



TOWN OF LAKEVILLE MEETING POSTING & AGENDA

Town Clerk's Time Stamp
received & posted:

LAKEVILLE TOWN CLERK
703-2024-494-810

48-hr notice effective
when time stamped

Notice of every meeting of a local public body must be filed and time-stamped with the Town Clerk's Office at least 48 hours prior to such meeting (excluding Saturdays, Sundays and legal holidays) and posted thereafter in accordance with the provisions of the Open Meeting Law, MGL 30A §18-22 (Ch. 28-2009). Such notice shall contain a listing of topics the Chair reasonably anticipates will be discussed at the meeting.

| | |
|------------------------------------|---|
| Name of Board or Committee: | BOARD OF HEALTH |
| Date & Time of Meeting: | Wednesday, March 6, 2024 @ 6:00 p.m. |
| Location of Meeting: | Lakeville Police Station 323 Bedford Street, Lakeville, MA |
| Clerk/Board Member posting notice: | Fran Lawrence |

Cancelled/Postponed to: _____ (circle one)

Clerk/Board Member Cancelling/Postponing: _____

A G E N D A

Please ask if anyone is recording the meeting and announce that LakeCAM is recording

1. 134 Hackett Ave – Meet with Farland Corporation Inc. to discuss requested local upgrade approvals and variance
2. Crooked Lane – Meet with Foresight Engineering to discuss requested variances
3. GE Supply LLC dba Lakeville Ace Hardware - located at 352 Bedford Street
 - New Food Establishment - Retail Pre-packaged Non-Grocery
4. Continued from February 21st meeting - Discuss and possible vote to allow pet dogs in outdoor dining areas
5. Review and approve meeting minutes
 - December 20, 2023
 - January 3, 2024
6. Announcement
Rabies Clinic @ the Lakeville Highway Barn, 6 Montgomery Street
on Saturday, April 6, 2024
7. Discuss the recent BOH Agent's pending Items

Any other business that may properly come before the Board of Health

Please be aware that this agenda is subject to change. Should other issues arise requiring immediate attention by the Board of Health after the posting of this Agenda, they may be addressed at this meeting.



February 22, 2024

Town of Lakeville
Board of Health
241 Bedford Street
Lakeville, MA 02347

RECEIVED
FEB 28 2024
BOARD OF HEALTH

**RE: 134 Hackett Avenue
Lakeville, MA 02347**

Dear Members of the Board,

On behalf of our client, Troy Leavitt, we respectfully request you consider granting a local upgrade approval for the following:

1. 310 CMR 15.405(1)(g) – To allow a reduction of the required system location setback from a surface water supply from 400' to 200'
2. 310 CMR 15.405(1)(i) – To allow a sieve analysis in lieu of a percolation test

We are also requesting a variance for the following:

3. To allow a reduction of the required system location setback from an open, surface, or subsurface drain which discharge to surface water supplies or tributaries thereto from 100' to 50'.

If you should have any questions, please feel free to contact me or the Lakeville Board of Health.

Very truly yours,

FARLAND CORP., INC.

John Marchand, P.E.
Senior Project Manager



February 22, 2024

RE: Septic Repair
134 Hackett Avenue
Lakeville, MA 02347

To whom it may concern,

Per the Massachusetts State Environmental Code, Title 5, 310 CMR 15.000 we are notifying you of a submittal to the Board of Health for the repair of the existing septic system at 134 Hackett Avenue in Lakeville, Massachusetts, requesting a local upgrade approvals and variance for the following:


1. 310 CMR 15.405(1)(g) – To allow a reduction of the required system location from a surface water supply from 400' to 200'.
2. 310 CMR 15.405(1)(i) – To allow a sieve analysis in lieu of percolation test.
3. 310 CMR 15.211(1) – To allow a reduction of the required system location setback from an open, surface, or subsurface drain which discharge to surface water supplies or tributaries thereto from 100' to 50'.

A public hearing before the Board of Health will be held on March 6, 2024 at 6 pm at 323 Bedford Street, Lakeville, MA 02347.

If you should have any questions, please feel free to contact me or the Lakeville Board of Health.


Very truly yours,

FARLAND CORP., INC.



John Marchand, P.E.
Senior Project Manager

RECEIVED
FEB 28 2024
BOARD OF HEALTH

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|---|
| <ul style="list-style-type: none"> Complete Items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature <i>Thomas M Kenting</i> <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>THOMAS M KENTING</i> C. Date of Delivery <i>02/26/2024</i> |
| 1. Article Addressed to: Taunton Water Department 9 Precinct Street Lakeville, MA 02347 | D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No |
| 2. Article Identification:  9590 9402 8337 3094 3892 78 | 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery |

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

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|--|----|
| Certified Mail Fee | \$ |
| Extra Services & Fees (check box, add fee as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage | |

Taunton Water Department
9 Precinct Street
Lakeville, MA 02347

NEW BEDFORD, MA 02710
 FEB 26 2024
 Postmark Here
 USPS

PS Form 3800, January 2023 PSN 7530-02-000-5017 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

| | |
|--|----|
| Certified Mail Fee | \$ |
| Extra Services & Fees (check box, add fee as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage | |

