

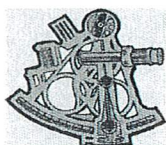
LETTER OF TRANSMITTAL

RECEIVED

NOV 06 2023

Bourne Health Department  
24 Perry Avenue  
Buzzards Bay, MA 02532

JC ENGINEERING  
2854 Cranberry Highway  
East Wareham, MA 02538



Telephone: 508-273-0377  
Facsimile: 508-273-0367

TO: Town of Bourne  
Board of Health  
24 Perry Avenue  
Buzzards Bay, MA 02532

DATE:	11/06/23	JOB NO.	7277
RE:	Lua and Local Variance		
	10 Sunny Lane		
	Bourne, MA 02532		

WE ARE SENDING YOU:  Enclosed  Under separate cover via  the following:

- Report  Plans  Brochures  Shop Drawings
- Specifications  Copy of Letter  Change Order  Contract Documents

Enclosed, please find 6 copies of a BOH Variance Request application for 10 Sunny Lane, including a check in the amount of \$375 for the permit and variance request fees.

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THESE ARE TRANSMITTED as checked below:

- For Approval  Resubmit  Copies for Approval
- For Your Use  Approved as Noted  Copies for Distribution
- As Requested  Returned  Approved as Submitted
- Returned  For Review and Comment  For Your Information

REMARKS Please feel free to contact the office with any questions.  

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COPY TO: File

SIGNED:

Samuel Iamele, EIT, CSE

No. \_\_\_\_\_

FEE \_\_\_\_\_

### COMMONWEALTH OF MASSACHUSETTS

Board of Health, Bourne, MA.

### APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

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

Location <u>10 Sunny Lane</u>	Owner's Name <u>Dennis Lee</u>
Map/Parcel# <u>26.1</u>	Address <u>332 Bolivar Street, Canton, MA 02021</u>
Lot# <u>139</u>	Telephone# _____
Installer's Name _____	Designer's Name <u>JC Engineering Inc</u>
Address _____	Address <u>2854 Cranberry Hwf, E. Wareham, MA</u>
Telephone# _____	Telephone# <u>508-273-0377</u>

02538

Type of Building Single Family Dwelling Lot Size 8,632 sq. ft.  
 Dwelling - No. of Bedrooms Three (3) Garbage grinder ( )  
 Other - Type of Building \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( ), Cafeteria ( )  
 Other Fixtures \_\_\_\_\_  
 Design Flow (min. required) 110/bed gpd Calculated design flow 330 Design flow provided 344.2 gpd  
 Plan: Date 10-17-23 Number of sheets 1 Revision Date \_\_\_\_\_  
 Title Proposed Septic System Upgrade  
 Description of Soil(s) See Plan  
 Soil Evaluator Form No. \_\_\_\_\_ Name of Soil Evaluator Peter McEntee Date of Evaluation 6-26-23

DESCRIPTION OF REPAIRS OR ALTERATIONS Install 1,500 gallon septic tank w/ microfast insert, 1,000 gallon pump chamber, D-box, and (3) 500 gallon leaching chambers w/ surrounding stone

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 \_\_\_\_\_ Date \_\_\_\_\_

Inspections \_\_\_\_\_

No. \_\_\_\_\_

FEE \_\_\_\_\_

### COMMONWEALTH OF MASSACHUSETTS

Board of Health, \_\_\_\_\_, MA.

### 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: \_\_\_\_\_  
at \_\_\_\_\_

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 \_\_\_\_\_  
Designer: \_\_\_\_\_ Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

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

No. \_\_\_\_\_

FEE \_\_\_\_\_

### COMMONWEALTH OF MASSACHUSETTS

Board of Health, \_\_\_\_\_, MA.

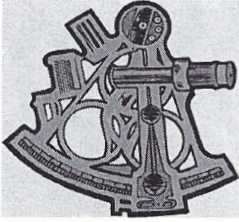
### DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct ( ) Repair ( ) Upgrade ( ) Abandon ( ) an individual sewage disposal system at \_\_\_\_\_ 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.

Form 1255 Rev. 5/96 A.M. Sulklin Co. Charlestown, MA Date \_\_\_\_\_ Board of Health \_\_\_\_\_



**JC ENGINEERING, Inc.**  
**Civil & Environmental Engineering**  
2854 Cranberry Highway  
East Wareham, Massachusetts 02538  
Ph. 508-273-0377 – Fax 508-273-0367

November 6, 2023

Town of Bourne  
Board of Health  
24 Perry Avenue  
Buzzards Bay, MA 02532

RE: Local Upgrade Approval and Variance Requests at 10 Sunny Lane, Bourne, MA

Dear Members of the Board,

Please find enclosed a sewage disposal design drawing entitled “Proposed Septic System Upgrade at 10 Sunny Lane, Bourne, MA” dated October 17, 2023 for your review and approval. This project involves the installation of a septic system using an innovative/alternative treatment (Microfast Unit) within the buffer zone of a saltmarsh and coastal bank. The proposed septic system will replace an existing cesspool that will be abandoned. Due to site constraints, we are requesting the following variances from the Town of Bourne Regulations:

1. A 21.8' variance (150.0' – 128.2') for the setback from the leaching facility to the edge of the wetlands.
2. A 150.0' variance (150.0' – 0.0') for the setback from the leaching facility to the top of coastal bank.

Also, in accordance with 310 CMR 15.401 - 15.405, the following local upgrade approval is requested from 310 CMR 15.227(5):

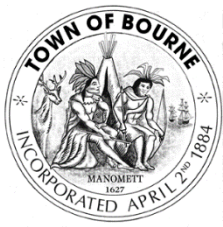
1. A 0.90' waiver (1.0' - 0.10') for the maximum separation between seasonal high groundwater and the inlet pipe in the pump chamber.

We appreciate your time and consideration on this matter. Please contact me if you have any questions or concerns.

Sincerely,

Samuel J. Iamele, EIT, CSE  
Project Engineer





# Bourne Board of Health Application for Septic Variance or Waiver Requests



In accordance with the established procedures of the Bourne Board of Health, this application is for septic variances and waivers which have not been approved administratively and require approval at a public meeting. Please use the following application form for guidance on how to apply for variances and waivers which serve new construction, changes in use, increases in flow, or repairs and upgrades to on-site sewage disposal systems with design flows of less than 10,000 gallons/ day.

## 1. Facility Name and Address:

Owner's Name

Facility's Street Address

Owner's Telephone Number

Owner's E-mail Address

Owner's Mailing Address

## 2. Applicant or Preparer's Name and Address (if different from above):

Preparer's Name

Company

Telephone Number

E-mail Address

Mailing Address

## 3. Type of Facility (check all that apply):

Residential    Commercial    Institutional    School    Industrial    Mixed Use

4. Describe Facility (i.e. single-family dwelling, 45 seat restaurant): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Type of System Proposed (check all that apply):    Conventional Title 5    I/A System

Pumped System    Gravity System    Pressure Dosed    Tight Tank    Other

6. Describe the existing and proposed septic system components: Existing single cesspool. Proposed 1500 gallon septic tank with microfast insert, 1000 gallon pump chamber, distribution box, (3) 500 gallon leaching chambers with surrounding stone

7. Design Flow per 310 CMR 15.203 (in gallons/ day):

	EXISTING	PROPOSED
Design flow of system:		330 GPD
Total design flow of facility: <i>(if more than one system on subject property)</i>		330 GPD

8. Enclose a **letter of request for variances/waivers** which makes reference to the specific provisions of Title 5 and/ or the Board Bourne of Health Regulations for which a variance is sought. Please use this opportunity to demonstrate compliance with 310 CMR 15.410, and to justify the relevant facts and circumstances of the individual case. Note that with regard to variances for new construction, enforcement of the provision from which a variance is sought must be shown to deprive the applicant of substantially all beneficial use of the subject property in order to be manifestly unjust. Be sure to explain why full compliance with the applicable regulations is not feasible, and how a level of environmental protection that is at least equivalent to that provided under Title 5 and the Board of Health Regulations can be achieved without strict application of said regulations.

9. In order for this Application to be deemed complete, it must be accompanied by the following:

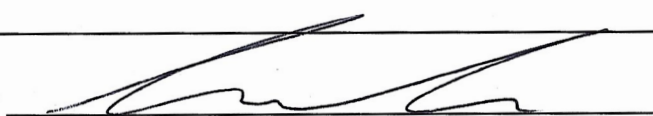
- \$125 filing fee + any other applicable permit application fees paid to the Town of Bourne.
- Application for a Disposal System Construction Permit (may be filled out by installer).
- Six copies of Letter of Request describing nature of variances.
- Six sets of complete engineered plans and specifications, one with original stamp of design engineer; plus, one electronic copy. All variances/ waivers must also be listed on the plans per 310 CMR 15.220(4).
- Six sets of floor plans, existing and proposed.
- Six copies of Nitrogen Loading Calculation Worksheet *\*required for all applications.*
- If abutter notification is required, one of each of the following must be submitted:
  - A copy of the certified list of abutters from the Assessor's Department.
  - Sample letter for abutter notification postmarked 10 days prior to meeting date.
  - Proof of certified mailing (receipts) meeting requirements of 310 CMR 15.405(2).
- Proposals for installation of Innovative/Alternative septic systems must be accompanied by:
  - A copy of the Certification for Use including technology specific conditions.
  - Draft disclosure notice for the I/A technology to be recorded in the deed.
- Hydrogeologic data may be required for new leaching facilities proposed within 100ft of a wetland/watercourse.
- Percentage of Increase Worksheet may be required for waivers or increases in flow.

