

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

TO: THE BOARD OF HEALTH, AMHERST, MASS.

No. ....

John C. Hare of Leicester  
(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 Shay to be installed by

Carl Honeaney Harley  
(name) (address) (phone)

Builder is Charles S. Woodland Plumber is Stocambe

**Description of lot, building and fixtures as follows:**

Lot: Dimensions 129 x 489 Type of Soil Gravel Well or Town Water? Town

Distance to Town Sewer ..... Depth to Ground Water ..... Kind of Well .....

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

Building: Dimensions 34 x 52 No. Bedrooms 2 No. Occupants 2

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

Showers 1 Kitchen Sinks 1 Garbage Grinders .....

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 16, 1960 Charles S. Woodland  
(Signature of Applicant)

**PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM**

No. ....

John C. Hare 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 750 Gals. Liquid Capacity.

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

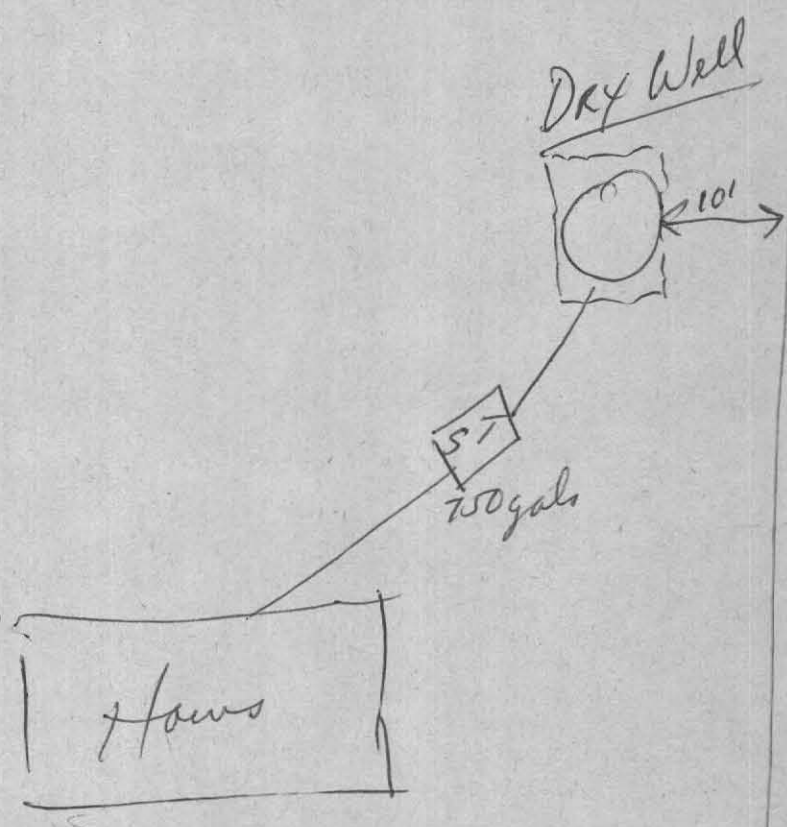
Dry well 64 ft. bottom area and 6 ft. below the inlet.

Other Dry Well 8x8x8 hole + cement blocks

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.

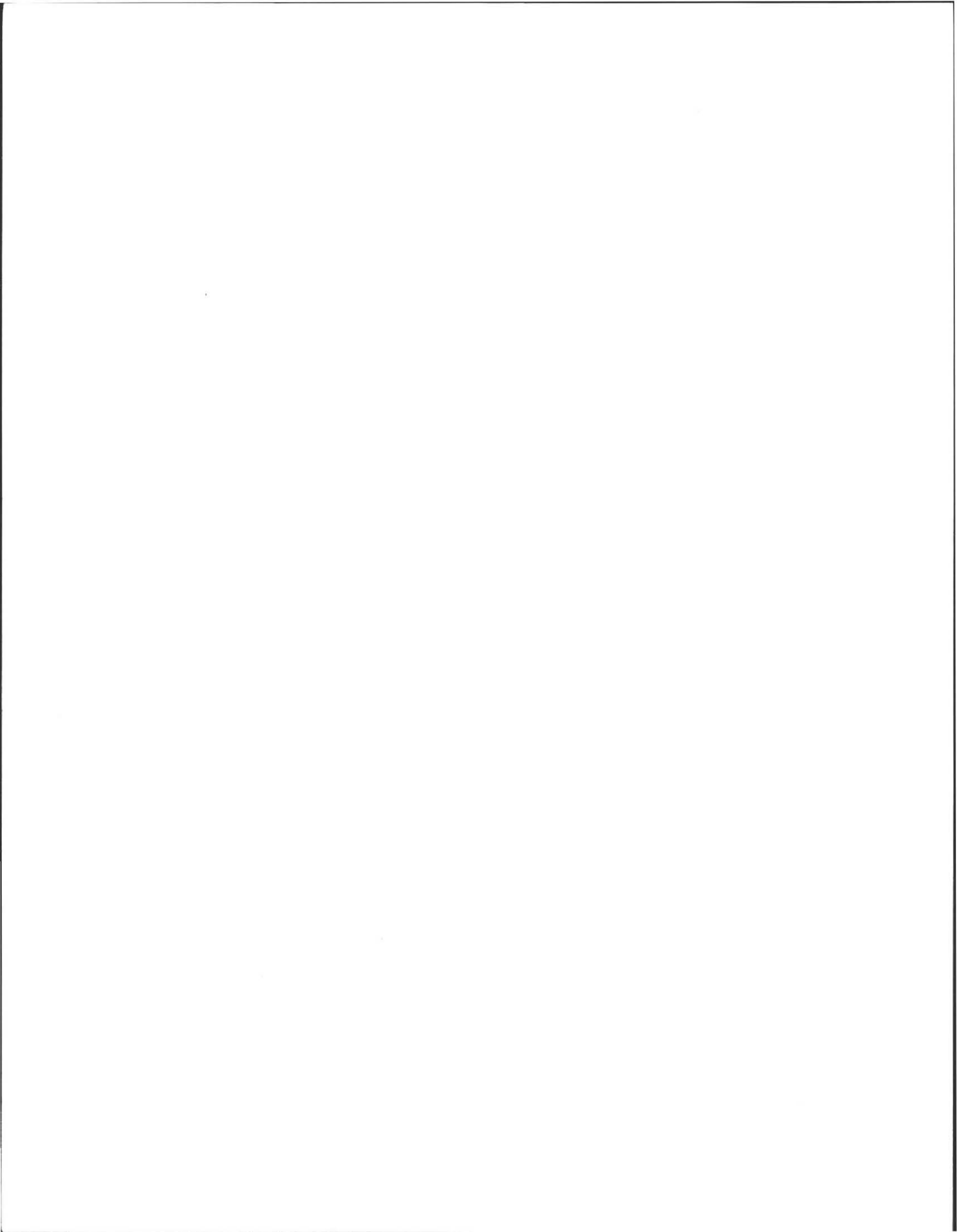
H. A. Siano Sept 16, 1960  
For the Board of Health date

