Jany

ON-SITE WASTEWATER TREATMENT SYSTEM CONSTRUCTION PERMIT

Allegany County Department of Health
Environmental Health
7 Court Street, 3rd Floor
Belmont, NY 14813
Phone: (585) 268-5208
Fax: (585) 268-9712

PERMIT # 24-013 (Office Assign)

# of bedrooms 4 # of Garbage Grinders(Disposals) 0.00

# of Spas Tubs (exceeding 50 gals) 0 Type of Dwelling Two-Story

Approximate Lot Dimensions X Acres 0.25

PLEASE READ THIS DOCUMENT THOROUGHLY - IT HAS IMPORTANT INFORMATION

***Property Owner* (Please Print)** *Name & Mailing Address*

Allegany County Land Bank

6087 St. Rte. 19N, Suite 300

Belmont, NY 14813

Jason
Home 585-268-7472 x 7

Cell

e: allegany county landbank @ gmail.com.

PROPERTY LOCATION:

26 Main Street

(Village) (Town) Almond
Allegany County, NY

In accordance with the requirements of the Allegany County Department of Health, you are hereby granted permission to construct an on-site wastewater treatment system at the above location in accordance with this permit and any sketches or detail and conditions herein or previously provided.

The applicant agrees that neither the County of Allegany nor its employees shall be liable to the contractor, owner or any other person for any act or omission of any employee of the Allegany County Department of Health and agrees to hold the County of Allegany free and harmless for any failure of the sewage system or for liability that may occur as a result of the design, construction and operation of the sewage system approved for construction by this permit. The applicant has the option of retaining a professional engineer of their choice to design the sewage system being considered. The applicant, in executing the application for this permit, has elected to adopt the sewage system designed for the applicant with the help of the Allegany County Department of Health, as their own design and has decided not to either consult with or have the sewage system designed or reviewed by a private, licensed engineer.

The applicant has the option of refusing said permit based upon the particular design. If the applicant selects this option they are required to submit to the Allegany County Department of Health for approval a plan prepared by a professional engineer for the same. In some cases, with replacement sewage systems, it may be impossible to comply with the rules and regulations. In these cases, the Allegany County Department of Health will attempt to issue a permit which will reflect the best possible design with the lot size available.

IMPORTANT REQUIREMENTS: The installation, upon near completion and PRIOR TO COVERING, must be inspected by this department. At least 24 hours prior notice is required before final inspection. If this project is not completed within ONE YEAR from date of issue, or an extension granted, this permit shall become null and void. (NOTE: Only four extensions can be granted after the original permit expires).

All household liquid wastes including bathroom, kitchen and laundry wastes must be disposed of through this installation. Roof leaders, cellar or footing drains, sump pumps, and wastes from water softening units must be entirely separate from the on-site wastewater treatment system and must be located at least 20 feet from the treatment area. Water softening wastes shall be kept 50 feet from any water supply well.

If a water supply is proposed, it must be located according to NYSDEC regulations and NYSDOH Appendix 5-B specifications. This permit in no way negates local municipal zoning or building requirements.

FOR OFFICIAL USE ONLY

Permit Issuing Official — Date: 3/5/24

Reviewing Engineer — Date: 3/7/2024

***Permit Issued On:** 3/8/24

*** Permit Expires On:** 3/8/25

* Call before you dig "811" or (800-272-4480)

SPECIFICATIONS

PERMIT # 24-013

Type of System:

☐ Tank Replacement Only ☑ Replacement System ☐ New System

(Local code enforcement notified of new structure on: _____. Initials: ____)

BUILDING SEWER - 4"schedule 40 PVC sewer pipe from foundation to septic tank, leak proof joints, min. slope ¼ " per foot without bends. House sewer line may need to be raised so that absorption bed is buried NO MORE THAN 30" deep. Install cleanout at house.

☐ **AEROBIC UNIT:** Rated to treat: ____ gal/day. Min. distance to well and/or surface water: **50** ft.