10. Certification:

"I certify under penalty of law that this document and all attachments, to the best of my knowledge and belief, are true, accurate, and complete. I am aware that there may be significant consequences for submitting false information, including, but not limited to, penalties or fine and/or imprisonment for deliberate violations."

Facility Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Signature of Preparer  \_\_\_\_\_ Date 11-6-23

Print Name Samuel J. Iamele, EIT CSE

# NOTICE OF ALTERNATIVE SEWAGE DISPOSAL SYSTEM

M.G.L. c. 21A, § 13 and 310 CMR 15.0287(10)

**ADDRESS OF PROPERTY SERVED BY ALTERNATIVE SYSTEM:**

10 Sunny Lane, Bourne, MA 02532

**TITLE REFERENCE FOR PROPERTY SERVED BY ALTERNATIVE SYSTEM:**

- Deed recorded with the Barnstable County Registry of Deeds in Book 35954, Page 282
  - Certificate of Title No. \_\_\_\_\_ issued by the Land Registration Office of the Barnstable County Registry of Deeds
  - Source of title other than by deed
- 

**NAME(S) OF OWNER OF PROPERTY SERVED BY ALTERNATIVE SYSTEM:**

Dennis Lee

**OWNER(S) MAILING ADDRESS:**

332 Bolivar Street, Canton, MA 02021

WHEREAS, Section 15.280 of Title 5 of the State Environmental Code (“Approval of Alternative Systems”), provides for the Massachusetts Department of Environmental Protection (the “Department”) to approve or certify, as appropriate, all proposals to construct, upgrade or replace on-site sewage disposal systems using alternative systems;

WHEREAS, owners and/or operators of approved or certified alternative systems are subject to general conditions, as specified in Section 15.287 of Title 5 of the State Environmental Code, 310 CMR 15.287, and may be subject to special conditions, as specified in the Department’s approvals or certifications; such general and special conditions potentially including, without limitation, requirements relating to the use of trained operators, periodic inspections, maintenance, sampling, reporting and/or recordkeeping;

WHEREAS, the owners and/or operators this alternative system acknowledges and agrees to comply with the provisions of all of the Bourne Board of Health Alternative Septic System Regulations and any other conditions for the existence of the system;

WHEREAS, Section 15.287(10) of Title 5 of the State Environmental Code, 310 CMR 15.287(10), requires that “prior to obtaining a Certificate of Compliance for installation of a new or upgraded system, the system owner shall record in the chain of title for the property served by the alternative system in the Registry of Deeds and/or Land Registration Office, as applicable, a Notice disclosing both the existence of the alternative on-site system and the Department’s approval of the system. The system owner shall also provide evidence of such recording to the Bourne Board of Health [;]” and

WHEREAS, the Property is served by an alternative sewage disposal system.

NOW, THEREFORE, Notice of an alternative sewage disposal system is hereby given for the above- referenced Property, as follows:

**1. Existence.** An alternative system has been installed as a new or upgraded alternative sewage disposal system, on or adjacent to the Property, and serves the Property. The trade name and model number(s) of the alternative system are as follows:

**Trade name of technology:** FAST Treatment Systems

**Manufacturer Name:** Bio-Microbics, Inc.

**Model number(s):** MicroFAST 0.5 Unit

A copy of the Department of Environmental Protection’s Approval/Certification is available online at the Department’s website:

<https://www.mass.gov/guides/title-5-innovativealternative-technology-approval-letters>

**2. Approval/Certification.** On December 29, 2010, revised March 20, 2015, the Department, pursuant to its authority under the section of Title 5 as specified below, approved or certified the technology used in the above referenced alternative system, under MassDEP Transmittal Number X232831.

*[Check one of the following, as applicable:]*

- Approved for remedial use under 310 CMR 15.284
- Approved for piloting under 310 CMR 15.285
- Provisionally approved under 310 CMR 15.286
- Certified for general use under 310 CMR 15.288

*\*\*This Notice of Alternative Sewage Disposal System must be submitted to the Bourne Board of Health\*\**

WITNESS the execution hereof under seal this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Dennis Lee

\_\_\_\_\_, ss \_\_\_\_\_, 2023

Then personally appeared the above-named Dennis Lee proved to me through satisfactory evidence of identification, which was a driver’s license, to be the person whose name is signed on the preceding document and acknowledged to me that he/she signed it voluntarily for its stated purpose.

\_\_\_\_\_  
Notary Public:  
My commission expires:

Approved and Accepted By:

\_\_\_\_\_  
Terri A. Guarino, R.S.  
Health Director  
Town of Bourne

Date: \_\_\_\_\_





# Town of Bourne - Water Resources Nitrogen Loading and Mitigation Worksheet

See Cape Cod Commission Technical Bulletin 91-001 for further details:  
[https://capecodcommission.org/resource-library/file?uri=/depl/commission/team/Website\\_Resources/regulatory/NitrogenLoadTechbulletin.pdf](https://capecodcommission.org/resource-library/file?uri=/depl/commission/team/Website_Resources/regulatory/NitrogenLoadTechbulletin.pdf)

Facility Address: 10 Sunny Lane  
Preparer's Name: JC Engineering Inc  
Date:  
Watershed:

Project Nitrogen Load	Proposed Wastewater	New Construction/Increases in Flow, Raze & Rebuild, or Repairs/Upgrades	Existing Conditions
1.	Project Title-5 wastewater flows: <input type="text" value="330.0"/> gpd (A) Actual wastewater flows: <input type="text" value="175.0"/> gpd (B) Average wastewater flows: <input type="text" value="252.5"/> gpd (A) <small>* Actual water use flows per unit in Bourne</small>	Calculate (A) through (P) as w (A) through (P): Title-5 wastewater flows: <input type="text" value="220.0"/> gpd Actual wastewater flows: <input type="text" value="175.0"/> gpd Avg. wastewater flows: <input type="text" value="197.5"/> gpd (A)	Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in applicable box: Is existing development on sewer? (If 'Yes', then go to line 2.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Standard Title-5 System DEP-approved I/A System (commercial) DEP-approved I/A System (residential) DEP-approved enhanced I/A
Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in applicable box: Will the project be connected to sewer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is project Title-5 wastewater flow 10,000 gpd or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Place <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No in applicable box and multiply unsewered wastewater flow by applicable conversion factor: Standard Title-5 System (35 ppm-N) x 0.046889 DEP-approved I/A System (25 ppm-N) x 0.034542 DEP-approved I/A System (19 ppm-N) x 0.026252 DEP-approved Enhanced I/A (12 ppm-N) x 0.016580 Type of system: _____	
Wastewater nitrogen load (Title-5 flows) = <input type="text" value="8.66"/> kg-N/yr (B) Wastewater nitrogen load (Actual flows) = <input type="text" value="4.59"/> kg-N/yr (C)		Wastewater nitrogen load (Title-5 flows) = <input type="text" value="10.64"/> kg-N/yr (B) Wastewater nitrogen load (Actual flows) = <input type="text" value="8.46"/> kg-N/yr (C) wastewater offsets	
<b>Stormwater Runoff</b> Town of Bourne Recharge rate for Bourne (inches, for natural areas from Technical Bulletin 91-001): <input type="text" value="23"/> (RECH)		Project site area: <input type="text" value="0.198"/> acres (D) Project site wetland area: <input type="text" value="0.000"/> acres (E) Project site upland area: <input type="text" value="0.198"/> acres (F) Pervious unpaved upland: <input type="text" value="0.173"/> acres (G) Paved area: <input type="text" value="218"/> s.f. (H) Roof area: <input type="text" value="864"/> s.f. (J) Roof runoff offset: <input type="text" value="0.0612"/> kg-N/yr (K)	
Factor may be adjusted for employment of LID -- LID = low impact development Paved area: <input type="text" value="218"/> s.f. x 1.4158E-04 = <input type="text" value="0.03086531"/> kg-N/yr (I) Roof area: <input type="text" value="864"/> s.f. x 7.0792E-05 = <input type="text" value="0.0612"/> kg-N/yr (K)		Paving runoff offset: <input type="text" value="0.0309"/> kg-N/yr (I) Roof area: <input type="text" value="864"/> s.f. (J) Roof runoff offset: <input type="text" value="0.0612"/> kg-N/yr (K)	
<b>Fertilizer</b> Previous unpaved upland - roof area = <input type="text" value="3.373"/> s.f. Managed turf/ lawn area x 3.4019E-04 = <input type="text" value="1.147"/> kg-N/yr (L)		Managed Turf/ lawn area: <input type="text" value="3.373"/> s.f. Fertilizer offset: <input type="text" value="1.147"/> kg-N/yr (L)	
<b>Total Nitrogen Load</b> Total project nitrogen load (Title-5 flows): <input type="text" value="9.90"/> kg-N/yr (M) = (B)+(I)+(K)+(L) Total project nitrogen load (Actual flows): <input type="text" value="5.83"/> kg-N/yr (N) = (C)+(I)+(K)+(L) Nitrogen load per acre (Average): <input type="text" value="39.74"/> kg-N/yr/acre (O) = (M)+(N) ÷ 2 × (D)		Existing nitrogen load (Title-5 flows): <input type="text" value="11.88"/> kg-N/yr (M) Existing nitrogen load (Actual flows): <input type="text" value="9.70"/> kg-N/yr (N) Nitrogen offset per acre: <input type="text" value="54.50"/> kg-N/yr/acre (O)	
<b>Proposed Nitrogen Loading Concentration</b> Project nitrogen loading concentration (Title-5 flows): <input type="text" value="10.63"/> ppm-N (P) = $\frac{(M)}{(D)}$ Project nitrogen loading concentration (Actual flows): <input type="text" value="8.13"/> ppm-N (Q) = $\frac{(N)}{(D)}$ Project nitrogen loading concentration (Average): <input type="text" value="9.38"/> ppm-N (R) = (P)+(Q) ÷ 2		<b>Existing nitrogen loading concentrations:</b> Title-5 flows: <input type="text" value="15.23"/> ppm-N (P) Actual flows: <input type="text" value="13.82"/> ppm-N (Q) Average: <input type="text" value="14.37"/> ppm-N (R)	

