

JJ Manning

— AUCTIONEERS —

PROPERTY INFORMATION PACKAGE #26-2236

REAL ESTATE AUCTION

10.02+/- ACRE PRIVATE ESTATE LOT
3,267+/- SF, 4BR, 3.5BA COLONIAL FARM HOME
1,802+/- SF, 2BR, 2BA POST & BEAM IN-LAW HOME

169 SCANTIC RD., HAMPDEN, MA

Tuesday, July 14 at 12pm On-site

Open House: Wednesday, July 8 (11am-1pm)

MA Auc. Lic. #111



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JJ Manning
AUCTIONEERS
AUCTIONEER'S DISCLAIMER

The following information is provided to you as a matter of convenience only, and no representation or warranty, expressed or implied, is made as to its accuracy or completeness.

Prospective purchasers of the auction property are responsible for conducting such due diligence of their own as they consider appropriate, prior to bidding at the auction sale.

All information contained within this Property Information Packet was derived from reliable sources and is believed to be correct, but is not guaranteed. Buyers shall rely entirely on their own judgment and inspection.

Announcements from the Auction Block will take precedence over any previously printed material or any other oral statements made.



June 9, 2026

Dear Prospective Bidder:

JJManning Auctioneers is pleased to offer a 10+/- acre private estate lot with a 3,267+/- sf home and separate 1,802+/- sf in-law home located at 169 Scantic Rd., Hampden, MA. The main Colonial home was built in 1994 and has 4 bedrooms, 3.5 baths, a wrap-around porch, 2-car garage and partially finished basement. The 2-story Post & Beam in-law home was built in 2016 and has 2 bedrooms, 2 baths, a wrap-around porch and 3-car garage.

The owners have chosen auction, the accelerated method of marketing, for the sale of this fabulous property. Their decision allows you to set the market price for this magnificent property with your bid. You will buy the property at the lowest possible price by bidding one increment higher than the competition. What an opportunity!

As you know, the property is being sold "as is, with all faults", be sure to attend the scheduled Open House. There is a large amount of information in this Property Information Package (PIP), please review it carefully. The auction will be held on Tuesday, July 14, 2026 at 12:00pm on-site. Don't miss it! If you can't attend but wish to make an Absentee Bid, give us a call.

The sale is not contingent upon your ability to acquire mortgage financing. You are encouraged to pre-qualify yourself with a lender before the auction. This will help you to bid with confidence. Read the Sample Purchase & Sale Agreement in this package. You should consult your attorney with any questions regarding the Agreement. There can be no changes to the Agreement.

Don't forget to have the \$25,000 certified deposit check made out to yourself and bring it with you to the auction. You must show the check at registration in order to receive a Bidder Number. You must have a Bidder Number in order to bid at this open, outcry auction.

If you are interested in making a pre-auction offer for this property, it must be tendered on a signed JJManning approved Purchase & Sale Agreement and accompanied by a 10% certified deposit in certified or bank check or by confirmed wire transfer. Please contact us at auctions@jjmanning.com or the phone number below for details.

Our experienced auction staff is available to answer your questions at 800-521-0111, at the open house and one hour before the auction. We welcome your calls. See you at the auction. Good luck with your bids!

Sincerely,

Justin J. Manning, CAI, AARE
President



TERMS & CONDITIONS

REAL ESTATE AUCTION

**10.02+/- ACRE PRIVATE ESTATE LOT
3,267+/- SF, 4BR, 3.5BA COLONIAL FARM HOME
1,802+/- SF, 2BR, 2BA POST & BEAM IN-LAW HOME**

169 SCANTIC RD., HAMPDEN, MA

Tuesday, July 14 at 12pm On-site

Open House: Wednesday, July 8 (11am-1pm)

MA Auc. Lic. #111

Terms of Sale: 10% deposit of which Twenty-Five Thousand Dollars (\$25,000.00) must be presented in certified or bank check. Remainder of the 10% deposit in wire transfer, certified or bank check by 4:00 p.m. ET on Thursday, July 16, 2026. Balance in 30 days.

A. Make the certified deposit check payable to yourself. If you are the successful bidder, you will endorse the check to JJManning Auctioneers, Escrow Agent.

B. Closing will take place on or before Thursday, August 13, 2026 (30 days from the auction) unless otherwise agreed upon by Seller, in writing.

C. A Buyer's Premium of TEN PERCENT (10%) will be added to the high bid. Their sum will constitute the Total Purchase Price. See Buyer's Premium explanation elsewhere in this Bidder Information Package.

D. The property is being sold "as is, with all faults". We encourage you to attend the Open House and thoroughly inspect the property. You must rely on your own inspection and judgment when bidding on this property.

E. Auctioneer reserves the right to enter protective bids on behalf of Seller.

F. Auctioneer reserves the right to disqualify any bidders at auctioneer's sole discretion. Should a dispute arise amongst any bidders, auctioneer's decision shall be final and binding.

G. The property is NOT being sold with a financing contingency, so we recommend that you pre-qualify yourself with your lending institution before bidding at the auction sale. This will allow you to bid with confidence!

H. Other terms, if any, to be announced at the auction sale.



BUYER'S PREMIUM EXPLANATION

There will be a Buyer's Premium of 10% added to the high bid. The total of the high bid plus the 10% Buyer's Premium shall constitute the Contract Sales Price.

EXAMPLE:

	Bid Price:	\$100,000.00
	Add 10% Buyer's Premium:	\$ 10,000.00

	Contract sales price:	\$110,000.00

The contract sales price represents the total due from the buyer and will be the amount entered on the *Purchase & Sale Agreement*.

AUCTION PURCHASE AND SALE AGREEMENT
(MA Auctioneer Lic# 111)

This 14th day of July 2026

1. PARTIES AND MAILING ADDRESSES

Joseph G. Trosky & Jenny Jean Trosky hereinafter called the SELLER, agrees to SELL and

hereinafter called the BUYER or PURCHASER, agrees to BUY, upon the terms hereinafter set forth, the following described premises:

2. DESCRIPTION

The land with the buildings thereon known as 169 Scantic Rd., Hampden, MA.

3. BUILDINGS, STRUCTURES, IMPROVEMENTS, FIXTURES

Included in the sale as a part of said premises are the buildings, structures, and improvements now thereon, and the fixtures belonging to the SELLER and used in connection therewith including, if any, all wall-to-wall carpeting, drapery rods, automatic garage door openers, venetian blinds, window shades, screens, screen doors, storm windows and doors, awnings, shutters, furnaces, heaters, heating equipment, stoves, ranges, oil and gas burners and fixtures appurtenant thereto, hot water heaters, plumbing and bathroom fixtures, garbage disposals, electric and other lighting fixtures, mantels, outside television antennas, fences, gates, trees, shrubs, plants, and ONLY IF BUILT IN, refrigerators, air conditioning equipment, ventilators, dishwashers, washing machines and dryers; and none. The SELLER, its agents or representatives have not made any representations, warranties, promises, covenants, agreements or guarantees, implied or expressed, oral or written with respect to the conformity of the property to any zoning, land use regulations, or suitability for potential development or subdivision. The buyer should verify all building, zoning, board of health, and code designations as the seller offers no guarantees and makes no declarations as to the property's suitability. There is a disclosed CoC issue for the in-law house and buyer is hereby made aware of said outstanding issue which shall be their responsibility post-closing.

4. TITLE DEED

Said premises are to be conveyed by a good and sufficient Quitclaim Deed running to the BUYER, or to the nominee designated by the BUYER by written notice to the SELLER at least seven days before the deed is to be delivered as herein provided and said deed shall convey a good and clear record, marketable or insurable title thereto, free from encumbrances, except

- (a) Provisions of existing building and zoning laws;
- (b) Existing rights and obligations in party walls which are not the subject of written agreement;
- (c) Such taxes for the then current year as are not due and payable on the date of the delivery of such deed;
- (d) Any liens for municipal betterments assessed after the date of this agreement;
- (e) Easements, restrictions and reservations of record;

5. PLANS

If said deed refers to a plan necessary to be recorded therewith the SELLER shall deliver such plan with the deed in form adequate for recording or registration.

6. PURCHASE PRICE

The agreed purchase price for said premises is _____ dollars, of which

\$ _____ have been paid as a deposit this day and

\$ _____ are to be paid in wire transfer, certified, cashier's, treasurer's or bank check(s) by 4:00 pm ET on Thursday, July 16, 2026 as the additional deposit

\$ _____ are to be paid at the time of delivery of the deed in cash, or by certified, cashier's, treasurer's or bank check(s)

\$ _____ TOTAL

7. TIME FOR PERFORMANCE DELIVERY DEED

Such deed is to be delivered on or before Thursday, August 13, 2026 (30 days of the date of this agreement) at the office of SELLER'S attorney, unless otherwise agreed upon in writing. It is agreed that time is of the essence of this agreement.

8. POSSESSION AND CONDITION OF PREMISES

Full possession of said premises, except as herein provided, is to be delivered at the time of the delivery of the deed, said premises to be then (a) in the same condition as they now are, reasonable use and wear thereof excepted and (b) in compliance with provisions of any instrument referred to in clause 4 hereof.

9. EXTENSION TO PERFECT TITLE OR MAKE PREMISES CONFORM

If the SELLER shall be unable to give title or to make conveyance, or to deliver possession of the premises all as herein stipulated, or if at the time of the delivery of the deed the premises do not conform with the provisions hereof, then any payments made under this agreement shall be forthwith refunded and all other obligations of the parties hereto shall cease and this agreement shall be void without recourse to the parties hereto, unless the SELLER elects to use reasonable efforts to remove any defects in title, or to deliver possession as provided herein, or to make the said premises conform to the provisions hereof, as the case may be, in which event the SELLER shall give written notice thereof to the BUYER at or before the time for performance hereunder, and thereupon the time for performance hereof shall be extended for a period of up to ninety days.

10. FAILURE TO PERFECT TITLE OR MAKE PREMISES CONFORM, etc.

If at the expiration of the extended time the SELLER shall have failed so to remove any defects in title, deliver possession, or make the premises conform, as the case may be, all as herein agreed, or if at any time during the period of this agreement or any extension thereof, the holder of a mortgage on said premises shall refuse to permit the insurance proceeds, if any, to be used for such purposes, then any payments made under this agreement shall be forthwith refunded and all other obligations of the parties hereto shall cease and this agreement shall be void without recourse to the parties hereto.

11. BUYER'S ELECTION TO ACCEPT TITLE

The BUYER shall have the election, at either the original or any extended time for performance, to accept such title as the SELLER can deliver to the said premises in their then condition and to pay therefore the purchase price without deduction. In which case the SELLER shall convey such title, except that in the event of such conveyance in accord with the provisions of this clause, if the said premises shall have been damaged by fire or casualty insured against, then the SELLER shall, unless the SELLER has previously restored the premises to their former condition, either (a) pay over or assign to the BUYER, on delivery of the deed, all amounts recovered or recoverable on account of such insurance, less any amounts reasonably expended by the SELLER for any partial restoration; or (b) if a holder of a mortgage on said premises shall not permit the insurance proceeds or a part thereof to be used to restore the said premises to their former condition or to be so paid over or assigned, give to the BUYER a credit against the purchase price, on delivery of the deed, equal to said amounts so recovered or recoverable and retained by the holder of the said mortgage less any amounts reasonably expended by the SELLER for any partial restoration.

12. ACCEPTANCE OF DEED

The acceptance of a deed by the BUYER, or his nominee as the case may be, shall be deemed to be a full performance and discharge of every agreement and obligation herein contained or expressed, except such as are, by the terms hereof, to be performed after the delivery of said deed.

13. USE OF SELLER MONEY TO CLEAR TITLE

To enable the SELLER to make conveyance as herein provided, the SELLER may, at the time of delivery of the deed, use the purchase money or any portion thereof to clear the title of any or all encumbrances or interests, provided that all instruments so procured are recorded simultaneously with the delivery of said deed.

14. INSURANCE

Until the delivery of the deed, the SELLER shall maintain the insurance on said premises as currently insured.

15. ADJUSTMENTS

Collected rents, mortgage interest, water and sewer use charges, operating expenses (if any) according to the schedule attached hereto or set forth below, and taxes for the then current fiscal year, shall be apportioned and fuel value shall be adjusted, as of the day of performance of this agreement and the net amount thereof shall be added to or deducted from, as the case may be, the purchase price payable by the BUYER at the time of delivery of the deed. Uncollected rents for the current rental period shall be apportioned if and when collected by either party.

16. ADJUSTMENT OF UNASSESSED TAXES

If the amount of said taxes is not known at the time of the delivery of the deed, they shall be apportioned on the basis of the taxes assessed for the preceding fiscal year, with a reapportionment as soon as the new tax rate and valuation can be ascertained.

17. BROKER

BUYER acknowledges that he has engaged no real estate broker, and no real estate broker has in any way been involved in this transaction except any broker previously registered with and acknowledged by AUCTIONEER in writing. BUYER agrees to indemnify and hold harmless the SELLER and AUCTIONEER, including SELLER'S and AUCTIONEER'S reasonable attorney's

Buyer's Initials: _____

fees, for any claim made by any real estate broker not registered with and acknowledged by Auctioneer in writing in connection with this transaction.

18. DEPOSIT

All deposits made hereunder shall be held in escrow by JEROME J. MANNING & Co., INC as escrow agent subject to the terms of this agreement and shall be duly accounted for at the time for performance of this agreement. In the event of any disagreement between the parties, the escrow agent may retain all deposits made under this agreement pending instructions mutually given by the SELLER and the BUYER.

19. BUYER'S DEFAULT

If the BUYER shall fail to fulfill the BUYER'S agreements herein, all deposits made or required to be made hereunder by the BUYER shall be retained by the SELLER as liquidated damages even if BUYER fails to make the deposit or additional deposit.

20. CONTINGENCIES

BUYER acknowledges that this Agreement contains no contingencies affecting the BUYER'S obligation to perform. If the sale as contemplated herein is not consummated for any reason, except SELLER'S inability to deliver marketable or insurable title (subject only to the matters set forth in paragraph 4), then the deposit(s) paid by the BUYER upon the execution of this Agreement and/or any additional deposit required to be made shall inure to and become the property of the SELLER, all as provided in Paragraph (19) hereof.

21. WARRANTIES AND REPRESENTATIONS

The BUYER acknowledges that the BUYER has not been influenced to enter into this transaction nor has he relied upon any warranties or representations not set forth or incorporated in this agreement. The BUYER further acknowledges that he is buying the Property as is, with all faults and without warranty of any kind, whatsoever. Buyer acknowledges that buyer has reviewed or been given the opportunity to review the Property Information Packages (PIPS) for this property along with any updates provided up and through the day of the auction.

22. CONSTRUCTION OF AGREEMENT

This instrument, executed in multiple counterparts, is to be construed as a Massachusetts contract, is to take effect as a sealed instrument, sets forth the entire contract between the parties, is binding upon and inures to the benefit of the parties hereto and their respective heirs, devisee, executors, administrators, successors and assigns, and may be canceled, modified or amended only by a written instrument executed by both the SELLER and the BUYER. If two or more persons are named herein as BUYER their obligations hereunder shall be joint and several. The captions and marginal notes are used only as a matter of convenience and are not to be considered a part of this agreement or to be used in determining the intent of the parties to it.

23. LEAD PAINT LAW

The BUYER acknowledges that whenever a child or children under six years of age resides in any residential premises in which any paint, plaster or other accessible material contains dangerous levels of lead, the owner of said premises must remove or cover said paint, plaster or other material so as to make it inaccessible to children under six years of age. BUYER further acknowledges that he has been notified of said lead paint law by SELLER and AUCTIONEER.

24. SMOKE DETECTORS/SEPTIC/WATER

The BUYER will be responsible for the installation and inspection of smoke detectors and CO2 detectors after closing and once the property is suitable for habitation. If necessary, the buyer shall be responsible for the repair, upgrade or installation of a septic system and/or a well and/or municipal water and/or sewer connections which meet the requirements of the board of health. The closing shall not be contingent upon any certificates of compliance nor contingent upon a certificate of occupancy as the property is being conveyed as is.

25. SOPHISTICATED BUYER

The BUYER acknowledges that by registering, participating, and competing to purchase this subject real estate via a PUBLIC AUCTION SALE wherein all contingencies, warranties, and representations have been specifically disclaimed as in paragraphs 20 and 21 of this agreement establishes that the BUYER is knowledgeable and aware of the risks of doing so and possesses a level of sophistication commensurate with the complexity of the sale terms both expressed by this Agreement and the potential of the property being acquired.

Buyer's Initials: _____

NOTICE: This is a legal document that creates binding obligations. If not understood, consult an attorney.

Joseph G. Trosky & Jenny Jean Trosky, Seller(s)

BUYER

By:

BUYER

By:

Buyer's Mailing Address (Street or P.O. Box)

Buyer's Attorney (Name)

Buyer's Mailing Address (City, State & Zip Code)

Buyer's Attorney (Firm)

Buyer's Daytime Phone

Buyer's Attorney's Address (Street or P.O. Box)

Buyer's Evening Phone

Buyer's Attorney's Address (City, State & Zip Code)

Buyer's Attorney's Phone

Jerome J. Manning & Co., Inc., AUCTIONEER/ESCROW AGENT

10.02± ACRE PRIVATE ESTATE LOT

169 Scantic Road, Hampden, MA

3,267± sf, 4BR Home & 1,802± sf, 2BR In-Law Home



Main Home



In-law Home



In-law Home



AUCTION: Tuesday, July 14 at 12pm On-site

MAIN HOME

3,267± sf, 4-Bedroom, 3.5-Bath, 2-Story Colonial Farm House with full, partially finished basement, attached 2-car garage & fireplace. Built in 1994

IN-LAW HOME

1,802± sf, 2-Bedroom, 2-Bath, 2-Story Post & Beam Home with full, partially finished basement with bath, attached 3-car garage & fireplace. Built in 2016

Parcel ID: 14-55-2

Legal Ref.: 10/11/2011

Book/Page: 18950 / 0083

County: Hampden

Site Area: 10.02± acres (436,384± sf)

Frontage: 136± ft.

Features: Millings driveway, Wrap-around porches, Leaf Guard gutters, whole house generators, Pella windows, central A/C

Water: 2 Artesian Wells

Heat & Fuel: Oil (main home) / Propane (in-law)

Sewer: Septic, 2 Systems - Title 5 as of 2012

Utilities: All run through main home except for propane in in-law

Open House: Wednesday, July 8 (11am-1pm)

Terms of Sale:

10% certified deposit of which \$25,000 in certified or bank check at the auction & remainder by 4pm ET on **Thursday, July 16, 2026**. Balance in 30 days. 10% Buyer's Premium will be added to the high bid & result will be the total purchase price. Other terms, if any, announced at the sale. All information derived from reliable sources believed correct, but not guaranteed. Buyers shall rely entirely on their own judgment and inspection. Announcements from the Auction Block take precedence over any previously printed material or

any other oral statements made. JJManning Auctioneers is acting exclusively on behalf of Seller in this transaction.

Pre-auction Offers:

Must be tendered on a signed JJManning approved P&S Agreement & accompanied by a 10% certified deposit in certified or bank check or by confirmed wire transfer in order to be considered.

