

283-9202

FORM 1-APPLICATION FOR DSCP

No 98-19

Fee 60 [∞] Plan only
Pd 9/9/98

Commonwealth of Massachusetts
AMHERST, Massachusetts

Application for Disposal System Construction Permit

chk#
1608

Application is hereby made for a Permit to Construct (X) or Repair () an On-site Sewage Disposal system at:

Location Address or Lot No. <u>7 SWALLOW FARMS ROAD</u> <u>LOT 2</u>	Owner's Name, Address and Tel. # <u>MIKE WILCOX</u> <u>23 COUNTRY CORNERS RD.</u> <u>AMHERST, MA</u>
Installer's Name, Address, and Tel. #	Designer's Name, Address and Tel. # <u>MacLeay Associates, Inc.</u> <u>102 Bridge Street</u> <u>Shelburne Falls, MA 01370</u> <u>(413) 625-9774</u>

Type of Building:

Dwelling No. of Bedrooms FOUR Garbage Grinder : NO

Other Type of Building _____ No. of Persons _____ Showers _____ Cafeteria _____
Other Fixtures _____

Design Flow 440 gallons per day. Calculated daily flow 550 gallons
Plan Date 7/30/98 Number of Sheets ONE Revision Date NONE
Title SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASS FOR ALI
MOSHIRI, SWALLOW FARMS ROAD, LOT 2

Description of Soil SANDY LOAM/FINE SAND SEE PLAN FOR DETAILED TEST PIT
DESCRIPTIONS. SEASONAL HIGH GROUNDWATER AT 120" PERC RATE 2 MIN./INCH.
WITNESSED BY DAVID ZAROZINSKI

Nature of Repairs or Alterations (Answer when applicable) INSTALL 1500 GALLON SEPTIC TANK,
AND LEACHING TRENCHES.

Date last inspected: _____

Agreement:

The undersigned agrees to ensure the construction and maintenance of the aforescribed on-site sewage disposal system in accordance with the provisions of Title 5 of the Environmental Code and not to place the system in operation until a Certificate of Compliance has been issued by this Board of Health.

Signed Michael F. Wilcox Date 8/4/98
Application Approved by David Zaroinski Date 8-19-98 David Zaroinski 8/31/98

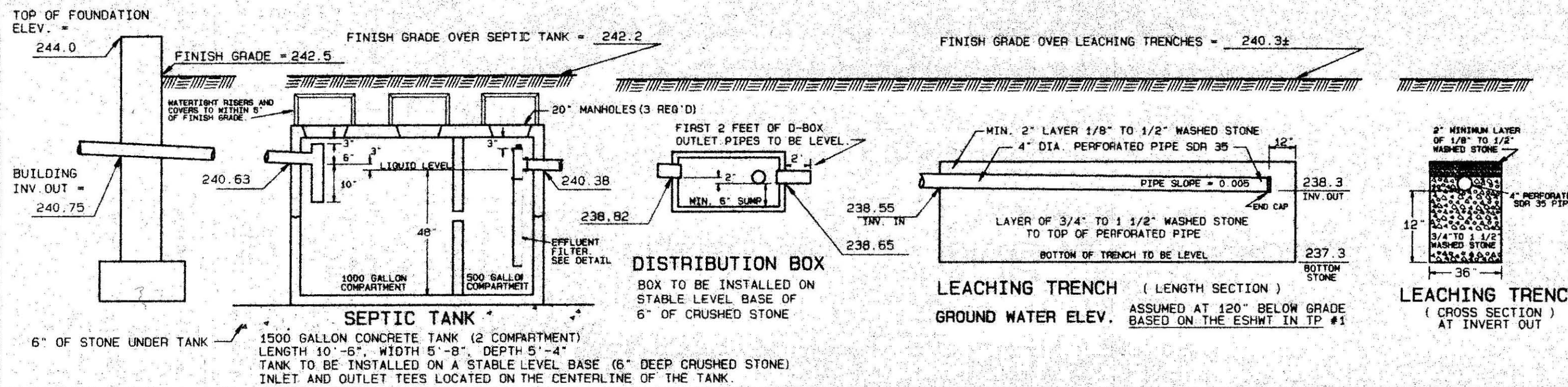
Application Disapproved for the following reasons _____

