HEALTH AUTHORITY APPROVAL

			PA	ART I.	—то	BE	COI	MPL	ETE	B	YF	HA						3				
URING OF	FFICE	Clas		4	MORTG	1	QC1									SER	IAL N	10	-		VI.	
INSURING OFFICE							- Mil															
Boston, Mass. MORTGAGOR OR SPONSOR						Amherst Savings Bank PROPERTY ADDRESS							400	251-015558-203								
KIGAGO	The Strongon							T KO	-KII	700	NEOO										1	
DIVISION	Geddy Bldrs.	× 19		101	N				Lot	I	5 V	alle	У	Vie	w l	BIC	re.	Aml	her		Mas	s.
DI 1101011		4					100		1	1	/											1
TOTAL NUMBER:				BASEMENT				New installation							or other area be made l bedrooms?			ade i	nto			
1	2 /		Yes		No										Yes	E	N	Ю		(If Yes,	how	man
Public			П	Comm	unity s	systen	n				F	Ir	ndiv	idu	al	NO			200	SIGNE		
EWAGE DISPOSAL BY:			7 70	Community system				Individual Individual				NO. OF BDRMS.		GARBAGE DISPOSAL								
Public	system			Connin	iumty .	syster	11		100		L	11	Idiv	Idua	11	1	_		П	Yes	X	11
is the	opinion of the	State	e C	ounty		Local	Dep	artm	ent e	of H	Ieal	th th	at t	his	indi	vidu	al w	ater	-sup	ply s	yste	m
is	TRANSPORT	_	as a dom	-		į.				100					Lane.			N. S.				
VILLET WALL	opinion of the	Stat	е ЦС	ounty	Lb	Local	Dep	partm	ent	of I	Heal	th th	at 1	this	ind	vidu	al s	ewa	ge-di	sposa	al sy	s-
	be expected to fu		satisfactori	ly, and	d /					Г	70	annot	be	e ex	pect	ed to	o fur	nctic	n sa	tisfac	toril	ly
Whole Consul	ot likely to create	+11 (2000)	nitary con	dition	The same of		Marie Co	Contract				C. (1) (1)	-			- Albert	Todation.		A in	il with	100	No.
-1	- 1,	ATURE	Calledon services	gargani - m	San Fa		*	0	2			TITLE	4		0.00	0.0	Dest	34-	17-	alt		
11.	30/63	KG	rele	hi	h	1 -	0	Fir	in)		D.	A.A.	16 6	O.E.	ar.	E (11)	240	ne	noted, tel	•	
	NOTE: The health aces provided. Use of the above alth authority.				, V					1					- 1		(Accel					
I hav	HIEF UNDERWRITE e reviewed the fo ndividual water-su Sewage disposal be	regoing apply sys	and the p	ertiner	red [A Con	nplia cepta	nce I	nspe	No	n R				econ	nmer	nd th	nat 'i	the			

DEPUTY FOR CHIEF ARCHITECT

REPORT OF INSPECTION—INDIVIDUAL SEWAGE-DISPOSAL SYSTEM

PRIMARY TREATMENT consists of Septic tank. Cesspool.	
Septic Tank:	
Distance from well, nonefeet. Material, concrete Number of compartme	ents 1
Total liquid capacity, 900 gallons. Capacity inlet compartment, 900	gallons.
Inside length, 6 feet. Inside width, 4 feet. Liquid depth, 4 feet.	
Cesspool:	
Distance from: Well,feet; foundation,feet; nearest lot line at [] front, [] side, [] rear, _	
Inside diameter,feet. Depth,feet. Liquid capacity,gallons. Lining material	
SECONDARY TREATMENT consists of Tile disposal field. Seepage pits. Other Vistabution	130x
Tile Disposal Field:	
Distance from: Well, feet; foundation, feet; nearest lot line at front, side, rear, Total length of tile lines, feet. Number of lines, Distance between lines, Trench width, 3	square feet. inches.
	inches.
Seepage Pits:	
Number of pits Outside diameter,feet. Depth,feet. Lining material	
Distance from: Well,feet; building foundation,feet; nearest lot line at front, side, real	r,feet.
Inspection made by: State. County. Local Health Authority.	
Inspected by the Suns	
Date of inspection 7/16, 1963 Director of Public Hea	1th
(TITLE)	
Individual wells are are not customary in neighborhood. Give most recent record of failure of wells in immediate vicinity to furnish adequate supply of water	
Properties in neighborhood [are [are not being developed with both individual water-supply and sewage-disposal systems.]	ems.
Lot size:feet wide,feet deep. Dwelling set back from front property line,feet.	
Individual water supply from: Drilled well. Driven well. Dug well. Bored well.	
Distance of well from:	
Building foundation,feet; nearest lot line at _ front, _ side, _ rear,	feet,
cast iron sewer,feet; tile sewer,feet; septic tank,feet; disposal field,	
seepage pit,feet; cesspool,feet; other sources of possible pollution,feet.	
Well construction:	
	foot
Diameter,inches. Total depth,feet. Type of casing, Depth of casing, Approximate depth to pumping level of water in well,feet. Approximate yield,gallons per in the case of	
Sealed watertight to depth offeet. Approximate yield,ganons per i	imiuc.
Exterior space around casing sealed with: Cement grout. Puddled clay. Ordinary backfill.	
Well cover: Concrete. Wood. Metal. Openings in well cover watertight: Yes. No.	
Pump: Shallow well. Deep well. Length of drop pipe,feet. Pump capacity,gallons per m	ninute
	muu.
Located in: Basement. Pumproom off basement. Pumphouse above ground. Pump pit. Pumproom properly drained: Yes. No. Pump mounting watertight: Yes. No.	Y
Type of storage: Pressure. Gravity. Capacity,gallons.	1
Has bacteriological examination of water been made? Yes. No. If answer is "yes," give date	10
Quality of water \square is \square is not satisfactory for human consumption.	, 19
Installation ☐ does ☐ does not comply with approved exhibits, if any.	
Inspection made by: State. County. Local Health Authority.	
Inspected by	
Date of inspection, 19	
Date of inspection	

