

**TOWN OF NANTUCKET
COMMUNITY SEPTIC MANAGEMENT PROGRAM
APPLICATION FORM**

HOMEOWNER PROPERTY INFORMATION

NAME: Gerasimos John Gianutsos
ADDRESS: 53 Millbrook Road, Nantucket, MA 02554
MAP/PARCEL: Map 56, Parcels 239 & 240
PHONE: (646) 773-6011
MAILING ADDRESS (if different from above):
11 Arcadia Drive, Dix Hills, NY 11746

GENERAL INFORMATION

1. Has your septic system been failed by a certified inspector? YES NO ()
(Please provide copy of failed Title 5 Inspection Report.)
 - a. Have you received three estimates for engineering work? YES () NO
(Please provide copies of estimates.)
 - b. Have you received three estimates of the general contractor's
(installation) work? YES () NO
(Please provide copies of estimates.)
2. Can you be connected to the Town's existing sewer system? YES () NO
(If so, please provide three estimates for sewer connection costs incurred.)
3. Is your property in one of Nantucket's Watershed Protection Zones? YES () NO ()

Name of Protection Zone: Hummock Pond Watershed Protection Zone
Zone A or B? Zone B
Other Area (please list area): _____

4. Is your gross annual income \$150,000 or greater? YES NO ()
5. Are there any other mortgages, liens or attachments recorded against your property?
YES () NO

If so, please explain (please attach additional sheets if necessary):

HOMEOWNER SEPTIC/SEWER ESTIMATE

- 1. Engineering soil evaluation and design: \$ 6,780.53

- 2. Estimated costs of repair, replacement or connection: \$ 23,475.00

- Total Loan Estimate: \$ 30,255.53

The undersigned, Homeowner, agrees to sign a Betterment Agreement with the Town of Nantucket (the "Town"), to pay for the required costs associated with the septic system repair, replacement and/or upgrade of a failed on-site septic system located on the undersigned's residential property or the connection to the Town sewer, and is aware that these costs will be treated as a municipal lien on the undersigned's property. The undersigned acknowledges and agrees that if the undersigned's gross annual income exceeds \$150,000, the Commonwealth of Massachusetts Department of Environmental Protection's approval is required in order for the undersigned to be eligible for a loan under the Town's Community Septic Management Program.

The undersigned further acknowledges and agrees that (i) a loan under the Town's Community Septic Management Program is contingent upon the Town determining that the undersigned's property lies within an environmentally sensitive area that is deemed to be fundable by the Town for that fiscal year; (ii) such loans are available on a first-come, first-serve basis, and is based on applicant(s) being in good tax standing with the Town of Nantucket; and (iii) such loan is to be used for the repair, replacement and/or upgrade of a failed on-site septic system of residential property only or to connect such property to the Town's sewer in order to comply with Title 5 and other applicable public health and environmental laws, and that such loan funding is to be used for existing flows only (no additional flows are to be paid for under this Loan Program).

The undersigned acknowledges that funding availability and approval may be based on a priority list established at the Town's Board of Health's sole discretion.

Homeowner  _____
Date 2/21/2020

Homeowner _____
Date _____

Board of Health Use Only:

Project Number _____
Watershed Protection District _____
Date Accepted: _____



Commonwealth of Massachusetts
Title 5 Official Inspection Form
 Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

Owner information is required for every page.

53 Millbrook Rd(Nantucket, MA.)
 Property Address
 Gerasimos J Gianutsos 38-27 52nd Street
 Owner's Name
 Sunnyside NY 11104 12/17/14
 City/Town State Zip Code Date of Inspection

Inspection results must be submitted on this form. Inspection forms may not be altered in any way. Please see completeness checklist at the end of the form.