Inspected ..... Approved OK



Shays St.

SEPTIC TANKS		3 1953	
NAME	ADDRESS	DATE	REMARKS
SCHOOL DEPT	SO AMHERST	7/16/53	REQUEST FOR SPECIFICATIONS - (SEE MAIN FILE) - STATE DEPT OF PUBLIC HEALTH FURTHER REQUIRES ① 1500 GALLON TANK ② USE OF BELY SPICOT TIE ONLY. 600 GALLON TANK 40' TIE.
PARSONAGE	SO AMHERST	8/11/53	600 GALLON TANK 100' TIE
LANGFORD	SO EAST ST	8/11/53	600 GALLON TANK 40' TIE
OWENS	HARKNESS RD	8/26/53	600 GALLON TANK 100' TIE
WENTWORTH	WILKWOOD LANE	9/23/53	600 GALLON TANK 40' TIE
ALDRICH	LAKE POMEROY	9/23/53	600 " " 40' "
LIVESTON	SWAY ST.	10/14/53	600 " " 60' "
MOAT CONERY	REO GATE	11/9/53	600 " " 75-80'
HOPKINS	LAKE WEST	" "	" " 40-50'
	CANTON AVE	11/22/53	600 " " 50'



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

No. 7-64 Date April 6 '64 Fee \$2.00 Date Rec'd. 4-10-64 By CEP

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

Location—Address Shays St or Lot No. \_\_\_\_\_

Owner Fred W. Steinbeck Address 30 EAST ST

Contractor Same Address 30 EAST ST

Type of Building Residence Dimensions 67 x 30 Size Lot 20,500

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

Other \_\_\_\_\_ No. of persons 8 Showers (✓)

Other fixtures \_\_\_\_\_

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 \_\_\_\_\_ sq. ft.

Disposal Bed—No. 1 Diameter 20 x 30 Depth below inlet \_\_\_\_\_ Total leaching area 600 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 Drebe Date 4-7-64

Test Pit No. 1 10" minutes per inch Coarse Depth of Test Pit 40"

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

Description of Soil GROUND WATER AT 20" Depth to Ground Water 20"

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.)

AGREEMENT: The undersigned agrees to construct the aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by CE Drebe Owner or builder Fred W. Steinbeck date 4-7-64

Application Disapproved for the following reasons: Top Soil + Subsoil TO BE REMOVED TO DEPTH OF SAND & GRAVEL. MINIMUM OF 3' OF SAND & GRAVEL TO BE BROUGHT IN TO STAY 4' ABOVE GROUND WATER date 4-7-64

**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. 7-64 Permission is hereby granted Fred W. Steinbeck to construct (X) or repair ( ) an

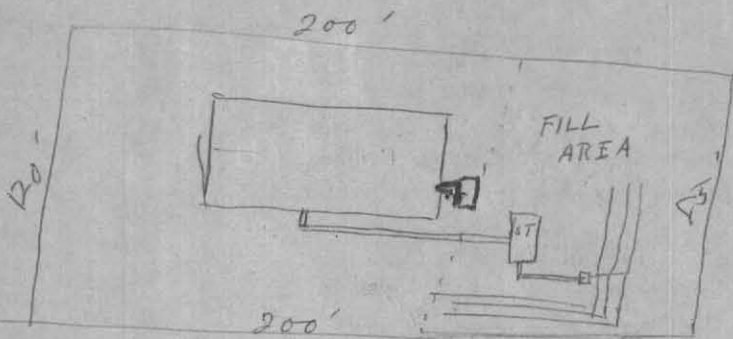
Individual Sewage Disposal System at SHAYS ST.

as shown on the application for Disposal Works Construction Permit No. 7-64

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.

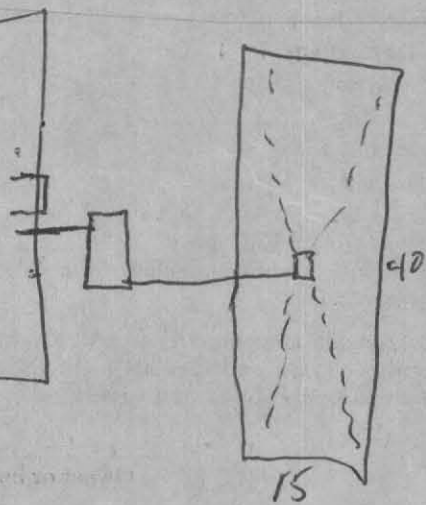
DATE 4-7-64 Board of Health

200'



HOOSH

ST



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

No. 67-12 Date May 8, 1967 Fee \$3.00 Date Rec'd. 5/9/67 By \_\_\_\_\_  
 Check # 09006

