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Attachment 1.1.F.2.1(b)

TIDAL WATER SITE ASSESSMENT

IMPLEMENTATION OF TIDAL WATER SITE ASSESSMENT FORMS FOR SELECTED SEABROOK PROPERTIES

Prepared by:
Elkind Environmental Associates, Inc.
6 Baymeadow Dr.
Nashua, New Hampshire 03063

November, 1994

A report of the New Hampshire Coastal Program, Office of State Planning, pursuant to National Oceanic and Atmospheric Administration Award No. NA470Z0237. The views expressed herin are those of the authors and do not necessarily reflect the views of NOAA or any of its sub-agencies.

NH Coastal Program

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Introduction

Elkind Environmental Associates, Inc. (EEA) was contracted by the New Hampshire Office of State Planning (OSP), New Hampshire Coastal Program (NHCP) to assist in the development of a Tidal Water Site Assessment Form for the evaluation of septic systems adjacent to tidal waters. Following discussions with NHCP, representatives of the Department of Environmental Services, and representatives from the University of New Hampshire's Jackson Environmental Laboratory (JEL), a draft form, previously developed with the assistance of a technical advisory committee, was modified and identified as "Tidal Water Site Assessment Form, Draft - September 28,1994". EEA was contracted to utilize the form at up to 25 sites selected by JEL. Similarly, EEA was contracted to perform Order 1 Soil Surveys at up to 25 sites. In close cooperation with Town of Seabrook officials, a list of potential study sites was developed. Ultimately, owners of 14 of the selected sites agreed to participate in the study.

During the last two weeks of October, 1994, Fred Elkind, professional engineer, and David Allain, certified soil scientist, investigated the sites provided. Owners were contacted either in person or by telephone to ascertain relevant facts about the properties in question. Soils were investigated by means of hand augering both upgradient and downgradient to the effluent disposal areas (EDA). Highest observable tide lines, utilizing strand line, vegetation, and staining on walls, were noted on each property - where applicable. Topographic cross-sections from the edge of the EDA to the nearest highest observable tide line point were developed. System functional qualities were noted.

The following report presents the data obtained from the above efforts. The report is arranged in sections. Each section is identified as a street location relating to the assessed property. It should be noted that the 6 Forest Drive property appears not to be under direct tidal influence. The 256 Walton Road (School) property does not fit well with the developed form as it is not a typical residential, commercial, or industrial site as referenced in the form. Further, this site contains four leaching areas (three EDA's) of which two are relatively close to freshwater wetlands. Similarly, the 138 Farm Lane property, which is approximately 200 feet from the marsh, has and EDA which is approximately 50 feet from a fresh water drainage.

In filling in form, care was exercised to provide data as accurately as possible. Much of the information, however, was necessarily provided by third parties such as owners and tenants. When the information was unknown or the respondent was clearly unsure, a question mark (?) was inserted as the answer. In the instances where data supplied was questionable due to either uncertainties on the part of the respondent or on the part of the evaluators, a response along with a question mark (?) is included at the appropriate location.

EEA will continue to work with OSP and other investigators in the refinement of the Assessment Form and procedures.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Hubert, J. & A.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 46C Tax Map# 13
   Street: 279 Walton Rd. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 4
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures:

   Well maintained home, shed on property. Water damage to sill; 18000 Sq. Ft. lot, 30% in marsh.

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 30 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes____ No_X__

7. What is the age of the system? Years_7__ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. **<u>Lot Characteristics</u> (determined through field evaluation):**

1. Date of Field Evaluation:____10/19/94___

2. Lot size:___18,000 Sq.Ft.___ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____363_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   __50+/-ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _Raised_

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.
   0-5" 7.5YR 3/2 Sandy Loam fill; granular, friable; cfr
   5-12" 10YR 4/3 sandy fill; loose; single grain
   12-15" 10YR 2/1 sandy loam; massive; friable
   15-40+" 10YR 3/1 sandy loam; massive, friable, sat. to 18"
   Udorthents, wet substratum

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-16" 10YR 2/2 sandy loam fill; granular; friable; cfr
   16-27" 10YR 5/4 loamy sand fill; friable; granular
   27-40"+ 10YR 2/1 sandy loam; massive; friable; saturated
   Udorthents, wet substratum

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   Area between test holes was fill over poorly drained soil, chroma 1 matrix below fill and saturated within 12" below fill

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X_

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ?_

14. Does residence have any of the following:
Dishwasher: Yes____ No_X__
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes_X__ No____
Garbage Disposal: Yes____ No_X__
Separate plumbing system for grey water: Yes____ No__X_
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_ (has foundation drains)

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is currently overloaded based upon soil limitations and # of bedrooms.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system was replaced 7 years ago and appears to be working adequately. The limited number of occupants (2, usually) appears to account for this in part.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

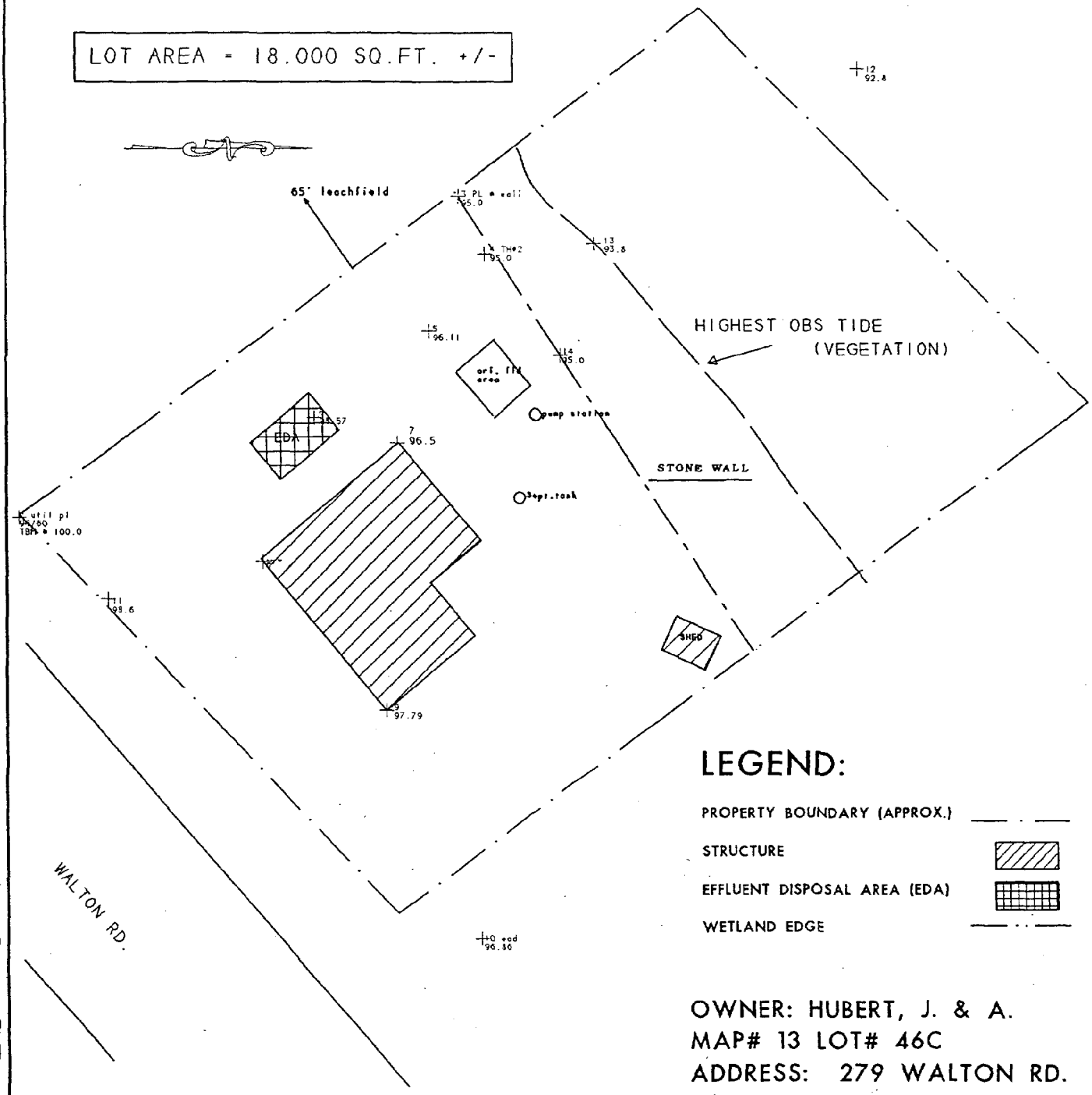
The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD



LEGEND:

PROPERTY BOUNDARY (APPROX.)

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE

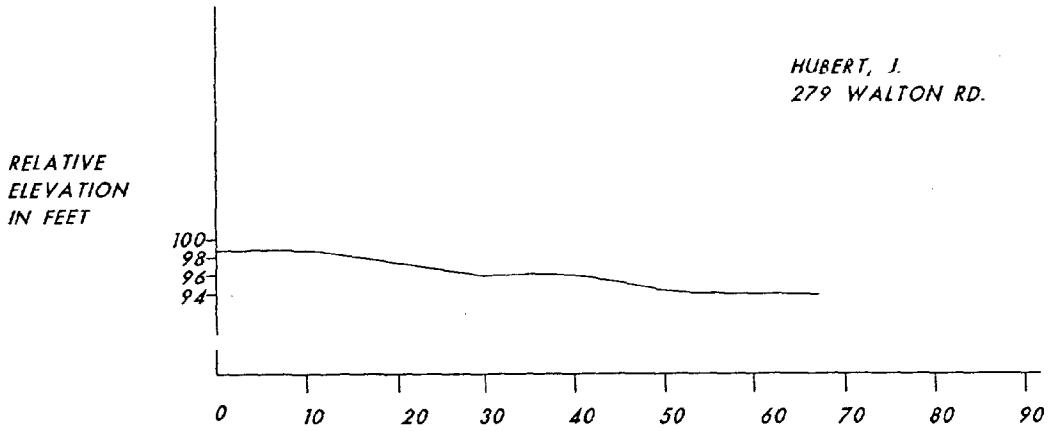
OWNER: HUBERT, J. & A.
MAP# 13 LOT# 46C
ADDRESS: 279 WALTON RD.

OCTOBER, 1994

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

SCALE 1" = 30'

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING



CROSS SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Locke Family Tr.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 70 Tax Map# 13
   Street: 41 Causeway St. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 3
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures:

   Well maintained home on 40,000 Sq. Ft.; Workshop on property. Family in the plumbing business.

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 37 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? __500? (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes____ No__X_

7. What is the age of the system? Years_37 Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/19/94____

2. Lot size:___40,000 Sq.Ft.__ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____1664_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _60+/-ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __in-ground

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-12" 10YR 3/2 sandy loam; granular; friable; cfr
   12-30" 10YR 6/8 loamy sand; granular; friable
   30-36" 10YR 3/6 fine sand, granular; friable w/ 10YR 3/2 mottles
   36-40"+ 10YR 5/4 fine sand; granular, friable; mottled

   Series Name: Deerfield

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-12" 10YR 2/2 sandy loam, friable, granular, cfr
   12-30" 7.5YR 3/2 loamy sand; granular; friable
   30-40"+ 10YR 4/3 loamy sand to sand; granular; friable

   Series Name: Windsor

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

    Downgradient water table of 30" based upon redox iron depletions noted at that depth and lower.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X_

13 How often is the septic tank pumped? ___once in 10 years

14. Does residence have any of the following:
Dishwasher: Yes__X_ No____
On-site laundry/washing machine: Yes__X_ No____
Low flow plumbing fixtures: Yes_X__ No____
Garbage Disposal: Yes_X__ No____
Separate plumbing system for grey water: Yes_X__ No____
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site has characteristics to be able to adequately treat the wasteload generated.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

There is no visible evidence of failure. The system has historically worked well. The bed bottom is close to the water table and treatment capability is limited.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

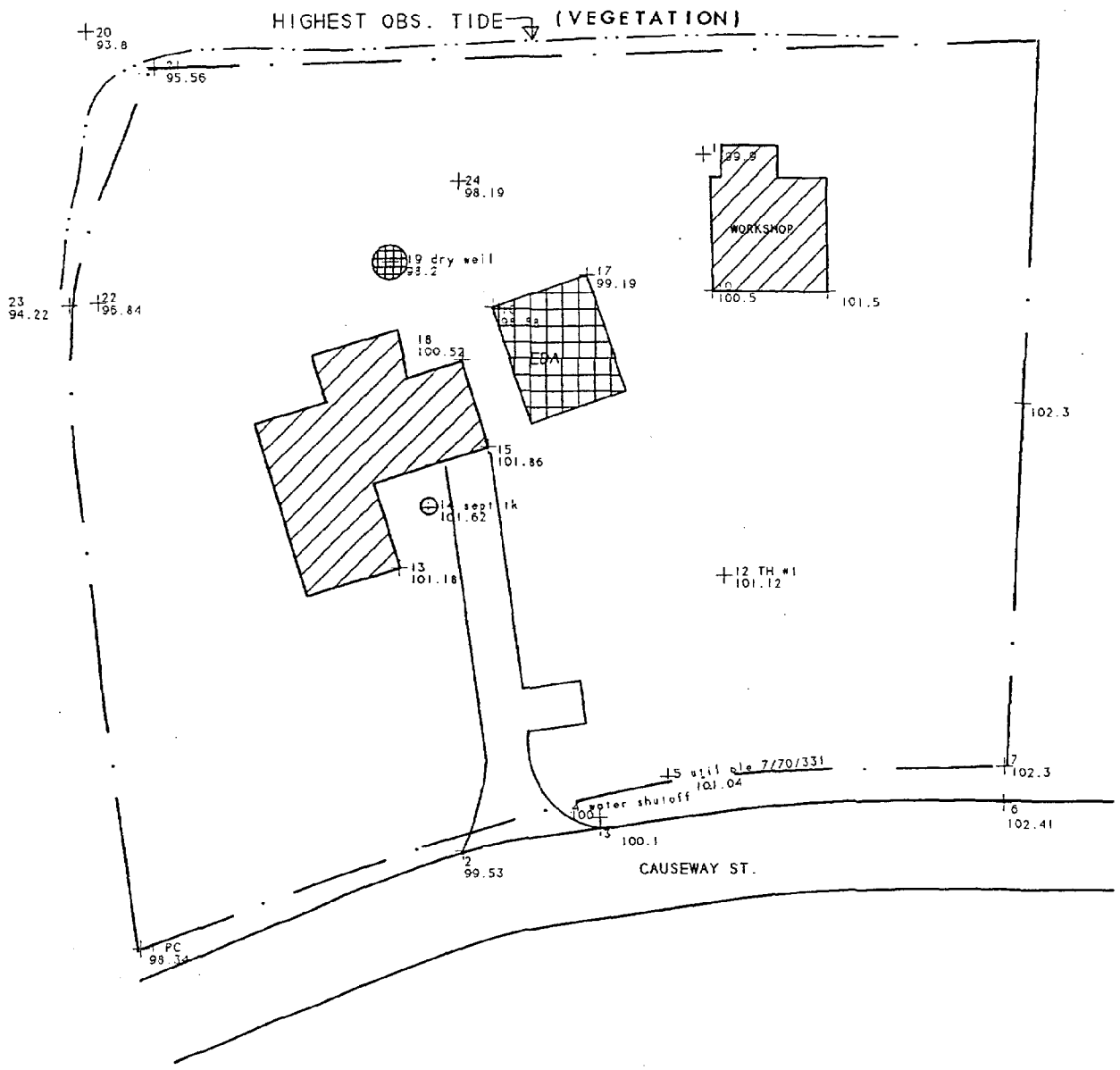
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA - 40,000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) — . —

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

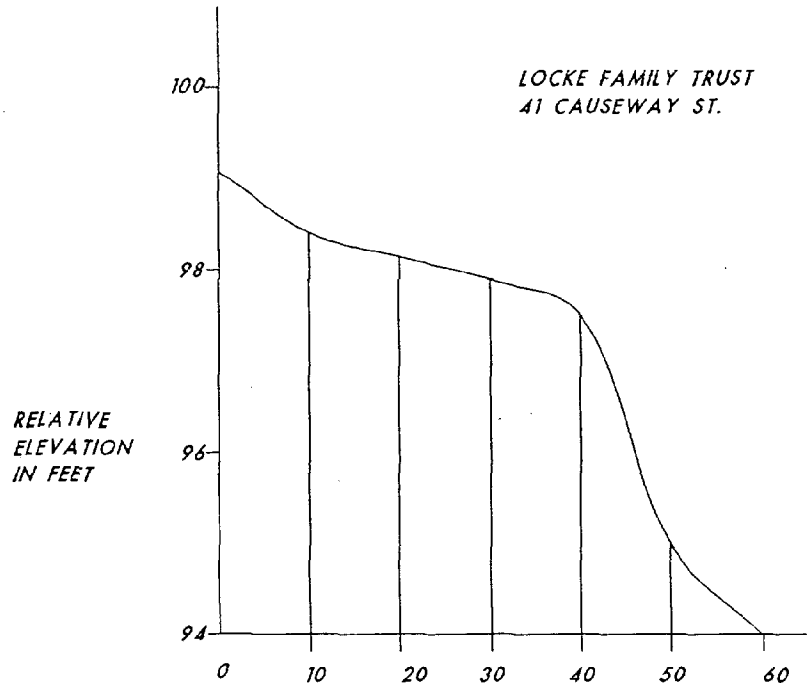
WETLAND EDGE — . —

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

SCALE 1" = 40'

OWNER: LOCKE, E.
MAP# 13 LOT# 70
ADDRESS: 41 CAUSEWAY ST.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Locke, R.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 84 Tax Map# 13
   Street: 138 Farm Lane Subdivision Name:

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family # of bedrooms 3
   Seasonal Use Year-round Use X)
   Commercial: (if yes, Seasonal Use Year-round Use)

   Industrial:

   Brief Description of Property and
   Structures:

   3 bedroom year-round home with garage and barn on 1 acre +/-
   Good Condition

4. Is the structure Occupied? Yes X No
   If yes, how long? Years: 17 Months

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes_?__ No____

7. What is the age of the system? Years_17_ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/21/94____

2. Lot size:__40,000 Sq. Ft.___ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____1300___

5. Water Supply:
   Well on Lot? Yes_ No__X_
   Water supply off lot? Yes__X_ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   __50__ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __raised__