Buyer's Broker Terms:

Up to 2% Broker Commission offered. Visit JJManning.com for mandatory broker pre-registration requirements.

JJManning

AUCTIONEERS

Property Info., Photos, Broker Reg. & Full Terms at:

JJManning.com

800.521.0111

179 Old King's Hwy, Yarmouth Port, MA 02675



MA Auc Lic 111 • MA Broker Lic 5850
Bro 1879 • Ref 26-2236

****OWNER'S STATEMENT****

(Re: In-Law Building)

The in-law has two beds and two baths. We were granted permitting to build a 42' x 26' outbuilding/garage while my parents were living with us here in the main house/basement apartment. In keeping with the garage theme, we contracted with Vermont Frames to build a post and beam structure. We were given a bathroom, shower, kitchen sink but no second-floor bath or dishwasher. There is permitting for the additional well which is also tied into the main house and can be used by either structure. Both structures have owned and buried propane tanks (1,000 Gallon Main, 500 Gallon In-law) as well as whole house generators, 22KM Main, 18KW in-law. A situation arose when a town representative became ill and ultimately passed away. The new inspector didn't agree with the permission we were granted. The by-laws state, from what I understand, allow for an in-law which is 50% the sf of the main structure and up to 900 Sqft. total. It also required a family member to reside in the structure. It is my understanding outside of a CO there is no control over who resides in the outbuilding. Everything is fully insured without issue via Commerce/Mapfre through Richard Green Insurance in town.

169 SCANTIC RD

Location 169 SCANTIC RD

Mblu 14/ 55/ 2/ /

Owner TROSKY JOSEPH G &

Assessment \$1,116,900

PID 442

Building Count 2

Current Value

Assessment			
Valuation Year	Improvements	Land	Total
2025	\$983,000	\$133,900	\$1,116,900

Owner of Record

Owner TROSKY JOSEPH G &

Sale Price \$412,000

Co-Owner TROSKY JENNY JEAN

Certificate

Book & Page 18950/0083

Sale Date 10/11/2011

Instrument 00

Ownership History

Ownership History					
Owner	Sale Price	Certificate	Book & Page	Instrument	Sale Date
TROSKY JOSEPH G &	\$412,000		18950/0083	00	10/11/2011
KONDAUR CAPITAL CORPORATION	\$467,850		18584/0582	1L	12/10/2010
AVDOULOS M + R	\$0		3868/0		02/06/1963

Building Information

Building 1 : Section 1

Year Built: 1994

Living Area: 3,267

Building Attributes	
Field	Description
Style:	Colonial
Model	Residential
Grade:	Above Average
Stories:	2
Occupancy	1

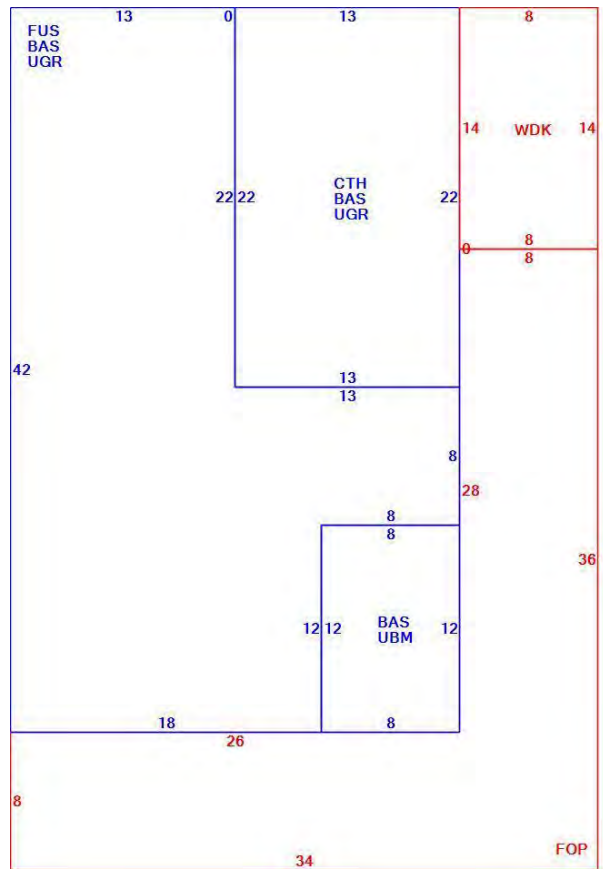
Stories:	2
Occupancy	1
Exterior Wall 1	Vinyl Siding
Exterior Wall 2	
Roof Structure:	Gable/Hip
Roof Cover	Asphalt
Interior Wall 1	Drywall
Interior Wall 2	
Interior Flr 1	Hardwood
Interior Flr 2	Carpet
Heat Fuel	Oil
Heat Type:	Forced Hot Air
AC Type:	Central
Total Bedrooms:	3 Bedrooms
Full Baths:	1
Half Baths:	1
Total Rooms:	6
Bath Style:	Above Average
Kitchen Style:	Above Average

Building Photo



(<https://images.vgsi.com/photos/HampdenMAPotos//A00\00\15\42.jpg>)

Building Layout



(ParcelSketch.ashx?pid=442&bid=20211)

Building Sub-Areas (sq ft)			Legend
Code	Description	Gross Area	Living Area
BAS	First Floor	1,092	1,092
FUS	Upper Story	710	710
CTH	Cathedral Ceiling	286	0
FOP	Porch, Open	496	0
UBM	Basement, Unfinished	96	0
UGR	Garage, Under	996	0
WDK	Deck, Wood	112	0

		3,788	1,802
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Extra Features

Extra Features				Legend
Code	Description	Size	Value	Bldg #
FPL1	Fireplace Avg	1.00 UNITS	\$2,600	1

Land

Land Line Valuation

Size (Acres) 10.02

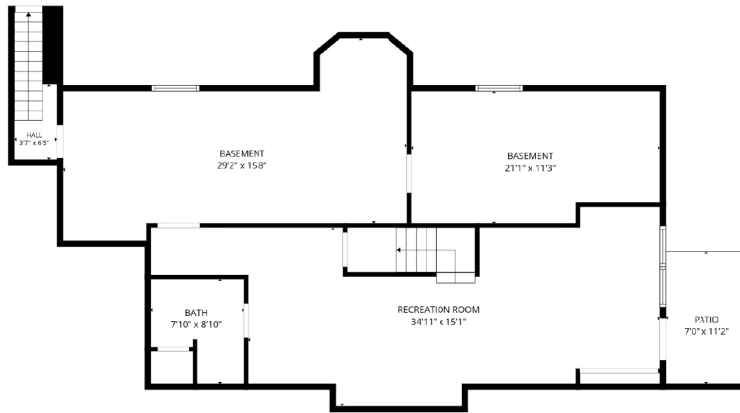
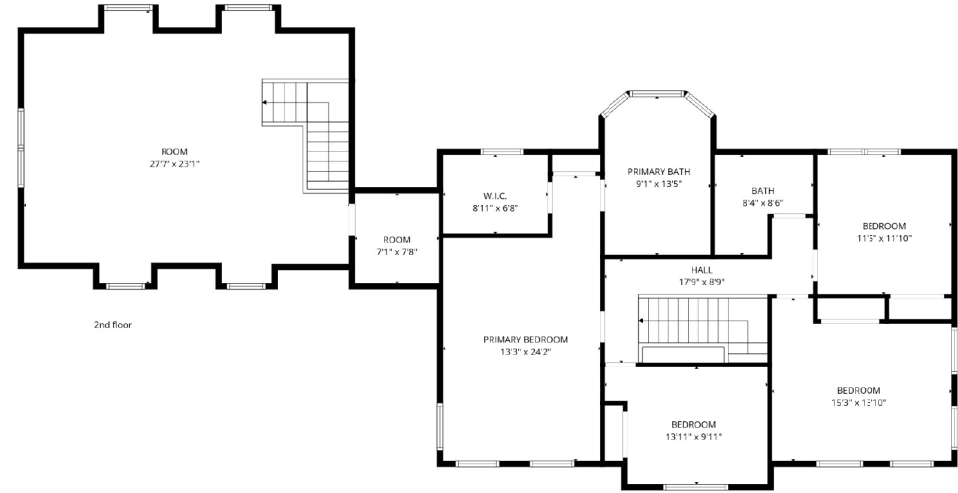
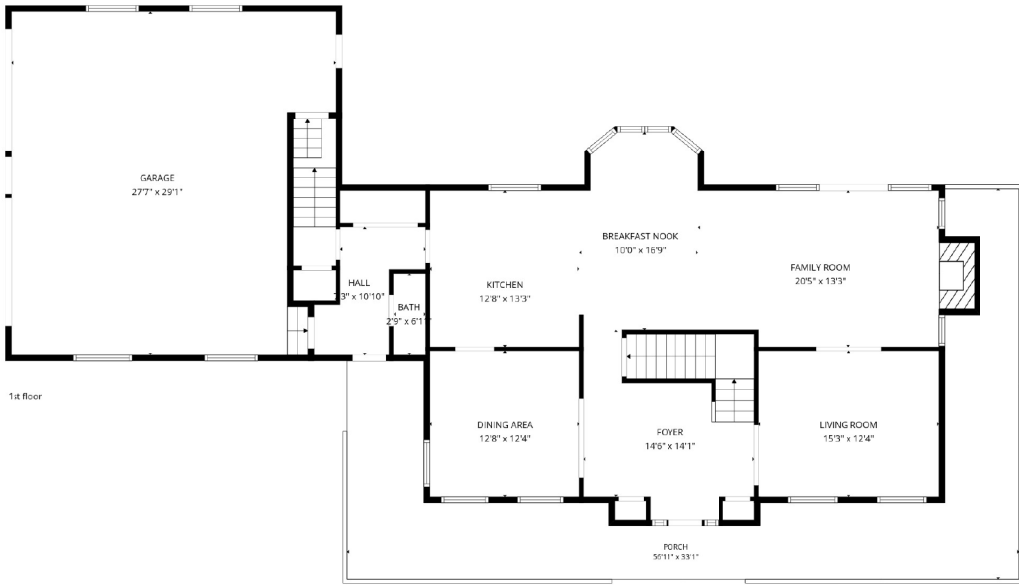
Depth

Outbuildings

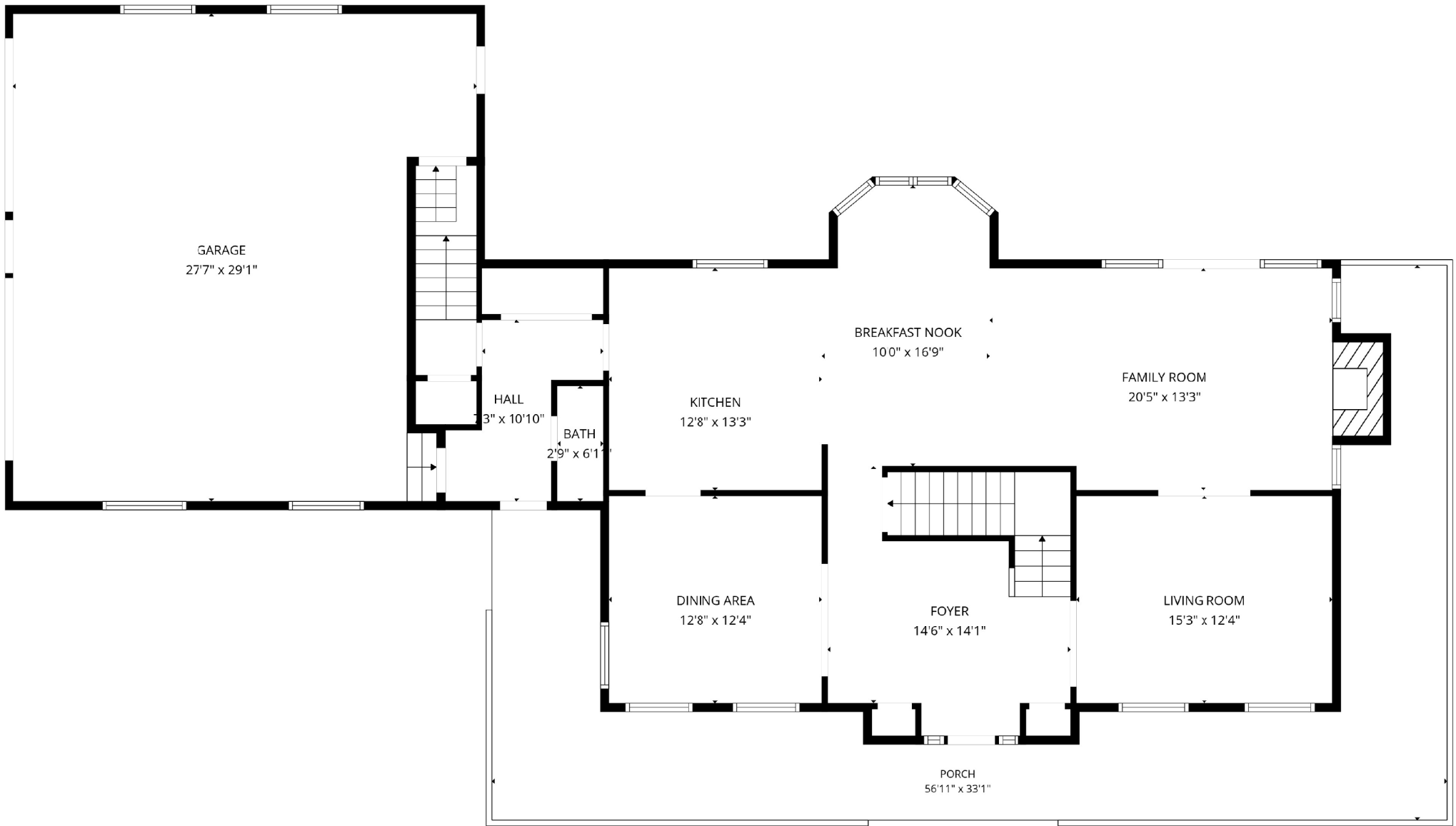
Outbuildings	Legend
No Data for Outbuildings	

Valuation History

Assessment			
Valuation Year	Improvements	Land	Total
2025	\$983,000	\$133,900	\$1,116,900
2024	\$917,500	\$115,700	\$1,033,200
2023	\$796,300	\$115,700	\$912,000



TOTAL: 3695 sq. ft
 Basement: 618 sq. ft, 1st floor: 1358 sq. ft, 2nd floor: 1719 sq. ft
 EXCLUDED AREAS: BASEMENT: 598 sq. ft, HALL: 45 sq. ft, PATIO: 78 sq. ft,
 GARAGE: 725 sq. ft, PORCH: 570 sq. ft, FIREPLACE: 20 sq. ft,
 LOW CEILING: 88 sq. ft, WALLS: 365 sq. ft



