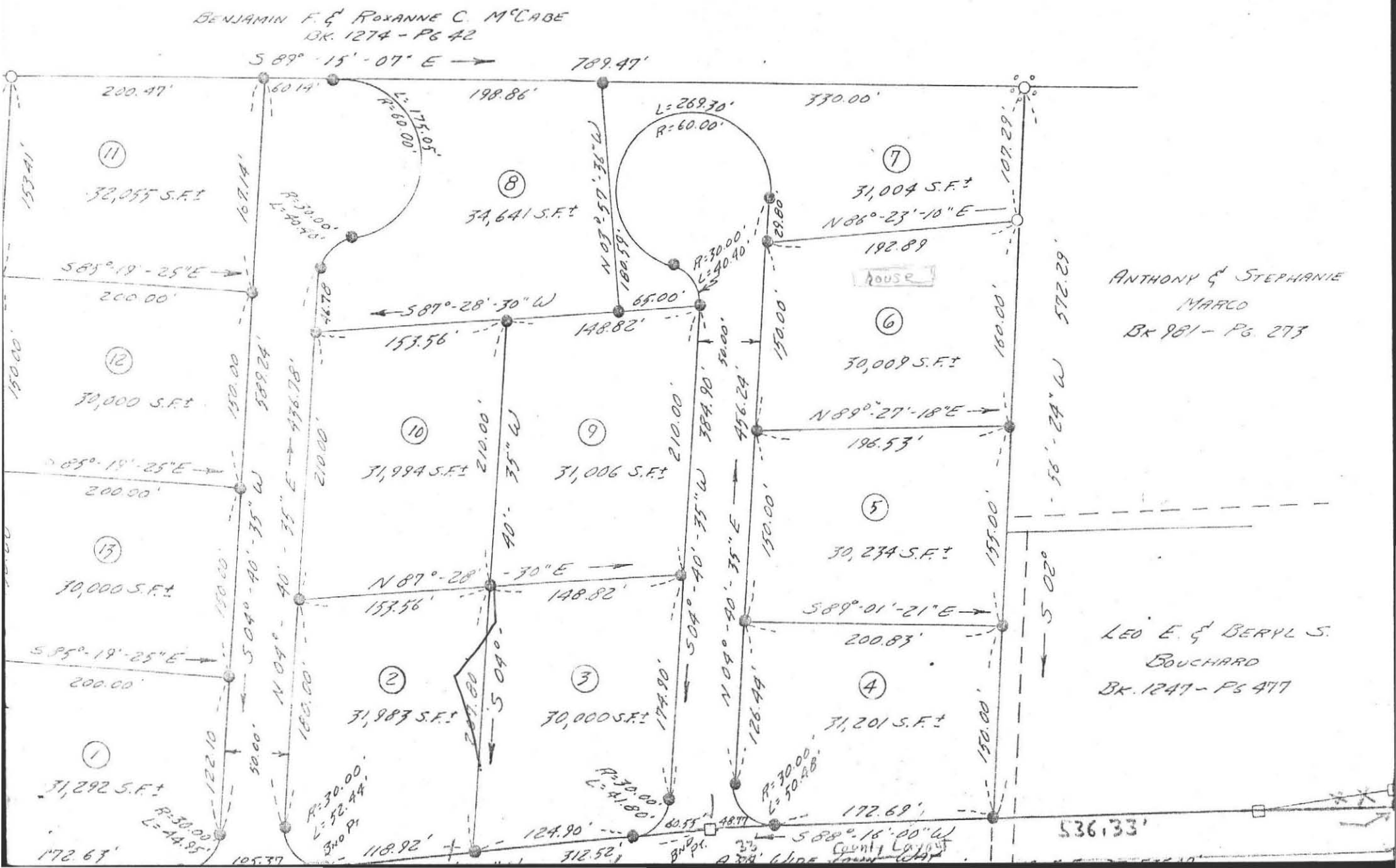
No. 74-36

Permission is hereby granted JOHN ROGALSKI to construct (X) or repair ( ) an Individual Sewage Disposal System at LOTS 4,5,6,7 POTWINE LANE (No. Side) as shown on the application for Disposal Works Construction Permit No. 74-

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.

