

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

No. 64-27 Date 10-7-64 Fee 1.00 Date Rec'd. 10-7-64 By [Signature]

Application is hereby made for a permit to Construct ( ) or Repair (X) an Individual Sewage Disposal System at:  
 Location—Address 6 WILSONS LANE or Lot No. \_\_\_\_\_  
 Owner S. J. Wansky Address 6 WILSONS LANE  
 Contractor S. J. Wansky Address WILSONS  
 Type of Building \_\_\_\_\_ Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_  
 Dwelling—No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder ( )  
 Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( )  
 Other fixtures \_\_\_\_\_  
 Town Water? \_\_\_\_\_ Type of Well \_\_\_\_\_  
 Design Flow \_\_\_\_\_ gallons per person per day. Total daily flow \_\_\_\_\_ gallons  
 Septic Tank—Liquid capacity \_\_\_\_\_ gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_  
 Disposal Trench—No. 3 Width 2 Total Length 180 Total leaching area 480 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) No. 1 Dosing tank ( )  
 (Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)  
 Percolation Test Results Performed by [Signature] Date \_\_\_\_\_  
 Test Pit No. 1 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
 Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
 Description of Soil \_\_\_\_\_ Depth to Ground Water \_\_\_\_\_  
 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 aforescribed 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] \_\_\_\_\_ date 10-7-64  
 Owner or builder [Signature] \_\_\_\_\_ 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. 64-27  
 Permission is hereby granted S. J. Wansky to construct ( ) or repair (X) an Individual Sewage Disposal System at 6 WILSONS LANE as shown on the application for Disposal Works Construction Permit No. 64-27  
 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 \_\_\_\_\_ Board of Health [Signature]



White to  
C.V. H... RENEWAL

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-13 Date 8-9-66 Fee NO FEE Date Rec'd. \_\_\_\_\_ By CEH

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

Location—Address WILLOWOOD LANE (LAST LOT) or Lot No. \_\_\_\_\_

Owner EKINS Address \_\_\_\_\_

Contractor PLANTATION VALLEY HOMES Address NATFIELD

Type of Building \_\_\_\_\_ Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_

Dwelling—No. of Bedrooms 3 Expansion Attic (No) Garbage Grinder (YES)

Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( )

Other fixtures 2 BATHS - DISHWASHER

Town Water? \_\_\_\_\_ Type of Well \_\_\_\_\_

Design Flow \_\_\_\_\_ gallons per person per day. Total daily flow 600 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

Disposal Trench—No. \_\_\_\_\_ Width \_\_\_\_\_ Total Length \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.

Disposal Bed—No. 1 Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Total leaching area 600 sq. ft.

Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: 15 x 40 x \_\_\_\_\_

Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( )

(Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)

Percolation Test Results Performed by Deale Date 4-21-64

Test Pit No. 1 10 minutes per inch Depth of Test Pit 36"

Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_

Description of Soil COARSE SAND - CLAY FINES Depth to Ground Water 6' +

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 aforescribed 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 CE Deale Plantation Valley Homes Owner or builder alfred madoo date 8-9-66