next page -->

## Resource Impact Based Criteria

**Marine Water Recharge Areas / Coastal Embayments**

2.  Yes  No Is the project located in any of the following watersheds: Buttermilk Bay Basins, Phinneys Harbor / Back River / Eel Pond, Pocasset River Basin, Pocasset Harbor / Hen Cove / Red Brook Harbor, Megansett / Squeteague Harbors\*\*?  
(If 'No', then go to line 3.)

Name of Watershed (from Regional Policy Plan Data Viewer): \_\_\_\_\_

Critical Nitrogen-loading limit\*\*:  kg-N/yr/acre (S)

Yes  No Does project's nitrogen load (O) exceed the existing load (O) AND the critical nitrogen load (S)?  
(If 'No', then go to line 3.)

Excess project nitrogen load to be mitigated: \_\_\_\_\_ kg-N/yr (T) = LESSER OF (O)-(S) x (F) Δ (O)-(S) x (F)

\*\* When a nitrogen-loading limit has been determined through either a Total Maximum Daily Load (TMDL), a Massachusetts Estuaries Project-accepted technical report, or specified by a Commission-approved comprehensive wastewater management plan pursuant to Objective WR3, or if impaired water quality has been documented for the receiving coastal waters, the nitrogen loading limit shall be 0 kg-N/yr per acre pursuant to Objective WR3.

**Groundwater Quality**

3.  Yes  No Does the project's nitrogen loading concentration in groundwater (R) exceed the greater of 5 ppm or the existing concentration (R)?  
(If 'Yes', the project will need to provide an alternative strategy for meeting these thresholds by using another worksheet)

**Potential Public Water Supply Areas**

4.  Yes  No Is project in a Potential Public Water Supply Area (PPWSA)?  
(If 'No', then go to line 5.)

Yes  No Does the project's nitrogen loading concentration (R) exceed the greater of 1 ppm or the existing concentration (R)?  
(If 'Yes', the project must provide an alternative strategy for meeting Objective WR1)

Yes  No Does the project use, treat, generate, store or dispose of hazardous materials in excess of the greater of a) household quantities or b) existing quantities?  
(If 'Yes', the project must provide an alternative strategy for meeting Objective WR1)

**Wellhead Protection Areas**

5.  Yes  No Is project in a Wellhead Protection Area (WHPA)?

Yes  No Does the project's nitrogen loading concentration (R) exceed the greater of 5 ppm or the existing concentration (R)?  
(If 'Yes', the project must provide an alternative strategy for meeting Objective WR1)

Yes  No Does the project use, treat, generate, store or dispose of hazardous materials in excess of the greater of a) household quantities or b) existing quantities?  
(If 'Yes', the project must provide an alternative strategy for meeting Objective WR1)

**Fresh Water Recharge Areas**

6.  Yes  No Is project wastewater disposed of within 300 feet of a stream or fresh surface water body?  
(If 'No', then go to line 7.)