8. Does surface runoff affect the effluent disposal area?
   Yes____ No__X_

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

0-6" 10YR 3/2 sandy loam; granular; friable - CFR
6-16" 10YR 4/3 sandy loam; gran.; friable
16-24" 10YR 3/2 sandy loam; gran.; friable
24-40+" 10YR 5/4 sandy loam, granular, friable
Udorthents, smoothed

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.
0-8" 10YR 3/2 sandy loam; granular; friable; cfr
8-19" 10YR 4/4 sandy loam; granular; friable;
19" Refusal
Hollis
TH#3 0-8" 10YR 3/2 sandy loam; gran.; friable, mfr
8-36" 10YR 4/4 to 5/6 sandy loam; gran, friable
36-40" 10YR 6/8 loamy sand to sand; single grain; v. friable
Canton

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

None observed in top 40"; 50 ft. to north is a cattail wetland. Surface water elevation is about 6 ft. below finish grade above EDA.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X_

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___2-3 years

14. Does residence have any of the following:
Dishwasher: Yes____ No_X__
On-site laundry/washing machine: Yes_X__ No____(into sep. drywell)
Low flow plumbing fixtures: Yes____ No_X__
Garbage Disposal: Yes____ No_X__
Separate plumbing system for grey water: Yes_X__ No____
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is more than adequate to handle and treat wastewater

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system appears to be adequately handling existing loading.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

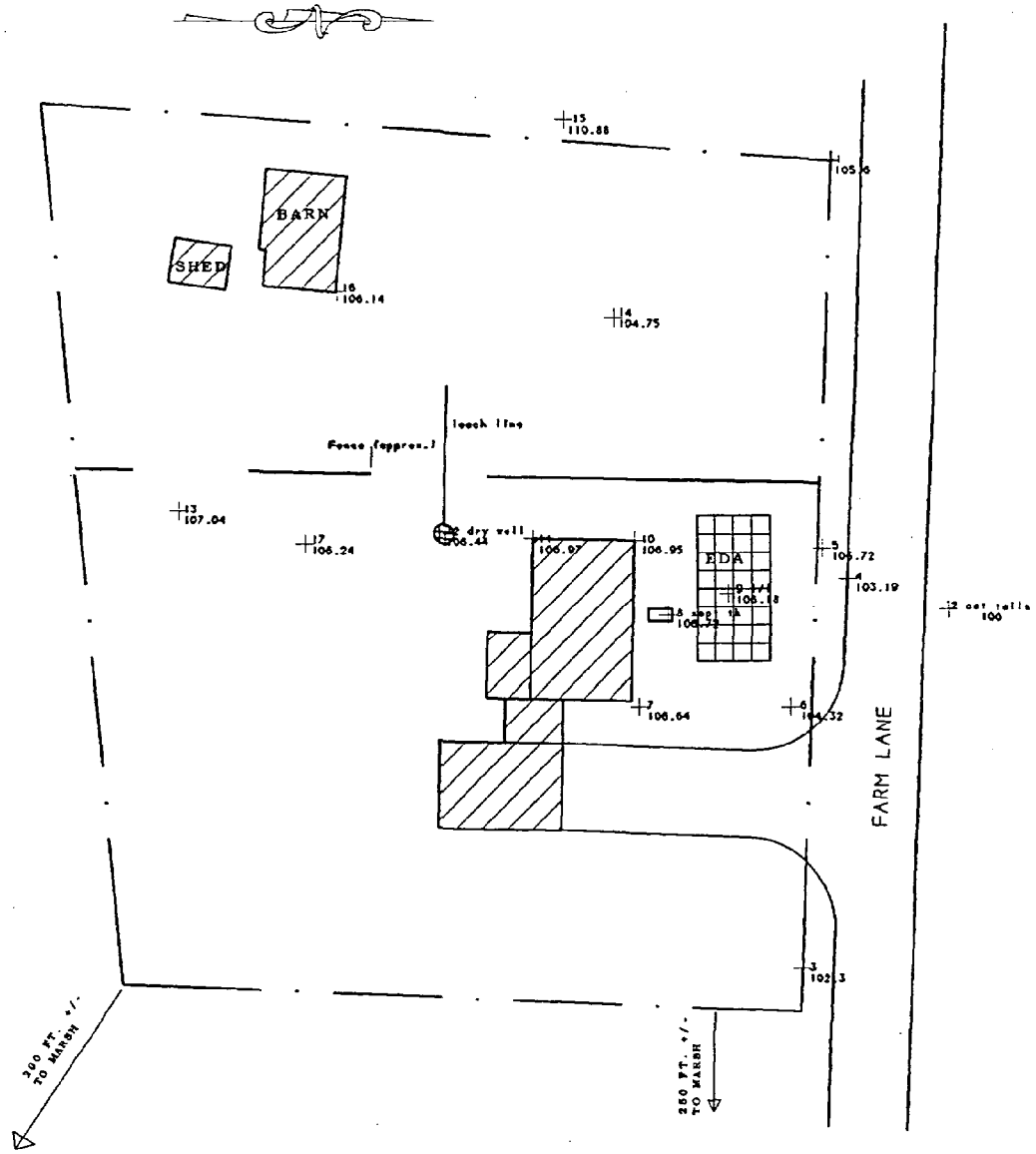
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 40,400 SQ.FT. +/-



SCALE 1" = 50'

OWNER: LOCKE, R.
MAP# 13 LOT# 84
ADDRESS: 138 FARM LANE

LEGEND:

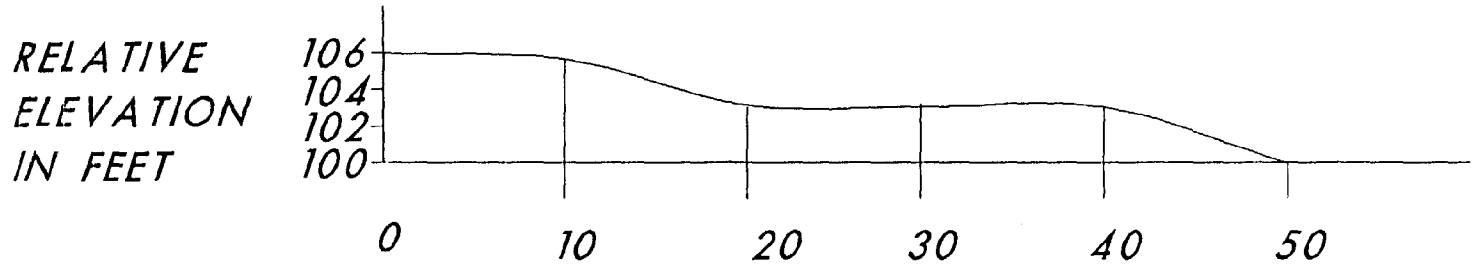
PROPERTY BOUNDARY (APPROX.)
STRUCTURE
EFFLUENT DISPOSAL AREA (EDA)
WETLAND EDGE

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING

LOCKE, R.
138 FARM LANE



CROSS-SECTION FROM EDA TO NEAREST WET AREA

(0 REPRESENTS EDGE OF EDA
CLOSEST TO WET AREA - MARSH > 200 FT.)

SCALE 1" HORIZONTAL = 10 FT.
1" VERTICAL = 10 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

A. Property

Owner: Bakutis, M

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 29-50 Tax Map# 12
   Street: 14 Kimberly Dr. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 2
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures: Two - 2 Bedroom units on lot; Built 1987

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 7 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes__X_ No____

7. What is the age of the system? Years_7__ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. **<u>Lot Characteristics</u> (determined through field evaluation):**

1. Date of Field Evaluation:___10/21/94____

2. Lot size:___32,000 Sq. Ft.__ (in acres or square feet) based on deed___, tax map___, survey___, or other___Septic Plan____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____816_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   >100__ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __raised_____

8. Does surface runoff affect the effluent disposal area?
   Yes____ No__X_

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-5" 10YR 3/3 sandy loam; granular, friable, common roots
   5-26" 10YR 5/8 loamy sand; granular; friable
   26-40"+ 10YR 6/3 sand; loose; single grained; with 10YR 6/2 and 4/6 mottles
   Deerfield

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-15" Mixed Fill
   15"-24" 10YR 5/4 sandy loam; granular
   24"-40" 10YR 6/6 sand; loose; single grain
   Udorthents Smoothed

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

    Estimated seasonal high below 26 inches of original surface evidenced by non-cemented redox concentrations and redox iron depletions.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X_

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___2 yrs.

14. Does residence have any of the following:
Dishwasher: Yes_X__ No____
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes____ No____
Garbage Disposal: Yes_X__ No____
Separate plumbing system for grey water: Yes____ No_X__
Water Treatment System: Yes____ No__X_
Sump Pump: Yes__X_ No____

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site appears adequate to handle existing waste load.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system appears to be working well. No outward signs of failure.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

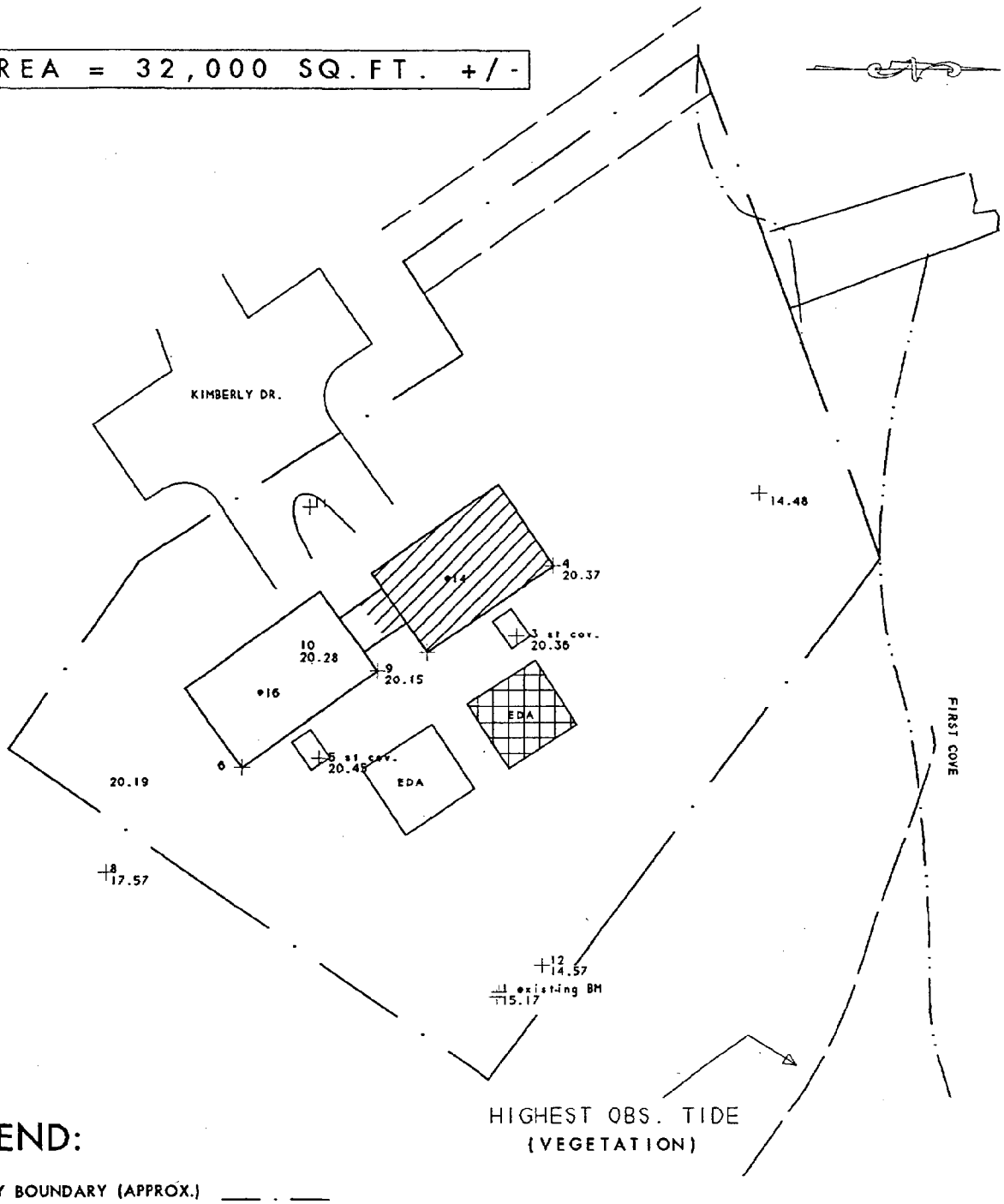
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 32,000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) ——— . ———

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

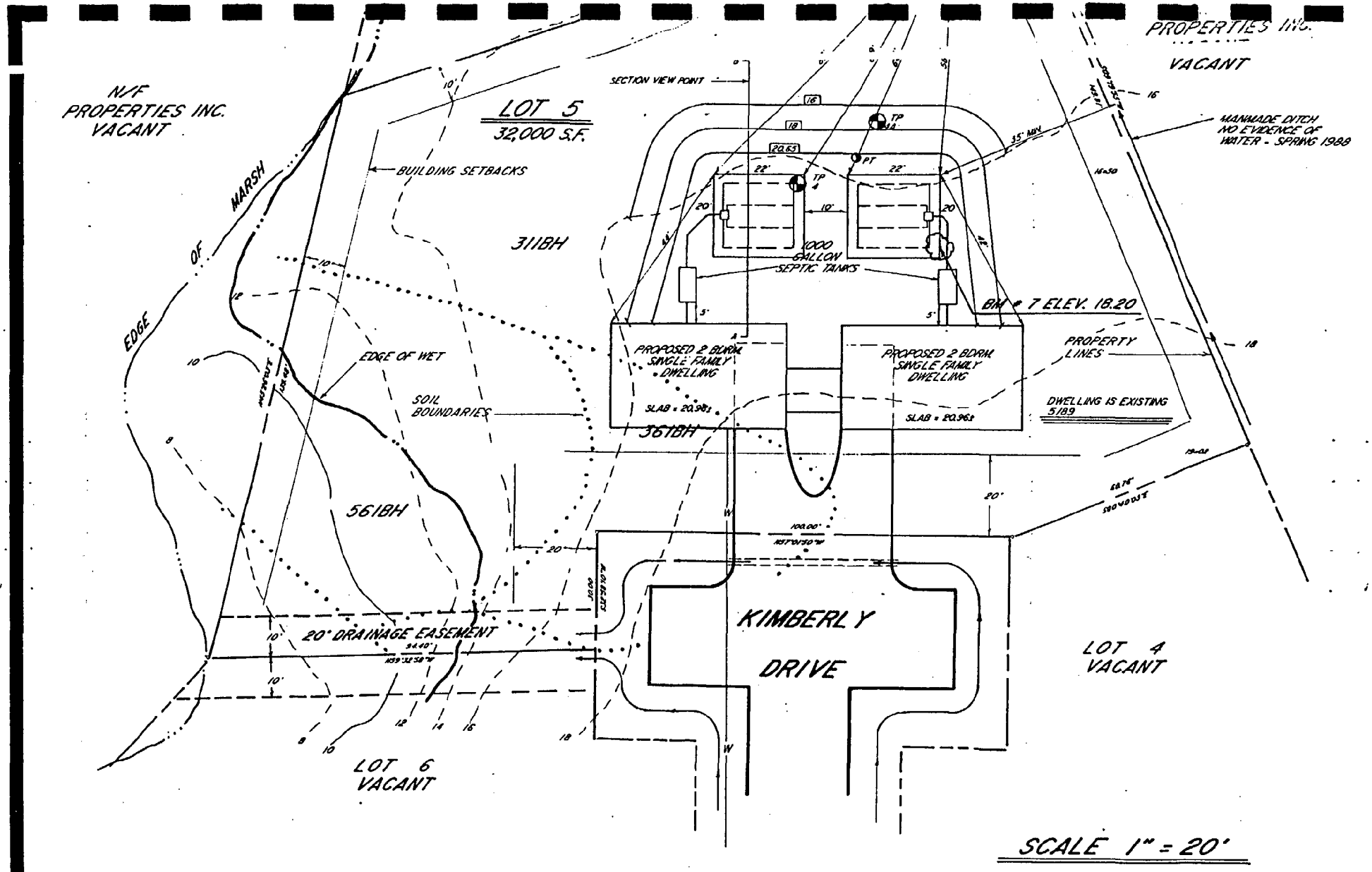
WETLAND EDGE ——— .. ———

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

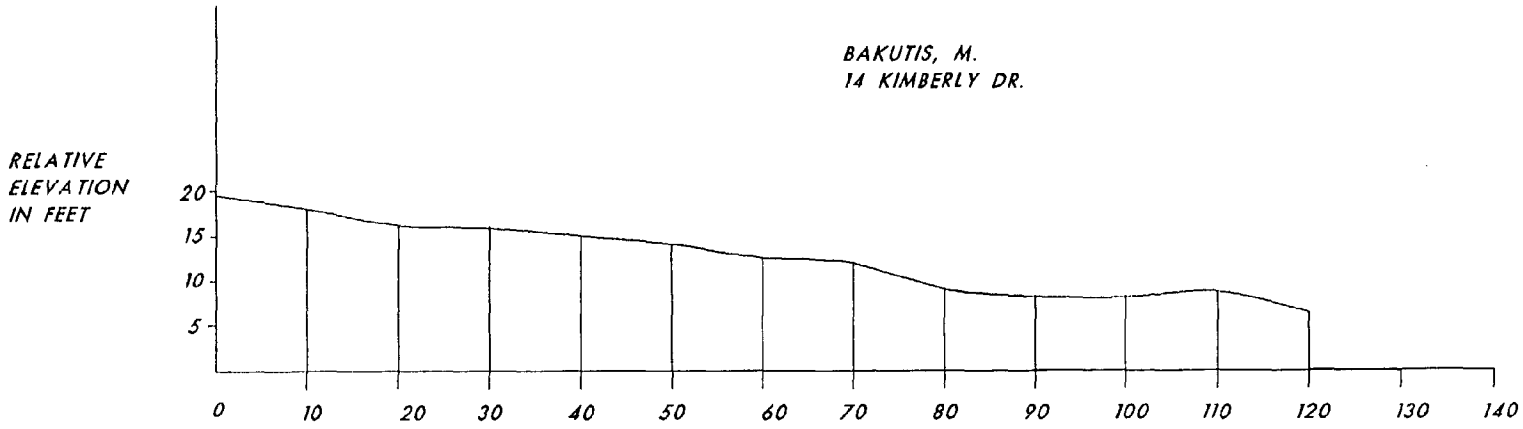
SCALE 1" = 50'

OWNER: BAKUTIS, M.
MAP# 12 LOT# 29-50
ADDRESS: 14 KIMBERLY DR.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING


N/F
PROPERTIES INC.
VACANT
LOT 5
32,000 S.F.
BUILDING SETBACKS
MARSH
EDGE OF
EDGE OF WET
SOIL BOUNDARIES
311BH
561BH
361BH
SECTION VIEW POINT
1000 GALLON SEPTIC TANKS
PROPOSED 2 BDRM. SINGLE FAMILY DWELLING
PROPOSED 2 BDRM. SINGLE FAMILY DWELLING
SLAB = 20.98±
SLAB = 20.96±
BM # 7 ELEV. 18.20
PROPERTY LINES
DWELLING IS EXISTING 5/89
20' DRAINAGE EASEMENT
KIMBERLY
DRIVE
LOT 6
VACANT
LOT 4
VACANT
PROPERTIES INC.
VACANT
MANMADE DITCH NO EVIDENCE OF WATER - SPRING 1988
SCALE 1" = 20'

BAKUTIS, M.
14 KIMBERLY DR.