- In lieu of a septic tank and sand filter, an Aerobic Unit classified as Class 1 (in accordance with NSF Standard 40) will be installed.
- Discharge from aerobic unit will be gravity flow to: _____
- Electrical installation must be approved by a certified electrical inspector.
- **A condition of approval is that a 2-year initial service contract shall be provided to the owner of the ATU** and the cost shall be included in the purchase price. It shall contain provisions for 4 inspection/service visits (scheduled every 6 months over the contract period) during which electrical, mechanical, and other applicable components are inspected, adjusted and serviced. ***The contractor shall provide a copy of service contract to Health Department within 7 days after system was approved for covering.***
- After the initial service period, the homeowner is obligated to obtain and maintain a service contract from an authorized representative for the useful life of the system as a condition of approval. ***The contractor shall be responsible for informing the homeowner of their obligation to maintain a service contract for the life of the system.***

☑ **SEPTIC TANK:** Capacity: 1250 gal. *Type:* ☐ New ☐ Existing ☒ Replacement

Min. distance from house: **10** ft. Min. distance to well and/or surface water: **50** ft.

- Water tight concrete, fiberglass OR polyethylene.
- **Septic Tank Covers shall always be accessible.**
- Where Manholes are more than 12" below final grade, an extension collar shall be provided over each opening.
- When covers are flush with ground surface they must be locked or otherwise be made inaccessible to eliminate a safety hazard
- **Installation of an effluent filter on septic tank is required.**

Existing tank must be located, pumped, and crushed before backfilling. (If tank is undersized, etc.) (OR) Removed if in the way.

NOTE: TWO-COMPARTMENT SEPTIC TANKS ARE REQUIRED.

Septic Tank Capacities

# of Bedrooms		Minimum Tank Capacity (gallons)
1-3	☐	1,000
4	☒	1,250
5	☐	1,500
6	☐	1,750

SEWER FROM TANK TO DISTRIBUTION BOX:
4" Schedule 40 PVC or SDR 35 PVC or equivalent. Tight joints. Minimum grade: 1/8" per foot.

☑ **PRIMARY DISTRIBUTION BOX:** Baffle required. Min. distance to well and/or surface water: **100** ft. (see waiver)

Adjustable outlet flow equalizing devices are recommended. Solid pipe out of box to elbows; 3feet out for all other lines

☐ **PUMP CHAMBER:** Minimum chamber capacity: ____ Min. distance to well and/or surface water: **50** ft.

Dose volume not to exceed 85% of the volume of distribution network piping. High level alarm must be installed. Electrical work must be inspected by a certified electrical inspector. Tank must be vented

☐ **ABSORPTION TRENCHES:** 4" standard construction. Min. distance from house **20** ft.

No. of laterals: ____ Length per lateral: ____ ft. (min.) Slope 1/16" to 1/32" per ft.
Trench width: **24** in. Trench depth: ____ in. Min. distance between trenches: **4** ft. (6 ft. on center)
Min. distance to well and/or surface water **100** ft.

- **For perforated pipe construction, use 6" of no. 2 clean washed stone under pipe and 2" above pipe.**
- Lay untreated building paper, straw, or geo textile over gravel before replacing earth
- Do not strip soil, nor work when wet, nor drive heavy equipment over the tile field

PERMIT # 24-013

☑ **CONTINUOUS ABSORPTION BED:** (Replacement Systems Only)

4" laterals spaced 5 feet on center

- Perforated pipe laid level (slight grade of solid pipe out of distribution box)
- Ends connected

Bed Width: 15' **Bed Length:** 42' **Bed Depth:** 30"

Number of Bedrooms				
2	**3**	**4**	**5**	**6**
15 x 21	15 x 32	15 x 42		
	20 x 24	20 x 32	20 x 39	20 x 47

☐ **SEEPAGE PITS:** *Number:* ____ Min. distance to well: **150** ft. Min. distance to surface water: **100** ft. Min. distance from house **20** ft

Effective Depth: ____ ft. (inlet to bottom); *Effective Diameter:* ____ ft. (annular ring of aggregate > 2.5")

- Linings may be pre-cast, cast-in-place, or un-mortared hollow cinder blocks laid on side and shall be surrounded with at least 6" of washed aggregate 2.5" to 4" in diameter.
- Separation between outside edges of pits shall be 3 times the Effective Diameter.
- Laterals to pits shall be at least 4" diameter pipe with a slope of at least 1/8" per foot.
- Pits shall not be connected in series but shall be connected by way of a distribution box.
- If groundwater is encountered during construction, the pit shall be backfilled to 3 feet above the water level with original soil.
- Annular aggregate shall be covered with untreated building paper, geotextile or a 4" layer of hay/straw.

