



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
NEW ENGLAND DIVISION, CORPS OF ENGINEERS
424 TRAPELO ROAD
WALTHAM, MASSACHUSETTS 02254-9149

7.1.76
FILE COPY

Southeastern Resident Office(415-10a)

30 April 1990

Ms. Lynne Fratus
E. P. A. Region 1
HSV-CAN 5
J.F.K. Federal Building
Boston, Mass. (2203-2211

Re: Contract No. DACW45-89-C-0523
Construction of Permanent Water Supply.
Western Sand and Gravel 'Superfund Site'
Burrillville, Rhode Island

Dear Lynne,

Enclosed herewith for your files are copies of 'Town of Burrillville Building Permit Application, R. I. D. O. T. Physical Alteration Permit Application' for the construction of the pump station, elevated storage tank and water line and letters of notification to the R.I.D.E.M. and U.S.G.S. regarding the well installation for the subject project.

Please call me at 1-401-295-8840 should you need any additional information.

Sincerely,

Maurice Beaudoin
Maurice Beaudoin, P. E.
Resident Engineer
Authorized Representative
of the Contracting Officer

CF: -Warren S. Angell, II
R.I.D.E.M.
Division of Air and Hazardous Materials
291 Promenade Street
Providence, R. I. 02908-5767
-Contracts
-Southeastern Resident Office
-Eastern Area Office
-Construction Division

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WESTERN SAND AND GRAVEL
ADMINISTRATIVE RECORD

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF TRANSPORTATION
PHYSICAL ALTERATION PERMIT APPLICATION

DO NOT WRITE IN THIS BOX

APPLICATION NUMBER
DATE

PROPERTY OWNER NASONVILLE WATER DISTRICT ATT: WILLIAM FIANNAGAN
(PRINT NAME)
23 PALASKI RD, HARRISVILLE RI PHONE 401/568-3212
(PROPERTY OWNER ADDRESS)

DEVELOPER R.H. WHITE CONSTRUCTION CO., INC.
(IF BUSINESS, PRINT NAME OF OWNER OR PRINCIPAL)
41 CENTRAL ST, AUBURN MA PHONE 508/832-3295
(DEVELOPER ADDRESS)

ENGINEER SEA CONSULTANTS INC, CAMBRIDGE MA
(NAME) 485 MASS AVE, CAMBRIDGE, MA 02139 PHONE 401-295-8840
(ENGINEER ADDRESS) ARMY CORPS OF ENGRS. P.O. BOX 632 DAVISVILLE RI

TYPE OF APPLICATION; INDIVIDUAL SINGLE FAMILY _____ ALL OTHERS ROAD OPENING/CROSS

LOCATION OF WORK JUNCTION OF PALASKI ROAD AND RT 7 (DOUGLAS PIKE) TO
(BE SPECIFIC) JUNCTION OF OLD TARKUN RD AND RT 7,

PURPOSE OF PERMIT INSTALL WATER MAINS ACROSS RT 7

ARMY CORPS OF ENGINEERS CONTRACT # DACW45-89-C-0523

(PRINT PROPERTY OWNER'S NAME) <u>NASONVILLE WATER DISTRICT</u>	(PRINT DEVELOPER'S NAME) <u>R.H. WHITE (GARY D. ROBINSON)</u>	(PRINT ENGINEER'S NAME) <u>ARMY CORPS OF ENGINEERS SEA CONSULTANTS</u>
(PROPERTY OWNER'S SIGNATURE) <u>[Signature]</u>	(DEVELOPER'S SIGNATURE) <u>[Signature]</u>	(ENGINEER'S SIGNATURE) <u>[Signature]</u>
DATE <u>3 April 90</u>	DATE <u>4/3/90</u>	DATE <u>3 April 90</u>

DO NOT WRITE BELOW THIS LINE

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF TRANSPORTATION
PHYSICAL ALTERATION PERMIT
THIS PERMIT VALID FOR ONE YEAR FROM DATE OF APPROVAL
SUBJECT TO CONDITIONS LISTED BELOW.