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



A. General Information

1. Inspector:
 Stephen J Visco
 Name of Inspector
 Visco Pumping Inc.
 Company Name
 2 Zachary Way
 Company Address
 Nantucket MA 02554
 City/Town State Zip Code
 508-228-2339 SI - 240
 Telephone Number License Number

B. Certification

I certify that I have personally inspected the sewage disposal system at this address and that the information reported below is true, accurate and complete as of the time of the inspection. The inspection was performed based on my training and experience in the proper function and maintenance of on site sewage disposal systems. **I am a DEP approved system inspector pursuant to Section 15.340 of Title 5 (310 CMR 15.000).** The system:

- Passes Conditionally Passes Fails
- Needs Further Evaluation by the Local Approving Authority

 Inspector's Signature Date

The system inspector shall submit a copy of this inspection report to the Approving Authority (Board of Health or DEP) within 30 days of completing this inspection. If the system is a shared system or has a design flow of 10,000 gpd or greater, the inspector and the system owner shall submit the report to the appropriate regional office of the DEP. The original should be sent to the system owner and copies sent to the buyer, if applicable, and the approving authority.

******This report only describes conditions at the time of inspection and under the conditions of use at that time. This inspection does not address how the system will perform in the future under the same or different conditions of use.**



Commonwealth of Massachusetts

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12/17/14

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B. Certification (cont.)

Inspection Summary: Check A,B,C,D or E / always complete all of Section D

A) System Passes:

I have not found any information which indicates that any of the failure criteria described in 310 CMR 15.303 or in 310 CMR 15.304 exist. Any failure criteria not evaluated are indicated below.

Comments:

Four horizontal lines for writing comments.

B) System Conditionally Passes:

One or more system components as described in the "Conditional Pass" section need to be replaced or repaired. The system, upon completion of the replacement or repair, as approved by the Board of Health, will pass.

Check the box for "yes", "no" or "not determined" (Y, N, ND) for the following statements. If "not determined," please explain.

The septic tank is metal and over 20 years old* or the septic tank (whether metal or not) is structurally unsound, exhibits substantial infiltration or exfiltration or tank failure is imminent. System will pass inspection if the existing tank is replaced with a complying septic tank as approved by the Board of Health.

* A metal septic tank will pass inspection if it is structurally sound, not leaking and if a Certificate of Compliance indicating that the tank is less than 20 years old is available.

Y N ND (Explain below):

Five horizontal lines for explaining the response.



Commonwealth of Massachusetts

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NY

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12/17/14

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B. Certification (cont.)

B) System Conditionally Passes (cont.):

Observation of sewage backup or break out or high static water level in the distribution box due to broken or obstructed pipe(s) or due to a broken, settled or uneven distribution box. System will pass inspection if (with approval of Board of Health):

- broken pipe(s) are replaced
obstruction is removed
distribution box is leveled or replaced

The system required pumping more than 4 times a year due to broken or obstructed pipe(s). The system will pass inspection if (with approval of the Board of Health):

- broken pipe(s) are replaced
obstruction is removed

C) Further Evaluation is Required by the Board of Health:

Conditions exist which require further evaluation by the Board of Health in order to determine if the system is failing to protect public health, safety or the environment.

1. System will pass unless Board of Health determines in accordance with 310 CMR 15.303(1)(b) that the system is not functioning in a manner which will protect public health, safety and the environment:

- Cesspool or privy is within 50 feet of a surface water
Cesspool or privy is within 50 feet of a bordering vegetated wetland or a salt marsh



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12/17/14

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B. Certification (cont.)

2. System will fail unless the Board of Health (and Public Water Supplier, if any) determines that the system is functioning in a manner that protects the public health, safety and environment:

- Four checkbox options regarding septic tank and SAS placement relative to surface water and private water supply wells.

** This system passes if the well water analysis, performed at a DEP certified laboratory, for coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis must be attached to this form.

3. Other:

*Nantucket B.O.H. Reg(Metal Septic Tank-Automatic Failure)

D) System Failure Criteria Applicable to All Systems:

You must indicate "Yes" or "No" to each of the following for all inspections:

- Table with columns 'Yes' and 'No' and four rows of failure criteria related to sewage backup, discharge, liquid levels, and cesspool depth.



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B. Certification (cont.)

Yes No

Required pumping more than 4 times in the last year NOT due to clogged or obstructed pipe(s). Number of times pumped: _____.

