FAX TRANSMITTAL SHEET

Prudential
New Jersey Properties

Princeton Office
138 Nassau Street
Princeton, NJ 08542
Bus: 609.430.1288 Fax: 609.688.9694

Our Mission: To be New Jersey's premier provider of comprehensive real estate services.

To: Hopewell Township Date: 3-31-06

From: Blanche Paul #of Pages (including cover) 6

Subject: 1 Hart Ct.

Fax#: 609-737-6836 Phone #

Comments:

Septic inspection report.

If you have any questions, please call

Blanche Paul
908-963-6084 cell

INTEGRITY | SUCCESS | EXCELLENCE | DEPENDABILITY | ENERGY

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92/10.06

Pillar to post

ONSITE SYSTEM INSPECTION FORM

Inspection Overview
- Preliminary system information
- Inspection of treatment tanks
- Absorption system inspection
- Disposal/conveyance system assessment
- Identification of any alternative technology approved components
  Requires additional inspection

INTERNAL USE ONLY:

Client Info

Client Name: Karen Bennett

Different from owner? (X) yes () no

Client Address:
45 Hawk Road
Lawrence, NJ 08648

Contact Method:
home tel.
work tel.
e-mail

System Location

Inspector Name: Tom O'Connor

Date: March 18, 2006

ISSDS Address (including municipality):
1 Hart Court
Titusville, NJ 08560

New Jersey Coordinate: **Block:** 92 **Lot:** 10.06

Was GPS used? () yes (X) no

Preliminary Information:

Weather: Clear

Last Precipitation: None in past 5 days.

Age of system: 17

Type of dwelling?
(X) Residential
() Non-residential

Number of Bedrooms: 4
Describe:

How many systems are being inspected? 1

List any commercial activities or high impact hobbies:
None reported.

Describe prior problems and/or repair history including soil fracturing or use of chemical additives. Include dates and explain why the remedial measures have been applied to the system (if available): None reported.

Date file review requested with administrative authority:
March 18, 2006

	Yes	No
Is there a site plan or septic map available?	(X)	()
Is the dwelling currently being occupied?	()	(X)
If so, how many occupants?		
If no, date last occupied? Vacant 8 months.		
If there is a washing machine, is it connected to a separate gray water disposal system?	()	(x)
Is the dwelling free of additional gray water systems?	(X)	()
Is the dwelling free of garbage disposal system?	()	(X)
Is the dwelling free of sump pump discharges to the system?	(X)	()
Is the dwelling free of any historical sewage back ups into the structure?	(X)	()
Does all sewage enter the septic system and no type of sewage bypass exists?	(X)	()
Septic Tank Pumping:		
Is the septic tank pumped regularly?	(X)	()
Frequency: Every 2 years.		
Date of last pumping: 1 year ago.		
Was a file review completed prior to inspection?	(X)	()
If no, explain why:		

Comments: The property has been vacant for the past 8 months. This limits the inspection findings as normal hydraulic loading of the system did not occur prior to the inspection. We cannot predict how the system will function when the property is occupied.

TOWNSHIP of HOPEWELL

DEPARTMENT of HEALTH

Serving Hopewell Borough and Pennington Borough

201 WASHINGTON CROSSING – PENNINGTON ROAD
TITUSVILLE, NEW JERSEY 08560-1410

Telephone 609-737-0120 / Fax 609–737-2770

April 4, 2006

Letter of Review
Septic & Well

Clifford & Mary Stanley
1 Hart Court
Titusville, NJ 08560

RE: Block 92, Lot 10.06 (1 Hart Court)
Septic & Well Review

Dear Property Owner,

This office has received and reviewed the septic and well inspection reports for the sale of the above referenced property. The results are as follows:

1. **The water from the potable well meets federal, state and local safe drinking water regulations.**

2. **The septic inspection report indicates the system was functioning satisfactorily at the time of inspection.**
   It was noted that the disposal field has become overgrown. This office strongly encourages the disposal area be cleared of overgrowth and grass be maintained over the system. No heavy equipment should be operated over the system.

Based on the information provided to this office, a final is hereby granted.

Your attention to this matter is appreciated. You may contact this office at (609) 737-0120 with any questions you may have regarding this matter. Our office hours are Monday through Friday, 8:30 - 4:30.

Sincerely,

Robert B. English
R.E.H.S.

NJAL Lab ID# 18211

New Jersey Private Well Water Test Reporting Form

Mary Clifford Stanley

H2O Pb water

New Jersey Analytical Laboratories

1580 Reed Road
Suite 1 A
Pennington, NJ 08534

Tel: (609) 737-3477
Fax: (609) 737-3052
www.njal.com

The New Jersey Well Test Reporting Form is a standardized form to be used exclusively by laboratories reporting well test results to their client in accordance with the Private Well Testing Act Regulations N.J.A.C. 7:9E.

These laboratory analyses were completed for the purposes of complying with the Private Well Testing Act. In accordance with the Private Well Testing Act Regulations all analytical results except for coliform (total, fecal, or e.coli) shall remain valid for a period of one year from the date of sample collection. All coliform (total, fecal, or e.coli) analytical results shall remain valid for a period of six months from the date of sample collection.

- [x] Analytical results meet primary and secondary contaminant standards for drinking water.
- [ ] One or more of the analytical results do not meet primary+ contaminant standards for drinking water.
- [ ] One or more of the analytical results do not meet secondary++ contaminant standards for drinking water.

Client Information

Name: Clifford & Mary Stanley
Mailing Adress: 15 Players Lane, Princeton, NJ 08540
Date Test Requested: 3/13/06

Property Information

Property Adress: 1 Hart Court
Municipality: Hopewell Township
Muni Code (4 digit): 1106
County: Mercer
Lot: 10.06
Block: 92
GPS Location-State Plane coordinates (feet): X: 400151 Y: 539208
GPS Coordinate Location (circle one): Well Head / Front Door / Sample Collection Point / Other
NJ Well Permit or Well Record Number (if known)

Laboratory Information

Reporting Laboratory Name & ID #: *New Jersey Analytical Laboratories, LLC #11005*
Reporting Laboratory Address & Phone #: *1580 Reed Road ~ Pennington, NJ 08534*
Tel: 609-737-3477

Sample Information:

Sample Collector Name: David Jackson
Authorized Representative/Certified Laboratory Employee Lab Certification ID #: 11005
Sample Type: ***NOTE:* Only raw or untreated water samples meet the requirements of the PWTA regulations N.J.A.C. 7:9E.**
a.) Indicate Specific Location of Sample collected: Kitchen Tap
b.) Type of Treatment Device(s) Installed (if known):

(+) Primary Drinking Water contaminants are those contaminants that have Maximum Contaminant Levels or Action Levels established to protect health. The Primary Drinking Water contaminants are coliform bacteria, nitrate (total), lead, the volatile organic compounds, arsenic, mercury and gross alpha. The standards for primary contaminants are the maximum permissible levels allowed in drinking water based on ingesting the drinking water over the course of a lifetime.
(++) Secondary Drinking Water contaminants are those contaminants that have Recommended Upper Limits or Optimum Ranges established to protect against those properties that adversely effect the taste, odor, or appearance of drinking water. The Secondary Drinking Water contaminants are iron, manganese and pH.

Precision testing for a cleaner environment.

Muni Code: 1106 Property Lot: 10.06 Block: 92

NJAL Lab ID# 18211

New Jersey Private Well Water Test Reporting Form

New Jersey Analytical Laboratories

The New Jersey Well Test Reporting Form is a standardized form to be used exclusively by laboratories reporting well test resultsto their client in accordance with the Private Well Testing Act Regulations N.J.A.C. 7:9E.

These laboratory anlayses were completed for the purposes of complying with the Private Well Testing Act.

SUMMARY OF WELL WATER TEST RESULTS:

Required Test Required	Result	Units	Applicable Standard Maximum Contaminant Level Action Level or Limit	Standard Exceeded (Y/N)	Laboratory Certification ID #	Analytical Method
Microbial Parameters						
Total Coliform	<1	Pres/Abs	0 (not present)	N	11005	SM9222B
*E. coli**	<1	Pres/Abs	0 (not present)	N	11005	SM9222B
Metals						
Arsenic #	1.8	ug/l	5 ug/l	N	11005	EPA 200.9
Mercury ^	NA	ug/l	2 ug/l	NA	NA	NA
Lead**	<1.0	ug/l	5 ug/l **	N	11005	EPA 200.9
Iron	<0.05	mg/l	0.3 mg/l	N	11005	SM 3111B
Manganese	<0.01	mg/l	0.05 mg/l	N	11005	SM 3111B
General Chemistry						
pH	7.40	su	6.5-8.5 (optimum range)	N	11005	EPA 150.1
Nitrate (total)	2.600	ug/l	10.000 ug/l	N	11005	EPA 300
Volatile Organics						
Benzene	<0.1	ug/l	1 ug/l	N	11005	EPA 524.2
Carbon Tetrachloride	<0.1	ug/l	2 ug/l	N	11005	EPA 524.2
meta-Dichlorobenzene	<0.2	ug/l	600 ug/l	N	11005	EPA 524.2
ortho-Dichlorobenzene	<0.1	ug/l	600 ug/l	N	11005	EPA 524.2
para-Dichlorobenzene	<0.1	ug/l	75 ug/l	N	11005	EPA 524.2
1,1-Dichloroethane	<0.1	ug/l	50 ug/l	N	11005	EPA 524.2
1,2-Dichloroethane	<0.1	ug/l	2 ug/l	N	11005	EPA 524.2
1,1-Dichloroethylene	<0.1	ug/l	2 ug/l	N	11005	EPA 524.2
cis-1,2-Dichloroethylene	<0.1	ug/l	70 ug/l	N	11005	EPA 524.2
trans-1,2-Dichloroethylene	<0.1	ug/l	100 ug/l	N	11005	EPA 524.2
1,2-Dichloropropane	<0.1	ug/l	5 ug/l	N	11005	EPA 524.2
Ethylbenzene	<0.1	ug/l	700 ug/l	N	11005	EPA 524.2
Methyl tertiary-butyl ether	<0.3	ug/l	70 ug/l	N	11005	EPA 524.2
Methylene Chloride	<0.2	ug/l	3 ug/l	N	11005	EPA 524.2
Monochlorobenzene	<0.1	ug/l	50 ug/l	N	11005	EPA 524.2
Naphthalene	<0.4	ug/l	300 ug/l	N	11005	EPA 524.2
Styrene	<0.1	ug/l	100 ug/l	N	11005	EPA 524.2
1,1,2,2-Tetrachloroethane	<0.3	ug/l	1 ug/l	N	11005	EPA 524.2
Tetrachloroethylene	<0.1	ug/l	1 ug/l	N	11005	EPA 524.2
Toluene	<0.5	ug/l	1,000 ug/l	N	11005	EPA 524.2
1,2,4-Trichlorobenzene	<0.3	ug/l	9 ug/l	N	11005	EPA 524.2
1,1,1-Trichloroethane	<0.1	ug/l	30 ug/l	N	11005	EPA 524.2
1,1,2-Trichloroethane	<0.5	ug/l	3 ug/l	N	11005	EPA 524.2
Trichloroethylene	<0.2	ug/l	1 ug/l	N	11005	EPA 524.2
Vinyl Chloride	<0.1	ug/l	2 ug/l	N	11005	EPA 524.2
Xylenes (total)	<0.1	ug/l	1,000 ug/l	N	11005	EPA 524.2
Radiological Parameters						
Gross Alpha (initial)~	3.39	pCi/L	5 pCi/L	N	NY009	NJAC7:18-6
Gross Alpha (final)~	NA	pCi/L	15 pCi/L	NA	NA	NA