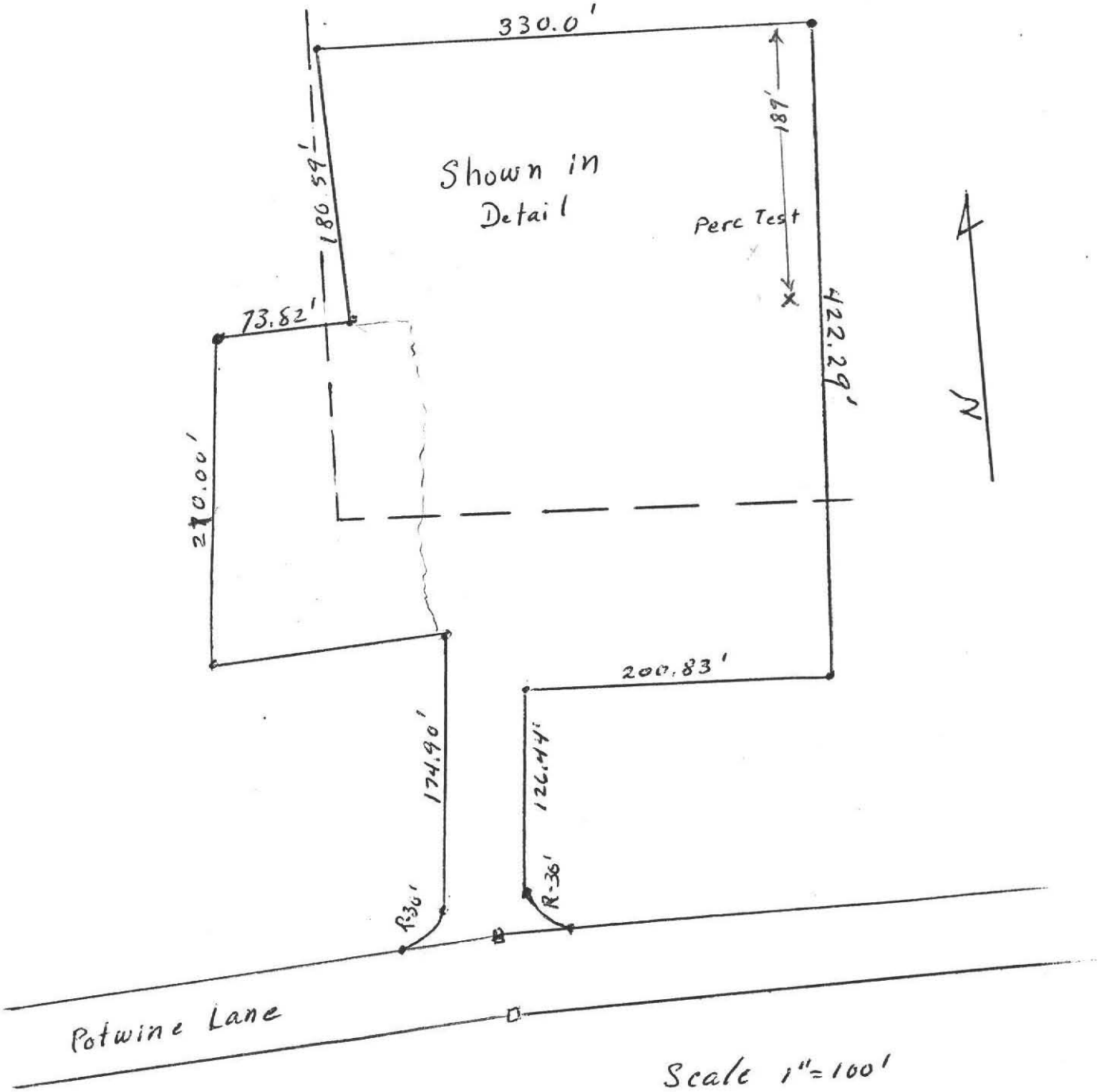
DATE MAY 30, 1974

C.E. Dahlen
for Board of Health


BENJAMIN F. & ROXANNE C. McCABE
BK. 1274 - PG 42
S 89° 15' - 07" E
789.47'
200.47'
60.14'
198.86'
330.00'
L=175.05'
R=60.00'
L=269.30'
R=60.00'
11
32,055 S.F.±
8
34,641 S.F.±
7
31,004 S.F.±
N 86° - 23' - 10" E
192.89
HOUSE
S 85° - 19' - 25" E
200.00'
S 87° - 28' - 30" W
153.56'
148.82'
65.00'
12
30,000 S.F.±
10
31,994 S.F.±
9
31,006 S.F.±
6
30,009 S.F.±
N 89° - 27' - 18" E
196.53'
13
30,000 S.F.±
5
30,234 S.F.±
N 87° - 28' - 30" E
153.56'
148.82'
S 89° - 01' - 21" E
200.83'
2
31,987 S.F.±
3
30,000 S.F.±
4
31,201 S.F.±
1
31,292 S.F.±
172.63'
124.90'
312.52'
118.92'
105.37'
172.63'
536.33'
S 88° - 16' - 00" W
ANTHONY & STEPHANIE MARCO
BK 981 - PG. 273
LEO E. & BERYL S. BOUCHARD
BK. 1247 - PG 477
County Layout

PLAN OF Land

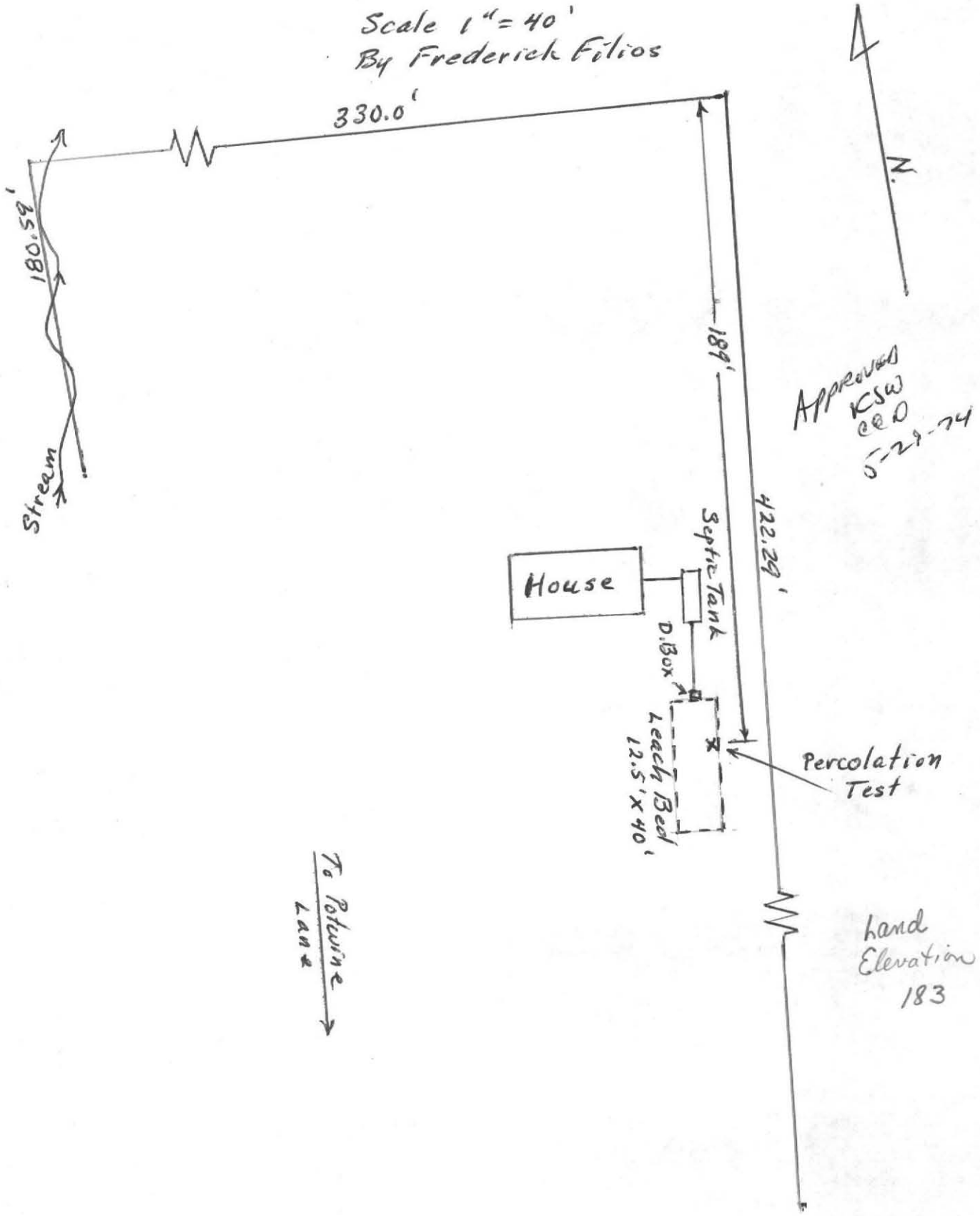
for John Rogalski
of Belchertown Rd
Amherst, Mass.