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

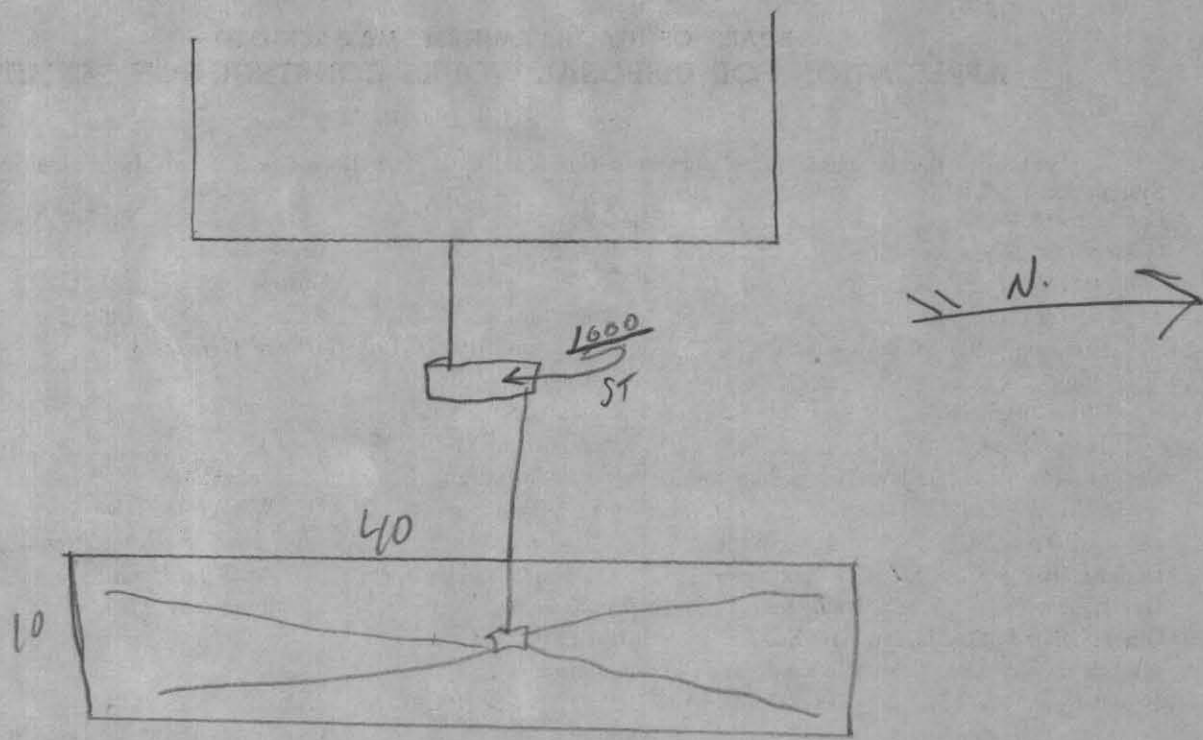
No. 64-13 Permission is hereby granted PLANTATION VALLEY HOMES to construct (X) or repair ( ) an

Individual Sewage Disposal System at WILLOWOOD LANE

as shown on the application for Disposal Works Construction Permit No. 64-13

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 August 9, 1966 CE Deale Board of Health



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WILDWOOD LAKE

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

No. 64-34 Date 11/5/64 Fee 6- Date Rec'd. 11-5-64 By CE Drake

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

Location—Address WILDWOOD LAWE or Lot No. (22)  
 Owner TOMLINSON Builders Address 5 MEADOW BROOK DRIVE  
 Contractor TOMLINSON Builders Address HADLEY  
 Type of Building RANCH Dimensions 67 X 28 Size Lot 20,000  
 Dwelling—No. of Bedrooms 3 Expansion Attic ( ) Garbage Grinder ( )  
 Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers (1)  
 Other fixtures 1 1/2 BATH  
 Town Water? YES Type of Well \_\_\_\_\_

Design Flow 30 gallons per person per day. Total daily flow 300 gallons  
 Septic Tank—Liquid capacity 900 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_  
 Disposal Trench—No. \_\_\_\_\_ Width \_\_\_\_\_ Total Length \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.  
 Disposal Bed—No. 1 Diameter 10 X 30 Depth below inlet \_\_\_\_\_ Total leaching area 300 sq. ft.  
 Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_  
 Other: Distribution box (1) No. \_\_\_\_\_ Dosing tank ( )  
 (Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)  
 Percolation Test Results Performed by intdru field system Date \_\_\_\_\_  
 Test Pit No. 1 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
 Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_  
 Description of Soil GRAVEL Depth to Ground Water 6-7'  
 Will disposal area be filled? YES 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 aforescribed 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 CE Drake TOMLINSON Builders by Jerald H. Slater 11/5/64  
 Owner or builder Jerald H. Slater date 11-5-64  
 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.