UNITS: *Pres/Abs=presence or absence; ug/l= micrograms per liter (also known as parts per billion); mg/l=milligrams per liter (also known as parts per million); pCi/l=picocuries per liter; su=standard units.*

** If total coliform bacteria are detected then additional analyses are required to determine the specific type (fecal or E. coli) present. Fecal coliform or E. coli analysis are not required if total coliform sample results indicate the absence of total coliform bacteria.*

*** The results of a "flushed" raw (untreated) water sample, which is required by the Private Well Testing Act regulations, should be compared to the Ground Water Quality Standard of 5 ug/l found at N.J.A.C.7: 9-6 et seq. The Lead Action Level of 15 ug/l applies to a one liter first-draw tap sample collected from a cold water kitchen or bathroom tap/sink in which the water has remained motionless in the plumbing system for at least six hours [40 CFR 141.86(b)(2)]. This type of standing-water sample is NOT required by the Private Well Testing Act regulations.*

 # Arsenic analysis is required in Bergen, Essex, Hudson, Hunterdon, Mercer, Middlesex, Morris, Passaic, Somerset and Union counties. A new MCL of 5 ug/l took effect 1/23/06.

^ Mercury analysis is required only in Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Monmouth, Ocean, and Salem counties.

~ Gross alpha particle activity testing will be required in Cumberland and Gloucester counties starting March 15, 2003; Atlantic, Burlington, Camden and Salem counties starting September 16, 2003; Cape May, Hunterdon, Mercer, Middlesex, Monmouth and Ocean counties starting March 16, 2004. If the initial Gross alpha particle count exceeds 5 pCi/l a second count is required according to the Method. The MCL for Gross alpha particle activity is 15 pCi/l.

Precision testing for a cleaner environment.

 Muni Code: 1106 Property Lot: 10.06 Block: 92

NJAL Lab ID# 18211

New Jersey Private Well Water Test Reporting Form

New Jersey Analytical Laboratories

The New Jersey Well Test Reporting Form is a standardized form to be used exclusively by laboratories reporting well test results to their client in accordance with the Private Well Testing Act Regulations N.J.A.C. 7:9E.
These laboratory analyses were completed for the purposes of complying with the Private Well Testing Act.

ADDITIONAL SAMPLE INFORMATION:

Coliform Analyses:		
Date/Time Sample Collected: 3/14/06, 1110	Date/Time Sample Analyzed: 3/14/06, 1720	Sample ID Number: 18211
Date/Time Sample Collected	Date/Time Sample Analyzed:	Sample ID Number:
Volatile Organics:		
Date/Time Sample Collected: 3/14/06, 1110	Date/Time Sample Analyzed: 3/17/06, 1835	Sample ID Number: 18211
Inorganics:		
Date/Time Sample Collected: 3/14/06, 1110	Date/Time Sample Analyzed: 3/14/06, 1835	Sample ID Number: 18211
Date/Time Sample Collected	Date/Time Sample Analyzed:	Sample ID Number:
pH Analysis:		
Date/Time Sample Collected: 3/14/06, 1100	Date/Time Sample Analyzed: 3/14/06, 1100	Sample ID Number: 18211
Gross Alpha Analyses:		
Date/Time Sample Collected: 3/14/06, 1110	Date/Time Sample Analyzed: 3/16/06, 0409	Sample ID Number: 18211
Date(s) All Analyses Received by Reporting Lab from Subcontracted Lab (if applicable):		

CERTIFICATION OF RESULTS:

I certify in writing that all sampling, analyses, and reporting performed herein, comply with all requirements set forth in N.J.A.C. 7:9E and N.J.A.C. 7:18, and hereby certify that this laboratory is in compliance with all laboratory certification and quality control procedures and requirements as set forth in N.J.A.C. 7:18.

Laboratory Manager or Designee — Date: 3-23-06

ADDITIONAL INFORMATION:

I. Treatment Options

Listed below are the common treatments available to homeowners having well contamination above a Maximum Contaminant Level, Action Level or Recommended Limit. The goal of water treatment is the removal of contaminants to levels below the Maximum Contaminant Level, Action Level or Recommended Limit. For additional information on home treatment devices contact you local/county health department or the NJDEP Private Well Testing Act Hotline at **1-866-4PW-TEST** or visit the Private Well Testing Act webpage at *www.state.nj.us/dep/pwta* for links to other appropriate websites, such as National Sanitation Foundation *www.nsf.org* or USEPA's drinking water website *www.epa.gov/safewater.* You may also call the USEPA Drinking Water Hotline at (800) 426-4791 to obtain a copy of USEPA's pamphlet entitled "Home Water Treatment Units" (WH-550A). All treatment devices must be properly maintained in accordance with manufacturer recommendations to ensure operating efficiency in removing contaminants. As noted below, not all treatment devices remove every contaminant; there may be more than one device installed if multiple contaminants exist in the drinking water. Water treatment companies may be found by consulting the yellow pages of your local area phone book.

Precision testing for a cleaner environment.

 Muni Code: 1106 Property Lot: 10.06 Block: 92

New Jersey Private Well Water Test Reporting Form

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These laboratory analyses were completed for the purposes of complying with the Private Well Testing Act

SUMMARY OF TREATMENT OPTIONS FOR HOMEOWNERS

Treatment Type	Contaminants Treated
Activated Carbon Filtration	Some Organic Chemicals
	Taste
	Trihalomethanes
	Some Pesticides
	Odor
Air Stripping	Volatile Organic Compounds (higher concentrations)
	Iron (with filtration)
	Hydrogen Sulfide
	Radon Gas
Chlorinators	Bacteria (Coliform)
	Microbiological Contamination
Distillation	All Inorganic Chemicals (i.e., Nitrate, Sodium Chloride)
	Some Organic Chemicals
Ion Exchange	Hard Water (Water Softening)
	Manganese
	Some Heavy Metals
	Calcium
	Iron
Reverse Osmosis	Certain Organic Chemicals
	Nitrates
	Dissolved Solids/Metals
Mechanical Filtration	Turbidity
	Dirt
	Sediment
	Particulates (Loose Scale)
Bottled Water	Temporary Solution to Aesthetic Problems & Emergency Situations
KDF-55 with pH adjustment	Mercury
Ultraviolet Radiation	Bacteria (Coliform)
	Microbiological Contamination

II. Health Effects

Drinking water standards are established to protect consumers of drinking water from both adverse health effects (primary drinking water standards) and from qualities that make the water unpalatable (secondary drinking water standards). Both NJDEP and USEPA set drinking water standards: those in effect in New Jersey can be found at www.state.nj.us/dep/watersupply. Both NJDEP and USEPA periodically review this list and add or subtract contaminants based on new scientific information. Standard setting is summarized in a brochure entitled "Standards for Safe Drinking Water in New Jersey" available by calling **1-866-4PW-TEST.**

There are several resources available to assist in interpreting your test results. An informative booklet explaining drinking water results written by Rutgers Cooperative Extension Service entitled "Interpreting Drinking Water Quality Analysis - What do the Numbers Mean? - 5th edition" is available at www.rce.rutgers.edu/pubs/pdfs/e214.pdf. Health effects information developed by the USEPA is summarized at www.epa.gov/safewater/mcl.html. The New Jersey Department of Health and Senior Services, in conjunction with NJDEP's Bureau of Safe Drinking Water and Division of Science Research and Technology, has developed a series of brochures for drinking water and health that can be found at www.state.nj.us/health/eoh/hhazweb/edmat.html.

New Jersey Private Well Water Test Reporting Form

The Private Well Test Reporting Form is a standardized form to be used exclusively by laboratories reporting well test results to their client in accordance with the Private Well Testing Act Regulations N.J.A.C. 7:9E.

These laboratory analyses were completed for the purposes of complying with the Private Well Testing Act.

III. Recommendations for Additional Testing

The Private Well Testing Act regulations require well water samples to be collected from untreated or "raw" water. Raw water quality represents the well water quality. Additional water testing may be conducted to determine the effectiveness of a water treatment system or to determine if the distribution system (pipes) may be contributing additional contamination. In those cases sampling of treated or finished water at the tap is recommended. This additional testing of treated water is not required under the Private Well Testing Act regulations. For example, testing of finished water to determine the effectiveness of a treatment system to remove contaminants for a known, pre-existing water quality problem would be desirable. Below are recommendations for additional testing.