New Bedford Water Department
1 Negus Way
E. Freetown, MA 02717

NEW BEDFORD, MA 02710
 FEB 26 2024
 Postmark Here
 USPS

PS Form 3800, January 2023 PSN 7530-02-000-5017 See Reverse for Instructions

Abutters
134 Hackett Ave

9589 0710 5270 1619 0519 54



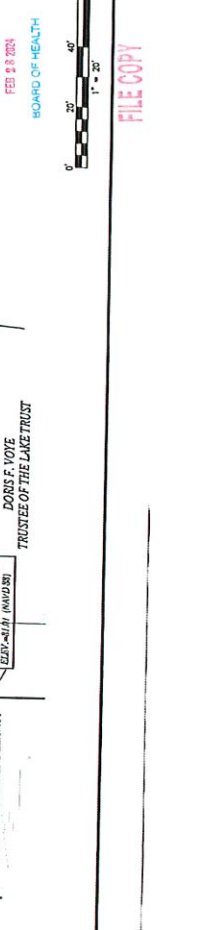
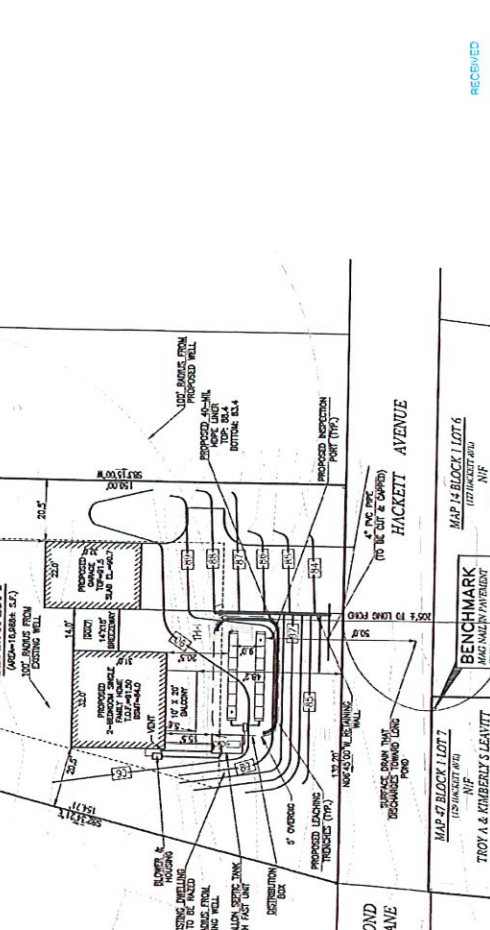
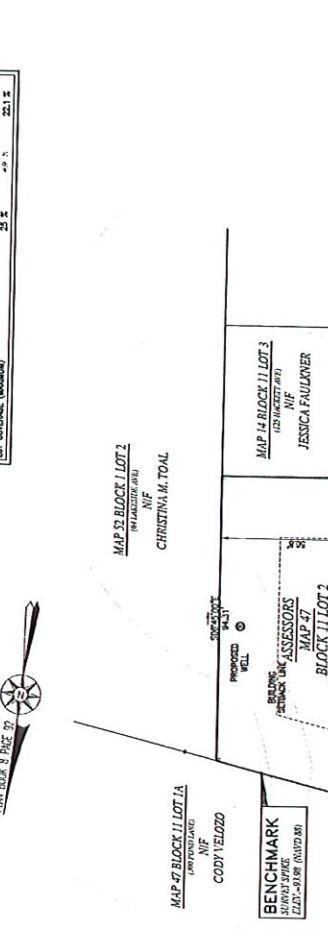
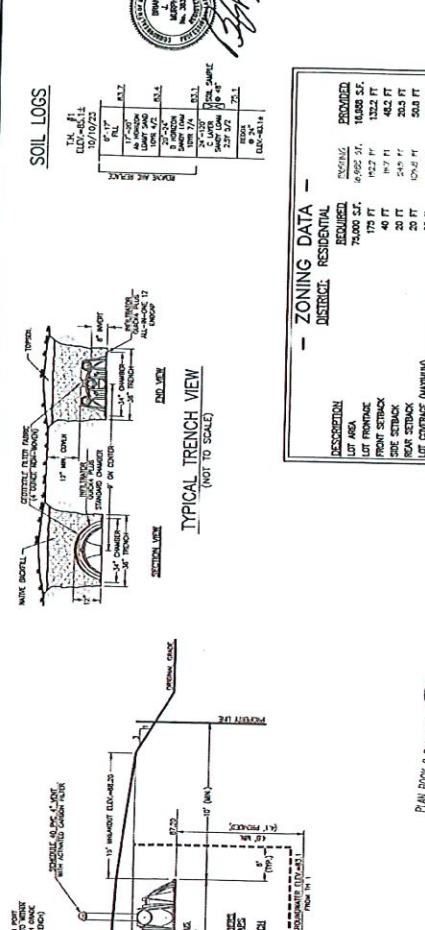
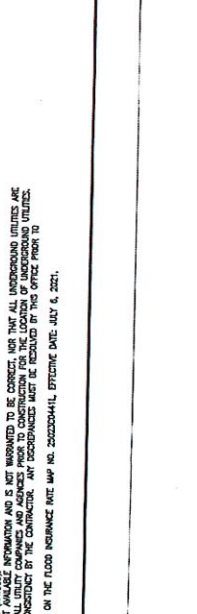
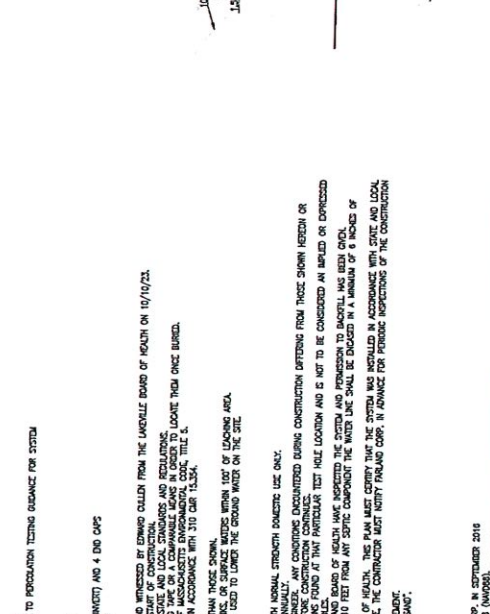
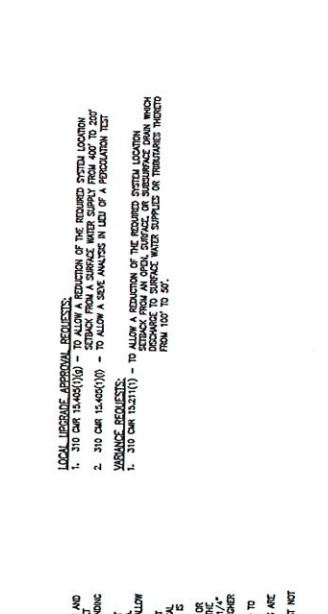
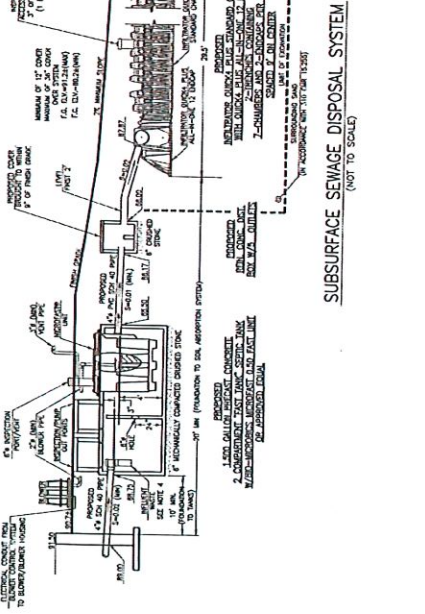
RECORD DRAWING: 04-011-002
 TROY LEVITT
 120 HACKETT AVE
 LAKEVILLE, MA 02450
 508-883-3107 FAX: 508-883-3102
 PLAN BOOK 8 PAGE 82

- REQUIREMENTS, MINIMUMS AS FAST UNIT NOTES:**
1. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS, 816 CMR 1.00 THROUGH 1.10, AND THE MASSACHUSETTS DEPARTMENT OF PUBLIC SAFETY (DPS) REGULATIONS, 805 CMR 1.00 THROUGH 1.10.
 2. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS, 816 CMR 1.00 THROUGH 1.10, AND THE MASSACHUSETTS DEPARTMENT OF PUBLIC SAFETY (DPS) REGULATIONS, 805 CMR 1.00 THROUGH 1.10.
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 10. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS, 816 CMR 1.00 THROUGH 1.10, AND THE MASSACHUSETTS DEPARTMENT OF PUBLIC SAFETY (DPS) REGULATIONS, 805 CMR 1.00 THROUGH 1.10.

- LOCAL LEGISLATIVE APPROVAL REQUESTS:**
1. 310 CMR 14.00(1)(b) - TO ALLOW A REDUCTION OF THE REQUIRED SYSTEM LIFT FROM 400' TO 300'.
 2. 310 CMR 14.00(1)(c) - TO ALLOW A REDUCTION OF THE REQUIRED SYSTEM LIFT FROM 400' TO 300'.
 3. 310 CMR 14.00(1)(d) - TO ALLOW A REDUCTION OF THE REQUIRED SYSTEM LIFT FROM 400' TO 300'.

GENERAL NOTES:

1. PROPERTY LINE & TOPOGRAPHIC SURVEY PERFORMED BY FARLAND CORP. IN SEPTEMBER 2018.
2. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS, 816 CMR 1.00 THROUGH 1.10, AND THE MASSACHUSETTS DEPARTMENT OF PUBLIC SAFETY (DPS) REGULATIONS, 805 CMR 1.00 THROUGH 1.10.
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REVISIONS

| | | |
|-----|------|-------------|
| NO. | DATE | DESCRIPTION |
| | | |
| | | |
| | | |

FARLAND CORP.
 154 HITTLETON AVENUE
 FAIRHAVEN, MA 02719
 P 508.717.3479
 • ENGINEERING
 • SITEWORK
 • LAND SURVEYING
 • DEVELOPMENT

DESIGNED BY: TROY LEVITT
 CHECKED BY: TROY LEVITT
 134 HACKETT AVE
 LAKEVILLE, MASSACHUSETTS
 ASSASSORS PARCEL: 047-011-002
 FEBRUARY 20, 2024
 SCALE: 1"=20'
 JOB NO. 23-404
 LATEST REVISION:
 RECEIVED
 FEB 28 2024
 BOARD OF HEALTH

SHEET 1 OF 1
 FILE COPY

Foresight Engineering

518 County Road
(Wishbone Way)
West Wareham, MA 02576
508-245-2148

RECEIVED

FEB 14 2024

LAKEVILLE
BOARD OF HEALTH

February 12, 2024

RE: Crooked Ln (59/01/4A) Variance Request

Dear Board Members:

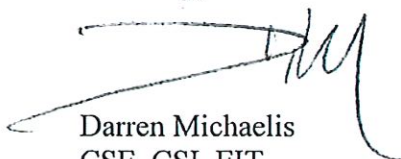
The property located on Crooked Lane (59/01/4A) falls entirely within the Zone A mapped by the state as a tributary to a Surface Water Supply. The property was purchased in 2007 by my client with the understanding it was a buildable lot. Denial of this request, will make the property unbuildable and cause my client financial damages as well as loss of property.