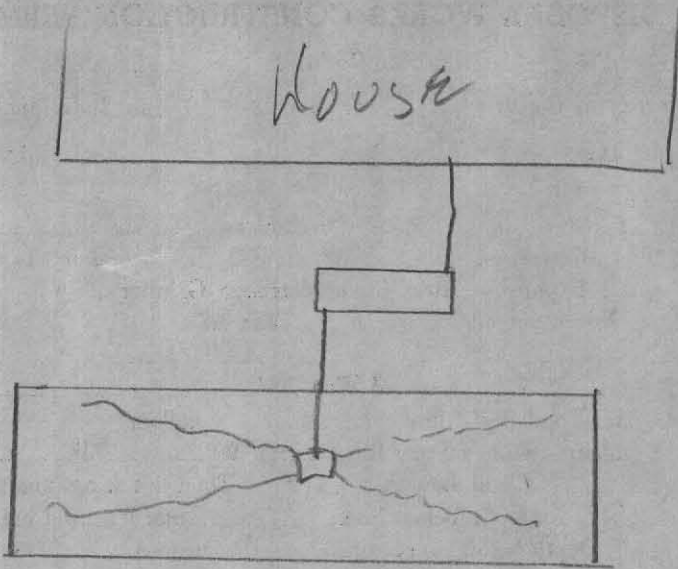
DATE \_\_\_\_\_ Inspector \_\_\_\_\_

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

No. 64-34  
 Permission is hereby granted Tomlinson Builders to construct ( ) or repair ( ) an Individual Sewage Disposal System at Lot 22 Wildwood Lane as shown on the application for Disposal Works Construction Permit No. 64-34

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 11-5-64 CE Drake  
 Board of Health



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STREET

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

No. 64-13 Date 4-21-64 Fee \$3.00 Date Rec'd. 4-21-64 By SP

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

Location—Address WILLOWOOD LANE HASHTOR or Lot No. \_\_\_\_\_

Owner EDGE-JONES Address Main St

Contractor A F Conklin Address \_\_\_\_\_

Type of Building DWELLING Dimensions \_\_\_\_\_ Size Lot 110 x 150

Dwelling—No. of Bedrooms 3 Expansion Attic (X) Garbage Grinder (X)

Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( ) \_\_\_\_\_

Other fixtures 2 BATHS - DISHWASHER

Town Water? YES Type of Well None

Design Flow 75 gallons per person per day. Total daily flow 600 gallons

Septic Tank—Liquid capacity 1000 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

Disposal Trench—No. \_\_\_\_\_ Width \_\_\_\_\_ Total Length \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.

Disposal Bed—No. 1 Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Total leaching area 540 sq. ft.

Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: 15 x 40 x \_\_\_\_\_

Other: Distribution box (X) No. \_\_\_\_\_ Dosing tank ( ) \_\_\_\_\_

(Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)

Percolation Test Results Performed by \_\_\_\_\_ Date \_\_\_\_\_

Test Pit No. 1 8 minutes per inch Depth of Test Pit 36"

Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_

Description of Soil COARSE SAND CLAY FINES Depth to Ground Water \_\_\_\_\_

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 aforescribed 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 CE Drake \_\_\_\_\_ date 4-21-64

A F Conklin  
 Owner or builder  
 date  
4-21-64  
 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.