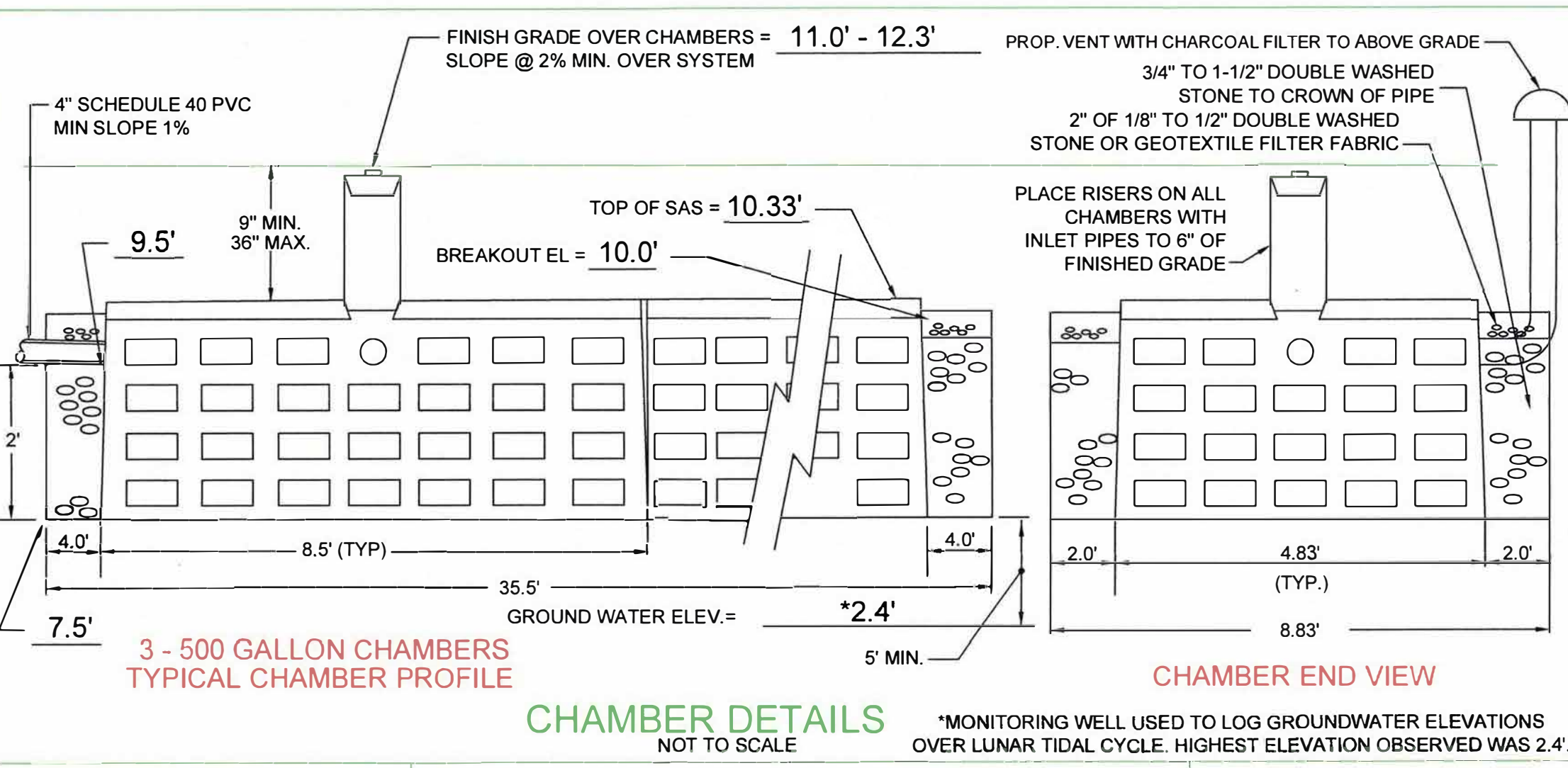
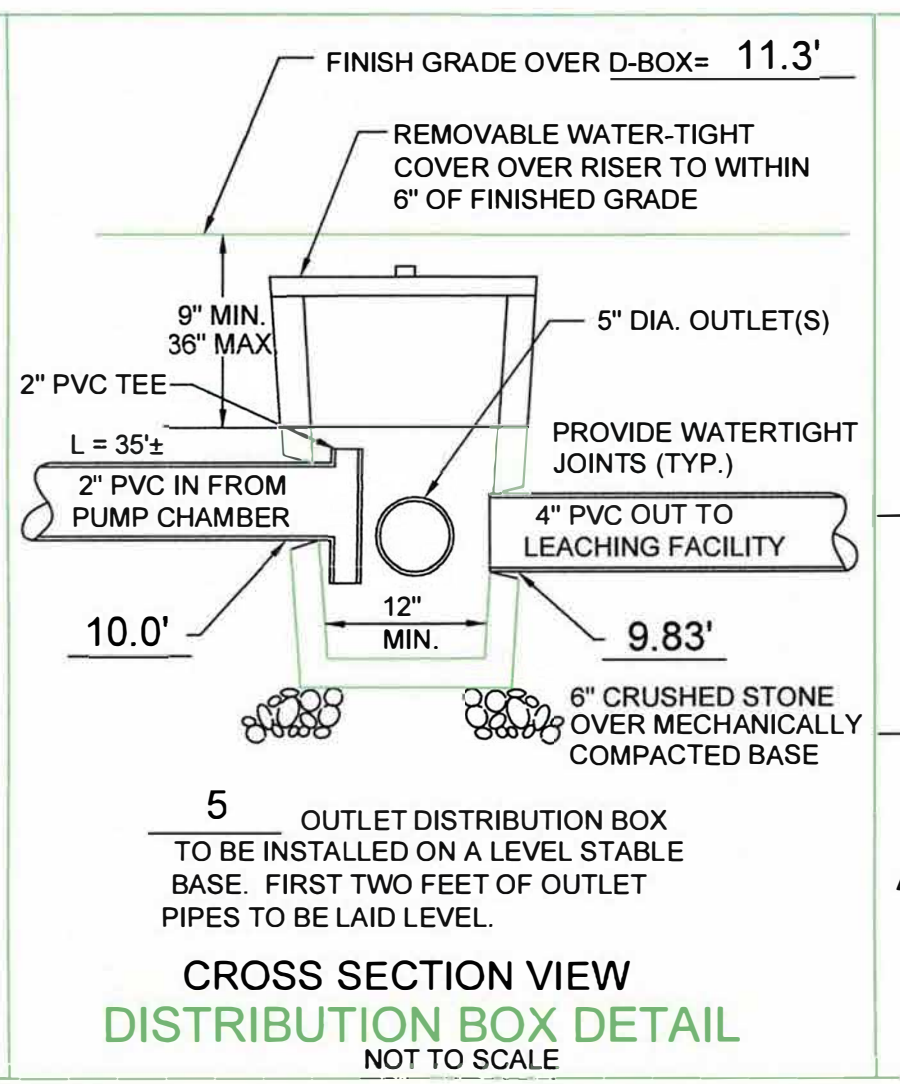
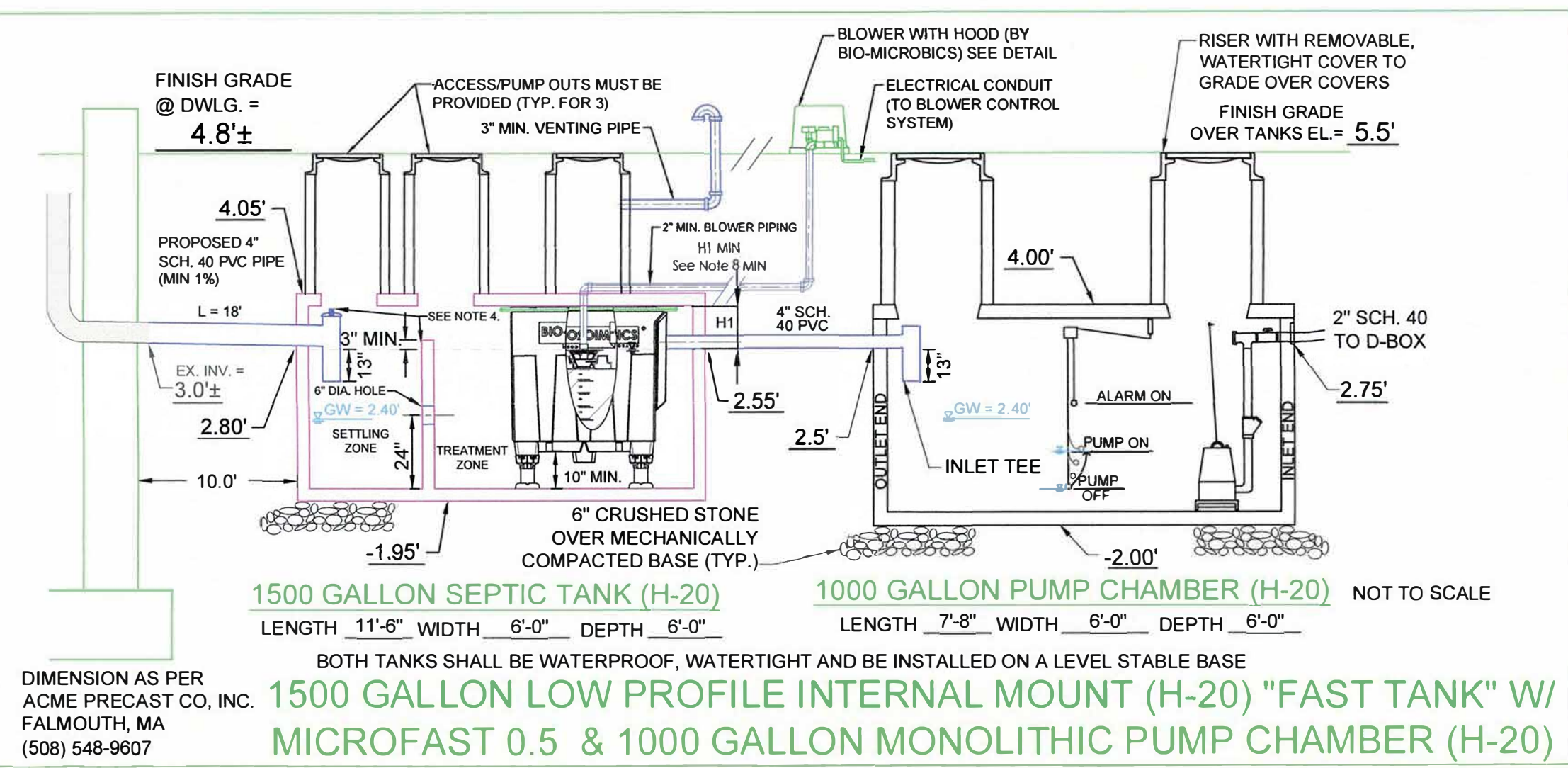
Yes  No Is the project located in a freshwater recharge area (FWRA) hydraulically upgradient of a stream or fresh surface water body?  
(If 'Yes', the project must provide an alternative strategy for meeting Objective WR2)

**Other Potential Impacts**

7.  Yes  No Will the project withdraw more than 20,000 gallons of water per day?  
(If 'Yes', then the project must provide documentation demonstrating that there will not be significant impacts to water levels, surface waters and wetlands)

8. The project must demonstrate compliance with Objective WR4, including use of Low Impact Development to mitigate impacts of stormwater runoff and O & M plans for maintaining stormwater infrastructure and landscaping.



