

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

#544

No. 73-92 Date 12/3/73 Fee 3.00 Date Rec'd. 12/3/73 By DGF

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

Location—Address STATION RD or Lot No. #1  
 Owner RALPH FARRICK Address 293 RUSSELL ST. HADLEY  
 Contractor RALPH FARRICK Address 293 RUSSELL ST. HADLEY  
 Type of Building DWELLING Dimensions 24X55 Size Lot 150X230  
 Dwelling—No. of Bedrooms 3 Expansion Attic (N/A) Garbage Grinder (✓)  
 Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers (✓)  
 Other fixtures DISH WASHER  
 Town Water? YES Type of Well \_\_\_\_\_

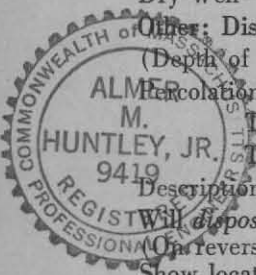
Design Flow 50 gallons per person per day. Total daily flow 300 gallons  
 Septic Tank—Liquid capacity 1000 gallons Dimensions: L 8'-6" W 5'-4" D 4'-10"  
 Disposal Trench—No. 21 Width 21 Total Length 30 Total leaching area 600 sq. ft.  
 Disposal Bed—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.  
 Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( ) \_\_\_\_\_  
 (Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)  
 Percolation Test Results Performed by R.P.B. - HUNTLEY ENGR. Date 5/10/73  
 Test Pit No. 1 0.3 minutes per inch Depth of Test Pit 3'-0"  
 Test Pit No. 2 - minutes per inch Depth of Test Pit 9'-6"  
 Description of Soil SAND & GRAVEL Depth to Ground Water NONE  
 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] Ralph K. Farrick Owner or builder Dec 3, 1973 date  
[Signature] Dec 3, 1973 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. 73-92  
 Permission is hereby granted RALPH FARRICK to construct (X) or repair ( ) an Individual Sewage Disposal System at LOT #1 STATION RD as shown on the application for Disposal Works Construction Permit No. 73-92  
 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 12-3-73 [Signature] Board of Health

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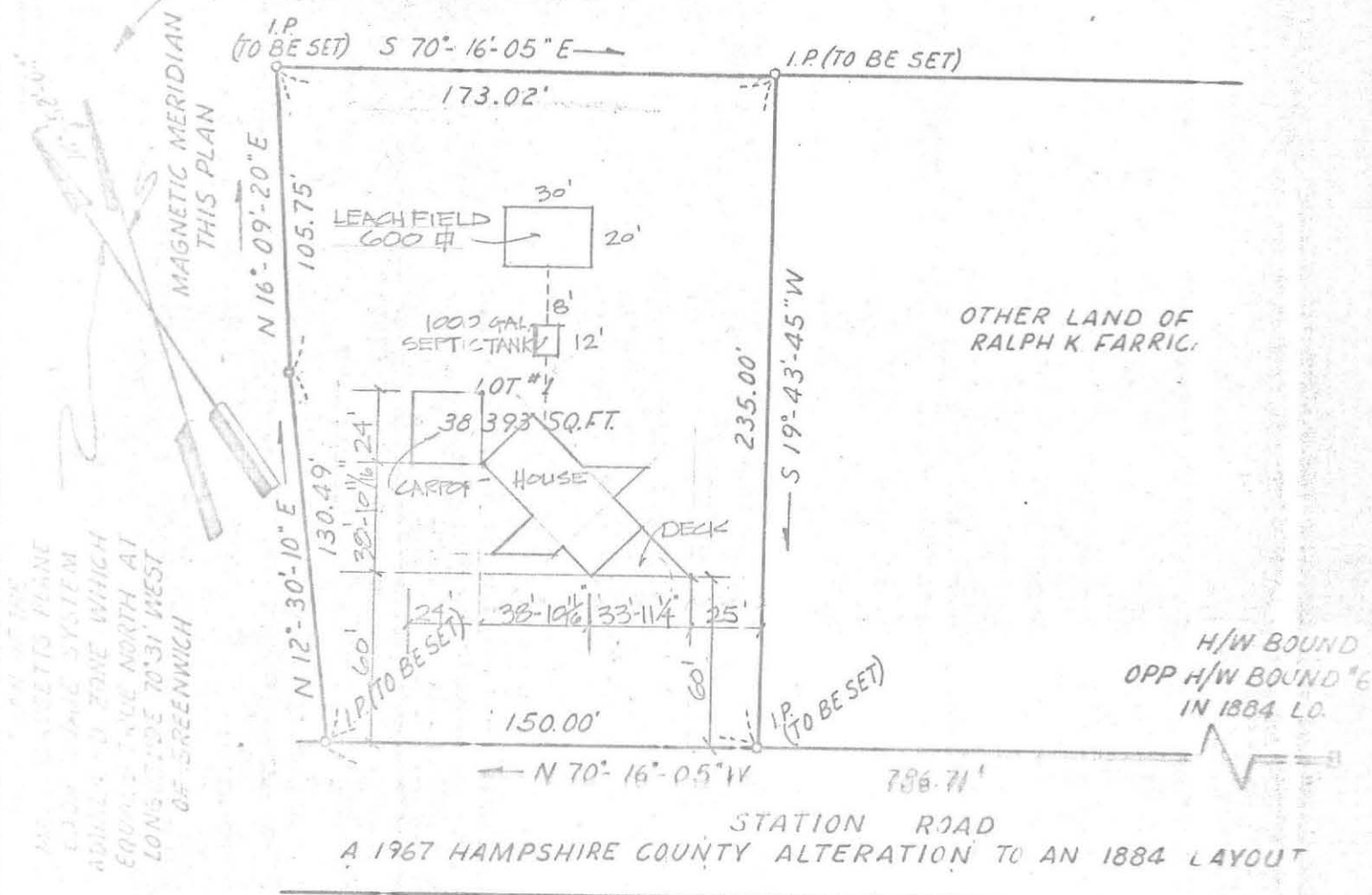
REPORT OF THE BOARD OF HEALTH