Any portion of the SAS, cesspool or privy is below high ground water elevation.

Any portion of cesspool or privy is within 100 feet of a surface water supply or tributary to a surface water supply.

Any portion of a cesspool or privy is within a Zone 1 of a public well.

Any portion of a cesspool or privy is within 50 feet of a private water supply well.

Any portion of a cesspool or privy is less than 100 feet but greater than 50 feet from a private water supply well with no acceptable water quality analysis. [This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis and chain of custody must be attached to this form.]

The system is a cesspool serving a facility with a design flow of 2000gpd-10,000gpd.

The system fails. I have determined that one or more of the above failure criteria exist as described in 310 CMR 15.303, therefore the system fails. The system owner should contact the Board of Health to determine what will be necessary to correct the failure.

E) Large Systems: To be considered a large system the system must serve a facility with a design flow of 10,000 gpd to 15,000 gpd.

For large systems, you must indicate either "yes" or "no" to each of the following, in addition to the questions in Section D.

Yes No

the system is within 400 feet of a surface drinking water supply

the system is within 200 feet of a tributary to a surface drinking water supply

the system is located in a nitrogen sensitive area (Interim Wellhead Protection Area – IWPA) or a mapped Zone II of a public water supply well

If you have answered "yes" to any question in Section E the system is considered a significant threat, or answered "yes" in Section D above the large system has failed. The owner or operator of any large system considered a significant threat under Section E or failed under Section D shall upgrade the system in accordance with 310 CMR 15.304. The system owner should contact the appropriate regional office of the Department.



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12/17/14

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C. Checklist

Check if the following have been done. You must indicate "yes" or "no" as to each of the following:

- Checklist items with Yes/No columns and descriptions of inspection criteria.

D. System Information

Residential Flow Conditions:

Number of bedrooms (design): ? Number of bedrooms (actual): 2
DESIGN flow based on 310 CMR 15.203 (for example: 110 gpd x # of bedrooms): no design plan



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D. System Information

Description:

Three horizontal lines for description input.

Number of current residents:

1

Does residence have a garbage grinder?

Yes No

Is laundry on a separate sewage system? [if yes separate inspection required]

Yes No

Laundry system inspected?

Yes No

Seasonal use?

Yes No

Water meter readings, if available (last 2 years usage (gpd)):

Well

Detail:

Three horizontal lines for detail input.

Sump pump?

Yes No

Last date of occupancy:

Date

Commercial/Industrial Flow Conditions:

Type of Establishment:

Horizontal line for type of establishment.

Design flow (based on 310 CMR 15.203):

Gallons per day (gpd)

Basis of design flow (seats/persons/sq.ft., etc.):

Horizontal line for basis of design flow.

Grease trap present?

Yes No

Industrial waste holding tank present?

Yes No

Non-sanitary waste discharged to the Title 5 system?

Yes No

Water meter readings, if available:

Horizontal line for water meter readings.



Commonwealth of Massachusetts

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38-27 52nd Street

Owner's Name

Sunnyside

NY

11104

12/17/14

City/Town

State

Zip Code

Date of Inspection

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D. System Information (cont.)

Last date of occupancy/use:

Date

Other (describe below):

General Information

Pumping Records:

Source of information:

Visco Pumping Inc.(Stephen J Visco)

Was system pumped as part of the inspection?

Yes No

If yes, volume pumped:

gallons

How was quantity pumped determined?

Reason for pumping:

Type of System:

- Septic tank, distribution box, soil absorption system
Single cesspool
Overflow cesspool
Privy
Shared system (yes or no) (if yes, attach previous inspection records, if any)
Innovative/Alternative technology. Attach a copy of the current operation and maintenance contract (to be obtained from system owner) and a copy of latest inspection of the I/A system by system operator under contract
Tight tank. Attach a copy of the DEP approval.
Other (describe):



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

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NY

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12/17/14

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Date of Inspection

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D. System Information (cont.)