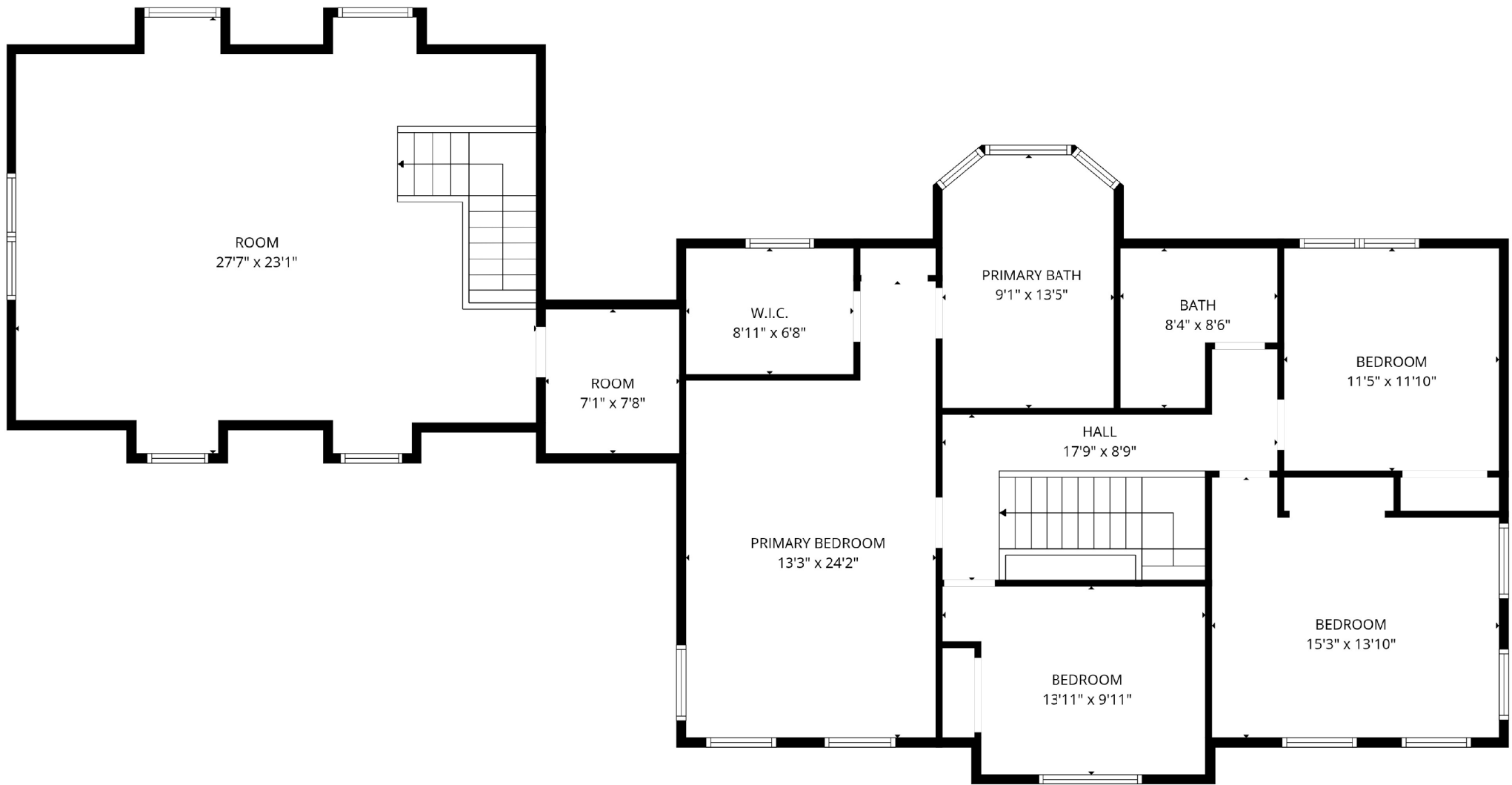
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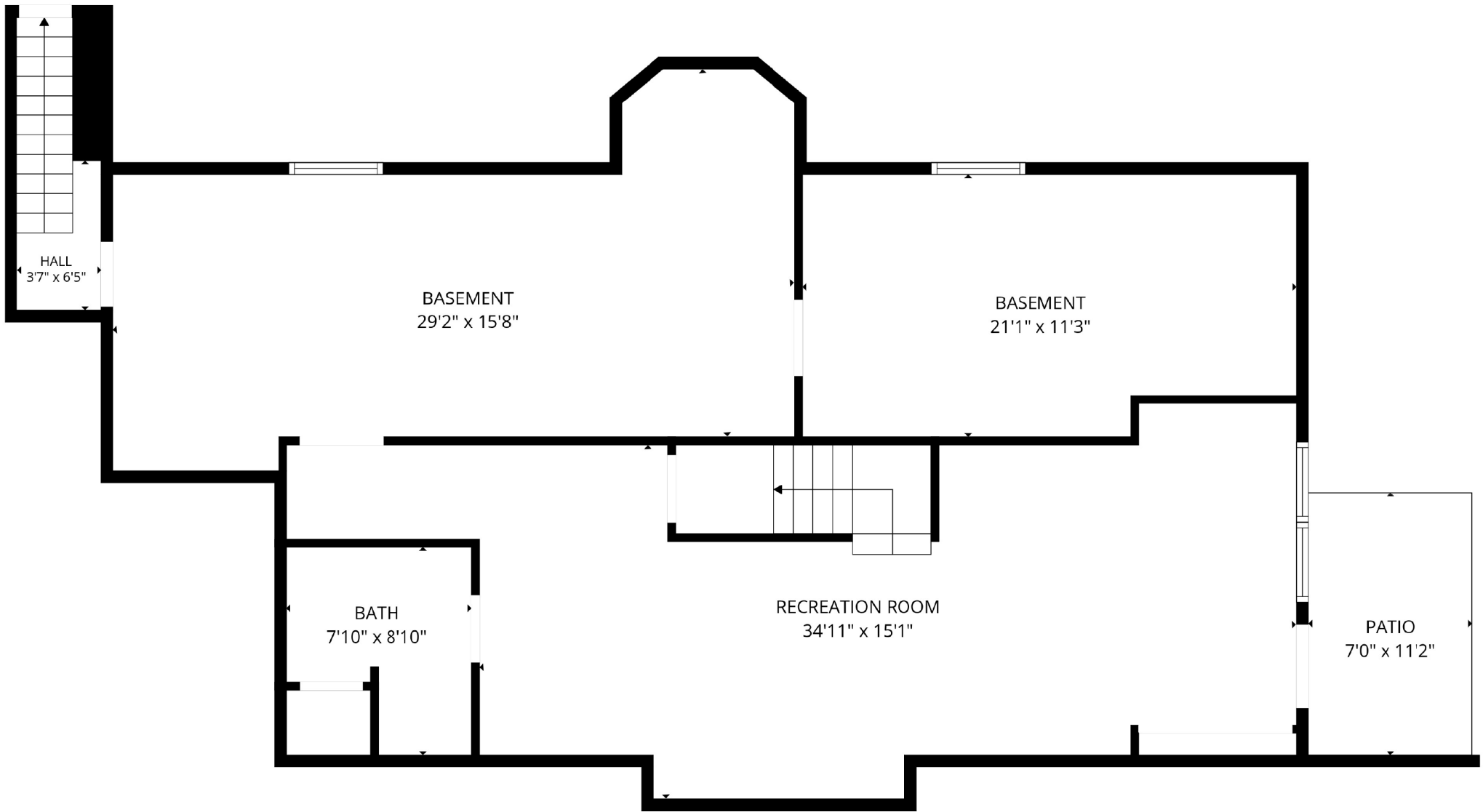
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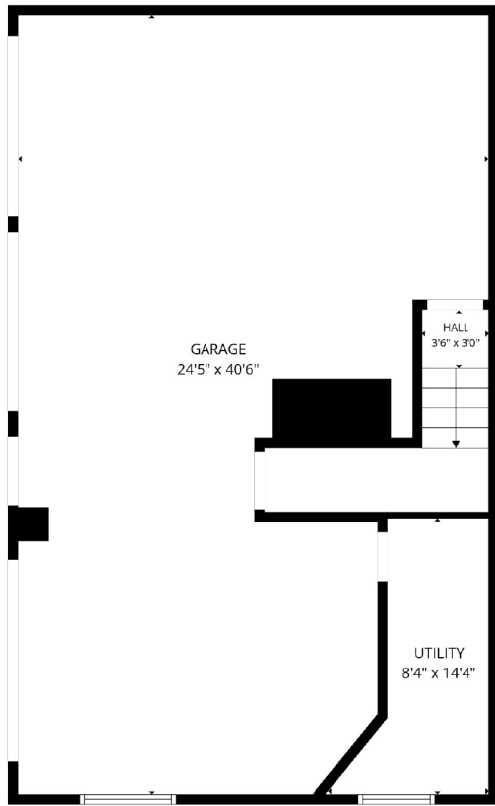
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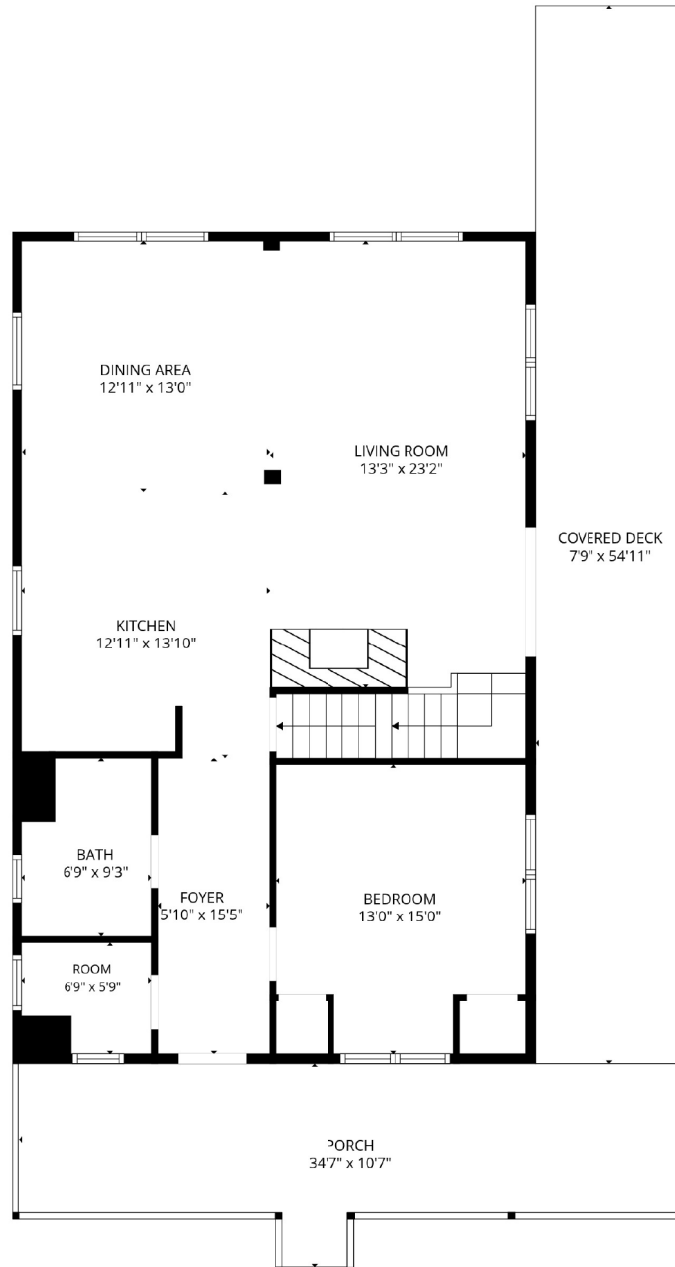


TOTAL: 3695 sq. ft

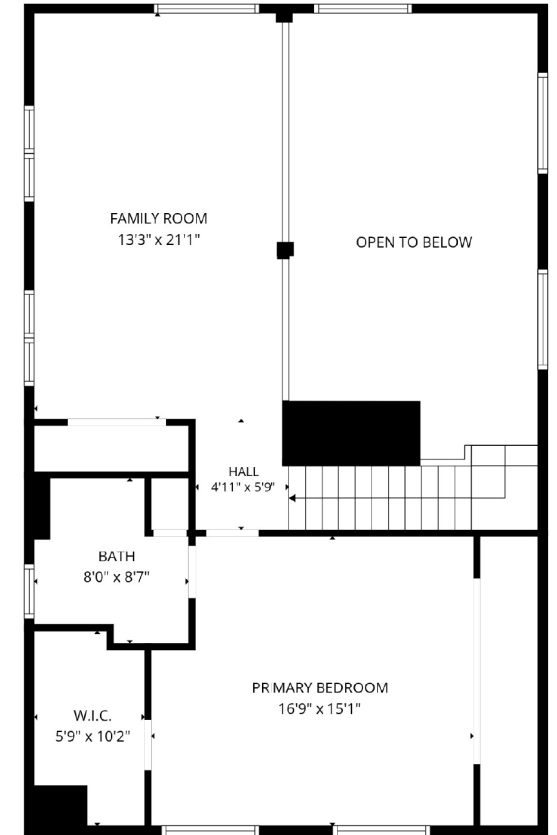
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Basement



1st floor



2nd floor

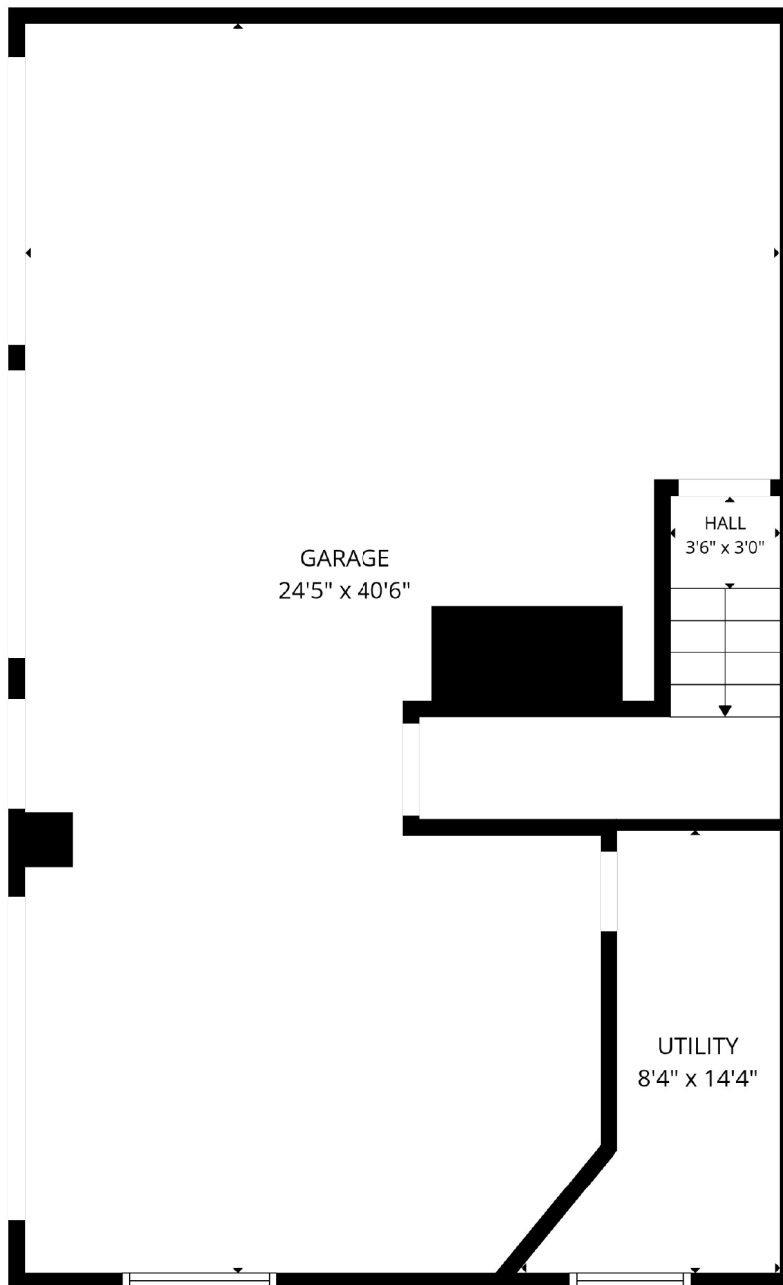
TOTAL: 1948 sq. ft

Basement: 66 sq. ft, 1st floor: 1106 sq. ft, 2nd floor: 776 sq. ft

EXCLUDED AREAS: GARAGE: 820 sq. ft, UTILITY: 82 sq. ft, COVERED DECK: 427 sq. ft,

PORCH: 278 sq. ft, OPEN TO BELOW: 298 sq. ft, LOW CEILING: 32 sq. ft,

WALLS: 226 sq. ft



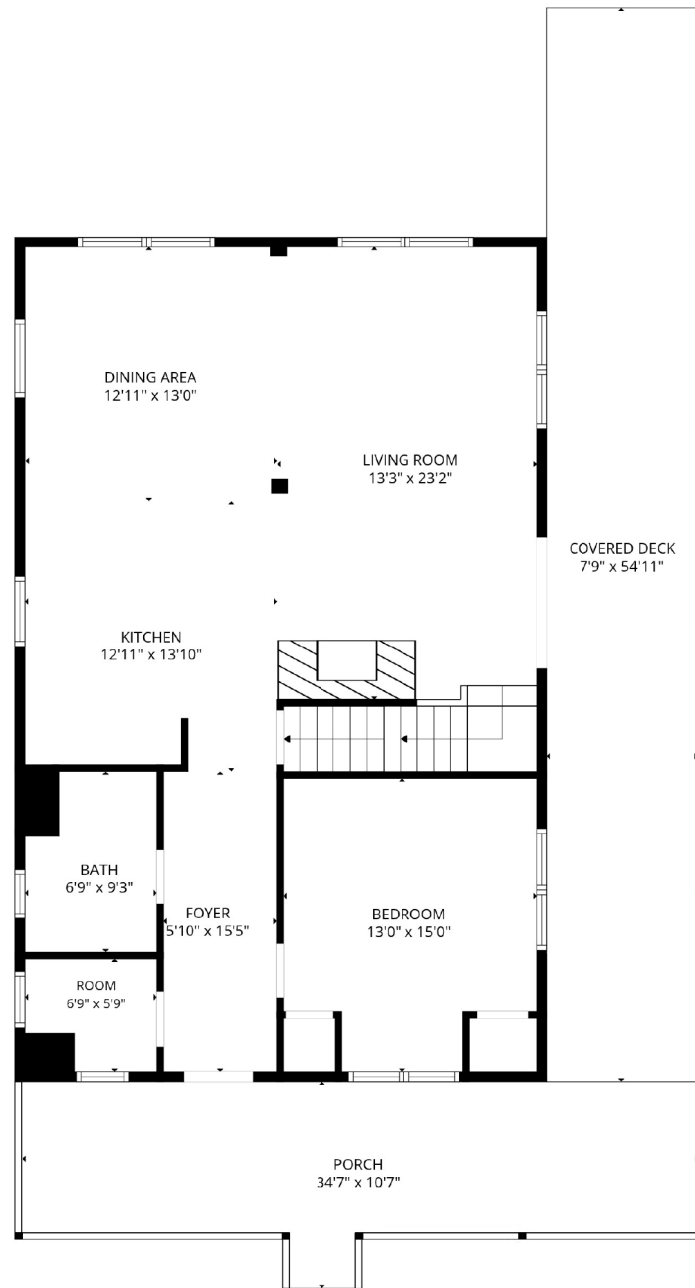
TOTAL: 1948 sq. ft

Basement: 66 sq. ft, 1st floor: 1106 sq. ft, 2nd floor: 776 sq. ft

EXCLUDED AREAS: GARAGE: 820 sq. ft, UTILITY: 82 sq. ft, COVERED DECK: 427 sq. ft,

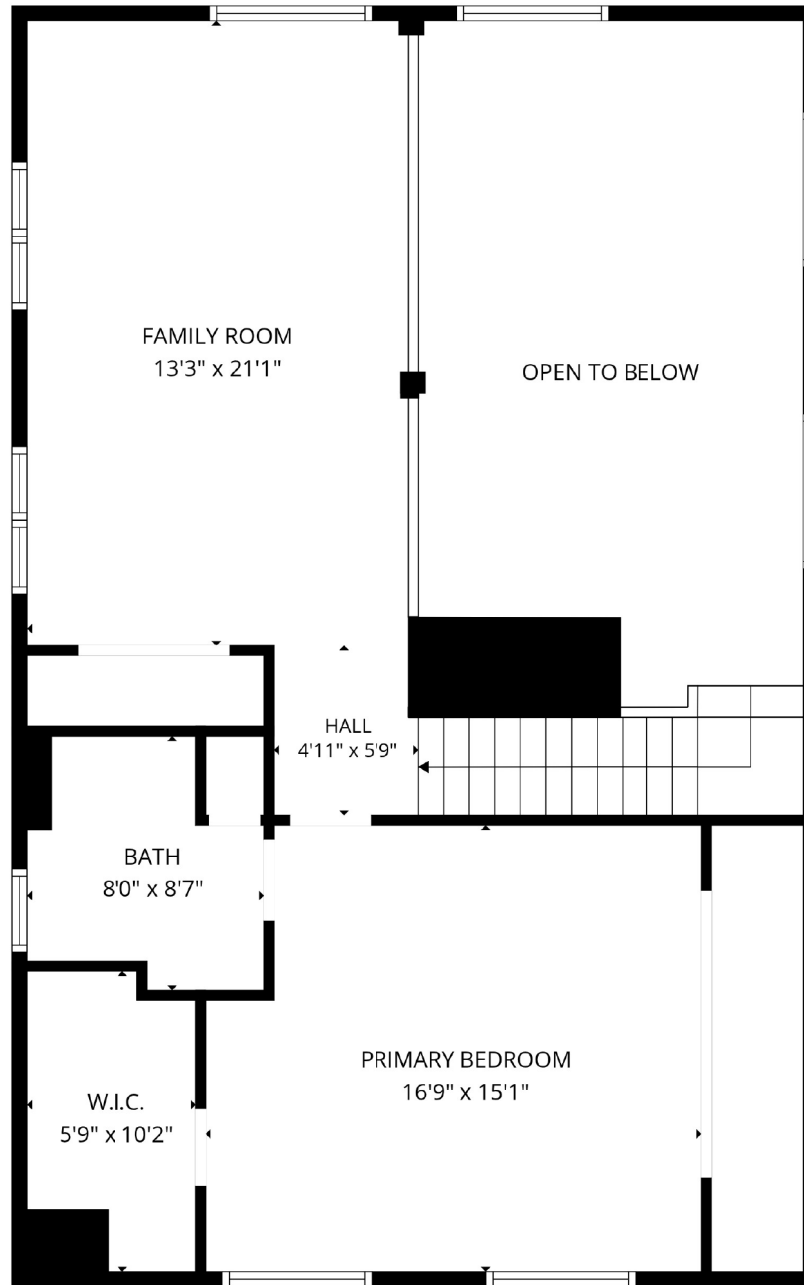
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WALLS: 226 sq. ft