☐ **SAND FILTER:** ____ ft. wide by ____ ft. long. ☐ Standard construction

Min. distance to property line: **10**ft. Min. distance to well and/or surface water: **100** ft. Min. distance from house **20** ft

- Filter sand must be from an approved source.
- Washed aggregate required.
- Lay untreated building paper, straw, or geo textile over gravel before replacing earth.
- *Call Allegany County Department of Health for latest information on sources of filter sand (585) 268-9250.*
- *Detail sheet for additional information available from the Allegany County Department of Health.*
- **DO NOT DRIVE OVER SAND FILTER DURING CONSTRUCTION.**

Number of Bedrooms				
2	**3**	**4**	**5**	**6**
12 x 25	12 x 38	12 x 50	18 x 42	18 x 50
18 x 17	18 x 25	18 x 34		

☐ **RAISED CONTINUOUS ABSORPTION BED (following Sand Filter):**

Secondary distribution box if bed wider than 10 feet

Total Length: ____ ft. Total Width: ____ ft.

Min. distance to property line: ____ ft. Minimum distance to well and/or surface water: 100 ft.

- 4" laterals spaced 5 feet on center
- *Detail sheet for additional information available from the Allegany County Department of Health.*
- Lay untreated building paper, straw, or geotextile over gravel before replacing earth.

Number of Bedrooms					
1	**2**	**3**	**4**	**5**	**6**
5 x 33	5 x 33	5 x 49	10 x 33	10 x 41	10 x 49
10 x 16	10 x 16	10 x 25	15 x 22	15 x 27	15 x 33
		15 x 17		20 x 21	20 x 25

☐ **Detached 20 foot "T" diffuser Following Sand Filter (replacement system only)**

REMARKS: - Pay close attention to separation distances.
- See detail sheet for continuous bed.
- DO NOT backfill prior to inspection. Call Chelsey (268-9246) or DOH (268-9250).

NOTE: PLEASE REFER TO THE ATTACHED SKETCH FOR SYSTEM LAYOUT

IMPORTANT INFORMATION: In order to insure the life of your sewage system, the septic tank should be cleaned every 2 to 4 years depending on usage and the amount of solids discharged to the system. Septic tanks are best cleaned in the warmer seasons to insure rapid recovery of bacterial activity. It is recommended that the owner or contractor make a sketch with dimensions so the system parts can be located in the future. Normal use of household detergents and chemicals will not harm your sewage system. We urge you to avoid the use of so-called septic tank "cleaners", "conditioners," or "additives" as they have not been shown to be beneficial and may actually harm the system by flushing solids from the septic tank into the seepage pit, absorption field, or sand filter.

Allegany COUNTY New York

Allegany County Environmental Health Department

Site Inspection and Soil Percolation Tests

Property Owner: Allegany Co. Landbank Property Location: 26 Main St. Almond

Township: Almond Reason for Inspection: Replacement

Date: 2/28/24 Inspector: C. Mattison Others Present: Darell Stuck

Presoaked: (Yes) / No **Water Supply:** (Public) / Private **Method of Digging:** Hand / (Machine)

TEST HOLE	DEPTH & DIAMETER OF HOLES SOIL TYPES	TIME	PERCOLATION TEST RUNS #1	#2	#3	#4
1	4' depth gravel mix (closer to house)	F				
		S				
		TIME	3 min			
		DROP	1 inch			
2	3' depth gravel (35-40' from house)	F				
		S				
		TIME	1 min			
		DROP	1 inch			
		F				
		S				
		TIME				
		DROP				
		F				
		S				
		TIME				
		DROP				

Deep Hole Information:

- **Soil Types Noted:** gravel, loamy gravel mix
- **Depth to Ground Water / High Water:** None observed

Number of Wells within 200 Feet of Percolation Test: Ø (Plot on Map) public water

Surface Water Drainage Concerns: _____

*** PLEASE COMPLETE PLOT MAP ON THE NEXT PAGE***

ENGINEERED PLANS ARE REQUIRED IF ANY OF THE FOLLOWING QUESTIONS ARE ANSWERED YES

Ground water is < 2' below wastewater treatment system YES (NO) Excessive slope (> 15% generally) YES (NO)

Required separation distances cannot be achieved (YES) NO Bedrock and/or shale at shallow depth YES (NO)
(*Waiver may be issued on repair system only)

Insufficient slope on site (pump required) YES (NO) Commercial Facility with > 500 GPD flow YES (NO)

72' to water from house.