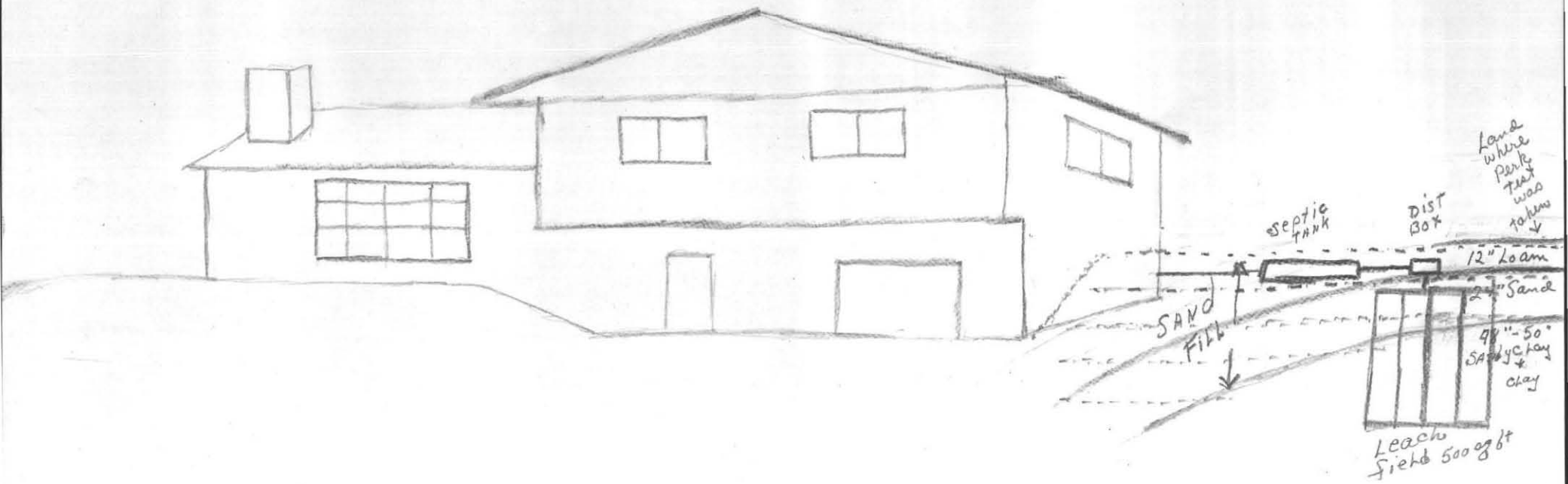


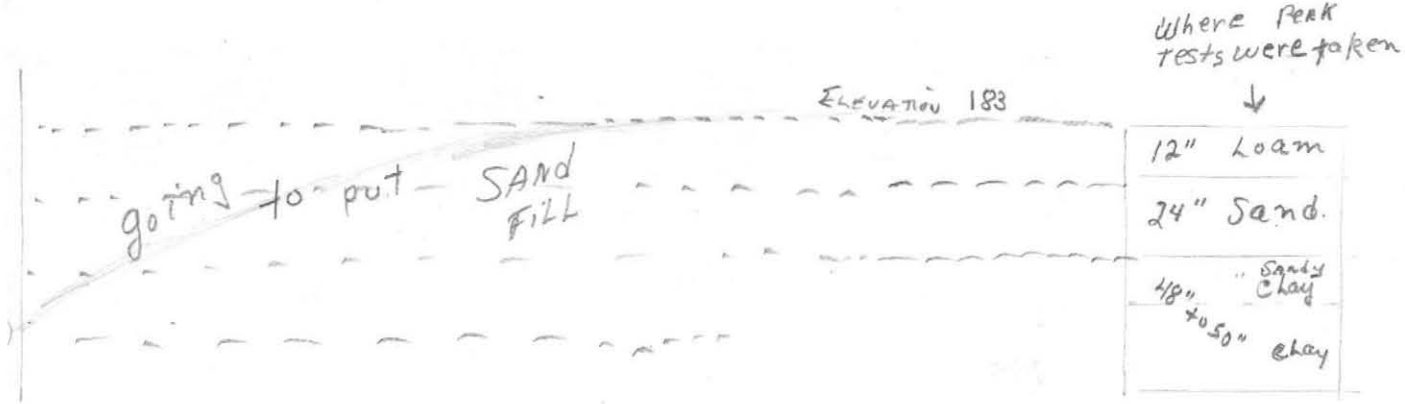
PLAN SHOWING SEWAGE DISPOSAL (DETAIL)

for

John Rogalski
at Potwine Lane
Amherst Mass.
Scale 1" = 40'
By Frederick Filios







going to Strip the Loam
going to Put in Sand
FILL approx 2½-3 ft. where
the dotted Lines are.

