

November 2, 2021

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

RE: Ernest & Ann Alden

7 Alden Avenue, Bourne(Buzzards Bay)

G.A.F. Job No. 20-9601

Dear Ms. Guarino:

On behalf of the applicants, Ernest and Ann Alden, we request the following variances pursuant to 310 CMR 15.405, Local Upgrade Approvals and the Bourne Board of Health "Procedures for Granting Local Upgrade Approvals and Septic Variances".

310 CMR 15.211: Distances:

<u>Required:</u> Soil absorption system shall be 20 feet from a cellar wall. <u>Provided:</u> Soil absorption system is 3.5 feet from the bulkhead and 8.0 feet from the cellar wall.

<u>Required:</u> Soil absorption system shall be 10 feet from a property line. <u>Provided:</u> Soil absorption system is 5.0 feet from the property line with Lot 143 and 7 feet from the street line.

Required: Septic tank shall be 10 feet from a cellar wall. Provided: Septic tank is 5 feet from the bulkhead.

<u>Required:</u> Septic tank shall be 10 feet from a property line. <u>Provided:</u> Septic tank is 6.0 feet from the property line with Lot 143 and 7 feet from the street line.

310 CMR 15.255 (5) Construction in Fill:

<u>Required:</u> The excavation of unsuitable material shall extend a minimum of five feet laterally in all directions beyond the outer perimeter of the soil absorption system.

<u>Provided:</u> The excavation of unsuitable material will extend a minimum of 2 feet beyond a small portion of the soil absorption system. Most of the system will have 4 to 5 feet of remove and replace provided.

266 MAIN ST. WAREHAM, MA 02571

TEL 508.295.6600 FAX 508.295.6634 The applicant is proposing to upgrade a failed, non-conforming sewage disposal system. This is a small lot developed with a single family dwelling, sheds, driveway and public water service and gas service. The requested variances are not environmental waivers but construction setback standards. Mitigation for the requested waivers has been provided. The system will be vented and provided with a 40 mil polyethylene barrier between the system and the foundation. This is the most feasible upgrade without pumping the system to the southerly side of the lot beyond the water and gas services.

Please contact me directly if you have any questions or require additional information.

Sincerely,

G.A.F. Engineering, Inc.

Buan R. Kraef

Brian R. Grady, R.S.

Enclosure

cc: Ernest and Ann Alden



Bourne Board of Health Variance Application for Local Health Regulations



In accordance with the established procedures of the Bourne Board of Health, this application is for variances and waivers from local regulations and relevant to requests for relief which have not been approved administratively and require approval at a public meeting.

1. Facility Name and Address:

| Owner's Name ERN | NEST & ANN ALDEN, TRS. | |
|---------------------------|--|--|
| Facility's Street Address | 7 ALDEN AVENUE | |
| Owner's Telephone Num | nber 508-221-8515 | |
| Owner's E-mail Address | c/o ERNIEALDEN@YAHOO.COM | |
| Owner's Mailing Address | 7 ALDEN AVENUE, BUZZARDS BAY, MA 02532 | |

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

| Preparer's Name | Brian Grady |
|------------------|--------------------------|
| Company | G.A.F. Engineering, INC. |
| Telephone Number | 508-295-6600 |
| E-mail Address | BRIAN@GAFENGINC.COM |
| Mailing Address | 266 MAIN STREET, WAREHAM |
| State/ Zip Code | MA, 02571 |

- 3. Enclose a letter of request for variances which makes reference to the specific provisions of the Board Bourne of Health Regulations for which a variance is sought. Please use this opportunity to demonstrate compliance with all other regulation requirements, and to justify the relevant facts and circumstances of the individual case. 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 the Board of Health Regulations can be achieved without strict application of the regulations. A template is available as a reference.
- 4. In order for this Application to be deemed complete, it must be accompanied by the following:
 - Application or Permit Fees paid to the Town of Bourne (if applicable)
 - ☑ Six sets of plans to scale showing all relevant code requirements
 - \square Letter of request for variances (see samples)
 - ☐ If requesting a variance regarding the storage of animals, include a written manure management plan, or equivalent, to address the proper disposal of animal waste

- ☑ 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)

5. Certification:

| "I certify under penalty of law that this doc belief, are true, accurate, and complete. I a submitting false information, including, but deliberate violations." | am aware that there ma t not limited to, penaltie | y be significant consects or fine and/or impris | quences for conment for |
|---|--|---|----------------------------|
| Facility Owner's Signature | & Calder | Date 16/13 | 3/2/ |
| Print Name <u>ERNEST</u> F. ALDEN | | | |
| Signature of Preparer Buon Sha Print Name Brian Grady | g. NAF. Engenee | Date 10/1 | ifes |
| | For Office Use Only | | |
| | | | |
| Completed Application Received: | | d By: | |
| Hearing Date: | _ Permit #: | • | |
| Circle all that apply: Approved | Continued | Disapproved | Other |
| Notes: | | | |
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| Conditions: | | | |
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| | | | V-10/10/2017 |
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I HAVE RECEIVED NOTICE OF SEWER DISPOSAL DESIGN PLAN