TOTAL: 1948 sq. ft

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WALLS: 226 sq. ft



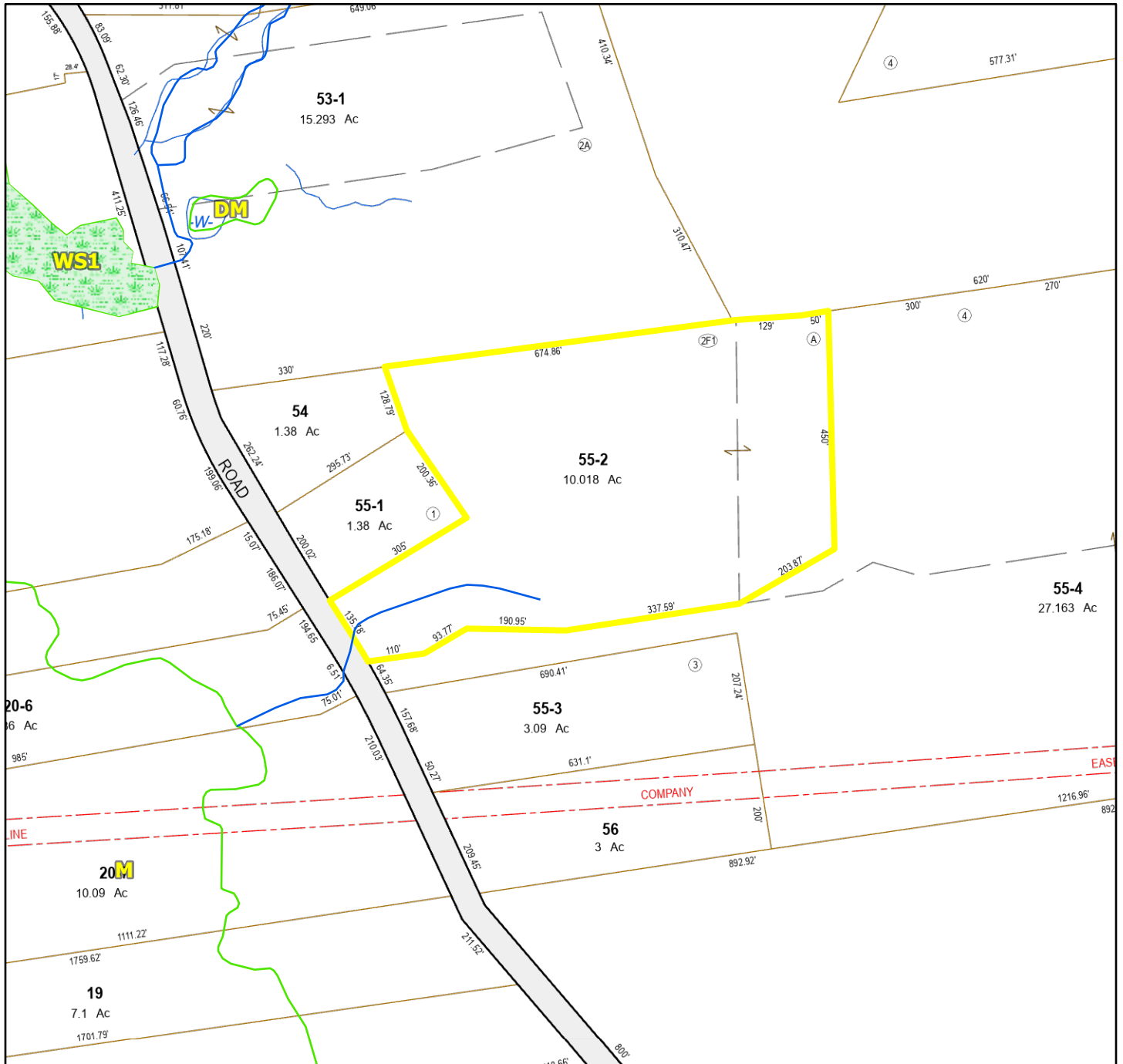
Town of Hampden, MA

1 inch = 280 Feet



www.cai-tech.com

May 6, 2026



	Hydrologic Connection		Property Line		WaterLines
	Apparent Wetland Limit		Public Road		Shadow
	Marsh/Bog		Utility		Right of Ways
	Wooded marsh		Tract Line		
	PWater		Property Hook		

Data shown on this map is provided for informational purposes only. The municipality and CAI Technologies are not responsible for any use for other purposes or misuse or misrepresentation of this map. AbuttersDisclaimer|Data shown on this report is provided for informational purposes only. The municipality and CAI Technologies are not



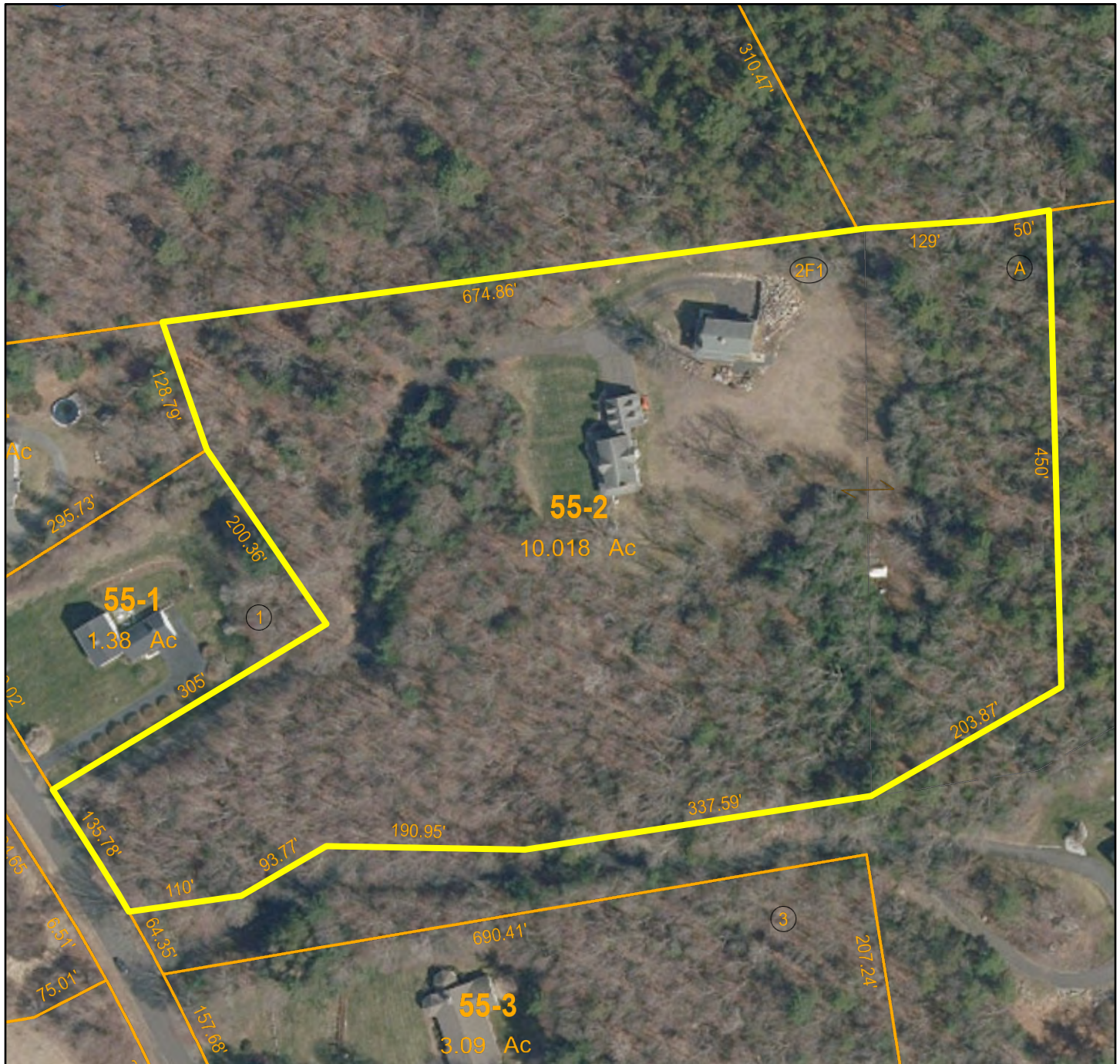
Town of Hampden, MA

1 inch = 140 Feet



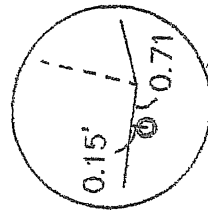
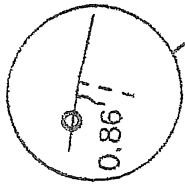
www.cai-tech.com

May 6, 2026



- Property Line
- Public Road
- Tract Line
- Property Hook
- WaterLines

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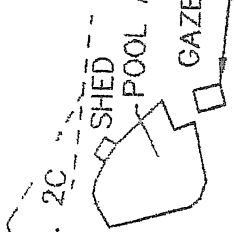


NEW
400,24
9.188

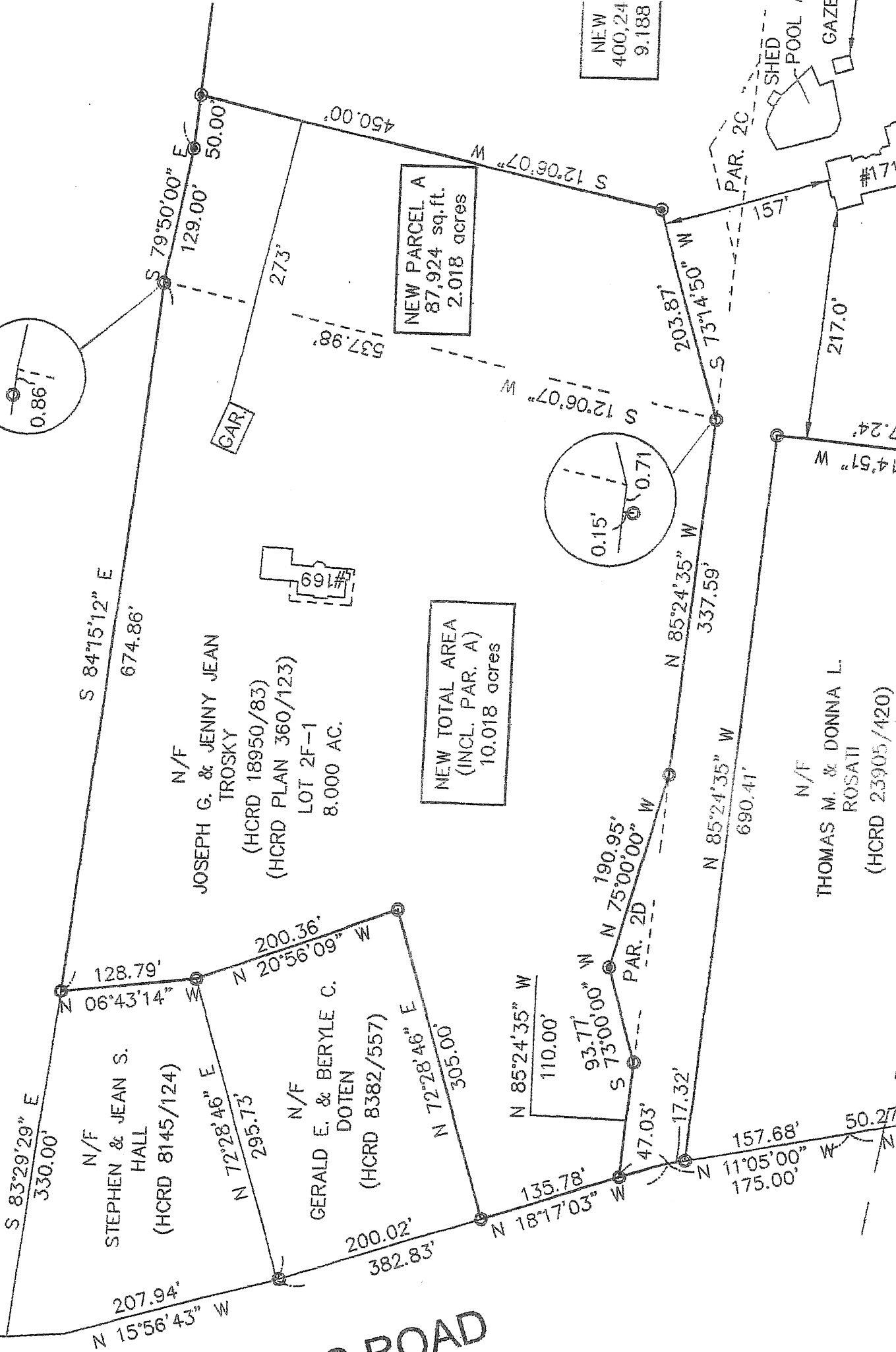
NEW PARCEL A
87,924 sq.ft.
2.018 acres

NEW TOTAL AREA
(INCL. PAR. A)
10.018 acres

CAR.



#171



ATIC ROAD

Affected Premises:
New Parcel A Scantic Road
Hampden, MA 01036

_____ [Space Above This Line for Recording Data] _____

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS that JONATHAN ALLEN
WIETECHKA of 171 Scantic Road, Hampden, Massachusetts 01036

*for consideration paid, and in full consideration of EIGHT THOUSAND DOLLARS
AND NO CENTS (\$8,000.00)*

Grant to JOSEPH G. TROSKY and JENNY JEAN TROSKY, husband and wife,
tenants by the entirety of 169 Scantic Road, Hampden, MA 01036

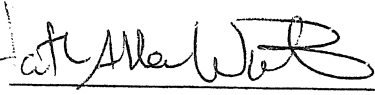
With QUITCLAIM Covenants

The land with the buildings thereon situated in Hampden, Hampden County,
Massachusetts known and designated as New Parcel A as shown on a Plan of
Lots entitled "PLAN OF DIVISION OF LAND 171 SCANTIC ROAD
HAMPDEN, MASS. Owned By Jonathan Allen Wietecha" by Smith Associates
Surveyors, Inc. dated December 15, 2022 recorded with the Hampden County
Registry of Deeds in Book of Plans 397, Page 9 on February 8, 2023 containing
87,924 square feet 2.018 acres more or less to which plan reference is hereby
made for a more particular description.

The Grantor states, under the pains and penalties of perjury, that the property
conveyed herein is vacant land and was not the owner-occupied principal
residence of the Grantor or the Grantors' spouse or former spouse (if any) and
there is no other person entitled to claim the benefit of an existing estate of
homestead in the premises being conveyed.

Being a portion of the premises conveyed to the grantor herein by Deed of
Jonathan Allen Wietecha and Susan Marie Wietecha Adkins, Trustees under the
Margaret Mary Wietecha Trust deed dated September 15, 2016 and recorded
with the Hampden County Registry of Deeds in Book 21359, Page 64.

Executed as a sealed instrument this 9 day of March, 2023.

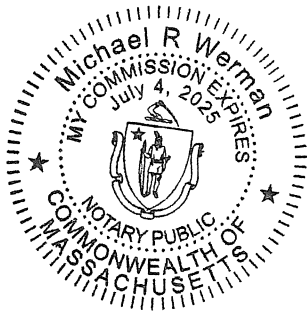

Jonathan Allen Wietecha

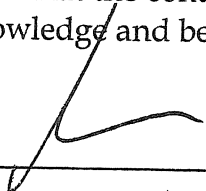
COMMONWEALTH OF MASSACHUSETTS

Hampden, ss.

On this this 9 day of March, 2023 before me, the undersigned notary public, personally appeared Jonathan Allen Wietecha, proved to me through satisfactory evidence of identification, which was personal knowledge, MA driver's licenses, oath or affirmation of a credible witness, or (identify) _____, to be the person whose name is signed on the preceding or attached document, and acknowledged to me that he signed it voluntarily for its stated purpose and that the foregoing instrument is his free act and deed and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of his knowledge and belief.

Seal




_____, Notary Public
My Commission Expires:

QUIT CLAIM DEED

KONDAUR CAPITAL CORPORATION, a corporation organized and existing under the laws of the State of Delaware, with a principal place of business at One City Boulevard West, Suite 1900, Orange, CA 93868 for consideration paid and in full consideration of Four Hundred Twelve Thousand and 00/100 (\$412,000.00) Dollars, grants to **JOSEPH G. TROSKY** and **JENNY JEAN TROSKY**, husband and wife, as Tenants by the Entirety, both of 121 Harmon Avenue, Springfield, MA 01118, WITH QUITCLAIM COVENANTS

That certain lot or parcel of land with all the buildings and improvements thereon situated in the Town of Hampden, County of Hampden, Commonwealth of Massachusetts, bounded and described as follows:

See Exhibit "A" attached hereto and made a part hereof.

Property Address: 169 Scantic Road, Hampden, MA 01036

This sale is not a sale of all or substantially all of the assets of Kondaur Capital Corporation in the State of Massachusetts.

IN WITNESS WHEREOF, Kondaur Capital Corporation has caused these presents to be executed by its duly authorized officers, who hereunto set their hands as such officers and affix its corporate seal this 5th day of October, 2011.

KONDAUR CAPITAL CORPORATION

By: *Susana Barrueto*

Susana Barrueto, Liquidation Specialist

STATE OF CALIFORNIA
COUNTY OF ORANGE

In Orange on the 5th day of October, 2011, before me personally appeared the above-named

Susana Barrueto

Susana Barrueto of Kondaur Capital Corporation who proved to me on the basis of satisfactory evidence to be the person(s) whose names are subscribed to the within instrument and acknowledged to me that ~~he~~~~she~~~~they~~ executed the same in ~~his~~~~her~~~~their~~ authorized capacity and that by ~~his~~~~her~~~~their~~ signatures on the instrument the person or the entity upon behalf of which the persons acted, executed the instrument.

I certify under PENALTY OF PERJURY under the Laws of the State of California that the foregoing paragraph is true and correct.

See attached
ACKNOWLEDGMENT

NOTARY PUBLIC -

My commission expires:

ACKNOWLEDGMENT

State of California
County of Orange _____)

On October 5, 2011 before me, Melissa Bloch, Notary Public
(insert name and title of the officer)

personally appeared Susana Barrueto
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~is~~ is are subscribed to the within instrument and acknowledged to me that ~~he~~ she ~~they~~ executed the same in ~~his~~ her ~~their~~ authorized capacity(ies), and that by ~~his~~ her ~~their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature _____



(Seal)

MASSACHUSETTS STATE EXCISE TAX
HAMPDEN COUNTY REGISTRY OF DEEDS
Date: 10-11-2011 @ 03:42pm
Ct1#: 1098 Doc#: 54853
Fee: \$1,878.72 Cons: \$412,000.00

EXHIBIT "A"

A certain parcel of land, together with the buildings and other improvements thereon, on Scantic Road in Hampden, Hampden County, Massachusetts, show as PARCEL 2F-1 on a plan entitled "LOT DIVISION PLAN OF LAND IN HAMPDEN, MA prepared for JOHN S. & MARGARET M. WIETecha Owned By KONDAUR CAPITAL CORP," by Roger E. Woods, Professional Land Surveyor, dated March 15, 2011 and recorded with the Hampden County Registry of Deeds in Plan Book 360, Page 123.

Property Address:
169 Scantic Road
Hampden, MA 01036

Being a portion of the premises conveyed to Kondaur Capital Corporation by foreclosure deed dated November 30, 2010 and recorded in the Hampden County Registry of Deeds in Book 18584, Page 582.