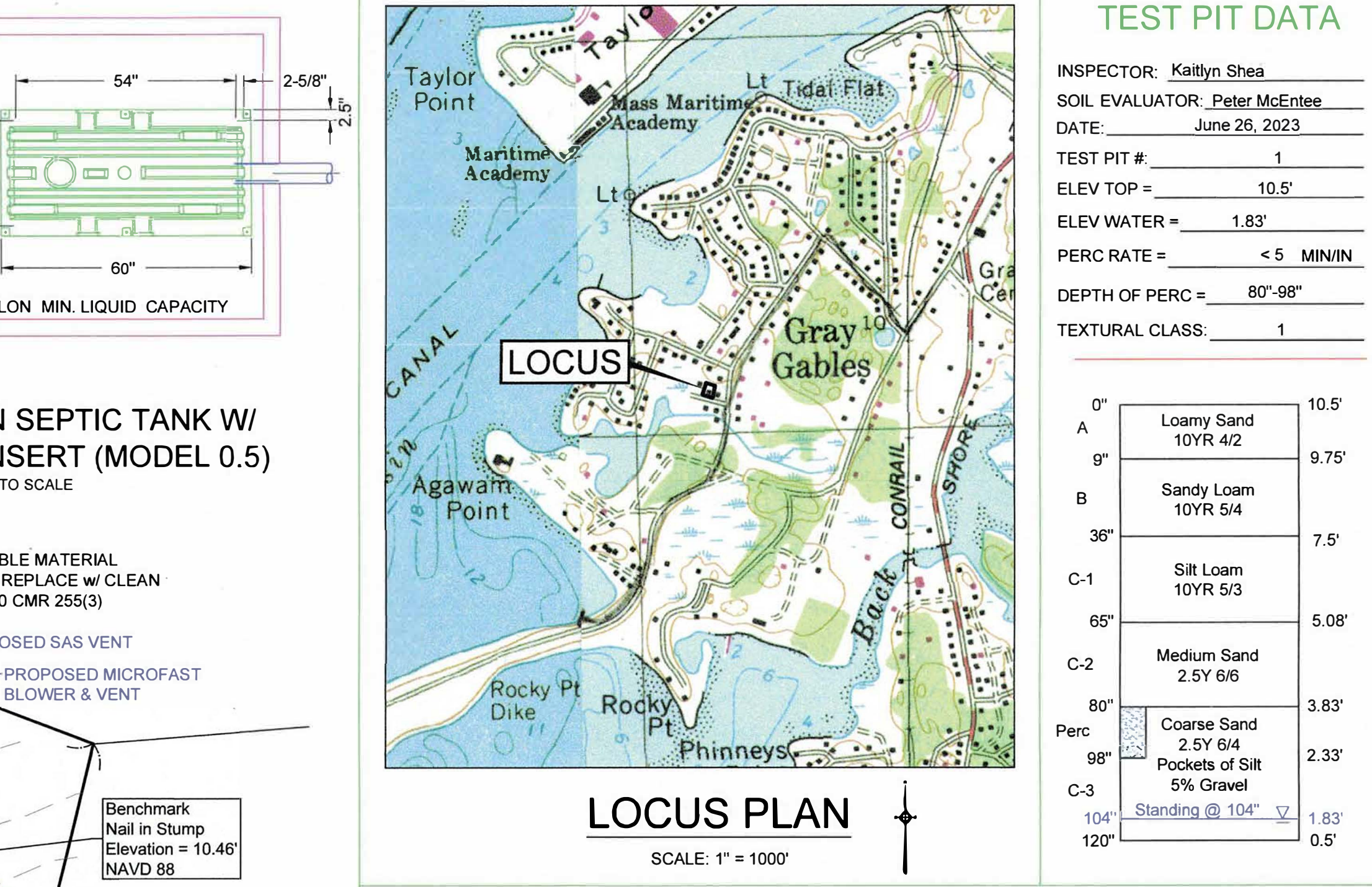
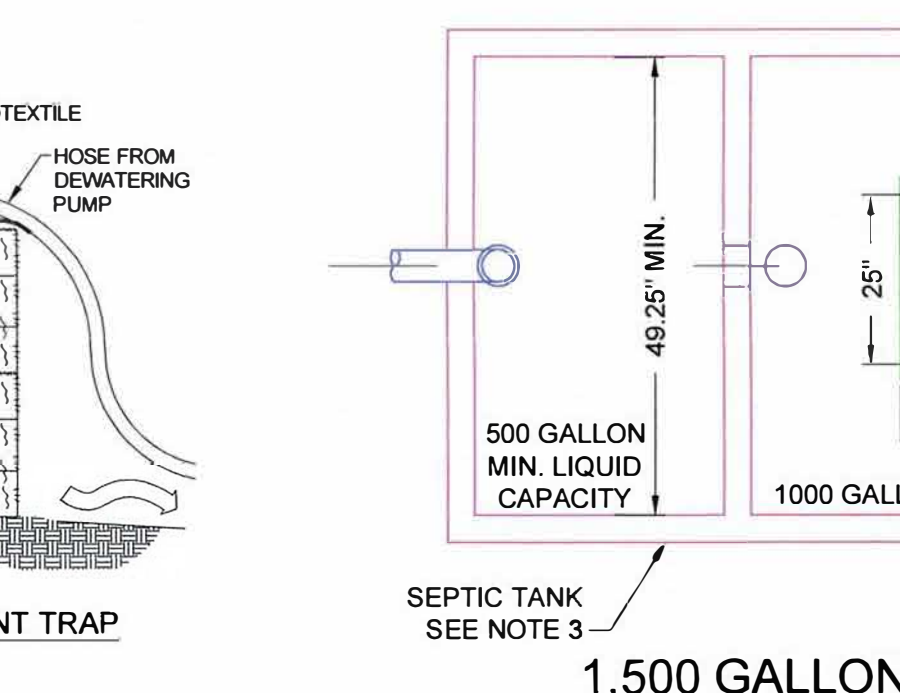
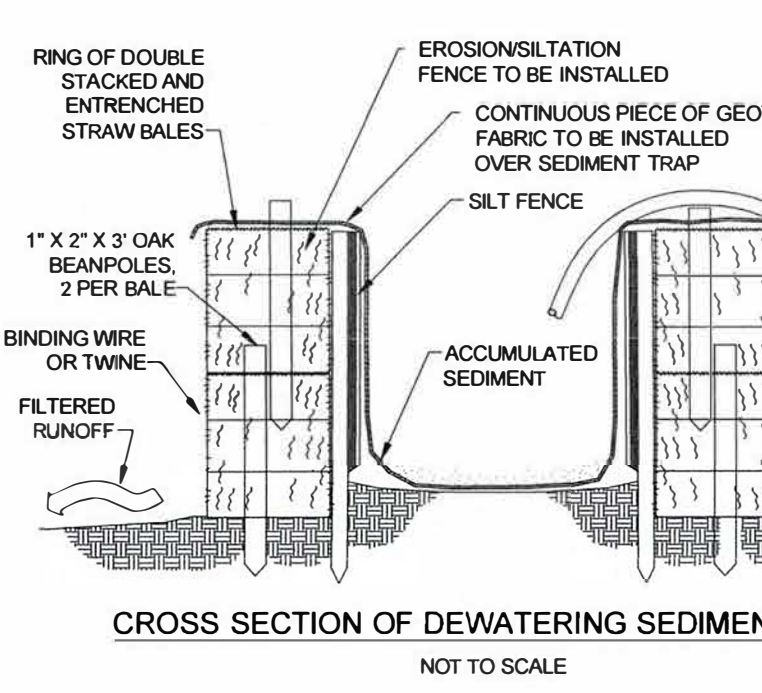


### GENERAL NOTES

- UNLESS OTHERWISE NOTED, ALL SYSTEM COMPONENTS AND CONSTRUCTION METHODS SHALL BE IN ACCORDANCE WITH TITLE 5 OF THE STATE ENVIRONMENTAL CODE AND ANY APPLICABLE LOCAL RULES.
- ANY CHANGES TO THIS PLAN MUST BE APPROVED BY THE BOARD OF HEALTH AND THE DESIGN ENGINEER.
- 4" SCHEDULE 40 PVC PIPE WITH WATER TIGHT JOINTS SHALL BE USED IN DISPOSAL SYSTEM UNLESS OTHERWISE NOTED.
- TO PREVENT BREAKOUT, THE PROPOSED FINISH GRADE SHALL NOT BE LESS THAN ELEVATION = 10.0' FOR A DISTANCE OF 15' AROUND THE PERIMETER OF THE SAS. UNLESS A 40 MIL GEOMEMBRANE LINER IS PLACED AT LEAST FIVE FEET FROM S.A.S. AND THE TOP OF THE LINER IS NOT LESS THAN THE BREAKOUT ELEVATION.
- SLOPE ALL SOLID PIPE AT 1.0% MINIMUM.
- THIS SYSTEM IS NOT DESIGNED FOR A GARBAGE DISPOSAL.
- LOCAL BOARD OF HEALTH AND DESIGN ENGINEER TO BE NOTIFIED PRIOR TO BACK FILLING WHEN SYSTEM IS NEARLY COMPLETE AND READY FOR INSPECTION. SYSTEM IS NOT TO BE BACK FILLED WITHOUT FIRST OBTAINING APPROVAL FROM BOARD OF HEALTH AND DESIGN ENGINEER.
- ELEVATIONS BASED ON ACTUAL DATUM OF 10.46' N.A.V.D. 88 OBTAINED ON A NAIL SET IN A STUMP AS SHOWN ON PLAN.
- CONTRACTOR SHALL VERIFY ALL UTILITY LOCATIONS PRIOR TO CONSTRUCTION THROUGH DIG-SAFE AT LEAST 72 HOURS PRIOR TO COMMENCING WORK ON SITE AT 1-888-DIG-SAFE AND ANY OTHER APPLICABLE AGENCIES. REPORT ANY DISCREPANCIES TO THE DESIGN ENGINEER.
- ALL JOINTS WHERE PIPE ENTERS AND EXITS CONCRETE STRUCTURES SHALL BE MADE WATERTIGHT.
- NO DETERMINATION HAS BEEN MADE AS TO COMPLIANCE WITH DEEDED OR ZONING REGULATIONS. OWNER/APPLICANT IS TO OBTAIN SUCH DETERMINATION FROM APPROPRIATE AUTHORITY.
- ALL SEPTIC SYSTEM COMPONENTS SHALL WITHSTAND H-10 LOADING UNLESS LOCATED UNDER PAVEMENT, DRIVES OR TRAVELED WAYS IN WHICH CASE THEY SHALL WITHSTAND H-20 LOADING.
- DOUBLE WASHED CRUSHED STONE SHALL BE FREE OF ALL DIRT, DUST AND FINES.
- WHERE REQUIRED, CONTRACTOR SHALL REMOVE ALL LOAM, SUBSOIL AND UNSUITABLE MATERIAL IN AREA BENEATH AND FOR 5 FT. ON ALL SIDES OF LEACHING FACILITY. REPLACE ALL UNSUITABLE MATERIAL WITH CLEAN COARSE SAND FREE FROM CLAY, FINES OR OTHER UNSUITABLE MATERIAL IN ACCORDANCE WITH 310 CMR 15.25(3).
- CONTRACTOR SHALL NOTIFY DESIGN ENGINEER OF ANY DISCREPANCIES FOUND IN SITE CONDITIONS FROM THOSE SHOWN PRIOR TO CONTINUATION OF WORK.
- PROPOSED PROJECT IS LOCATED WITHIN:
  - ASSESSORS MAP # 26.1 LOT # 139
  - FLOOD ZONE AE (EL.15) AS SHOWN ON PANEL # 25001C0501J
- OWNER OF RECORD: DENNIS LEE  
ADDRESS: 332 BOLIVAR STREET  
CANTON, MA 02021
- DEED REFERENCE: DEED BOOK: 35954, PAGE: 282  
PLAN REFERENCE: PLAN BOOK 356, PAGE: 31
- PROPERTY LINE INFORMATION IS ONLY APPROXIMATE. THIS PLAN IS TO BE USED ONLY FOR SEPTIC SYSTEM UPGRADE. JC ENGINEERING WILL NOT ASSUME ANY LIABILITY FOR USES OF THIS PLAN OTHER THAN ITS INTENDED PURPOSE.
- IN ACCORDANCE WITH 310 CMR 15.401-15.405, THE FOLLOWING LOCAL UPGRADE APPROVAL IS REQUESTED FROM 310 CMR 15.227(5):
  - (1) A 0.90' WAIVER (1.0' - 0.10') FOR THE MAXIMUM SEPARATION BETWEEN SEASONAL HIGH GROUNDWATER AND THE INLET PIPE IN THE PUMP CHAMBER.

