

Commonwealth of Massachusetts
City/Town of Hamilton

Form 11 - Soil Suitability Assessment for On-Site Sewage Disposal

DEP has provided this form for use by on-site professionals and local Boards of Health. Other forms may be used, but the information must be substantially the same as provided here. Before using this form, check with your local Board of Health to determine the form they use.

A. Facility Information

1. Facility Information

Town of Hamilton
Owner Name _____ Map/Lot 207/ Parcel 15
Street Address 650 Asbury Street
City/Town Hamilton MA State Zip Code 01936

B. Site Information

1. (Check one) New Construction ☒ Upgrade ☐ Repair ☐

2. Published Soil Survey available? Yes ☒ No ☐ If yes: 2013 Year Published 1:20,000 Publication Scale

Hinckley Soil Name N/A Soil limitations
Hatch Soil Map Unit

3. Surficial Geological Report available? Yes ☒ No ☐ If yes: 2006 Year Published 1:250,000 Publication Scale
Stratified deposits Map Unit

Glacial Outwash
Geologic Material
Outwash Plain
Landform

4. Flood Rate Insurance Map:

Above the 500 year flood boundary? Yes ☒ No ☐ Within the 100 year flood boundary? Yes ☒ No ☐
Within the 500 year flood boundary? Yes ☐ No ☒ Within a Velocity Zone? Yes ☐ No ☒

5. Wetland Area: National Wetland Inventory Map

Wetlands Conservancy Program Map
N/A Map Unit Name
N/A Map Unit Name



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6. Current Water Resource Conditions (USGS) July, 2014 Month/Year Range: Above Normal ☐ Normal ☒ Below Normal ☐

7. Other references reviewed: Aerial Photo's

C. On-Site Review *(minimum of two holes required at every proposed primary and reserved disposal area)*

Deep Observation Hole Number: 2A

07-30-14 10:55 am Sunny 74°
Date Time Weather

1. Location

Ground Elevation at Surface of Hole 56'

Location (Identify on Plan) _____

2. Land Use: Field N/A 0-3
(e.g. woodland, agricultural field, vacant lot, etc.) Surface Stones Slope (%)

Grass Outwash Plain TS
Vegetation Landform Position on landscape (attach sheet)

3. Distances from: Open Water Body ≥ 200' ≥ 200' ≥ 100'
feet feet feet
Drainage Way Possible Wet Area
Property Line ≥ 25' ≥ 200' Other
feet feet feet
Drinking Water Well

4. Parent Material: Glacial outwash Unsuitable Materials Present: Yes ☐ No ☒

If Yes: Disturbed Soil ☐ Fill Material ☐ Impervious Layer(s) ☐ Weathered/Fractured Rock ☐ Bedrock ☐

5. Groundwater Observed: Yes ☐ No ☒
If Yes: Depth Weeping from Pit _____ Depth Standing Water in Hole N/A



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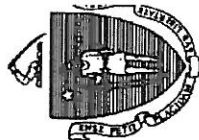
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Estimated Depth to High Groundwater: >122 Inches 45.8' elevation

Deep Observation Hole Number: 2A

Depth (In.)	Soil Horizon/ Layer	Soil Matrix: Color-Moist (Munsell)	Redoximorphic Features (mottles)			Soil Texture (USDA)	Coarse Fragments % by Volume		Soil Structure	Soil Consistence (Moist)	Other
			Depth	Color	Percent		Gravel	Cobbles & Stones			
0"-16"	Ap	10YR3/3				Fine Sandy Loam			Granular	Friable	
16-28"	Bw	10YR4/6				Fine Sandy Loam			Platey	Friable	
28-37"	C1	10YR5/4				Loamy Fine Sand			Platey	Friable	
37- 122"	C2	10YR5/3				Fine Sand			Massive	Friable	

Additional Notes



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D. Determination of High Groundwater Elevation

1. Method used: ☐ Depth observed standing water in observation hole A. inches B. inches
☐ Depth weeping from side of observation hole A. inches B. inches
☒ Depth to soil redoximorphic features (mottles) A. inches B. inches
☐ Groundwater adjustment (USGS methodology) A. inches B. inches
2. Index Well Number Reading Date Index Well Level
Adjustment Factor Adjusted Groundwater Level

E. Depth of Pervious Material

1. Depth of Naturally Occurring Pervious Material

- a. Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system? Yes ☒ No ☐
- b. If yes, at what depth was it observed? Upper boundary: 28" inches Lower boundary: 122" inches

F. Certification

I certify that I am currently approved by the Department of Environmental Protection pursuant to 310 CMR 15.017 to conduct soil evaluations and that the above analysis has been performed by me consistent with the required training, expertise and experience described in 310 CMR 15.017. I further certify that the results of my soil evaluation, as indicated in the attached Soil Evaluation Form, are accurate and in accordance with 310 CMR 15.100 through 15.187.



