



## Upper Makefield Township Certificate of Occupancy

**TMP #** 47-010-058-000

**Issued:** 12/03/2012

**Permission Is Hereby Granted To:**

**Developer:** McGrath Construction, Inc.  
**Owner:** Matthew A. III & Lottie Joyce Spinelli

**To Occupy Premises Located At:** 1 London Court  
Newtown, PA 18940

**Located In Subdivision:** The London Court Subdivision; **Lot#** 1  
**As a(n):** Single Family Dwelling

**This Structure Constructed Under Building Permit No.:** B-06042C

**Grading Escrow Amount:** \$2,000.00

**Date Received:** 3/29/2007

**Check Name:** McGrath Construction, Inc.

**Check Number:** 39230

  
\_\_\_\_\_  
**Jesse Hill, Keystone Municipal Services**

12/4/12  
\_\_\_\_\_  
**Date**



# Upper Makefield *Township*

1076 Eagle Road | Newtown, PA 18940 | p 215.968.3340 | f 215.968.9228 | [www.uppermakefield.org](http://www.uppermakefield.org)

December 10, 2012

Mr. & Mrs. Matthew Spinelli  
1 London Court  
Newtown, PA 18940

Re: Permanent Certificate of Occupancy

Dear Mr. & Mrs. Spinelli:

Enclosed is your Permanent Certificate of Occupancy for your home. Please keep this with your records and if you have any questions, you may contact me at (215) 968-2868.

Sincerely,



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Phyllis Mehler  
Dept. of Planning & Zoning

Enc





TO BE POSTED AT THE BUILDING SITE

**PERMIT**

for

**INSTALLATION OF ONLOT SEWAGE DISPOSAL SYSTEM****RECEIVED**

FEB 02 2004

U. M. T.

Enforcement Officer

Pursuant to Application for Sewage Disposal System number TM 47-9-1-1&19-Serial 02-623  
a permit is hereby issued to:

Permit Q 13939

-10-58

NAME OF APPLICANT

**DJS/McAllister**

ADDRESS OF APPLICANT

**P.O. BOX 222, Yardley, PA 19067**

TELEPHONE NUMBER

**(215) 493-2398**

PROPERTY ADDRESS OF SITE FOR SEWAGE DISPOSAL SYSTEM

**Lot 1 Stoneybrook Road, Upper Makefield Township, Bucks County, PA**

This permit issued under the provisions of the "Pennsylvania Sewage Facilities Act," the Act of January 24, 1966 (P.L. 1535), as amended, is subject to the following conditions:

1. Except as otherwise provided by the Act or regulations of the Pennsylvania Department of Environmental Protection, no part of the installation shall be covered until inspected by the approving body and approval to cover is granted in writing below.
2. This permit may be revoked for the reasons set forth in Section 7(b)(6) of the Act.
3. If construction or installation of an individual sewage system or community sewage system and of any building or structure for which such system is to be installed has not commenced within three years after the issuance of a permit for such system, the said permit shall expire, and a new permit shall be obtained prior to the commencement of said construction or installation.

## ADDITIONAL CONDITIONS:

1. The proposed absorption area is to be staked out before any construction begins on the site.
2. The absorption area is to be avoided by all construction activity.
3. The well is to be staked out prior to the start of construction on the lot.
4. Should there be a change in property ownership, a permit transfer shall be required.
5. Construction of the absorption area shall not begin without permission of the local sewage enforcement officer.

**KEEP THIS PERMIT FOR FUTURE REFERENCE**

Approval to Cover

Date of issuance of Permit

1/29/04

Signature of Enforcement Officer

**Bucks County Dept. of Health**

Approving Body

Date

Signature of Enforcement Officer

The basis for the issuance of this permit is the information supplied in the Application for Sewage Disposal System and other pertinent data concerning soil absorption tests, topography, lot size, and sub-soil groundwater table elevations. The permit only indicates that the issuing authority is satisfied that the installation of the sewage disposal system is in accordance with the rules, regulations and standards adopted by the Pennsylvania Department of Environmental Protection under the provisions of the Pennsylvania Sewage Facilities Act, the Act of January 24, 1966 (P.L. 1535), as amended. The issuance of a permit shall not preclude the enforcement of other health laws, ordinances or regulations in the case of malfunctioning of the system.

