

No. _____

FEE \$ 50.-

COMMONWEALTH OF MASSACHUSETTS

Board of Health, Chilmark, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct Repair () Upgrade () Abandon () - Complete System Individual Components

Location	#60 Meeting House Road	Owner's Name	Christiane Caldwell
Map/Parcel#	16-187	Address	c/o Vineyard Land Surveying & Engineering
Lot#		Telephone#	P. O. Box 421, W. Tis., MA 02575
Installer's Name		Designer's Name	
Address		Address	
Telephone#		Telephone#	508-693-3774

VLS&E #599-67

Type of Building Residential Lot Size ±3.23 Acres sq. ft.

Dwelling - No. of Bedrooms _____ Garbage-grinder ()

Other - Type of Building _____ No. of persons _____ Showers (), Cafeteria ()

Other Fixtures _____

Design Flow (min. required) _____ gpd Calculated design flow _____ gpd Design flow provided _____ gpd

Plan: Date February 18, 2024 Number of sheets 1 Revision Date _____

Title Proposed Garage Septic Tie-In Plan

Description of Soil(s) _____ **SEE PLAN**

Soil Evaluator Form No. _____ Name of Soil Evaluator _____ Date of Evaluation _____

DESCRIPTION OF REPAIRS OR ALTERATIONS To tie-in an existing garage with proposed 2 bedrooms into the existing 6 bedroom leaching field.

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees to not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed Michael Tordella (Mayor) Date 2-20-24

Inspections _____

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CERTIFICATE OF COMPLIANCE

Description of Work: Individual Component(s) Complete System

The undersigned hereby certify that the Sewage Disposal System; Constructed (), Repaired (), Upgraded (), Abandoned ()

by: #60 Meeting House Road (Assr.Pcl. 18-40)

has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. _____, dated _____, Approved Design Flow _____ (gpd)

Installer Vin. Land Surveying & Eng. Inspector: _____ Date: _____

The issuance of this permit shall not be construed as a guarantee that the system will function as designed.

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DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct () Repair () Upgrade () Abandon () an individual sewage disposal system at #60 Meeting House Road (Assr.Pcl. 18-40) as described in the application for

Disposal System Construction Permit No. _____, dated _____.

Provided: Construction shall be completed within three years of the date of this permit. All local conditions must be met.

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