To: Andrew & James Emmons 7 Tucy Avenue Buzzards Bay, MA 02532

Re: Soil Absorption System Upgrade 7 Alden Avenue Buzzards Bay, MA

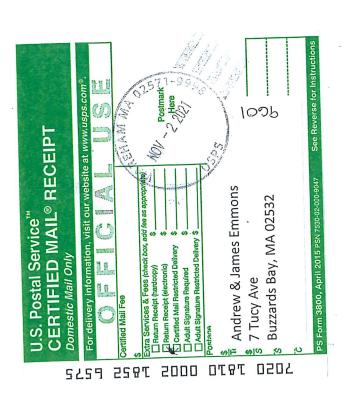
Enclosed please find a copy of the variance request letter and Sewage Disposal System Design Plan submitted to the Bourne Board of Health regarding the proposed sewage disposal system upgrade at the above referenced location. Please contact me directly at G.A.F. Engineering regarding any questions regarding the proposed upgrade to the sewage disposal system.

Sincerely,

Bua a. Lead Brian R. Grady, R.S.

266 MAIN ST. WAREHAM, MA 02571

TEL 508.295.6600 FAX 508.295.6634



| Extract | 1 Abutters List | Report #24; Owner Listing Report | Report | | | | |
|-------------------------------|--|----------------------------------|------------------------|-----------------------------------|--------------|------|------------------|
| Database; Filter, Sort: | LIVE Key IN 3748,3749,3758,3760,3781,3785 | Fiscal Year 2022 | | | | Bour | Bourne MA |
| Key Parcel ID | Owner | Location | LCVCI Bk-Pq(Cert)/Dt | . Mailing Street | Mailing City | ST | ST Zip Cd/County |
| 3748 19,4-133-0 | ŏΞ | 9'ALDEN AVE N 1010 | H 105/153 2/27/2018 | 9.ALDEN AVENUE | BUZZARDS BAY | MA | 02532 |
| 3749 19.4-134-0 | TR | 6 TUCY AVE N 1010 | 13070/229 6/14/2000 | 45 ST MARGARETS ST | BUZZARDS BAY | MA | MA: 02532 |
| 3758 19,4-143-0 | EMMONS ANDREW JET JANE M EMMONS | 7 TUCY AVE N 1010 | 27499/177 6/27/2013 | 27499/177 7 TUCY AVE 6/27/2013 | BUZZARDS BAY | MA | MA 02532. |
| 3760 19.4-145-0 | | 5 ALDEN AVE N 290 1010 8 | 29061/226 8/7/2015 | 5 ALDEN.AVE | BUZZARDS BAY | MA | 02532 |
| 9, | VICKSTROM ADAM S | 11 TUÇY AVE N . 1010 | 27137/149 2/19/2013 | 11 TUCY AVE | | MA | MA 02532 |
| 3785 19.4-172-0 | MAS | 10 TUCY AVE N 2 | 28730/307 3/11/2015 | 10 TUCY.AVE | BUZZARDS BAY | MA | 02532 |

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Total Records



Donna Barakauskas, Member

TOWN OF BOURNE

Board of Assessors 24 Perry Avenue Buzzards Bay, MA 02532 (508) 759-0600 Ext. 1510 • Fax (508) 759-8026



Rui Pereira, MAA Director of Assessing

October 18, 2021

Brian Grady GAF Engineering Inc. 266 Main St. Wareham, MA 02571

Re: Abutters List for Map 19.4 Parcel 144

Subject Property: 7 Alden Ave.

As required by the Bourne Board of Health, pursuant with section 310 CMR 15.411(1), this is to certify that the attached list of names and addresses constitutes all of the parties in interest as shown on the most recent tax list of the Town of Bourne.

Abutting properties are: Map 19.4 Parcels 133, 134, 143, 145, 168 & 172.

Your payment of \$10.00 has been received by the Bourne Assessor's Office.

Please be advised that this abutters list is only good for 30 days from the date on this letter. Expired abutters list can be recertified for an additional filing fee.

See enclosed for abutters mailing addresses.

