#206

No. 84-10 FEE $20

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town OF Amherst

COMMONWEALTH OF MASSACHUSETTS FREDERICK 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: ~~David Lipman~~ PAUL LIPMAN SHUTESBURY RD 7
Location - Address or Lot No.

PAUL LIPMAN 46 WILSON RD BELCHERTOWN
Owner Address

DEAN BENNETT WENDALL, MA.
Installer Address

Type of Building Size Lot 3.3 Ac ± Sq. feet

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

Other — Type of Building ..... No. of persons ..... Showers ( ) — Cafeteria ( )

Other fixtures .....

Design Flow 55 gallons per person per day. Total daily flow 330 gallons.

Septic Tank — Liquid capacity 1000 gallons Length ..... Width ..... Diameter ..... Depth ..... Min. 600 PREF.

Disposal ~~Trench~~ Bed — No. 1 Width 18' Total Length 26' Total leaching area 468 sq. ft.

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

Other Distribution box (✓) Dosing tank ( )

Percolation Test Results Performed by Frederick Filios Date Mar 20 1984

Test Pit No. 1 4.3 minutes per inch Depth of Test Pit 7' Depth to ground water 80"

Prior Test Pit No. 2 5.6 minutes per inch Depth of Test Pit 7' Depth to ground water none

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 Paul Lipman 4/13/84 Date

Application Approved By [signature] 4/13/84 Date

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

Permit No. 84-10 Issued 4-13-84 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. 84-10 Town OF Amherst FEE $20

Disposal Works Construction Permit

Permission is hereby granted PAUL LIPMAN - DEAN BENNETT

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

at No. Lot #7 - SHUTESBURY RD
Street

as shown on the application for Disposal Works Construction Permit No. 84-14 Dated 4/13/84

[signature]
Board of Health

DATE 4/13/84

FORM 1255 HOBBS & WARREN, INC., PUBLISHERS

No.....

Fee.....

THE COMMONWEALTH OF MASSACHUSETTS

BOARD OF HEALTH

Town OF Amherst

Application for Disposal Works Construction Permit

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

David Littman — Location - Address

7 — or Lot No.

Owner — Address

Installer — Address

Type of Building — Size Lot 3.3 Ac ± Sq. feet

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

Other — Type of Building ..... No. of persons ..... Showers ( ) — Cafeteria ( )

Other fixtures .....

Design Flow 55 gallons per person per day. Total daily flow 330 gallons.

Septic Tank — Liquid capacity 1000 gallons Length ..... Width ..... Diameter ..... Depth .....

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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 .....

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at .....