Variance Request:

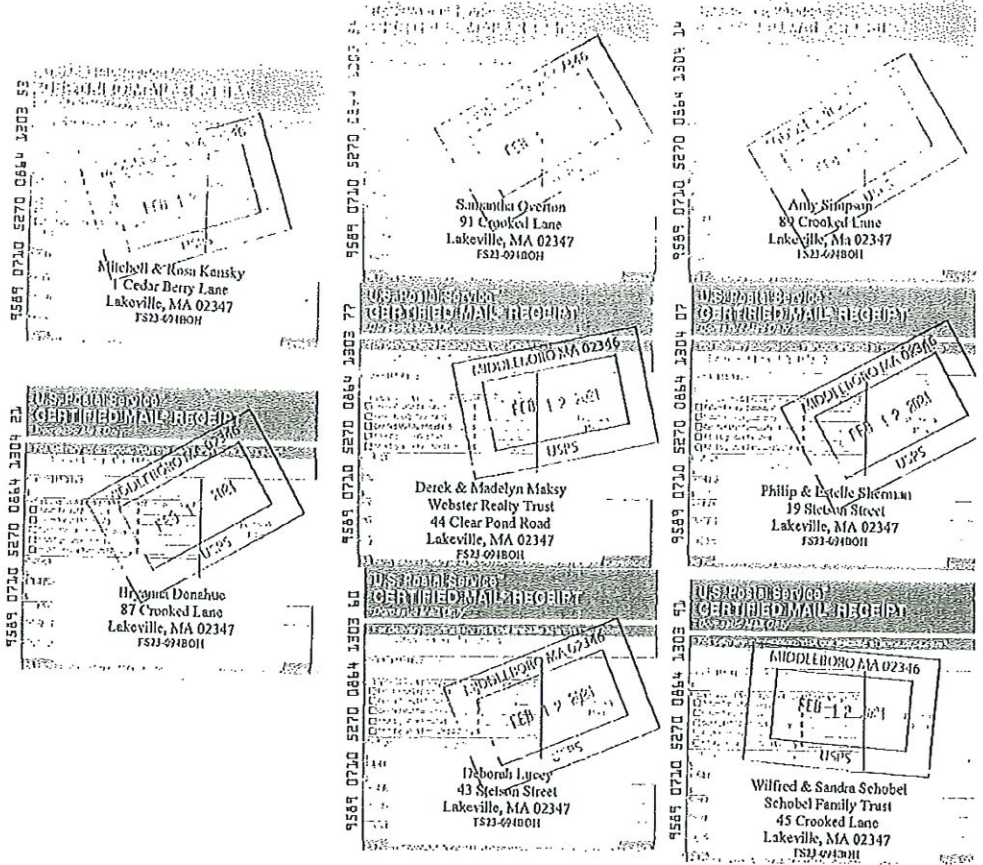
1. On behalf of the property owner, we are requesting a variance based on 310CMR Section 15.411(5) to site a septic tank within 200' of a tributary provided the system is not less than 100' to said tributary and not within 50' of any surface water.
2. On behalf of the property owner, we are requesting a variance based on 310CMR Section 15.411(5) to site a pump tank within 200' of a tributary provided the system is not less than 100' to said tributary and not within 50' of any surface water.

As shown on the plan, the system is greater than 400' from the bank of the irrigation canals and greater than 200' from the bogs (tributary) which are controlled by the property owner to feed the upland bogs on his property. We feel that the system meets the intent of maximum feasibility of siting the system on the property. The tanks have been placed as far as possible from the canal and bogs on the property to meet property line and foundation setbacks. If you should have any questions, please contact my office. The abutters have been notified for the March 6th meeting.

Sincerely,

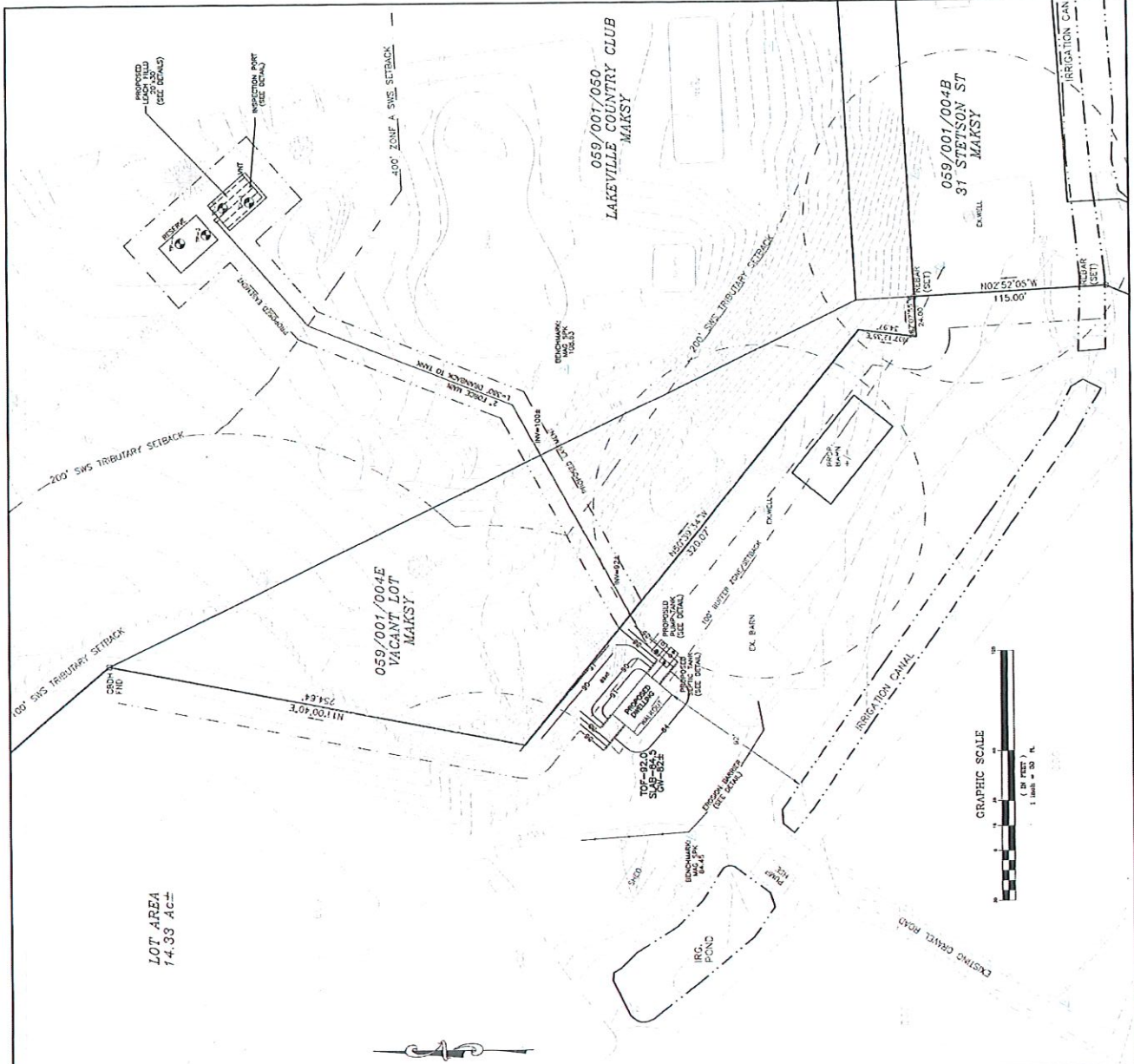

Darren Michaelis
CSE, CSI, EIT

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FEB 28 2024
BOARD OF HEALTH



Crooked Lane

Abutters



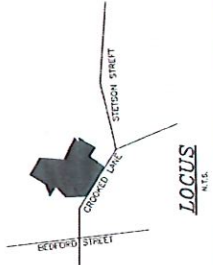
LOT AREA
14.33 AC ±

ZONE A NOTE:

THE ENTIRE LOT HAS BEEN MAPPED AS ZONE A BY THE DEP. THE RESERVOIR, UPLAND LOGS AND TRIBUTARIES ARE ALL SURFACE WATER SUPPLY.