DONALD E. ASHE, REGISTER
HAMPDEN COUNTY REGISTRY OF DEEDS



A. U.S. DEPARTMENT OF HOUSING & URBAN DEVELOPMENT SETTLEMENT STATEMENT		B. TYPE OF LOAN:				
		1. <input type="checkbox"/> FHA	2. <input type="checkbox"/> FmHA	3. <input type="checkbox"/> CONV. UNINS.	4. <input type="checkbox"/> VA	5. <input type="checkbox"/> CONV. INS.
		6. FILE NUMBER: TROSKY, JOSEPH G.			7. LOAN NUMBER:	
		8. MORTGAGE INS CASE NUMBER:				
C. NOTE: <i>This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "POC" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.</i>						
D. NAME AND ADDRESS OF BORROWER: Joseph G. Trosky and Jenny Jean Trosky 169 Scantic Road Hampden, MA 01036		E. NAME AND ADDRESS OF SELLER: Joseph Allen Wietecha 171 Scantic Road Hampden, MA 01036		F. NAME AND ADDRESS OF LENDER:		
G. PROPERTY LOCATION: New Parcel A Scantic Road Hampden, MA 01036		H. SETTLEMENT AGENT: Reynolds & Weman, LLC PLACE OF SETTLEMENT 16 South Blvd. West Springfield, MA 01089		I. SETTLEMENT DATE: March 9, 2023		
J. SUMMARY OF BORROWER'S TRANSACTION			K. SUMMARY OF SELLER'S TRANSACTION			
100. GROSS AMOUNT DUE FROM BORROWER:			400. GROSS AMOUNT DUE TO SELLER:			
101. Contract Sales Price	8,000.00		401. Contract Sales Price	8,000.00		
102. Personal Property			402. Personal Property			
103. Settlement Charges to Borrower (Line 1400)	960.00		403.			
104.			404.			
105.			405.			
<i>Adjustments For Items Paid By Seller in advance</i>			<i>Adjustments For Items Paid By Seller in advance</i>			
106. City/Town Taxes	to		406. City/Town Taxes	to		
107. County Taxes	to		407. County Taxes	to		
108. Assessments	to		408. Assessments	to		
109.			409.			
110.			410.			
111.			411.			
112.			412.			
120. GROSS AMOUNT DUE FROM BORROWER	8,960.00		420. GROSS AMOUNT DUE TO SELLER	8,000.00		
200. AMOUNTS PAID BY OR IN BEHALF OF BORROWER:			500. REDUCTIONS IN AMOUNT DUE TO SELLER:			
201. Deposit or earnest money	1,000.00		501. Excess Deposit (See Instructions)			
202. Principal Amount of New Loan(s)			502. Settlement Charges to Seller (Line 1400)	236.48		
203. Existing loan(s) taken subject to			503. Existing loan(s) taken subject to			
204.			504. Payoff of first Mortgage			
205.			505. Payoff of second Mortgage			
206.			506. Deposit retained by seller	1,000.00		
207.			507.			
208.			508.			
209.			509.			
<i>Adjustments For Items Unpaid By Seller</i>			<i>Adjustments For Items Unpaid By Seller</i>			
210. City/Town Taxes	to		510. City/Town Taxes	to		
211. County Taxes	to		511. County Taxes	to		
212. Assessments	to		512. Assessments	to		
213.			513.			
214.			514.			
215.			515.			
216.			516.			
217.			517.			
218.			518.			
219.			519.			
220. TOTAL PAID BY/FOR BORROWER	1,000.00		520. TOTAL REDUCTION AMOUNT DUE SELLER	1,236.48		
300. CASH AT SETTLEMENT FROM/TO BORROWER:			600. CASH AT SETTLEMENT TO/FROM SELLER:			
301. Gross Amount Due From Borrower (Line 120)	8,960.00		601. Gross Amount Due To Seller (Line 420)	8,000.00		
302. Less Amount Paid By/For Borrower (Line 220)	(1,000.00)		602. Less Reductions Due Seller (Line 520)	(1,236.48)		
303. CASH (X FROM) (TO) BORROWER	7,960.00		603. CASH (X TO) (FROM) SELLER	6,763.52		

By signing page 2 of this statement, the signatories acknowledge receipt of a completed copy of page 1 of this two page statement.

L. SETTLEMENT CHARGES							
700. TOTAL COMMISSION Based on Price		\$	@	%			
<i>Division of Commission (line 700) as Follows:</i>							
701. \$	to					PAID FROM BORROWERS FUNDS AT SETTLEMENT	PAID FROM SELLERS FUNDS AT SETTLEMENT
702. \$	to						
703. Commission Paid at Settlement							
704.	to						
800. ITEMS PAYABLE IN CONNECTION WITH LOAN							
801. Loan Origination Fee	%	to					
802. Loan Discount	%	to					
803. Appraisal Fee		to					
804. Credit Report		to					
805. Lender's Inspection Fee		to					
806. Mortgage Ins. App. Fee		to					
807. Assumption Fee		to					
808.							
809.							
810.							
811.							
900. ITEMS REQUIRED BY LENDER TO BE PAID IN ADVANCE							
901. Interest From	to	@	\$	/day	(days	%)
902. Mortgage Insurance Premium	for	months	to				
903. Hazard Insurance Premium	for	1.0	years	to			
904.							
905.							
1000. RESERVES DEPOSITED WITH LENDER							
1001. Hazard Insurance		@	\$	per			
1002. Mortgage Insurance		@	\$	per			
1003. City/Town Taxes		@	\$	per			
1004. County Taxes		@	\$	per			
1005. Assessments		@	\$	per			
1006.		@	\$	per			
1007.		@	\$	per			
1008. Aggregate Adjustment		@	\$	per			
1100. TITLE CHARGES							
1101. Settlement or Closing Fee	to	Reynolds & Weman, LLC				350.00	
1102. Abstract or Title Search	to						
1103. Title Examination	to	Reynolds & Weman, LLC				285.00	
1104. Title Insurance Binder	to						
1105. Document Preparation	to						
1106. Notary Fees	to						
1107. Attorney's Fees	to						
<i>includes above item numbers:</i>							
1108. Title Insurance	to	Old Republic National Title Policy End				160.00	
\$48.00 to OLD REPUBLIC NATIONAL TITLE INSURANCE, \$112.00 to Reynolds & Weman, L							
<i>includes above item numbers:</i>							
1109. Lender's Coverage	\$						
1110. Owner's Coverage	\$	8,000.00			160.00		
1111.							
1112.							
1113.							
1200. GOVERNMENT RECORDING AND TRANSFER CHARGES							
1201. Recording Fees: Deed \$	165.00	; Mortgage \$; Releases \$		165.00	
1202. City/County Tax/Stamp: Deed		; Mortgage					
1203. State Tax/Stamp: Revenue Stamps		; Mortgage		36.48			36.48
1204.							
1205.							
1300. ADDITIONAL SETTLEMENT CHARGES							
1301. Survey	to						
1302. Pest Inspection	to						
1303. Doc Prep Fee	to	Reynolds & Weman, LLC				200.00	
1304.							
1305.							
1400. TOTAL SETTLEMENT CHARGES (Enter on Lines 103, Section J and 502, Section K)						960.00	236.48

Certified to be a true copy.

The undersigned hereby acknowledge receipt of a completed copy of pages 1&2 of this statement & any attachments referred to herein. I HAVE CAREFULLY REVIEWED THE HUD-1 SETTLEMENT STATEMENT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS A TRUE AND ACCURATE STATEMENT OF ALL RECEIPTS AND DISBURSEMENTS MADE ON MY ACCOUNT OR BY ME IN THIS TRANSACTION. I FURTHER CERTIFY THAT I HAVE RECEIVED A COPY OF THE HUD-1 SETTLEMENT STATEMENT.

Borrower

 Joseph G. Trosky

 Jenny Jean Trosky

Seller

 Joseph Allen Wietecha

TO THE BEST OF MY KNOWLEDGE, THE HUD-1 SETTLEMENT STATEMENT WHICH I HAVE PREPARED IS A TRUE AND ACCURATE ACCOUNT OF THE FUNDS WHICH WERE RECEIVED AND HAVE BEEN OR WILL BE DISBURSED BY THE UNDERSIGNED AS PART OF THE SETTLEMENT OF THIS TRANSACTION.

Reynolds & Weman, LLC, Settlement Agent

WARNING: IT IS A CRIME TO KNOWINGLY MAKE FALSE STATEMENTS TO THE UNITED STATES ON THIS OR ANY SIMILAR FORM. PENALTIES UPON CONVICTION CAN INCLUDE A FINE AND IMPRISONMENT. FOR DETAILS SEE: TITLE 18 U.S. CODE SECTION 1001 & SECTION 1010.

Town of Hampden
Fiscal Year 2026 Real Estate

**REMITTANCE COUPON
PLEASE RETURN WITH PAYMENT**

Account: 438
Location: 169 SCANTIC RD
Owner: TROSKY JOSEPH G &
Owner2: TROSKY JENNY JEAN

Parcel ID: 14-55-2
Land Area: 10.01 Acres
Deed Date: 10/11/2011
Book/Page: 18950 / 0083

Total Charges: 5,090.95
Past Due: 0.00
Interest Due: 0.00
Credits: 0.00

Total Due 2/2/2026: 5,090.95

TROSKY JOSEPH G &
TROSKY JENNY JEAN
169 SCANTIC RD
HAMPDEN, MA 01036

01 26 047779 0000509095 020226 00005090956

2122

FISCAL YEAR 2026 TAX: This tax bill shows the amount of real estate taxes you owe for fiscal year 2026 (July 1, 2025 - June 30, 2026). The tax shown in this bill is based on assessments as of January 1, 2025. The bill also shows betterments, special assessments and other charges.

PAYMENT DUE DATES/INTEREST CHARGES: Your preliminary tax was payable in two equal installments if preliminary bills were mailed on or before August 1, 2025. The first payment was due on August 1, 2025, or 30 days after the bills were mailed, whichever was later, and the second payment was due on November 1, 2025. However, if preliminary bills were mailed after August 1, 2025, your preliminary tax was due as a single installment on November 1, 2025, or 30 days after the tax bills were mailed, whichever was later. Your preliminary tax is shown on this bill as a credit against your tax, including betterments, special assessments and other charges. If tax bills were mailed on or before December 31, 2025, the balance is payable in two equal installments. Your first payment is due on February 1, 2026. Your second payment is due on May 1, 2026.

However, if tax bills were mailed after December 31, 2025, the balance is due as a single installment on May 1, 2026, or 30 days after the tax bills were mailed, whichever is later. If your payments are not made by their due dates, interest at the rate of 14% per annum will be charged on the unpaid and overdue amount. If tax bills were mailed on or before December 31, 2025, interest will be computed on overdue first payments from February 1, 2026 and on overdue second payments from May 1, 2026 to the date payment is made. If tax bills were mailed after December 31, 2025, interest will be computed on overdue final payments from May 1, 2026, or the payment due date, whichever is later, to the date payment is made. You will also be required to pay charges and fees incurred for collection if payments are not made when due. Payments are considered made when received by the Collector. To obtain a receipted bill, enclose a self-addressed stamped envelope and both copies of the bill with your payment.

ABATEMENT/EXEMPTION APPLICATIONS: You have a right to contest your assessment. To do so, you must file an application for an abatement in writing on an approved form with the Board of Assessors. You may apply for an abatement if you believe your property is valued at more than its fair cash value, is not assessed fairly in comparison with other properties, or if a classified tax system is used locally, is not properly classified. If tax bills were mailed on or before December 31, 2025, the filing deadline for an abatement application is February 1, 2026. However, if tax bills were mailed after December 31, 2025, the deadline is May 1, 2026, or 30 days after date bills were mailed, whichever is later.

You may be eligible for an exemption from or deferral of all or some of your tax. In order to obtain an exemption for which you are qualified, you must file an application in writing on an approved form with the assessors. The filing deadline for an exemption under Mass. G.L. Ch. 59, §5, Cl. (17, 17C, 17C 1/2, 17D), 18, 22, 22A, 22B, 22C, 22D, 22E, 22F, (37, 37A), (41, 41B, 41C, 41C 1/2), 42, 43, (or if locally adopted, 52, 53, 56, or 57), or a deferral under Cl. 18A or 41A is April 1, 2026, or 3 months after the date tax bills were mailed, whichever is later. The filing deadline for all other exemptions under Ch. 59, §5 is February 1, 2026 if tax bills were mailed on or before December 31, 2025, or May 1, 2026, or 30 days after the date tax bills were mailed, whichever is later, if the bills were mailed after December 31, 2025.

The filing deadline for a residential exemption under Ch. 59, §5C, or a small commercial exemption under Ch. 59, §5I, if locally adopted and not shown on your bill, is April 1, 2026, or 3 months after the date tax bills were mailed, whichever is later.

Applications are timely filed when (1) received by the assessors on or before the filing deadline, or (2) mailed by United States mail, first class postage prepaid, to the proper address of the assessors, on or before the filing deadline, as shown by a postmark made by the United States Postal Service. If your application is not timely filed, the assessors cannot by law grant an abatement or exemption.

INQUIRIES: If you have questions on your valuation or assessment or on abatements or exemptions, you should contact the Board of Assessors. If you have questions on payments, you should contact the Collector's Office.

INTEREST AT THE RATE OF 14% PER ANNUM WILL ACCRUE ON OVERDUE PAYMENTS FROM THE DUE DATE UNTIL PAYMENT IS MADE

Payments

Make checks payable to:
Town of Hampden
PO Box 215
Hampden MA 01036-0215
Pay online-hampdenma.gov
4135662151 104
Tax Collector:
Eva A. Wiseman
Hours For Walk-In Service
M-Th 9AM - 3PM

Assessments

Town of Hampden
Board of Assessors
85 WILBRAHAM RD
Hampden, MA 010369000
4135662151 106
Abatement Applications to
Assessors Due: 2/2/2026

Town of Hampden

Fiscal Year 2026 Real Estate

Taxpayer Record

Account: 438
Owner: TROSKY JOSEPH G &
TROSKY JENNY JEAN

Location: 169 SCANTIC RD
Parcel ID: 14-55-2
Area: 10.01 Acres

Deed Date: 10/11/2011
Book/Page: 18950 / 0083

Assessed As of	Type	Tax Value
1/1/2025	LAND	144,200
	BLDG	1,029,200
	Total:	1,173,400

Tax Rate per \$1000:		
Res	15.78	
OS	15.78	CPA 169.38
Com	15.78	Tax 18,516.25
Ind	15.78	Total Assessment 18,685.63

TOTAL ASSESSMENT 18,685.63			
Due	Prelim.	2/2/2026	5/1/2026
Tax	8,503.74	5,090.95	5,090.94
SpAs	0.00	0.00	0.00
Int	0.00	0.00	0.00
Ab/Ex	0.00	0.00	0.00
Cred	8,503.74	0.00	0.00
Int Cr	0.00	0.00	0.00
Total:	0.00	5,090.95	5,090.94
Total Due 2/2/2026:		5,090.95	

Delinquency Notice

Town of Hampden
Fiscal Year 2024 Real Estate

REMITTANCE COUPON
PLEASE RETURN WITH PAYMENT

Account: 438	Parcel ID: 14-55-2
Location: 169 SCANTIC RD	Land Area: 8 Acres
Owner: TROSKY JOSEPH G &	Deed Date: 10/11/2011
Owner2: TROSKY JENNY JEAN	Book/Page: 18950 / 0083
Total Charges: 3,880.61	
Past Due:	
Interest Due:	
Credits: 0.00	
Total Due 8/1/2023: 3,880.61	

TROSKY JOSEPH G &
TROSKY JENNY JEAN
169 SCANTIC RD
HAMPDEN, MA 01036

01 24 042985 0000388061 080123 00003880611

2103

FISCAL YEAR 2024 PRELIMINARY TAX: This bill shows the amount of preliminary tax you owe for fiscal year 2024 (July 1, 2023 - June 30, 2024).

PRELIMINARY TAX AMOUNT: As a general rule, your preliminary tax will not exceed 50% of your adjusted fiscal year 2023 tax (including any betterments, special assessments, and other charges added to the tax). Adjustments are made for abatements or exemptions granted for fiscal year 2023, and tax increases allowed under Proposition 2 1/2 in fiscal year 2024. Under certain circumstances, your preliminary tax may exceed 50% of the adjusted amount.

PAYMENT DUE DATES/INTEREST CHARGES: If preliminary bills were mailed on or before August 1, 2023, your preliminary tax is payable in two equal installments. Your first payment is due August 1, 2023, or 30 days after the bills were mailed, whichever is later. Your second payment is due November 1, 2023. However, if preliminary bills were mailed after August 1, 2023, your preliminary tax is due as a single installment on November 1, 2023, or 30 days after the bills were mailed, whichever is later. If your payments are not made by their due dates, interest at the rate of 14% per annum will be charged on the unpaid and overdue amount. If preliminary bills were mailed on or before August 1, 2023, interest will be computed on overdue first payments from August 1, 2023, or the payment due date, whichever is later, and on overdue second payments from November 1, 2023, to the date payment is made.

If preliminary bills were mailed after August 1, 2023, interest will be computed on overdue payments from November 1, 2023, or the payment due date, whichever is later, to the date payment is made. You will also be required to pay charges and fees incurred for collection if payments are not made when due. Payments are considered made when received by the Collector. To obtain a receipted bill, enclose a self-addressed stamped envelope and both copies of the bill with your payment.

FISCAL YEAR 2024 ACTUAL TAX BILLS: You will receive your actual fiscal year 2024 tax bill based on January 1, 2023 assessments after the tax rate is set. Any preliminary tax payments made will be credited toward payment of your fiscal year 2024 tax. Your actual tax bill will provide you with more detailed information on payment due dates.

ABATEMENT/EXEMPTION APPLICATIONS: Your right to seek an abatement of or exemption from your fiscal year 2024 tax is not prejudiced by the issuance of preliminary tax bills. Once the actual tax bills are issued, you will be able to apply for an abatement or exemption. The deadline for filing your abatement or exemption application will be measured from the date the actual tax bills are mailed, not the date the preliminary tax bills were mailed. Your actual tax bill will provide you with more detailed information on application procedures and deadlines.

INQUIRIES: If you have questions on how your preliminary tax was determined, you should contact the Board of Assessors. If you have questions on payments, you should contact the Collector's Office.

Payments

Make checks payable to:
Town of Hampden
PO Box 215
Hampden MA 01036-0215
Pay online-hampdenma.gov
(413) 566-2151
Tax Collector:
Eva A. Wiseman
Hours For Walk-In Service
M-Th 9AM - 3PM

Assessments

Town of Hampden
Board of Assessors
625 Main Street
Hampden, MA 010369000
(413) 566-2151

INTEREST AT THE RATE OF 14% PER ANNUM WILL ACCRUE ON OVERDUE PAYMENTS FROM THE DUE DATE UNTIL PAYMENT IS MADE

Town of Hampden

Fiscal Year 2024 Real Estate

Taxpayer Record

Account: 438
Owner: TROSKY JOSEPH G &
TROSKY JENNY JEAN

Location: 169 SCANTIC RD
Parcel ID: 14-55-2
Area: 8 Acres

Deed Date: 10/11/2011
Book/Page: 18950 / 0083

Assessed As of 1/1/2023	TOTAL ASSESSMENT 7,761.21	
	Due	8/1/2023 11/1/2023
	Tax	3,880.61 3,880.60
	SpAs	0.00 0.00
	Int	0.00 0.00
	Ab/Ex	0.00 0.00
	Cred	0.00 0.00
	Int Cr	0.00 0.00
	Total:	3,880.61 3,880.60
CPA	68.49	
Tax	7,692.72	
Total Assessment	7,761.21	
Total Due 8/1/2023:		3,880.61



TOWN OF HAMPDEN

BUILDING DEPARTMENT

OFFICE OF THE BUILDING COMMISSIONER

BUILDING PERMIT

NO B2012-162

DATE: 11-6-2012

THIS CERTIFIES THAT Joseph Trosky

has permission to insulation

situated on 169 Scantic Road, Hampden, MA 01036

provided that the person accepting this permit shall in every respect conform to the terms of the application on file in this office, and to the provisions of the Statutes and the Ordinances relating to the Construction, Maintenance and Inspection of Buildings in the Town of Hampden.

