

PURPOSE OF APPLICATION: NEW BUILDING CONSTRUCTION ALTERATION OF EXISTING SYSTEM REPAIR TO MALEFUNCTIONING SYSTEM

SITE LOCATION: POLE # 3433 SHEET 129 KAUFFMAN RD. TIVERTON CITYTOWN 7.9.88

PLAT NUMBER: 160 ASSESSORS RECORDED: LOT NUMBER: 62 LOT SIZE: 108x140' WETLANDS DETERMINATION REQUEST ATTACHED? YES NO

SUBDIVISION NAME: RIDGEVIEW OF TIVERTON SUBDIVISION LOT NUMBER: [blank] REVIEWED BY STATE? YES NO WATER SUPPLY: PUBLIC WELL

OWNER'S NAME: [redacted] LAST: BISZKO FIRST: HELEN INT: A

MAILING ADDRESS: 129 KAUFFMAN RD. TIVERTON, R.I. 02878 CITYTOWN: [blank] ZIP CODE: A

BUILDING USE: HOME ANY PREVIOUS APPLICATION FOR THIS SITE? YES NO APP. NO. [blank] DATE: [blank]

NO. DESIGN UNITS: 3 Bedrooms DESIGN FLOW: 150 GALLONS PER UNIT TOTAL DAILY FLOW: 450 GALS

REQ'D. TANK SIZE: 1000 GALS. TYPE SYSTEM: TRENCH CHAMBER BED OTHER DESCRIBE: [blank]

NUMBER OF LINES: 2 WIDTH: 18" LENGTH: 263' TOTAL SQ FEET: 523.4

SOIL DESCRIPTION BY STRATA - SEE REVERSE SIDE FOR CODES AND INSTRUCTIONS.

DEPTH	TO	TO	DEPTH HOLE	DEPTH IMPERVIOUS
0	TO	TO		TO
SOIL TEXTURE				
DENSITY				
DEPTH	TO		DEPTH HOLE	
SOIL TEXTURE			DATE HOLE EXCAVATED	
DENSITY				

WATER TABLE DATA

DEPTH (A)	DATE	DEPTH (B)	RATE	PERCOLATION RATES
1		1		
2		2		
3	06/15	3		
4		4		
5		5		

PERCOLATION RATES

DEPTH	DATE	DESIGN PERC. RATE	DESIGN APP. RATE
1			
2			
3			
4			
5			

WET SEASON DESIGN DEPTH: [blank] FEET EXPLAIN HOW DETERMINED: [blank]

The undersigned, [blank] Engineer/Surveyor, hereby certifies that he has conducted certain percolation tests, subsol. explorations and ground water table elevation determinations on the property identified in and by this application and accompanying forms, subtitles, plans and sketches; that said tests have been conducted in accordance with the rules and regulations of the Rhode Island Department of Environmental Management pertaining to individual sewage disposal systems; that he has prepared all of the aforementioned documents; and that all information on this application and accompanying forms, subtitles, plans and sketches are true and accurate and represent truthfully and accurately the information, legend and the information and designs on the accompanying forms, subtitles, plans and sketches purport to represent.

SIGNATURE OF ENGINEER/SURVEYOR: [blank] TITLE: [blank] TELEPHONE NO.: [blank]

REGISTRATION NUMBER: [blank] REPRESENTING: [blank]

The Owner certifies that the system will be installed in strict accordance with the application and attached forms, subtitles, plans and sketches. The Owner further certifies that he assumes all responsibility for the truth and accuracy of the representations herein, and on all forms, subtitles, plans and sketches attached hereto, and assumes all liability and responsibility for any improper installation of the system on the site, and agrees to hold the Department of Environmental Management harmless from any and all claims against it for any future failure of the system.

TELEPHONE NO.: 624-8719

Owner's Signature: Helen A. Biszko

DISPOSITION OF APPLICATION (ENVIRONMENTAL MANAGEMENT DEPT. USE ONLY)
 THIS APPLICATION ATTACHED PLAN AND SPECIFICATIONS ARE HEREBY:

APPROVED RENEWED TRANSFERRED DENIED OWNERSHIP SEE ATTACHED SHEET 1

PREVIOUS APP. NO.: [blank]

If approved, renewed or transferred, the following apply:
 Based upon the representations of the Owner, and the Owner's agents and/or servants, including the representations of the Owner's Engineer and/or Surveyor, regarding the truth and accuracy of all information submitted on the application and the accompanying forms, subtitles, plans and sketches, this application for an individual sewage disposal system is hereby approved. The Department of Environmental Management assumes no responsibility or liability for the future safe operation or maintenance of the aforesaid system, or the fitness or suitability of this system to this site, nor does it assume any responsibility for the accuracy and truth of the Owner's, or the Owner's agents' and/or servants' representations. This approval is subject to future suspension and revocation in the event that subsequent examination reveals any of the data indicated on any application, form, subtitle, plan or sketch to be incorrect, or not in compliance with the regulations, or in the event that the system discharges sewage on or to the surface of the ground, or, on or to any watercourse or, fails to operate satisfactorily in any other manner.