### MICROFAST NOTES

- BLOWER PIPING TO FAST® MAY NOT EXCEED 100 FT (30.5M) TOTAL LENGTH AND USE 4 ELBOWS MAXIMUM. FOR DISTANCES GREATER THAN 100 FT (30.5M), CONSULT FACTORY. BLOWER MUST BE LOCATED ABOVE FLOOD/STANDING WATER LEVELS ON A CONCRETE BASE.
- VENT TO BE LOCATED ABOVE FINISH GRADE OR HIGHER TO AVOID V2 SQ. IN. OF OPEN INFILTRATION CAP WITH VENT GRATE WITH AT LEAST SURFACE AREA. SECURE WITH STAINLESS STEEL SCREWS (SEE SHEET 3 OF 3 FAST DETAILS.)  
OR  
RUN VENT TO DESIRED LOCATION AND COVER OPENING WITH VENT V2 SQ. IN. OF OPEN SURFACE AREA SECURE WITH GRATE WITH AT LEAST STAINLESS STEEL SCREWS. VENT PIPING MUST NOT ALLOW EXCESS MOISTURE BUILD UP OR BACK PRESSURE.
- ALL APPURTENANCES TO FAST® (E.G. TANK PUMP OUTS, ETC.) MUST CONFORM TO ALL COUNTRY, STATE, PROVINCE, AND LOCAL PLUMBING AND ELECTRICAL CODES. THE BLOWER CONTROL SYSTEM IS PROVIDED BY BIO-MICROBICS, INC.
- EITHER THE INFLUENT PIPE TEE SHALL BE FITTED WITH A PIPE CAP OR THE Baffle separating the two zones shall be extended to the top of the tank. IF CHOOSING TO USE THE PIPE CAP, DRILL A 1/4" (0.5CM) VENT HOLE IN THE CAP AND THE Baffle SHALL BE AT LEAST 3"(8) HIGHER THAN THE WATER LEVEL AS SHOWN ON THE DRAWING.
- ALL INSPECTION, VIEWING AND PUMP OUT PORTS MUST BE SECURED TO PREVENT ACCIDENTAL OR UNAUTHORIZED ACCESS.
- TANK, ANCHORS, PIPING, CONDUIT, BLOWER HOUSING PAD AND VENTS ARE PROVIDED BY OTHERS.
- ALL PIPING AND ANCILLARY EQUIPMENT INSTALLED AFTER FAST® MUST NOT IMPEDE OR RESTRICT FREE FLOW OF EFFLUENT.
- H1 MIN HEIGHT MAY BE REDUCED, CONSULT FACTORY AND REFERENCE "SHORT-FASTMODULE-PROCEDURE.PDF."
- STANDARD HEIGHT OF INTERNAL MOUNT MICROFAST UNIT MAY BE SHORTENED TO ALLOW PLACEMENT IN A LOW PROFILE "FAST TANK" AS SUPPLIED BY ACME PRECAST CO., INC. OR APPROVED EQUIV. REFER TO BIO-MICROBICS FOR MODIFYING THE MICROFAST UNIT. MAXIMUM REDUCTION IN HEIGHT ABOVE WATER LINE FOR MODEL 0.5 IS 9 INCHES.