Scenario One: There is an existing treatment system or device installed at the house or building due to a known pre-existing water quality problem and raw water testing indicates that one or more parameters are above a Maximum Contaminant Level, Action Level, or Recommended Limit. NJDEP recommends that a second water sample be collected for the parameter(s) of concern at a location after the treatment system or device at a primary tap to insure that the system or device is working properly in removing or reducing the contaminants to below the applicable Maximum Contaminant Level, Action Level, or Recommended Limit.

Scenario Two: After testing, total and fecal coliform bacteria are found to be above the Maximum Contaminant Level. The well is subsequently treated via chlorine disinfection. Re-testing is recommended after a chlorine residual can no longer be detected to insure the effectiveness of the treatment.

Scenario Three: **/FOR LEAD ANALYSIS ONLY/** (**Note:** The Private Well Testing Act regulations require that a "flushed" sample be collected for lead analysis meaning the well water was run to remove any water that may have been in contact with the plumbing for an extended period of time). ***In scenario three,*** the flushed, untreated sample, collected at the tap, indicates there is lead contamination greater than 5 ug/l. The state's ground water quality standard of 5 ug/l is the more appropriate standard to apply to a "flushed" water sample rather than the drinking water Action Level of 15 ug/l, which is based on sampling drinking water that has been allowed to remain in the plumbing for at least six hours.

If the interested party wants to better evaluate the level of potential lead contamination from the plumbing system, a "first draw" (non-flushed) sample should also be analyzed for lead. This "first draw" water sample may likely contain the highest level of lead to which one is likely to be exposed. The results of this sample should be compared to the lead Action Level of 15 ug/l. Results above 15 ug/l mean that there is a source of lead in the home plumbing system. The interested party may install treatment to make the water less corrosive and less likely to dissolve lead from the plumbing; may attempt to locate the source of the lead and remove it from the home plumbing system or may choose to run the water through the plumbing (or selected faucets) each morning to insure that the standing water is flushed through the pipes and is not consumed.

IV. Remediation/Treatment Funding Sources

A.) The **Spill Fund Program** administered by the Bureau of Contract and Fund Management within the New Jersey Department of Environmental Protection offers help to innocent parties suffering from direct or indirect damages resulting from the discharge of a *hazardous substance*. A property owner may file a claim for reimbursement for most of the expenses incurred to install a treatment device for a potable well or to connect to a public water supply because of a hazardous substance in the well water. A claimant has 1 year from the date he/she learns that the well is contaminated above standards to file a claim. There are specific requirements and guidelines for filing claims with the Spill Fund. For more information, please contact the NJDEP-Bureau of Contract and Fund Management at: 609-777-0101 or visit their website at: *www.state.nj.us dep.srp* or you may write to the BCFM: NJDEP-BCFM/Spill Fund, P.O. Box 413, 401 E. State Street, Trenton, N.J. 08625-0413.

B.) The **New Jersey Housing and Mortgage Finance Agency** (NJHMFA) has a Potable Water Loan Program that is available to owners of single family residences whose source of potable water exceeds the State of New Jersey's Primary Drinking Water Standards, including lead and mercury. In addition, the loan program covers iron and manganese although these contaminants do not have Primary Drinking Water Standards. For further information, please contact the NJHMFA Hotline at 1-800-NJHOUSE (1-800-654-6873) or they may be reached at: P.O. Box 18550, 637 South Clinton Avenue, Trenton, N.J. 08650-2085 or on the web at: *www.state.nj.us dca hmfa*

Pillar To post
Professional Home Inspection

ONSITE SYSTEM INSPECTION FORM

Inspection Overview
- Preliminary system information
- Inspection of treatment tanks
- Absorption system inspection
- Disposal/conveyance system assessment
- Identification of any alternative technology approved components

Requires additional inspection

INTERNAL USE ONLY:

Client Info

Client Name: Karen Bennett

Different from owner? (X) yes () no

Client Address:
45 Hawk Road
Lawrence, NJ 08648

Contact Method:
home tel.
work tel.
e-mail

System Location

Inspector Name: Tom O'Connor

Date: March 18, 2006

ISSDS Address (including municipality):
1 Hart Court
Titusville, NJ 08560

New Jersey Coordinate: **Block:** 92 **Lot:** 10.06

Was GPS used? () yes (X) no

Preliminary Information:

Weather: Clear

Last Precipitation: None in past 5 days.

Age of system: 17

Type of dwelling? Built as a
(X) Residential Number of Bedrooms: 4
() Non-residential Describe:

How many systems are being inspected? 1

List any commercial activities or high impact hobbies:
None reported.

Describe prior problems and/or repair history including soil fracturing or use of chemical additives. Include dates and explain why the remedial measures have been applied to the system (if available): None reported.

Date file review requested with administrative authority:
March 18, 2006

	Yes	No
Is there a site plan or septic map available?	(X)	()
Is the dwelling currently being occupied?	()	(X)
If so, how many occupants?		
If no, date last occupied? Vacant 8 months.		
If there is a washing machine, is it connected to a separate gray water disposal system?	()	(x)
Is the dwelling free of additional gray water systems?	(X)	()
Is the dwelling free of garbage disposal system? Not included in Septic	()	(X)
Is the dwelling free of sump pump discharges to the system?	(X)	()
Is the dwelling free of any historical sewage back ups into the structure?	(X)	()
Does all sewage enter the septic system and no type of sewage bypass exists?	(X)	()
Septic Tank Pumping:		
Is the septic tank pumped regularly?	(X)	()
Frequency: Every 2 years.		
Date of last pumping: 1 year ago.		
Was a file review completed prior to inspection?	(X)	()
If no, explain why:		

Comments:
The property has been vacant for the past 8 months. This limits the inspection findings as normal hydraulic loading of the system did not occur prior to the inspection. We cannot predict how the system will function when the property is occupied.

Treatment Tank:

Type of system being inspected?
(X) Septic tank () Cesspool () Other _____
() Gray water (X) Multi-compartment: # 2 compartments
Name the material of the system?
(X) Concrete () Block
() Steel () Other _____

Approximate Treatment Tank Volume: 1,250 gal.
Evaluate the conditions of tank below:

	Satisfactory	Unsatisfactory	N/A
Top and Lids	(X)	()	()
Inlet baffle	(X)	()	()
Outlet baffle	(X)	()	()
Cracks or Leaks	(X)	()	()
Sewage Flow from structure	(X)	()	()

	Yes	No
Main tank lid opened for inspection?	(X)	()
Liquid level below the tank's inlet invert?	(X)	()
Liquid level below the tank's outlet invert?	(X)	()
Treatment tank pumped for this inspection?	(X)	()
Are all portions of the tank(s) clear of structures like a deck or driveway?	(X)	()
Is the area clear of evidence that sewage has surfaces above the treatment tank?	(X)	()
Does water flow unimpeded from the treatment tank?	(X)	()
Is an effluent filter a part of the system?	()	(X)
If yes, does it appear properly maintained?	()	()
Are there any other types of accessory units present?	()	(X)

Depth to top of tank: At grade.
Depth to top of tank access: At grade.
Comments: _____

Absorption Area:

Name the type of the absorption system?
(X) disposal bed () disposal trench
() seepage pit () mounded
() cesspool () other _____

Was the absorption system located? (X) yes () no If no, explain below.

Are inspection ports present? () yes (X) no

If yes, how many? _____

Were the inspection ports checked? () yes* () no (X) N/A *All levels observed must be included in report.

Was a separate probe dug in the absorption area to confirm the observations in the inspection ports? (X) yes () no () N/A

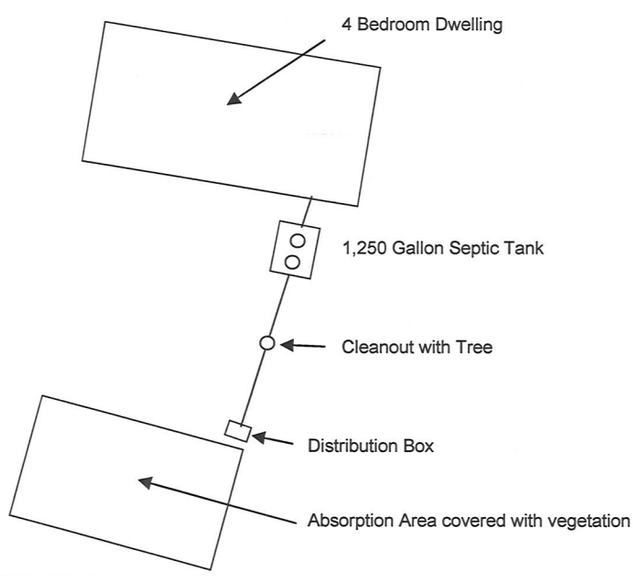
Is the area of the absorption system free of sewage odors? (X) yes () no
Does sewage flow from the treatment tank to the absorption area without flowing back? (X) yes () no () N/A
Is the area above or near any of the system components free from visible signs of effluent or sewage? (X) yes () no
Are the areas at or near the inlet invert of any absorption area component free of visible signs of sewage or effluent? (X) yes () no
Are areas above or near system components free of lush vegetation? (X) yes () no
If exposed, is the distribution box in satisfactory condition? (X) yes () no () N/A
If not exposed, explain why not: _____
Is the area directly over any part of the absorption system free of any evidence of, large objects (cars, pools, etc.)? (X) yes () no

Comments: There is extremely heavy vegetation on the absorption area. All vegetation should be removed from the absorption area. There should only be grass on the absorption area.

Professional Home Inspection
Pillar To Post

Sketch the approximate system location in this space provided:

Hart Court



Dosing or Pump Tank:	Yes	No	N/A
Does the system contain a pump tank?	()	(X)	()
Is the pump operation?	()	(X)	()
Do the alarm(s) on the pump work?	()	(X)	()
Is the pump elevated above the tank floor?	()	(X)	()
Is the lid in satisfactory condition?	()	(X)	()
Is the tank in satisfactory condition?	()	(X)	()
Is the tank free of accumulated solids?	()	(x)	()

Summary:	Satisfactory	Satisfactory with Concerns	Unsatisfactory	Requires Additional Investigation	N/A
Condition of the treatment tank(s)	(X)	()	()	()	()
Condition to the conveyance and pump system(s)	(X)	()	()	()	()
Condition of the absorption area(s)	(X)	()	()	()	()
Condition of any accessory components	()	()	()	()	(X)

Comments: Remove all vegetation from the absorption area and remove the tree from the cleanout.