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

CHECK OR FILL IN WHERE APPLICABLE

PLAN SHOWING SEWAGE DISPOSAL

Apr. 1984

For: David Littman

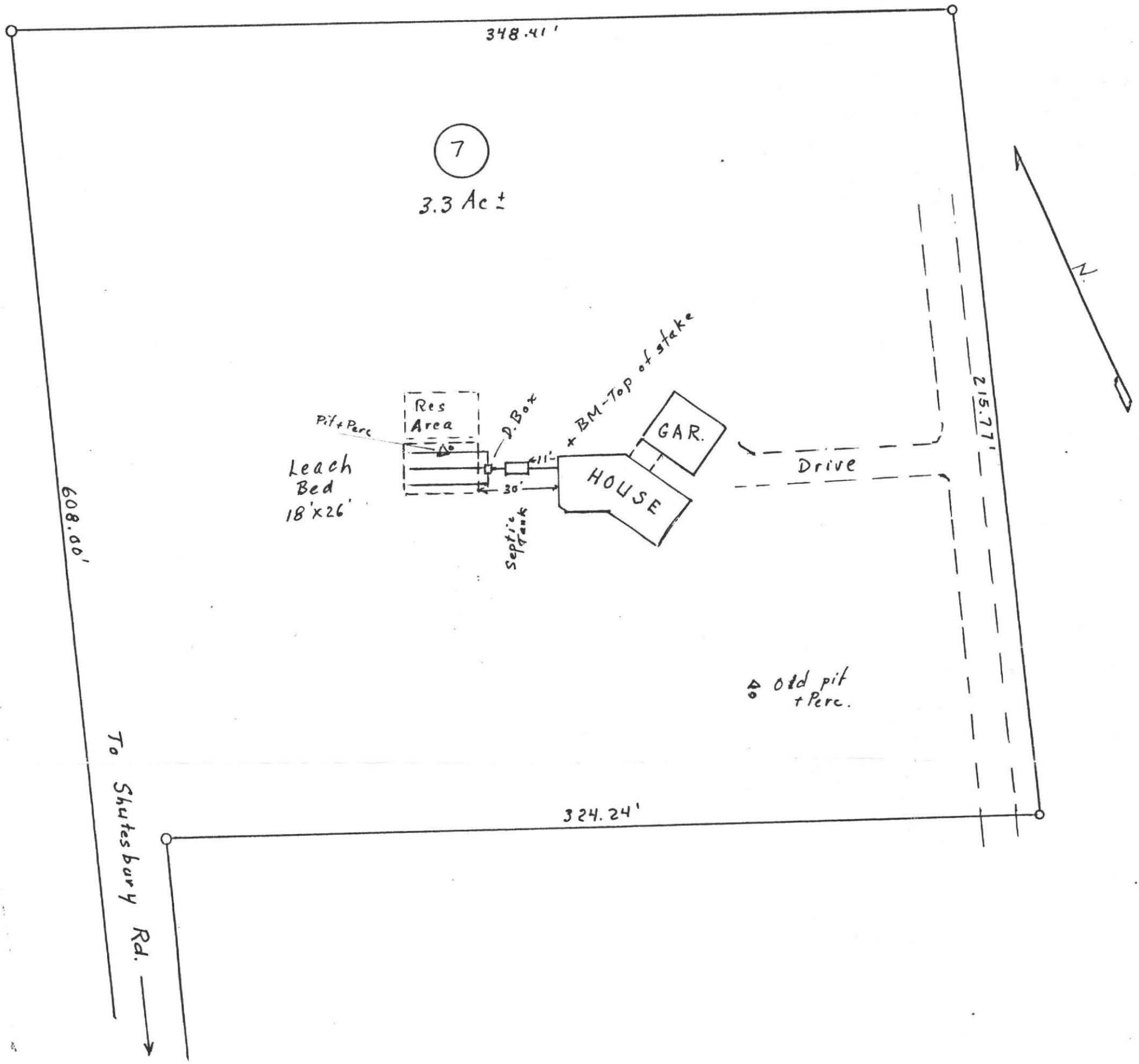
Amherst Mass

At: Shutesbury Rd.

Scale: 1" = 40'