**\*SEE REVERSE SIDE FOR IMPORTANT INFORMATION**

# FACTS EVERY SEPTIC SYSTEM OWNER SHOULD KNOW

## BEFORE INSTALLING YOUR SYSTEM

- Rope off the area of your system and protect it from vehicles.
- Caution your builder to avoid system area during home construction.
- Do not allow stripping of top soil or grading in the area of the system.
- Make sure your well is upslope from system and at least 100 feet away.
- Do not allow system installation in wet or frozen soil conditions. Soil must be loose, dry, unsmeared, and uncompacted.
- Keep downspout and footer drains out of your septic system.
- Seed your system area as soon as weather permits.
- Divert all surface water from system area.

## CONSERVE WATER

- Water conservation prolongs your system life, saves you money, and need *not* be a personal inconvenience.
- Install low flow showerheads, faucet aerators, and install toilet bottle kits or tank displacement devices (if new construction, purchase low flow commodes). These devices can save a family of four over 100 gallons per day. Cost for these devices is only about \$20-\$70 and will save \$100-\$300 each year.
- See your local plumbing supplier and most major department stores.
- Purchase a front loading washer; they use 1/3 less water than top loaders.
- Take showers; they use less water than baths.
- Promptly repair leaky faucets.
- Use the clothes washer and dishwasher only when you have full loads.
- Contact your local DEP office for more information.

## PUMP YOUR SEPTIC TANK

- Septic tanks must be pumped regularly (at least every 2-3 years).
- Tank pumping helps prevent more expensive system problems. Waiting for evidence of system problems (spongy lawn or sluggish toilet) may be too late for pumping to help.
- Pump your tank through the large central manhole, not the small baffle opening.
- Be sure tank pumper agitates tank contents before pumping. Solids and floating scum must be mixed before removal.
- Carefully mark the location of your septic tank.
- Sewage grinders and garbage disposals increase solids build-up in your tank. More frequent pumping should occur.
- **NEVER ENTER A SEPTIC TANK.**
- Information on septic system maintenance can be obtained from the local DEP office.

## HELPFUL HINTS

- Place a copy of your sewage permit and yellow application in a safe place. This information will be important for future use.
- No septic tank additives have been proven beneficial for septic tank operation. Some may even be harmful. Regular tank pumping is the best advice to prolong your system's life.
- Before repairing or replacing your system (even a new septic tank), a new sewage permit from the municipal sewage enforcement officer will be needed.

FOR HELP OR INFORMATION CALL  
YOUR MUNICIPAL SEWAGE ENFORCEMENT OFFICER OR THE LOCAL DEP OFFICE

## APPLICATION FOR AN ON-LOT SEWAGE DISPOSAL SYSTEM PERMIT

ER-BWQ-290

02.623

## PART I APPLICANT AND SITE INFORMATION

1. Applicant Name <u>DJS/McAllister</u>	2. Site Address <u>Stoneybrook Road</u>
Address <u>P.O. Box 222</u>	Street, RR, Box, No. <u>PA</u>
<u>Yardley, PA 19067</u>	Post Office <u>London Court</u> State <u>1</u> Zip <u></u>
Telephone No. Day <u>(215) 493-2398</u>	Subdivision Name <u>Upper Makefield Twp.</u> Lot No. <u></u>
Evenings <u>( )</u>	Municipality <u>Bucks</u> County <u></u>

Directions to the Site: TMP # 47-9-1-1 & 47-9-19-1

3. Lot Size <u>0.5593</u> <del>33.7</del> acres	4. TYPE OF FACILITY TO BE SERVED BY THIS SYSTEM
Type of System	Single Family Residential <input checked="" type="checkbox"/> Multifamily <input type="checkbox"/>
<input checked="" type="checkbox"/> New	No. of Bedrooms <u>4</u> Commercial <input type="checkbox"/>
<input type="checkbox"/> Repair	gal./day <u></u>
5. Facility Water Supply: Public <input type="checkbox"/> Well <input checked="" type="checkbox"/> Spring <input type="checkbox"/> Cistern <input type="checkbox"/> Surface <input type="checkbox"/>	
6. Distance to the nearest existing or proposed Private Water Supply (on or off the property) <u>100+</u> ft.	