VARIANCE REQUESTS:

1. TO INSTALL A SEPTIC TANK WITHIN 400' OF A ZONE A SURFACE WATER BUT NOT WITHIN 100' OF SHAD WATER BANK PER STICOR SECTION 15-41(10).
2. TO INSTALL A PUMP TANK WITHIN 400' OF A ZONE A SURFACE WATER BUT NOT WITHIN 100' OF SHAD WATER BANK PER STICOR SECTION 15-41(10).



NOTICE OF INTENT REQUIRED NOTE

A NOTICE OF INTENT IS REQUIRED ON THIS PROJECT, AND WORK SHALL NOT BE COMMENCED UNTIL THE NOTICE OF INTENT HAS BEEN REVIEWED AND APPROVED. THIS PROJECT IS SUBJECT TO THE MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS AND REQUIREMENTS. THE DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) REGULATIONS AND REQUIREMENTS ARE AVAILABLE TO THE PUBLIC AT THE DEPARTMENT OF ENVIRONMENTAL AFFAIRS (DEA) OFFICE, 100 WATER STREET, BOSTON, MASSACHUSETTS 02109.

| <p>REVISIONS</p> <table border="1"> <thead> <tr> <th>NO.</th> <th>DATE</th> <th>DESCRIPTION</th> <th>BY</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | NO. | DATE | DESCRIPTION | BY | | | | | | | | | | | | | | | | | <p>DESIGN CAPACITY REQUIRED</p> <p>4 BEDROOMS @ 110 GALS/DAY/PERSON = 440 GALS</p> <p>USE FACTOR OF 1.50 FOR SEPTIC TANK</p> <p>SEPTIC TANK VOLUME</p> <p>440 GALS X 2.00 = 880 GALS DESIGN CAPACITY</p> <p>MINIMUM OF 1500 GALLON TWO COMPARTMENT TANK REQUIRED</p> <p>SYSTEM CAPACITY PROVIDED</p> <p>CAPACITY REQUIRED = 440 GPD / 0.745 PD/SF = 588 SF.</p> <p>SYSTEM SIZE: LEACH FIELD 0.50 FT X 20 FT X 30 FT</p> <p>BOTTOM AREA: 20 FT X 30 FT L = 600 SF. P = 0.74 = 444 GALS/DAY</p> | |
|--|------|--|------|-------------|----|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| NO. | DATE | DESCRIPTION | BY | | | | | | | | | | | | | | | | | | | | |
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| <p>PROPERTY INFORMATION</p> <p>RPTD BDD/PAGE: 3326/120</p> <p>PLAN BOOK/PAGE: 03 / 489</p> <p>ASSESSORS MAP/DATE: 08/01/2014</p> <p>PLAN DATE: 4/2/16</p> | | <p>LEGEND</p> <p>EXISTING CONTOUR</p> <p>PROPOSED CONTOUR</p> <p>TEST PIT</p> <p>SEPTIC TANK</p> <p>SEPTIC TANK</p> <p>DOT. BOX</p> <p>WELL</p> <p>LIMIT OF WETLAND</p> <p>WATER LINE</p> <p>OVERHEAD WIRES</p> | | | | | | | | | | | | | | | | | | | | | |
| <p>SEWAGE DISPOSAL SYSTEM DESIGN</p> <p>PREPARED FOR: DEREK MAIST 44 CROOKED LANE LAKEVILLE, MA 02451</p> <p>LOCATED AT: LAKEVILLE, MASSACHUSETTS</p> <p>DATE: 2/2/16 11:30 AM SCALE: 1" = 20'</p> | | <p>FORESIGHT ENGINEERING, INC. 100 WATER STREET BOSTON, MASSACHUSETTS 02109 TEL: 617.552.8800 WWW.FORESIGHTENGINEERING.COM</p> | | | | | | | | | | | | | | | | | | | | | |



Town of Lakeville

Board of Health
346 Bedford Street
Lakeville, MA 02347

Board of Health
(508) 946-3473
(508) 946-8805
(508) 946-3971 fax

APPLICATION FOR LICENSE TO OPERATE A FOOD ESTABLISHMENT

- 1) Establishment Name: C&E Supply LLC d/b/a Lakeville Ace Hardware
- 2) Address: 352 Bedford St, Lakeville, MA
- 3) Telephone #: 508-947-5263 Email: ~~Kevin~~ Kevin@acehardwarestore.net
- 4) Mailing Address (if different): _____
- 5) Applicant Name & Title: Kevin Ponte / COO PH: 774-201-9521
- 6) Applicant Address: 75 Forsythia Lane, Westport, MA
- 7) Name of Owner (if different from applicant): Ed Siegal PH: 508-965-9319
- 8) Owner Address: 47 Bush St, Dartmouth, MA
- 9) If Corporation or Partnership, give Name, Title & Home Address of Officers or Partners

- 10) Emergency Response Person:
Name: Kevin Ponte Contact #: 774-201-9521
- 11) Annual Temporary _____ Seasonal _____
- 12) Dates of Operation, if not Annual _____

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FEB 26 2024
BOARD OF HEALTH

Type of Establishment:

- Food Service <25 Seats - \$200 25-50 Seats - \$300 >50 Seats - \$400
- Retail-Prepackaged Food Only \$100 per 5000 sq. ft.
- Retail Pre-Packaged Non-Grocery \$0
- Temporary/Retail-Prepackaged Food Only \$25 per day
- Mobile Food* \$150
- Temporary (Limited to hot dog steamer and popcorn): \$50 per day
- Temporary - (larger scale fairs, multiple food vendors: \$75 per vendor (Not to exceed 1 wk)
- Residential \$150
- Farmers Market (price to be determined)
- Caterer \$150 Address of Function: _____

13) Water Source: Well Sewage Disposal Type: Septic

14) Days & Hours of Operation: 7:00-6:00 Mon-Sat 9-5 Sunday

15) If Restaurant: Number of Seats: _____

16) Name of Person Trained in Allergen Awareness: (Attach copy of certificate)

17) ServSafe (2) Manager's Food Safety Certificates: (Attach copies of certificates)

Name: _____ Certificate Expires: _____

Name: _____ Certificate Expires: _____

18) Name of Person Trained in Anti-Choking Procedures (For 25 seats or more):

(Attach copy of certificate)

19) Food Handlers: Any cooks, wait staff, dishwashers, bartenders, ice cream servers and anyone else who handles or prepares food within the food service industry
(Attach copies of certificates)

THIS SECTION MUST BE COMPLETED FOR ALL APPLICATIONS

Pursuant to Massachusetts General Law, Chapter 62C, Section 49A, I certify under the penalties of perjury that I, to my best knowledge and belief have filed all state tax returns and paid all state taxes required under law.

04-3404121
Social Security Number or Federal Identification Number

[Signature]
Signature of Individual or Corporate Name

(FOR BOARD OF HEALTH USE ONLY)

License #: FE024-39 Approved on: 2-26-24

Fee: 0 CK #: _____



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

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FEB 26 2024

DEPARTMENT OF HEALTH

Workers' Compensation Insurance Affidavit: General Businesses,
 TO BE FILED WITH THE PERMITTING AUTHORITY.