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1890

1890

LAND OF OTTO J. PAPAARAZZO  
 BOOK 1601-PAGE 1  
 PLAN BOOK 81-PAGES 15,16,17



1967 HAMPSHIRE COUNTY ALTERATION TO AN 1884 LAYOUT  
 MAGNETIC MERIDIAN THIS PLAN

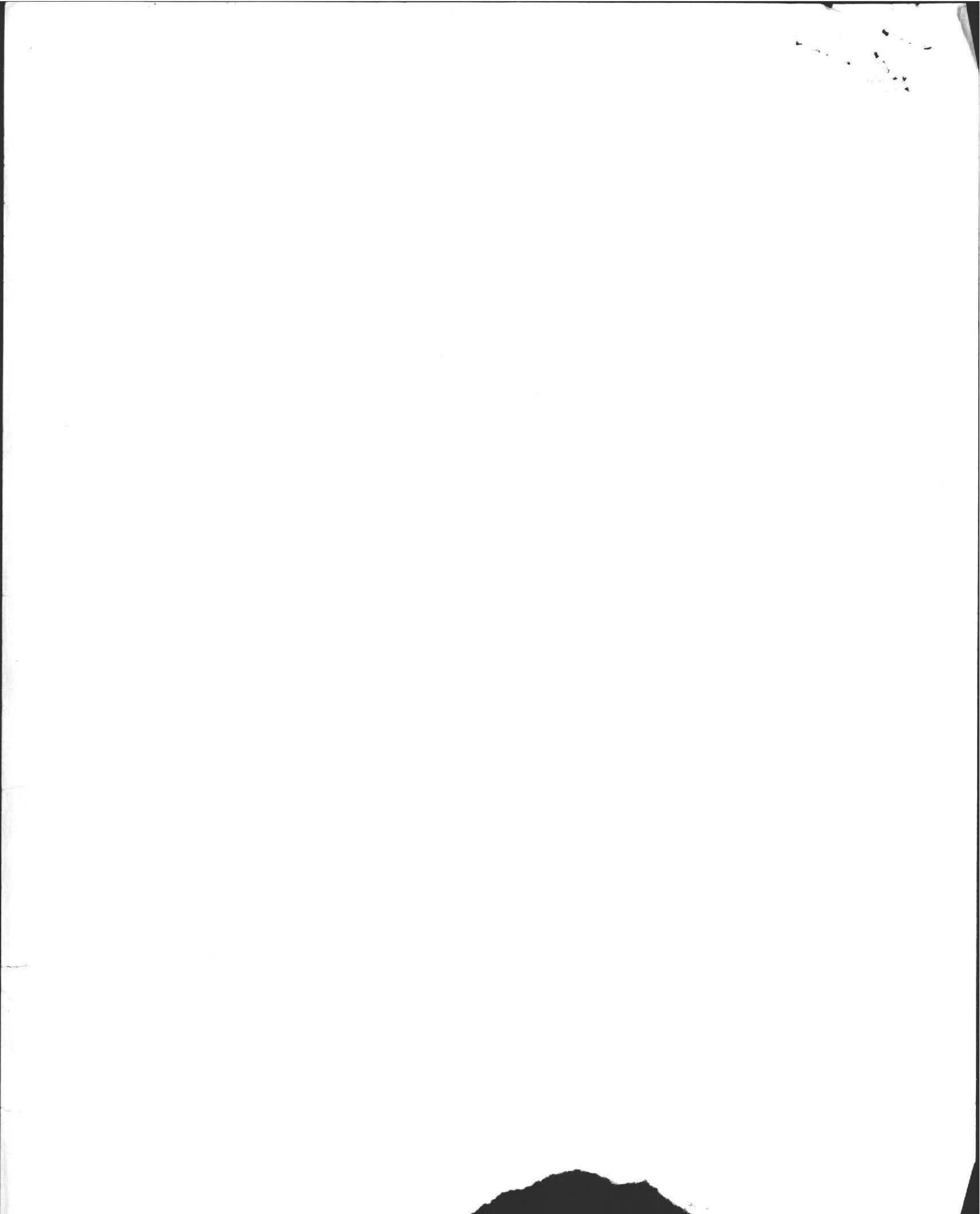
PLAN OF LAND IN  
**AMHERST MASS**  
 BELONGING TO  
**RALPH K. FARRICK**

DRAWN: A.P.B.
TRACED: J.M.G.
APPROVED: A.P.B.
SCALE: 1" = 60'
DATE: DEC. 3, 1973

Bill



**AMER HUNTLEY, JR. & ASSOCIATES, INC.**  
 REGISTERED LAND SURVEYORS & CIVIL ENGINEERS



BOARD OF HEALTH  