Health Department Reporting:

Note if any of the following conditions were observed during the inspection:

() 1. Ponding or breakout of sewage or effluent onto the surface of the ground.
() 2. Seepage of sewage or effluent into portions of buildings below ground.
() 3. Backup of sewage into the building served which is not caused by a physical blockage of the internal plumbing.
() 4. Any manner of leakage observed from or into septic tanks, connecting pipes, distribution boxes and other components that are not designed to emit sewage or effluent.

Pursuant to N.J.A.C. 7:9A-3.4 notification of any observation that is consistent with a condition noted above should be reported to the local administrative authority within 24 hours of the observation. Regardless of observations made, a copy of this report should be provided to the local administrative authority within 10 days of the issuance of this report.

If encountered, describe all observed noncompliant conditions during this inspection:

_____
_____
_____
_____
_____
_____

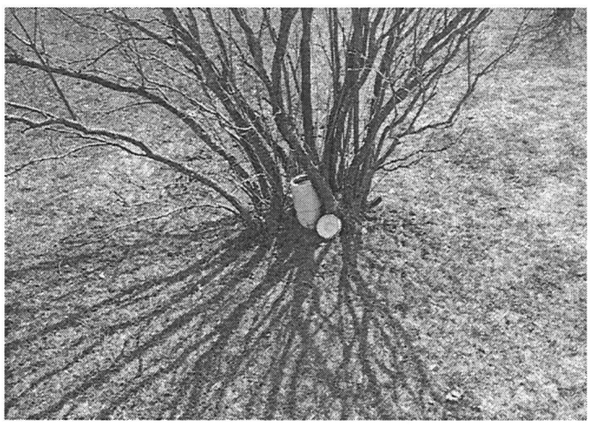
Customer authorization:
I authorize "The Company" to enter the above listed property for the purpose of performing a sub-surface sewage disposal system inspection. I authorize "The Company" to expose parts of the system if required, to determine location and condition. I understand that "The Company" relies on information supplied by the owner(s) of the listed property of their agent and the local administrative authority in the evaluation of the sub-surface disposal system. I authorize "The Company" to provide this form to all parties as required.

Customer signature: On File Printed name: Karen Bennett

Inspector's signature: Tom O'Connor Printed name: Tom O'Connor

Disclaimer:
Based on today's observations and the information provided by the owner(s) of their agent, "The Company" submits this sub-surface sewage disposal system inspection form. The inspection is based on the current condition of the onsite sewage disposal system. "The Company" makes no representation that the system was designed, installed or meets N.J.A.C. 7:9A1.1 et seq.. "The Company" has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time. Because of numerous factors inability of "The Company" to supervise or monitor the use and maintenance of the system, this form shall not be construed as a warranty expressed or implied, arising from the inspection of the septic system.

This from was developed as a cooperative effort of:
Pennsylvania/New Jersey Sewage Management Association;
Rutgers Cooperative Extension New Jersey Agricultural Experiment Station; and
The New Jersey Department of Environmental Protection Septic System Inspection Protocol Subcommittee



Tree at cleanout.

Heavy vegetation on absorption area.

PRINCETON JUNCTION ENGINEERING CO.

PROFESSIONAL ENGINEERS AND LAND SURVEYORS
NORTH POST ROAD, P.O. BOX 223
PRINCETON JUNCTION, N.J. 08550

609-799-1906 609-799-1963

PERCOLATION TEST RESULTS

ORDERED BY Richard Greene DATE 2/12/80

FOR Hopewell Valley Properties Ass. WEATHER 32° Sunny

SHEET 21

BLOCK 92

MUNICIPALITY Hopewell Twp. LOT ~~29 Preliminary Pla~~ New Lot 81

NO. OF TEST HOLES 4

NO. OF TESTS TO DETERMINE SATURATION 3
RESULTS IN MINUTES PER INCH 1"/3min

COMMENTS:

#29-3 1"/3min. 81" Deep

#29-4 1"/3min. 76"

Inspector Angelo Lanzi

11087
P.E. LIC. NO. 11087

2/12/80
DATE

SKETCH OF TEST HOLE LOCATIONS	SOIL LOG
See Attached Map For Location	0"
	10" Top Soil
	35" Reddish Brown Clay
	64" Reddish Clay w/ Small Frac. Shale
	127" Red Frac. Shale w/ Clay

Hole [illegible]

LOT - 27
HOLE - 1
Total - [illegible]
Shelf - 60"

Fill Wall @ 10:51

FF FP
2/12/80 32° SUNNY
[illegible]

HOLE - 2
Total - 60"
Shelf - [illegible]

Fill Wall @ 11:18

Soil Log - 2-13-80
0" — 18" Top Soil
18" — 35" Reddish Brown Clay
35" — 64" Reddish Clay w/ small frag. shale
64" — 100" Red frag. shale mixed w/ clay - DRY

Recorded

LOT - 29

Hole - 3 S-72" Total [illegible]
Fill - Wall @ 11:51
R - Drg @ 12:50
2-13-80 F - 0" @ 9:30 AM
R - 4" @ 9:31
F - 0" @ 9:31 3 3½/11min
R - 3½" @ 9:32
F - 0" @ 9:32 3 3½/11min
R - 3½" @ 9:33
F - 0" @ 9:33 3 3½/11min
R - 3½ @ 9:34
Fill 0" @ 9:34 + Test
6 11/16 min 1/3 Bond
R - 6" @ 9:35 min

LOT 29 - 4 CONT
R - 2¾ @ 9:44
F - 0" @ 9:44
R - 2¾ @ 9:45
F - 0" @ 9:45 + Test
R - 4" @ 9:46
F - 6" @ 10:05 [illegible]
1" w/ 3 min

Hole - 4 S-67 Total - 76
Fill - Wall @ 12:00
R - Drg @ [illegible]
Fill 0" @ 9:38 AM 2-13-80
R 3½" @ 9:39 3
F 0" @ 9:39
R 3¼" @ 9:40
F 0" @ 9:40
R 3¼" @ 9:41
F 0" @ 9:42
R 2¾ @ 9:43
F 0" @ 9:43

Copy

TOWNSHIP OF HOPEWELL

DEPARTMENT OF HEALTH

Route 546 and Scotch Road
Titusville, NJ 08560

Block 92, Lot 10.06

Location: Hart Court

Date: April 11, 1988

Re: Sewage Disp. Application

Pennington Crossing Assoc.
P.O. Box 236
Princeton Jct., NJ 08550

Dear Gentlemen:

Your application for an individual sewage disposal system for the subject property has been reviewed by this office and must be denied for the following:

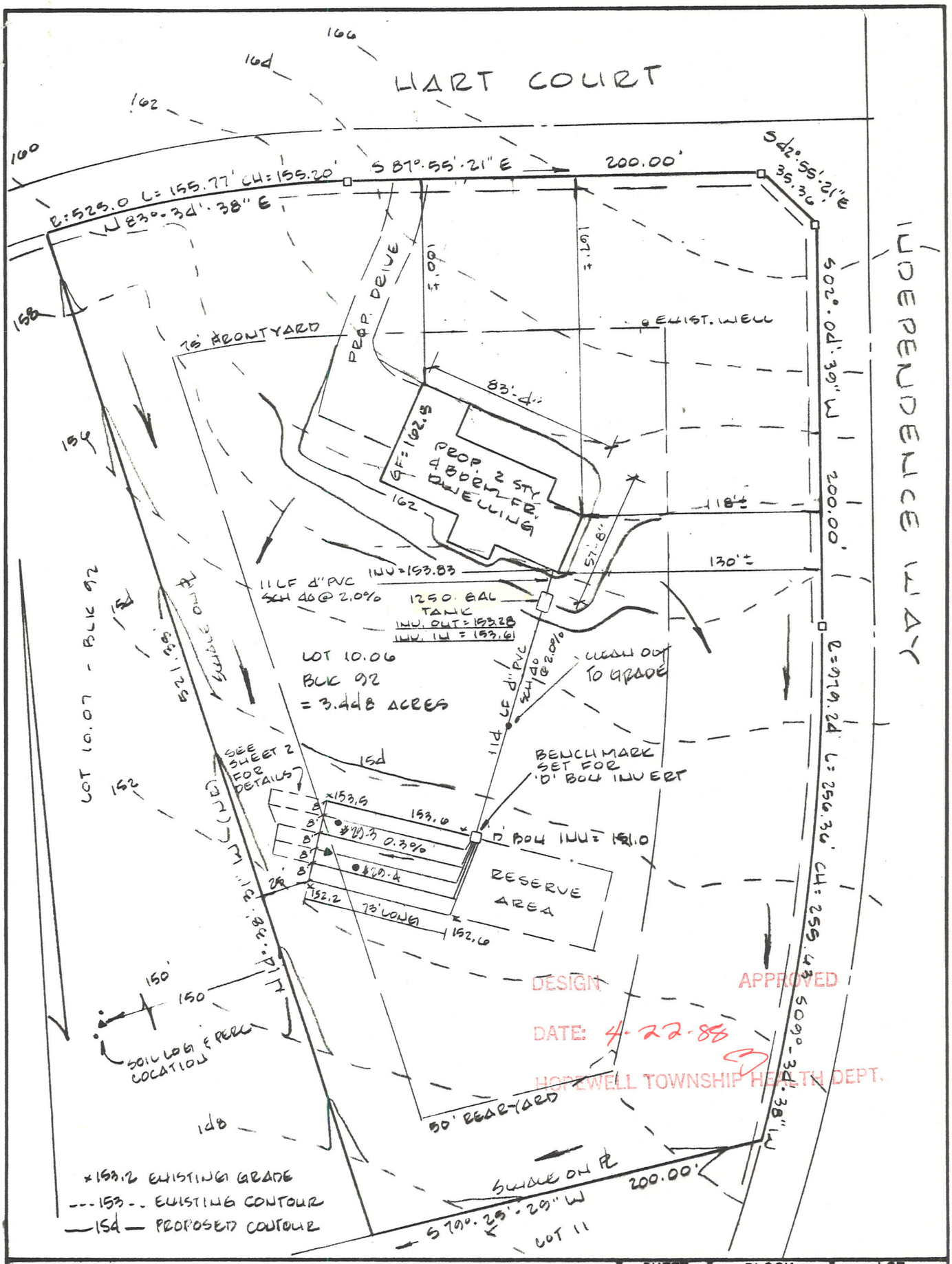
1. Septic tank to be increased to 1,250 to allow for either design.