NEW YORK STATE DEPARTMENT OF HEALTH
Bureau of Water Supply Protection

Specific Waiver Application
Residential On-Site Wastewater Treatment Systems

Applicant (Owner) Allegany County Land Bank

Address (STREET)	6087 ST RTE 19N	Belmont (TOWN, VILLAGE, CITY)	Allegany (COUNTY)	14813 (ZIP)
Site Location (STREET)	26 Main Street	Almond (TOWN, VILLAGE, CITY)	Allegany (COUNTY)	14804 (ZIP)

1. The information is submitted in support of the application for specific waiver from the standards of 10NYCRR Appendix 75A, Wastewater Treatment Standards - Residential On Site Systems

Proposed design cannot meet standards of Appendix 75-A for the following reasons:

- [x] Separation distance cannot be achieved (see 75-A.4 (b), Table 2, Separation Requirements)
- [ ] Excessive slope (see 75-A.4a(1), Soil and Site Appraisal
- [ ] Proposed design and or technology
- [ ] Other

2. Provide a brief description of design criteria which will mitigate noncompliance with requirements of Appendix 75-A. Include a detailed design, record of soil/site investigation and evaluation and a site plan which depicts conditions of concern existing on parcels abutting the site location including but not limited to location of wells, water bodies and wetland.

Separation distance from proposed Continuous Absorption Bed to Creek is approximately 37 feet to meet the appropriate vertical separation distances from GWE to restrictive layer and other property lines

Continuous absorption bed ~37' from creek

3. Signature of Applicant and Professional Engineer/Registered Architect

(TYPE OR PRINT NAME) (Applicant) acknowledge that this request for waiver is necessary because an on-site wastewater treatment system at this property cannot meet the referenced standards of 10NYCRR, Appendix 75-A. I accept the system design as proposed

(SIGNATURE) (DATE)

Jeremy E. DeLyser (TYPE OR PRINT NAME) Professional Engineer/~~Registered Architect~~ acknowledge that this request for waiver from standards of 10NYCRR, Appendix 75-A is necessary because one or more conditions prevent construction of an on-site wastewater treatment system that is compliant with standards of Appendix 75-A. By my signature, the proposed design will provide a degree of protection equivalent to the intent of Appendix 75-A and will not result in an increased risk to public and environmental health

Jeremy E DeLyser (SIGNATURE) 3/7/2024 (DATE) 089609 (NYS LICENSE #)