Applicant Information

Please Print Legibly

Business/Organization Name: GE Supply LLC d/b/a Lakoville Ace Hardware

Address: 352 Bedford St

City/State/Zip: Lakoville /ma /02347 Phone #: 508-947-5263

Are you an employer? Check the appropriate box:

- 1. I am an employer with 9 employees (full and/or part-time).*
- 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3. We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**
- 4. We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

Business Type (required):

- 5. Retail
- 6. Restaurant/Bar/Eating Establishment
- 7. Office and/or Sales (incl. real estate, auto, etc.)
- 8. Non-profit
- 9. Entertainment
- 10. Manufacturing
- 11. Health Care
- 12. Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

**If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: Great American Insurance Group / Ace Insurance Agency, Inc.

Insurer's Address: 2915 Jorie Blvd.

City/State/Zip: Oakbrook, IL 60523

Policy # or Self-ins. Lic. # PAC 06628731000 Expiration Date: 1/1/25

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: [Signature] Date: 2/26/24

Phone #: 774-201-9821

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):

- 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office
- 6. Other _____

Contact Person: _____ Phone #: _____

**WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY
INFORMATION PAGE**

| | | | | | | | | | | | | | |
|---|--|---------------------------|---------------|---------|---------------|--------------------------|----|---------|--------------|--------------------------|----|---------|---------------|
| Insurance is issued by the Company named below, a Capital Stock Corporation: Great American Spirit Insurance Company NCCI Carrier Code Number 26387 | | | | | | | | | | | | | |
| ITEM ONE - GENERAL INFORMATION | | | | | | | | | | | | | |
| The Insured: G.E. SUPPLY LLC | Legal Entity: Limited Liability Company (LLC) | | | | | | | | | | | | |
| Mailing Address: 593 AMERICAN LEGION HIGHWAY Westport, MA 02790 | FEIN No.: 04-3404121 | | | | | | | | | | | | |
| Other Identification Number: See Extension of Information Page. | | | | | | | | | | | | | |
| Other workplace not shown above: See Extension of Information Page. | | | | | | | | | | | | | |
| ITEM TWO - POLICY PERIOD | | | | | | | | | | | | | |
| The policy period is from 01/01/2024 to 01/01/2025 12:01 A.M. Standard Time at the Insured's mailing address. | | | | | | | | | | | | | |
| ITEM THREE - COVERAGE | | | | | | | | | | | | | |
| <p>A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: MA, RI</p> <p>B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3.A. The Limits of our Liability under Part Two are:</p> <table border="0"> <tr> <td>Bodily Injury by Accident</td> <td>\$</td> <td>500,000</td> <td>each accident</td> </tr> <tr> <td>Bodily Injury by Disease</td> <td>\$</td> <td>500,000</td> <td>policy limit</td> </tr> <tr> <td>Bodily Injury by Disease</td> <td>\$</td> <td>500,000</td> <td>each employee</td> </tr> </table> <p>C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here: All States Except: ND, OH, WA, WY and states designated in Item 3A of the Information Page</p> <p>D. This policy includes these endorsements and schedules: See FORMS AND ENDORSEMENTS Schedule, WC 99 06 22B (05/18)</p> | | Bodily Injury by Accident | \$ | 500,000 | each accident | Bodily Injury by Disease | \$ | 500,000 | policy limit | Bodily Injury by Disease | \$ | 500,000 | each employee |
| Bodily Injury by Accident | \$ | 500,000 | each accident | | | | | | | | | | |
| Bodily Injury by Disease | \$ | 500,000 | policy limit | | | | | | | | | | |
| Bodily Injury by Disease | \$ | 500,000 | each employee | | | | | | | | | | |
| ITEM FOUR - PREMIUM | | | | | | | | | | | | | |
| The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit. See Extension of Information Page. | | | | | | | | | | | | | |
| POLICY PREMIUM SUMMARY | | | | | | | | | | | | | |
| TOTAL ESTIMATED ANNUAL COST: | \$ 71,334 Minimum Premium: \$ 750 | | | | | | | | | | | | |
| Deposit Premium: | \$ 71,334 Date of Issue: 12/29/2023 | | | | | | | | | | | | |
| AUTHORIZED REPRESENTATIVE | | | | | | | | | | | | | |
| Name of Producer: Ace Insurance Agency, Inc. 2915 Jorie Blvd Oak Brook, IL 60523 | Servicing Office: ALT | | | | | | | | | | | | |

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301 E. Fourth St., Cincinnati, OH 45202

Your Great American Insurance Policy[®]

for all the *great* you doSM

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Alternative Markets

800-545-4269
GAIG.com

POLICYHOLDER NOTICE
CERTAIN COMPUTER-RELATED LOSSES

(Applicable to Commercial Fire, Commercial Inland Marine, and Crime Policies)

NO COVERAGE IS PROVIDED BY THIS POLICYHOLDER NOTICE NOR CAN IT BE CONSTRUED TO REPLACE ANY PROVISION OF YOUR POLICY. YOU SHOULD READ YOUR POLICY AND REVIEW YOUR DECLARATIONS PAGE FOR COMPLETE INFORMATION ON THE COVERAGES YOU ARE PROVIDED. IF THERE IS ANY CONFLICT BETWEEN THE POLICY AND THIS SUMMARY, THE PROVISIONS OF THE POLICY SHALL PREVAIL.

An exclusion has been added to your policy to explicitly state that coverage is not provided for loss caused by a computer's inability, or that of computerized or other electronic equipment, to properly recognize a particular date or time. An example of this is a loss caused by the inability of the computer to recognize the year 2000 (Y2K). However, coverage is provided under certain circumstances: If the computer's inability to recognize a date or time results in a covered cause of loss - - for example, fire - - the loss resulting from that fire will be covered.

VIRUS OR BACTERIA EXCLUSION ADVISORY NOTICE TO POLICYHOLDERS

This Notice does not form a part of your Insurance contract. No coverage is provided by this Notice, nor can it be construed to replace any provisions of your Policy (including its endorsements). If there is any conflict between this Notice and the Policy (including its endorsements), the provisions of the policy (including its endorsements) shall prevail.

Carefully read your Policy, including the endorsements attached to your Policy.

This Notice provides information concerning the following new endorsement, which applies to your new or renewal policy being issued by us:

VIRUS OR BACTERIA EXCLUSION CM 86 86 06 20.

This Endorsement makes an explicit statement regarding a risk that is not covered under your Commercial Inland Marine Insurance. It points out that there is no coverage under such insurance for loss or damage caused by or resulting from any virus, bacterium or other microorganism that induces or is capable of inducing physical distress, illness or disease. The exclusion in this endorsement applies to all coverages provided by your Commercial Inland Marine Insurance, including (if any) property damage and business income coverages.

**SELECT BUSINESS POLICY
CYBER INCIDENT EXCLUSION ENDORSEMENT
ADVISORY NOTICE TO POLICYHOLDERS**

This Notice does not form part of your policy. No coverage is provided by this Notice nor can it be construed to replace any provision of your policy. You should read your policy and review your Declarations page for complete information on the coverages you are provided. If there is any conflict between the Policy and this Notice, **THE PROVISIONS OF THE POLICY SHALL PREVAIL.**

Carefully read your policy, including the endorsements attached to your policy.

This Notice provides information concerning the following new endorsement which applies to your renewal policy being issued by us:

SB 83 07 Select Business Policy Cyber Incident Exclusion

When this endorsement is attached to your policy, it generally excludes loss or damage caused directly or indirectly to Covered Property resulting from a cyber incident; however, if a cyber incident as described in this exclusion results in fire or explosion, we will pay for the loss or damage to Covered Property caused by that fire or explosion subject to the applicable limits of insurance.

This exclusion also applies to the Business Electronic Systems and Telecommunication Forms if such endorsements are attached to your policy.