Permit No. 98-19

Date Issued 8-18-98

David Zaroinski

SANITARY SYSTEM PROFILE (NO SCALE)



TEST PIT DATA

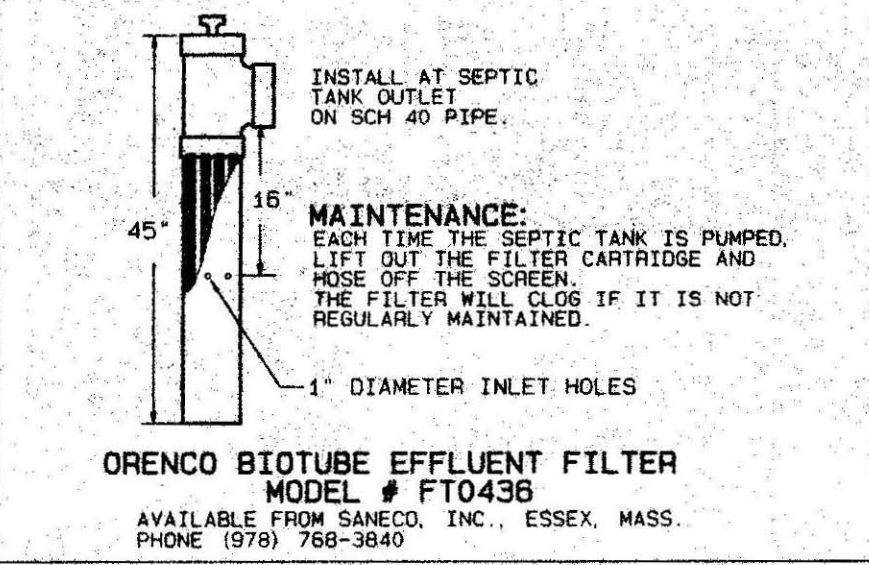
BOARD OF HEALTH WITNESS: DAVID ZAROZINSKI
 DATE: MAY 21, 1998
 SOIL EVALUATOR: DOUGLAS J. MacLEAY, P.E.

PERC TEST ID	PERC RATE (MIN/IN)	PERC DEPTH (IN)
D	<2	51
E	<2	79

PERCOLATION TESTS PERFORMED MAY 14, 1990 BY DOUGLAS MacLEAY, WITNESSED BY DAVID ZAROZINSKI.

TEST PIT # 1		TEST PIT # 2	
ELEV. TOP = 240.7	ELEV. TOP = 239.5		
ESHWT = <230.7	ESHWT = 231.5		
OBS. H2O = NONE	OBS. H2O = NONE		
BOTTOM = 230.7	BOTTOM = 229.5		