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 20 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

A. Property

Owner: Bakutis, M

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 29-50 Tax Map# 12
   Street: 16 Kimberly Dr. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 2
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures: Two - 2 Bedroom units on lot; Built 1987

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 7 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes__X_ No____

7. What is the age of the system? Years_7__ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/21/94____

2. Lot size:___32,000 Sq. Ft.__ (in acres or square feet) based on deed___, tax map___, survey___, or other___Septic Plan____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____816_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   >100__ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __raised_____

8. Does surface runoff affect the effluent disposal area?
   Yes____ No__X_

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-5" 10YR 3/3 sandy loam; granular, friable, common roots
   5-26" 10YR 5/8 loamy sand; granular; friable
   26-40"+ 10YR 6/3 sand; loose; single grained; with 10YR 6/2 and 4/6 mottles
   Deerfield

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-15" Mixed Fill
   15"-24" 10YR 5/4 sandy loam; granular
   24"-40" 10YR 6/6 sand; loose; single grain
   Udorthents Smoothed

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

    Estimated seasonal high below 26 inches of original surface evidenced by non-cemented redox concentrations and redox iron depletions.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X_

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___2 yrs.

14. Does residence have any of the following:
Dishwasher: Yes_X__ No____
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes____ No____
Garbage Disposal: Yes_X__ No____
Separate plumbing system for grey water: Yes____ No_X__
Water Treatment System: Yes____ No__X_
Sump Pump: Yes__X_ No____

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site appears adequate to handle existing waste load.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system appears to be working well. No outward signs of failure.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

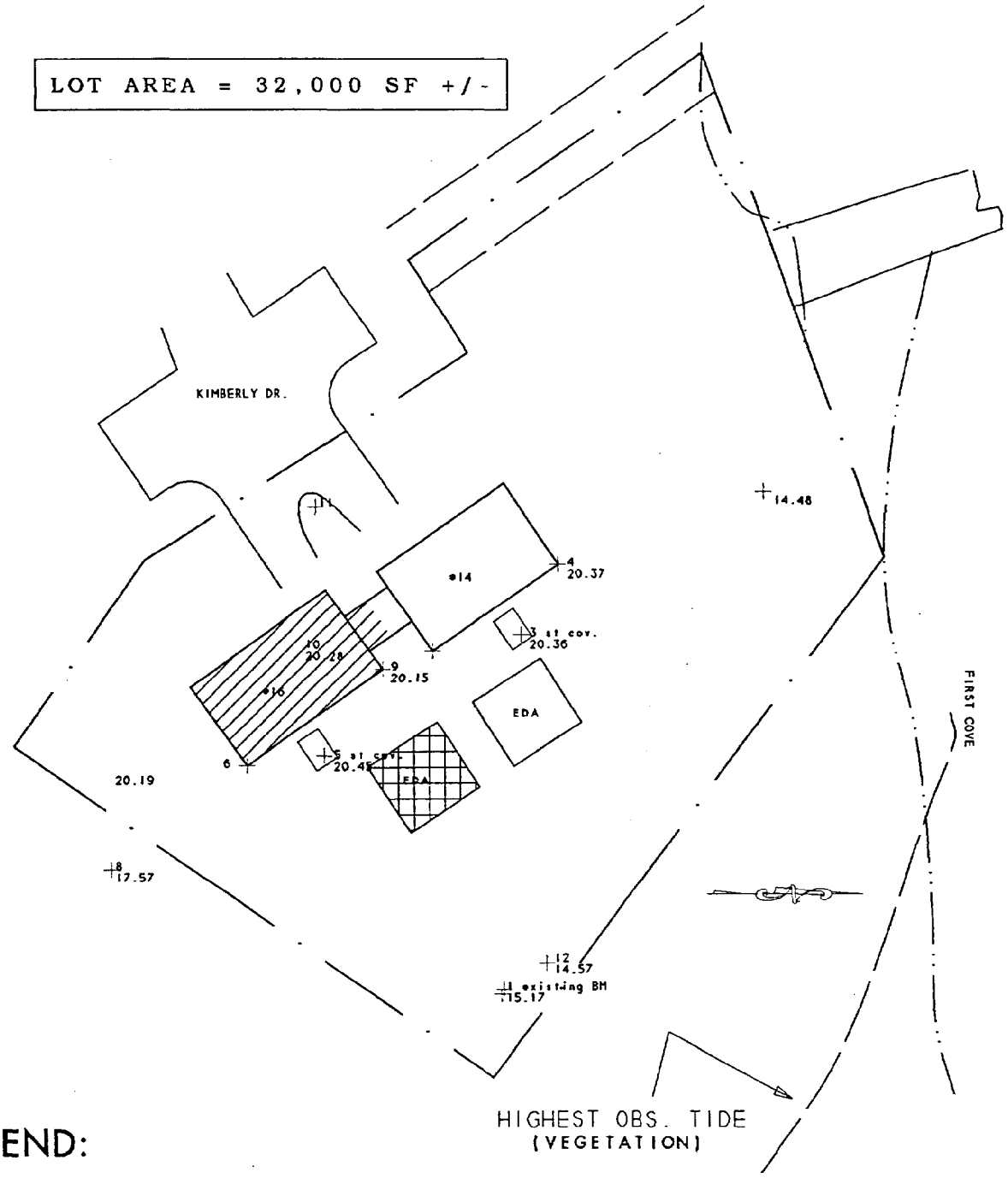
THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

LOT AREA = 32,000 SF +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) — · —

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE — · · —

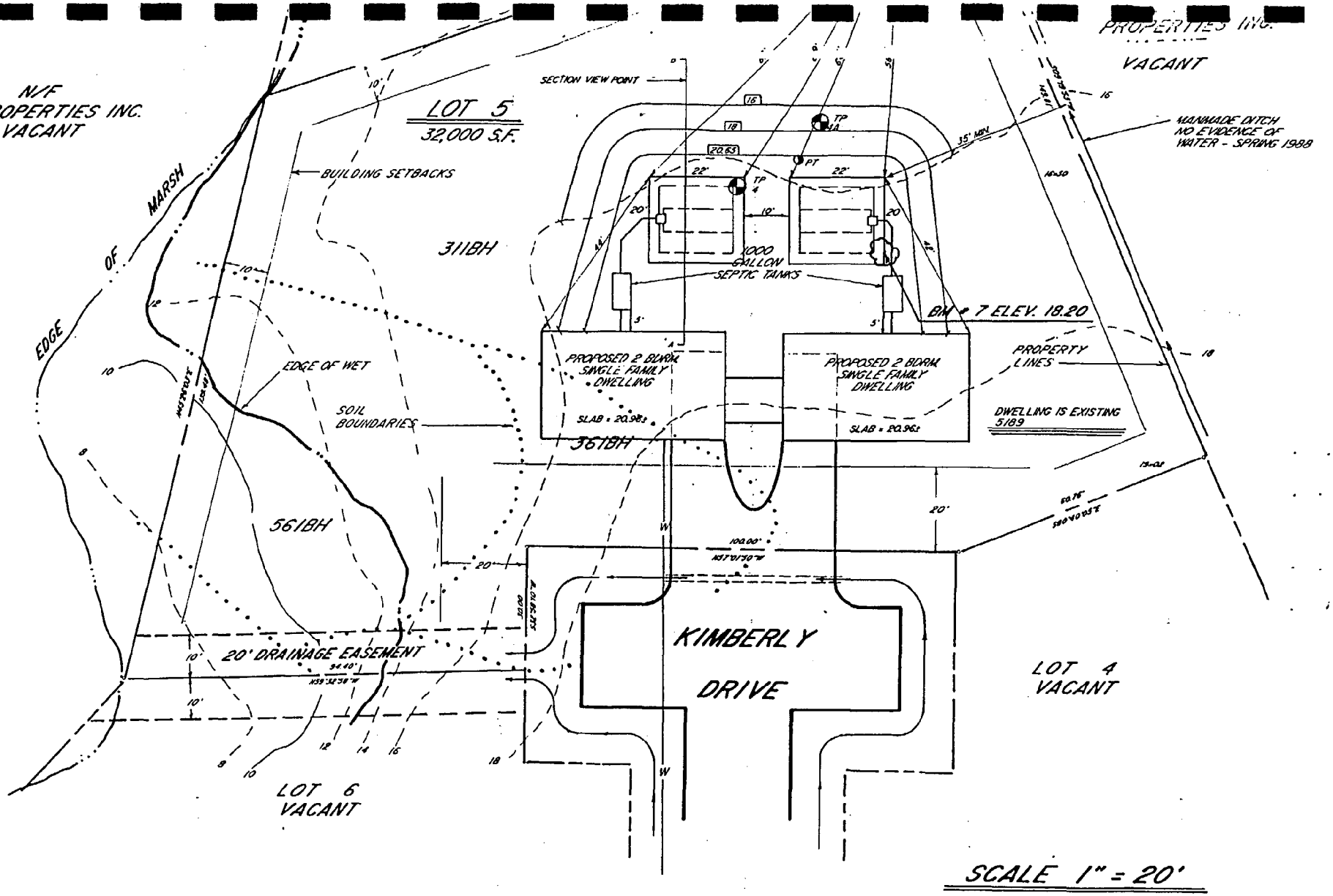
NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

SCALE 1" = 50'

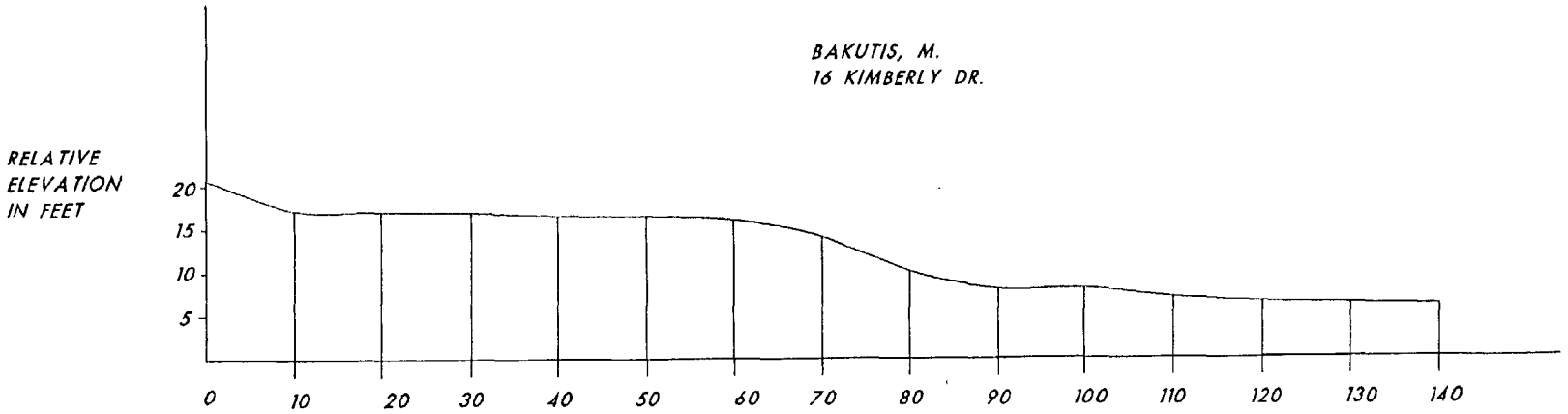
OWNER: CHASE, F. & M.
MAP# 12 LOT# 29-5
ADDRESS: 16 KIMBERLY DR.

OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING


N/F
PROPERTIES INC.
VACANT
LOT 5
32,000 S.F.
BUILDING SETBACKS
EDGE OF MARSH
EDGE OF WET
SOIL BOUNDARIES
311BH
361BH
561BH
SECTION VIEW POINT
1000 GALLON SEPTIC TANKS
PROPOSED 2 BDRM SINGLE FAMILY DWELLING
SLAB = 20.98±
PROPOSED 2 BDRM SINGLE FAMILY DWELLING
SLAB = 20.96±
BM # 7 ELEV. 18.20
PROPERTY LINES
DWELLING IS EXISTING
5189
20' DRAINAGE EASEMENT
KIMBERLY
DRIVE
LOT 6
VACANT
LOT 4
VACANT
PROPERTIES INC.
VACANT
MANMADE DITCH
NO EVIDENCE OF
WATER - SPRING 1988
SCALE 1" = 20'

BAKUTIS, M.
16 KIMBERLY DR.



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 20 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Cronin, P.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 141 Tax Map# 9
   Street: 6 Forest Dr. Subdivision Name:

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family ____ # of bedrooms 4+
   Seasonal Use ____ Year-round Use X)
   Commercial: ____ (if yes, Seasonal Use ____ Year-round Use ____)

   Industrial: ____

   Brief Description of Property and
   Structures:

   4 Bedroom house was moved to current site about 15 years ago. An area has been converted to temporary living space for a handicapped resident. Toilet wastes go to field in front of home. Graywater goes to drywell in rear. There is an abandoned drywell.

4. Is the structure Occupied? Yes X No ____
   If yes, how long? Years: 15 Months ____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No ____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes ____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes____ No_?__

7. What is the age of the system? Years_10-15 yrs.____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/24/94____

2. Lot size:___13,900 Sq. Ft.__ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):___371_____

5. Water Supply:
   Well on Lot? Yes____ No__X_
   Water supply off lot? Yes__X_ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _75'(drywell), 120+ft. (EDA) to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _____in ground_____

8. Does surface runoff affect the effluent disposal area?
   Yes_X___ No____

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-12" 7.5YR 3/2 sandy loam; granular; friable; cfr
   12-18" 7.5YR 3/4 Sandy loam; granular; friable
   18-30" 10YR 5/6 loamy sand; granular; friable
   30-40" 10YR 6/4 sands; loose; single grained; distinct mottling
   Unnamed Aquic Udipsamments

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-7" 7.5YR 3/2 sandy loam; granular, friable, cfr
   7-22" 7.5YR 3/4 sandy loam; granular; friable
   22-36" 7.5 YR 3/4 loamy sand; granular; friable
   36-40"+ 10YR 5/4 sand, friable; loose; single grained w/ 10YR 3/6 and 4/2 mottles
   Deerfield

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   Distinct mottling (non-cemented redox concentrations and redox iron depletions).

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X___

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X__

13 How often is the septic tank pumped? yearly

14. Does residence have any of the following:
Dishwasher: Yes_X__ No____
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes_X__ No____
Garbage Disposal: Yes__X_ No____
Separate plumbing system for grey water: Yes_X__ No____
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X__(Property has foundation drains)

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site has acceptable soils for treating wastes. However; the site, at 4+ bedrooms, is over capacity.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

No apparant indicators of failure were noted. The site is not currently being used at full 4 bedroom capacity. Wastes appear to be adequately handled.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

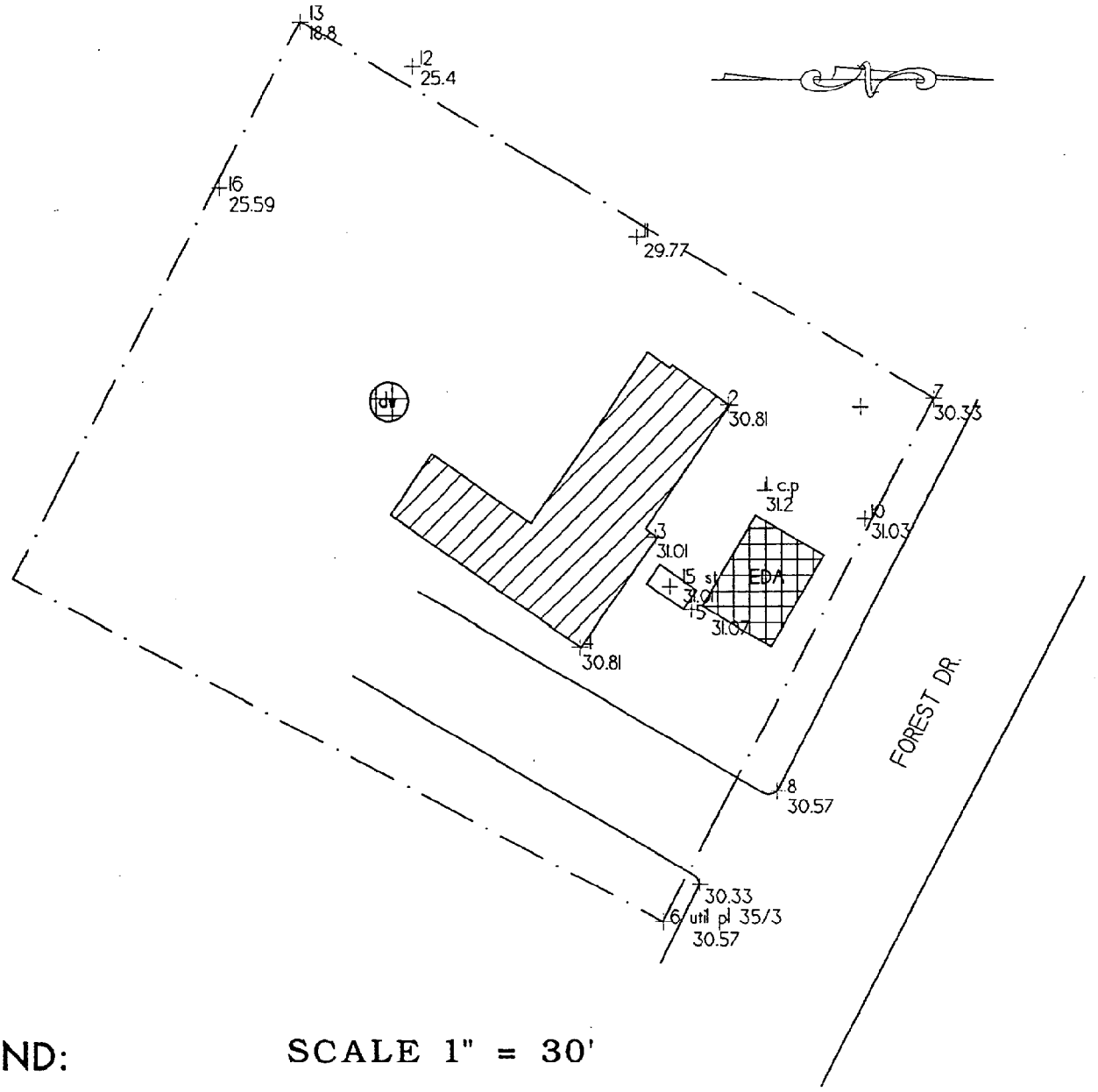
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 13,900 SQ. FT. +/-



SCALE 1" = 30'

LEGEND:

PROPERTY BOUNDARY (APPROX.) — · —

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE — · · —

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

OWNER: CRONIN, P.
MAP# 9 LOT# 141
ADDRESS: 6 FOREST DR.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.