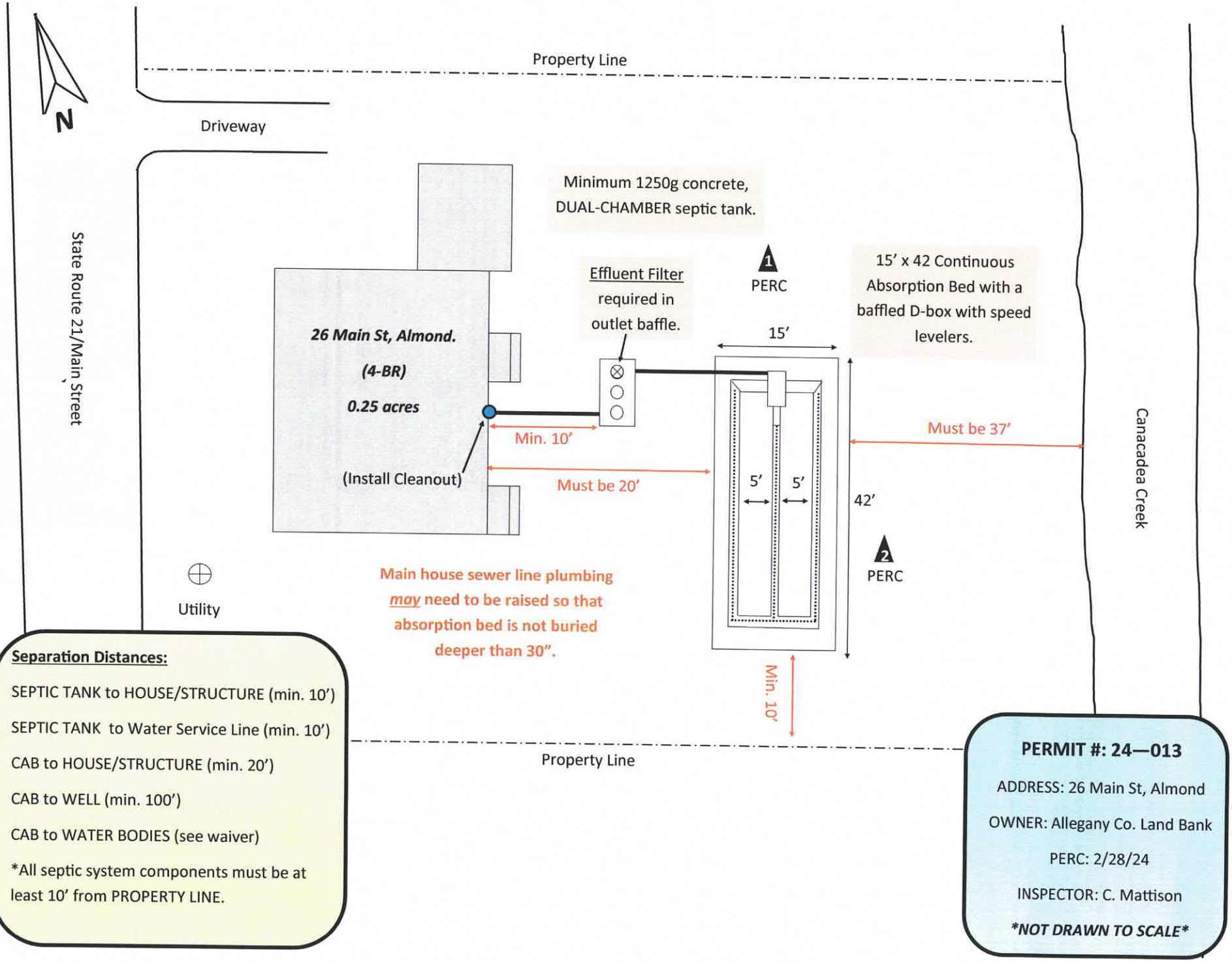
For Health Department Use Only

Based upon the information provided in this application to waive the referenced standards of Appendix 75-A and in accordance with 10NYCRR Section 75-3.10 and 75-5(b), the waiver requested is hereby:

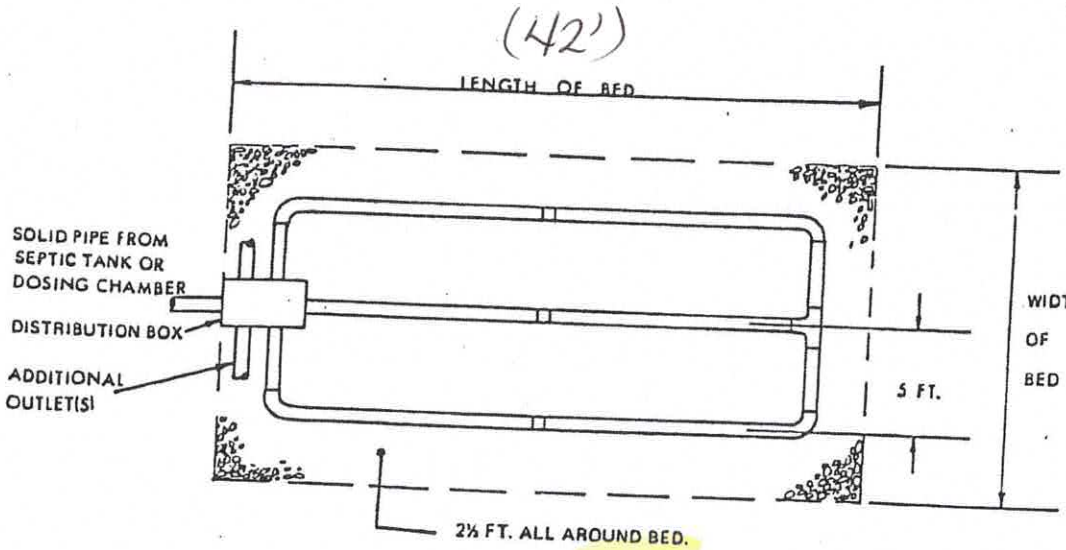
- [x] Approved: Install as proposed
- [ ] Approved: Install with the following conditions:
- [ ] Denied, for the following reasons:

This waiver may be revoked if any proposals are modified or site conditions change that were considered for approving this waiver.