2. Disposal depth to be increased to 96 inches to provide 24 inch zone of disposal.

Very truly yours,

Gary A Guarino
Registered Sanitarian

GAG/ss



FRANK L. QUINBY PE & LS #11087

SHEET	BLOCK	LOT
	92	10.06

PRINCETON JCT. ENGINEERING CO.
PROFESSIONAL ENGINEERS & LAND SURVEYORS
P.O. BOX 223 NORTH POST RD.
PRINCETON JUNCTION, NEW JERSEY 08550
(609) 799 1906 (609) 799 1963

PLOT PLAN & SEPTIC DESIGN
OF LOT 10.06 - BLK 92 FOR
PENNINGTON CROSSING, ASSOC.
HOPEWELL TWP. MERCER CO. NEW JERSEY

FRANK L. QUINBY	P.E. & L.S.	NO.	11087
BRYCE M. RITTENHOUSE	P.E. & L.S.	NO.	13453
ARNOLD RYDEN, JR.	L.S.	NO.	21223
D. GEOFFREY BROWN	P.E.	NO.	24327
WESLEY J. LANE	L.S.	NO.	30747

Frank L. Quinby 3/28/88
DATE

DRAWN	DATE
DL	3/25/88
CHECK	
FJF	
REV. 3/31/88	SCALE 1"=60'

CERTIFIED AS CORRECT TO:

FOR BLDG PERMIT ONLY.

4/21/88 AS PER MEMO 4-11-88

129304
GARDEN STATE REPROGRAPHICS

There are no existing wells or septic systems within 200' of proposed septic system.

The well must be 100' min. from any septic system.

Driveway slopes shall not be greater than 10%.

No heavy equipment allowed in construction area of disposal bed.

All trees within 10' of disposal bed area shall be removed prior to construction.

No water courses, flood plains, or wells occur within 100' of proposed disposal area.

Filter sand shall have a clay content(finer than .002 mm) which shall not be less than 5% of more than 12% (by weight) of the portion of soil finer than 2.0 mm. Coarse fragments larger than ¼ inch diameter shall not exceed 15% by volume of the material used for sandy filters.

PERCOLATION TEST AND SOIL LOG WERE PERFORMED BY FRANK L. QUINBY PE & LS #11087 ON 2-12-80

PERCOLATION TEST RESULTS

DESIGN RATE 1"/20 MIN.

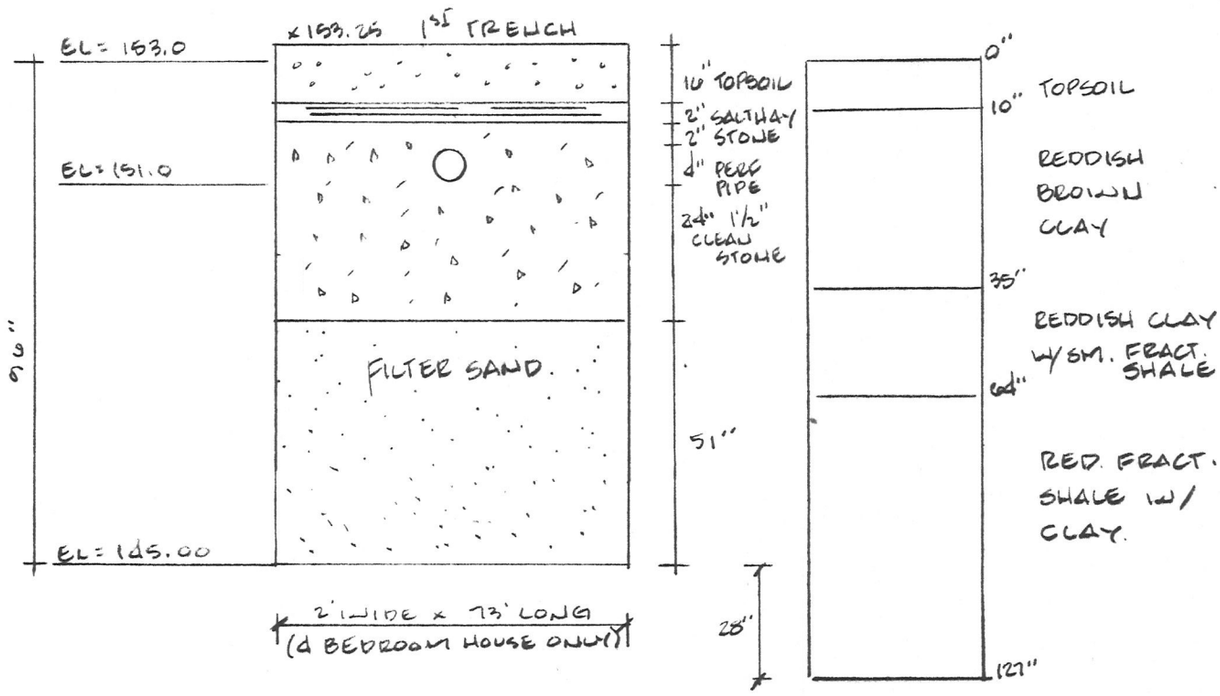
HOLE	DEPTH	RATE
#29-3	81"	1"/3MIN.
#29-4	76"	1"/3MIN.

IF DWELLING CHANGES TO 5 BEDROOM INCREASE LATERALS TO THE FOLLOWING LENGTHS:

LATERAL #1 & 2	27'	(100' TOTAL)
#3	20'	(93' TOTAL)
#4 & 5	19'	(92' TOTAL)

TRENCH DETAIL & SOIL LOG DATA

N.T.S.



FRANK L. QUINBY PE & LS #11087

SHEET	BLOCK	LOT
	92	10.06

PRINCETON JCT. ENGINEERING CO.
PROFESSIONAL ENGINEERS & LAND SURVEYORS
P.O. BOX 223 NORTH POST RD.
PRINCETON JUNCTION, NEW JERSEY 08550
(609) 799 1906 (609) 799 1963

SEPTIC DESIGN DETAILS
OF LOT 10.06 - BLK 92 FOR
PENNINGTON CROSSING, ASSOC.
HOPEWELL TWP. MERCER CO. NEW JERSEY

FRANK L. QUINBY P.E. & L.S. NO. 11087
BRYCE M. RITTENHOUSE P.E. & L.S. NO. 13453
ARNOLD RYDEN, JR. L.S. NO. 21223
D. GEOFFREY BROWN P.E. NO. 24327
WESLEY J. LANE L.S. NO. 30747

Frank L. Quinby 3/28/88
DATE

DRAWN	DATE
DL	3/25/88
CHECK	
FJF	
REV. 4/21/88	SCALE N.T.S.

CERTIFIED AS CORRECT TO:

FOR BLDG. PERMIT ONLY

129304
GARDEN STATE REPROGRAPHICS

TOWNSHIP OF HOPEWELL
HEALTH DEPARTMENT

Route 546 and Scotch Road
Titusville, NJ 08560

April 22, 1988

Pennington Crossing Assoc.
P.O. Box 236
Princeton Jct., NJ 08550

Re: Block 92, lot 10.06

Your application for an onsite subsurface sewage disposal system has been approved with the following conditions:

1. A copy of this letter must be forwarded to your construction contractor and sewage disposal installer prior to installation of said system.

2. The house location must be staked by a licensed surveyor or professional engineer to assure proper location and elevation as represented on the attached plan.

3. The sewage disposal system must be located and staked prior to installation by a licensed surveyor or professional engineer to guarantee the proper alignment of the system in the area of the soil tests, and to insure it will conform to all site restrictions as represented on the attached design.

4. The required elevation of the sewage disposal system should be verified by the licensed professional engineer or surveyor, the builder and the plumbing contractor as it relates to the foundation height, the point where the sewer line exits the dwelling and the height of the septic tank. If this is a gravity system and the minimum height of the sewer line is not maintained, an ejector system will be required after the septic tank.

5. An onsite conference is required with your installer and a representative from this office prior to installation of any part of this system. This should avoid any problem during the installation which can be costly to all parties concerned.

6. The design engineer must be notified at the beginning of the installation. Field measures must be made

LOT #31 REVISIONS

FOR BOARD OF HEALTH

HART COURT
(50' ROW)

R=525.0 L=155.77' CH=155.20'
N 83°-34'-38" E

S 87°-55'-21" E → 200.00'

25' ±

35.36'

S 42°-55'-21" E

S 02°-04'-39" W

200.00'

R=979.24 L=256.36 CH=255.43 S 09°-34'-38" W

INDEPENDENCE WAY
(50' ROW)

S 70°-25'-29" W 200.00'

N 11°-38'-38" W (JR)

S 21'

120.7'

75' FRONTYARD

EXIST WELL

151.6'

111.9'

157.32'

2 STY FR DWELLING

87.3'

102.0'

37'

40.5'

TANK

221'

C.O.

151'

169'

158'

168'

218'

CLEANOUT

PERC

73'

'2' BOX

PERC

PERC

RESERVE AREA

LOT 10.06
BLK 92
=3.448 AC

50' REAR YARD

LOT 10.07 - BLK 92

N 11°-38'-38" W

FILED MAP NORTH

REFERENCE PLAN

REF'NG LOT-10.06,
"PENNINGTON CROSSING ASSOCIATES, INC."
FILED 7/20/87 AS MAP
NO. 2849.