This exclusion does not apply to the extent that coverage is provided in the:

- Additional Coverage – Electronic Data; or
- Additional Coverage – Interruption Of Computer Operations.

NOTICE TO POLICYHOLDERS

No coverage is provided by this summary nor can it be construed to replace or modify any provision of your policy. You should read your policy and review your Declarations Page for complete information on the coverages you are provided. If there is any conflict between the policy and this Notice to Policyholders, the provisions of the policy shall prevail.

This policy contains an exclusion for claims arising from, in whole or in part, the actual, alleged, threatened, or suspected inhalation or ingestion of, exposure to, or contact with "silica" or dust that includes or contains "silica"; and any loss, cost or expense arising out of the abating, testing for, monitoring, cleaning up, removing, containing, treating, detoxifying, neutralizing, remediating or disposing of, or in any way responding to or assessing the effects of, "silica" or dust that includes or contains "silica," by any insured or by any other person or entity, as described in the endorsement. For further information, please review the provisions of your policy.

Policyholder Notice

Jurisdictional Inspections for Boilers and Pressure Vessels

This notice is to provide information regarding Equipment Breakdown Coverage.

If your policy includes breakdown coverage for boilers or certain other pressure vessels, jurisdictional inspections may be required by law. You, the insured, can request this jurisdictional inspection and/or get help with technical questions regarding all of the equipment directly from Hartford Steam Boiler Company by contacting:

Hartford Steam Boiler's Inspection Hotline

Telephone: 1-800-333-INSP
Fax: 1-484-582-1811
E-mail: NSCINSP_HOTLINE@hsb.com

Inspections will be scheduled promptly!

Policy No. PAC 0662873 10 00

Renewal Of PAC 0662873 09 00

POLICY COMMON DECLARATIONS

| | |
|-----------------------------------|---|
| NAMED INSURED AND ADDRESS: | G. E. Supply LLC 11194 Milford Ace Hardware 593 American Legion Hwy Westport, MA 02790 |
|-----------------------------------|---|

IN RETURN FOR PAYMENT OF THE AGENT'S PREMIUM, AND SUBJECT TO ALL TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY .

AGENT'S NAME AND ADDRESS:
Ace Insurance Agency, Inc.
2915 Jorie Blvd
Oak Brook, IL 60523

Insurance is afforded by the Company named below, a Capital Stock Corporation:
Great American Alliance Insurance Company

POLICY PERIOD: From 01/01/2024 To 01/01/2025
12:01 A.M. Standard Time at the address of the Named Insured

This policy consists of the following Coverage Parts for which a premium is indicated. This premium may be subject to adjustment.

| | Premium |
|-----------------------------------|----------------------|
| Commercial Property | \$ 82,936.00 |
| Commercial General Liability | \$ 34,971.00 |
| Commercial Crime and Fidelity | \$ |
| Commercial Inland Marine | \$ 443.00 |
| Commercial Equipment Breakdown | \$ 7,307.00 |
| Commercial Auto | \$ |
| Commercial Umbrella | \$ |
| Commercial Business Owners Policy | \$ |
| TOTAL | \$ 125,657.00 |

FORMS AND ENDORSEMENTS applicable to all Coverage Parts and made part of this Policy at time of Issue are listed on the attached Forms and Endorsements Schedule
IL 88 01 (11/85).

POLICY ALTERNATE MAILING ADDRESS:

IL 88 01 (Ed. 11/85)

FORMS AND ENDORSEMENTS SCHEDULE

It is hereby understood and agreed the following forms and endorsements are attached to and are a part of this policy:

| Form and Edition | Date Added * or Date Deleted | Form Description |
|------------------|------------------------------------|---|
| IL7001 1007 | | POLICY COMMON DECLARATIONS |
| IL0935 0702 | | EXCLUSION OF CERTAIN COMPUTER-RELATED LOSSES |
| IL0952 0115 | | CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM |
| IL7125L 0311 | | NAMED INSURED ENDORSEMENT |
| IL7236 0705 | | NUCLEAR, BIOLOGICAL OR CHEMICAL EXCLUSION |
| IL7268 0909 | | IN WITNESS CLAUSE |
| IL7273 0808 | | LOSS PREVENTION SERVICES |
| IL7324 0721 | | GLOBAL SANCTION ENDORSEMENT |
| IL7368 0120 | | DISCLOSURE PURSUANT TO TERRORISM RISK INSURANCE ACT |
| IL0130 0121 | | MASSACHUSETTS CHANGES - INTENTIONAL LOSS |
| IL0128 0908 | | RHODE ISLAND CHANGES - PREJUDGMENT INTEREST |
| IL0197 0908 | | RHODE ISLAND CHANGES |
| IL7069 0316 | | EXCLUSION - ASBESTOS |
| IL0017 1198 | | COMMON POLICY CONDITIONS |
| IL0021 0908 | | NUCLEAR ENERGY LIABILITY EXCLUSION ENDORSEMENT (BROAD FORM) |
| IL0161 0312 | | RHODE ISLAND CHANGES - CIVIL UNION |

* If not at Inception

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BOARD OF HEALTH

Secretary of the Commonwealth of Massachusetts

William Francis Galvin

Business Entity Summary

ID Number: 043404121

[Request certificate](#)

[New search](#)

Summary for: GE SUPPLY, LLC

| | |
|---|--|
| The exact name of the Domestic Limited Liability Company (LLC): GE SUPPLY, LLC | |
| Merged with F S SUPPLY, LLC on 03-24-2022 | |
| Entity type: Domestic Limited Liability Company (LLC) | |
| Identification Number: 043404121 | |
| Date of Organization in Massachusetts: 02-27-1998 | Date of Revival: Last date certain: 02-01-2031 |
| The location or address where the records are maintained (A PO box is not a valid location or address): | |
| Address: 593 AMERICAN LEGION HIGHWAY | |
| City or town, State, Zip code, Country: WESTPORT, MA 02790 USA | |
| The name and address of the Resident Agent: | |
| Name: GLENN FINKELSTEIN | |
| Address: 149 MEADOWNECK RD. | |
| City or town, State, Zip code, Country: EAST FALMOUTH, MA 02536 USA | |
| The name and business address of each Manager: | |
| Title | Individual name |
| MANAGER | GLENN FINKELSTEIN |
| | Address |
| | 149 MEADOWNECK RD. EAST FALMOUTH, MA 02536 USA |
| In addition to the manager(s), the name and business address of the person(s) authorized to execute documents to be filed with the Corporations Division: | |
| Title | Individual name |
| | Address |

| | | |
|---------------|----------------------|--|
| SOC SIGNATORY | EDWARD SIEGAL SIEGAL | 47 BUSH STREET DARTMOUTH, MA 02748 USA |
|---------------|----------------------|--|

The name and business address of the person(s) authorized to execute, acknowledge, deliver, and record any recordable instrument purporting to affect an interest in real property:

| Title | Individual name | Address |
|---------------|-------------------|--|
| REAL PROPERTY | EDWARD SIEGAL | 47 BUSH STREET DARTMOUTH, MA 02748 UNI |
| REAL PROPERTY | GLENN FINKELSTEIN | 149 MEADOWNECK RD. EAST FALMOUTH, MA 02536 USA |

Consent
 Confidential Data
 Merger Allowed
 Manufacturing

View filings for this business entity:

- ALL FILINGS
- Annual Report
- Annual Report - Professional
- Articles of Entity Conversion
- Certificate of Amendment

[View filings](#)

Comments or notes associated with this business entity:

[New search](#)

#4

6-501.115 Prohibiting Animals.