Chelsey Mattison (PRINT NAME OF REVIEWER) Chelsey Mattison (SIGNATURE) 2/29/24 (DATE)


N
Property Line
Driveway
State Route 21/Main Street
Minimum 1250g concrete, DUAL-CHAMBER septic tank.
Effluent Filter required in outlet baffle.
1
PERC
15' x 42 Continuous Absorption Bed with a baffled D-box with speed levelers.
15'
26 Main St, Almond.
(4-BR)
0.25 acres
(Install Cleanout)
Min. 10'
Must be 20'
Must be 37'
5'
5'
42'
2
PERC
Canacadea Creek
Utility
Main house sewer line plumbing may need to be raised so that absorption bed is not buried deeper than 30".
Min. 10'
Property Line
Separation Distances:
SEPTIC TANK to HOUSE/STRUCTURE (min. 10')
SEPTIC TANK to Water Service Line (min. 10')
CAB to HOUSE/STRUCTURE (min. 20')
CAB to WELL (min. 100')
CAB to WATER BODIES (see waiver)
*All septic system components must be at least 10' from PROPERTY LINE.
PERMIT #: 24—013
ADDRESS: 26 Main St, Almond
OWNER: Allegany Co. Land Bank
PERC: 2/28/24
INSPECTOR: C. Mattison
NOT DRAWN TO SCALE

CONTINUOUS BED

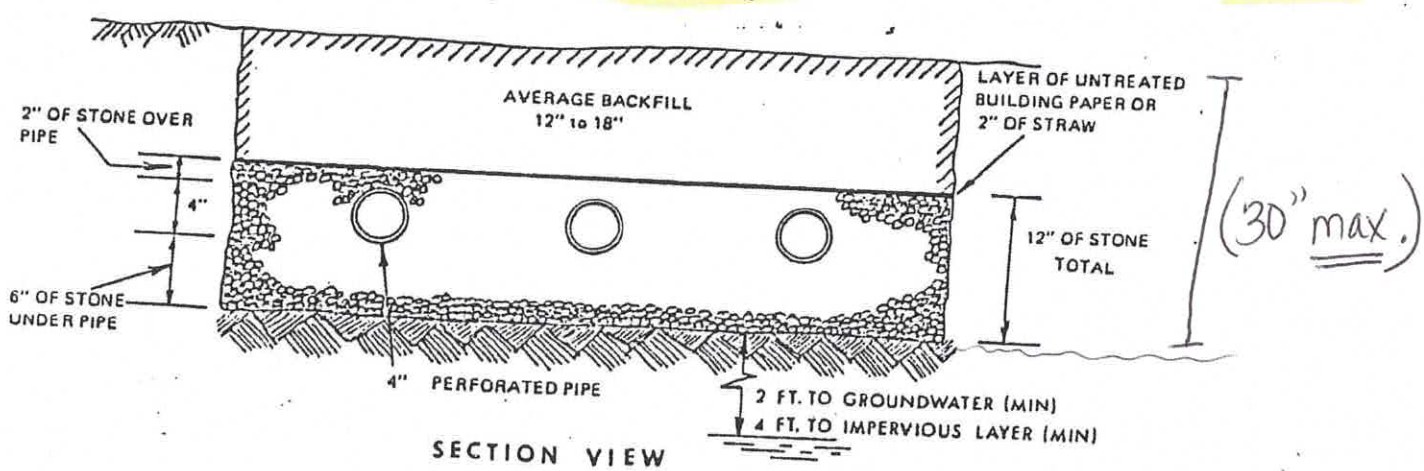


PLAN VIEW

1 & 2 BR
15' x 21'

3 BR
15' x 32'
20' x 24'

4 BR
15' x 42'
20' x 32'



SECTION VIEW

FIGURE V – LEACHING BED

Allegany COUNTY New York

Department of Health

County Office Building

7 Court Street , Belmont, New York

Payment Receipt

Received From	Stuck Contracting
Resident Address	7578 County Road 20
	Friendship, NY 14739
Resident Phone Number	585-610-9138

Payment Method	Date Received	Check Number	Check Date
Check	2/28/24	1509	2/28/24

Description	Amount
Non-Conventional Septic Permit Fee	$200.00
Property: 26 Main St, Almond	
Total :	$200.00

Received By:	Chelsey Mattison

26 Main St, Almond