AS BUILT DESIGN
DATE: 12/16/88
HOPEWELL TOWNSHIP HEALTH DEPT.

Installed 4 bedroom 576 sq ft

FRANK L. QUINBY PE & LS #11087	SHEET	BLOCK	LOT
		92	10.06

PRINCETON JCT. ENGINEERING CO.
PROFESSIONAL ENGINEERS & LAND SURVEYORS
P.O. BOX 223 NORTH POST RD.
PRINCETON JUNCTION, NEW JERSEY 08550
(609) 799 1906 (609) 799 1963

SEPTIC AS-BUILT
OF LOT 10.06 BLK 92 FOR
PENNINGTON CROSSING, ASSOC.
HOPEWELL TWP. MERCER CO NEW JERSEY

FRANK L. QUINBY	P.E. & L.S.	NO	11087
BRYCE M. RITTENHOUSE	P.E. & L.S.	NO	13453
ARNOLD RYDEN, JR.	L.S.	NO	21223
D. GEOFFREY BROWN	P.E.	NO	24327
WESLEY J. LANE	L.S.	NO	30747

Frank L. Quinby 6-27-88
DATE

DRAWN	DATE
DG	6/27/88
CHECK	SCALE
FJF	1"=60'
REV. 12/14/88	

CERTIFIED AS CORRECT TO:

RECEIVED
DEC 15 1988
HOPEWELL TOWNSHIP HEALTH DEPT.

GARDEN STATE REPROGRAPHICS

* SHOW LATERALS ON SYSTEM

Office Use Only

Permit No. 11200

Date: 11-24-87

Fee Received $50.00

BOARD OF HEALTH OF HOPEWELL TOWNSHIP
ROUTE 546, TITUSVILLE, NEW JERSEY 08560

APPLICATION FOR PERMIT TO LOCATE AND CONSTRUCT AN INDIVIDUAL WATER SUPPLY AND SYSTEM OR ALTER AN EXISTING WATER SUPPLY SYSTEM.

SECTION A

Owners Name (print) Jim Boyd

Present Address P.O. Box 236 Princeton Jct Telephone

Location of property for which this application is made Harding Hill Homes Block 92 Lot 10.06

Name of Contractor or well driller Walter R Travis Inc.

Address 1650 Pennington Rd Telephone 882-3107

Contractor [signature] signature Owner J Boyd signature

SECTION B

Inspection of construction was made on the following date 4-11-88

Length of Casing 60 Method of grouting of annular space Pressure Grout

Installation and construction of well is certified to be in accordance with Hopewell Township Ordinance and N.J.D.E.P. Standards for Construction of Public non-community and non-public water systems.

[signature] Inspector

SECTION C

WELL DATA AS COMPLETED

N.J. State well drilling permit # 27-09411 dated Nov 1987

Length of casing (to extend 12" min. above Final Grade) 63 ft.

Depth 150 ft.

Water level below top of casing 60 ft.

Diameter of Well 6 in.

Estimated capacity of well 30 gpm

Length of pumping test 4 hr.

I certify that the above information is correct and the well has been drilled, sealed, and disinfected according to the latest Hopewell Township Ordinance.

4-14-88	Jerry Travis	614
Dated	Well driller	License #

Pump Data

Type of Pump submersible

Manufacturer Goulds

Model 18EM

Horse power 1½ H.P.

Number of Stages 11

Lowest Possible Setting 130 ft.

Actual Pump Setting 100 ft.

Depth of jet below top of casing ft.

Tank Data

Type of Tank X-Trol

Capacity 201 - 120 gal.

Manufacturer X-Trol

Type of Pipe plastic

I certify the above information is correct and the installation has been in accordance with manufacturer specifications and all required codes.

This must be completed and filed prior to issuance of a certificate of occupancy.

RECEIVED
DEC 20 1988
HOPEWELL TOWNSHIP HEALTH DEPT

[signature] Pump Installer 614 License No.

Form DWR-138
11/85

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

WELL RECORD

Well Permit No. 27 _ 00411
Atlas Sheet Coordinates 27 : 14 : 657

OWNER IDENTIFICATION - Owner BOYD, JIM
Address P.O. BOX 236
City PRINCETON JCT State NJ Zip Code

WELL LOCATION - If not the same owner please give address. Owner's Well No.
Address 31 Hart ct
County Mercer Municipality HOPEWELL TWP Lot No. 10.05 Block No. 92

WELL USE Domestic Status New

WATER USE Domestic Average 300 gals. daily Maximum 600 gals. daily

WELL CONSTRUCTION Date well completed 4 / 11 / 88
BOREHOLE DIMENSIONS Depths: Total 150 ft. Finished 150 ft.
Diameter: Top 6" in. Bottom 6" in.
Land Surface Elevation at well 190 ft. Elevation was determined using Topographic map
Casing Height (stick-up) above land surface 2 ft.

	DEPTH TO TOP (FT.)	LENGTH (FT.)	DIAMETER (IN.)	TYPE AND MATERIAL *Screens: Note Slot Size(s)*
Casing 1		63'	6"	steel - w/ drive shoe
Casing 2				
Casing 3				
Screen 1				
Screen 2				
Tail Piece				
Gravel Pack				
Grout				
Grouting Method	cement Grout bottom - Top			

RECEIVED
DEC 20 1988
HOPEWELL TOWNSHIP HEALTH DEPT

WELL FLOWS NATURALLY gals. per min. at ft. above the land surface.
Water rises to ft. above the land surface.

RECORD OF TEST Test Date 4 / 14 / 88
Static water-level before pumping 60 ft. below land surface. Water level 65 ft. below land surface after 687 hrs. of pumping.
Water level was measured using Depth Gauge Drawdown 5 ft.
Discharge rate measured using Bucket Discharge Rate 15 gals. per min. 63
Well was pumped using Submersible Specific Capacity gals. per min. per ft. of drawdown 150
Observed effects on nearby wells None
Water Quality (taste, odor, color, etc.) Good 60

PERMANENT PUMPING EQUIPMENT Installed by Walter P. Travis Inc Pump Type Submersible
Mfrs. Name Gatts Model 4VPFM 30
CAPACITY: Pump delivers 13 GPM at 50 PSI pressure.
POWER: 1hp HP at 3450 RPM Power Source Electric 4
DEPTHS: Pump 100 ft. Footpiece ft. Airline ft.
FLOW METER: Model installed on in. diameter pipe.

WALTER P. TRAVIS, INC.

CONTRACTOR - Name of Drilling Contractor
Address 4054 Bloomington Rd Jerry Travis 614
City Trenton State N.J. Zip Code 08618
Name of Driller Jerry Travis License No. 614

Signature of Contractor Submersible Date 100 11 / 4 / 88

COPIES: *White - DEP* *Canary - Driller* *Pink - Owner* *Goldenrod - Health Dept.*

13 Em

Form DWR-138
11/85

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES

WELL RECORD

Well Permit No. 27 – 01111
27: 14: 657

Driller: Please use the space below for the log description. Note water bearing zones or geological formation.

Are samples available? ☐ Yes ☒ No

Drilling Method Rotary

Type of Rig Schramm

Aquifer/Geo. Fm. Brunswick Shale

LOG

0-3' Sub Soil
3-150 - Brunswick Shale

DEP USE ONLY

Storet Hydrogeo Code _____
USGS Hydrogeo Code _____
Depth to Bedrock _____ ft.
Bedrock Lith. Code _____
Bedrock Fm. Code _____

Completed by _____
Date ____ / ____ / ____

Thick.	Lith.	Fm.

GWPI No. ____ - _____ NJPDES No. _____ - ____

Latitude ____ ° ____ ' ____ " Longitude ____ ° ____ ' ____ "

Lat-Long Accuracy ☐ 1" ☐ 5" ☐ 10" ☐ 20"

USGS Quadrangle _____

Drainage Basin Code _____ County/Municipality Code _____

OTHER FILES: ☐ Lithologic Log ☐ Samples Available ☐ Aquifer Test ☐ Water Level Data
☐ Geophysical Logs ☐ Water Chemistry ☐ Pollution Case

Checked by _____ Date ____ / ____ / ____

RECEIVED
DEC 20 1988
HOPEWELL TOWNSHIP HEALTH DEPT

DWR-133 (5/85)

Mail to
Water Allocation
CN 029
Trenton, N.J. 08625

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES
TRENTON, N.J.

Permit No. 27097 6

PERMIT TO DRILL WELL

VALID ONLY AFTER APPROVAL BY THE D.E.P.

27.14.6.5M

Owner: Jim Boyd
Address: P.O. Box 236
Princeton Jct N.J. 08550

Name of Facility: Harding Hill Homes
Address: Hart crt.
Titusville N.J.

Driller: Walter P. Travis Inc.
Address: 1650 Pennington Rd
Trenton N.J.