Board of Assessors

Dinne Brukawika Micha Loof

| ERNEST E ALDEN ALDEN & SONS CONCRETE FORMS 21 WARREN POINT RD | 10-14-21 | 175 53-447/113 428 |
|--|---------------------|--|
| WAREHAM, MA 02571 | Date Date | ACHECK ME |
| Order of Jan Che Naudred Lifty de | eer, ng 00/100 Doll | $\frac{\mathbf{S}}{\mathbf{O}}$ \mathbf{O} |
| ROCKLANDTRUST | 0 11 | 1 |
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THE COMMONWEALTH OF MASSACHUSETTS FEE _____

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BOARD OF HEALTH

TOUN OF BOURNE CATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

| 7 Alda | EN AUENUL Location | Ernest + Ann Alden |
|--|--|---|
| 19.4 | Location | 7 Alden Aul Buzzards Bay 02532 |
| 144 | Map/Parcel # | Address Address |
| | Lot # | Telephone # |
| | Installer's Name | C.A.F. Eugween Mr. Duc. 266 Maw St. Wardiam, Mt 02571 |
| | Address | 508-295-6600 Address |
| | Telephone # | |
| Symp of Building: FX | Resid. | Lot Size 9226 Sq. feet NIHOF M |
| Dwelling No. of Bedro | oms 2 | Garbage Grinder () |
| Other — Type of Building | gNo. of | persons Showers (), Calle ia William MADDEN |
| Other fixtures | | CIVIL |
| Design Flow (min. require | ed) <u>SSO</u> gpd Calculated de | esign flow 330 gpd Design flow provided 340.3288 |
| Title Sewise Di | SAUSAL System Design | Revision Date |
| Description of Soil(s) | Sand | No Process |
| oil Evaluator Form No. | Name of Soil Evaluate | or Revail Andre Date of Evaluation 3/10/21 |
| DESCRIPTION OF REP | PAIRS OR ALTERATIONS /5 | 00 Gallow Septic Tank, u septic Tanks |
| | 3-500 Galla | u septictanks |
| | | |
| | | |
| The undersigned garees | to install the above described Individu | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health |
| The undersigned agrees ITLE 5 and further agrees no | to install the above described Individu | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health |
| The undersigned agrees ITLE 5 and further agrees no Signed | to install the above described Individent to place the system in operation untiles | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health Date |
| The undersigned agrees ITLE 5 and further agrees no ligned | to install the above described Individ to place the system in operation until | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health Date |
| The undersigned agrees ITLE 5 and further agrees no Signed | to install the above described Individ to place the system in operation until | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health Date |
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| The undersigned agrees ITLE 5 and further agrees no igned igned nspections FORM 1 - APPLICATIO | to install the above described Individent to place the system in operation until | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health Date PROVED FORM 5/96 |
| The undersigned agrees ITLE 5 and further agrees no Signed Inspections FORM 1 - APPLICATIO | to install the above described Individent to place the system in operation until | ual Sewage Disposal System in accordance with the provisions of a Certificate of Compliance has been issued by the Board of Health Date PROVED FORM 5/96 I OF MASSACHUSETTS FEE |
| The undersigned agrees ITLE 5 and further agrees no Signed Inspections FORM 1 - APPLICATIO | to install the above described Individual to place the system in operation until on FOR DSCP DEP APPERTY DEPARTY DEPAR | PROVED FORM 5/96 I OF MASSACHUSETTS FEE FOARD OF HEALTH |
| The undersigned agrees ITLE 5 and further agrees no igned igned TORM 1 - APPLICATION | to install the above described Individual to place the system in operation until on FOR DSCP DEP APPEARED THE COMMONWEALTH BETERMENT OF THE COMMONWEALTH OF THE COMMON | Date PROVED FORM 5/96 OF MASSACHUSETTS FEE FOARD OF HEALTH OF COMPLIANCE |
| The undersigned agrees ITLE 5 and further agrees no igned igned TORM 1 - APPLICATION TORM 1 - | THE COMMONWEALTH CERTIFICATE O Individual Component(s) | Date PROVED FORM 5/96 OF MASSACHUSETTS FEE OARD OF HEALTH F COMPLIANCE Complete System |
| The undersigned agrees ITLE 5 and further agrees no igned igned TORM 1 - APPLICATION TORM 1 - | THE COMMONWEALTH CERTIFICATE O Individual Component(s) | Date PROVED FORM 5/96 OF MASSACHUSETTS FEE FOARD OF HEALTH OF COMPLIANCE |
| The undersigned agrees ITLE 5 and further agrees not signed | THE COMMONWEALTH CERTIFICATE O Individual Component(s) | Date PROVED FORM 5/96 OF MASSACHUSETTS FEE COARD OF HEALTH FCOMPLIANCE Complete System (Constructed (), Repaired (), Upgraded (), Abandoned () |
| The undersigned agrees ITLE 5 and further agrees not igned | THE COMMONWEALTH CERTIFICATE O Individual Component(s) | Date |
| The undersigned agrees of the state of the s | THE COMMONWEALTH CERTIFICATE O Individual Component(s) retify that the Sewage Disposal System | Date |
| The undersigned agrees ITLE 5 and further agrees not signed | THE COMMONWEALTH CERTIFICATE O Individual Component(s) rtify that the Sewage Disposal System on No dated | Date |
| The undersigned agrees fittle 5 and further agrees not signed Signed Inspections FORM 1 - APPLICATION No Description of Work: The undersigned hereby cereby: at has been installed in according to application. Installer | THE COMMONWEALTH CERTIFICATE O Individual Component(s) rtify that the Sewage Disposal System on No dated | Date |