Approximate age of all components, date installed (if known) and source of information:

1970 Building Dept

Were sewage odors detected when arriving at the site? [] Yes [x] No

Building Sewer (locate on site plan):

Depth below grade:

1.5 feet

Material of construction:

[] cast iron [x] 40 PVC [x] other (explain):

PVC Exit house/ to Orangeburgh

Distance from private water supply well or suction line:

40Ft feet

Comments (on condition of joints, venting, evidence of leakage, etc.):

Septic Tank (locate on site plan):

Depth below grade:

0.8 feet

Material of construction:

[] concrete [x] metal [] fiberglass [] polyethylene [] other (explain)

Rusted metal cover very weak,

If tank is metal, list age:

44 years years

Is age confirmed by a Certificate of Compliance? (attach a copy of certificate) [] Yes [x] No

Dimensions:

6'R x5'D

Sludge depth:



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Sunnyside

NY

11104

12/17/14

City/Town

State

Zip Code

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D. System Information (cont.)

Septic Tank (cont.)

Distance from top of sludge to bottom of outlet tee or baffle

Scum thickness

Distance from top of scum to top of outlet tee or baffle

Distance from bottom of scum to bottom of outlet tee or baffle

How were dimensions determined?

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):

System should be pumped out every year if lived in year round, every 2 - 3 if seasonal.

Grease Trap (locate on site plan):

Depth below grade: feet

Material of construction:

concrete metal fiberglass polyethylene other (explain):

Dimensions:

Scum thickness

Distance from top of scum to top of outlet tee or baffle

Distance from bottom of scum to bottom of outlet tee or baffle

Date of last pumping: Date



Commonwealth of Massachusetts

Title 5 Official Inspection Form

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Property Address

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38-27 52nd Street

Owner's Name

Sunnyside

NY

11104

12/17/14

City/Town

State

Zip Code

Date of Inspection

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D. System Information (cont.)

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):

Three horizontal lines for entering comments.

Tight or Holding Tank (tank must be pumped at time of inspection) (locate on site plan):

Depth below grade: _____

Material of construction:

concrete metal fiberglass polyethylene other (explain):

Dimensions: _____

Capacity: _____

gallons

Design Flow: _____

gallons per day

Alarm present:

Yes No

Alarm level: _____

Alarm in working order: Yes No

Date of last pumping: _____

Date

Comments (condition of alarm and float switches, etc.):

Four horizontal lines for entering comments.

* Attach copy of current pumping contract (required). Is copy attached? Yes No



Commonwealth of Massachusetts

Title 5 Official Inspection Form

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53 Millbrook Rd(Nantucket, MA.)

Property Address

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38-27 52nd Street

Owner's Name

Sunnyside

NY

11104

12/17/14

City/Town

State

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D. System Information (cont.)

Distribution Box (if present must be opened) (locate on site plan):

Depth of liquid level above outlet invert

no Box

Comments (note if box is level and distribution to outlets equal, any evidence of solids carryover, any evidence of leakage into or out of box, etc.):

Pump Chamber (locate on site plan):

Pumps in working order:

Yes No

Alarms in working order:

Yes No

Comments (note condition of pump chamber, condition of pumps and appurtenances, etc.):

Soil Absorption System (SAS) (locate on site plan, excavation not required):

If SAS not located, explain why:



Commonwealth of Massachusetts

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38-27 52nd Street

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NY

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12/17/14

City/Town

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Date of Inspection

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D. System Information (cont.)

Type:

- leaching pits number: 1
leaching chambers number:
leaching galleries number:
leaching trenches number, length:
leaching fields number, dimensions:
overflow cesspool number:
innovative/alternative system

Type/name of technology:

Comments (note condition of soil, signs of hydraulic failure, level of ponding, damp soil, condition of vegetation, etc.):

* Soil Dry, level ponding in pit 2' effluent ,level may have been within 6" of invert at one time, vegetation (large trees in area, some root infiltration through block leach pit)

Cesspools (cesspool must be pumped as part of inspection) (locate on site plan):

- Number and configuration
Depth - top of liquid to inlet invert
Depth of solids layer
Depth of scum layer
Dimensions of cesspool
Materials of construction
Indication of groundwater inflow Yes No



Commonwealth of Massachusetts

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Sunnyside

NY

11104

12/17/14

City/Town

State

Zip Code

Date of Inspection

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D. System Information (cont.)