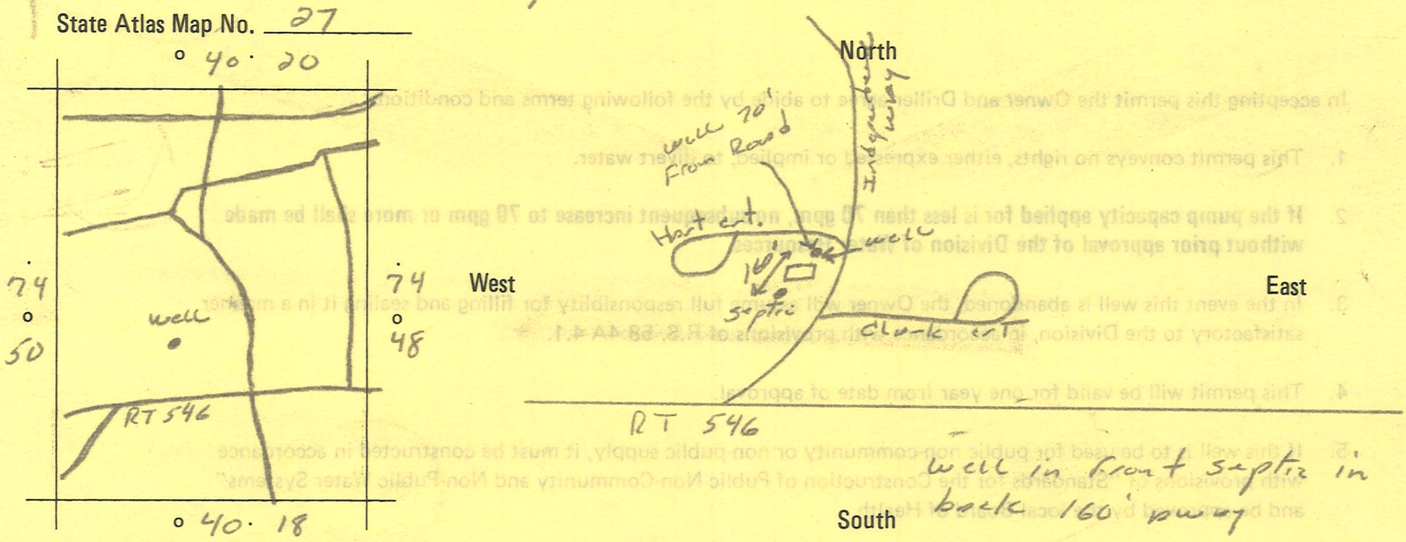
Diameter of Well 6 *Inches*	Proposed Depth of Well 200 *Feet*
Proposed Capacity of Pump 7 *GPM*	Method of Drilling *(cable-tool, rotary, etc.)*
Use of Well *(See Reverse)* Domestic - New	

LOCATION OF WELL

Lot #	Block #	Municipality	County
10.06	92	Hopewell Twp.	Mercer

State Atlas Map No. 27

Draw sketch showing distance and relations of well site to nearest public roads, streets, septic systems, etc.



well in front septic in back 160' away

SEE REVERSE SIDE for IMPORTANT PROVISIONS AND REGULATIONS pertaining to this permit. APPROVAL of this permit is made SUBJECT TO acceptance of and compliance with the following ADDITIONAL CONDITIONS.

- ☐ Pinelands - Well must be drilled over 100' deep or a clay layer at least 4' in thickness must be encountered.
- ☐ It is necessary that Geophysical Logs of this well be made. Permanent pumping equipment SHALL NOT be installed until such logs are made.
- ☐ Authorization by rule under N.J.A.C. 7:14A-1 et seq.
- ☐ Samples of cuttings required every _____ feet or change in material.
- ☐ The results of a volatile organic scan mut be obtained prior to using the water and submitted to _____.
- ☐ **Domestic Potable Water Supply** - The service line for water from the public community water supply system shall be turned off at the curb cock, and the meter shall be removed by the water purveyor.
- ☐ **Domestic Irrigation Supply** - No piping from the well for which the permit applies shall enter any building.
- ☐ **Industrial/Commercial Supply** - A physical connection permit shall be obtained pursuant to the provisions of N.J.A.C. 7:10-10-1 et seq., and a vigorous cross connections control program shall be instituted and maintained within the premises.
- ☐ **Heat Pump Wells** - Wells must be 50 feet apart and the water must be returned to the same aquifer as the production well.
- ☐ _____

This Space for Approval Stamp

WELL PERMIT APPROVED
NOV 30 1987
DEPT. ENV. PROTECTION
DIV. OF WATER RESOURCES
WATER ALLOCATION

RECEIVED
DEC 3
Hopewell Township Health Dept.

In compliance with R.S. 58:4A-14, application is made for a permit to drill a well as described above.

Date Nov 17 1987 Signature of Owner J. Boyd

COPIES: Water Allocation – White Health Dept. – Yellow Owner – Blue Driller – White

WALTER P. TRAVIS, Inc.

Well Drilling Contractors :: Domestic and Industrial Pumps and Repairing
Water Conditioners and Purifiers

1650 PENNINGTON ROAD — TRENTON, N. J. 08618
Telephone: (609) 882-3107

April 18, 1988

APR 18 1988

Pennington Crossing
Harding Hill Homes
Lot: 10.06 Block: 92

4 Hour Pump Test

4 Bedrooms 3 Baths

TIME	WATER LEVEL	GPM
9:00	60'	15
10:00	62'	15
11:00	62'	15
12:00	62'	15
1:00	62'	15

WELL DRILLED	4/11/1988
WELL TESTED	4/15/1988
WELL DEPTH	150'
CASING	63'
PUMP SETTING	100'

Jerry Travis, President
Walter P. Travis Inc

PERRITT
LABORATORIES

Post Office Box 147
Hightstown, New Jersey 08520
(609) 443-4848

Sent 12-14

RECEIVED
DEC 16 1988
HOPEWELL TOWNSHIP HEALTH DEPT.

Report to: Harding Hill Homes
P.O. Box 236
Princeton Junction, NJ 08550
Date: December 8, 1988
Sample of: Drinking Water - Chlorine Test, Negative
Property: 1 Hart Court - Block 92, Lot 10.06, Lot #31
Sample Date: December 5, 1988
Sampled by: Rick Jakober of Perritt Laboratories

OBJECTIVE

The above water sample was analyzed to determine:

pH
Iron
Nitrate
Manganese
Coliform Bacteria

METHODS

The pH is determined with a Corning Model 10 pH Meter. Iron is determined by the Phenanthroline Method. Nitrate is determined by the EPA approved Cadimum Reduction Method. Manganese is determined by the Persulfate Method. Coliform Bacteria is analyzed by the Most Probable Number Method. Procedures are cited in Standard Methods for the Examination of Water.

Need Iron Letter

	RESULTS	STANDARDS
pH	6.65	6.5 - 8.5
Iron	0.920 PPM	0.30 PPM
Nitrate	11.74 PPM	45.0 PPM
Nitrate-Nitrogen	2.65 PPM	10.0 PPM
Manganese	0.045 PPM	0.05 PPM
Coliform Bacteria	0/100ml	0/100ml

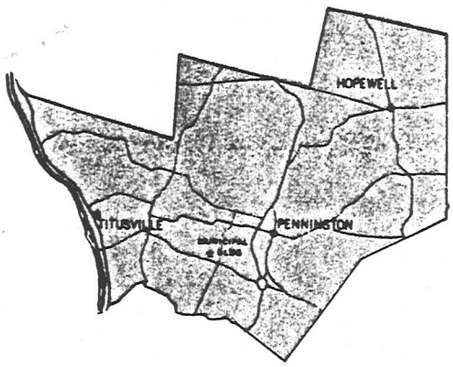
Submitted by:
PERRITT LABORATORIES, INC.

Alexander M. Perritt

Alexander M. Perritt, Ph.D.
President

N.J. State Department of Environmental Protection
Certification #11147

Microbiology • Package Testing • Water Analyses • Consulting



TOWNSHIP of HOPEWELL

MERCER COUNTY

RT. 546 & SCOTCH ROAD ■ TITUSVILLE, NEW JERSEY 08560

December 20, 1988

Pennington Crossing Assoc.
P.O. Box 236
Princeton Jct., N.J. 08550

Re: Block 92, Lot 10.06

Dear Gentlemen:

A copy of your well water sample has been received from a New Jersey DEP certified laboratory.

The level of Iron has exceeded the State secondary water quality standard. It is recommended that treatment be provided, however it is not required since these standards are for aesthetics only.

If you have any questions in regard to this matter, please contact the Health Department at 737-0120.

Very truly yours,

Gary A. Guarino
Senior Sanitarian

cc: Construction Office

Hopewell Township Health Department
201 Washington Crossing Pennington Road
Titusville, NJ 08560
609-737-0120

RECEIVED
MAR 30 2006
Hopewell Township Health Dept

APPLICATION FOR LETTER OF REVIEW
Onsite Well Water System

Block 92 Lot 10.06 Location 1 HART COURT

Transfer/Tenancy/Change in Use (Circle one) Date Apr. 13, 2006 Fee $25.00 received 3/30/06 #6882

Property Owner CLIFFORD + MARY STANLEY

Owner's Address 15 PLAYERS LANE

City Princeton State NJ Zip 08540 Phone 609-924-9171

Legal Agent for owner Peter O'Neill Phone 609-924-0700

Fax 609-924-4622 E-mail

Purchaser/Tenant
Name Nolan + Karen Bennett
Purchaser/Tenant
Address 45 Hawk RD

City Lawrenceville State NJ Zip 08648 Phone

Legal Agent for Purchaser Frederick Kiegel Phone 908-904-9132

Fax 908-904-4559 E-mail

Ordinance BH 2003-1 There shall be no transfer of real property, change in the use or change in tenancy of a property which utilizes an onsite public or private well water system for its potable water supply until the Administrative Authority or its authorized representative shall have issued a Letter of Review stating that the water system complies or does not comply with water quality standards specified by the NJ Safe Drinking Water Act N.J.S.A. 58:12A-1 et seq. and implementing rules N.J.A.C. 7:10 and the Private Well Testing Act Regulations N.J.A.C.7: 9E and any other parameters as specified by the Health Officer based on known contamination in this area. Effective October 1, 2003

This application must be completed and submitted **10 business days** prior to transfer of properties, occupancy or changes in use or change in tenancy and include the name and address of all persons owning, purchasing or leasing the property upon which the well is located.

Make check for **$25** payable to Hopewell Township.

Transfer of real property:

An original Laboratory Report provided by a NJDEP certified laboratory, plus a chain of custody must accompany this application. The laboratory must indicate if the water exceeds any maximum

Hopewell Township Health Department

201 Washington Crossing Pennington Road
Titusville, NJ 08560
609-737-0120

RECEIVED
MAR 30 2006
Hopewell Township Health Dept

APPLICATION FOR LETTER OF REVIEW

Onsite Sewage Disposal System

Block 92 Lot 10.06 Location 1 Hart Court

Transfer/Tenancy/Change in Use (Circle one) Date Apr. 13, 2006 Fee $25.00 received 3/30/06 #6881

Property Owner Clifford + Mary Stanley Phone 609-924-9171

Owner's Address 15 Players Lane

City Princeton State N.J Zip 08540 FAX

Legal Agent for owner Peter O'Neill Phone 609-924-0700

Fax 609-924-4622 E-mail

Purchaser/Tenant
Name Nolan + Karen Bennett Phone

Purchaser/Tenant
Address 45 Hawk Rd.