(A) Except as specified in ¶¶ (B), (C) and (D) of this section, live animals may not be allowed on the PREMISES of a FOOD ESTABLISHMENT. P1

(B) Live animals may be allowed in the following situations if the contamination of FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES can not result:

(1) Edible fish or decorative fish in aquariums, shellfish or crustacea on ice or under refrigeration, and shellfish and crustacea in display tank systems;

(2) Patrol dogs accompanying police or security officers in offices and dining, sales, and storage areas, and sentry dogs running loose in outside fenced areas;

(3) In areas that are not used for food preparation and that are usually open for customers, such as dining and sales areas, service animals that are controlled by the disabled employee or person, if a health or safety hazard will not result from the presence or activities of the service animal;

FDA Food Code 2022 Chapter 6. Physical Facilities

Chapter 6 - 11

(4) Pets in the common dining areas of institutional care facilities such as nursing homes, assisted living facilities, group homes, or residential care facilities at times other than during meals if:

(a) Effective partitioning and self-closing doors separate the common dining areas from FOOD storage or FOOD preparation areas,

(b) Condiments, EQUIPMENT, and UTENSILS are stored in enclosed cabinets or removed from the common dining areas when pets are present, and

(c) Dining areas including tables, countertops, and similar surfaces are effectively cleaned before the next meal service; and

(5) In areas that are not used for FOOD preparation, storage, sales, display, or dining, in which there are caged animals or animals that are similarly confined, such as in a variety store that sells pets or a tourist park that displays animals.

(C) Live or dead fish bait may be stored if contamination of FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES can not result.

(D) If APPROVED by the REGULATORY AUTHORITY, FOOD ESTABLISHMENTS may allow pet dogs in outdoor dining areas.

Town of Lakeville

Board of Health

December 20, 2023 6:00pm

Members present: Chairman Spratt, Member Maxim, Member Poillucci, and Health Agent Ed Cullen. Chairman Spratt called the meeting to order at 6:00 pm. LakeCam was present to record.

8 Virginia Drive - Continue from December 6, 2023, meet with Zenith Consulting Engineers, LLC. To be continued to 1/3/24.

Upon a motion made by Member Maxim, seconded by Member Poillucci, it was:

Voted: to continue 8 Virginia Drive to January 3, 2024.

Unanimous approval.

28 Cross Street - Meghan Young - new stable permit. Meghan Young was present for discussion. Agent Cullen said the Animal Inspector had gone out and said everything was ok. The barn is there but the paddock has not been built yet. The Animal Inspector reviewed the proposed plan for the paddock. They are asking for a variance to the property line. The barn is currently only 20-feet from the property line. Ms. Young explained they would need an additional 10 or 11-feet of fence to add a gate to that side of the barn. Member Maxim asked if all the abutters had been notified. Ms. Young said they had and provided certified mailing receipts. Chairman Spratt asked with all the space they have, why did they need the variance. Ms. Young explained it was so that the horses could go in and out of each stall so they could get out of the weather. She said they had met with Conservation and will be installing hay bales and creating a berm. Member Poillucci said he would like to hear the neighbors' views on the plan. Boyd Anderson from 29 Cross Street was present and said he was concerned if they would be running a business and there would be trucks going in and out. Ms. Young said this was only personal, there would be no business. Mr. Anderson asked if there is a limit to how many horses they could have. Ms. Young said she was applying for up to six, but doesn't plan to have more than three or four. They just don't want to have to go through this whole process again. Mr. Anderson said he thought he had heard there was a two-horse limit. Agent Cullen explained that it was so many per acre. They do have the land for the six horses, whether they choose to do it or not. There are boarding permits, and Ms. Young has not applied for that. Mr. Anderson asked how far the horses would be from the street. Ms. Young explained that the fencing would be behind the barn. It was estimated to be about 200-feet. Member Maxim explained that there would be an annual inspection by the Board of Health to renew the permit. The fencing would also need an inspection prior to the issuance of the permit. Member Poillucci asked if the barn was big enough for six horses. Agent Cullen said it was set up for four horses currently and they would have to make modifications if they wanted six. Ms. Young said it was five stalls but she was using one for hay storage. She explained that the paddock would come right to the barn so they could get out of the rain or snow if they wanted. Mr. Anderson asked about getting rid of the manure. Ms. Young said she would be cleaning it up every day and they would have a compost pile. If there is any extra they have a family farm that they can truck it off to. Chairman Spratt explained to Mr. Anderson that having a manure plan was part of the permitting process. Member Maxim added that it was labeled on the plan because it needs to be a certain distance from the property lines and wells. He asked if the abutter from 26 Cross Street was present. The abutter was not present, and Ms. Young explained that she had sent them a letter in October. The people that live at the house are renters.

Member Maxim explained that it was really hard for the Board to grant a variance when the property is 10-acres. There was a discussion about possible revisions. Ms. Young asked if she would have to compromise if the owner of 26 Cross hasn't answered two letters. Member Poillucci explained that legally they can only give a variance if there is a need for it. There really is no need for this variance. There was continued discussion. Member Poillucci said he knows the owner of 26 Cross Street and would like to talk to him before they approve it. He said since they are not supposed to give variances if they aren't needed and the Board was considering granting one, he would like to talk to the owner first. If they didn't want to continue the meeting until January to give him time to speak to the owner, he would be a "no" vote tonight. Ms. Young reluctantly agreed.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:

Voted: to continue until January 3rd.

Unanimous approval.

13 Main Street - Meet with Zenith Consulting Engineers, LLC to discuss requested waiver. Nyles Zager from Zenith was present for discussion. Mr. Zager said they had submitted a plan for a septic design for a couple of apartment buildings totaling 90 bedrooms. Agent Cullen upon reviewing the plan, notified him that the plan doesn't meet the regulation that was just implemented for flow greater than 440 per gallon per acre requiring advanced treatment. They are now asking for a waiver from that requirement. They identified which properties were serviced by municipal water and which ones were not. Everyone in close proximity was on municipal water. Rush Pond Road is entirely serviced by private wells. The closest property is 1237-feet from the corner of the lot to the proposed septic system. Member Poillucci asked if Dewey's was on a public well. Mr. Zager said it was 1181-feet from the Interim Wellhead Protection Area (IWPA). From the actual Zone I, they are almost 1500-feet. Lori Lane is on private wells and they are 1190-feet. Everything is at least 1100-feet away. The Middleboro portion of the trailer park is on an active well, the remainder on municipal water. It's 1060-feet to the IWPA. There was a brief review of the topography and storm water management. Mr. Zager said it meets the Title 5 requirement because it's on town water and it's not in a Zone 2. It is also a conforming lot. In the mixed use overlay district, it needs to be a 3-acre parcel, and it is over 3-acres. There was a discussion about flow rates. Member Poillucci asked how many units there would be. Mr. Zager said all together there would be 40, 20 units per building. Member Maxim said his only other question was about the water main. It looks like they are tying off through the water main of the self-storage, through the fire suppression line. It shows a 6-inch line that runs in and then increasing into an eight, but then you go back down to 6-inch into each unit for fire suppression and a 2-inch tap. It doesn't look like that water main is in that drain easement, it's outside it. Mr. Zager said that was all discussed with the City of Taunton water department. It was changed in the field from when they did the self-storage building. It's already been filed with the City of Taunton and they've allocated the water. The only thing they're still going through is with MassDOT for the curb cut. Member Poillucci said he would like to continue since he still had some questions about 40B and over-55 in an overlay district. It would change the flow rates if it was over-55, so they wouldn't have to give as big of a variance. Agent Cullen said they would still have to get a waiver for the 440 gallons per day, unless they drastically reduce the number of bedrooms.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:

Voted: to continue to the January 3rd meeting.

Unanimous approval.

Review and approve meeting minutes - October 4, 2023, and July 6, 2023.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:
Voted: to approve the October 4th 2023 meeting minutes as typed.
Unanimous approval.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:
Voted: to approve the July 6, 2023 meeting minutes as typed.
Unanimous approval.