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

Location—Address Shays Street or Lot No. \_\_\_\_\_

Owner Miss Florence Dwight Address Shays Street

Contractor Karl Konieczny Address Hadley

Type of Building \_\_\_\_\_ Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_

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

Other \_\_\_\_\_ No. of persons 2 Showers (1)

Other fixtures tub & closet

Town Water? yes Type of Well \_\_\_\_\_

Design Flow \_\_\_\_\_ gallons per person per day. Total daily flow \_\_\_\_\_ gallons

Septic Tank—Liquid capacity 600 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

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

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

Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: 3 x 4 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 \_\_\_\_\_ 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 afordescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by [Signature] The Mutual Plumbing & Heating Co.  
 Owner or builder

date May 8, 1967  
 date

Application Disapproved for the following reasons:

**BOARD OF HEALTH, AMHERST, MASSACHUSETTS**  
**CERTIFICATE OF COMPLIANCE**

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed ( ) or repaired ( ) by \_\_\_\_\_ at \_\_\_\_\_ has been constructed in accordance with the provisions of

INSTALLER

Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit No. \_\_\_\_\_ dated \_\_\_\_\_

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

DATE \_\_\_\_\_

Inspector \_\_\_\_\_

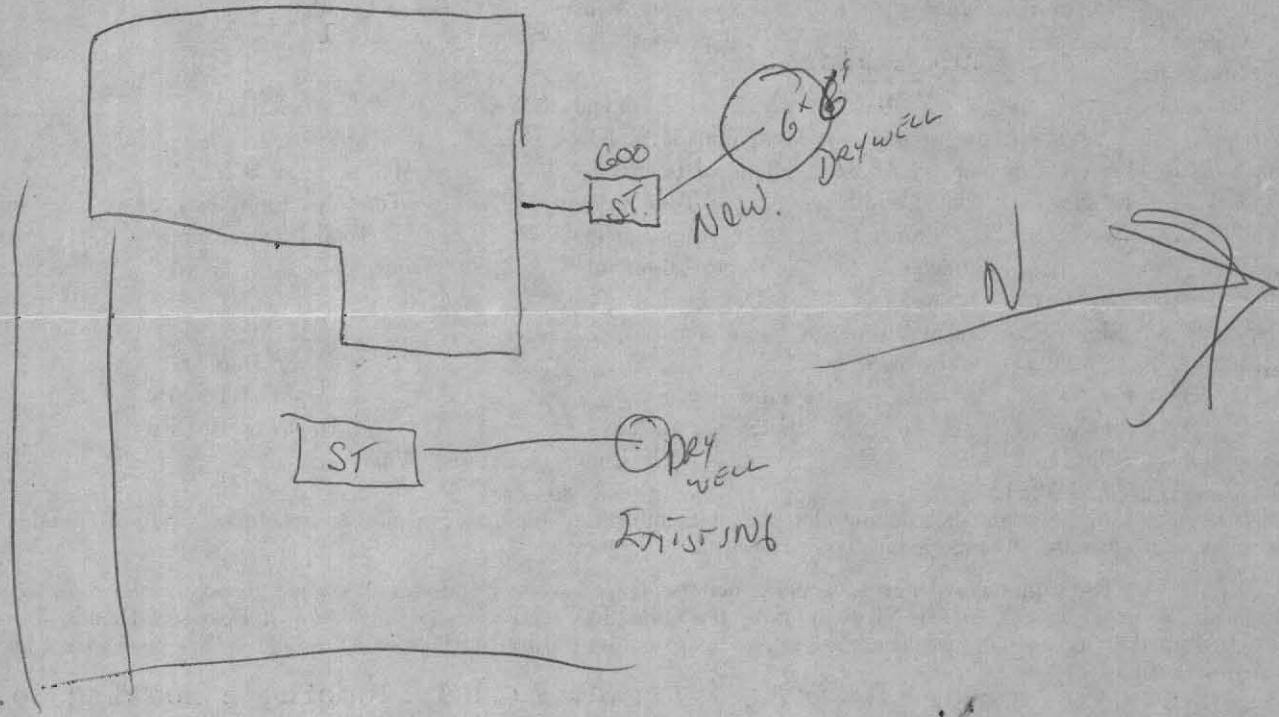
**BOARD OF HEALTH, AMHERST, MASSACHUSETTS**  
**DISPOSAL WORKS CONSTRUCTION PERMIT**

No. 67-12  
 Permission is hereby granted KARL KONIECZNY to construct (x) or repair ( ) an Individual Sewage Disposal System at SHAYS ST. DWIGHT as shown on the application for Disposal Works Construction Permit No. 67-12

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 May 9, 1967

[Signature]  
 Board of Health



SHAYS ST



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

No. 66-4 Date 3-23-66 Fee 3.00 Date Rec'd. 3-23-66 By [Signature]

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

Location—Address SHAYS ST. or Lot No. \_\_\_\_\_

Owner RICHARD DAVIS Address BAY RD.

Contractor \_\_\_\_\_ Address \_\_\_\_\_

Type of Building \_\_\_\_\_ Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_

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

Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( ) \_\_\_\_\_

Other fixtures \_\_\_\_\_

Town Water? YES Type of Well \_\_\_\_\_

Design Flow \_\_\_\_\_ gallons per person per day. Total daily flow 300 gallons

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

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

Disposal Bed—No. \_\_\_\_\_ Diameter 15x20 Depth below inlet \_\_\_\_\_ Total leaching area 300 sq. ft.

Dry Well—No. \_\_\_\_\_ Diameter 6 Depth below inlet 8 Dimensions: 6 x 8 x \_\_\_\_\_

Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( ) \_\_\_\_\_

(Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)

Percolation Test Results Performed by Drake Date \_\_\_\_\_

Test Pit No. 1 21 minutes per inch Depth of Test Pit 30"

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

Description of Soil Coast Bay Gravel Depth to Ground Water NOT FOUND

Will disposal area be filled? ? Cut down? ?

