



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

A. Facility Information

Robert Recchia

Owner Name

Edgewater Drive

Street Address

Dover

City

MA

State

Map 5, Lot 23 – Lot 45 on Site Plan

Map/Lot #

02030

Zip Code

B. Site Information

1. (Check one) New Construction Upgrade

2. Soil Survey NRCS WebSoilSurvey
Source

Raynham silt loam
Soil Map Unit

30
Soil Series

Outwash deltas/ terraces/ plains, kame terraces
Landform

More than 80 inches
Soil Limitations

Sandy outwash derived from granite, gneiss, and/or quartzite
Soil Parent material

3. Surficial Geological Report 2018, Stone
Year Published/Source

Flood-plain alluvium
Map Unit

Sand, gravel, silt and some organic material, stratified and well sorted to poorly sorted, beneath the flood plains of modern streams
Description of Geologic Map Unit:

4. Flood Rate Insurance Map Within a regulatory floodway? Yes No

5. Within a velocity zone? Yes No

6. Within a Mapped Wetland Area? Yes No

If yes, MassGIS Wetland Data Layer:

7. Current Water Resource Conditions (USGS): 10/5/2022
Month/Day/ Year

Range: Above Normal Normal Below Normal

Wetland Type

8. Other references reviewed: MA-DVW 10R DOVER, MA U.S, Geological Survey
(Zone II, IWPA, Zone A, EEA Data Portal, etc.)



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

Deep Observation Hole Number: TP45-4 11/12/2022 9:15 AM Partly sunny, high 42.25955 -71.28573
Hole # Date Time Weather Latitude Longitude

1. Land Use Woodland, vacant lot Trees and Shrubs None 1%
(e.g., woodland, agricultural field, vacant lot, etc.) Vegetation Surface Stones (e.g., cobbles, stones, boulders, etc.) Slope (%)

Description of Location: Southeast portion of parcel

2. Soil Parent Material: Sandy outwash derived from granite, gneiss, and/or quartzite Outwash deltas/terraces/ plains, kame terraces Plain
Landform Position on Landscape (SU, SH, BS, FS, TS, Plain)

3. Distances from: Open Water Body 50+ feet Drainage Way 50+ feet Wetlands 50+ feet
 Property Line 10+ feet Drinking Water Well 100+ feet Other feet

4. Unsuitable Materials Present: Yes No If Yes: Disturbed Soil/Fill Material Weathered/Fractured Rock Bedrock

5. Groundwater Observed: Yes No If yes: Depth to Weeping in Hole Depth to Standing Water in Hole

Soil Log

Depth (in)	Soil Horizon /Layer	Soil Texture (USDA)	Soil Matrix: Color-Moist (Munsell)	Redoximorphic Features			Coarse Fragments % by Volume		Soil Structure	Soil Consistence (Moist)	Other
				Depth	Color	Percent	Gravel	Cobbles & Stones			
0-9	A	Sandy Loam	10YR3/2		Cnc : Dpl:				Granular	Friable	
9-15	B	Medium Sand	10YR4/4		Cnc : Dpl:				Massive	Friable	
15-22	C1	Medium Sand	5Y4/4	15	Cnc :7.5Y5/8 Dpl:	20%			Single Grain	Loose	
22-94	C2	Blocky Fine Loamy Sand	5Y6/3	22	Cnc :5Y7/1 Dpl:	30%			Massive	Friable	
					Cnc : Dpl:						
					Cnc : Dpl:						



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Additional Notes:
No Refusal.

D. Determination of High Groundwater Elevation

1. Method Used (Choose one):

Depth to soil redoximorphic features

Obs. Hole # TP45-4

15 inches

Obs. Hole # TP45-5

32 inches

Depth to observed standing water in observation hole

_____ inches

_____ inches

Depth to adjusted seasonal high groundwater (S_h)
(USGS methodology)

_____ inches

_____ inches

Index Well Number _____

Reading Date _____

$$S_h = S_c - [S_r \times (OW_c - OW_{max}) / OW_r]$$

Obs. Hole/Well# _____ S_c _____ S_r _____ OW_c _____ OW_{max} _____ OW_r _____ S_h _____

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 (exclude O, A, and E Horizons)?

Upper boundary: 15
inches

Lower boundary: 94
inches

c. If no, at what depth was impervious material observed?

Upper boundary: _____
inches

Lower boundary: _____
inches



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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 15.107.

Signature of Soil Evaluator

Scott Goddard, 893

Typed or Printed Name of Soil Evaluator / License #

Mike Angieri

Name of Approving Authority Witness

Date

11/9/22
6/30/2025

Expiration Date of License

Dover Board of Health

Approving Authority

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](#).

Field Diagrams: Use this area for field diagrams:



Commonwealth of Massachusetts
 City/Town of Dover
Percolation Test
Form 12

Percolation test results must be submitted with the Soil Suitability Assessment for On-site Sewage Disposal. DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

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



A. Site Information

Robert Recchia
 Owner Name

Edgewater Drive (Assessors Map 5, Lot 23) - Lot 45 on Site Plan
 Street Address or Lot #

Dover MA 02030
 City/Town State Zip Code

Scott Goddard 508-393-3784
 Contact Person (if different from Owner) Telephone Number

B. Test Results

	<u>10/12/22</u> Date	<u>9 AM</u> Time	<u>10/12/22</u> Date	<u>10:18 AM</u> Time
Observation Hole #	<u>TP45-4</u>		<u>TP45-5</u>	
Depth of Perc	<u>34"</u>		<u>40"</u>	
Start Pre-Soak	<u>9 AM</u>		<u>10:18AM</u>	
End Pre-Soak	<u>9:15AM</u>		<u>10:33AM</u>	
Time at 12"	<u>9:15AM</u>		<u>10:33AM</u>	
Time at 9"	<u>9:30AM</u>		<u>10:44AM</u>	
Time at 6"	<u>10:32AM</u>		<u>11:02AM</u>	
Time (9"-6")	<u>62 minutes</u>		<u>18 minutes</u>	
Rate (Min./Inch)	<u>21 MPI</u>		<u>6 MPI</u>	
	Test Passed: <input checked="" type="checkbox"/>		Test Passed: <input checked="" type="checkbox"/>	
	Test Failed: <input type="checkbox"/>		Test Failed: <input type="checkbox"/>	

Scott Goddard, 893
 Test Performed By:

Mike Angieri, Dover Board of Health
 Board of Health Witness

Comments:



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Range: Above Normal

Wetland Type

Normal

Below Normal

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1. Method Used (Choose one):

Depth to soil redoximorphic features

Obs. Hole # TP45-3

Obs. Hole #

27 inches

inches

Depth to observed standing water in observation hole

_____ inches

_____ inches

Depth to adjusted seasonal high groundwater (S_h)
(USGS methodology)

_____ inches

_____ inches

Index Well Number _____

Reading Date _____

$$S_h = S_c - [S_r \times (OW_c - OW_{max}) / OW_r]$$

Obs. Hole/Well# _____

S_c _____

S_r _____

OW_c _____

OW_{max} _____

OW_r _____

S_h _____

E. Depth of Pervious Material

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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 (exclude O, A, and E Horizons)?

Upper boundary: 27
inches

Lower boundary: 110
inches

c. If no, at what depth was impervious material observed?

Upper boundary: _____
inches

Lower boundary: _____
inches

F. Certification



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