CONDITIONS OF APPROVAL

DIVISION OF MAINTENANCE	DIVISION OF PUBLIC WORKS
APPROVED BY: _____ ASSISTANT DIRECTOR OF TRANSPORTATION, MAINT.	APPROVED BY: _____ ASSISTANT DIRECTOR OF TRANSPORTATION, PUBLIC WORKS
DATE: _____	DATE: _____

1. ORIGINAL

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Be kept at the building site and to be available on demand by any authority official of the state or local representative, and the final set shall be retained by the owner of the architect or engineer. The building official may waive the requirement for plans when the work is of a minor nature.

BUILDING PERMIT APPLICATION

OFFICE FILE (LOCATION)

MUNICIPALITY _____ NUMERICAL CODE _____ PERMIT NO. _____
 COMMUNICATION DATE _____ CENSUS TRACT _____ FEE RECEIVED: \$ _____ BY _____

IMPORTANT: PLEASE PRINT — APPLICANT TO COMPLETE ALL ITEMS

1. STREET LOCATION TARKIN RD & POLASKI RD NASONVILLE R.I. 2. ZONING DISTRICT _____
 3. PLAT/MAP _____ 4. LOT/BLOCK _____ 5. FILE/PARCEL _____ 6. AREA _____ 7. FIRE DISTRICT NO. (0 or 1) _____
 8. USE OF STRUCTURE: PREVIOUS _____ PROPOSED _____
 9. OWNER NASONVILLE WATER DISTRICT ADDRESS 23 POLASKI RD, NASONVILLE R.I. TEL. NO. 401/568-3212
 10. CONTRACTOR (0 or 1)* R.H. WHITE CONSTRUCTION ADDRESS 41 CENTRAL ST AUBURN MA TEL. NO. 508/832-3295
 11. ARCH. OR ENG. SEA CONSULTANTS CAMBRIDGE MA ADDRESS CAMBRIDGE MA TEL. NO. 617/497-7800
 12. RHODE ISLAND REG. NO. _____ 13. Stamped Prints (Circle one) Yes No 14. Certificate of Occupancy Required Yes No

15. DESCRIPTION OF WORK TO BE PERFORMED. CONSTRUCTION OF WATER STORAGE TANK, WELL PUMPING STATION, AND INSTALL WATER MAINS. (ARMY CORPS OF ENGINEERS CONTRACT # DACW45-89-C-0523) SEE PLANS BY SEA, FOR PERMANENT WATER SUPPLY, WESTERN SANDS GRAVEL SUPERFUND SITE.
 16. USE OF EACH FLOOR
 BSMT. _____
 1st _____
 2nd _____
 3rd _____
 Other _____

