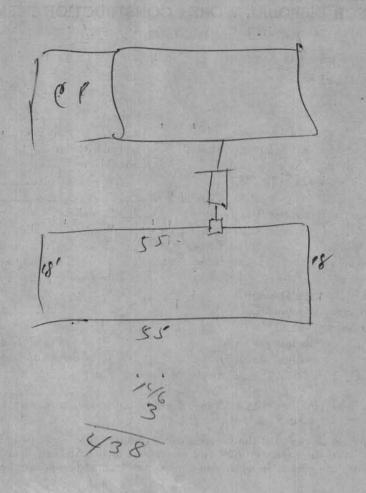
BOARD OF HEALTH, AMHERST, MASSACHUSETTS APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMI

#64

No. 17-63 Date 5/8/63 Fee 3.00 Date Rec'd. 5/10/63 By FAS	
Application is hereby made for a permit to Construct (X) or Repair () an Individual Sewage Dispos	al
C	
System at: Location—Address Valley View Drive Owner Keddy BuildStreInc. Address 200 N. Main St. E. Long.	Mas
Contractor Same Address Same	Aut (Care
- T (D:11: Pasidence D: : 40'r26' S: 1.20 000 sq ft	
Dwelling—No. of Bedrooms Expansion Attic (ng) Garbage Grinder (ng) Other No. of persons Spec Showers () Other fixtures Complete bath and fixtures	TR.
Other No. of persons SDEC Showers ()	
Other fixtures Complete bath and fixtures	
Town Water? yes Type of Well none Design Flow 50 gallons per person per day. Total daily flow 600 gallons Septic Tank—Liquid capacity 900 gallons Dimensions: L 10 3 W 4 D 4 D Disposal Trench—No. 3 Width 36 Total Length 100 Total leaching area 300 sq. Disposal Bed—No. Diameter Depth below inlet Total leaching area sq. Dry Well—No. Diameter Depth below inlet Dimensions: x x x	
Design Flow 50 gallons per person per day. Total daily flow 600 gallons	
Septic Tank—Liquid capacity 900 gallons Dimensions: L 10 -3" W 4" D 4"	
Disposal Trench—No. 3 Width 36" Total Length 100 Total leaching area 300 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 (x) No1 Dosing tank ()	
Other: Distribution box (x) No Dosing tank () (Depth of Soil Line Below finished grade at foundation	
Percolation Test Results Performed by Single Results Perfo	-
Test Pit No. 1 minutes per inch Depth of Test Pit 3 feet Test Pit No. 2 minutes per inch Depth of Test Pit 3 feet	
Description of Soil Gravel and fine sand Depth to Ground Water see affidavit	
Will disposal area be filled? Cut down?	-
(On reverse side or separate sheet, show plot plan with building. Include dimensions, distances from all boundaries	es.
Show location of wells, streams, ledge, large trees, etc.)	
ance 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 the board of health. Application Approved by F.S. Siino Owner or builder 5/8/6	3 63
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 (x) or repaired () Keddy Builders Inc. at Lot No. 14 has been constructed in accordance with the provisions INSTALLER	
Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit N	0.
17-63 dated 5/8/63	
The issuance of this certificate shall not be construed as a guarantee that the system will function satisfactoril	y.
DATE 7/19/63 Inspector J. G. Larry	
BOARD OF HEALTH, AMHERST, MASSACHUSETTS DISPOSAL WORKS CONSTRUCTION PERMIT	
No. 17-63 Permission is hereby granted Keddy Builders Inc. to construct (X) or repair ()	
Individual Sewage Disposal System at Lot 14 - Valley View Dr.	411
as shown on the application for Disposal Works Construction Permit No. 17-63	
This permit is issued with the understanding that future alterations or additions will be made if necessary. The permit shall not be construed as permission to create or maintain any sewage nuisance and in the issuance of the	
permit the Board of Health assumes no responsibility for the future operation or maintenance of the system.	

DATE 5/8/63

F. A. Siino
Board of Health



Constitution of the Constitution of

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HEALTH AUTHORITY APPROVAL

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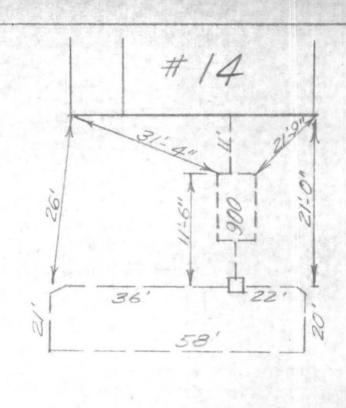
REPORT OF INSPECTION—INDIVIDUAL SEWAGE-DISPOSAL SYSTEM