Cover Sand fill Later
with 1 ft of Loam.

Approved
CED
KSW
5-29-74

First Perk Test 4.8
Second Perk test 7.8

DEEP SOIL LOGS

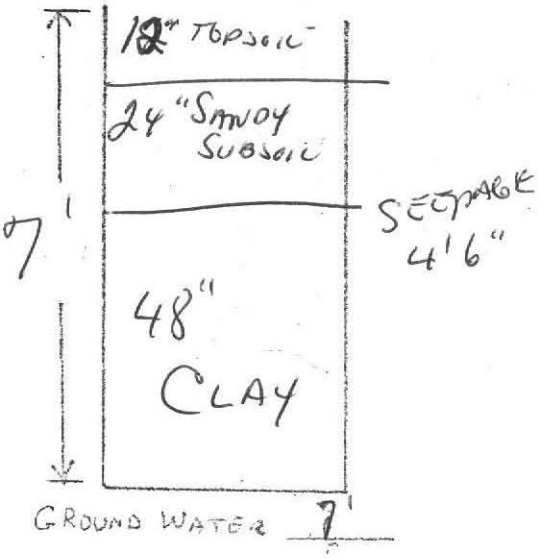
OWNER J ROGALSKI

DATE 4/23/74

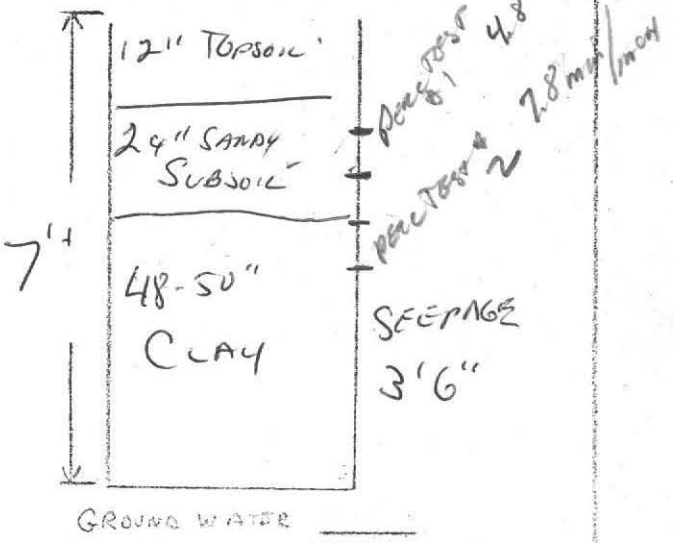
LOCATION POTWINE LANE (REAR)

OBSERVER DRAKE

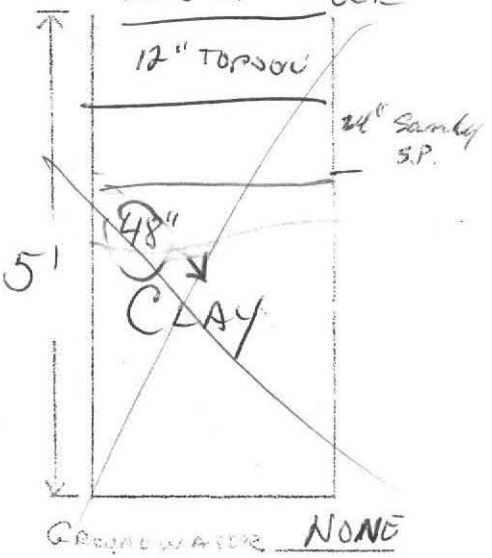
NORTH HOLE



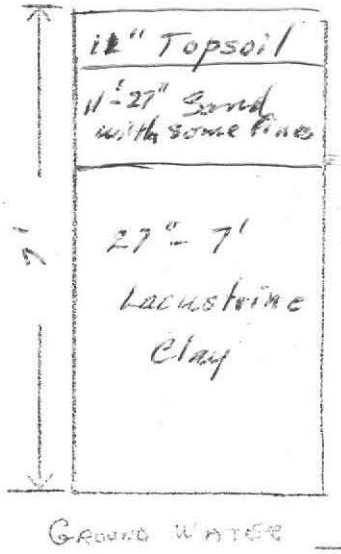
SOUTH HOLE



WEST HOLE



Middle St - Mr. Blow Tfilies



BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 72-16 Date May 24, 1972 Fee 3 Date Rec'd. May 24 By CEO

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

Location—Address Potwine Lane of Lot No. 2

Owner E. J. Miller Address N. Pleasant St.

Contractor " Address

Type of Building 2 story Wooden Dwelling Dimensions 50'x28' Size Lot 180'± x 120'±

Dwelling—No. of Bedrooms 4 Expansion Attic ( ) Garbage Grinder (✓)

Other No. of persons Showers (✓)

Other fixtures

Town Water? Yes Type of Well —

Design Flow 30 gallons per person per day. Total daily flow 300 gallons

Septic Tank—Liquid capacity 1250 gallons Dimensions: L 6'6" W 5' D 5'4"

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

Disposal Bed—No. 3 Diameter 24" Depth below inlet 6" Total leaching area 600 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 Harold E. Mellen Date 5/18/72

Test Pit No. 1 2 minutes per inch (6¼" [illegible]) Depth of Test Pit 30"

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

Description of Soil Sandy Gravel Depth to Ground Water 30"

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 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.