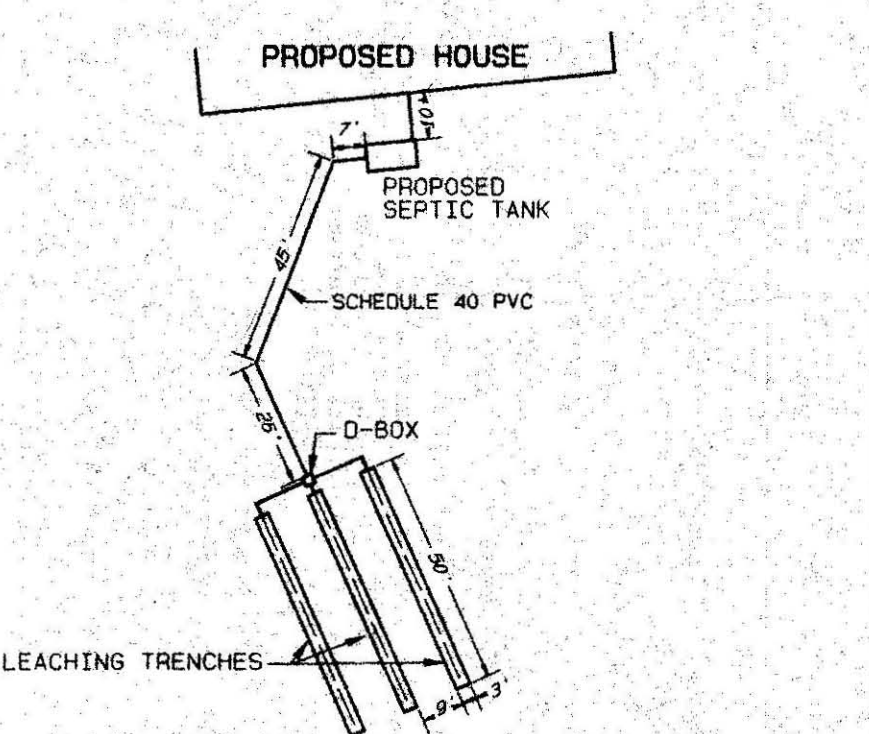
HORIZON	SOIL TYPE	DEPTH (FT)
HORIZON A	LOAMY SAND 10YR 4/4	10'
HORIZON B	LOAMY SAND 7.5YR 5/8	9'
HORIZON C1	FINE SAND 10YR 5/4	22'
HORIZON C2	FINE SAND 2.5Y 6/3	79'
HORIZON A	LOAMY SAND 10YR 4/4	9'
HORIZON B	LOAMY SAND 7.5YR 5/8	22'
HORIZON C1	FINE SAND 10YR 5/4	96'
HORIZON C2	SANDY LOAM 10YR 9/3	96'