This approval expires in 1 year if water supply is individual well, or in 2 years if public. This permit is valid for owner signed above only. change of ownership requires new permit.

IMPORTANT: NOTE (Circled) ADDITIONAL TERMS OF APPROVAL

A. Bottom of leaching area excavation must be inspected by the Dept. of Environmental Management prior to placement of any gravel or stones.

B. Excavation work on leaching area must be performed during dry season only (June-November).

C. It is essential that all distances and elevations be accurately set prior to the start of construction.

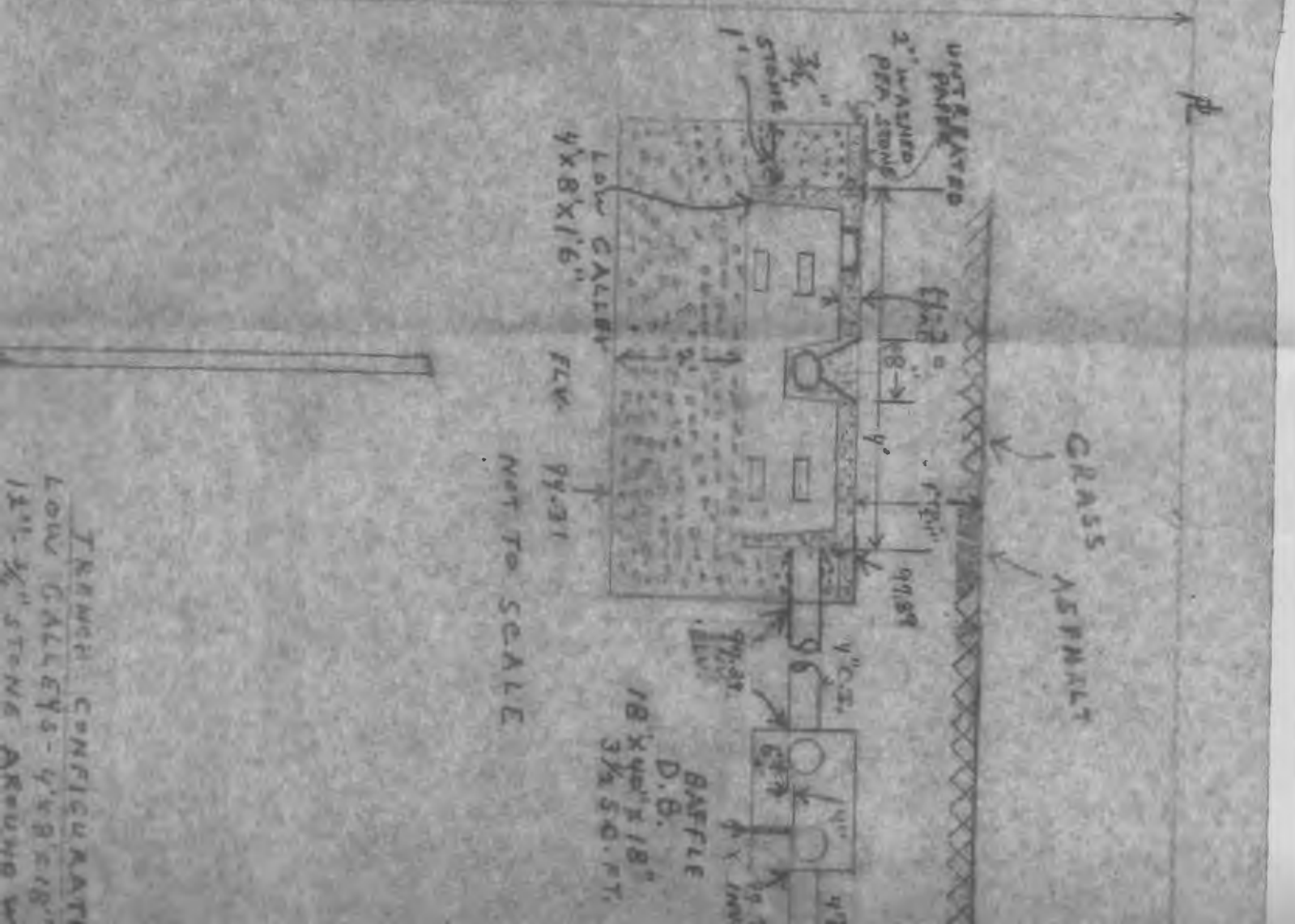
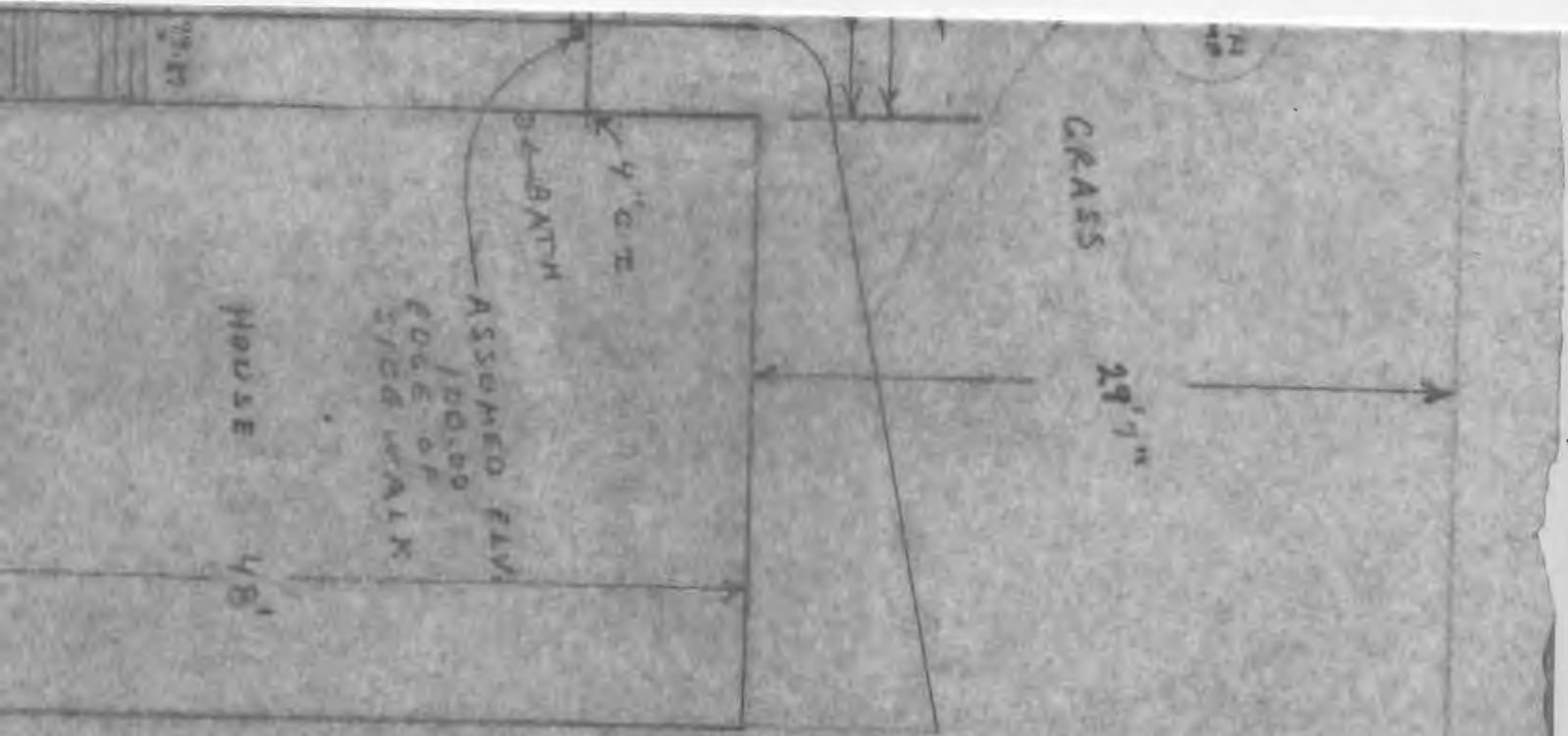
D. Approved per variance Board/Appeal Decision dated [blank] all requirements, conditions and stipulations of which shall be strictly adhered to.

E. All stages of construction must be supervised by the system designer, and a written statement of findings submitted to this office.

F. The discharge of laundry wastes into this system is prohibited.

G. Other: Flow DUTY DIFFUSERS HEAVY USENT SYSTEM

SIGNATURE OF ENVIRONMENTAL MANAGEMENT DEPT. OFFICIAL: Mark Bowler DATE: 7/22/88 CONTROL NO.: 91700



TRENCH CONFIGURATION
 LOW GALLEYS - 4' X 8' X 18"
 1 1/2" - 3/8" STONE AROUND W

NOT TO SCALE

BAFFLE
 D.B.
 18' X 4 1/2' X 18"
 3 1/2' SQ. FT.