Building Inspector: _____

Any violation of any of the terms above noted is an immediate revocation of this permit.

THE FOLLOWING INSPECTIONS ARE REQUIRED AND SHALL BE SIGNED FOR BY THE PROPER INSPECTORS

THIS CARD MUST BE DISPLAYED INSIDE OF BUILDING AS NEAR AS POSSIBLE TO FRONT DOOR

BUILDING INSPECTIONS 566-2151 x 250
ELECTRICAL 566-2151 x 251
PLUMBING 566-2151 x 252

- 1. Date (foundation before backfilling and carpentry)
2. Date (rough plumbing)
3. Date (rough wiring)
4. Date (rough framing before insulation and lathing)
5. Date (insulation)
6. Date (finish plumbing)
7. Date (finish wiring)
8. Date (oil burner inspection by Fire Department)
9. Date (smoke detectors by Fire Department)
10. Date (gas inspection)
11. Date (final inspection after completion)
12. Date (woodstove)

A certificate of occupancy will not be issued until this card, with the necessary Inspector's signatures, has been returned to the Building Commissioner upon completion of the work permitted herein.

Building Commissioner

No Building May Be Occupied Without A Written Occupancy Permit



TOWN OF HAMPDEN

BUILDING DEPARTMENT

OFFICE OF THE BUILDING COMMISSIONER

BUILDING PERMIT

NO B2016-151

DATE: 9/8/2016

THIS CERTIFIES THAT Joseph Trosky

has permission to construct a 1,092 ' sq. ft. garage

situated on 109 Scantic Rd, Hampden, Ma 01036

provided that the person accepting this permit shall in every respect conform to the terms of the application on file in this office, and to the provisions of the Statutes and the Ordinances relating to the Construction, Maintenance and Inspection of Buildings in the Town of Hampden.

Building Inspector: [Signature]

Any violation of any of the terms above noted is an immediate revocation of this permit.

THE FOLLOWING INSPECTIONS ARE REQUIRED AND SHALL BE SIGNED FOR BY THE PROPER INSPECTORS

- 1. [Signature] Date 9/20/16 (foundation before backfilling and carpentry)
2. Date (rough plumbing)
3. Date (rough wiring)
4. Date (rough framing before insulation and lathing)
5. Date (insulation)
6. Date (finish plumbing)
7. Date (finish wiring)
8. Date (oil burner inspection by Fire Department)
9. Date (smoke detectors by Fire Department)
10. Date (gas inspection)
11. Date (final inspection after completion)
12. Date (woodstove)

THIS CARD MUST BE DISPLAYED INSIDE OF BUILDING AS NEAR AS POSSIBLE TO FRONT DOOR

BUILDING INSPECTIONS 566-2151 x 250
ELECTRICAL 566-2151 x 251
PLUMBING 566-2151 x 252

A certificate of occupancy will not be issued until this card, with the necessary Inspector's signatures, has been returned to the Building Commissioner upon completion of the work permitted herein.

[Signature] Building Commissioner

No Building May Be Occupied Without A Written Occupancy Permit

**TOWN OF HAMPDEN
MASSACHUSETTS**

Town House

625 Main Street
Hampden, MA 01036

Tel: (413) 566-2151, Ext. 109
Fax: (413) 566-3513
E-mail: appeals@hampden.org

Joanne Fiore, Adm. Assistant



Zoning Board of Appeals

L. Jed Berliner, Chair
M. Chris Cesan
Richard E. Patullo
Cheryl Cudnik
Mark R. Barba

Alternate Members: Duane Mosier
Fred Lesniak
Ed Loiko

July 12, 2016

Mr. Joseph G. Trosky
169 Scantic Road
Hampden, MA 01036

Dear Mr. Trosky:

Re: Case 2016-4: Decision on Petition for Variance – Section 7.2.4, Side Yard Setbacks

Enclosed please find a copy of the Decision from the Public Hearing held on June 28, 2016 for a Variance for the construction of a 1,091 square foot outbuilding on property located at 169 Scantic Road.

The original Decision was filed in the Town Clerk's Office on July 12, 2016 for a twenty (20) day appeal time as required by law. You may pick up the original Decision, which will be certified by the Town Clerk, on or after August 2, 2016.

The original Decision must be recorded with the Registry of Deeds to be in effect per MGL Chapter 40a, Section 11 and Hampden Zoning Bylaws 10.7.2 and 10.115.

If you have any questions, please feel free to call me at (413) 566-2151, Ext. 109.

Sincerely,

Joanne Fiore, Adm. Assistant
Zoning Board of Appeals

Enclosure



**BOARD OF ASSESSORS
TOWN OF HAMPDEN**

625 Main Street
Hampden, MA 01036

Norman Charest, Chairman
Robert Makuch, Assessor
Stanley Witkop, Assessor



Carolyn Reed MAA, Principal Assessor
Phone: (413) 566-2151 ext.106

CERTIFIED LIST OF ABUTTERS

SUBJECT PROPERTY MAP + LOT	LOCATION OF SUBJECT PROPERTY	OWNERS AND MAILING ADDRESSES
14-55-2	169 SCANTIC RD	JOE TROSKY 169 SCANTIC ROAD HAMPDEN, MA 01036

PLEASE SEE ATTACHED LIST OF ABUTTERS

Per the Assessors records I certify that the attached lists of persons are the abutters of record for the subject property within 300 feet of the outer perimeter.

To the best of our knowledge, this list represents the most current owners of the properties. The accuracy of this listing is based solely on the information currently available in our database.

5/23/14

Date

Carolyn Reed

Carolyn Reed, MAA Principal Assessor
Town of Hampden



300 foot Abutters List Report

Hampden, MA
May 23, 2016

Subject Property:

Parcel Number: 14-055-002
CAMA Number: 14-055-002
Property Address: 169 SCANTIC RD

Mailing Address: TROSKY JOSEPH G + TROSKY JENNY
JEAN
169 SCANTIC RD
HAMPDEN, MA 01036

Abutters:

Parcel Number: 14-020-004
CAMA Number: 14-020-004
Property Address: 148 SCANTIC RD

Mailing Address: OBER ROBERT OBER SHARON

Parcel Number: 14-020-005
CAMA Number: 14-020-005
Property Address: 158 SCANTIC RD

Mailing Address: LUSSIER DAVID J LUSSIER MICHELLE

Parcel Number: 14-020-006
CAMA Number: 14-020-006
Property Address: SCANTIC RD

Mailing Address: TOWN OF HAMPDEN

Parcel Number: 14-020-007
CAMA Number: 14-020-007
Property Address: SCANTIC RD

Mailing Address: TENNESSE GAS PIPELINE CO C/O

Parcel Number: 14-051-000
CAMA Number: 14-051-000
Property Address: SOUTH MONSON RD

Mailing Address: FUSARO THERESA TRUSTEE ET AL

Parcel Number: 14-054-000
CAMA Number: 14-054-000
Property Address: 155 SCANTIC RD

Mailing Address: HALL STEPHEN HALL JEAN S

Parcel Number: 14-055-001
CAMA Number: 14-055-001
Property Address: 161 SCANTIC RD

Mailing Address: DOTEN GERALD E DOTEN BERYLE C

Parcel Number: 14-055-003
CAMA Number: 14-055-003
Property Address: 175 SCANTIC RD

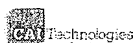
Mailing Address: BROOM DOUGLAS C + SAMS NANCY A.

Parcel Number: 14-055-004
CAMA Number: 14-055-004
Property Address: 171 SCANTIC RD

Mailing Address: WIETecha JOHN S + WIETecha

Parcel Number: 14-056-000
CAMA Number: 14-056-000
Property Address: 189 SCANTIC RD

Mailing Address: PIXLEY JOHN E PIXLEY LOIS A



www.cai-tech.com

Data shown on this report is provided for planning and informational purposes only. The municipality and CAI Technologies are not responsible for any use for other purposes or misuse or misrepresentation of this report.

**TOWN OF HAMPDEN
MASSACHUSETTS**

**OFFICE OF
The Board of Appeals
DECISION ON PETITION FOR VARIANCE – USE REGULATION**

Case Number: 2016-4

Page 1 of 3

Hearing Date: June 28, 2016

Petitioner: Joseph G. Trosky

Petitioner's Status: **Owner** **Tenant** **Licensee**
 Prospective Purchaser **Other**

Property Street Address: 169 Scantic Road, Hampden, MA 01036

Deed Reference: Book 18950 Page 83

Relief Requested: Section 7.2.4, Side Yard Setbacks

Purpose of Request: Petition for a Variance for the construction of a 1,092 square foot outbuilding on property located at 169 Scantic Road, Hampden, MA

Decision: **Petition Granted** **Petition Granted with Conditions**
 Petition Denied

Pursuant to a public hearing advertised on June 9 and June 16, 2016 and held on June 28, 2016 at 7:30 PM, the Zoning Board of Appeals voted to grant the variance finding that all four of the conditions have been met. The motions made and voted in favor were:

- 1) Motion to find the soil conditions, shape, or topography of such land or structures and especially affecting such land or structures but not affecting generally the zoning district in which it is located. Vote in favor (5-0).

The property is located in an area of significantly increasing elevation and ledge formation which precludes alternate locations for the requested outbuilding.

- 2) Motion to find there is substantial hardship financial or otherwise. Vote in favor (4-1).

The property already has a two car garage. The inherent difficulties with removing snow along the extraordinary length of the driveway limits the owner's ability to hire snow plow contractors and overwhelms the abilities of anything but a large tractor which requires housing and protection in the requested outbuilding.

- 3) Motion to find conditions affecting parcel or building but not the whole district. Vote in favor (5-0).

The significantly increasing elevation and ledge formation affects this parcel but not the whole district.

- 4) Motion to find no derogation from intent or purpose of bylaw or ordinance. Vote in favor (5-0).

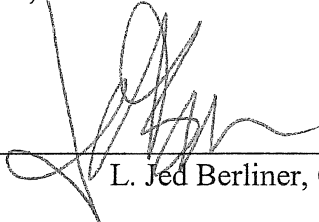
The history of the estate lot zoning bylaw was recalled and discussed. Its purpose was to lessen density of the Town's population by allowing one home to be built on a lot with insufficient frontage. The previous alternative required the land owner to construct a costly road, with in turn would require multiple home constructions to

recover the costs of the road. Estate lots were permitted with sizeable setbacks so neighbors would not be surprised by the sudden appearance of a home where none had been expected under the previous zoning. Here, the proposed location of the requested outbuilding is far from any neighbor's current building or any expected construction in the future due to the ledge along the border of the area in question.

The vote to approve the variance required four separate votes. The variance requires four fifths of the votes. Voting in favor were L. Jed Berliner, Chair; Richard Patullo and Duane Mosier; and Alternate Member, Fred Lesniak. Voting against Question No. 2, Alternate Member, Tom Addicks.

07/07/16

Date



L. Jed Berliner, Chair

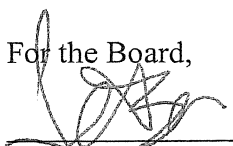
TOWN OF HAMPDEN
MASSACHUSETTS

OFFICE OF
The Board of Appeals
DECISION ON PETITION FOR VARIANCE – USE REGULATION


Case Number: 2016-4

(Page 3 of 3)

Any person aggrieved by this decision may appeal under the provisions of Section 17, Chapter 40A, of the Massachusetts General Laws within twenty days after the date of the filing of this decision in the office of the Town Clerk.

For the Board,

E. Jed Berliner, Chair

07/07/16


Filed with the Town Clerk: 
Eva Wiseman

7/12/16
Date


IF THIS IS A FAVORABLE DECISION, YOU MUST RECORD THIS DECISION WITH THE REGISTRY OF DEEDS AFTER THE TOWN CLERK CERTIFIES THAT 20 DAYS HAVE PASSED WITHOUT AN APPEAL.

- Copies to: Town Clerk
Petitioner
Board of Selectmen
Board of Assessors
Building Commissioner
Planning Board
Town Counsel
Members, Board of Appeals
Other

I hereby certify that twenty days have elapsed since the decision was filed and that no appeal has been filed.


Eva Wiseman, Town Clerk

August 2, 2016
Date

Received Copy of Decision: 
Applicant/Owner

8/2/16
Date

VERMONT FRAMES

A division of Energy Smart Building Inc.

Agreement made this 24th day of June 2016, between
VERMONT FRAMES
 and Purchaser
Joe Trosky Sr.

Enfield, CT 06082

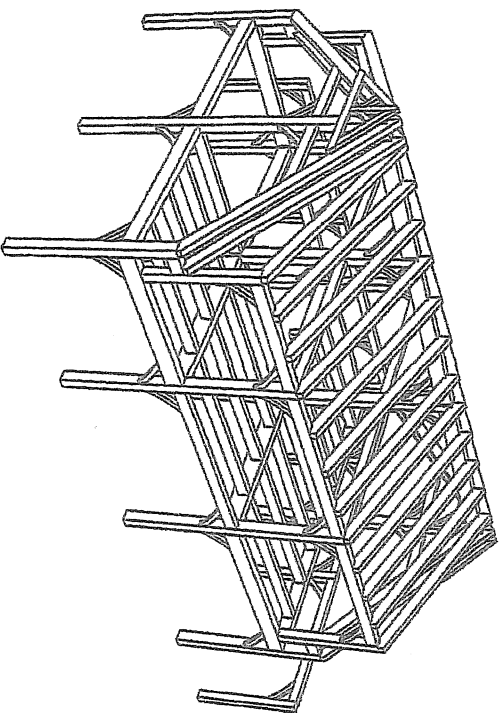
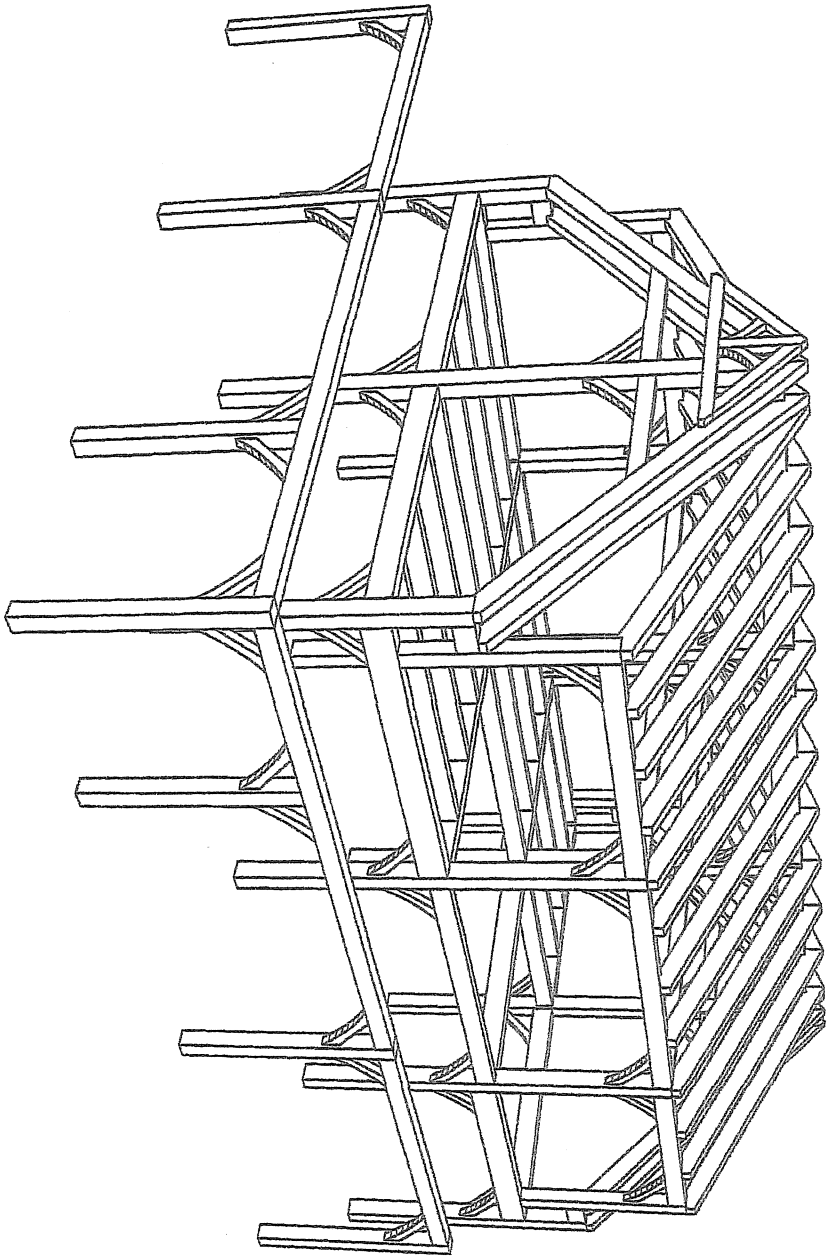
Bid #8491

VERMONT FRAMES Shall supply and erect a post and beam Eastern White Pine wood timber frame. The joints will be mortised, tenoned, and wooden pegged. Labor for setting of the frame is included unless noted otherwise

FRAME DESCRIPTION		
	26' x 36' Saltbox Style Frame	\$29,374
WITH	9' First Floor Ceiling Height, No Rear & 6' Rear Second Floor Kneewall Heights	
WITH	Second Floor Timber Floor Joist Framing	
WITH	Cathedral Area Over Great Room	
WITH	Heavy Timber Roof Rafters With Ridge Beam Support	
WITH	12/12 Rafter Framing Pitch	
WITH	1-8' +/- Shed Style Dormer	\$1,500
WITH		
WITH	12'x14' Cape Style Bedroom Wing	\$4,070
WITH	9' First Floor Ceiling Height, No Second Floor Kneewall Heights	
WITH	No Second Floor Timber Floor Joist Framing	
WITH	Cathedral Area Above	
WITH	Heavy Timber Roof Rafters With Ridge Beam Support	
WITH	12/12 Rafter Framing Pitch	
WITH		
WITH		
WITH	78' LF +/- Exterior Porch Bent Add Approx (\$4,290.00)	
WITH	Post, Plates & Braces Supplied. Rafters Conventionally Framed By Others	
WITH	Setting of Porch By Others	
WITH		
NOTE	Engineering Of Frame If Required To Be An Added Cost	

FRAME FINISH	Planed	Included
TRANSPORTATION	To Hampden, MA Approx.	\$850
ERECTION COST	Labor, Per Diem, And Travel Time Included	\$9,727
MISCELLANEOUS	Curved Braces	Included
	Chamfered Timber Edges	\$400
	One Coat Of Oil Wood Finish Applied To Frame	\$1,226
TOTAL CONTRACT AMOUNT		\$47,147

ALL CHANGES TO THIS CONTRACT WILL REQUIRE WRITTEN NOTICE TWO WEEKS PRIOR TO DELIVERY. ALL CHANGES WILL REQUIRE A NEW CONTRACT TO BE SIGNED AND RETURNED.