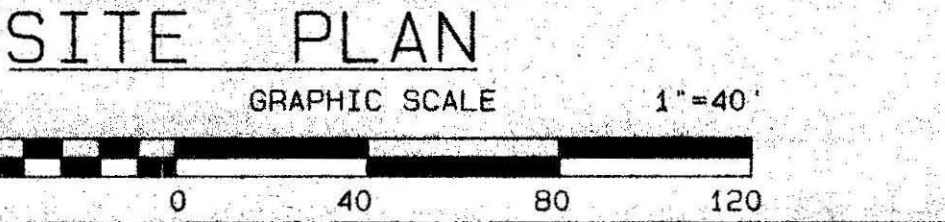
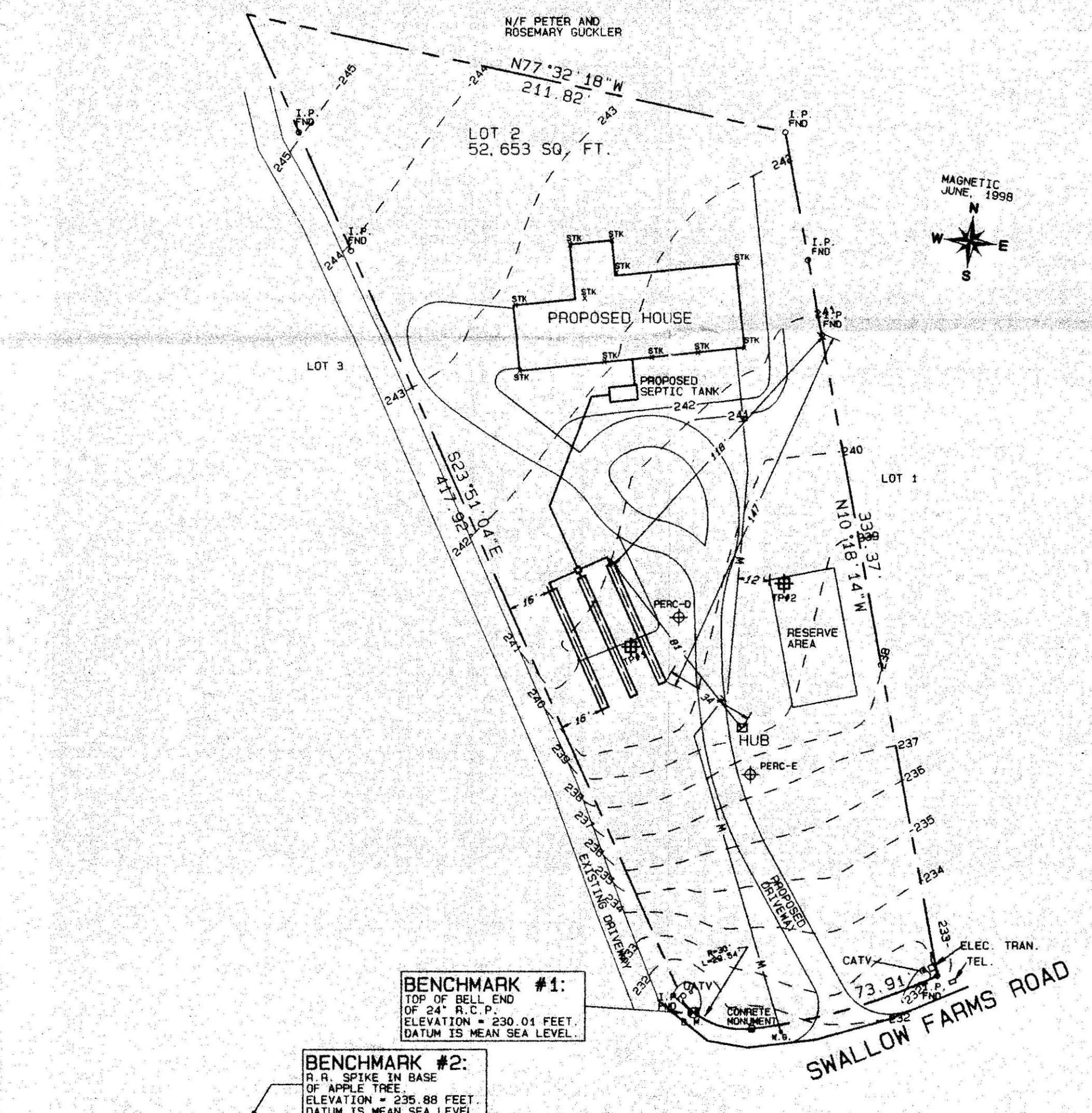
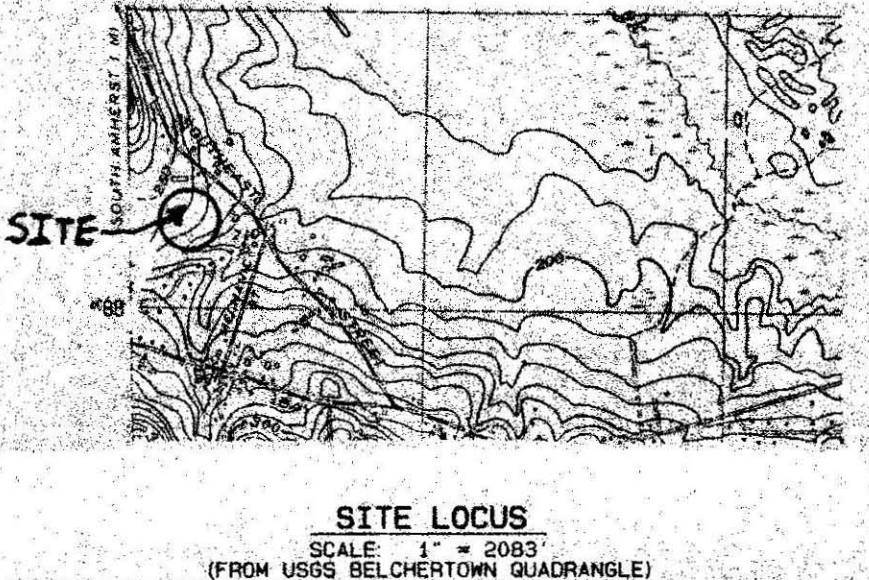
NOTES:

- TITLE 5 REQUIRES OBSERVATION OF THE INSTALLED SYSTEM BY THE DESIGN ENGINEER AND A BOARD OF HEALTH MEMBER OR AGENT FOR THE BOARD OF HEALTH. THE SYSTEM MUST NOT BE BACKFILLED PRIOR TO OUR OBSERVATION. CONTACT OUR OFFICE AND THE BOARD OF HEALTH TWO BUSINESS DAYS BEFORE REQUESTED DATE FOR OBSERVATION.
- ALL DISTURBED AREAS SHOULD BE LOAMED, RAKED, FERTILIZED, SEEDED AND MULCHED AT THE COMPLETION OF CONSTRUCTION.

