## COMMONWEALTH OF MASSACHUSETTS

Board of Health, WGT TISBUNG, MA.

## APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct Repair() Upgrade() Ab	andon() - Cromplete System   Individual Components
Location 220 VINEYARD MEMSIN FARMS	Owner's Name DEVLEK AUGKIAN
Map/Parcel# ASSN PCL 36-291	Address 220 VMF Runs, WT, WA 02575
Lot# 37-21	Telephone# 774-521-9747
Installer's Name	Designer's Name SBTU, INC
Address	Address BUA 339 VILLEYAN HAVEL
Telephone#	Address Boa 339 Villey ANS HAVCY Telephone# 608-693-2781
Type of Building	Lot Size 61, 005 ± sq. ft
Dwelling - No. of Bedrooms $4+2=6$	Garbage grinder ( )
Other - Type of Building	
Other Fixtures	
Design Flow (min_required) 330 and Calculated de	esign flow 660 Design flow provided 699 gp
Plan: Date 5th 30, 2019 Number of sheets C	Revision Date APNIL 4, 7020
Title Priposon somme Dis	POSM SYSTE
Description of Soil(s)	Pin
Plan: Date 5th 30, 2019 Number of sheets C Title PMB0500 SCHUE V LS Description of Soil(s) SGU Soil Evaluator Form No. L Name of Soil Evalua	tor C. Mucy Date of Evaluation 8-30-19
DESCRIPTION OF REPAIRS OR ALTERATIONS	
further agrees to not to place the system in operation until a Certifical Signed Date	4721 13, 2020
Inspections	
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COMMONWEALTH (	OF MASSACHUSETTS
Board of Health,	MA
CERTIFICATE OF	F COMPLIANCE
Description of Work: 🖸 Individual Component(s) 💆 Complete Sy	
The undersigned hereby certify that the Sewage Disposal System; Con	nstructed ( ), Repaired ( ), Upgraded ( ), Abandoned ( )
by:	
at	
has been installed in accordance with the provisions of 310 CMR 15.0 application No, dated Approved	
Installer, dated Approved	
Designer: Inspector:	
The issuance of this permit shall not be construed as a guarantee that	the system will function as designed.
. He abbunite of this permit shall not be constitued as a guarantee that	THE APPEAR THE ADMINISTRATION OF MUNICIPALITY

