

	a a COS as Colle
No. 06-14 11/1/06-1500 (cu #1	TO PAY Pur FEED 250 OF FEED
	OF MACCACIHICETTE
COMMON WEALIH	UF MASSACHUSEIIS
Ph 250 Board of Health, But	× / / / / / / / / / / / / / / / / / / /
APPLICATION FOR DISPOSAL	SYSTEM CONSTRUCTION PERMITS VI
Application for a Permit to Construct() Repair() Upgrade() A	Abandon() - Complete System Individual Components
	The spiritual sales
Location 89 State ST	Owner's Name Ned Lyon
Map/Parcel#	Address 41 Seyon ST. Bldg1, Ste 500
Lot# 10	Telephone# Waltham WA: 02453
Installer's Name 18F Construction	Designer's Name Hav Wess, RS
Address	Address Belderton, M.
Telephone# 665-3788	Telephone# (413) 323 -5957.
Type of Building Residure	Lot Size 48,000 sq. ft.
to a	Lot Sizesq. rt.
•	No. of personsShowers (), Cafeteria ()
Other Fixtures	
Design Flow (min. required) \(\lambda\) O gpd Calculated	design flow 33 0. Design flow provided 445 gpd
Plan: Date 10 76 66 Number of sheets	
Title Septic Systy Repair Plan.	Revision Date 10 20106
Description of Soil(s) Class 1:5 mad.	
A With the second secon	uator A-Wrss Date of Evaluation 10 15 105
DESCRIPTION OF REPAIRS OR ALTERATIONS New Se	C. ZOOZINSKI)
DESCRIPTION OF REPAIRS OR ALTERATIONS 740 36	pric systim () and + tield).
The undersigned agrees to install the above described Individual Serfurther agrees to not to place the system in operation until a Certifi	wage Disposal System in accordance with the provisions of TITLE 5 and icate of Compliance has been issued by the Board of Health.
Signed 4 dword 2 Dat	te 17 Nou 2006
3	
Inspections	
No. 66-14	THE CLASSICAL PROPERTY OF THE PARTY OF THE P
COMMONWEALTH	OF MASSACHUSETTS TRANSPORTED
	12 1900055
Board of Health,	mhers, MA.
CERTIFICATE (OF COMPLIANCE
Description of Work: ☐ Individual Component(s) ☐ Complete	System
The undersigned hereby certify that the Sewage Disposal System: O	Constructed (), Repaired (), Upgraded (), Abandoned ()
by: L+ Cours	, , , , , , , , , , , , , , , , , , , ,
at 89 STATE STREET	
has been installed in accordance with the provisions of 310 CMR 1	5.00 (Title 5) and the approved design plans/as-built plans relating to
application No. 16 dated Approve	
Installer of the state of the s	Thomas Solon Date: 12/1/06
Designer: Inspector: (7)	Markey Selen Date: 12/1/06

**** REAL ESTATE CLOSING ****

Buyer/Borrower: Lyon

Seller: MacCartney

Lender:

Property: 89 State Street/Amherst MA 01002 /

Settlement Date: November 21, 2006 Disbursement Date: November 22, 2006

Check Amount: \$ 250.00

Pay To: Town of Amherst

For:

Perc Test

Sellers' joint expense inadvertently omitted at time of closing

Closer/Responsible Party: LAR

December 1 2006

Amherst, Board of Health

RE:Septic System L.Field Repair & Inspection 89 State Street (McCartney (to) Lyons Property)

On this date, we inspected the installation of a Soil Absorption System (S. Tank and L. Field) We found the installation to be complete (except for completion of cover material and final fill) and in compliance with our plans and 310 CMR 15.000.

The installer representative (L & F Costruction) our inspection noted that the system was built properly, in accordance with the state regulations and our plans. The contractor was requested to have sufficient breakout soil on site and properly cover the system according to our plans and may backfill the system after review by local Health Department representatives.

Sincerely,

Cold Spring Environmental Consultants, Inc.

Alan E. Weiss, M.S., L.S.P.

President

Principal Hydrogeologist

Licensed Site Professional #6442

Registered Sanitarian #933

Cold Spring Environmental 350 Old Enfield Road Belchertown, Ma. 01007

413-323-5957, phone 413-323-4916, fax

		, ,	b
			•
i			
		e P 0	
		1. The state of th	



AMHERST Massachusetts

AMHERST HEALTH DEPARTMENT, 70 BOLTWOOD WALK, AMHERST, MA 01002 (413) 256-4077

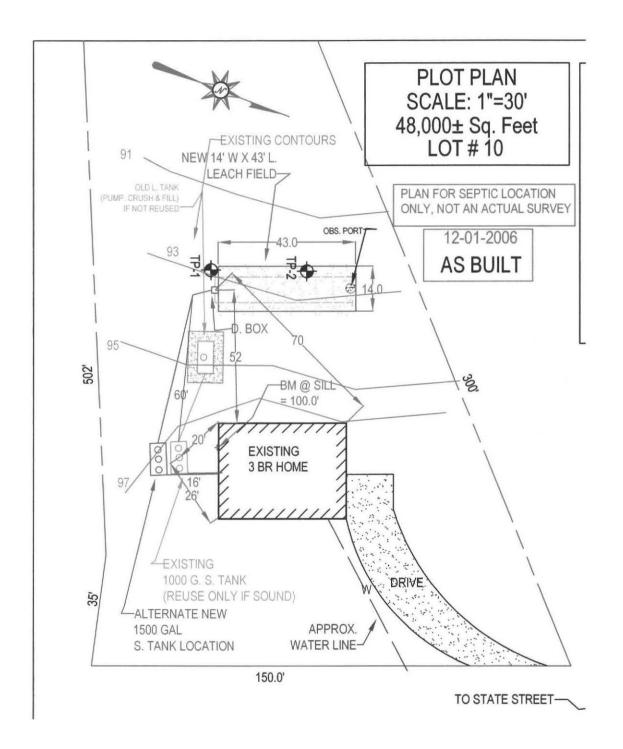
> (413) 256-4033 ENVIRONMENTAL HEALTH SERVICES (413) 256-4053 (FAX)

SUB-GRADE INSPECTION

69 5/10

Location: 51 OTCOH
Property Owner: 44
I certify that I have inspected the excavation to sub-grade of the proposed septic system leaching area prior placement of any fill of stone, or construction of any portion of the system.
I further certify that:
 All 'A' and 'B' horizon soils (topsoils and subsoils) were removed in the area of the system. There was no evidence of ground water in the excavation. There was no evidence of "mottles" that would be in conflict with the findings of the deep hole soil profile. That the excavation was accomplished to the proper depth and in conformance with the approved plans.
Designers Name COLD SPRING ENVIRONMENTAL, INC. Street Actions OLD ENFIELD RD. BELCHERTOWN, MA 01007 Designers Signature Town, State, Zip Code
<u> </u>





•