ABBREVIATIONS:

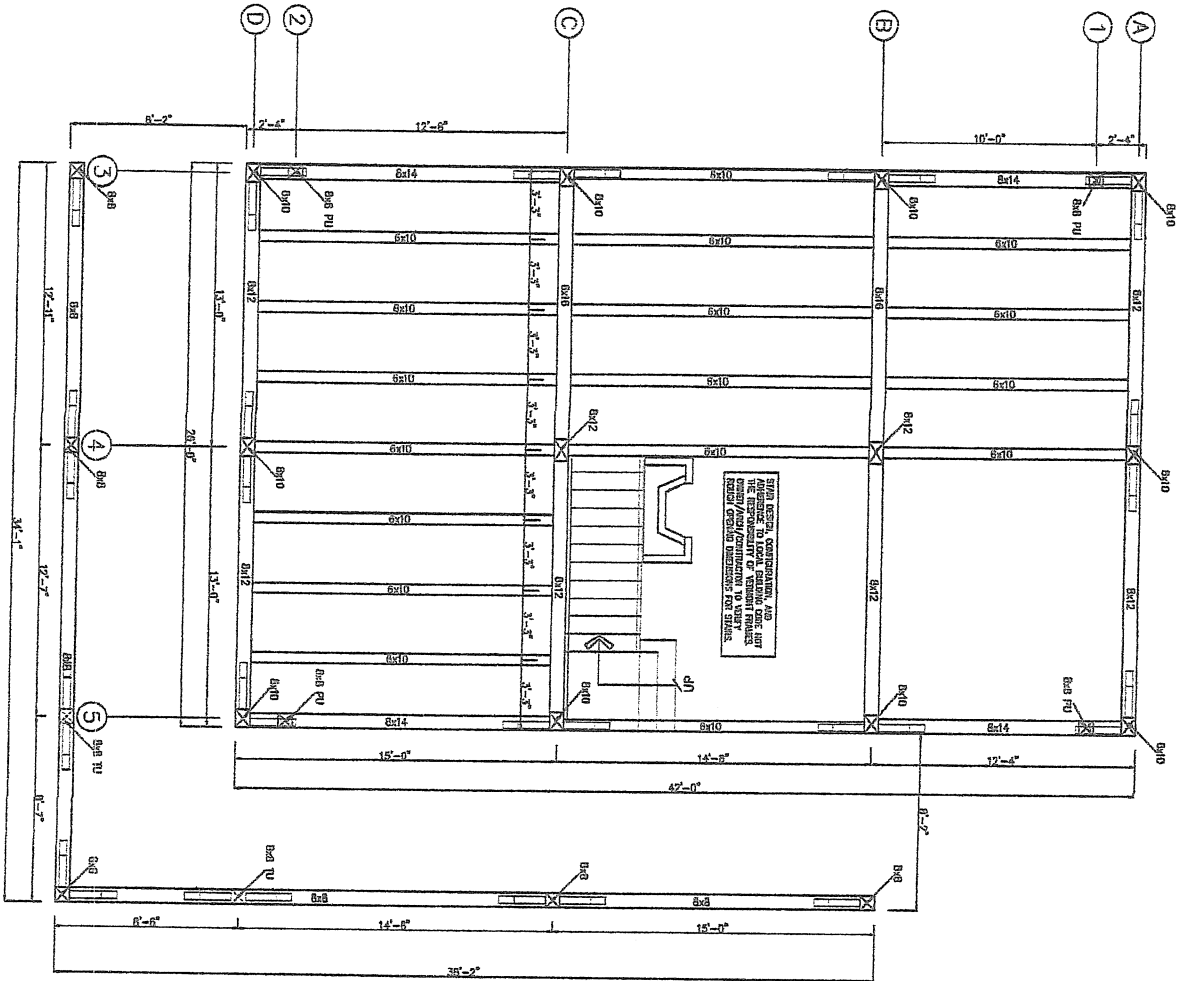
- 0 - AT
- B.O. - BY OTHERS
- F.S. - FULL SAWN
- U.L.O. - UNLESS NOTED OTHERWISE
- E.S. - EAST SIDE
- P.O. - POST, JOIST
- G.A. - GABLE, GABLET
- S.P. - SHIP LAP
- U.F. - UNDER FLOOR
- A.F. - ABOVE FINISHED FLOOR
- E.F. - EACH FACE
- L. - LEAVE LANG

TROSKY FRAME

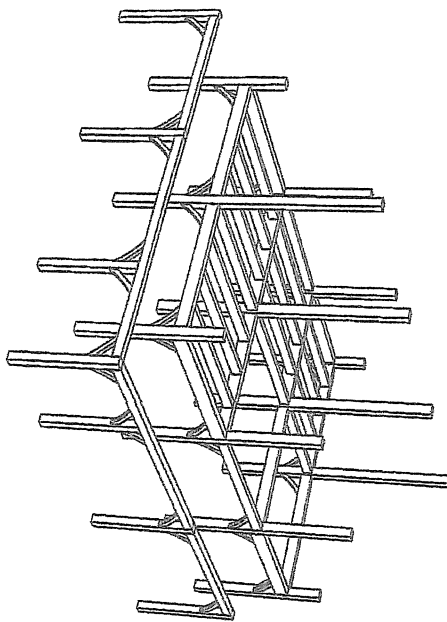


DATE: MAY 9, 2016
 DRAWN BY: P/A
 SHEET: OF 4
F11
 THE VERMONT FRAME COMPANY

PROJECT ADDRESS: [illegible]
 LOCATION: [illegible]
 EXPIRED BY: [illegible]
 REVISIONS: 6
 1



SECOND FLOOR FRAMING PLAN



PROJECT ADDRESS
 Ferrisburgh, VT

DESIGN DATE
 3/9/06
 REVISION #
 2

TROSKY FRAME
2ND FLOOR FRAMING PLAN

DATE
 MAR 9, 2016
 SCALE
 3/8" = 1'-0"

SHEET # OF 6
F2

TROSKY
 TROSKY/SB2



PROJECT ADDRESS:
Hartford, VA

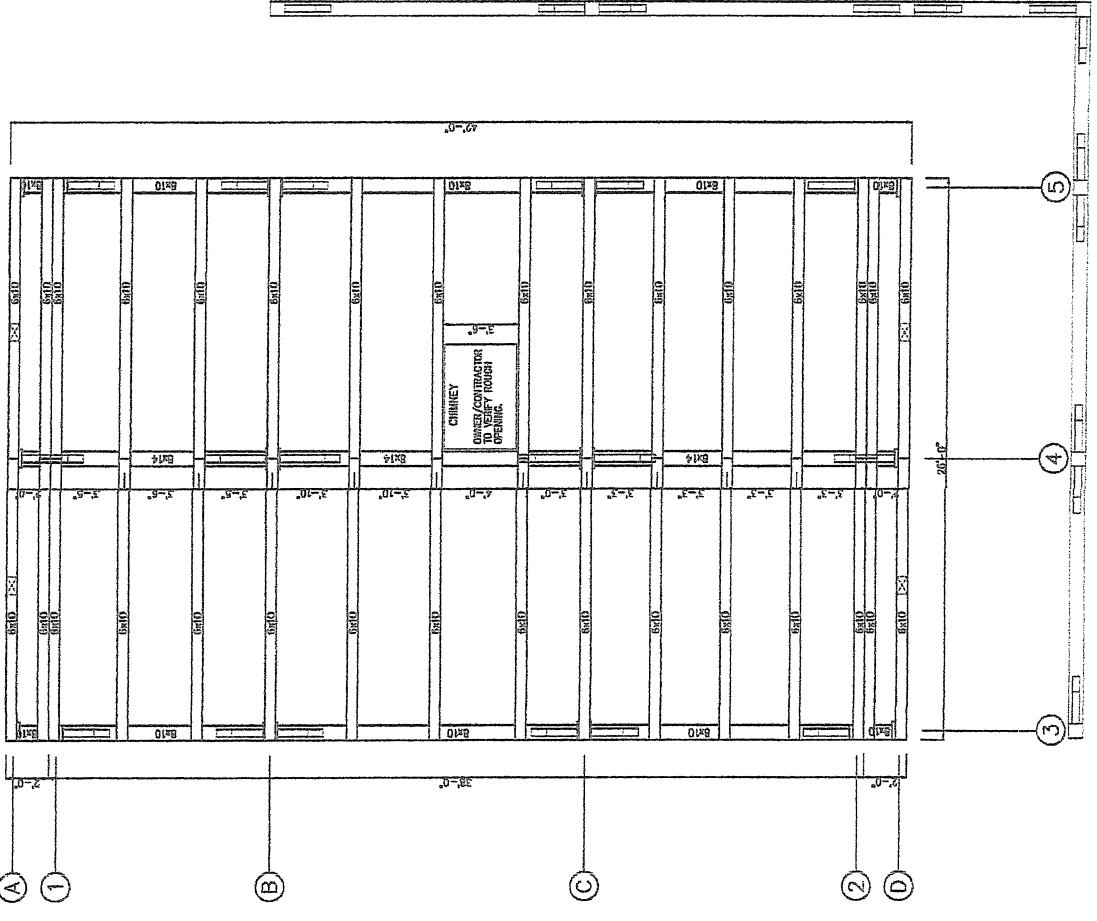
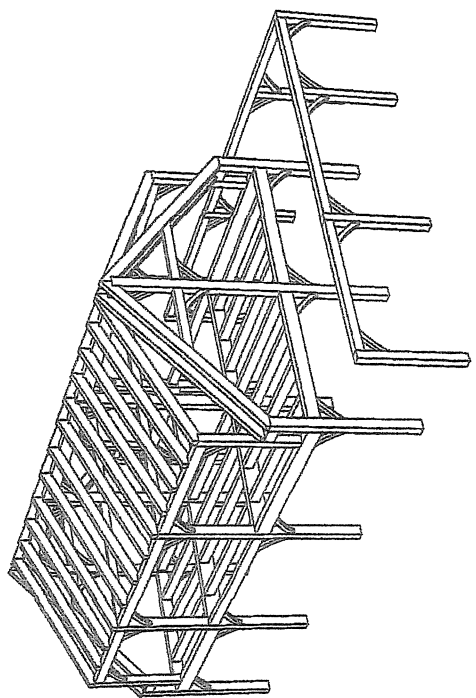
DRAWN BY:
JFC

REVISION #:
2

TROSKY FRAME
ROOF FRAMING PLAN

DATE: MAY 01, 2010
SCALE: 1/4"=1'-0"
SHEET: OF 6

F3
FILE: TROSKY.F3S2



ROOF FRAMING PLAN

TOWN OF HAMPDEN
MASSACHUSETTS

TOWN HOUSE
625 MAIN STREET
HAMPDEN, MA 01036
health@hampden.org



BOARD OF HEALTH
Tel: (413) 566-2151 ext. 102
Fax: (413) 566-2010

December 7, 2016

Joseph Trosky
169 Scantic Road
Hampden , MA 01036

RE: 169 Scantic Road, Hampden MA

Dear Mr. Trosky,

An application for a well construction permit was submitted today by Connecticut Valley Artesian Well Company for the above referenced property. Specifically, the application permit is for the construction of an in-law apartment dwelling which is currently under approved construction for an outbuilding.

The Board of health cannot approve a well permit for new construction until a septic system for the effluent is submitted and approved.

The current septic system for the existing dwelling is for four bedrooms. Any additional flow added to the system will need to be designed and approved by the Board of Health office.

Please feel free to call me if you have any questions regarding this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "Lorri McCool".

Lorri McCool
413-454-5155

CC: Board of Selectmen
Building Inspector / Zoning Enforcement Officer
Zoning Board of Appeals
Board of Assessors

**TOWN OF HAMPDEN
BOARD OF HEALTH**
625 Main Street, P.O. Box 177
Hampden, MA 01036

APPLICATION FOR WELL CONSTRUCTION PERMIT

WELL DRILLER/DIGGER: CONN. VALLEY ARTISIAN WELL CO., INC.,
58 Bond Avenue
ADDRESS: East Longmeadow, MA 01028
CITY/STATE/ZIP: _____
STATE REGISTRATION NUMBER: 295 EXPIRATION DATE: 12/31/16

NOTE: IF YOU HAVE NOT FILED A COPY OF YOUR CURRENT (ANNUAL)
REGISTRATION WITH THE TOWN OF HAMPDEN, ATTACH A COPY TO THIS
APPLICATION.

LANDOWNER'S NAME: JOE TRUSKY
STREET OR LOT NUMBER: 169 LANDOWNER'S PHONE: _____
LOCATION OF PROPOSED WELL: 169 SCANTIC RD HAMPDEN

INSTRUCTIONS

1. Attach, as a part of this application, a copy of a scale plan (1" - 40") of the property to be served by the well. Show all existing and proposed structures, surface water drains, foundation drains, sewage disposal systems, potential sources of pollution and all surface water bodies (ponds, streams, brooks) within a 100-foot radius of the proposed well site, including overlap onto other properties.
2. Upon completion of the well, submit a copy of the completed plan showing well location to the Board of Health along with a copy of the results of the water quality analysis.
3. Well construction, water analysis and reporting of results must conform to the HUD "minimum Property Standards" and "Manual of Individual Water Supply System" published by the U.S. Environmental Protection Agency.

APPLICANT'S CERTIFICATION

I agree to install the above described well in accordance with all of the above referenced regulations. I declare that the information provided in this application is complete and accurate to the best of my knowledge.

David Cavale
Signature of Applicant

12/1/16
Date

CONNECTICUT VALLEY
ARTESIAN WELL CO., Inc.

PUMPS - WATER TREATMENT - GEOTHERMAL
HOMES - INDUSTRIAL - FARMS - IRRIGATION

60 Bond Avenue • East Longmeadow, MA 01125 • (413) 525-7888 or (800) 445-1601 • FAX: (413) 525-4112 • www.ct-valley-artesianwell.com

July 6, 2016

Joe Trosky
169 Scantic Rd.
Hampden, Ma

Re: Artesian Well

Dear Joe:

Following are our prices for a well and pumping equipment at the above captioned location. The well is estimated to be about 382 feet deep and require about 41 feet of casing.

382' of 6" drilling @ \$13.00 per foot-----	\$4,966.00
41' of 6" casing @ \$17.00 per foot -----	697.00
6" Driveshoe -----	85.00
Well Permit -----	25.00
	<u>\$5,773.00</u>

Pumping Equipment Based on a 30' Offset

3/4 HP Goulds stainless steel submersible pump with control box	
342' of 1 1/4" submersible wire with cable guards, torque arrestor	
33 Gallon tank, top cap, pitless adapter, check valve	
300' of 1" 200# plastic pipe (drop line)	
32' of 1" 200# plastic pipe (offset)	
37' of 1" PVC (wire carrier and vent)	
Pressure switch, pressure gauge, pressure relief valve	
Necessary fittings to connect system	
Installed	<u>\$4,113.65</u>
Estimated Cost	<u>\$9,886.65</u>

The final cost may be more or less depending on the depth of the completed well. The cost of pumping equipment may change according to the depth of the well and the gallons per minute to be pumped.

Mud Circulation if needed will be \$485.00.

The above prices do not include sales tax on materials, water test, trenching from well to house, or electrical work. Prices will remain in effect for 30 days from above date.

If you have any questions, do not hesitate to give me a call.

Sincerely,



CONNECTICUT VALLEY ARTESIAN WELL CO., INC.

David Costello

DC/eh

CONNECTICUT VALLEY ARTESIAN WELL CO., INC.

58 Bond Avenue • East Longmeadow, MA 01028

Phone (413) 525-7656 • Fax (413) 525-4112

CONTRACT

PURCHASER

Phone: _____ Date: _____

Name: _____

Job Name & Location: _____

Street: _____

Street: _____

City: _____ State: _____

City: _____ State: _____

This agreement made and entered into between the Connecticut Valley Artesian Well Co., Inc. hereinafter called the DRILLING CONTRACTOR and the above name person hereinafter called the PURCHASER.

Witnesseth: for valuable consideration herein expressed the parties hereto agree as follows:

1. LOCATION

- A. Contractor agrees to drill a _____ inch well on the premises of the purchaser at the above location.
- B. Purchaser to select exact site of drilling and any statements made by the Drilling Contractor are suggestions only. Site of well location on property to be as follows: _____
- C. Site shall be prepared so that drill rig can move in and out without problems. Purchaser agrees to pay any costs incurred to get the equipment on to or off of the property.
- D. Contractor is not liable for any damage of lawns, driveways or property in order to get equipment on to or off of the site.
- 2. Purchaser hereby permits Drilling Contractor, his officers, agents and employees full right to ingress and egress to and from said described land for the purpose of performing this contract.
- 3. Purchaser hereby permits Drilling Contractor to dump all drill cuttings and water taken out of the hole during the progress of the work, around and about the drill site and shall not call upon the Drilling Contractor to remove same.
- 4. Drilling Contractor does not warrant or guarantee the quantity, quality or kind of water which may be encountered. All operations are at the risk of the Purchaser and failure to strike water shall in no way release the Purchaser from payment of the full contract price.
- 5. This agreement will be considered completed when sufficient water is obtained, or the Purchaser requests the drilling be stopped, or the Drilling Contractor has drilled to a maximum depth of _____ feet.
- 6. Purchaser agrees to pay Drilling Contractor on the following basis:
 - A. Drilling Operations per lineal foot, \$ _____
 - B. _____ inch well casing per lineal foot, \$ _____
 - C. Pumping equipment and installation are an additional charge.
 - D. Authorization to install pumping equipment _____ (initial)
 - E. Any pump test will be at the rate of _____ per hour, otherwise only a volumetric test to indicate flow and working level will be furnished.
 - F. Well Permit \$ _____
 - G. Mud Circulation (if needed) \$ _____
 - H. Pit to Control Drillings \$ _____
 - I. Hydro-Fracturing (2 sets) (If Needed) \$ _____
 - J. Drive Shoe \$ _____
 - K. Deposit \$ _____
- 7. All charges under this contract are due and shall be paid as follows: _____
The Purchaser covenants and agrees that if the amount payable under this contract is not paid when due, the amount overdue shall draw interest at the rate of _____% A.P.R. per annum until paid, and that if the Drilling Contractor is required to secure the services of an Attorney to enforce the payment of any overdue amount, the purchaser agrees to pay a reasonable attorney's fee as well as the costs of any legal proceedings required to collect the total amount payable.
- 8. Purchaser warrants that he has full right and authority to enter into this contract and to authorize the Drilling Contractor to drill upon the above described land.
- 9. All agreements contingent upon strikes, accidents or delays beyond our control.
- 10. Drilling Contractor is fully covered by workmen's compensation.
- 11. Prices will remain in effect for _____ days.
- 12. Starting date: On or about _____

Connecticut Valley Artesian Well Co., Inc.