✓ Edward J. Miller

Owner or builder date

* MAY BE APPROVED ONLY IF CURTAIN DRAIN INSTALLED TO LOWER GROUND WATER FOUND AT 30" IN ACCORDANCE WITH PREVIOUS RULING

Application Approved by CE Dahlgren date 6-14-72

*See Sketch on reverse side

Application Disapproved *for the following reasons:*

REGARDING LOT #3 ADJACENT

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

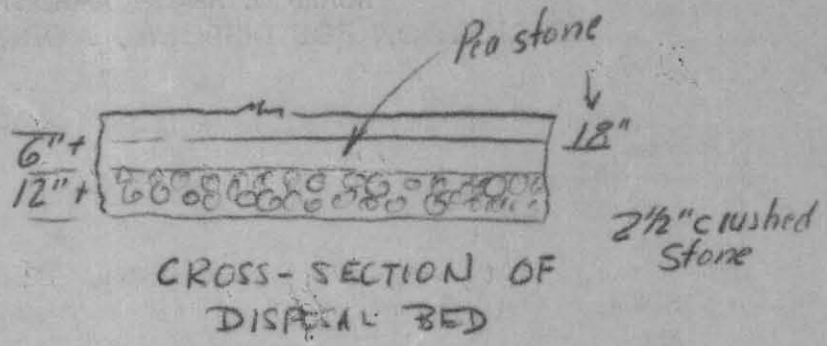
No. 72-16

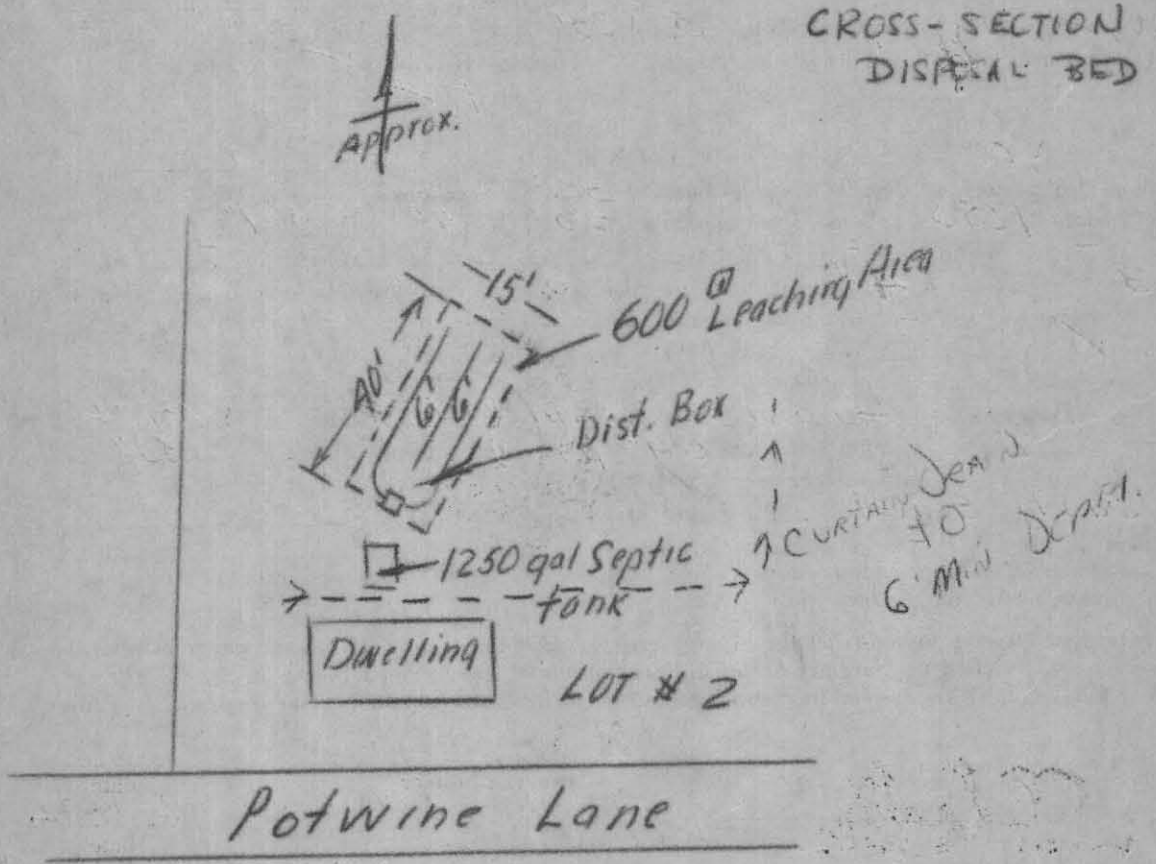
Permission is hereby granted E. J. Miller to construct (X) or repair ( ) an Individual Sewage Disposal System at Lot #2 North Side Potwine Lane as shown on the application for Disposal Works Construction Permit No. 72-16

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 June 14, 1972

CE Dahlgren
Board of Health


Pea stone
18"
6"+
12"+
2½" crushed Stone
CROSS-SECTION OF DISPOSAL BED


Approx.
15'
600 □ Leaching Area
40'
6'
6'
Dist. Box
1250 gal Septic tank
Curtain Drain to 6' Min Depth
Dwelling
LOT # 2
Potwine Lane

No. 82-7 FEE $90

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town OF Amherst

Application for Disposal Works Construction Permit

COMMONWEALTH OF MASSACHUSETTS FREDERICK FILIOS, R.S. 688

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

Potwine Lane (Location - Address) 3 (or Lot No.)

Eric Walgren (Owner) Kreechaus. (Installer) 140 Gull Road (Address) Belchertown (Address)

Not recorded to date X Into to follow.

Type of Building Size Lot 37,265 Sq. feet

Dwelling — No. of Bedrooms 2 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 220 gallons.

Septic Tank — Liquid capacity 1500 gallons Length ..... Width ..... Diameter ..... Depth .....