☆ U. S. GOVERNMENT PRINTING OFFICE : 1957 O-F-42703

	REPO	ORT OF	INSPECT	TION, INDI	VETERANS ADMINIS	UPPLY AND	SEWAGE-DISPO	SAL SY	STEM			
REGIONAL OFF	ICE	1			PROPERTY ADDRESS	USE ONLY)	SUBDIVISION NAME Manor					
Boston, Massachusetts					Lot # 16 Val			Section II BLOCK NO. LOT NO.				
NAME OF BUILDER Keddy Builders, Inc.					NAME OF LENDER	Saunuse	768	CASE NO. TYPE OF INSTALLATION EXECUTE: The control of the contro				
					Amherst, M	assachuse	etts					
The second second	AL NUMBER	100000000000000000000000000000000000000	BASEMENT	CAN ATTIC OR C	OTHER AREA BE MADE INTO	IF YES, HOW	WATER SUPPLY			CONTRACTOR OF THE PARTY OF THE		
LIVING UNITS	BEDROOMS	BATHS	YES YES	CONTRACTOR OF		e established t	THE REPORT OF THE PARTY OF THE	PUBLIC	COMMUNITY	INDIVIDUAL		
1	3	1	□ NO	YES F	NO NO	A OFSIGE	SEWAGE DISPOSAL BY	XXX		XXX		
7/3	2/10	PART I		F INSPECTING C	OFFICIAL (Fill in below	information ap	THE RESIDENCE OF THE PROPERTY OF THE PARTY O)			
			Control of the Contro		with approved exhibits ar				The second secon			
	EXCENT.			IN.	NDIVIDUAL WATER SUI	PPLY SYSTEM	20 Y (20 9)	TAR				
Properties in Lot size: Individual was Distance of variations Building cast seep Well construct Diamete Approx Sealed Exterior Well co Pump: S Located Pump ro Type of Has bacteriol Quality of was	neighborho	inches h of pumpi to depth or und casing Concrete. Dee assement. rly drained. Pressure mination or is not so	e of wells in i e are not livide, Drilled well. feet; cess s. Total deptions level of word. Pump roo d: Yes. re. Graviof water been atisfactory for	being developed feet d Driven well eet; tile sewer, spool, oth, feet. Cement gr Metal. Open gth of drop pipe om off basement. No. Pump n rity. Capacity,	d with both individual watedeep. Dwelling set back full. Dug well. Bore feet; nearest lot line at feet; some feet; other sources of feet. Type of casing, feet. Approximate feet. Approximate feet. Pump of feet. Pu	er-supply and ser from front proper red well. front, side septic tank, red frossible pollut Ordinary bac Ordinary bac ght: Yes. ground. Pum Yes. No.	rty line,	feet. posal field,	casing,	feet;		
Installation] does [does not c	omply will a			- COLL CUCTE		2				
DRIVADV TOE	ATMENT O		C Section		IVIDUAL SEWAGE-DIS	POSAL SYSTE	M		THE ST			
Septic t	ank:	202	•	nk. Cesspool								
Disto	ince from w	ell, none	e feet. M	Material,	concrete		000	oer of comp	artments	1		
	l liquid cap e length,				ns. Capacity inlet compar feet. Liquid depth,	rtment,	900 gallon	5.				
Cesspoo			ser. Illside .	vidin,	reer. Liquid depin,	1001.						
		Well,	feet;	foundation,	feet; nearest lot line	at 🗌 front, 🗌	side, 🗌 rear,	_feet.				
Insid	e diameter,	1	_feet. Dept	h,fee	t. Liquid capacity,	gallons. Lin	ning material	3744				
SECONDARY	TPFATMEN	AIT consists	of Distrib	bution box and [Tile disposal field.	Seepage pits.	Other					
Tile dis	posal field						DE LO PRESIDE					
Disto	ince from:	Well,	feet;	foundation,	O feet; nearest lot line	at 🗌 front, 🗗	Side, rear, 30	feet.				
(Tota	l length of	tile lines,_	124 fee	et. Number of I	lines, Distance	e between lines,	feet.					
		13	W4 4		372 square feet. Tre	CONTRACTOR OF THE PARTY OF THE	A CONTRACTOR OF THE PARTY OF TH	A PER				
Leng	th of each	line, Cor	SUfeet. L	Depth, top of file	to finish grade, 1842	Linches.	hel Trave	,0				
Dept	of filter m	aterial: L	Gravel. L	Broken stone.	Cinders. Other Depth of filter material of	over tile, 2	inches.			19 19 21 10		
Seepag				Ers the be	FECTIVE DOLLARS							
Num	ber of pits,				feet. Depth,			13,13,2	A KELL	detail A		
Disto	ince from:	Well,	feet;	foundation,	feet; nearest lot line	at 🗌 front, 🗌	side, 🗌 rear,	_feet.				
					ation available: munity system,f	fact						
				ge of lot,		LIVE AL	Approximate	e slope	feet p	er 100 feet.		
					dy clay. Coarse sand	or gravel.						
					Yes. No. Baser		Process of the second	100	FANTE, BE			
					Bathtub. 🗌 Shower. 🔲	The state of the s						
					ner				c tank. 🗌 S	eepage pits.		
					Surface. Dry well	II. Sump in	basement. Other	THE THE	THE PERSON			
			E TO SERVICE OF THE PARTY OF TH	urface discharge. at foundation,	Dry well. Other							
Depin	of nouse se	wer below	finish grade	at toundarion,_	feet.			100	11/600	100		
	A	ALK NO	and the same		PART I (Continued o	in reverse)						