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

AGREEMENT: The undersigned agrees to construct the aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by [Signature] Richard Davis 3-23-66  
 Owner or builder 3-29-66  
 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 \_\_\_\_\_

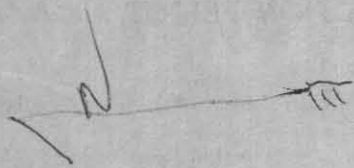
**BOARD OF HEALTH, AMHERST, MASSACHUSETTS**  
**DISPOSAL WORKS CONSTRUCTION PERMIT**

No. 66-4 Permission is hereby granted RICHARD DAVIS to construct (X) or repair ( ) an Individual Sewage Disposal System at SHAYS ST.

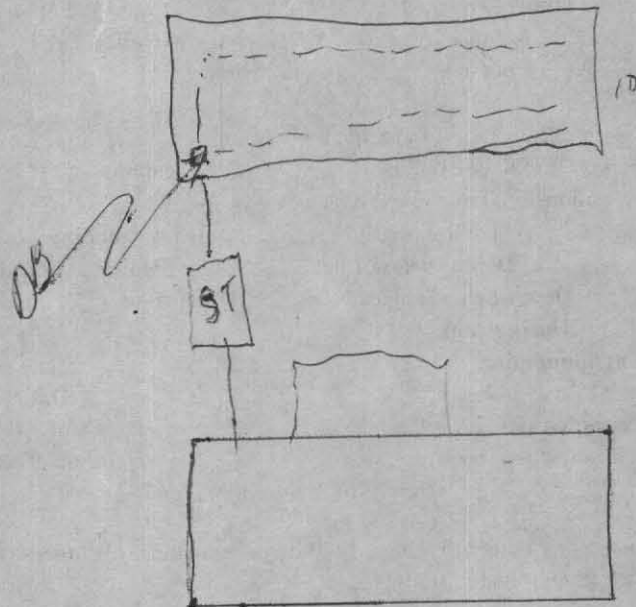
as shown on the application for Disposal Works Construction Permit No. \_\_\_\_\_

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 3-23-66 [Signature]  
 Board of Health



40



BOARD OF HEALTH  
AMHERST, MASS.

Applic. No. 4

APPLICATION TO CONSTRUCT, REPAIR, OR ALTER PRIVATE SEWAGE DISPOSAL SYSTEM

Must be completed and submitted to the Board of Health before a building is started or any system is constructed or altered.

Owner Wm Russell Address Shay St. Amherst mass Phone 8-5889

Builder Same Address Same Phone Same

System to be installed by same  
name, address, and phone

Location South East Lot no 5 Size 100 X 200  
street, subdivision, and lot no. width, depth

House - Dimensions 26 X 40 No. Bedrooms 3 No. Occupants ? Spec.

Plumbing fixtures - No. Toilets 1 No. Sinks 1 No. Lavatories 1

No. Showers \_\_\_\_\_ No. Bathtubs 1 Dishwasher no  
yes or no

Garbage Disposal no Auto. Washer no  
yes or no yes or no

Any in basement? no Others \_\_\_\_\_  
which

On reverse side make sketch of lot, show size, location of house, position of water service, and location of proposed disposal system.

To be approved:

Proposed septic tank size (must be cement) 500 Gal. liquid Capacity or more

Drainage system, type, and dimensions 150 ft. lead trench (300 sqft)

Date 5/27/58

Signed Wm Russell  
applicant

Do not fill in below

Site Survey Hill top light

Other \_\_\_\_\_

Approval of Plans

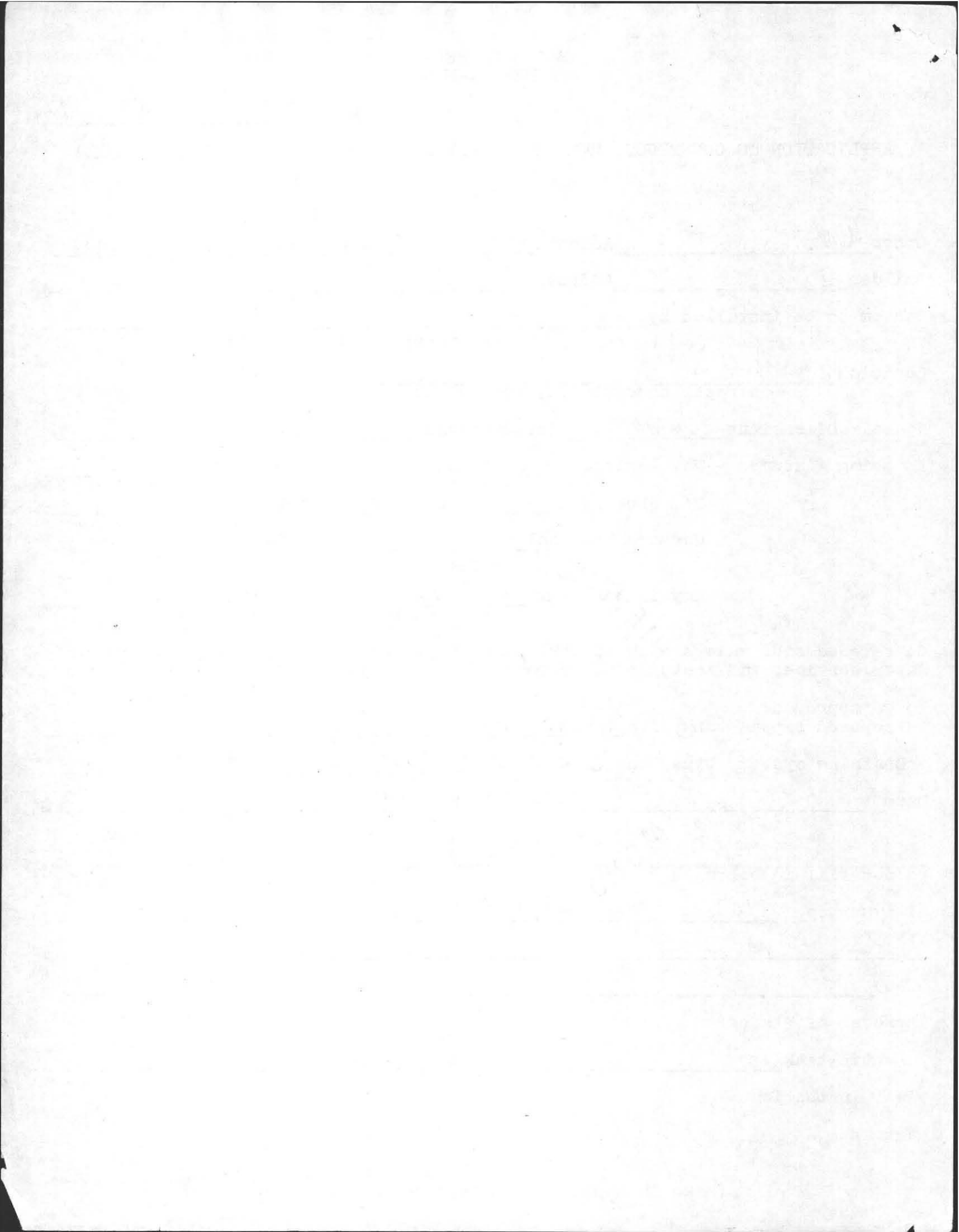
Septic tank \_\_\_\_\_ Disposal system \_\_\_\_\_