Disposal Trench — No. ..... Width ..... Total Length ..... Total leaching area 86 sq. ft.

Seepage Pit No. 1 ~~Diameter~~ 12½ x 9 Depth below inlet 24" Total leaching area 112.5 sq. ft. Sides Bottom

Other Distribution box ( ) Dosing tank ( )

Percolation Test Results Performed by Frederick Filios Date Dec 14 1979

Test Pit No. 1 2 minutes per inch Depth of Test Pit 7½ Depth to ground water 7½'

Test Pit No. 2 ..... minutes per inch Depth of Test Pit ..... Depth to ground water .....

Description of Soil enclosed

Nature of Repairs or Alterations — Answer when applicable .....

Agreement:

The undersigned agrees to install the aforedescribed 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.

X Signed Eric Walgren Date 7-22-82

Application Approved By [signature] Date 7-22-82

Application Disapproved *for the following reasons:* .....

Date

Permit No. ..... Issued ..... Date

CHECK OR FILL IN WHERE APPLICABLE

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

OF .....

Certificate of Compliance

THIS IS TO CERTIFY, That the Individual Sewage Disposal System constructed ( ) or Repaired ( ) by ..... Installer

at .....

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. ..... dated .....

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

DATE ..... Inspector .....

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

No. 82-7 TOWN OF AMHERST FEE $90

Disposal Works Construction Permit

Permission is hereby granted Eric Walgren

to Construct (✓) or Repair ( ) an Individual Sewage Disposal System

at No. POTWINE LANE (Street)

as shown on the application for Disposal Works Construction Permit No. 82-7 Dated JUL 22, 1982