TOWN OF AMHERST, MASSACHUSETTS

Important Information Regarding Your Private Sewage Disposal System

DISPLAY THIS DOCUMENT IN A PROMINENT PLACE

Owner: RALPH FERRICK Address: STATION RD LOT 41

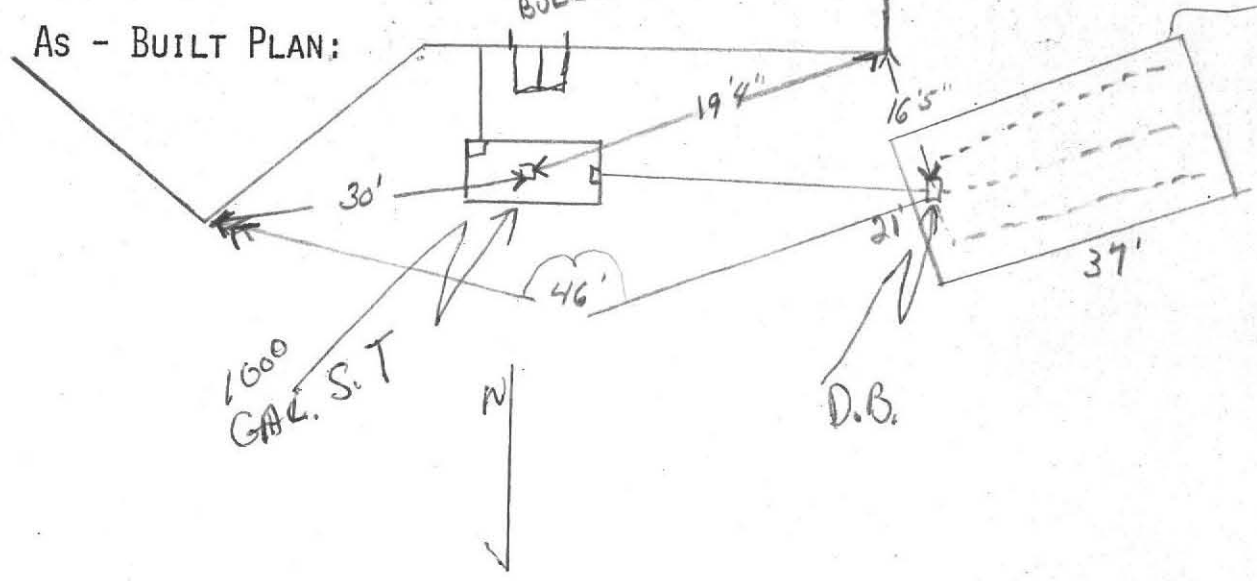
Installer: KARL'S ETC. Address: RIVER DR HAOLFY

Date Installation Inspected and Approved: 3-20-74

Description of System: Tank Capacity: 1000

Leach Field ( ) Bed (X) Seepage Pit ( ) Square Feet: 835

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



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.