By: Frederick Filios

COMMONWEALTH OF MASSACHUSETTS
FREDERICK A. FILIOS, R.S.
638



PROFILE OF SEPTIC SYSTEM

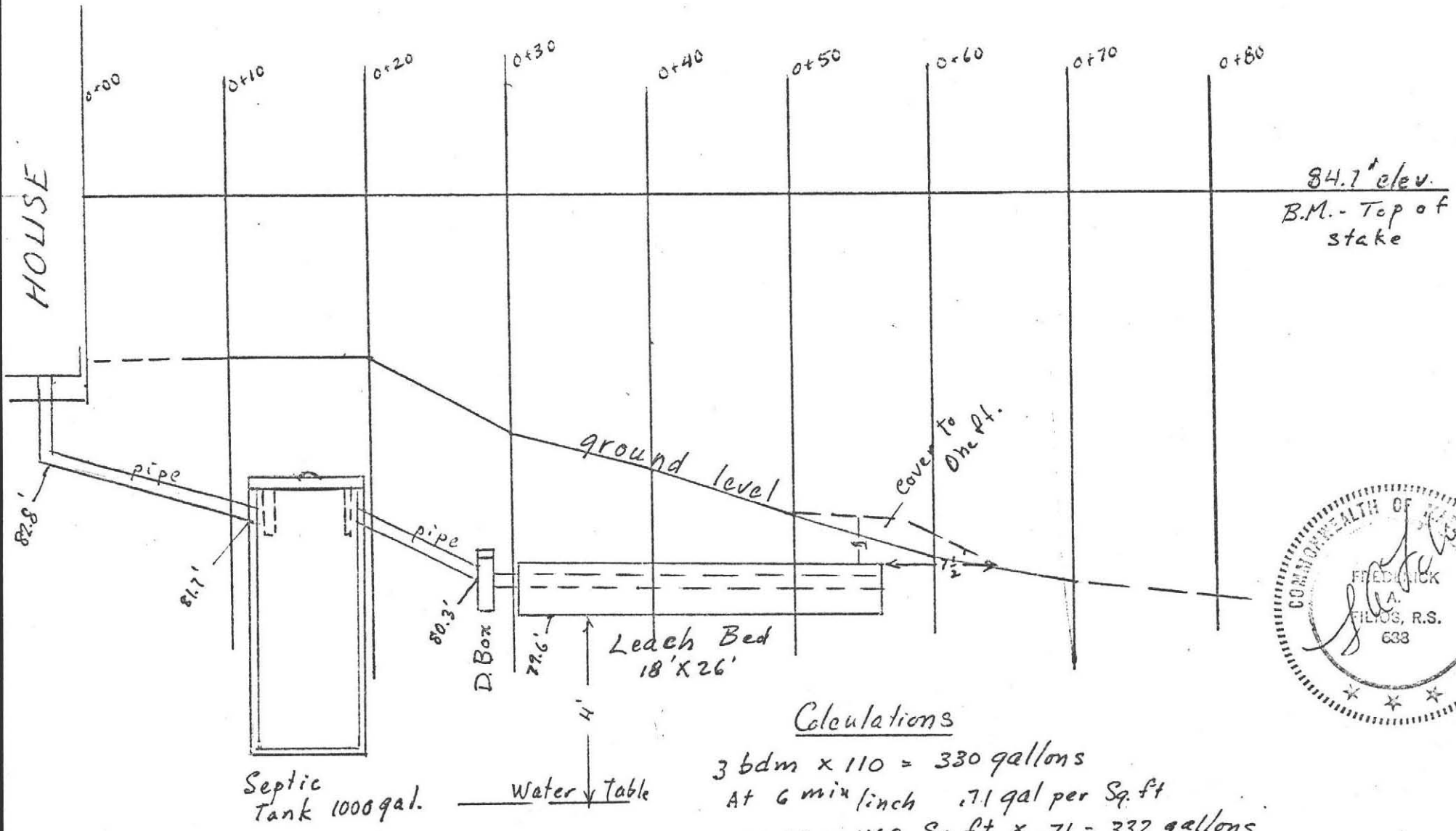
Apr. 1984

For: David Littman
Amherst Mass

At: Shutesbury Rd. Lot #7

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

By: Frederick Filios



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FREDERICK A. FILIOS, R.S.
638

Calculations

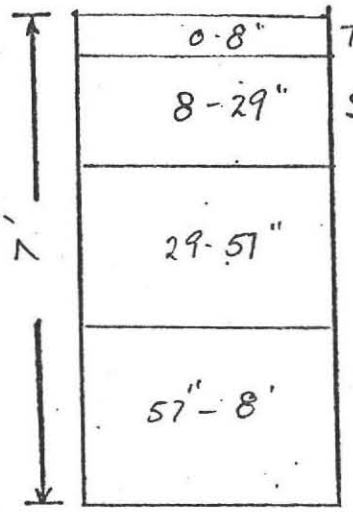
3 bdm x 110 = 330 gallons
At 6 min/inch .71 gal per Sq. ft
18 X 26 = 468 Sq. ft x .71 = 332 gallons proposed

DEEP SOIL LOGS

OWNER David Littman Date Mar. 20 1984

LOCATION Shutesbury Rd. OBSERVER F.A. Filios

Soil Lot #7.