Signature of Soil Evaluator

Christian O. Smith, PE

Typed or Printed Name of Soil Evaluator

07-30-14

Date

October, 2005

*Date of Soil Evaluator Exam

Leslie Whelan

Name of Board of Health Witness

Hamilton, MA

Board of Health



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Note: In accordance with 310 CMR 15.018(2) this form must be submitted to the approving authority within 60 days of the date of field testing, and to the designer and the property owner with Percolation Test Form 12.

Use this sheet for field diagrams:



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A. Facility Information

1. Facility Information

Town of Hamilton
Owner Name
650 Asbury Street
Street Address
Hamilton
City/Town
Map/Lot 207/ Parcel 15
MA State
01836 Zip Code

B. Site Information

1. (Check one) New Construction ☒ Upgrade ☐ Repair ☐

2. Published Soil Survey available? Yes ☒ No ☐ If yes: 2013 Year Published 1:20,000 Publication Scale HaB Soil Map Unit

Hinckley
Soil Name

N/A
Soil Limitations

3. Surficial Geological Report available? Yes ☒ No ☐ If yes: 2006 Year Published 1:250,000 Publication Scale Stratified deposits Map Unit

Glacial Outwash
Geologic Material

Outwash Plain
Landform

4. Flood Rate Insurance Map:

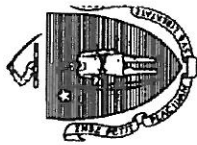
Above the 500 year flood boundary? Yes ☒ No ☐ Within the 100 year flood boundary? Yes ☐ No ☒
Within the 500 year flood boundary? Yes ☐ No ☒ Within a Velocity Zone? Yes ☐ No ☒

5. Wetland Area: National Wetland Inventory Map

N/A
Map Unit Name

Wetlands Conservancy Program Map

N/A
Map Unit Name



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6. Current Water Resource Conditions (USGS) July, 2014 Range: Above Normal ☐ Normal ☒ Below Normal ☐
Month/Year

7. Other references reviewed: Aerial Photo's

C. On-Site Review

(minimum of two holes required at every proposed primary and reserved disposal area)

Deep Observation Hole Number: RG1

1. Location

Date 07-30-14 Time 11:05am Weather Sunny 75°

Ground Elevation at Surface of Hole 57

Location (Identify on Plan) _____

2. Land Use: Field

(e.g. woodland, agricultural field, vacant lot, etc.)

N/A
Surface Stones

0-3
Slope (%)

Grass
Vegetation

Outwash Plain
Landform

TS
Position on landscape (attach sheet)

3. Distances from: Open Water Body ≥ 200' ^{feet} Drainage Way ≥ 200' ^{feet} Possible Wet Area ≥ 100' ^{feet}
Property Line ≥ 25' ^{feet} Drinking Water Well ≥ 200' ^{feet} Other _____

4. Parent Material: Glacial outwash

Unsuitable Materials Present: Yes ☐ No ☒

If Yes: Disturbed Soil ☐ Fill Material ☐ Impervious Layer(s) ☐ Weathered/Fractured Rock ☐ Bedrock ☐

5. Groundwater Observed: Yes ☐ No ☒

If Yes: Depth Weeping from Pit _____ Depth Standing Water in Hole N/A



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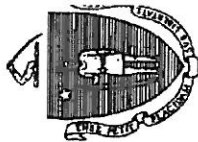
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Estimated Depth to High Groundwater: >48" <53'
Inches elevation

Deep Observation Hole Number: RG1

Depth (In.)	Soil Horizon/ Layer	Soil Matrix: Color-Moist (Munsell)	Redoximorphic Features (mottles)			Soil Texture (USDA)	Coarse Fragments % by Volume		Soil Structure	Soil Consistence (Moist)	Other
			Depth	Color	Percent		Gravel	Cobbles & Stones			
0"-8"	Ap	10YR4/3				Fine Sandy Loam			Granular	Friable	
8-22"	Bw	7.5YR4/4				Loamy Fine Sand	30%		Granular	Friable	
22-30"	C1	10YR4/6				Loamy Sand			Massive	Friable	
30-48"	C2	10YR4/3				Sand			Single Grain	Loose	

Additional Notes



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Owner Name
650 Asbury Street
Hamilton
City/Town
Map/Lot 207/ Parcel 15
MA
State
01936
Zip Code

B. Site Information

1. (Check one) New Construction ☒ Upgrade ☐ Repair ☐
2. Published Soil Survey available? Yes ☒ No ☐ If yes: 2013 Year Published 1:20,000 Publication Scale 310B Soil Map Unit

Woodbridge
Soil Name

N/A
Soil limitations

3. Surficial Geological Report available? Yes ☒ No ☐ If yes: 2006 Year Published 1:250,000 Publication Scale Stratified deposits Map Unit

Glacial Outwash
Geologic Material

Outwash Plain
Landform

4. Flood Rate Insurance Map:

- Above the 500 year flood boundary? Yes ☒ No ☐ Within the 100 year flood boundary? Yes ☐ No ☒
Within the 500 year flood boundary? Yes ☒ No ☐ Within a Velocity Zone? Yes ☐ No ☒

5. Wetland Area: National Wetland Inventory Map

N/A
Map Unit
Name

Wetlands Conservancy Program Map

N/A
Map Unit
Name