II. TYPE AND COST OF BUILDING — PLEASE CHECK APPROPRIATE ITEMS AND ENTER REQUESTED DATA

A. TYPE OF IMPROVEMENT 1. <input checked="" type="checkbox"/> NEW STRUCTURE 2. <input type="checkbox"/> ADDITION TO STRUCTURE 3. <input type="checkbox"/> INSTALLATION 4. <input type="checkbox"/> RECONSTRUCTION 5. <input type="checkbox"/> REPLACEMENT 6. <input type="checkbox"/> FOUNDATION ONLY		B. C OWNERSHIP PUB C PRIVATE 1. <input type="checkbox"/> STATE 4. <input type="checkbox"/> TAXABLE 2. <input type="checkbox"/> CITY OR TOWN 5. <input type="checkbox"/> TAX EXEMPT 3. <input type="checkbox"/> OTHER, SPECIFY _____		C. ESTIMATED COST MATERIAL AND LABOR 1. STRUCTURAL \$ <u>40,000</u> TO BE INSTALLED BUT NOT INCLUDED IN THE ABOVE COST 2. ELECTRICAL \$ <u>20,000</u> 3. PLUMBING OR PIPING \$ <u>500</u> 4. HEATING, AIR COND. \$ <u>1500</u> 5. OTHER, ELEVATOR, ETC. \$ _____ TOTAL COST \$ _____			
D. PROPOSED USE RESIDENTIAL 1. <input type="checkbox"/> R-1 MOTEL, HOTEL 2. <input type="checkbox"/> R-2 MULTI-FAMILY 3. <input type="checkbox"/> R-3 One and Two Family Attached 4. <input type="checkbox"/> R-4 One and Two Family Detached 5. <input type="checkbox"/> GARAGE 6. <input type="checkbox"/> CARPORT 7. <input type="checkbox"/> MOBILE HOME 8. <input type="checkbox"/> SWIMMING POOL 9. <input type="checkbox"/> FENCES 10. <input type="checkbox"/> SIGNS 11. <input type="checkbox"/> FIREPLACE 12. <input type="checkbox"/> OTHER, SPECIFY _____		E. PROPOSED USE NON-RESIDENTIAL 1. <input type="checkbox"/> A-1-A THEATRES W/STAGE 3. <input type="checkbox"/> I-2 INSTITUTIONAL INCAPACITATED 2. <input type="checkbox"/> A-1-B THEATRES W/O STAGE 4. <input type="checkbox"/> I-3 INSTITUTIONAL RESTRAINED 3. <input type="checkbox"/> A-2 NIGHT CLUBS 5. <input type="checkbox"/> M MERCANTILE 4. <input type="checkbox"/> A-3 RESTAURANTS 6. <input type="checkbox"/> S-1 STORAGE MODERATE 5. <input type="checkbox"/> A-4 CHURCHES 7. <input type="checkbox"/> S-2 STORAGE LOW 6. <input type="checkbox"/> A-5 STADIUMS 8. <input type="checkbox"/> SWIMMING POOL 7. <input type="checkbox"/> B BUSINESS 9. <input type="checkbox"/> FENCES 8. <input type="checkbox"/> E EDUCATIONAL 10. <input type="checkbox"/> SIGNS 9. <input type="checkbox"/> F-1 FACTORY (HIG. HAZ.) 21. <input type="checkbox"/> OTHER 10. <input type="checkbox"/> F-2 FACTORY (LOW HAZ.) SPECIFY _____ 11. <input type="checkbox"/> H HIGH HAZARD 12. <input type="checkbox"/> I-1 INSTITUTIONAL GROUP HOME		F. RESIDENTIAL (COMPLETE FOR NEW BUILDINGS, AND RECONSTRUCTION) SINGLE FAMILY 1. <input type="checkbox"/> TOTAL SINGLE FAMILY UNITS 2. <input type="checkbox"/> TOTAL NO. OF BEDROOMS TOTAL NO. OF BATHROOMS 3. <input type="checkbox"/> Full 4. <input type="checkbox"/> Hall MULTI-FAMILY 5. <input type="checkbox"/> TOTAL NO. OF KITCHENS TOTAL NO. OF BATHROOMS 6. <input type="checkbox"/> Full 7. <input type="checkbox"/> Hall TOTAL NO. OF APARTMENTS BY NO. OF BEDROOMS 8. Eff. <input type="checkbox"/> 9. 1 <input type="checkbox"/> 10. 2 <input type="checkbox"/> 11. 3 <input type="checkbox"/> 12. 4 <input type="checkbox"/> 13. 5 <input type="checkbox"/> 14. <input type="checkbox"/> MORE, Please Specify _____ 15. <input type="checkbox"/> TOTAL NUMBER OF BUILDINGS IN PROJECT.			
G. FOUNDATION SETS BACK FROM PROPERTY LINES 1. FRONT _____ ft. _____ in. 2. REAR _____ ft. _____ in. 3. LEFT SIDE _____ ft. _____ in. 4. RIGHT SIDE _____ ft. _____ in.		H. DIMENSIONS 1. No. of Stories _____ 2. Basement: Yes ___ No ___ 3. Height of Construction Ft. _____ MAX. WIDTH _____ MAX. DEPTH _____ 4. Total Floor Area Sq. Ft. w/o Basement _____		I. PRINCIPAL TYPE OF CONSTRUCTION (CONSTRUCTION CLASS (Check one)) 1. 1A _____ 5. 2C _____ 9. 5A _____ 2. 1B _____ 6. 3A _____ 10. 5B _____ 3. 2A _____ 7. 3B _____ 4. 2B _____ 8. 4 _____			
J. FLOOD HAZARD AREA - 1. YES 2. NO 1. Elev. (MSL) of lowest floor incl. basement _____ 2. Elev. (MSL) of 100 year flood _____		K. TYPES OF SEWAGE DISPOSAL 1. <input type="checkbox"/> PUBLIC 2. <input type="checkbox"/> PRIVATE SYSTEM* 3. LOSS NO. _____ DATE _____		L. PRINCIPAL TYPE OF HEATING FUEL 1. <input type="checkbox"/> GAS 2. <input type="checkbox"/> ELECTRICITY 3. <input type="checkbox"/> OIL 4. <input type="checkbox"/> COAL 5. <input type="checkbox"/> SOLAR 6. <input type="checkbox"/> OTHER			
M. NUMBER OF OFF-STREET PARKING SPACES 1. ENCLOSED _____ 2. OUTDOORS _____		N. TYPE OF WATER SUPPLY 1. <input type="checkbox"/> PUBLIC 2. <input type="checkbox"/> PRIVATE SYSTEM 3. <input type="checkbox"/> INDIVIDUAL WELL		O. EQUIPMENT* 1. INCINERATOR _____ 2. ELEVATOR (Enter Number) _____		P. TYPE OF MECHANICAL AND AIR CONDITIONING 1. <input type="checkbox"/> Central-Electric 5. <input type="checkbox"/> Heat Pump 2. <input type="checkbox"/> Central-Gas 6. <input type="checkbox"/> Solar Hot Water 3. <input type="checkbox"/> Individual RM. A/C 7. <input type="checkbox"/> Solar Heat 4. <input type="checkbox"/> Oil 8. <input type="checkbox"/> Other	