Discuss Board of Health Agent pending items - Chairman Spratt asked Agent Cullen for an update on the dumpsters on Rhode Island Rd. Agent Cullen said he contacted the person and he said he wasn't collecting residential trash, it was construction dumpsters. He brings the construction dumpsters to his site and then Win Waste comes and takes them. Agent Cullen informed him that he still needs a permit. Member Maxim had asked if they were zoned to do this. Agent Cullen does not believe he is, so they can't give him a permit if he isn't zoned for it. Member Maxim said he would have to get a special permit through Zoning, and then the Board could give him a permit. Agent Cullen said this was in the same overlay district, so if he had 3 or more acres he could get special permitting, but he only has 1.6 acres. He added that they may be using the neighbor's property as well, which would be the hospital. There was some continued discussion.

Adjournment (6:49pm)

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:
Voted: to adjourn.
Unanimous approval.

Town of Lakeville
Board of Health

January 3, 2024 6:00pm

Members present: Chairman Spratt, Member Maxim, Member Poillucci, and Health Agent Ed Cullen. Chairman Spratt called the meeting to order at 6:00 pm. LakeCam was present to record.

28 Cross Street - Continued from December 20, 2023, meet with Meghan Young to discuss new stable permit. Member Poillucci said he had spoken to the son of the owner of 26 Cross Street and he had no issue with the Board granting a variance to the property line.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:

Voted: to give 28 Cross Street a variance on the side of 26 Cross Street from 20' to 9' and issue the stable permit for six animals.

Unanimous approval.

13 Main Street - Continued from December 20, 2023. Meet with Zenith Consulting Engineers, LLC to discuss local variance request. Nyles Zager from Zenith was present for discussion. Mr. Zager said there was some concern at the last meeting about the design flow. The project is age qualified, not age restricted. There has to be at least one person that is over 55, but you can have members of the household that are less than 55. With that being the case, they can't restrict it, so they have to design it at the 9900 gallons a day. Mr. Zager said he submitted a letter that spelled everything out. There was a brief discussion about age qualified housing. Chairman Spratt said that because of the potential of what could happen there, they could enforce the new bylaw for advanced treatment. Member Maxim said the whole reason they implemented the bylaw was to protect wells. They have no wells there within 1100-feet, they aren't in a Zone A or near Long Pond or Assawompset. The parcels to the left and right have very low flow. He didn't see the need for a treatment. Chairman Spratt thought it was just an option because of the potential of what flow could be in there. Member Maxim said he agreed, down the road we're going to have huge flow on this property; and the hospital property off the back is probably going to have to do treatment now, because they're close to the wells on Rush Pond Road. Mr. Zager said he spoke to the owner of the CVS property regarding the onsite well. He had no idea what that well could be other than irrigation. He said it definitely isn't being used for potable water, the building is serviced by town water. Chairman Spratt wondered if it was something that was existing prior. Agent Cullen said it was a fairly new well, a drilled well that looks professionally done within the last 15 years. He said the project at 13 Main had Planning Board approval. Mr. Zager added that they had Conservation approval also.

Upon a motion made by Member Maxim, seconded by Member Poillucci, it was:

Voted: to approve the septic at 13 Main Street with the one waiver variance being requested; to allow the septic system on the property that has a design flow greater than 440 gallons per day per acre to be installed without the use of advanced treatment IA system approved for denitrification by DEP.

Unanimous approval.

8 Virginia Drive - Continued from December 20, 2023, meet with Zenith Consulting Engineers, LLC to discuss requested local upgrade approvals. Chairman Spratt said a continuance was requested.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:

Voted: to continue to January 17th,

Unanimous approval.

8 Oak Street - Meet with Farland Corp, Inc. to discuss requested local upgrade approvals. Stevie Carvalho from Farland Corp was present for discussion. Mr. Carvalho distributed plans with revised buoyance calculations. He explained that this was a single-family dwelling and they performed two soil tests, one in the front, and one in the back. It's a very tight lot with vegetated wetlands in the back. He pointed out the neighboring wells and added that the well for this site was located inside the dwelling. There is limited area for leeching outside the 100-foot radius so they are proposing a bottomless sand filter with an Orenco Advantex AX20 system. The bottomless sand filter is located up front and all the components are outside of the 100-foot radius from any abutting well. The septic tank and units are in the back of the home. The applicant is looking to extend the existing water service from Clark Shores Water Corporation from Evergreen Road to his property. They are asking for a couple of local upgrade approvals. Mr. Carvalho reviewed the requests with the Board. Member Maxim asked why they were putting the tanks out in the lower groundwater closer to the wetlands and piping it all around the house. It looks like you will need to rip off the entire deck just to replace that pipe back to the house. Mr. Carvalho said ripping the deck up wasn't an issue. They didn't know exactly where the building plumbing goes, but they know it comes out back. There was some continued discussion. Member Maxim said he had some questions about the elevations. The bottom of the media sand is 62.75, but it doesn't give the bottom of the stone. It just says 24 minimum, and it doesn't show where the bottom of the drain pipe is, it just gives 8-9 inches from top to bottom of stone but doesn't give an elevation, it just says to be 4-foot minimum from the water table. Mr. Carvalho explained you needed a minimum of 2-foot of sand and 4-feet of separation on groundwater. It would be dependent on how much of the A and B material you're taking away. They would be taking away 49-inches of material and putting the C33, bottomless sand filter sand. Member Maxim asked if they were putting 4-feet of filter sand. Mr. Carvalho explained that it was required for 2-feet, but instead of using the Title V sand to bring up the grade, you can use all C33 sand. There was more discussion about filter sand. Mr. Carvalho said they could provide additional information to show the elevation of removal, the elevation of the top of that sand or the bottom of the pea stone. Member Maxim said the Board has been requiring block retaining wall all around the systems, not the pressure treated. The pressure treated has a life expectancy of 10-15 years before they rot away, and the system will outlive that, so they've required block. Also, the pump basin, there were no buoyancy calculations and it doesn't show concrete around it so it doesn't float. That's just plastic PVC tubing that weighs about 40lbs, it's not enough to hold the tank down. Agent Cullen said since they were going for the waiver for within 12-inches, normally you put on the booties on the inlet and outlet of the tanks, and was it on the plan. Mr. Carvalho said he would add it. Agent Cullen said on the well, the plan says to be abandoned. Since it's in the basement, it will be tough but could they try to fill and decommission it rather than just abandoning it. Normally, the Board requires a full decommission by a licensed well driller. Agent Cullen said he could inspect it when he's doing the install inspection. After some discussion, revised plans will be submitted. Mr. Carvalho won't have to appear at the next meeting, the Board will just vote on the revised plan.

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:
Voted: to continue to the next meeting which is January 17th.
Unanimous approval.

Review and approve meeting minutes for September 20th, 2023 and October 18, 2023 -

Upon a motion made by Member Maxim, seconded by Member Poillucci, it was:
Voted: to approve the meeting minutes from September 20th 2023 as typed.
Unanimous approval.

Upon a motion made by Member Maxim, seconded by Member Poillucci, it was:
Voted: to approve the meeting minutes from October 18, 2023 as typed.
Unanimous approval.

Adjournment - (6:37pm)

Upon a motion made by Member Poillucci, seconded by Member Maxim, it was:
Voted: to adjourn.
Unanimous approval.

RABIES CLINIC



WHEN: Saturday, April 6, 2024

TIME: Dogs 1:30 PM - 3:00 PM
Cats 3:00 PM - 3:30 PM

FEE: \$10 per dog/cat

LOCATION: Highway Barn
6 Montgomery Street
Lakeville, MA
{Off Precinct Street - Indoors}



SPONSORED BY:

Town of Lakeville
Board of Health
&

Lakeville Animal Hospital

DOG LICENSING ADDITIONAL

Requirements to obtain a license

1. Current Rabies Certificate
2. Spayed/Neutered Certificate

PLEASE NOTE:

- ✓ DOGS AND CATS MUST BE AT LEAST 3 MONTHS OLD
- ✓ FOR SAFETY REASONS, DOGS MUST BE ON LEASHES
- ✓ CATS MUST BE CONFINED IN A SAFETY CARRIER
- ✓ THE ANIMAL SHELTER WILL ALSO BE OPEN FOR ADOPTION OF ANIMALS