Topsoil

Subsoil

Loose glacial till

Compact glacial Till granitic

Ground Water 80"

Ground Water _____

Ground Water _____

Ground Water _____

Percolation Rate at 36"

4.3 minutes/inch

COMMONWEALTH OF MASSACHUSETTS
FREDERICK A. FILIOS, R.S.
638

DEEP SOIL LOGS

OWNER Mark Wisotski + Kevin Otto

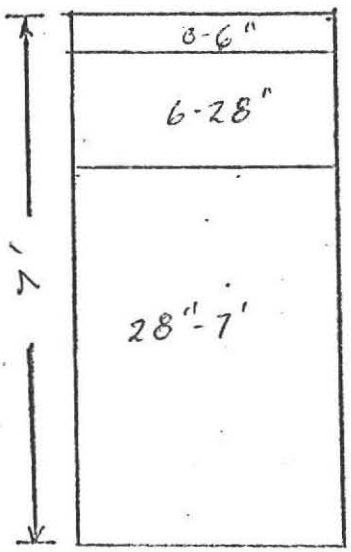
Date Dec 1 1983

LOCATION Shutesbury Rd.

OBSERVER F.A. Filios

(7)

Soil

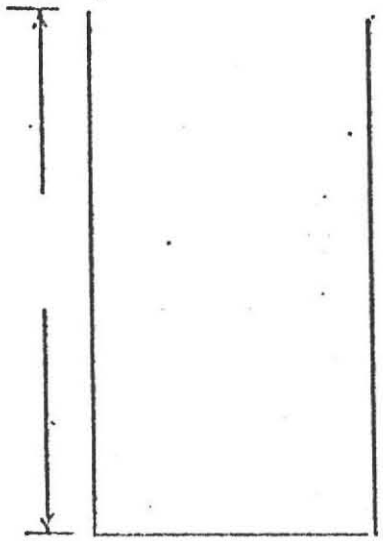


Topsoil

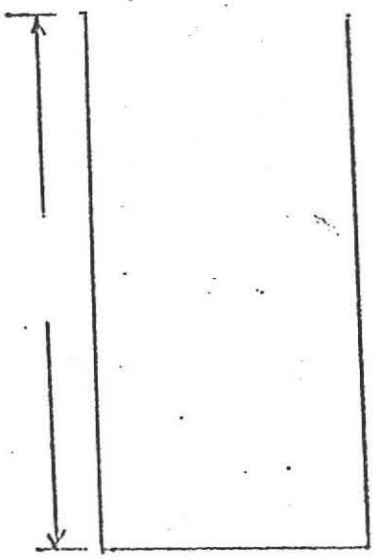
Subsoil

Sandy glacial till with much gravel + stones

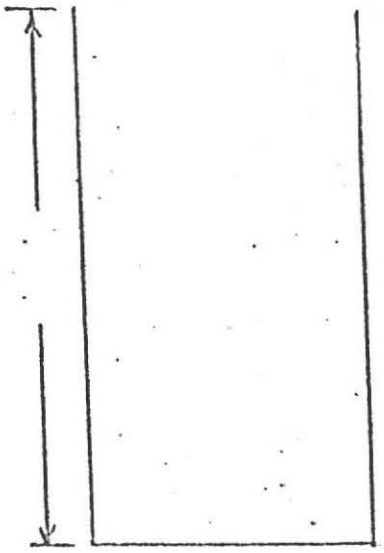
Ground Water none



Ground Water _____



Ground Water _____



Ground Water _____

Percolation Rate at 28"

5.6 minutes/inch

COMMONWEALTH OF MASSACHUSETTS
FREDERICK A. FILIOS, R.S.
638

BOARD OF HEALTH

TOWN OF AMHERST, MASSACHUSETTS

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner PAUL LIPPMAN Address SHUTESBURY RD

Installer BENNETT CONST Address WENDELL MA.