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):

Privy (locate on site plan):

Materials of construction:

Dimensions

Depth of solids

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):



Commonwealth of Massachusetts

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City/Town

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D. System Information (cont.)

Sketch Of Sewage Disposal System: Provide a view of the sewage disposal system, including ties to at least two permanent reference landmarks or benchmarks. Locate all wells within 100 feet. Locate where public water supply enters the building. Check one of the boxes below:

- hand-sketch in the area below
- drawing attached separately



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D. System Information (cont.)

Site Exam:

- Check Slope
- Surface water
- Check cellar
- Shallow wells

Estimated depth to high ground water:

7
feet

Please indicate all methods used to determine the high ground water elevation:

- Obtained from system design plans on record

If checked, date of design plan reviewed:

_____ Date

- Observed site (abutting property/observation hole within 150 feet of SAS)

- Checked with local Board of Health - explain:

Nantuckets water resource Map

- Checked with local excavators, installers - (attach documentation)

- Accessed USGS database - explain:

You **must** describe how you established the high ground water elevation:

My instruement height @ 4.20, bottom of leach pit @ 7.50, groundwater @ 9.80, a 2.30 separation to water.

Before filing this Inspection Report, please see Report Completeness Checklist on next page.



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E. Report Completeness Checklist

- Inspection Summary: A, B, C, D, or E checked
- Inspection Summary D (System Failure Criteria Applicable to All Systems) completed
- System Information – Estimated depth to high groundwater
- Sketch of Sewage Disposal System either drawn on page 15 or attached in separate file

Bracken Engineering, Inc.
 49 Herring Pond Road
 Buzzards Bay, MA 02532

Statement

Date

1/2/2020

Gerry Gianutsos

Terms		Amount Due			Amount Enc.
Due on receipt		\$6,780.53			
Date	Transaction			Amount	Balance
10/14/2019	53 Millbrook Rd., Nantucket- INV #19-1193. Orig. Amount \$6,084.15. revised inv on 11/21-DWCP chk voided			6,084.15	6,084.15
11/05/2019	INV #19-1297. Orig. Amount \$696.38.			696.38	6,780.53
CURRENT	1-30 DAYS	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
0.00	0.00	696.38	6,084.15	0.00	\$6,780.53

Bracken Engineering now accepts credit cards. Please call 508-833-0070 to pay with your card.

T.C.E.
LLC
CONTRACTORS

P.O. Box 3306 • Nantucket, MA 02584

ESTIMATE

Submitted to: Gerasimos John Gianutsos
Address: 53 Mill Brook Rd
City, State & Zip: Nantucket, MA 02584

Date: February 21, 2020
Job Name: Giauntsos
Location: 53 Millbrook Rd

THE COST TO:	Remove trees/brush from areas to be disturbed. Haul to landfill.	\$3,300.00
	Pump and remove existing septic tank as per plan. Crush and fill existing leach pit.	\$975.00
	Install proposed 1500gal septic tank, D-box and leach field as per plan.	\$16,000.00
	Backfill after inspections.	\$3,200.00

NOT INCLUDED: Removal or replacement of any landscaping

We Propose: to furnish material and labor in accordance with the above specifications for the sum of: **\$23,475.00**

DOWN PAYMENT OF 30%

**BILLING IS UPON COMPLETION OF WORK AS OUTLINED IN PROPOSAL.
PAYMENT IS DUE WITHIN 14 DAYS OF INVOICING.**

All material is guaranteed to be as specified. All work is to be completed in a professional manner according to standard practices. Any alteration or deviation from the above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the proposal. Our workers are fully covered by Workman's Compensation Insurance.

Note: This proposal may be withdrawn by us if not accepted within 30 days.

Authorized Signature: _____

Acceptance of Proposal – The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature: _____

Date of Acceptance: _____