PROPERTY LINE REFERENCE:
 PROPERTY LINES AS SHOWN ARE BASED ON A CLUSTER SUBDIVISION DEFINITIVE PLAN IN AMHERST MASS. PREPARED FOR CONSTANCE LESLIE, PREPARED BY H.L. EATON AND ASSOC., DATED 10/17/91.



SYSTEM DIMENSIONS
 SCALE: 1" = 40'



DESIGN DATA

DESIGN BASED ON SINGLE FAMILY RESIDENCE (4 BEDROOM)
 DESIGN FLOW 110 GALLON PER DAY PER BEDROOM
 TOTAL DESIGN FLOW 440 GALLON PER DAY.

SEPTIC TANK
 440 GALLONS X 200% = 880 GALLONS DESIGN CAPACITY.
 USE 1500 GALLON 2 COMPARTMENT SEPTIC TANK.

LEACHING TRENCHES
 THE TOWN OF AMHERST REQUIRES 1.25 TIMES MINIMUM TITLE 5 LEACHING AREA. 440 GPD / 0.74 GSF X 1.25 = 743 SQ. FT. MINIMUM PER TOWN OF AMHERST REGULATION.

SIDEWALL:
 2 X 50' LENGTH X 1.0' DEPTH = 100 SQUARE FEET.
 100 SQ. FT. X 0.74 GAL. PER SQ. FT. = 74 GAL. LEACHING.

BOTTOM:
 50' LENGTH X 3.0' WIDTH = 150 SQUARE FEET.
 150 SQ. FT. X 0.74 GAL. PER SQ. FT. = 111 GAL. LEACHING.

TOTAL NUMBER OF LEACHING TRENCHES 3
 TOTAL LEACHING AREA = 750 SQUARE FEET.
 TOTAL LEACHING CAPACITY = 555 GALLONS PER DAY.

GENERAL NOTES

- 4" PIPE WITH TIGHT JOINTS TO BE USED IN DISPOSAL SYSTEM EXCEPT WHERE OTHERWISE NOTED.
- 4" SDR 35 PERFORATED PIPE TO BE USED IN LEACHING AREA.
- 1500 GALLON 2 COMPARTMENT REINFORCED CONCRETE SEPTIC TANK.
- AMHERST BOARD OF HEALTH MUST BE NOTIFIED WHEN SYSTEM IS NEARLY COMPLETE AND PRIOR TO BACKFILLING.
- ELEVATIONS BASED ON ASSUMED DATUM.
- UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH TITLE 5 OF THE STATE SANITARY CODE AND ANY APPLICABLE LOCAL RULES.
- ANY CHANGE TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
- THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE GRINDER.

LEGEND

- 100 --- EXISTING CONTOURS
- 100 --- PROPOSED CONTOURS
- 4" SDR 35 PERFORATED PIPE
- 4" SDR 35 SOLID PIPE
- WATER LINE
- FENCE
- EDGE OF WETLAND
- CENTERLINE STREAM
- PROPERTY LINE
- STONEWALL

SHEET NO. 1 OF 1.

SCALE AS SHOWN	APPROVED:	REV. DATE	BY	DESCRIPTION	APPR.
	DOUGLAS J. MacLEAY No. 31203 CIVIL ENGINEER	8/12/98	S.K.	WATERLINE LOCATION/RESERVE AREA	D.M.

TITLE: SUBSURFACE SEWAGE DISPOSAL PLAN IN AMHERST, MASSACHUSETTS
 FOR: ALI MOSHIRI
 SWALLOW FARMS ROAD - LOT 2
 DATE: JULY 31, 1998
 JOB NO. 90-063-2

MacLEAY ASSOCIATES, INC.
 102 BRIDGE STREET, SHELburnE FALLS, MA 01370
 TELEPHONE: (413) 625-9774 FAX: (413) 625-9704