## PART II LOCAL AGENCY USE ONLY

SEWAGE PLANNING	SITE SUITABILITY ANALYSIS	APPLICATION STATUS
<input type="checkbox"/> Approved Planning Mod. DEP Code No. <u></u> (date) <u></u>	Soil Series <u>A1A</u>	<b>ACTION</b> <b>DATE</b>
<input type="checkbox"/> Area Not Planned (lot created before May 15, 1972)	Slope <u>3</u> %	<input type="checkbox"/> Complete Application
<input type="checkbox"/> Limitations in Effect	Type of Limiting Zone <u>none</u>	<input type="checkbox"/> Received <u>1/29/04</u>
<b>FEES PAID</b>	Depth of Limiting Zone <u>84</u> inches	<input checked="" type="checkbox"/> Permit Issued
Application \$ <u>235.00</u>	Type of Cover <u>Ag. Grass, Forest</u>	<input type="checkbox"/> Permit Denied
Testing <u>12</u>	Percolation Rate <u>13.5</u> min/in.	<input type="checkbox"/> Interim Inspection
Inspection(s) <u>12</u>	Not conducted - IRSIS	<input type="checkbox"/> Interim Inspection
Other <u></u>	Site is:	<input type="checkbox"/> Final Inspection
Total \$ <u></u>	<input checked="" type="checkbox"/> Suitable for in ground system.	<input type="checkbox"/> Approved
	<input type="checkbox"/> Suitable for elevated system.	<input type="checkbox"/> Disapproved SEO Initials
	<input type="checkbox"/> Suitable for IRSIS	<input type="checkbox"/> Revoked Permit
	<input type="checkbox"/> Unsuitable	
	Attach Form ER-BWQ-290 Appendix A or B	

## PART III PLOT PLAN AND SYSTEM DESIGN

1. TANKAGE	2. SOIL ABSORPTION SYSTEM	3. ATTACH THE FOLLOWING DOCUMENTATION
Total Tank Capacity <u>1500 D.C.</u> gal.	Total Absorption Area <u>630</u> Sq. Ft.	a. A copy of the Form ER-BWQ-290 Appendix A (and B when required) (See Part II)
<input checked="" type="checkbox"/> Septic Tank(s) <u>1</u>	<input type="checkbox"/> Standard Trench <input type="checkbox"/> Elev. Sand Trench	b. A detailed plot plan and sewage system design (including plan reviews and cross sections). See the instructions on the reverse side for required details. Indicate the number of attached sheets <u></u>
<input type="checkbox"/> Aerobic Tank(s)	<input checked="" type="checkbox"/> Seepage Bed <input type="checkbox"/> Elev. Sand Bed	4. Type of Sand Filter
<input type="checkbox"/> Chemical Toilet	<input type="checkbox"/> Pressure Dose <input type="checkbox"/> Subsurf. Sand	<input type="checkbox"/> Buried <input type="checkbox"/> Free Access
<input type="checkbox"/> Composting Toilet	<input type="checkbox"/> Alternate	5. Type of Disinfection
<input type="checkbox"/> Incinerating Toilet	<input type="checkbox"/> Experimental	<input type="checkbox"/> Erosion <input type="checkbox"/> Hypo
<input type="checkbox"/> Recycling Toilet	<input type="checkbox"/> IRSIS	
<input type="checkbox"/> Holding Tank		Comments:
<input type="checkbox"/> Vault Privy		

## PART IV SIGNATURES

I am the owner of record (or the authorized agent of the owner) of the lot described in Part I of this application. I intend to install an on-lot sewage system on this property. The information provided as part of this application is true and correct to the best of my knowledge. I understand that providing false information on this application is subject to the penalties of 18 PA C.S.A. §4904, relating to unsworn falsification to authorities. Submission of this form grants authorized representatives from the local agency and/or the Department access to the lot to inspect and conduct tests of 1) the site; 2) the system and structures under construction; 3) the completed sewage system; and, 4) the operational status of the system.