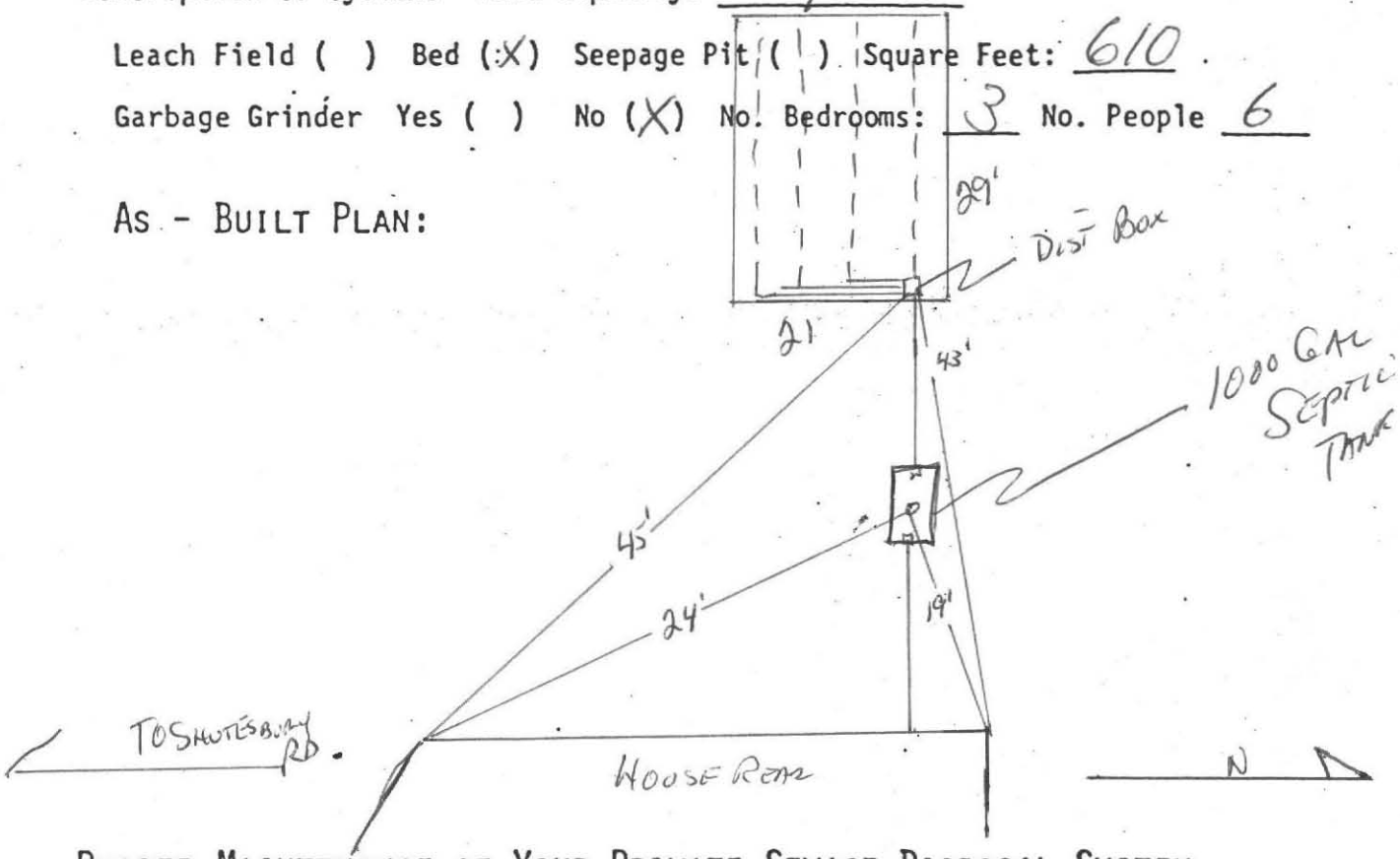
Date Installation Inspected and Approved 7-9-84

Description of System: Tank Capacity: 1000

Leach Field ( ) Bed (X) Seepage Pit ( ) Square Feet: 610

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.
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.