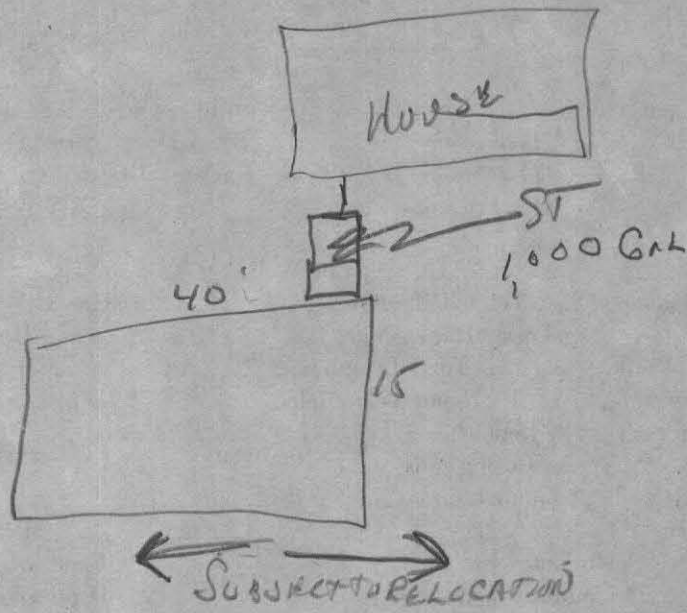
DATE \_\_\_\_\_ Inspector \_\_\_\_\_

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

No. 64-13  
 Permission is hereby granted A F Conklin to construct (X) or repair ( ) an Individual Sewage Disposal System at WILLOWOOD LANE as shown on the application for Disposal Works Construction Permit No. 64-13

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 4-21-64 \_\_\_\_\_  
 Board of Health



WILLOWOOD LAWN





7.00

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 64-35 Date 11/5/64 Fee 6- Date Rec'd. By

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

Location-Address WILD WOOD LAURE or Lot No. 23

Owner Tomlinson Builders Address 5 MEADOW BROOK

Contractor Tomlinson Builders Address HADLEY

Type of Building Two story Dimensions 125 X 200 Size Lot 24, 779

Dwelling-No. of Bedrooms 4 Expansion Attic ( ) Garbage Grinder ( )

Other No. of persons Showers (2)

Other fixtures 1 1/2 BATH

Town Water? YES Type of Well

Design Flow 50 gallons per person per day. Total daily flow 400 gallons

Septic Tank-Liquid capacity 1100 gallons Dimensions: L W D

Disposal Trench-No. Width Total Length Total leaching area sq. ft.

Disposal Bed-No. 1 Diameter 10 X 40 Depth below inlet Total leaching area 400 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 sub done full septon Date

Test Pit No. 1 minutes per inch Depth of Test Pit

Test Pit No. 2 minutes per inch Depth of Test Pit

Description of Soil GRAVEL Depth to Ground Water 5-6'

Will disposal area be filled? YES 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 aforescribed 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.

Tomlinson Builders by Gerald Holsten 11/5/64

Application Approved by C. Drake Owner or builder date 11/5/64

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.

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

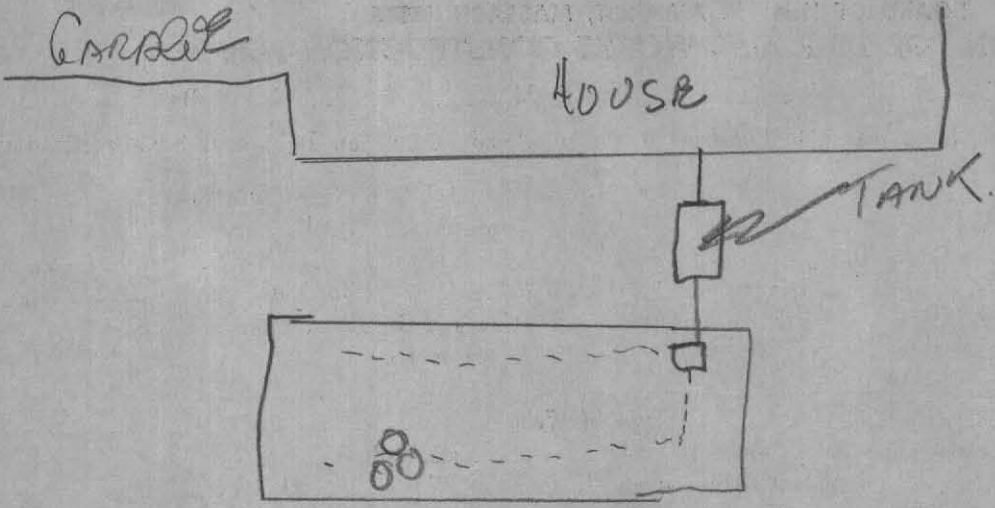
No. 64-35 Permission is hereby granted Tomlinson Builders to construct (X) or repair ( ) an

Individual Sewage Disposal System at Lot # 23 Wildwood home

as shown on the application for Disposal Works Construction Permit No. 64-35

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 Board of Health



BOARD OF HEALTH  
AMHERST, MASS.