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all applicable codes and ordinances of this jurisdiction.
 * IN-STATE CONTRACTOR = 0 TEL. NO. 508/ APPLICANT'S SIGNATURE Gary D. Holmes

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THE
STEPHEN B. CHURCH
COMPANY

FOUNDED 1886

P.O. BOX 67 • SEYMOUR, CT 06483 • (203) 888-2132

PRINCIPALS

WILLIAM S. DUNCAN, III
JAMES B. DUNCAN, P.E.
TERRY BISHOP

April 19, 1990

United States Geological Survey
237 J.O. Pastore Federal Building
Providence, Rhode Island 02903

ATTENTION: Herb Johnston

Dear Herb:

Our company will be constructing and yield testing six 2 1/2 inch diameter water wells at a site south of route 7 and east of Tarklin Road in the Harrisville section of the town of Burrillville, Rhode Island. The project is being done for the Corps of Engineers, and we are a subcontractor to the R.H. White Construction Company. Enclosed is our description of the method of well installation.

The project specifications require us to notify you before we start work. We expect to start on April 23 or 24, and the job should take 8 to 10 working days.

Very truly yours,

James B. Duncan
Vice President

JBD/jp

enclosures

cc: R.H. White Construction Co.

GRAVEL WELLS • WELL MAINTENANCE • PUMPING SYSTEMS • GROUND WATER EXPLORATION

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THE
STEPHEN B. CHURCH
COMPANY FOUNDED 1886

P.O. BOX 67 • SEYMOUR, CT 06483 • (203) 888-2132

PRINCIPALS

WILLIAM S. DUNCAN, III
JAMES B. DUNCAN, P.E.
TERRY BISHOP

April 19, 1990

State of Rhode Island
Department of Environmental Management
Division of Groundwater
291 Promenade Street
Providence, Rhode Island 02901

ATTENTION: Sue Kiernan

Dear Sue:

Our company will be constructing and yield testing six 2 1/2 inch diameter water wells at a site south of route 7 and east of Tarklin Road in the Harrisville section of the town of Burrillville, Rhode Island. The project is being done for the Corps of Engineers, and we are a subcontractor to the R.H. White Construction Company. Enclosed is our description of the method of well installation.

The project specifications require us to notify you before we start work. We expect to start on April 23, or 24, and the job should take 8 to 10 working days.

Very truly yours,

James B. Duncan
Vice President

JBD/jp

cc: R.H. White Construction Co.

GRAVEL WELLS • WELL MAINTENANCE • PUMPING SYSTEMS • GROUND WATER EXPLORATION

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