EEA

6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357

ENGINEERING PERMITTING CONSULTING

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Bobola, F.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 003 Tax Map# 25
   Street: 8 Cross Beach Rd. Subdivision Name:

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family # of bedrooms
   Seasonal Use Year-round Use)
   Commercial: (if yes, Seasonal Use Year-round Use)

   Industrial:

   Brief Description of Property and
   Structures:

   Converted camp on 5,000 Sq.Ft. lot; 50% wet

4. Is the structure Occupied? Yes X No
   If yes, how long? Years: 20+ Months

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes No: X

3. Does system have a septic tank? Yes__X_ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes____ No__X_

7. What is the age of the system? Years_20+ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/21/94____

2. Lot size:_____7500 sq. ft.__ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____0_____

5. Water Supply:
   Well on Lot? Yes____ No__X_
   Water supply off lot? Yes__X_ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   ___30_ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __in-ground

8. Does surface runoff affect the effluent disposal area?
   Yes_X__ No____

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-5" 10YR 3/1 Root matter
   5-18" 10YR 4/1 Sand; loose grain; ox. rhizospheres; saturated
   18"+ 2.5Y 5/2 sand; loose; single
   Matunuck

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-16" 10YR 4/4 sandy loam (compacted fill)
   16-36" 10YR 3/1 sand; loose; single grain
   36-40" 5Y 4/1 sand; loose; single grain
   Udorthents, wet substratum

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.): ____

    See 9b; Ox. Rhizospheres @ 5"- System appears to be in saturated soil
    Chroma 1 matrix below fill and below organic root matter.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X_

13 How often is the septic tank pumped? __3 yrs._

14. Does residence have any of the following:
Dishwasher: Yes____ No__X_
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes_X__ No____
Garbage Disposal: Yes____ No_X__
Separate plumbing system for grey water: Yes____ No__X_
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is not an adequate site for subsurface sewage disposal

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

There is no outward signs of failure. The system leaches but treatment quality is questionable.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

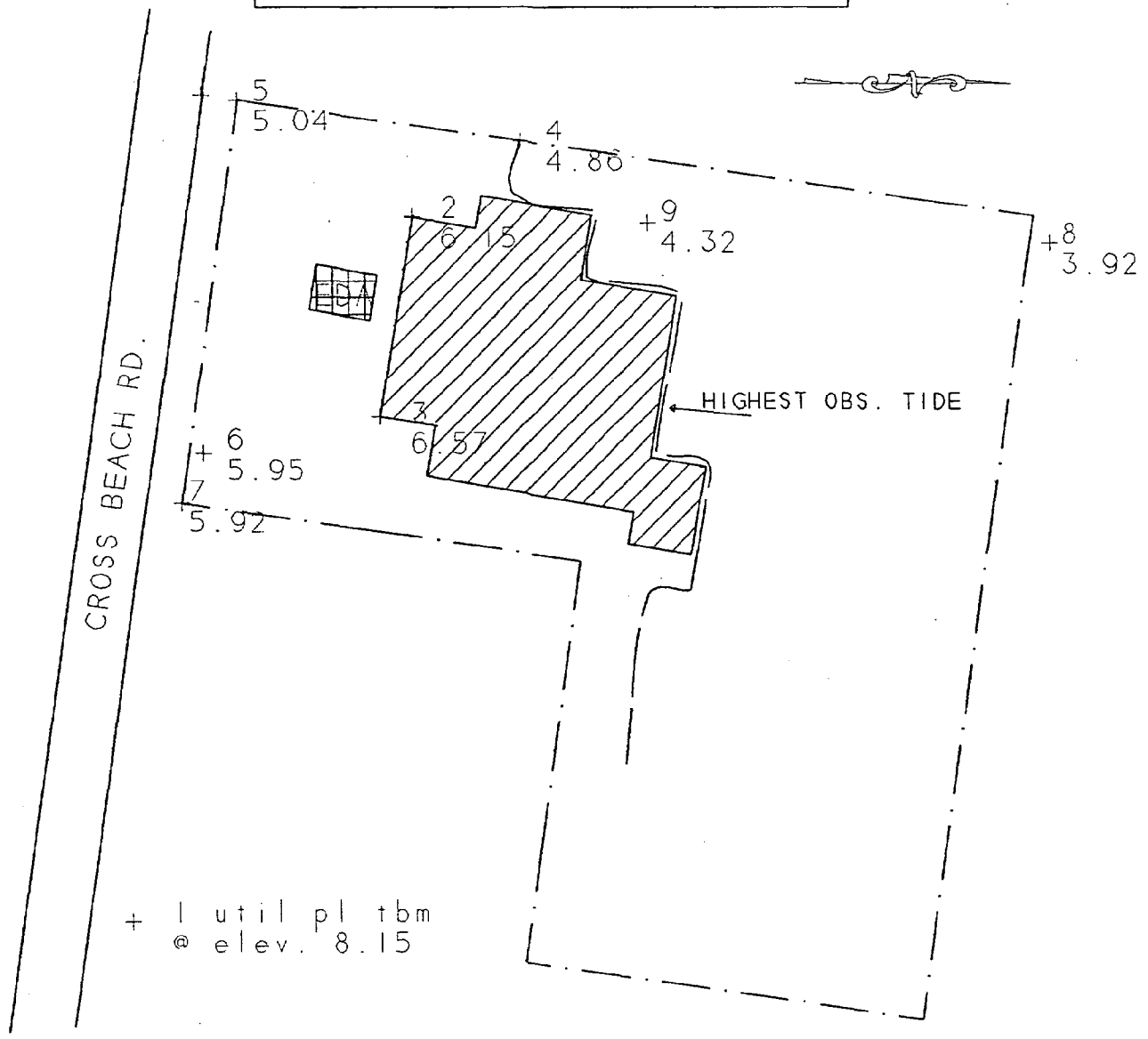
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 7500 SQ. FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) ——— · ———

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE ——— · ———

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

SCALE 1" = 20'

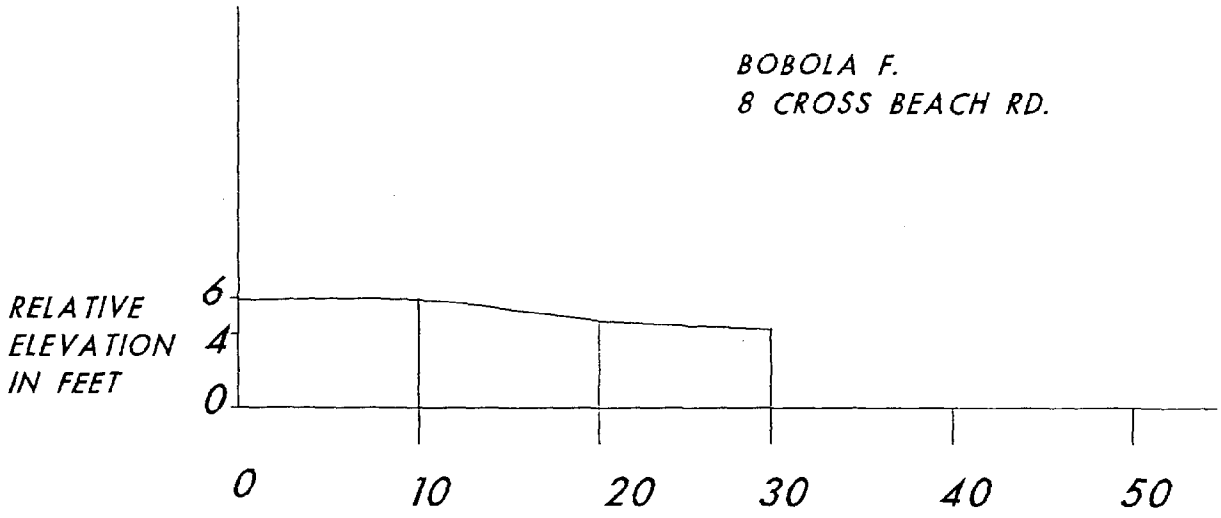
OWNER: BOBOLA, F
MAP# 25 LOT# 3
ADDRESS: 8 CROSS BEACH RD.

ELKIND ENVIRONMENTAL ASSOCIATES, INC.

EEA

6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357

ENGINEERING PERMITTING CONSULTING



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 10 FT.
1" VERTICAL = 10 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Hopkinson, V.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 14 Tax Map# 23
   Street: 14 River St. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 3
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use___)

   Industrial:____

   Brief Description of Property and
   Structures:

   Well maintained 2 story 3 bedroom home built in 1987. Lot is small with abutter's leaching area on this lot.

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 5 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes__X_ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? __1000?_____(gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes____ No__?_

7. What is the age of the system? Years_5__ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:_____10/27/94__

2. Lot size:_____6,000 Sq.Ft.__ (in acres or square feet) based on deed___, tax map___, survey___, or other_X-Estimate)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day): __275 gallons per day

5. Water Supply:
   Well on Lot? Yes___ No_X__
   Water supply off lot? Yes__X_ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   ___85_ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _____in-ground__

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   Same as upgradient - Udipsamments

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-10" 10YR 5/3 sands; single grained; loose
   10-24" 10YR 3/4 loamy sands to fine sands; granular; friable
   24-40+" 10YR 6/2 sands; loose; single grained;

   Udipsammnets

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   No evidence on site. Aquic udorthents on #33 River St., downgradient were non-cemented redox concentrations noted below 17" in fill.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X_

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___Not___

14. Does residence have any of the following:
Dishwasher: Yes__X_ No____
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes__X_ No____
Garbage Disposal: Yes____ No__X_
Separate plumbing system for grey water: Yes____ No__X_
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No_X__

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

Site is not adequate for existing loading due to limited lot size.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The current system appears to be properly functioning. However, the lot is suited for only 1 to 2 bedrooms.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

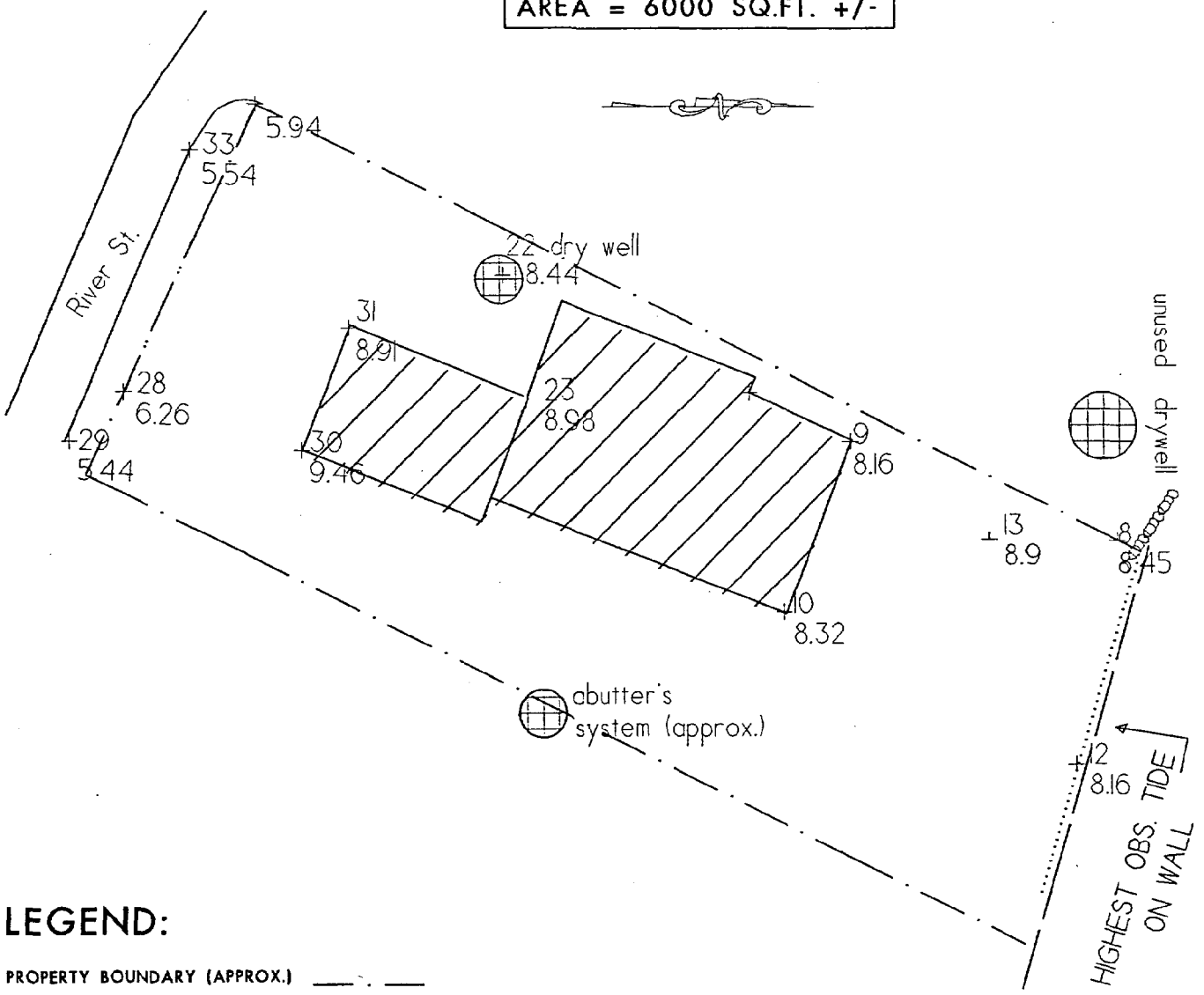
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 6000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.)

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE

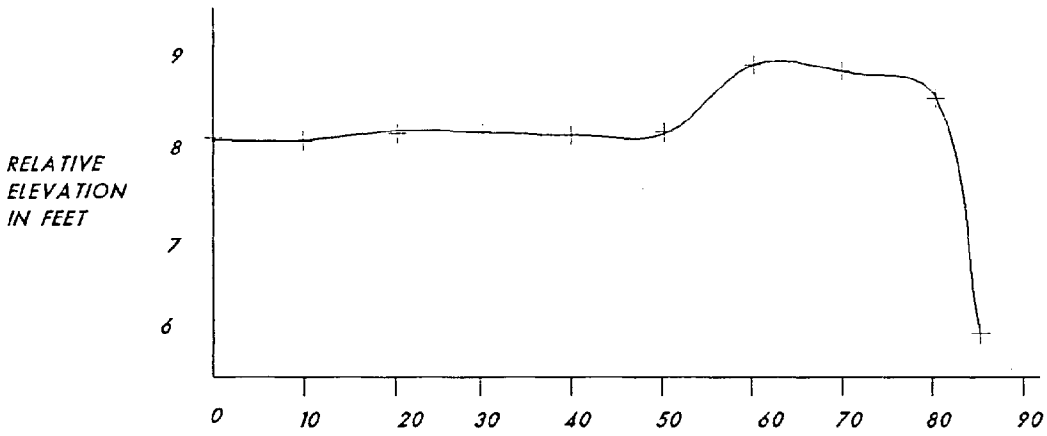
SCALE 1" = 20'

OWNER: HOPKINSON, C. & V.
MAP# 23 LOT# 14
ADDRESS: 14 RIVER ST.
OCTOBER, 1994

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING

HOPKINSON
14 RIVER ST.



SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Pike, Robert

A. Property

1. Designer's Name:__Elkind Environmental Assoc., Inc. Designer's Permit #_864_____

   Designer's Business
   Address:_6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 15 Tax Map# 23
   Street: 15 River St. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential:_X___ (if yes, Single_X___ Multi-family____ # of bedrooms 2
   Seasonal Use X (in Florida 2-3 mos.) Year-round Use____)

   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures:
   Well maintained year-round structure on large lot for area

4. Is the structure Occupied? Yes__X__ No_____
   If yes, how long? Years:_45_ Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes__X__ No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No:_X___

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? ____500 (gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes____ No_X__

7. What is the age of the system? Years_40+ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/27/94____

2. Lot size:___12,000 Sq.Ft.___ (in acres or square feet) based on deed___, tax map_X_, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):_____550 gallons per day

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   __90__ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _____in-ground_

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   Same as Upgradient - Udipsamments

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-10" 10YR 5/3 sands; single grain; loose
   10-24" 10YR 3/4 loamy sands to fine sands; granular, friable
   24-40"+ 10YR 6/2 sands; loose; single grained;

   Typic Udipsamments

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   No evidence on site. Aquic udorthents on #33 River St. down gradient where non-cemented redox concentrations were noted below 17" in fill.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___3+____

14. Does residence have any of the following:
Dishwasher: Yes_X__ No____
On-site laundry/washing machine: Yes__X_ No____
Low flow plumbing fixtures: Yes____ No__X_
Garbage Disposal: Yes__ _ No__X_
Separate plumbing system for grey water: Yes_?__ No____
Water Treatment System: Yes____ No__X_
Sump Pump: Yes__X_ No____ but not used!