Final inspection

Remarks No Garbage grinder to be installed

Final Approval \_\_\_\_\_

(Make in Duplicate, keep one for your files)



BOARD OF HEALTH  
AMHERST, MASS.

Applic. No. 5

APPLICATION TO CONSTRUCT, REPAIR, OR ALTER PRIVATE SEWAGE DISPOSAL SYSTEM

Must be completed and submitted to the Board of Health before a building is started or any system is constructed or altered.

Owner Wm Russell Address Shay's St Amherst Mass Phone 3-5889

Builder Same Address Same Phone Same

System to be installed by Same Same  
name, address, and phone

Location South East Lot no 4 Size 100 X 200  
street, subdivision, and lot no. width, depth

House - Dimensions 24 X 39 No. Bedrooms 3 No. Occupants 7 Spec.

Plumbing fixtures - No. Toilets 1 No. Sinks 1 No. Lavatories 1  
No. Showers      No. Bathtubs 1 Dishwasher NO  
Garbage Disposal NO Auto. Washer NO  
yes or no yes or no

Any in basement? NO Others       
which

On reverse side make sketch of lot, show size, location of house, position of water service, and location of proposed disposal system.

To be approved:  
Proposed septic tank size (must be cement) 500 gal. Liquid Capacity or More  
Drainage system, type, and dimensions 150ft leach trench (200sqft)  
Date 5/27/58 Signed Wm Russell  
applicant

Do not fill in below

Site Survey Hill Top Light -

Other     

Approval of Plans  
Septic tank      Disposal system     

Final inspection

Remarks No Garbage grinder to be installed.

Final Approval       
(Make in Duplicate, keep one for your files)

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Phone

Address

City

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

TO: THE BOARD OF HEALTH, AMHERST, MASS.

No. ....

STEINBECK, FREDERICK W. of West A.  
(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 Sharp A. to be installed by

C. Kouiney  
(name) (address) (phone)

Builder is Steinbeck Plumber is Shojman

**Description of lot, building and fixtures as follows:**

Lot: Dimensions 100x160 Type of Soil Sandy fill Well or Town Water? Town

Distance to Town Sewer Mill Depth to Ground Water 6-7 ft Kind of Well \_\_\_\_\_

Will Lot be Graded? Yes By Filling or Removing Soil? Filling with sand & gravel

Building: Dimensions 26x50? No. Bedrooms 3 No. Occupants 4

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

Showers 1 Kitchen Sinks 1 Garbage Grinders Yes

Auto Dishwasher No Auto. Clotheswasher Yes in 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 Aug 11, 1960 Eleanor J. Steinbeck  
(Signature of Applicant)

**PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM**

F. W. Steinbeck 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. = 150 ft 2 ft Trench

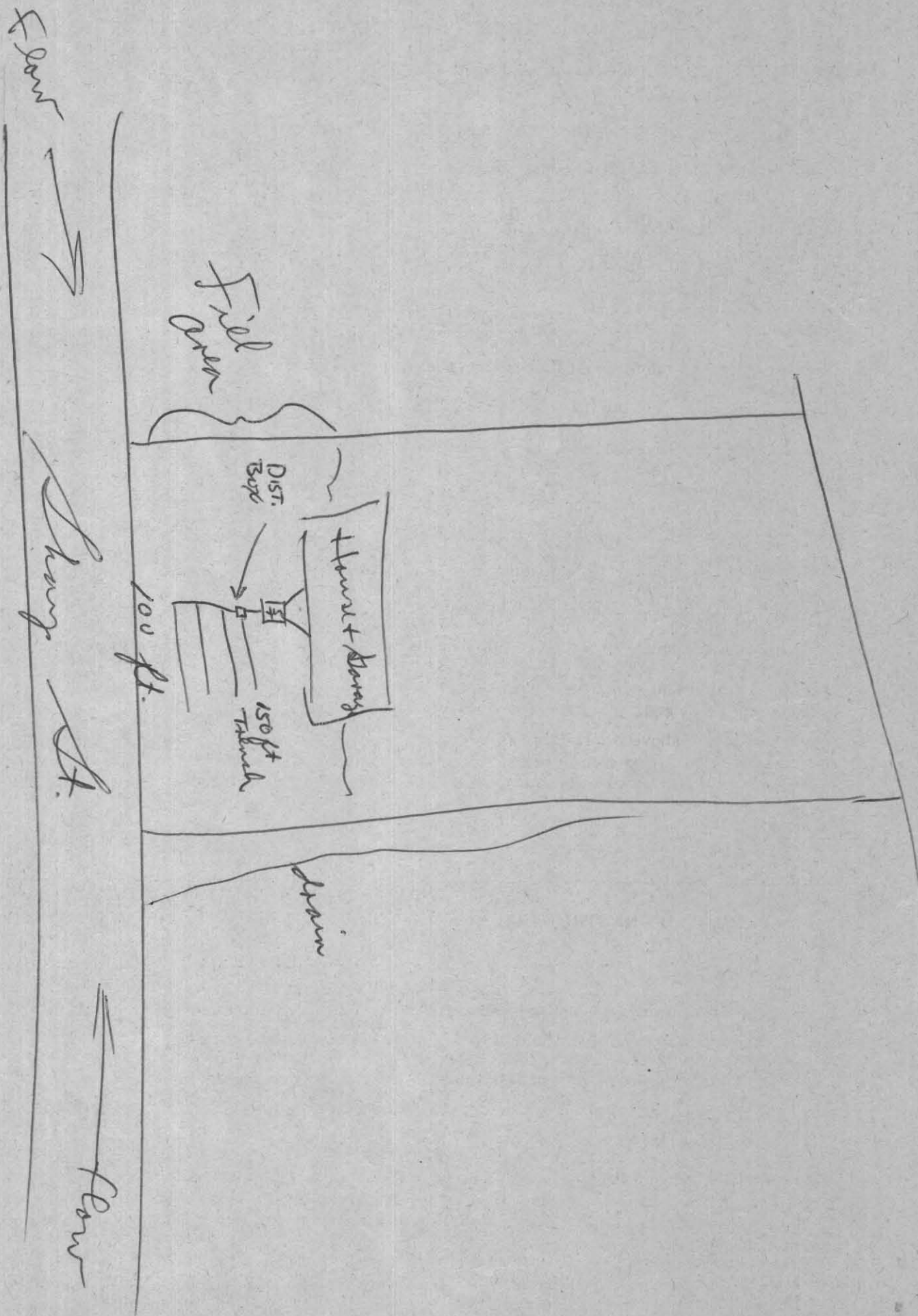
Dry well \_\_\_\_\_ ft. bottom area and \_\_\_\_\_ ft. below the inlet.

Other + Distribution 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.

E. A. Lino Aug 11, 1960  
for the Board of Health date

Inspected \_\_\_\_\_ Approved OK





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

No. 39 38-63 Date 7/16/63 Fee 3.00 Date Rec'd. 7/16/63 By F.A.S.

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

Location—Address Shays street or Lot No. \_\_\_\_\_

Owner Paul O. Smith Address Blue Hill Rd.

Contractor Henderson + Roberge Address Bay Rd.

Type of Building \_\_\_\_\_ Dimensions 41 X 28 Site Lot 140 X 145

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

Other \_\_\_\_\_ No. of persons 4 Showers ( )

Other fixtures 2 1/2 baths — auto washer

Town Water? yes Type of Well \_\_\_\_\_

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

Septic Tank—Liquid capacity 1200 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

Disposal Trench—No. 2 Width 21 Total Length 175 Total leaching area 350 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. 1 Dosing tank ( )

(Depth of Soil Line Below finished grade at foundation 12" - 18")

Percolation Test Results Performed by F. A. Smith + G. Roberge Date 7/16/63

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

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

Description of Soil Gravel Depth to Ground Water 6' +

Will disposal area be filled? Yes 2' av. 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 aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by F. A. Smith David Roberge Owner or builder 7/15/63 date

Application Disapproved for the following reasons: \_\_\_\_\_ 7/16/63 date

**BOARD OF HEALTH, AMHERST, MASSACHUSETTS**  
**CERTIFICATE OF COMPLIANCE**

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed () or repaired ( ) by P. O. Smith at Shays St 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. 38-63 dated Nov. 1963