Septic Tank:				
Distance from well, none fe	V	concrete	N	1
Total liquid capacity,	900 Material,	gallons. Capacity inlet compartmen	Number of compartments	gallor
	et. Inside width,	feet. Liquid depth,	feet.	ganon
Cesspool:				
Distance from: Well,	feet; foundation	,feet; nearest lot line at	front, side, rear,	fee
Inside diameter,fe	et. Depth,	feet. Liquid capacity,galle	ons. Lining material	
SECONDARY TREATMENT consists	of Tile disposal fie	ld. Seepage pits. Other	tribution Box	
Tile Disposal Field:				
Total length of tile lines,	44 Feet. N	feet; nearest lot line at Number of lines,	stance between lines,	fee
Length of each line, Type of filter material: Grant	avel. Broken ston	effective absorption area in bottom of the feet. Depth, top of tile to finish grade. Other	de, 18-20	inche
Depth of filter material benea	th tile,	inches. Depth of filter materi	al over tile, 2	inche
Seepage Pits:	, -			
Number of pits Outs	ide diameter,	feet. Depth,feet. Linin	ng material	
		dation,feet; nearest lot line a		
Inspection made by: State.	☐ County. ☐ Loca	Health Authority.		
	1	Inspected by	with a Sin	0
Date of inspection	120 106		of Public Health	
Date of inspection	, 196		(TITLE)	
Individual wells ☐ are ☐ are not Give most recent record of failure		rhood. vicinity to furnish adequate supply of w	vater	
Properties in neighborhood are	are not being dev	eloped with both individual water-supply	y and sewage-disposal systems.	
Lot size:feet wide,	feet deep	Dwelling set back from front propert	ty line,feet.	
Individual water supply from: I	Drilled well. Driv	ven well. Dug well. Bored wel	1.	
Distance of well from:				
Building foundation,				
	te	et; nearest lot line at □ front, □ side,	☐ rear,	fee
cast mon seven		et; nearest lot line at front, side,		
	_feet; tile sewer,	et; nearest lot line at front, side, feet; septic tank, feet; other sources of possible pollu	feet; disposal field,	
seepage pit,fee	_feet; tile sewer,	feet; septic tank,	feet; disposal field,	
seepage pit,fee	_feet; tile sewer, t; cesspool,	feet; septic tank, feet; other sources of possible pollu	feet; disposal field, ution,feet.	fee
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seepage pit,fee Well construction: Diameter,inches. Approximate depth to pumpir Sealed watertight to depth of	feet; tile sewer, t; cesspool, Total depth, ng level of water in w feet.	feet; septic tank,	feet; disposal field, ution,feet Depth of casing, d,gallons per minute	fee
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seepage pit,fee Well construction: Diameter,inches. Approximate depth to pumpir Sealed watertight to depth of _ Exterior space around casing s Well cover: _ Concrete	Total depth, ng level of water in wfeet. realed with: Cemen Wood Metal. (0)	feet; septic tank, feet; other sources of possible pollution feet. Type of casing, vell, feet. Approximate yield for grout. Puddled clay. Ordinary Openings in well cover watertight: Yell	feet; disposal field, ution,feet. Depth of casing, d,gallons per minute y backfill. es. \[\sum \] No.	fee
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☆ U. S. GOVERNMENT PRINTING OFFICE : 1957 O-F-42703

	REPORT		A PARTY		(THIS SECTION FOR VA	USE ONLY)				-	
REGIONAL OFF	ICE	Tille	V- 1	His .		PROPERTY ADDRESS			SUBDIVISIO	Sectio	Ma	nor
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Keddy Builders, Inc.				Amherst, Ma	TYPE OF IN	NSTALLATION EX						
				HER AREA BE MADE INTO	IF YES, HOW	WATER SUPPLY	R SUPPLY AND SEWAGE DISPOSAL (Check)					
LIVING UNITS		DCCRES				OOMS?	MANY?	Secretary of the	PUBLIC	COMMUNI	ITY I	INDIVIDUAL
1 3 1 □ NO □ YES □				130	X _O	A Property	WATER SUPPLY BY SEWAGE DISPOSAL BY	XXX			XXXX	
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	PART I below any pertinent findings not fully described on other	(Continued)	
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COMMENTS (Note any supplemental	pertinent information. If conditions are found which m	ay result in an opinion that the system is unsa	tisfactory, describe in detail.)
INSPECTION OF INDIVIDUAL WATER STATE COUNTY SIGNATURE OF INSPECTING OFFICIA	LOCAL HEALTH AUTHORITY	VA COMPLIANCE INSPECTOR	DATE OF INSPECTION
SIGNATURE OF INSPECTING OFFICIA			
INSPECTION OF INDIVIDUAL SEWAG	E DISBOSAL SYSTEM MADE BY	- SA	DATE OF INSPECTION
STATE COUNTY	LOCAL HEALTH AUTHORITY	VA COMPLIANCE INSPECTOR	DATE OF INSPECTION
SIGNATURE OF INSPECTING OFFICIA		TITLE	
		and the same of the	
		ARTMENT OFFICIAL REVIEWING REPO	DRT
BASED ON THE INFORMATION REPO IT IS THE OPINION OF THE (Check)	RTED HEREON AND OTHER AVAILABLE INFORMATION		
STATE COUNTY	LOCAL DEPARTMENT OF HEALTH	SATISFACTORY AS A DOMESTIC WAT	TER SUPPLY FOR THE SUBJECT PROPERTY
THAT THIS INDIVIDUAL WATER SUPP	LY SYSTEM IS:		WATER SUPPLY FOR THE SUBJECT PROPERTY
BASED ON THE INFORMATION REPORT IS THE OPINION OF THE (Check)	TED HEREON, AND OTHER AVAILABLE INFORMATION	CAN BE EXPECTED TO FUNCTION SAT	TISFACTORILY AND IS NOT LIKELY TO CREATE AN
	COCAL DEPARTMENT OF HEALTH	INSANITARY CONDITION	
CTATE COUNTY	POSAL SYSTEM, WITH PROPER MAINTENANCE:	CANNOT BE EXPECTED TO FUNCTION	N SATISFACTORILY
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THAT THIS INDIVIDUAL SEWAGE-DIS			
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