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site appears to be well drained and sufficiently above SHWT to allow adequate treatment.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The site is of sufficient size and soil types to support the existing use. No problems were noted.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

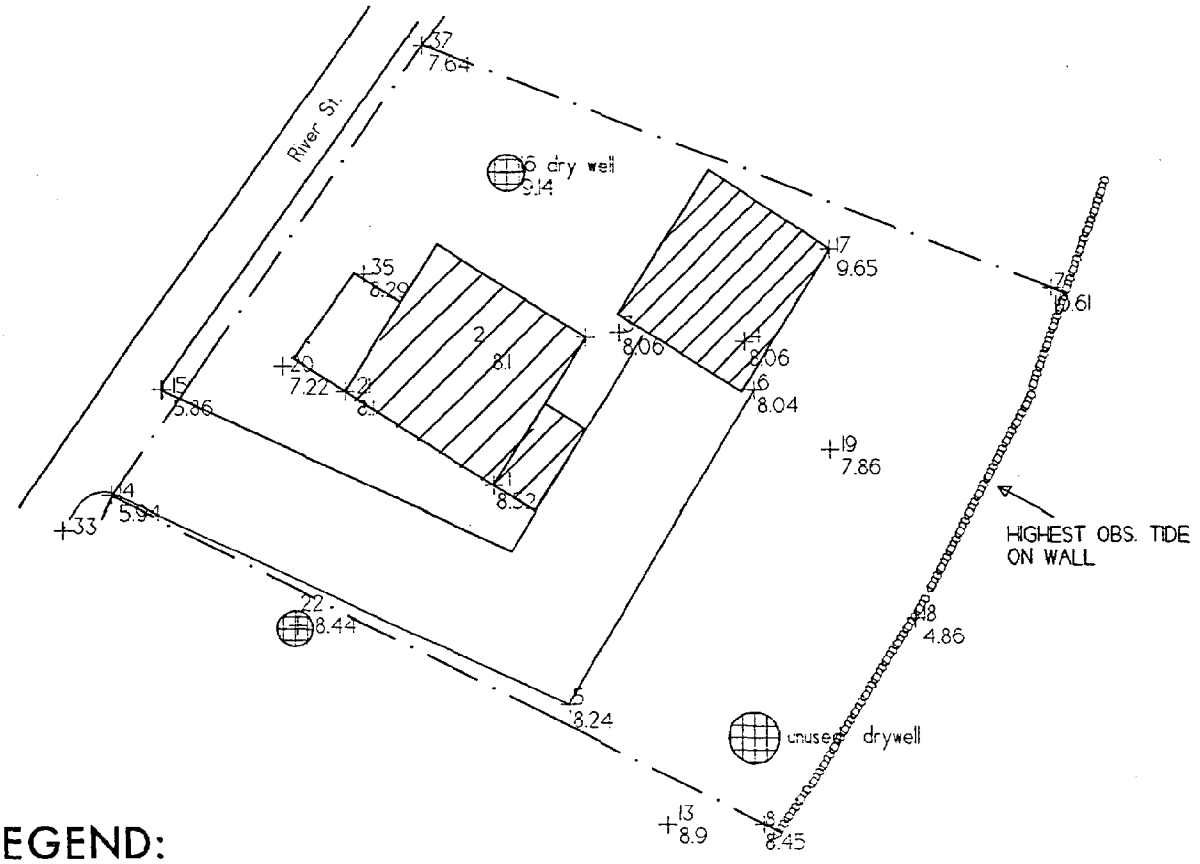
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 12,000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) ___ . ___

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE ___ .. ___

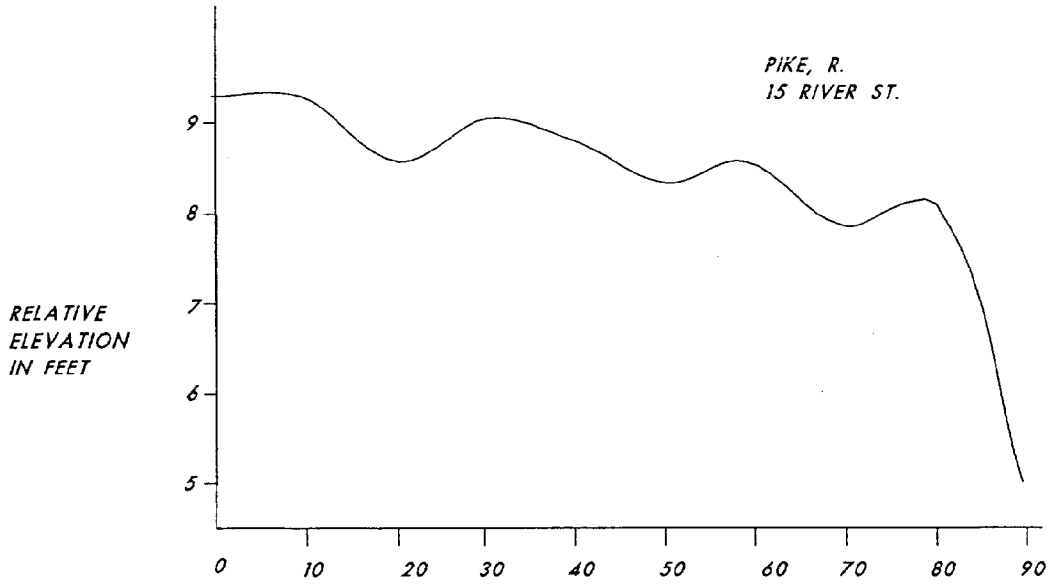
SCALE 1" = 30'

OWNER: PIKE, R. & V. RAWNSLEY
MAP# 23 LOT# 15
ADDRESS: 15 RIVER ST.

OTOBER 1994

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING



SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Camacho, H

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 15-1 Tax Map# 25
   Street: 15 A River St. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 4
   Seasonal Use____ Year-round Use X)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures:

   Well maintained 4 BR -3 story home constructed in 1986, on small lot.

4. Is the structure Occupied? Yes X No_____
   If yes, how long? Years: 8 Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes_X__ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? ___1000_____(gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes__X_ No____

7. What is the age of the system? Years_8+_ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:____10/27/94___

2. Lot size:____5,000 Sq. Ft.+/- _ (in acres or square feet) based on deed___, tax map_X__, survey___, or other_____)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day): ____190 gallons per day

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes__X_ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   __70+/- ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _____raised_____

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   Same as upgradient - typic Udipsamments

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-10" 10YR 5/3 sands; single grained; loose
   10-24" 10YR 3/4 loamy sands to fine sand; granular; friable
   24-40'+ 10YR 6/2 sands, loose; single grained,
   Typic Udipsamments

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   No evidence on site. Aquic Udorthents on # 33 River St.. Down gradient 50+ ft. where non-cemented redox concentrations were noted below 17" in fill.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X__

13 How often is the septic tank pumped? ___3+____

14. Does residence have any of the following:
Dishwasher: Yes_X__ No____
On-site laundry/washing machine: Yes__X_ No____
Low flow plumbing fixtures: Yes____ No__X_
Garbage Disposal: Yes__ _ No__X_
Separate plumbing system for grey water: Yes_?__ No____
Water Treatment System: Yes____ No__X_
Sump Pump: Yes__X_ No____ but not used!

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

Site is not sufficient for 4 bedroom loading. Soils are generally OK for 1 - 2 bedrooms.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

System appears to be working adequately. It is designed for 3 bedrooms and, apparently, 4 are present.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

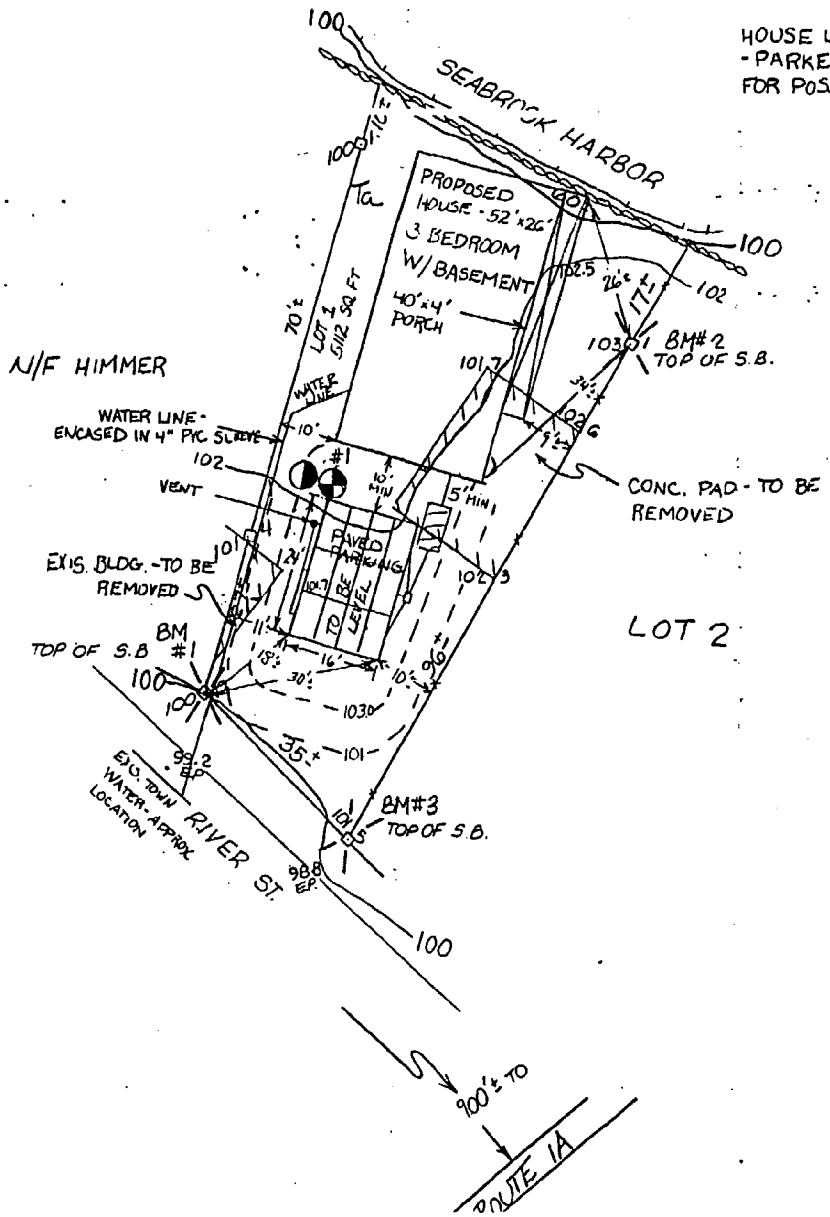
Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

DATE: 5-7-84

RESULTS: 1 MIN / INCH

DEPTH OF HOLE: 30"



HOUSE LOCATION PROPOSED BY CLIENT - PARKER SURVEY NOT RESPONSIBLE FOR POSSIBLE SETBACK VIOLATIONS

65'± FROM SEABROOK HARBOR TO LEACHING FIELD

LEACH BED REQUIR

NUMBER OF BEDROOMS:

AREA REQUIRED: 560

560 x 0.6 = 336 SQ

(RESIC

12 4'x 8' CHAMBERS (OI

FOR 16' x 24' = 384 SQ. F

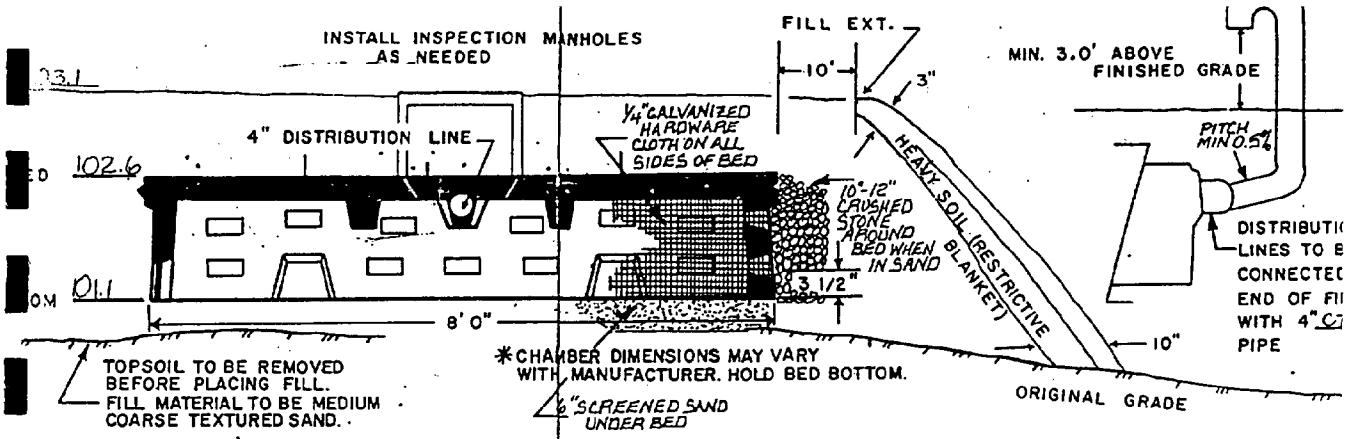
DESIGN INTEN

BOTTOM OF BED TO THAN 5' ABOVE THE E BASED ON HIGH TIDE

SUITABLE REPLACEM

IN PLACE OR REDESIGN

KEY:

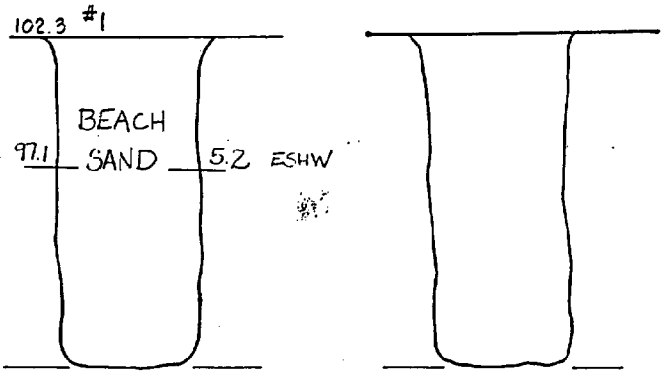


TEST PIT DATA

DATE: 5-7-84

TOWN INSPECTOR

SOIL TYPE: TA, AS PER USDA SOILMAP



PERCOLATION TEST DATA

DATE: 5-7-84

RESULTS: 1 MIN / INCH USE: 2 MIN/IN

DEPTH OF HOLE: 30"

LEACH BED REQUIREMENTS

NUMBER OF BEDROOMS: 3

AREA REQUIRED: 560

560 X 0.6 = 336 SQ. FT. REQUIRED (RESIDENTIAL USE).

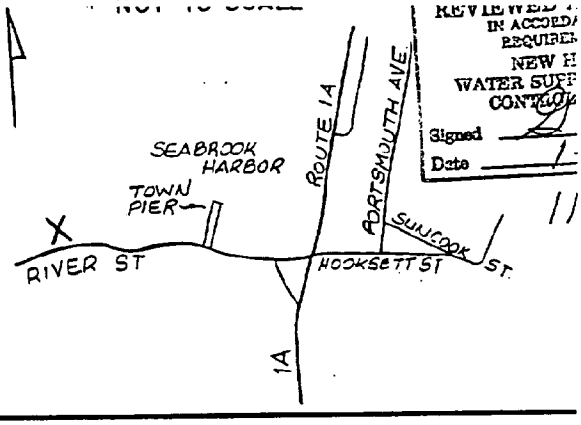
12 4'x 8' CHAMBERS (OR EQUIVALENT) FOR 16' x 24' = 384 SQ. FT. PROVIDED

B.M.#1: TOP OF STONE BOUND EL 100.0 ASSUMED

B.M.#2: TOP OF STONE BOUND EL 102.1 ASSUMED

LOCUS MAP

NOT TO SCALE



REVIEWED IN ACCORD REQUIRE NEW H WATER SUPP CONTROL
Signed
Date

DESIGN INTENT.

BOTTOM OF BED TO BE NO LOWER THAN 5' ABOVE THE ESHW (ELEV 97.1) BASED ON HIGH TIDE

CHAMBER SYSTEM PLAN

LOT #1 RIVER ST.

SEABROOK, N.H.

SUBDIVISION APPROVAL

N/A EXIS LOT

SCALE: 1" = 20'

HENRY CAMACHO

CA GUARANTEE BUILDERS

SUITABLE REPLACEMENT AREA:

IN PLACE OR REDESIGN

NEW HAMPS
Designer of Subsurface Disp Systems
Richard K. Parker, No. 92
Water St.