INSPECTOR'S SKETCH (Show by sketch below any pertinent findings not fully described on a	ther side.)	
INSPECTOR'S SKETCH (Show by sketch below any pertinent findings not fully described on a	I (Continued) ther side.)	
INSPECTION OF INDIVIDUAL WATER SUPPLY SYSTEM MADE BY: STATE COUNTY LOCAL HEALTH AUTHORITY	VA COMPLIANCE INSPECTOR	OF INSPECTION
SIGNATURE OF INSPECTING OFFICIAL	TITLE	
The state of the s	West of the second second	
INSPECTION OF INDIVIDUAL SEWAGE-DISPOSAL SYSTEM MADE BY: STATE COUNTY LOCAL HEALTH AUTHORITY SIGNATURE OF INSPECTING OFFICIAL	VA COMPLIANCE INSPECTOR	OF INSPECTION
PART II—FOR USE OF THE HEALTH BASED ON THE INFORMATION REPORTED HEREON AND OTHER AVAILABLE INFORMATI IT IS THE OPINION OF THE (Check) STATE COUNTY LOCAL DEPARTMENT OF HEALTH THAT THIS INDIVIDUAL WATER SUPPLY SYSTEM IS: BASED ON THE INFORMATION REPORTED HEREON, AND OTHER AVAILABLE INFORMATI IT IS THE OPINION OF THE (Check) STATE COUNTY LOCAL DEPARTMENT OF HEALTH THAT THIS INDIVIDUAL SEWAGE-DISPOSAL SYSTEM, WITH PROPER MAINTENANCE: REMARKS	SATISFACTORY AS A DOMESTIC WATER SUP	R SUPPLY FOR THE SUBJECT PROPERTY ORILY AND IS NOT LIKELY TO CREATE AN
DATE SIGNATURE OF REVIEWING OFFICIAL	TITLE	
2/2.1.	Director of Pu	blic Health
1/30/63 Grederich G	- Seins	man right mi
PART III—FO I have reviewed the foregoing and the pertinent VA Compliance I individual water supply system be considered Accepted individual sewage-disposal system be considered Accepted REMARKS	able Not acceptable	5 M 2 128 M 1
DATE SIGNATURE OF CHIEF, APPRAISAL SECTION	Charles of the Control of the Contro	Pake for A Francis
em en el estado de la composição de la com		de Harris
* U.S. GOVERNMENT PF	IINTING OFFICE : 1960 OF—543294	Car Tien