[signature] Board of Health

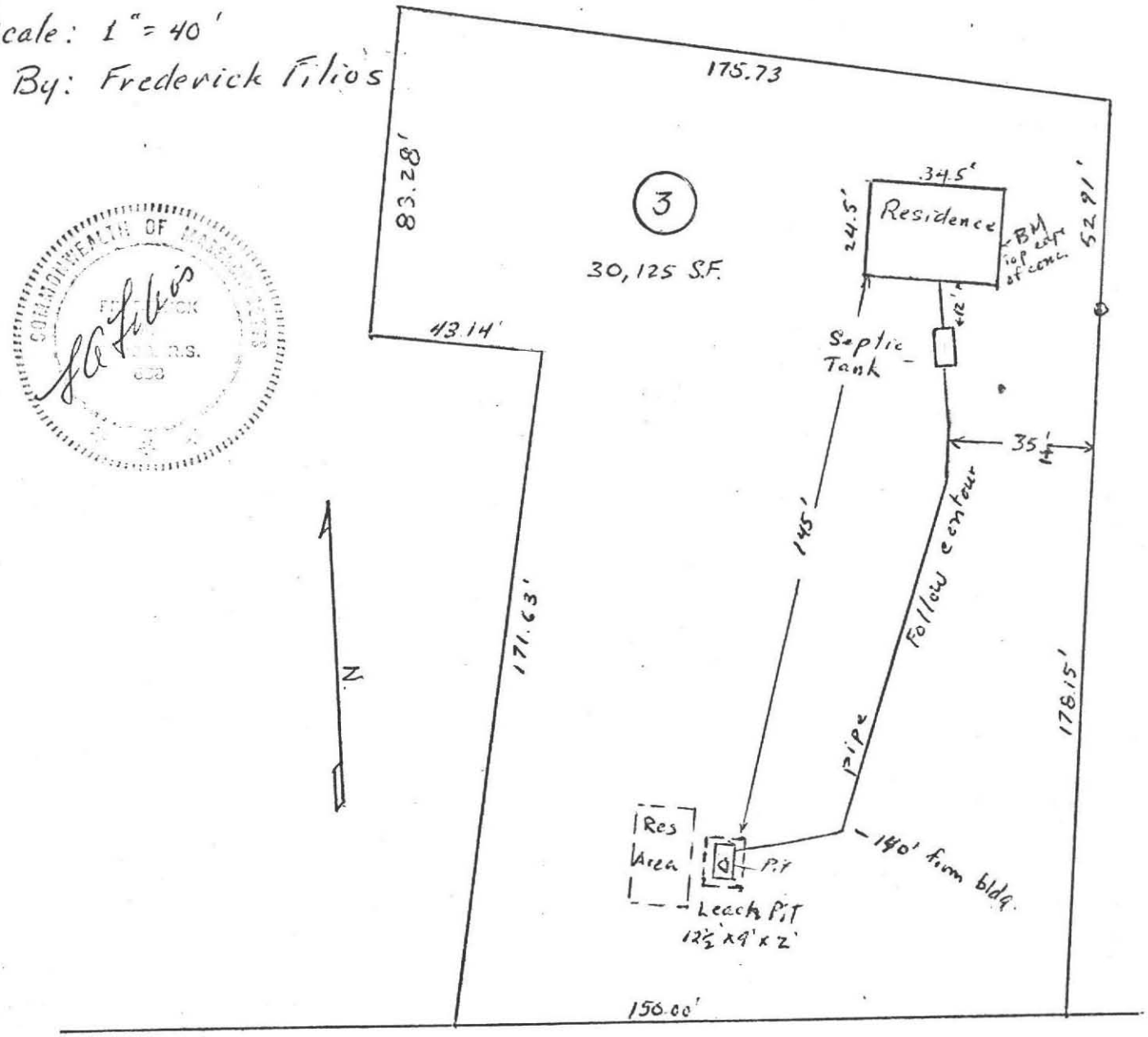
DATE July 22, 1982

FORM 1255 HOBBS & WARREN, INC., PUBLISHERS

PLAN SHOWING SEWAGE DISPOSAL

For: Eric Walgren
140 Gulf Road
Belchertown Ma

Scale: 1" = 40'
By: Frederick Filios



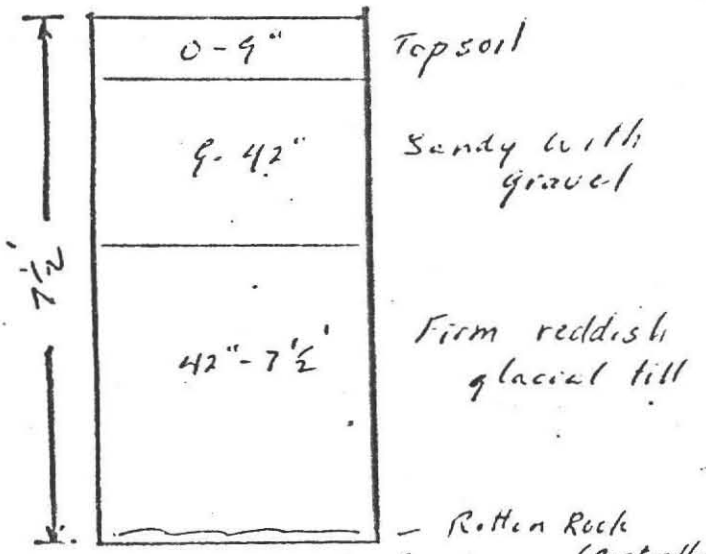
POTWINE LANE

DEEP SOIL LOGS

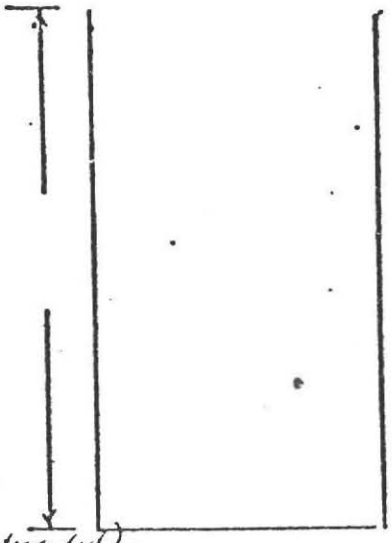
OWNER Eric Walgren ~~Jean Cook~~ Date Dec 14 1979

LOCATION Polwine Lane Lot # 3 OBSERVER F.A. Filios

Pit at Perc.

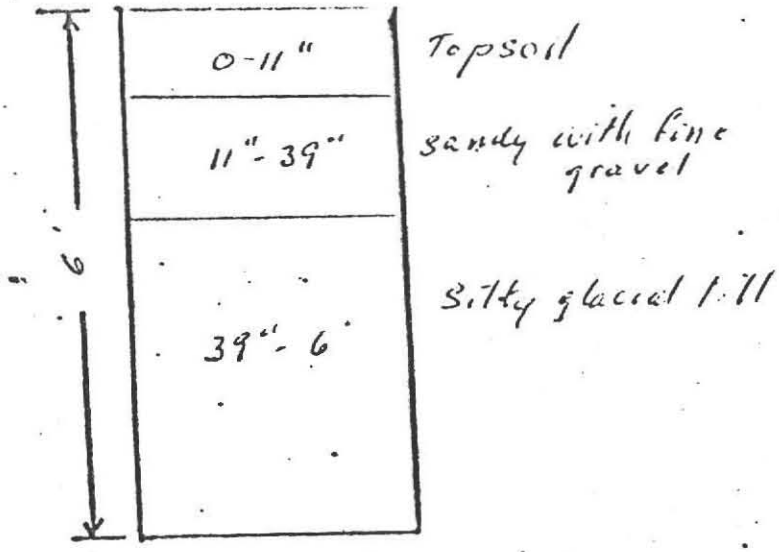


Ground Water 7½ feet

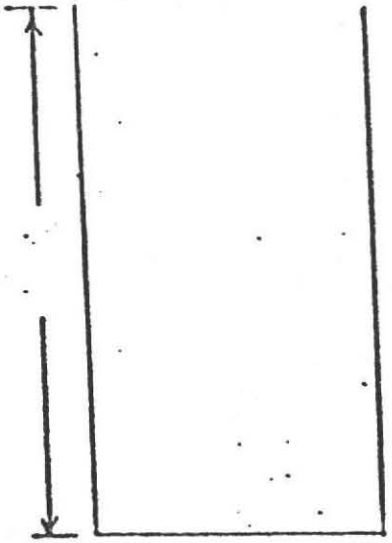


Ground Water _____

Alt. Pit



Ground Water Seeps 5'3"



Ground Water _____

Percolation Rate at 35"