P.O. BOX 95 HAZEN DRIVE CONCORD, NH 03301

Amended

APPROVAL FOR OPERATION

Map 23 Lot

THE INDIVIDUAL SEWAGE OR WASTE DISPOSAL SYSTEM CONSTRUCTED FOR:

APPROVAL # 118080 - A
118080 - A

Owner:

Henry Camacho
c/o Guarantee Builders
311 N. West Street
East Douglas, MA 01516

LOT NUMBERS: 23-32-0
SUBD. APPVL.#:
SUBD. NAME:

TYPE OF SYSTEM: Three bedrooms

Copy sent to:

Board of Selectmen
Town Office
Seabrook, NH 03874

TOWN/CITY LOCATION: Seabrook, NH
STREET LOCATION: River Street

INSTALLER Smith
PERMIT # 92
□ OWNER INSTALLED FOR HIS DOMICILE

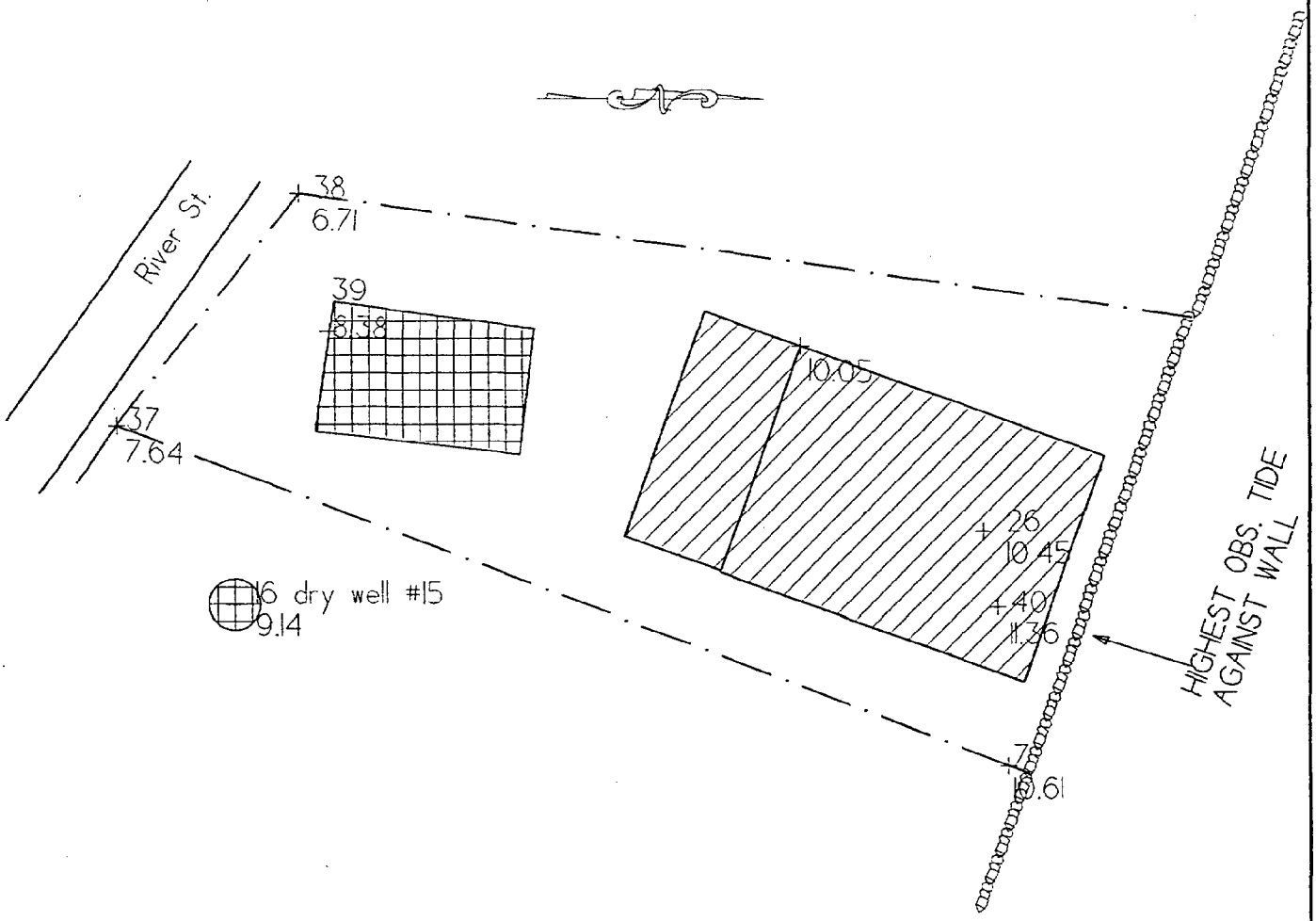
was inspected on (Date) 12/30/85
before covering and is hereby approved for use.
Date Approved: 1/3/86
By: Steven K. [illegible]
(Authorized Agent of N.H. Water Supply and Pollution Control Commission)

THIS APPROVAL DOES NOT SUPERCEDE ANY EQUIVALENT OR MORE STRINGENT LOCAL ORDINANCES OR REGULATIONS. STATE STANDARDS ARE MINIMAL AND MUST BE MET STATEWIDE.

(OVER)

Revised 10/1/80

AREA = 5,000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) ——— . ———

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

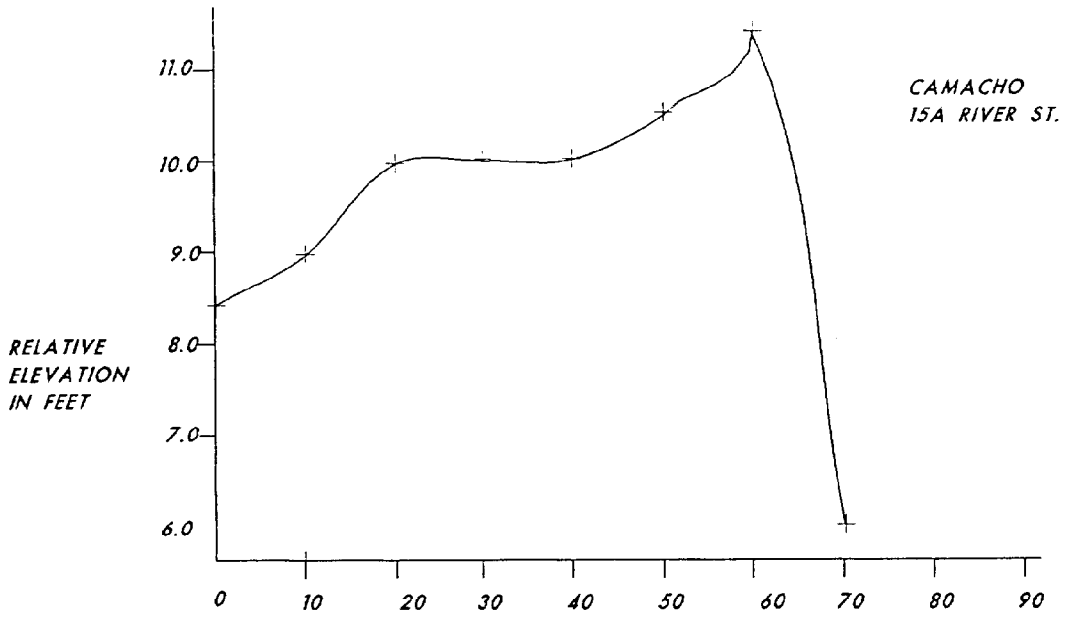
WETLAND EDGE ——— · · ———

SCALE 1" = 20'

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

OWNER: CAMACHO, H. & A.
MAP# 23 LOT# 15-1
ADDRESS: 15A RIVER ST.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING



CROSS SECTION - EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 20 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Beckman, N.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr., Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 33 Tax Map# 23
   Street: 33 River St. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family____ # of bedrooms 2
   Seasonal Use____ Year-round Use____)
   Commercial:____ (if yes, Seasonal Use____ Year-round Use____)

   Industrial:____

   Brief Description of Property and
   Structures:

   4 room single story building on piers built prior to 1970. Not occupied for 4 years.

4. Is the structure Occupied? Yes_____ No X
   If yes, how long? Years:____ Months_____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X

3. Does system have a septic tank? Yes____ No X__
If yes, is it: Concrete_____ or Steel_____

4. What is the capacity of the septic tank? _____(gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes____ No__X_

7. What is the age of the system? Years_30_ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:___10/27/94____

2. Lot size:__5,000 Sq.Ft._____ (in acres or square feet) based on deed___, tax map___, survey___, or other__X estimate)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):___129 gallons / day

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   ___30_ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? __in-ground

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X___

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   Same as upgradient to tidal marsh. Udorthents, wet substratum.

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-17" Sandy loam fill
   17-28" Sandy fill; loose with 2.5Y 3/6 mottling
   28-32" Clam Shell Debris
   32"+ 10YR 4/1 sands; loose; single grained; with 10YR 2/1 and 10YR 4/6 mottles

   Udorthents, wet substratum

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   Estimated seasonal high water table @ 17" evidenced by non-cemented redox concentrations at 17" and below.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No__X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X__

13 How often is the septic tank pumped? ___N/A_____

14. Does residence have any of the following:
Dishwasher: Yes____ No_?___
On-site laundry/washing machine: Yes__?__ No____
Low flow plumbing fixtures: Yes____ No_?___
Garbage Disposal: Yes____ No__?__
Separate plumbing system for grey water: Yes____ No_?___
Water Treatment System: Yes____ No_X___
Sump Pump: Yes____ No__?__

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is very limited in its ability to handle wastewater due to flooding, high water table, and small lot size.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system is apparently an old steel cesspool which appears to be in the water table. As such, its treatment capability is very poor.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

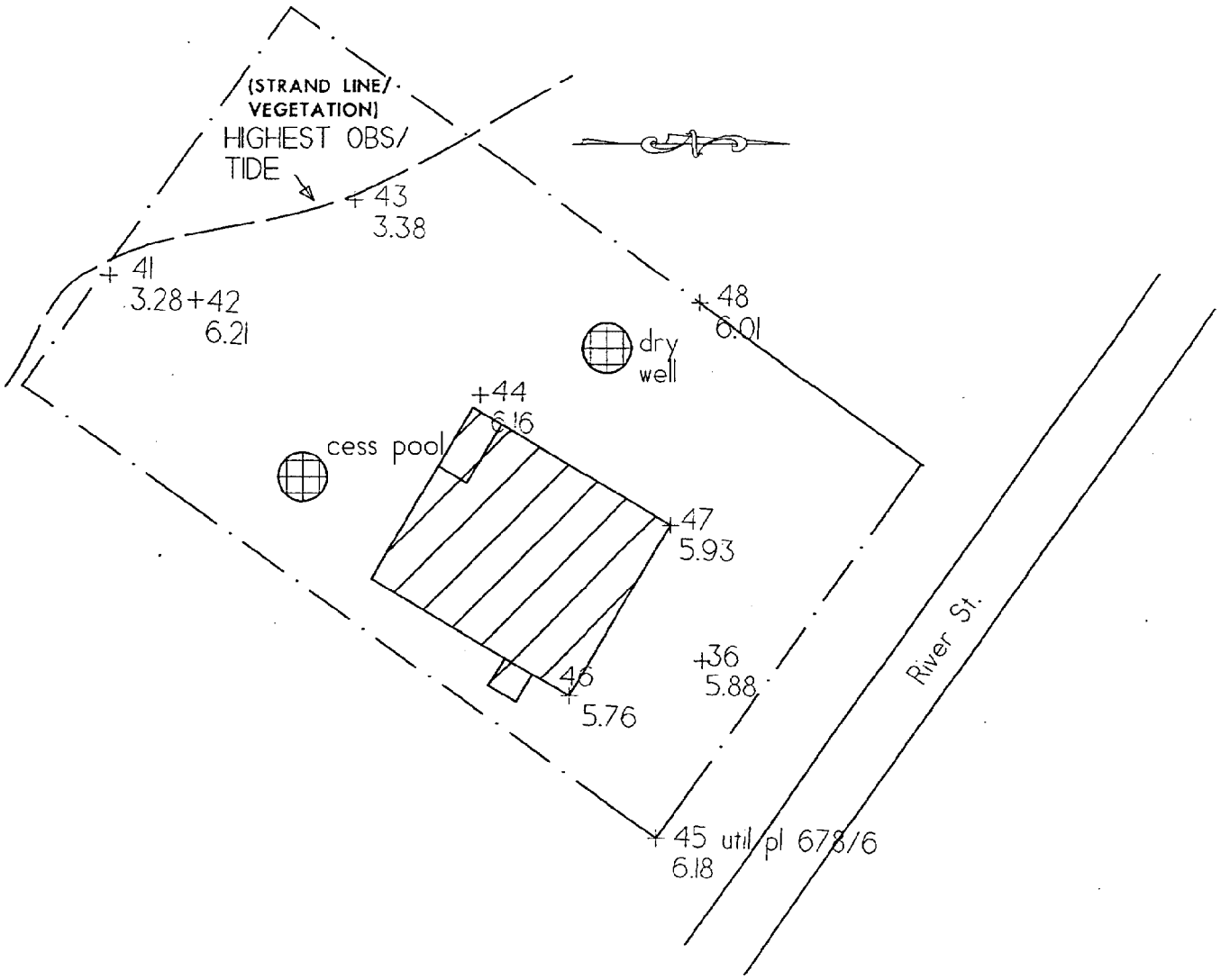
Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD

AREA = 5.000 SQ.FT. +/-



LEGEND:

PROPERTY BOUNDARY (APPROX.) — . —

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

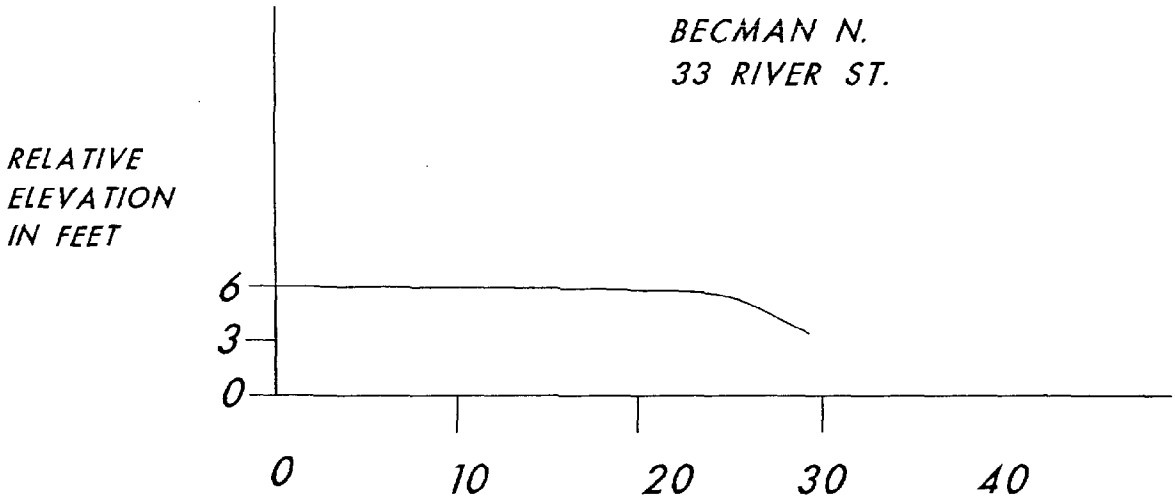
WETLAND EDGE — · · —

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

SCALE 1" = 20'

OWNER: BECMAN, N.
MAP# 23 LOT# 33
ADDRESS: 33 RIVER ST.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 10 FT.
1" VERTICAL = 10 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Eastman, C.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

Designer's Business
Address: 6 Baymeadow Dr. Nashua, NH 03063

Designer's Phone Number: 889-4357

2. Lot Location:
City/Town: Seabrook Lot# 48-1 Tax Map# 23
Street: 48 River Rd. Subdivision Name:

3. Type of Use (check all that apply):
Residential: X (if yes, Single X Multi-family ___ # of bedrooms 2
Seasonal Use ___ Year-round Use X)
Commercial: ___ (if yes, Seasonal Use ___ Year-round Use ___)

Industrial: ___

Brief Description of Property and
Structures:

This lot contains 2 improved mobile home units. The land around this unit appears to be fill and does not clearly show on the tax map.

4. Is the structure Occupied? Yes X No
If yes, how long? Years: 10+ Months

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
Yes X No

2. Does the property use a Community Septic System (one that services 2 or more households)?
Yes ___ No: X

3. Does system have a septic tank? Yes__X_ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes____ No_X__

7. What is the age of the system? Years_2+ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:____10/24/94___

2. Lot size:_____50,000 Sq. Ft. (in acres or square feet) based on deed___, tax map___, survey___, or other <u>X-Guesstimate</u>

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):___1290_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   > 75 ft. to poorly drained soils
   _____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _in-fill__

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-30" 10YR 4/4 granular fill with mottling @ 20"
   30-40" 10YR 2/1 loamy sand; granular, friable, saturated

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-28" 10YR 5/4 granular fill
   28-39" 10YR 3/3 sandy loam fill with 2.5Y 5/4 and 10YR 5/1 mottles
   39"+ 10YR 2/1 loamy sand; granular, friable

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

    Mottling occurs from 28" upslope to 20" downslope in fill. Water table surfaces at tidal fringe.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X_

13 How often is the septic tank pumped? ___?_____

14. Does residence have any of the following:
Dishwasher: Yes____ No_?__
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes____ No__X_
Garbage Disposal: Yes____ No__?_
Separate plumbing system for grey water: Yes_?__ No____
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is sufficiently large for the overall 4 bedroom loading.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The system demonstrates no evidence of imsufficient treatment. However, the bed bottom is close to or within the fluctuating water table. Accordingly, it is likely that wastes are not being treated adequately.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

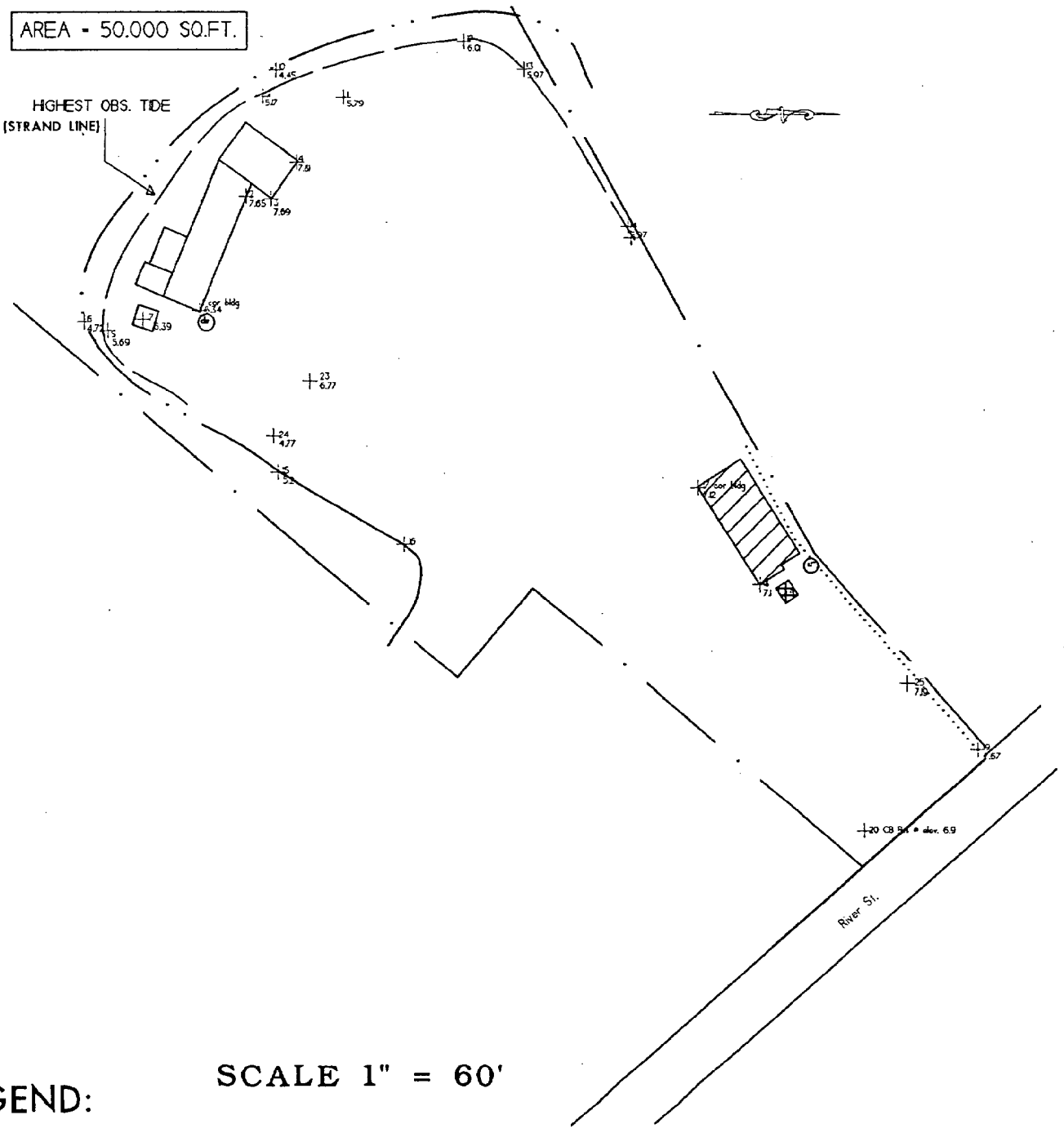
The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD



SCALE 1" = 60'

LEGEND:

PROPERTY BOUNDARY (APPROX.) ——— . ———

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE ——— · · ———

NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

OWNER: EASTMAN, C.
MAP# 23 LOT# 48-1
ADDRESS: 48A RIVER ST.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.