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

DATE Nov 1963 Inspector F. A. Smith

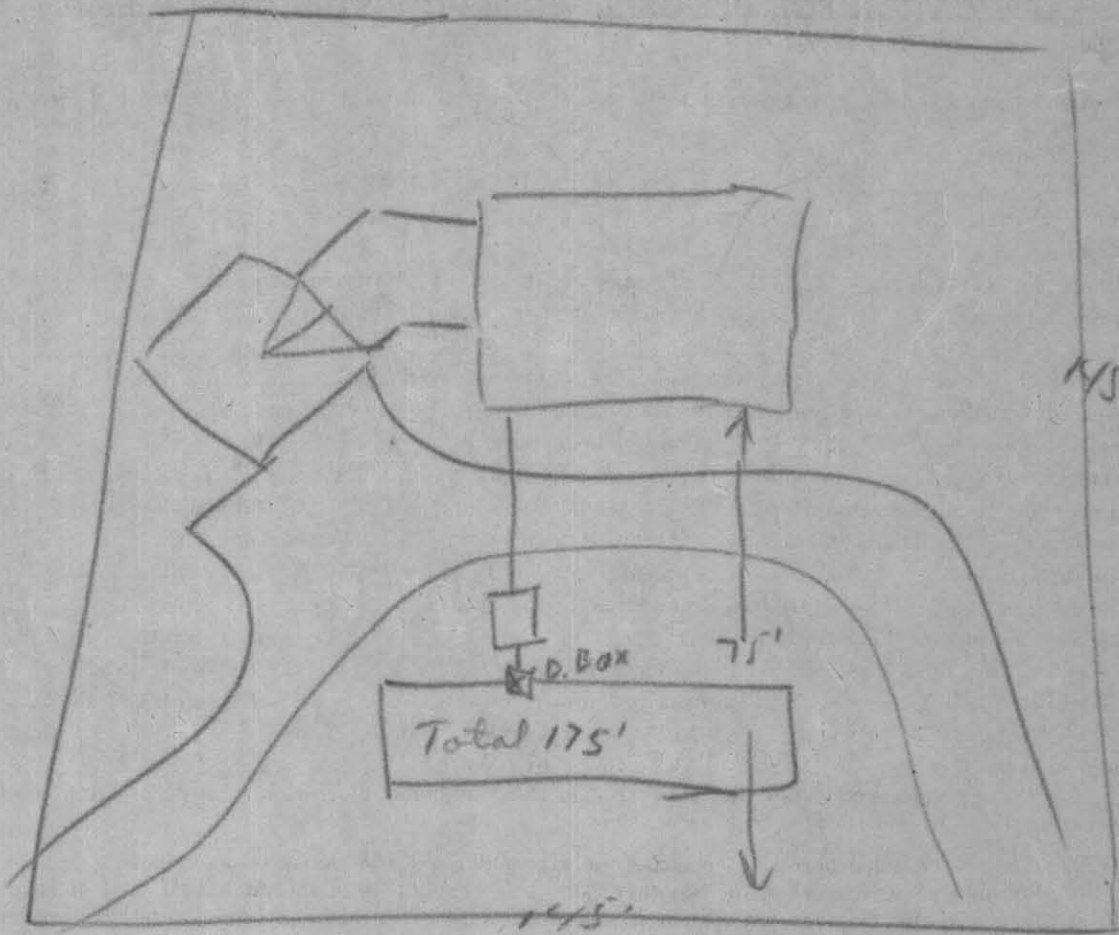
**BOARD OF HEALTH, AMHERST, MASSACHUSETTS**  
**DISPOSAL WORKS CONSTRUCTION PERMIT**

No. 39 38-63 Permission is hereby granted Paul O. Smith to construct () or repair ( ) an Individual Sewage Disposal System at Shays St. N side

as shown on the application for Disposal Works Construction Permit No. 38-63

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 7/16/63 F. A. Smith Board of Health



Shaft

Paul Smith - Shays St

Hole #1 - 30"

Hole #2 - 18"

Dravel

18" - 3:04 - 2 min/in

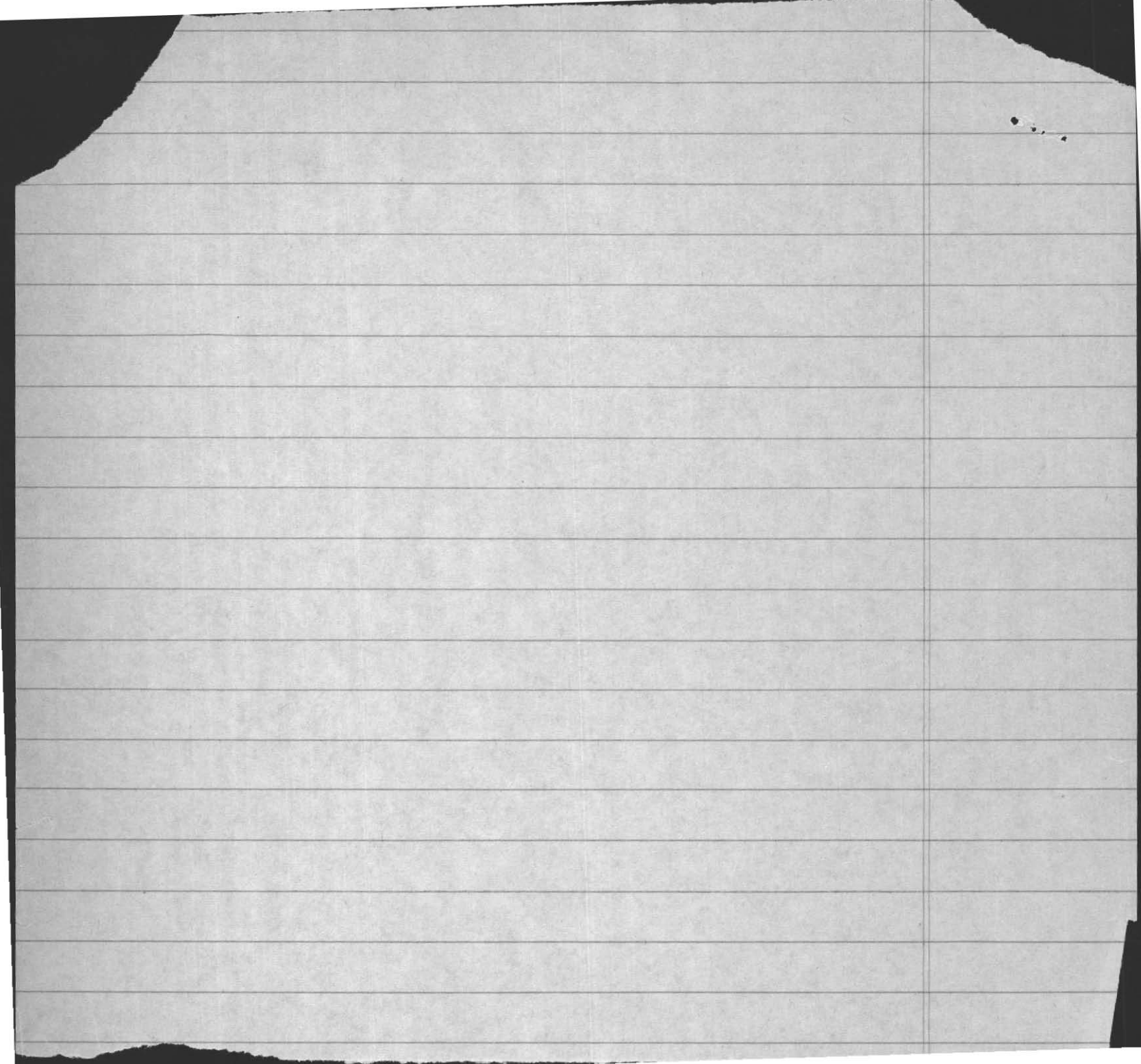
22<sup>3</sup>/<sub>4</sub> - 3:06

24" - 3:07

19:3/4 - 3:09

21<sup>1</sup>/<sub>2</sub> -

1 inch / min.