Property Owner's Signature [Signature] Date 12/12/02

The information in this application is true and correct to the best of my knowledge.

Enforcement Officer Signature [Signature] Date 1/29/04Certification No. 00176





# SITE INVESTIGATION AND PERCOLATION TEST REPORT FOR ON-LOT DISPOSAL OF SEWAGE

Application No. \_\_\_\_\_ Municipality Upper Makefield Twp. County Bucks  
 Site Location Tax Parcel #47-9-1-1 & 47-9-19-1 Subd'n Name London Court

☒ SUITABLE Soil Type A/A Slope 0-3% Limiting Zone 84+" Ave. Perc. Rate 13.48  
☐ UNSUITABLE ☐ Mottling ☐ Seeps or Pooled Water ☐ Bedrock ☐ Fractures ☐ Coarse Fragments ☐ Perc. Rate  
☐ Slope ☐ Unstabilized Fill ☐ Floodplain ☐ Other \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETION OF THIS FORM ARE LOCATED ON THE REVERSE

SOILS DESCRIPTION: DeVal Soil & Environmental  
 Soils Description Complete by: Consultants, Inc. / MDW Date: 12-12-01

Inches	PIT #44	Description of Horizon	Additional Pits
Ap 0 TO 10 "		10YR 3/3, loam, weak massive subangular blocky, friable, abrupt/smooth boundary	#43 = 84"+
Bw 10 TO 23 "		10YR 5/4, cobbly loam, weak massive subangular blocky, friable, and gradual/wavy boundary	Depth to Limiting Zone:
C 23 TO 84 "		extremely gravelly sand, structureless single grain, loose	84+ Inches
TO "			
TO "			

PERCOLATION TEST: DeVal Soil & Environmental  
 Percolation Test Completed by: Consultants, Inc. / JMD Date: 1-25-02

Weather Conditions: ☐ Below 40 F ☐ 40 F or above ☒ Dry ☐ Rain, Sleet, Snow (last 24 hours)  
 Soil Conditions: ☐ Wet ☒ Dry ☐ Frozen

Hole No.	*** Yes No		Reading Interval	Reading No. 1: Inches of drop	Reading No. 2: Inches of drop	Reading No. 3: Inches of drop	Reading No. 4: Inches of drop	Reading No. 5: Inches of drop	Reading No. 6: Inches of drop	Reading No. 7: Inches of drop	Reading No. 8: Inches of drop
1		X	10 / XX	5.500	3.000	1.875	2.375	3.000	3.500	5.000	3.750
2	X		XX / 30	4.625	4.875	4.625	4.000	4.000	3.500	3.500	3.125
3	X		XX / 30	4.125	4.000	3.875	3.500	4.125	4.250	4.000	3.000
4	X		XX / 30	2.000	2.125	2.125	1.875				
5	X		XX / 30	1.000	0.875	1.000	1.000				
6	X		XX / 30	2.500	2.500	2.500	2.375				

\*\*\*Water remaining in the hole at the end of the final 30 minute presoak? Yes, use 30 minute interval; No use 10 minute interval.

### Calculation of Average Percolation Rate:

Hole No.	Drop during final period	Perc. Rate as Minutes/Inch
1	3.750 "	2.67
2	3.125 "	9.60
3	3.000 "	10.00
4	1.875 "	16.00
5	1.000 "	30.00
6	2.375 "	12.63
TOTAL OF MIN/IN.		80.90 =
TOTAL No. OF HOLES		6

Depth of Hole  
 12-24 " 13.48 Min  
 12-24 " Inch  
 12-24 " Min  
 12-24 " Inch  
 12-24 " Min  
 12-24 " Inch

The information provided is the true and correct results of tests conducted by me, performed under my personal supervision, or confirmed in a manner approved by the Department.

(S) Carol  
 Sewage Enforcement Officer