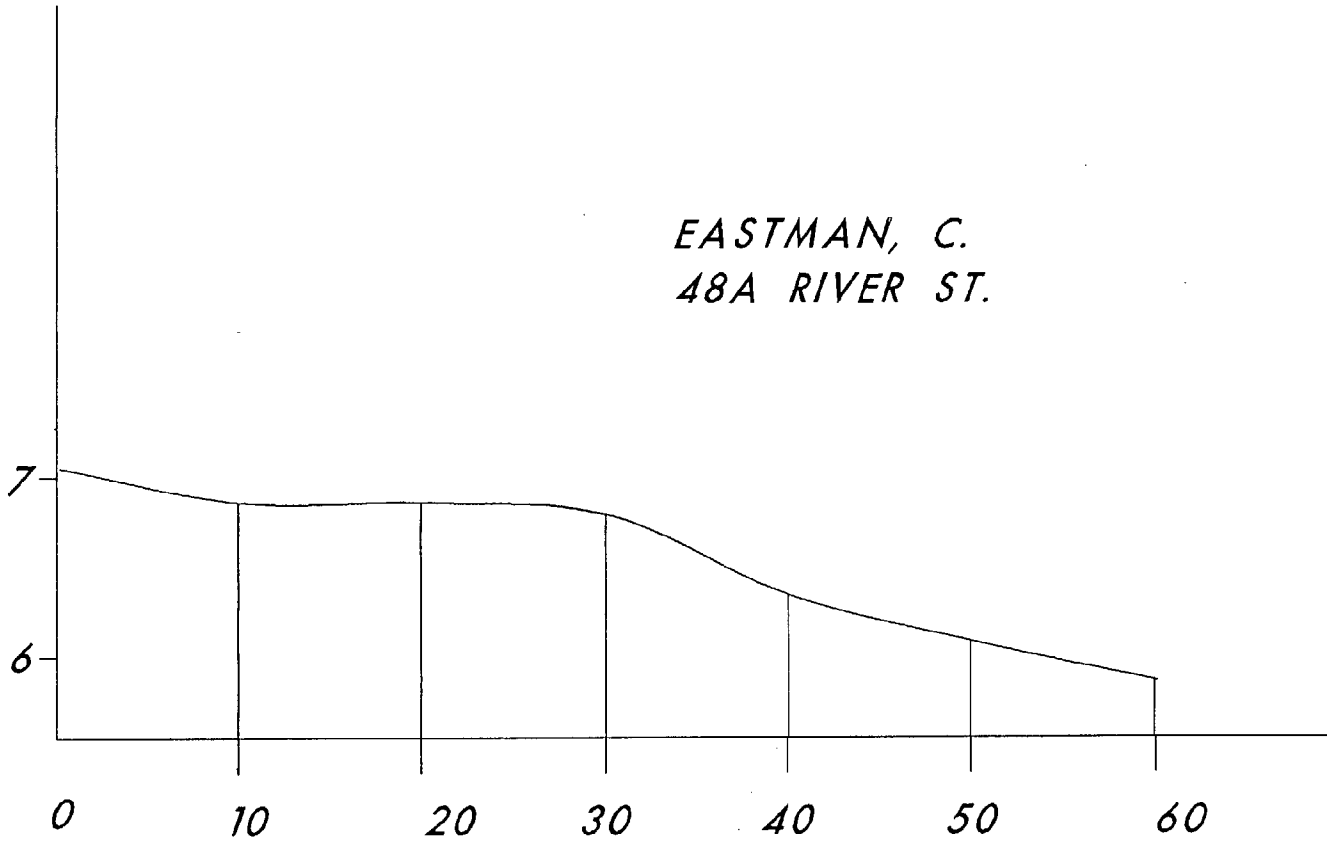
EEA

6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357

ENGINEERING PERMITTING CONSULTING

EASTMAN, C.
48A RIVER ST.

RELATIVE
ELEVATION
IN FEET



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 10
1" VERTICAL = 1

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Owner: Eastman, C.

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 48-3 Tax Map# 23
   Street: 48C River Rd. Subdivision Name:

3. Type of Use (check all that apply):
   Residential: X (if yes, Single X Multi-family ____ # of bedrooms 2
   Seasonal Use ____ Year-round Use X)
   Commercial: ____ (if yes, Seasonal Use ____ Year-round Use ____)

   Industrial: ____

   Brief Description of Property and
   Structures:

   This lot contains 2 improved mobil home units. The land around this unit appears to be fill and does not clearly show on the tax map.

4. Is the structure Occupied? Yes X No ____
   If yes, how long? Years: 10+ Months ____

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No ____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes ____ No: X

3. Does system have a septic tank? Yes__X_ No____
If yes, is it: Concrete__X__ or Steel_____

4. What is the capacity of the septic tank? 1000 (gallons)

5. Does your system have an effluent disposal area?
Yes__X_ No____

6. Is the sewage disposal system state approved? Yes____ No_X__

7. What is the age of the system? Years_10+ Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:____10/24/94___

2. Lot size:_____50,000 Sq. Ft. (in acres or square feet) based on deed___, tax map___, survey___, or other <u>X Guestimate</u>

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):___1290_____

5. Water Supply:
   Well on Lot? Yes____ No_X__
   Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

   _____ft. to poorly drained soils
   __10_ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _in-fill__

8. Does surface runoff affect the effluent disposal area?
   Yes____ No_X__

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

   0-6" Org.
   6-40" 10YR 4/1 loamy sand, roots to depth, saturated at 12"

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

   0-30" 10YR 4/4 granular fill, mottling @ 20"
   30-40" 10YR 2/1 loamy sand; granular; friable; saturated

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

   High chroma mottling @ 20"; saturated below 30" (directly adjacent to marsh)

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes____ No_X__

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No__X_

13 How often is the septic tank pumped? ___?_____

14. Does residence have any of the following:
Dishwasher: Yes____ No_?__
On-site laundry/washing machine: Yes_X__ No____
Low flow plumbing fixtures: Yes____ No__X_
Garbage Disposal: Yes____ No__?_
Separate plumbing system for grey water: Yes_?__ No____
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No__X_

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

The site is sufficiently large for the overall 4 bedroom loading.

b). Designer's Assessment of the current system's capability to treat wastewater under existing and proposed conditions:

The graywater and blackwater leaching areas show evidence of failure. Both are located within 20 feet of the marsh. Wastes are not being adeuately treated.

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE SELLER(S)

The undersigned certify that I/we am/are the present owner(s) of the property assessed and that I/we have reviewed the Site Assessment Form, and further certify that all information provided by me/us to the Designer is true and correct to the best of my/our knowledge and belief.

Seller: _____ Date: _____

Seller: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE DESIGNER

I, the undersigned, certify that I believe this assessment, as based on state laws and administrative rules, is accurate, complete and not misleading, and that information provided by me is true and correct to the best of my knowledge and belief, and that to the extent that the assessment is based on information provided to me by others, that I believe the information is true and correct.

Designer: _____ Date: _____

THE STATEMENT BELOW MUST BE SIGNED AND DATED BY THE BUYER(S)

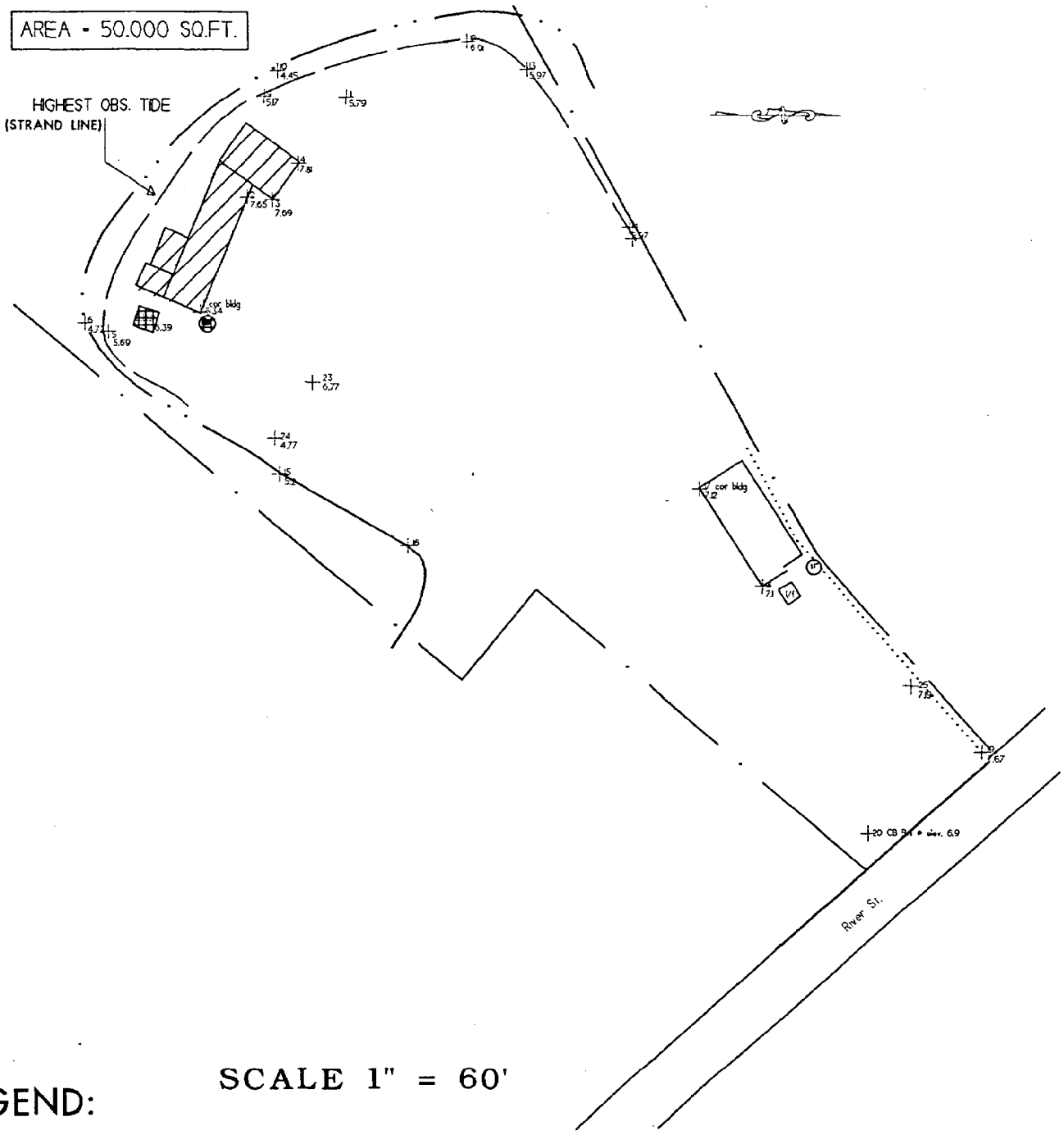
The undersigned certify that I/we have reviewed this Site Assessment Form and understand the information contained herein and that we have received a copy of this Site Assessment Form.

Buyer: _____ Date: _____

Buyer: _____ Date: _____

Completed assessment form distribution:

Original with listing, then to Buyer
One copy to Designer
One copy to WSPCD



SCALE 1" = 60'

LEGEND:

PROPERTY BOUNDARY (APPROX.) — . —

STRUCTURE

EFFLUENT DISPOSAL AREA (EDA)

WETLAND EDGE — · · —

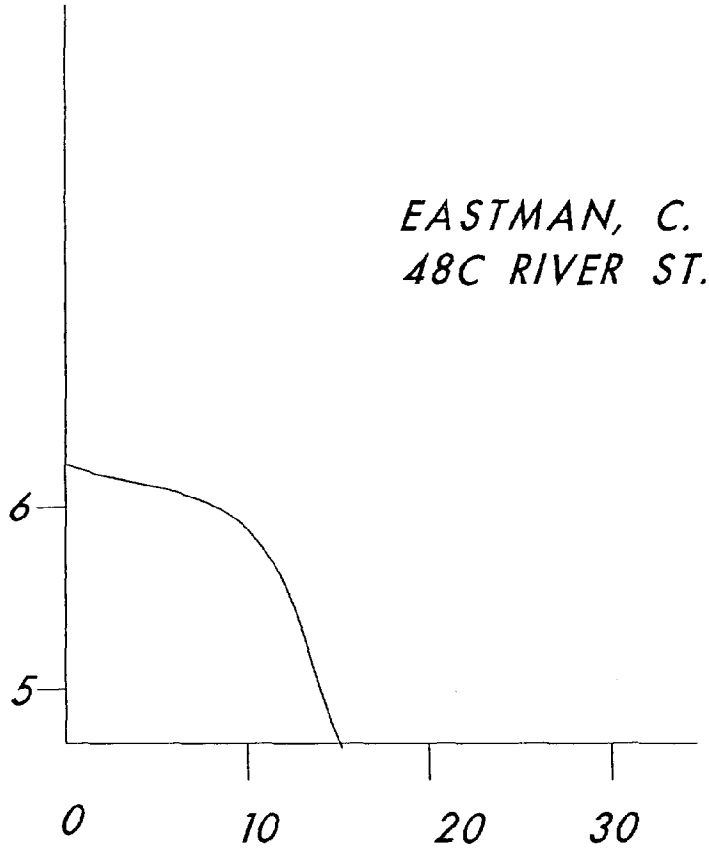
NOTE: BOUNDARIES AND OTHER DETAILS DEPICTED ON THE PLAN ARE ONLY APPROXIMATE AND CARE SHOULD BE EXERCIZED IN THEIR USE!

OWNER: EASTMAN, C.
MAP# 23 LOT# 48-3
ADDRESS: 48C RIVER ST.
OCTOBER, 1994

ELKIND ENVIRONMENTAL ASSOCIATES, INC.
EEA
6 BAYMEADOW DR.
NASHUA, NEW HAMPSHIRE 03063
(603) 889-4357
ENGINEERING PERMITTING CONSULTING

EASTMAN, C.
48C RIVER ST.

RELATIVE
ELEVATION
IN FEET



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 10 FT.
1" VERTICAL = 2 FT.

TIDAL WATERS SITE ASSESSMENT FORM
DRAFT - September 28, 1994

Seabrook Elementary School

A. Property

1. Designer's Name: Elkind Environmental Assoc., Inc. Designer's Permit # 864

   Designer's Business
   Address: 6 Baymeadow Dr. Nashua, NH 03063

   Designer's Phone Number: 889-4357

2. Lot Location:
   City/Town: Seabrook Lot# 40 Tax Map# 14
   Street: 256 Walton Rd. Subdivision Name:_____

3. Type of Use (check all that apply):
   Residential:_____ (if yes, Single____ Multi-family____ # of bedrooms____
   Seasonal Use____ Year-round Use____)
   Commercial: ?__ (if yes, Seasonal Use____ Year-round Use ?__)

   Industrial:____

   Brief Description of Property and
   Structures:
   Property consists of approximately 70 Acres with an elementary and junior high school; support buildings; athletic fields; and 3 separate septic systems.