Applic. No. 19

APPLICATION TO CONSTRUCT, REPAIR, OR ALTER PRIVATE SEWAGE DISPOSAL SYSTEM

Must be completed and submitted to the Board of Health before a building is started or any system is constructed or altered.

Owner SWENSON, PAUL Address FARVIEW WAY Phone \_\_\_\_\_

Builder WENTWORTH, W.J. Address MT. PLEASANT Phone \_\_\_\_\_

System to be installed by BUILDER - (STOBIN  
name, address, and phone

Location WILDWOOD LANE Size 100 x 150  
street, subdivision, and lot no. width, depth

House - Dimensions 64'8" x 30 1/2' No. Bedrooms 3 No. Occupants 3

Plumbing fixtures - No. Toilets 2 No. Sinks 1 No. Lavatories 2

No. Showers 1 No. Bathtubs 1 Dishwasher No  
yes or no

Garbage Disposal No Auto. Washer \_\_\_\_\_  
yes or no yes or no

Any in basement? ? Others ?  
which

On reverse side make sketch of lot, show size, location of house, position of water service, and location of proposed disposal system.

To be approved:

Proposed septic tank size (must be cement) MIN. 600 gal

Drainage system, type, and dimensions 10' x 30' LEACH BED

Date MARCH 11, 1958 Signed W J Wentworth  
applicant

Do not fill in below

Site Survey Slope - System <sup>3/12/58</sup> must be in rear if not possible to connect  
to sewer.

Other \_\_\_\_\_

Approval of Plans

Septic tank O.K. for installation Disposal system 8 x 30 - 240 gal Approval

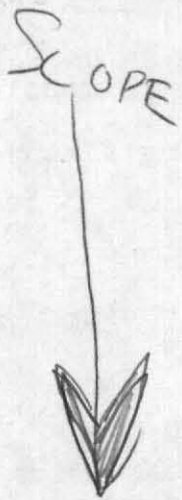
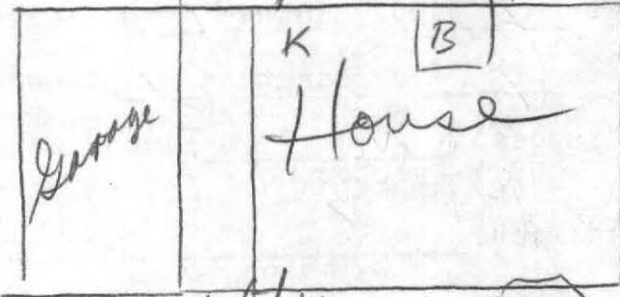
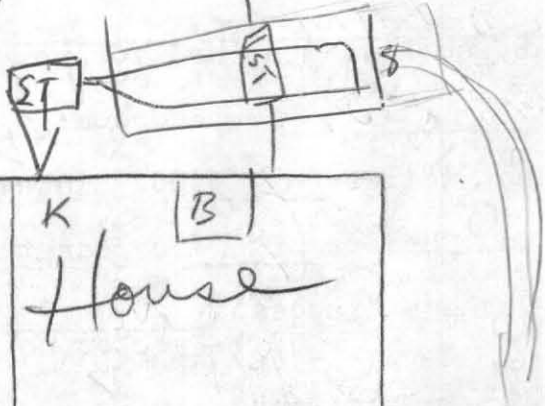
Final inspection

Remarks

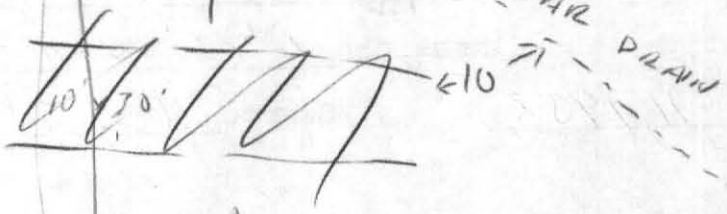
Final Approval 6/2/58 G.H. Jones

(Make in Duplicate, keep one for your files)

10 x 30  
Reel



Line for  
sewer installed



↑  
10'