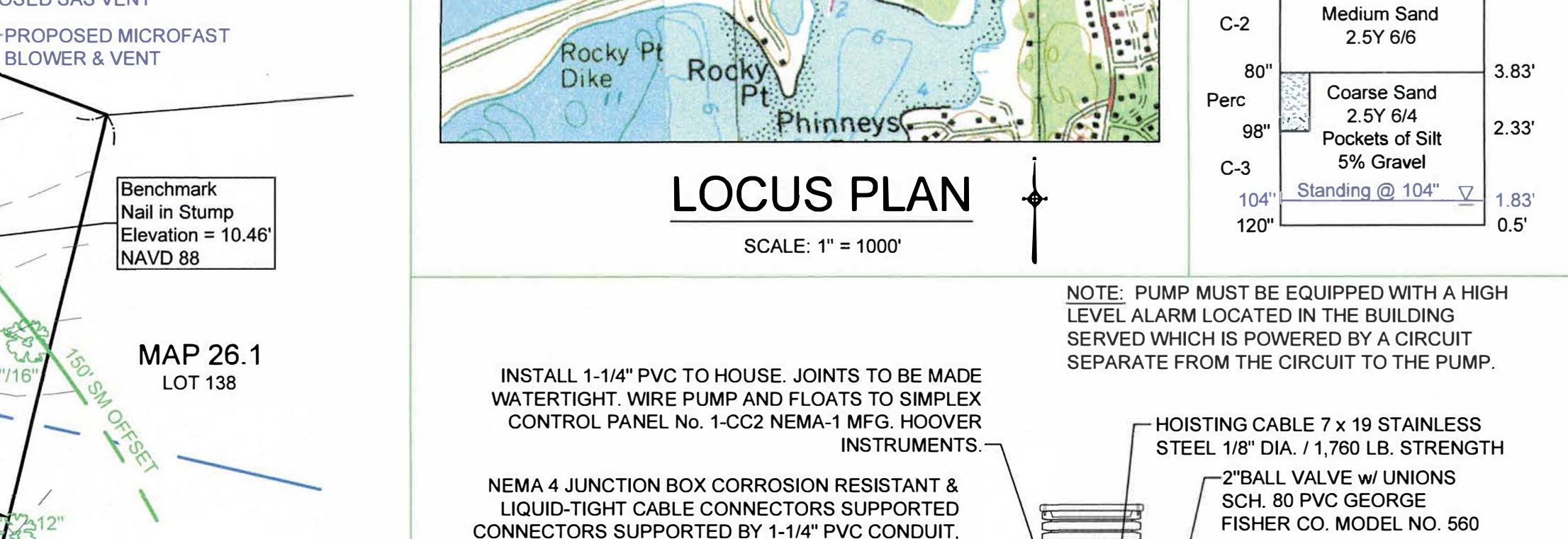
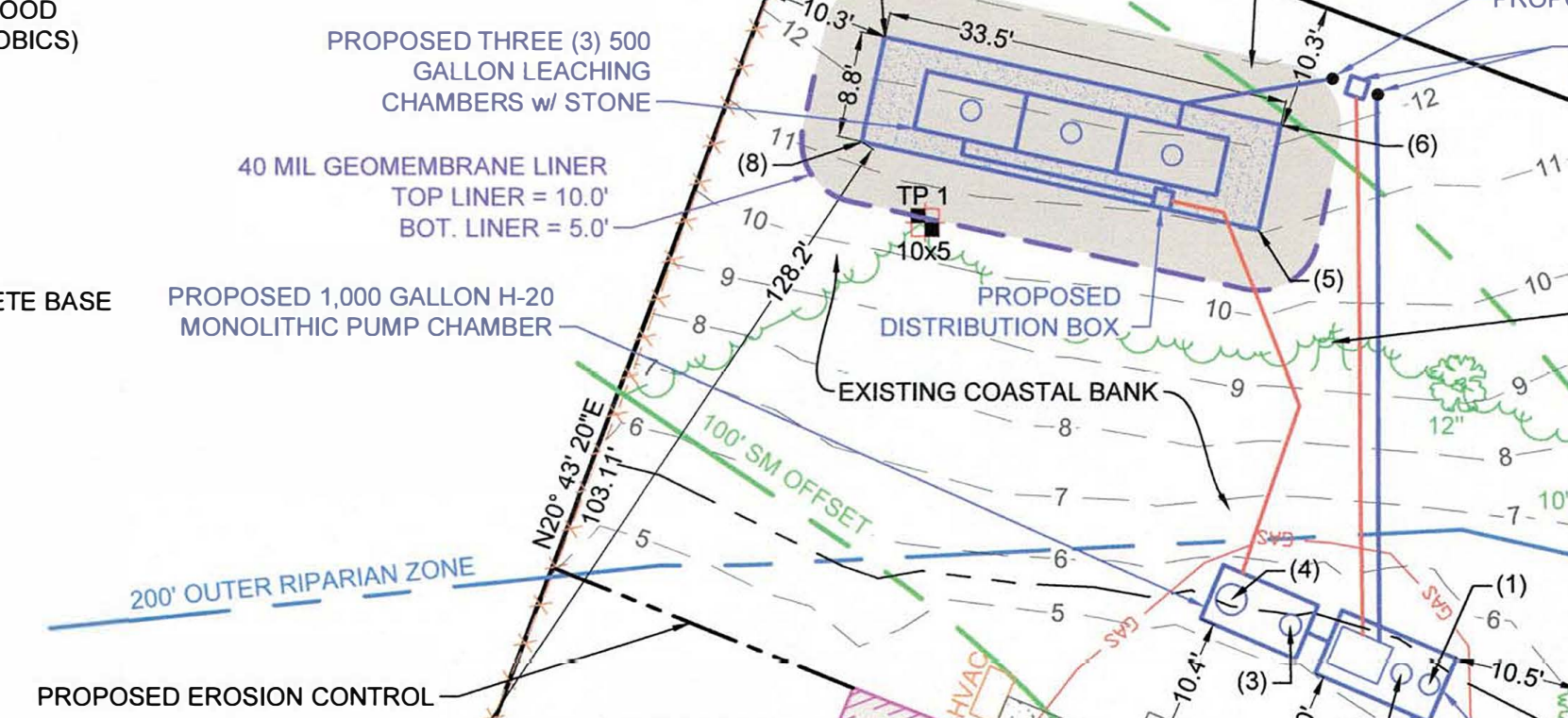
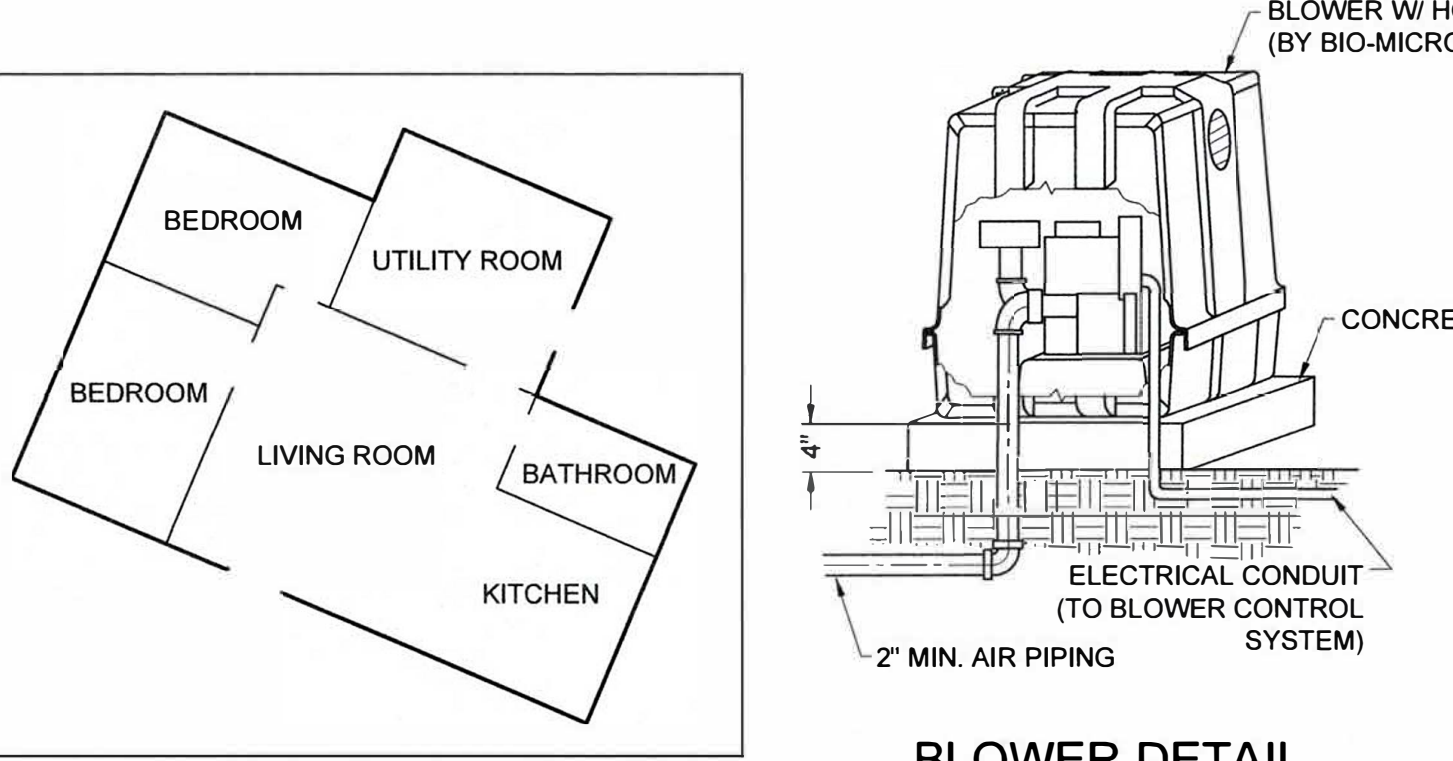


### TEST PIT DATA

INSPECTOR: Kaitlyn Shea  
SOIL EVALUATOR: Peter McEntee  
DATE: June 26, 2023

TEST PIT #: 1  
ELEV TOP = 10.5'  
ELEV WATER = 1.83'  
PERC RATE = < 5 MIN/IN  
DEPTH OF PERC = 80"-98"  
TEXTURAL CLASS: 1

0"	Loamy Sand	10.5'
A	10YR 4/2	
9"	Sandy Loam	9.75'
B	10YR 5/4	
36"	Silt Loam	7.5'
C-1	10YR 5/3	
65"	Medium Sand	5.08'
C-2	2.5Y 6/6	
80"	Coarse Sand	3.83'
98"	2.5Y 6/4 Pockets of Silt	2.33'
C-3	5% Gravel	
104"	Standing @ 104"	1.83'
120"		0.5'

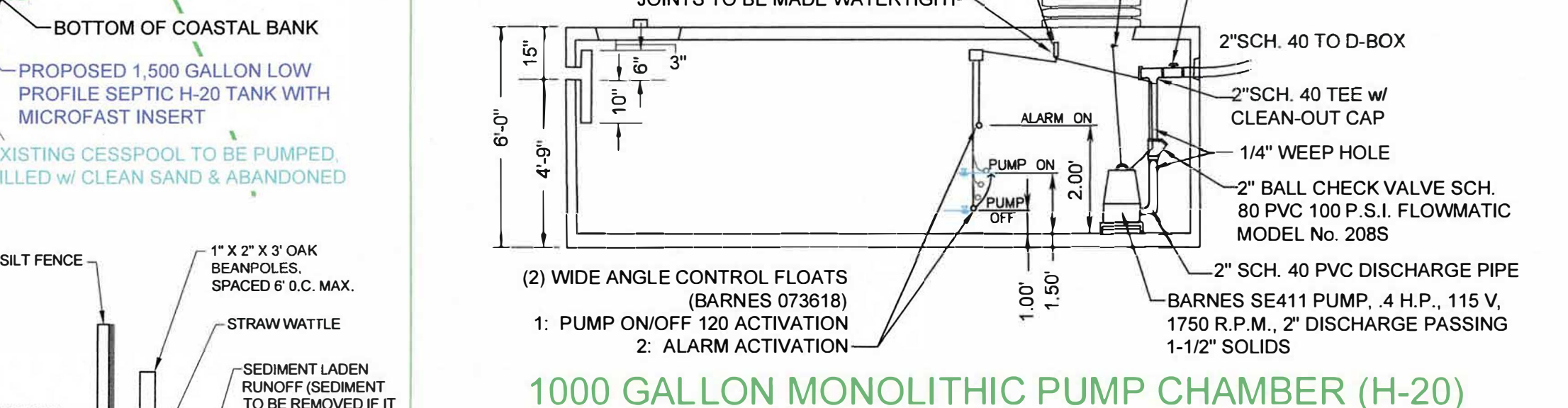
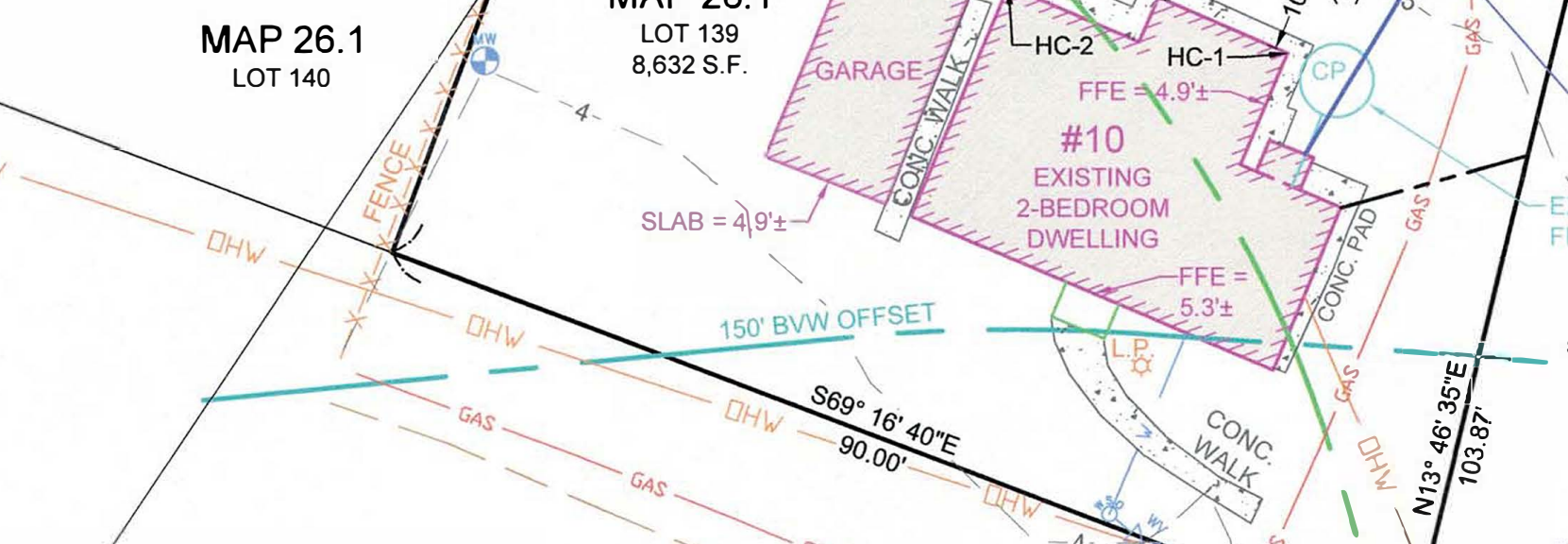