4. Is the structure Occupied? Yes X____ No_____
   If yes, how long? Years:____ Months_____ (30 years in part)

B. Present Sewage Disposal System

1. Does the property currently have an on-site sewage disposal system?
   Yes X No____

2. Does the property use a Community Septic System (one that services 2 or more households)?
   Yes____ No: X___

3. Does system have a septic tank? Yes_X___ No____ (several)
If yes, is it: Concrete__X___ or Steel_____

4. What is the capacity of the septic tank? _____(gallons)
(12,000 gal.- system 3; Others unknown

5. Does your system have an effluent disposal area?
Yes_X__ No____

6. Is the sewage disposal system state approved? Yes_X (sytem 3)_ No____

7. What is the age of the system? Years 22-30 Months____

8. If a state copy of the septic design plan and construction and operational approval is available, please attach.

9. Supply an 8 1/2" X 11" sketch map drawn to scale or with dimensions showing:
(Note: larger plan included)

- lot with approximate location of property lines
- structures (in-ground pools, garages, sheds, buildings with foundations, etc.)
- location of highest observable tide (i.e. the furthest landward limit of tidal flow which can be recognized by indicators such as the presence of a strand line of flotsam and debris, the landward margin of salt tolerant vegetation, or a physical barrier that blocks further flow of the tide.)
- location of septic tank and effluent disposal area
- approximate locations of abutters' septic systems and wells within 75' well radius

Also include:

- type of system
- age of system

C. <u>Lot Characteristics</u> **(determined through field evaluation):**

1. Date of Field Evaluation:_____10/27/94_____

2. Lot size: 45 Acres +/- (in acres or square feet) based on deed___, tax map_X_, survey___, or other_(_____) (Principal States 70 acres approx.)

3. Provide a cross-sectional sketch of elevations from the effluent disposal area to the highest observable tide. Provide elevations at 10 foot horizontal intervals.

4. Site Loading Capacity (calculated in gallons/day):___35,000 +/-___
Note: All Acreage Not Soil Mapped

5. Water Supply:
Well on Lot? Yes____ No__X_
Water supply off lot? Yes_X__ No____

6. What is the proximity (in feet) of the effluent disposal area to poorly drained or very poorly drained soils (Hydric B or Hydric A)?

_____ft. to poorly drained soils (System 1 - 400', System 2- 80', System 3 - 80')
_____ft. to very poorly drained soils

7. Is system raised by fill or in-ground in natural receiving soils? _____
Systems 1 & 3 appear to be in fill

8. Does surface runoff affect the effluent disposal area?
Yes____ No_X__

System 1

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

0-6" 7.5YR 3/2 sandy loam; granular; friable; cfr
6-22" 10YR 6/6 fine sand; loose; single grained
22-40"+ 10YR 6/4 fine sand; loose; single grained with 10YR 5/8 mottles noted
Deerfield

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

0-14" 7.5YR 3/2 sandy loam; granular; friable; ffr
14-24" 7.5YR 4/6 loamy fine sand; granular; very friable
24-40+" 10YR 5/6 fine sand; loose; single grained;
Typic Udipsamments

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

Mottles noted at 22" depth and below (non-cemented redox concentrations).

System 2

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

0-7" 10YR 3/1 sandy loam; granular; friable with oxidized rhizospheres
7-18" 7.5YR 3/2 sandy loam; granular; fiable
18-40"+ 10YR 4/3 loamy sand; granular; friable; with 10YR 4/2 and 10YR 3/6 mottles

Walpole

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

0-5" 10YR 3/3 sandy loam; friable
5-14" 10YR 4/3 loamy sand; granular; friable
14-32" 10YR 6/6 fine sand; loose; single grained
32-40"+ 10YR 6/4 fine sand; loose; single grained

Udipsamments

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

Seasonal high water table at or very near the surface. Chroma 1 matrix with oxidized rhizospheres above a chroma 2 matrix with both redox iron depletions and redox concentrations.

System 3

9a. Provide a representative profile description and the soil series name (if known) of the soils in the area of and down gradient of the system.

0-7" 10YR 3/1 sandy loam; granular; friable with oxidized rhizospheres
7-18" 7.5YR 3/2 sandy loam; granular; fiable with 7.5YR 5/0 mottles
18-40"+ 10YR 4/3 loamy sand; granular; friable; with 10YR 4/2 and 10YR 3/6 mottles

Walpole

9b. Provide a representative profile description and the soil series name (if known) of the soils immediately up gradient of the system.

0-5" 10YR 3/3 sandy loam; friable
5-14" 10YR 4/3 loamy sand; granular; friable
14-32" 10YR 6/6 fine sand; loose; single grained
32-40"+ 10YR 6/4 fine sand; loose; single grained
Udipsamments

10. Indicate the depth and evidence in soil morphology used to determine the seasonal high water table between the septic system and surface waters (i.e. depth to restrictive layers, texture, structure, matrix colors using Munsell notations, redoximorphic features or evidence of wetness in the soil morphology.):

Seasonal high water table at or very near the surface. Chroma 1 matrix with oxidized rhizospheres above a chroma 2 matrix with both redox iron depletions and redox concentrations.

11. Do livestock frequent the vicinity of the effluent disposal area?
Yes_(Students?)___ No____

12. Is heavy equipment used in vicinity of the effluent disposal area?
Yes____ No_X___

13 How often is the septic tank pumped? ____?_____

14. Does residence have any of the following:
Dishwasher: Yes_X___ No____
On-site laundry/washing machine: Yes____ No__X__
Low flow plumbing fixtures: Yes_X__ No____
Garbage Disposal: Yes_X__ No____
Separate plumbing system for grey water: Yes____ No_X__
Water Treatment System: Yes____ No_X__
Sump Pump: Yes____ No_X__

15. a). Designer's Assessment of the site's capability to adequately treat wastewater:

Existing loading is approximately 18,750 gallons per day. This is well within the sites ability to handle wastewater. The soils appear to be sufficiently well drained to provide adequate treatment.

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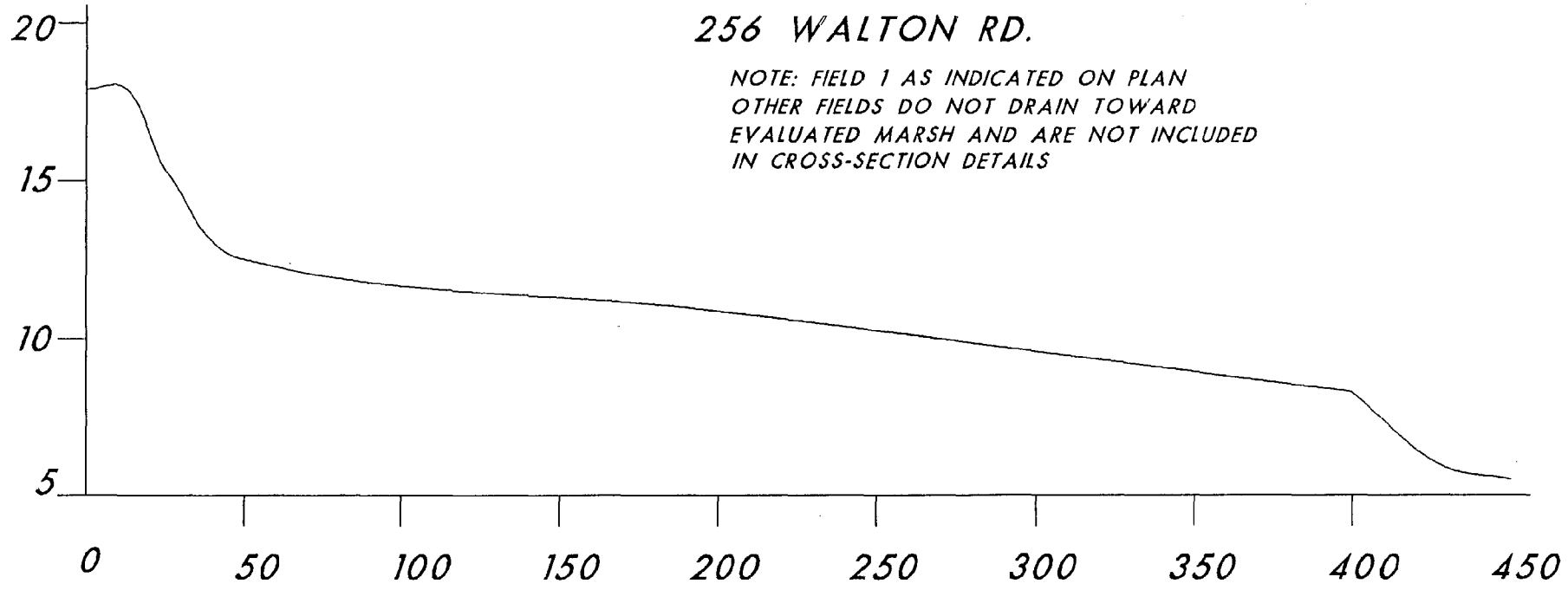
RELATIVE
ELEVATION
IN FEET

SEABROOK ELEMENTARY SCHOOL

256 WALTON RD.

NOTE: FIELD 1 AS INDICATED ON PLAN
OTHER FIELDS DO NOT DRAIN TOWARD
EVALUATED MARSH AND ARE NOT INCLUDED
IN CROSS-SECTION DETAILS



CROSS-SECTION FROM EDA TO HIGHEST OBS. TIDE

(0 REPRESENTS EDGE OF EDA
CLOSEST TO HIGHEST OBS. TIDE)

SCALE 1" HORIZONTAL = 50 FT.
1" VERTICAL = 5 FT.

DESIGN SEPTIC TANK 1,125 + (.75 x 12,870) = 10,777 GALS.

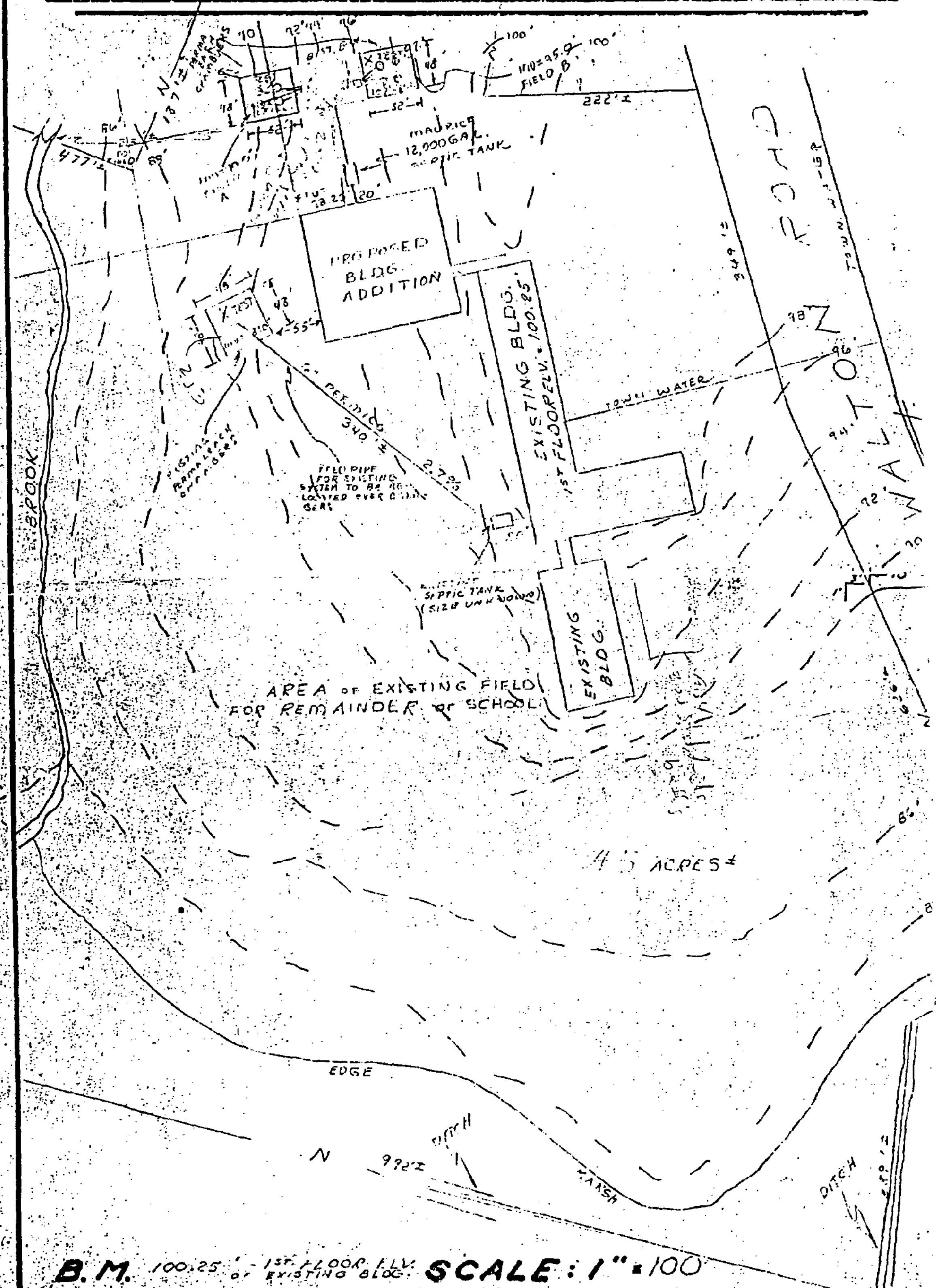
TOTAL NUMBER OF STUDENTS IN NEW & EXISTING BLDG = 909

909 x 25 GALS/DAY [illegible] SHOWER) = 22,725 GALS/DAY

PRESENT SYSTEM [illegible] GYM, SHOWER, CAFETERIA 657 STUDX 15 GAL/DAY = 9855 GAL

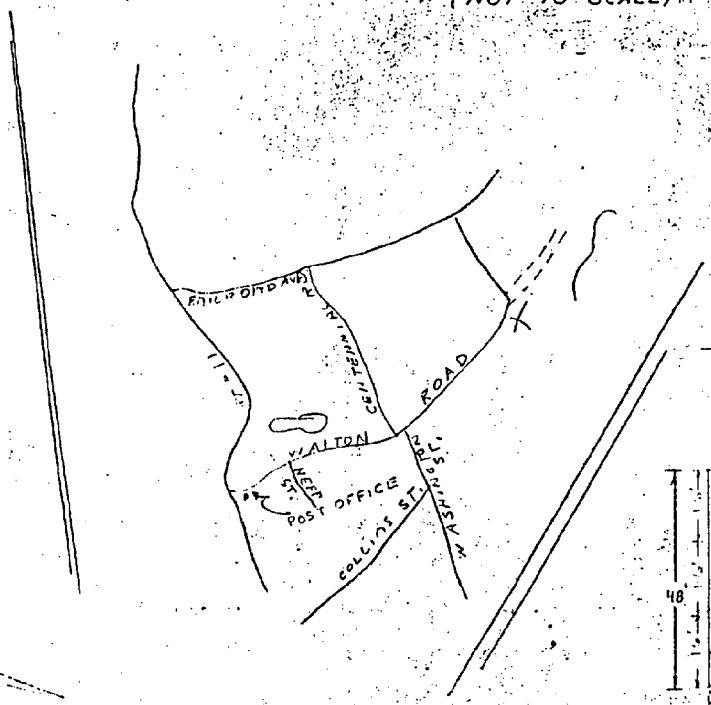
∴ 22725 − 9855 = 12870 GALS/DAY NEEDED IN ADDITION TO PRESENT SYSTEM

2"/IN = 38 SF/100 GAL 38 x 129 = 4902 SF USE 2 - 48 x 52 FIELDS 4992 SF

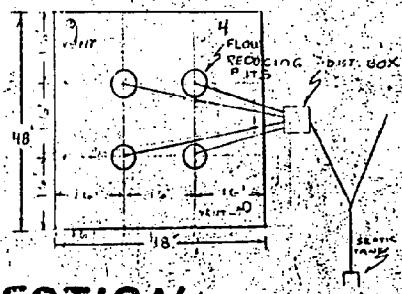


B.M. 100.25' − 1ST FLOOR ELV. OF EXISTING BLDG. **SCALE: 1" = 100'**

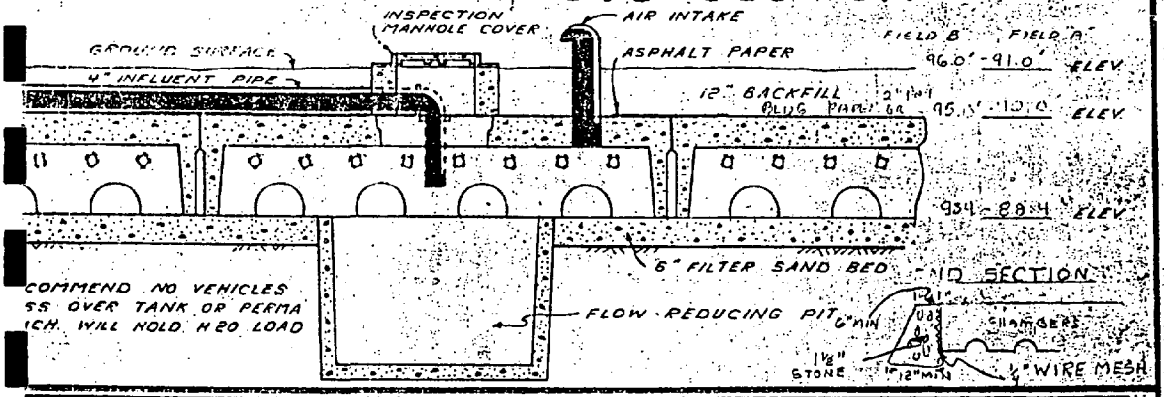
SITE PLAN
(NOT TO SCALE)



SKETCH OF SYSTEM
(NOT TO SCALE)

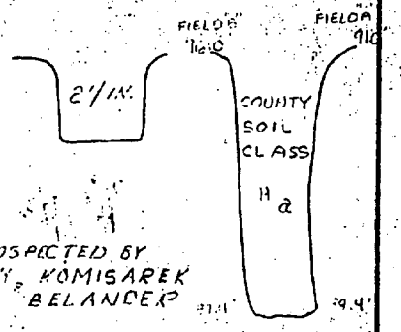


PERMA LEACH CROSS SECTION (NOT TO SCALE)



TEST PIT & SOIL LOG
(NOT TO SCALE)

ATE JULY 1972



TE : INSPECTED BY
JOSEPH KOMISAREK
PHIL BELANGER

T HIGH WATER TABLE ELV 93.4 - 89.4'

AY OR IMPERVIOUS ELV. NONE 10

SEWER SYSTEM
FOR
SEABROOK SCHOOL
SEABROOK, N.H.

DATE: JULY, 1972
PARKER SURVEY ASSOC., INC.

RKP	DLG	DLG
FIELD	OFFICE	CHECKER

1258

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