2 minutes/inch

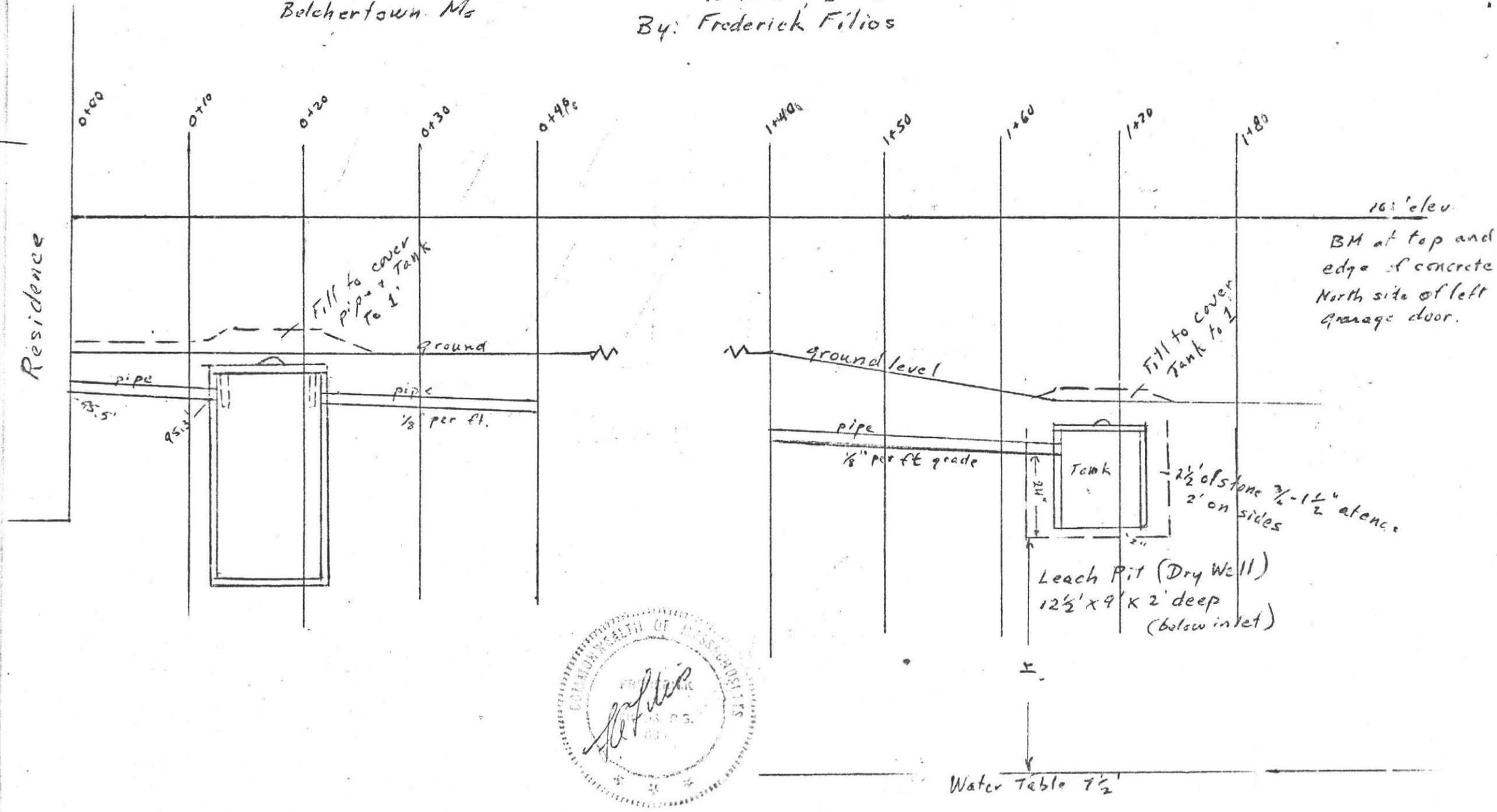
PROFILE OF SEPTIC SYSTEM

For: Eric Walgren
140 Gulf Rd
Belchertown Ma

Scale: Horizontal, 1" = 10'
Vertical 1" = 3'

By: Frederick Filios

July 1982



82-7

BOARD OF HEALTH

TOWN OF AMHERST, MASSACHUSETTS

So East St + Potwine

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner Edward Kriekhaus Address c/o Eric Walgren 140 Gulf Rd Belchertown 01007

Installer Howard Mann Address Belchertown

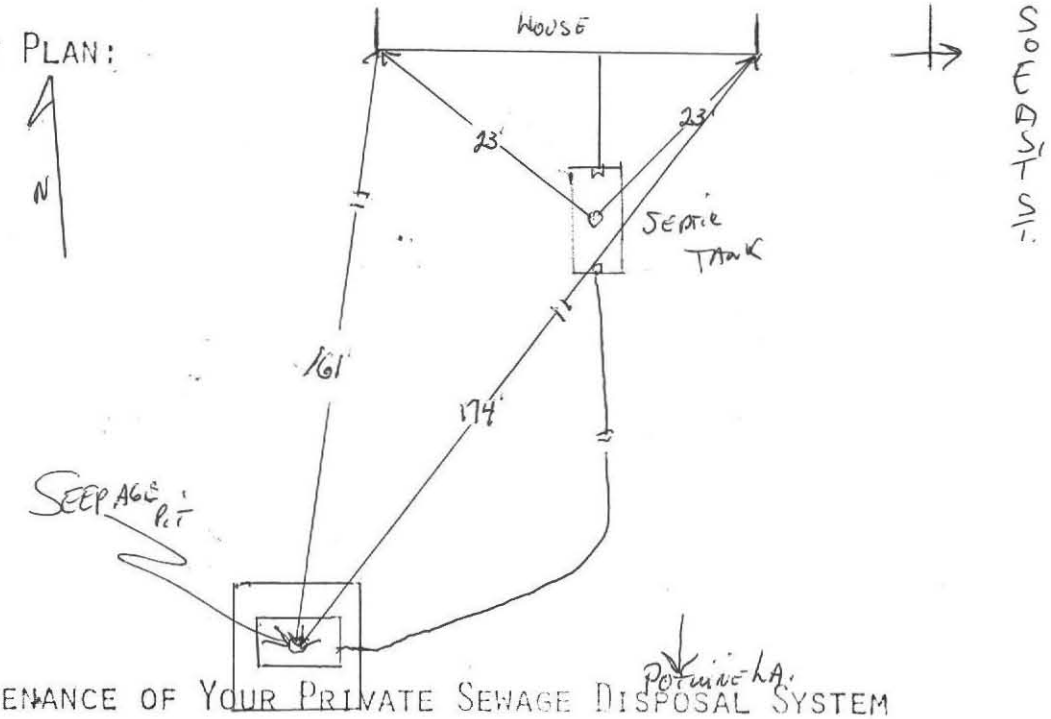
Date Installation Inspected and Approved 9/15/82

Description of System: Tank Capacity: 1000

Leach Field ( ) Bed (X) Seepage Pit (X) Square Feet:

Garbage Grinder Yes (X) No ( ) No. Bedrooms: 2 No. People 4

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.