### LEGEND

- 50' EXISTING CONTOURS
- 50' PROPOSED CONTOURS
- EXISTING WATERLINE
- EXISTING OVERHEAD UTILITIES
- EXISTING GAS LINE
- TEST PIT LOCATION
- PROPOSED 1500 GALLON LOW PROFILE SEPTIC TANK WITH MICROFAST INSERT (H-20)
- PROPOSED 1000 GALLON MONO. PUMP CHAMBER (H-20)
- PROPOSED 4" SOLID SCHEDULE 40 PVC PIPE
- PROPOSED 2" SOLID SCHEDULE 40 PVC PIPE
- PROPOSED DISTRIBUTION BOX
- PROPOSED 500 GALLON LEACHING CHAMBER

### NOTES

- MAGNETIC MARKING TAPE SHALL BE PLACED ALONG THE TOP EDGE OF EACH SYSTEM COMPONENT.
- ENTIRE PARCEL IS NOT LOCATED WITHIN A DEP APPROVED ZONE II.
- ENTIRE PARCEL IS NOT LOCATED WITHIN THE BUZZARDS BAY WATER RESOURCE DISTRICT.
- THE COASTAL BANK SHOWN ON THIS PLAN WAS DELINEATED BASED ON THE STANDARDS UNDER MA DEP DWV POLICY 92-1 (ISSUED: MARCH 3, 1992).
- NEW ENGLAND CONSERVATION SEED MIX AVAILABLE FROM NEW ENGLAND WETLAND PLANTS, INC., SOUTH HADLEY, MA 413-548-8000



### LOCAL VARIANCE REQUEST

THE FOLLOWING LOCAL VARIANCE IS REQUESTED FROM THE TOWN OF BOURNE BOARD OF HEALTH 150 FOOT SETBACK REGULATION:

- A 21.8' VARIANCE (150.0' - 128.2') FOR THE SETBACK FROM THE LEACHING FACILITY TO THE EDGE OF THE SALT MARSH.
- A 150' VARIANCE (150.0' - 0') FOR THE SETBACK FROM THE LEACHING FACILITY TO THE TOP OF COASTAL BANK.



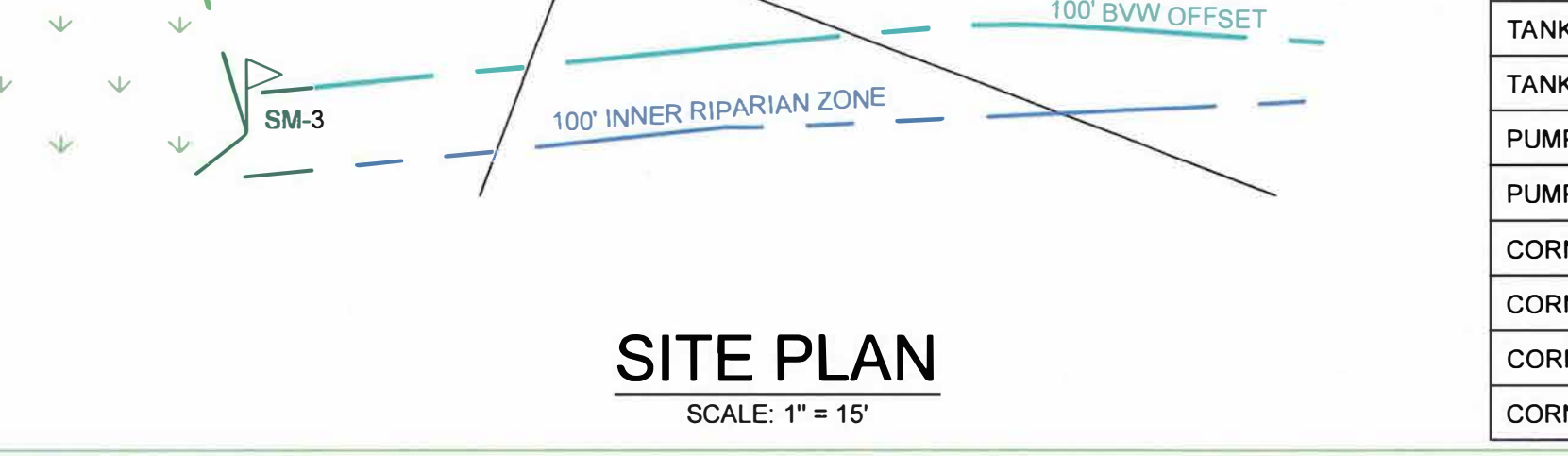
### DESIGN DATA

DESCRIPTION	HC 1	HC 2
TANK COVER IN (1)	14.7'	35.0'
TANK COVER MIDDLE (2)	13.6'	32.9'
PUMP COVER IN (3)	13.9'	24.8'
PUMP COVER OUT (4)	16.7'	21.2'
CORNER STONE (5)	46.5'	45.9'
CORNER STONE (6)	55.1'	54.5'
CORNER STONE (7)	70.7'	61.9'
CORNER STONE (8)	64.2'	49.7'

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### DESIGN DATA

NUMBER OF BEDROOMS (EXISTING)	2
NUMBER OF BEDROOMS (DESIGN)	3 (MIN. PER TITL)
DESIGN FLOW	110 GAL/DAY/BEDROOM
TOTAL DESIGN FLOW	330 GAL/DAY
DESIGN FLOW X 200 %	660 GAL/DAY

**DOSING & STORAGE REQUIREMENTS**

DESIGN FLOW: 330 GPD  
DOSING REQUIRED: 3 CYCLE / DAY  
330 GPD/4 = 110 GAL/CYCLE  
DISTANCE REQ'D BETWEEN PUMP FLOATS: 110 GAL/CYCLE ÷ 250 GAL/FT = 0.44 FT/CYCLE (USE 0.5' TO PROVIDE FOR BACKFLOW)  
STORAGE REQ'D ABOVE WORKING LEVEL: 330 GAL.  
STORAGE PROVIDED ABOVE WORKING LEVEL: 500 GAL.

**INSTALL 3 - 500 GALLON CHAMBERS W/ STONE**

**SIDEWALL CAPACITY**  
(LENGTH x WIDTH) (2 SIDES) (2' HIGH) (74 GPD/S.F.) = GAL/DAY  
(33.5' x 8.83') (2) (2') (.74 GPD/S.F.) = 125.3 GAL/DAY

**BOTTOM CAPACITY**  
(LENGTH x WIDTH) (74 GPD/S.F.) = GAL/DAY  
(33.5' x 8.83') (74 GPD/S.F.) = 218.9 GAL/DAY

**TOTALS:**  
TOTAL NUMBER OF CHAMBERS 3  
TOTAL LEACHING AREA 465.1 SQ.FT.  
TOTAL LEACHING CAPACITY 344.2 GAL/DAY

### PROPOSED SEPTIC SYSTEM UPGRADE

PREPARED FOR:  
**DENNIS LEE**

LOCATED AT:  
**10 SUNNY LANE  
BOURNE, MA 02532**

SCALE: 1 INCH = 15 FT. DATE: OCTOBER 17, 2023

PREPARED BY:  
**JC ENGINEERING, INC.**  
2854 CRANBERRY HIGHWAY  
EAST WAREHAM, MA 02538  
508.273.0377

Drawn By: S.J.I. Designed By: S.J.I. Checked By: J.L.C. JOB No. 7277