City Lawrenceville State NJ Zip 08648 FAX

Legal Agent for Purchaser Frederick Kiegel Phone ~~to~~ 908-904-9132

Fax 908-904-4559 E-mail

Ordinance BH 2003-1 There shall be no transfer of real property, change in the use or change in tenancy of a property which utilizes an onsite sewage disposal system until the Administrative Authority or its authorized representative shall have issued a Letter of Review stating that the sewage disposal system complies or does not comply with the requirements of this ordinance and are in addition to and not in lieu of any applicable federal and state laws and regulations. In the event that any present or future federal or state law or regulation imposes standards more stringent than the requirements of this ordinance, the more stringent standards shall govern. The requirements of this ordinance shall pertain to all onsite subsurface sewage disposal systems in Hopewell Township, whether the property served is used for residential, commercial, agricultural or industrial purposes. Effective October 1, 2003

This application must be completed and submitted **10** business days prior to transfer of properties, change in use or change in tenancy. Be sure to include the name and address of all persons owning, purchasing or leasing the property upon which the onsite sewage disposal system is located.

Make check for $25 payable to Hopewell Township

Transfer of real property:
A report by an independent inspection company indicating that the septic system inspection was conducted meeting minimum standards for the inspection of subsurface sewage disposal systems as prescribed by the Administrative Authority and or the NJ DEP shall be submitted.

For the purposes of this ordinance, Appendix A "Minimum Requirements for the Inspection of Septic Systems, Needed for the Sale, Transfer or Lease of Properties in Hopewell Township" shall serve as a minimum guidance document for conducting septic inspections until such time as new rules or regulations are issued by NJDEP. This document is adopted by reference. Revisions to Appendix A maybe enacted by the Health Department as required.

The report must describe in sufficient detail the basis for the decision that the septic system is in satisfactory condition, is not operating at its design capacity, is not satisfactory and or appears to be malfunctioning or is in need of repairs or alterations so as to be brought into conformance with the standards of N.J.A.C. 7:9A-3.4.

Additionally, the report must indicate or certify that the system as designed and or installed, complies with the provisions of N.J.A.C. 7:9A-3.3 "Existing Systems," with regards to use, expansion, or change in use.

If the application cites evidence of a malfunction, a plan to correct shall be provided to the Health Department.

Changes in Use or Tenancy:
Inspections shall be conducted and submitted each time a property is leased. Changes in use or of occupants must be noted in the report. Determination of wastewater generation for the proposed tenant must be provided and verified that it is within the design volume for the system. Inspection reports conducted within 6 months of the lease or sale may be used if more than one unit is included in the building and if all other design and occupancy conditions remain constant. Occupancy of units will not be allowed if malfunction system noted.

_____To be completed by **Health Department**_____

Upon review of the information submitted to the Administrative Authority or its authorized representative, one of the following documents will be issued within five *(5)* business days of receipt of the completed application.

X Letter of review will be issued,
Septic system inspector certifies the satisfactory operation of the system per the ordinance.

____Notice issued that Additional information or data must be supplied

____Notice issued that the report, or its methods or conclusions, are rejected.

____Notice issued that the Letter of review will not be issued because, the System is not in compliance and that the system is in need of repair or replacement.

Application incomplete and returned _____ By _____

Temporary approval granted on _____ By _____
pending submittal of the following:

_____ A copy of the sales agreement to be provided. Specifically it should specify who is responsible for this work and when it is to be completed. Funding issues should be noted. Remediation does not need to occur before closing, as long as provided for in contract.

_____Engineering certification for the alteration/repair provide

_____Other _____

This must be completed within 30 days of temporary approval

Letter of Review issued on 4/14/06 To Mary Stanley

By R English Title REHS.

Violation: Any person or persons, firm or corporation violating any of the provisions of this ordinance upon conviction thereof, pay penalty of not less than $200.00 for each offense and an additional penalty of $25.00 for each day of continuance of the violation of the notice of the violation shall have been given to such person or persons, firm or corporation by the Administrative Authority, to be collected and enforced by summary proceedings for the collection of penalties pursuant to the New Jersey Penalty Enforcement Law. Such notice shall be given by (1) serving a copy thereof on the property owner as shown on the current tax map or his agent in charge of the property, a (2) mailing a copy thereof by certified mail to the property owner at his address as shown on the said tax map.

contaminate level (MCL) or Action Levels for any parameters for which standards have been established by the **Private Well Testing Act Regulations** N.J.A.C.7:9E and the **Safe Drinking water Act**

Regulations or by the Administration Authority.

Changes in Tenancy:

An original laboratory report provided by a NJDEP certified Laboratory, plus a chain of custody must accompany this application. The laboratory must indicate if the water exceeds any maximum contaminate level (MCL) or Action Levels for: Total Coliform (annual), Nitrates, Volatile Organics, EPA 524.2 or latest version, Lead, first flush, Arsenic, Gross Alpha, Cadmium (Tri-annual) and any other parameters as specified by the Health Officer based on known contamination.

_____**To be completed by Health Department**_____

X All parameters meet established MCL or Action Levels

_____Application incomplete and returned _____

_____ Well water system is not in compliance. Approval pending submittal of one or more of the following:

_____ Provide Point of entry Treatment system or Install new well. (Permits are required)
Provide manufacture specifications for all treatment systems.

_____ Provide Post treatment system or retested laboratory results.

_____ Filed copy of Deed with amendment provided.

_____ Provide a Copy of an agreement for remediation as negotiated by owner/purchaser to be completed or installed prior to occupancy of this property.

_____Temporary approval granted on _____ and must be completed within **30 days.**

_____ Deed amendment for installed water treatment system.

_____ Acceptable duplicated Post treatment laboratory test results water results.

_____ Other_____

Letter of Review issued on 4/4/06 To Mary Stanley

By R English Title REHS.

Violation: Any person or persons, firm or corporation violating any of the provisions of this ordinance upon conviction thereof, pay a penalty of not less than $200.00 for each offense and an additional penalty of $25.00 for each day of continuance of the violation after notice of the violation shall have been given to such person or persons, firm or corporation by the Administrative Authority, to be collected and enforced by summary proceedings for the collection of penalties pursuant to the New Jersey Penalty Enforcement Law. Such notice shall be given by (1) serving a copy thereof on the property owner as shown on the current tax map or his agent in charge of the property, or (2) mailing a copy thereof by certified mail to the property owner at his address as shown on the said tax map.

HOPEWELL TOWNSHIP HEALTH DEPARTMENT

Route 546 and Scotch Road, Titusville, New Jersey 08560
(609) 737-0120

APPLICATION FOR SEWAGE DISPOSAL SYSTEMS

Applicant PENNINGTON CROSSING, ASSOC. Block 92 Lot 10.06

Mailing Address P.O. BOX 236 Location HART CT / INDEPENDENCE WAY

PRINCETON JCT. NJ 08550 Size of Lot 3.088 AC ~~Square Fee~~

Phone # (Home) _____ (Work) 799-7830 Zoning Designation R200

Builder if different than above _____ Phone # _____

Mailing Address _____

Signature of Applicant _____ Date _____

Fee $ 100.00 Date Received 3-31-88

Type of Construction or Usage RESIDENTIAL

Number of Bedrooms 4 Gal/Day if Commercial _____

Water Source ON SITE WELL Square Footage of Bldg. _____

SOIL TEST RESULTS

Perc Test Results

Hole No.	Depth	Rate Min/In
#1	81"	1"/3 MIN.
#2	76"	1"/3 MIN

Soil Log

Depths	Description of Soil Encountered
0-10"	TOPSOIL
10"-35"	REDDISH BROWN CLAY
35"-64"	REDDISH BROWN W/ SM. FRACT SHALE
64"-127"	RED FRACT. SHALE W/CLAY
	NO WATER

Date of Perc Tests 2-12-80

Date of Soil Logs 2-12-80

Depth to Bedrock 127"

Professional Firm PRINCETON JCT ENGINEERING Co.

Depth to Seasonal High Water Table _____

Test Conducted by FRANK L. QUINBY

Witnessed By _____

Design Certified By:

Frank L. Quinby
(Signature of Professional Engineer)

(Seal) License # 11087

Date 3-28-88

Determined by (check one):

a) Physical Measurement ✓ Jan 1 - May 15

b) Soil Maps ____ List Below

c) Soil Detail ____ Describe Below

SYSTEM DESIGN SHALL COMPLY WITH N.J.D.E.P. STANDARDS FOR THE CONSTRUCTION OF INDIVIDUA SUBSURFACE SEWAGE DISPOSAL SYSTEM AND HOPEWELL TOWNSHIP SEWAGE DISPOSAL ORDINANCI

No. of Bedrooms 4 or (5) X 220 Square Footage/Bedroom = 880 or 1100 Square Fe

Tank(s) Size 1000 GALLON Square Footage Designed 880 or 1100

Installer Woodborne Excavating Phone # _____

Address _____

Three copies of Design to be submitted on 8 ½" x 14" sheets.
Minimum Distance to all Water Courses, Flood Plains and Wells, 100 feet unless approved by Administrative Authorit
Distance to other disposal systems on adjacent lots - 50 feet minimum.
Expansion attics require additional design area square footage.
Garbage disposals require 25% over design and an additional tank in series.
Distance to foundations and foundation drains, etc. 25 feet minimum.
Pump design to include pitless adapter, pump size and model, and minimum wet well size.

Application Approved _____ Date 4-22-88

Installation Approved _____ Date 12-16-88

As Built Approved _____ Date 12-16-88