Rec'd 300  
3/11/63

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

TO: THE BOARD OF HEALTH, AMHERST, MASS.

No. 2-63

Lincoln Realty of Amherst FL 3-7879  
(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 Shay St. Lot #2 So. Amherst to be installed by  
(name) (address) (phone)

Builder is R.G. Tomlinson Inc. Plumber is John Rudy

Description of lot, building and fixtures as follows:

Lot: Dimensions 107.52 X 124.57 Type of Soil Gravel Well or Town Water? Town

Distance to Town Sewer 1/2 mile Depth to Ground Water Kind of Well

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

Building: Dimensions 24 X 42 No. Bedrooms 3 No. Occupants

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

Showers In Tub Kitchen Sinks 1 Garbage Grinders 0

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 3/11/63

Lincoln Realty, Inc.  
Frank O. Bunting, Trustee  
(Signature of Applicant)

PERMIT TO CONSTRUCT OR REPAIR A PRIVATE SEWAGE DISPOSAL SYSTEM

Lincoln Realty 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.

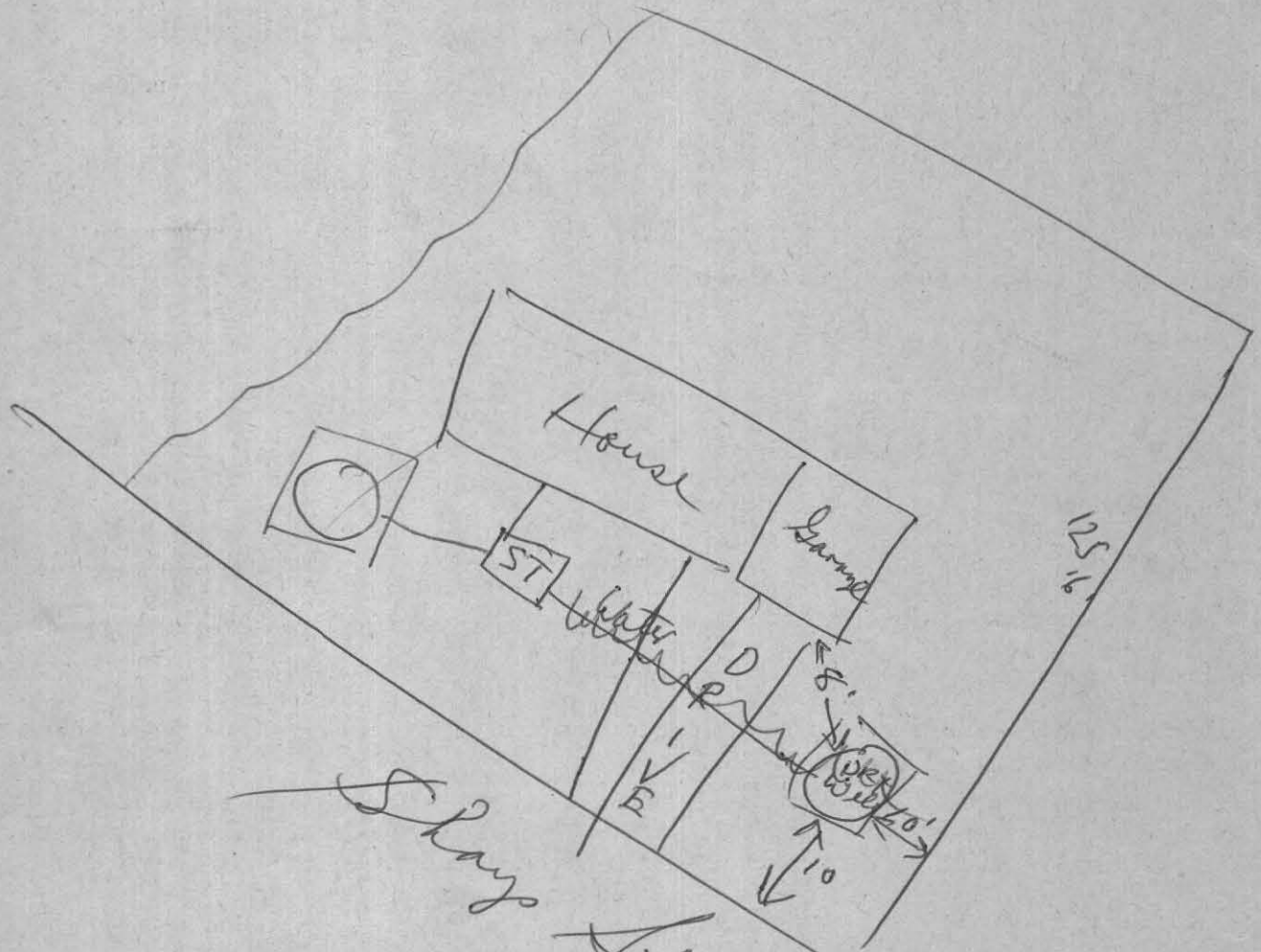
Leaching System: Trenches of not less than Sq. Ft. bottom area.

Dry well 64 sq. ft. bottom area and 6 ft. below the inlet. = 8x8x8 excavation  
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.

G. G. Lewis  
for the Board of Health date

Inspected Dec. 1962 FAS Approved G. G. Lewis



Shay St. (1) Water Line at least 10 ft  
 from any dry well  
 (2) If crossing drain with any  
 line use ~~asbestos~~ asbestos or iron  
 pipe. Berseur drain is  
 settled