By: _____

Drilling Contractor

ACCEPTANCE OF CONTRACT

The above prices and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

ACCEPTED:

Signature: _____

Date: _____

Print: _____

Skinner Excavation LLC

6 Dollar Ave
 Wilbraham, MA
 Phone: 413-267-4831
 Fax: 413-566-5737

ADDRESS: Joe 169 Scantic Rd.
 PHONE:

JOB NAME:
 JOB #:
 JOB LOCATION:
 DATE OF PLANS:
 ARCHITECT:

WE HERE BY SUBMIT SPECIFICATIONS AND ESTIMATES FOR:	AMOUNT
Stumps/ Rocks/ Dug Hole	2,000.00
Cellar Hole	1,500.00
Footing Drain	800.00
Backfilled	2,000.00
EXTRA: 90 Yds. Of Gravel For Driveway	742.00
Equip. Move	350.00
Elec. Line Including Sand	800.00
Spread Gravel In Driveway	600.00
Rock Wall	2,000.00
(3) Loads Of Stumps	970.00

TOTAL: 4,762
Thank You

We propose hereby to furnish material and labor - complete in accordance above specifications for the sum of \$XXXXXX with payments to be made as follows:

Respectfully submitted: _____

Note - this proposal may be withdrawn by us if not accepted within XX days.

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control.

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

SIGNATURE: _____

DATE OF ACCEPTANCE: _____

SIGNATURE: _____

BILL OF SALE

BILL OF SALE dated 01/31/2018, from AMERIGAS PROPANE ("Seller") to JOE TROSKY ("Buyer").

Pursuant to due authorizations, Seller is presently executing and delivering this Bill of Sale to buyer for the purpose of selling to and vesting in Buyer good and marketable title, subject to the restrictions and limitations set forth herein, to the following propane storage equipment: ("Equipment"):

<u>Manufacturer</u>	<u>Tank Capacity</u>	<u>Serial No.</u>	<u>Location</u>
QUALITY STEEL	1000 UG	F00097071	169 SCANTIC RD
	500 UG	F00100384	HAMPDEN MA 01036

NOW, THEREFORE, in consideration of the premises and other valuable consideration of \$6,300.00 per tank seller has sold, conveyed transferred, assigned, set over to, and vested in, and by these presents does sell, convey, transfer, assign, set over to, and vest in, Buyer, its successors and assigns, all of Seller's right, title and interest, legal and equitable, in and to the Equipment;

TO HAVE AND TO HOLD the foregoing Equipment unto Buyer, its successors and assigns forever.

THE EQUIPMENT WILL BE SOLD TO BUYER AS IS AND WHERE IS, WITH ALL FAULTS, AND SELLER MAKES NO OTHER WARRANTIES, GUARANTEES OR REPRESENTATIONS OF ANY KIND, EITHER EXPRESSED OR IMPLIED, ARISING BY LAW OR OTHERWISE.

This instrument shall be governed by and enforced in accordance with the laws of MASSACHUSETTS (state).

IN WITNESS WHEREOF, Seller has caused this Bill of Sale to be duly executed on the date first above written.

SELLER: AMERIGAS PROPANE

By: Terry Vaill

Title: CRR



FP-56A
(Rev. 03/10)

The Commonwealth of Massachusetts
Department of Fire Services

Interim Form
527 CMR 4.00 – Form 1A

Certificate of Compliance
M.G.L. Chapter 148, Section 38J

City or Town: Hampden

Street Name & Number: 169 Scantic Rd

Name of Property Owner: Trosky

This certifies that a visual inspection of the fuel supply line(s) for the aboveground heating oil storage tank was completed in accordance with M.G.L. Chapter 148, Section 38J(d) for the residential property identified above, and the following equipment was observed and compliant:

- Each fuel supply and return line (if present) is enclosed with a continuous non-metallic sleeve
- Each fuel supply line is equipped with an oil safety valve

This visual inspection and certification of compliance was completed on:

Date: 12/22/11

By: (Signature of Oil Burner Technician) Todd Brunell

(Print Name of Oil Burner Technician) Todd Brunell

Certificate of Competency #: 031593

Upon completion of Form 1A, the property owner shall receive a copy of the form and a copy shall also be submitted to the head of the local fire department or a designee.

This form can be photocopied or reproduced in triplicate.

Gary P. Weiner, P.E.
 53 Mill Road
 Hampden, MA 01036
 Tel.: (413) 374-4467

Invoice No.: 1439
 Date: 2/10/17

Customer: Name: MR. JOE TROSKY
 Company: _____
 Address: 169 SCANTIC ROAD
 City: HAMPDEN State: MA. Zip: 01036

Job No.: _____
 Job Name: 169 SCANTIC ROAD
 Job Location: HAMPDEN, MA.

Date	Project Description	Hours
THRU: 2/10/17	SEPTIC SYSTEM DESIGN	
Total Hours Worked:		
Rate / Hour		
Total Labor (Hours x Rate)		\$ 500.00

Miscellaneous Expenses		
Date	Description	Amount
Total Expenses:		
Total Labor and Expenses Due:		\$ 500.00

Date Paid: 2/13/17 Check No.: 4072



Commonwealth of Massachusetts
 City/Town of HAMPDEN
 Application for Disposal System
 Construction Permit
 Form 1A

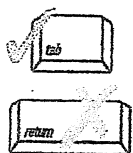
Number _____

\$ _____
 Fee

DEP has provided this form for use by local Boards of Health if they choose to do so. Before using the form, check with your local Board of Health to make sure that they will accept it.

A. Facility Information

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



Application is hereby made for a permit to: Construct a new on-site sewage disposal system
 Repair or replace an existing on-site sewage disposal system
 Repair or replace an existing system component

1. Location of Facility:

169 SCANTIC ROAD
 Address or Lot #
 HAMPDEN MA. 01036
 City/Town State Zip Code

2. Owner Information

JOSEPH & JENNY JEAN TROSKY
 Name
 Address (if different from above)
 City/Town State Zip Code
 Telephone Number
 1-413-668-7772

3. Installer Information

Name _____ Name of Company _____
 Address _____
 City/Town State Zip Code
 Telephone Number _____

4. Designer Information

GARY P. WEINER, P.E.
 Name
 53 MILL ROAD
 Address
 HAMPDEN MA. 01036
 City/Town State Zip Code
 Telephone Number
 1-413-374-4467



Commonwealth of Massachusetts
 City/Town of HAMPDEN
 Application for Disposal System
 Construction Permit
 Form 1A

Number _____
 \$ _____
 Fee _____

A. Facility Information (continued)

5. Type of Building:

Dwelling

Garbage Grinder (check if present)

Other: Type of Building

OUTBUILDING

Number of Persons Served _____

Showers

Number of showers _____

Cafeteria

Other fixtures

Specify other fixtures:

SHOWER, 2 TOILETS & WET SINK

6. Design Flow:

100

Gallons per Day

Calculated Daily Flow:

126

Gallons

7. Plan:

FEB. 2017

Date of Original

Number of Sheets

1

Revision Date

Title of Plan "PROPOSED SEWER CONNECTION, 169 SCANTIC ROAD, HAMPDEN, MA. FOR JOSEPH TROSKY"

8. Description of Soil:

9. Nature of Repairs or Alterations (if applicable):

THE APPLICANT IS REQUESTING TO TIE INTO AN EXISTING
 1500 gal. SEPTIC TANK AND LEACHING SYSTEM.

10. Date last inspected:

12/23/2016

Date



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC ROAD

MAIN SYSTEM

Property Address

JOE TROSKY

Owner's Name

HAMPDEN

MASS
State

01036
Zip Code

MAY 30, 2012
Date of Inspection

City/Town

Owner information is required for every page.

Inspection results must be submitted on this form. Inspection forms may not be altered in any way. Please see completeness checklist at the end of the form.

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



A. General Information

1. Inspector:

NICK TORRETTI

Name of Inspector

CLEAN SEPTICS

Company Name

P O BOX 394 252 WEST ST

Company Address

LUDLOW

City/Town

413 583 2138

Telephone Number

MASS
State

01056
Zip Code

S I 4496

License Number

B. Certification

I certify that I have personally inspected the sewage disposal system at this address and that the information reported below is true, accurate and complete as of the time of the inspection. The inspection was performed based on my training and experience in the proper function and maintenance of on site sewage disposal systems. I am a DEP approved system inspector pursuant to Section 15.340 of Title 5 (310 CMR 15.000). The system:

Passes

Conditionally Passes

Fails

Needs Further Evaluation by the Local Approving Authority

Nick Torretti

Inspector's Signature

MAY 30, 2012
Date

The system inspector shall submit a copy of this inspection report to the Approving Authority (Board of Health or DEP) within 30 days of completing this inspection. If the system is a shared system or has a design flow of 10,000 gpd or greater, the inspector and the system owner shall submit the report to the appropriate regional office of the DEP. The original should be sent to the system owner and copies sent to the buyer, if applicable, and the approving authority.

****This report only describes conditions at the time of inspection and under the conditions of use at that time. This inspection does not address how the system will perform in the future under the same or different conditions of use.



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC ROAD

MAIN SYSTEM

Property Address

JOE TROSKY

Owner's Name

HAMPDEN

City/Town

MASS
State

01036
Zip Code

MAY 30, 2012
Date of Inspection

Owner information is required for every page.

B. Certification (cont.)

Inspection Summary: Check A,B,C,D or E / always complete all of Section D

A) System Passes:

- I have not found any information which indicates that any of the failure criteria described in 310 CMR 15.303 or in 310 CMR 15.304 exist. Any failure criteria not evaluated are indicated below.

Comments:

RECOMMEND PUMPING EVERY ONE -TWO YEARS AND ADDING CCLS BACTERIA. CLEAN SEPTICS DOES NOT RECOMMEND USING SEPTIC SAFE OR BIODEGRADABLE TOILET PAPER

B) System Conditionally Passes:

- One or more system components as described in the "Conditional Pass" section need to be replaced or repaired. The system, upon completion of the replacement or repair, as approved by the Board of Health, will pass.

Check the box for "yes", "no" or "not determined" (Y, N, ND) for the following statements. If "not determined," please explain.

The septic tank is metal and over 20 years old* or the septic tank (whether metal or not) is structurally unsound, exhibits substantial infiltration or exfiltration or tank failure is imminent. System will pass inspection if the existing tank is replaced with a complying septic tank as approved by the Board of Health.

* A metal septic tank will pass inspection if it is structurally sound, not leaking and if a Certificate of Compliance indicating that the tank is less than 20 years old is available.

- Y N ND (Explain below):



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

MAIN SYSTEM

Property Address

JOE TROSKY

Owner's Name

HAMPDEN

MASS

State

01036

Zip Code

MAY 30, 2012

Date of Inspection

B. Certification (cont.)

B) System Conditionally Passes (cont.):

Observation of sewage backup or break out or high static water level in the distribution box due to broken or obstructed pipe(s) or due to a broken, settled or uneven distribution box. System will pass inspection if (with approval of Board of Health):

- broken pipe(s) are replaced Y N ND (Explain below):
- obstruction is removed Y N ND (Explain below):
- distribution box is leveled or replaced Y N ND (Explain below):

The system required pumping more than 4 times a year due to broken or obstructed pipe(s). The system will pass inspection if (with approval of the Board of Health):

- broken pipe(s) are replaced Y N ND (Explain below):
- obstruction is removed Y N ND (Explain below):

C) Further Evaluation is Required by the Board of Health:

Conditions exist which require further evaluation by the Board of Health in order to determine if the system is failing to protect public health, safety or the environment.

1. System will pass unless Board of Health determines in accordance with 310 CMR 15.303(1)(b) that the system is not functioning in a manner which will protect public health, safety and the environment:

- Cesspool or privy is within 50 feet of a surface water
- Cesspool or privy is within 50 feet of a bordering vegetated wetland or a salt marsh

Owner information is required for every page.



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

MAIN SYSTEM

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MAY 30, 2012

Date of Inspection

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B. Certification (cont.)

2. System will fail unless the Board of Health (and Public Water Supplier, if any) determines that the system is functioning in a manner that protects the public health, safety and environment:

- The system has a septic tank and soil absorption system (SAS) and the SAS is within 100 feet of a surface water supply or tributary to a surface water supply.
- The system has a septic tank and SAS and the SAS is within a Zone 1 of a public water supply.
- The system has a septic tank and SAS and the SAS is within 50 feet of a private water supply well.
- The system has a septic tank and SAS and the SAS is less than 100 feet but 50 feet or more from a private water supply well**.

Method used to determine distance: _____

** This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis must be attached to this form.

3. Other:

D) System Failure Criteria Applicable to All Systems:

You must indicate "Yes" or "No" to each of the following for all inspections:

- | Yes | No | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Backup of sewage into facility or system component due to overloaded or clogged SAS or cesspool |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Discharge or ponding of effluent to the surface of the ground or surface waters due to an overloaded or clogged SAS or cesspool |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Static liquid level in the distribution box above outlet invert due to an overloaded or clogged SAS or cesspool |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Liquid depth in cesspool is less than 6" below invert or available volume is less than 1/2 day flow |



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

MAIN SYSTEM

Property Address

JOE TROSKY

Owner's Name

HAMPDEN

MASS

01036

MAY 30, 2012

City/Town

State

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Date of Inspection

Owner information is required for every page.

B. Certification (cont.)

- | Yes | No | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required pumping more than 4 times in the last year NOT due to clogged or obstructed pipe(s). Number of times pumped: _____. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any portion of the SAS, cesspool or privy is below high ground water elevation. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any portion of cesspool or privy is within 100 feet of a surface water supply or tributary to a surface water supply. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any portion of a cesspool or privy is within a Zone 1 of a public well. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any portion of a cesspool or privy is within 50 feet of a private water supply well. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Any portion of a cesspool or privy is less than 100 feet but greater than 50 feet from a private water supply well with no acceptable water quality analysis. [This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis and chain of custody must be attached to this form.] |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | The system is a cesspool serving a facility with a design flow of 2000gpd-10,000gpd. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | The system fails . I have determined that one or more of the above failure criteria exist as described in 310 CMR 15.303, therefore the system fails. The system owner should contact the Board of Health to determine what will be necessary to correct the failure. |

E) Large Systems: To be considered a large system the system must serve a facility with a design flow of 10,000 gpd to 15,000 gpd.

For large systems, you must indicate either "yes" or "no" to each of the following, in addition to the questions in Section D.

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | the system is within 400 feet of a surface drinking water supply |
| <input type="checkbox"/> | <input type="checkbox"/> | the system is within 200 feet of a tributary to a surface drinking water supply |
| <input type="checkbox"/> | <input type="checkbox"/> | the system is located in a nitrogen sensitive area (Interim Wellhead Protection Area – IWPA) or a mapped Zone II of a public water supply well |

If you have answered "yes" to any question in Section E the system is considered a significant threat, or answered "yes" in Section D above the large system has failed. The owner or operator of any large system considered a significant threat under Section E or failed under Section D shall upgrade the system in accordance with 310 CMR 15.304. The system owner should contact the appropriate regional office of the Department.



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MASS State

01036 Zip Code

MAY 30, 2012 Date of Inspection

City/Town

Owner information is required for every page.

C. Checklist

Check if the following have been done. You must indicate "yes" or "no" as to each of the following:

- Checklist items with Yes/No columns and checkboxes. Includes questions about pumping information, system components, water flow, built plans, sewage back up, site inspection, system components location, septic tank manholes, facility owner information, and existing information.

D. System Information

Residential Flow Conditions:

Number of bedrooms (design): 4 Number of bedrooms (actual): 4
DESIGN flow based on 310 CMR 15.203 (for example: 110 gpd x # of bedrooms): DESIGNED FOR 660 GPD



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169 SCANTIC VALLEY ROAD

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D. System Information

Description:

Number of current residents:

4

Does residence have a garbage grinder?

Yes No

Is laundry on a separate sewage system? [if yes separate inspection required]

Yes No

Laundry system inspected?

Yes No

Seasonal use?

Yes No

Water meter readings, if available (last 2 years usage (gpd)):

WELL 100'

Detail:

Sump pump?

Yes No

Last date of occupancy:

PRESENT
Date

Commercial/Industrial Flow Conditions:

Type of Establishment:

Design flow (based on 310 CMR 15.203):

_____ Gallons per day (gpd)

Basis of design flow (seats/persons/sq.ft., etc.):

Grease trap present?

Yes No

Industrial waste holding tank present?

Yes No

Non-sanitary waste discharged to the Title 5 system?

Yes No

Water meter readings, if available:



Commonwealth of Massachusetts

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MAY 30, 2012
Date of Inspection

Owner information is required for every page.

D. System Information (cont.)

Last date of occupancy/use:

Date

Other (describe below):

General Information

Pumping Records:

Source of information:

PUMPED N/A

Was system pumped as part of the inspection?

Yes No

If yes, volume pumped:

1500 GALLONS
gallons

How was quantity pumped determined?

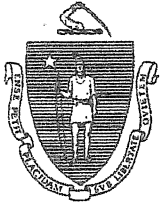
MEASURED

Reason for pumping:

MAINTENANCE /PREP FOR INSPECTION

Type of System:

- Septic tank, distribution box, soil absorption system
- Single cesspool
- Overflow cesspool
- Privy
- Shared system (yes or no) (if yes, attach previous inspection records, if any)
- Innovative/Alternative technology. Attach a copy of the current operation and maintenance contract (to be obtained from system owner) and a copy of latest inspection of the I/A system by system operator under contract
- Tight tank. Attach a copy of the DEP approval.
- Other (describe):



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

MAIN SYSTEM

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MAY 30, 2012

Date of Inspection

Owner information is required for every page.

D. System Information (cont.)

Approximate age of all components, date installed (if known) and source of information:

APPROXIMATELY N/A

Were sewage odors detected when arriving at the site?

Yes No

Building Sewer (locate on site plan):

Depth below grade:

feet

Material of construction:

cast iron

40 PVC

other (explain):

Distance from private water supply well or suction line:

WELL
feet

Comments (on condition of joints, venting, evidence of leakage, etc.):

JOINTS AND VENTING OK, NO LEAKAGE

Septic Tank (locate on site plan):

Depth below grade:

feet

Material of construction:

concrete

metal

fiberglass

polyethylene

other (explain)

CLEAN SEPTICS PUMPED THE SEPTIC TANK MAY 5, 2011

If tank is metal, list age:

years

Is age confirmed by a Certificate of Compliance? (attach a copy of certificate)

Yes No

Dimensions:

L 10' 5" X W 5' X H 5'

Sludge depth:



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

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Owner information is required for every page.

D. System Information (cont.)

Septic Tank (cont.)

Distance from top of sludge to bottom of outlet tee or baffle _____

Scum thickness _____

Distance from top of scum to top of outlet tee or baffle _____

Distance from bottom of scum to bottom of outlet tee or baffle _____

How were dimensions determined? _____

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):

PUMP SEPTIC TANK EVERY ONE - THREE YEARS, INLET AND OUTLET BAFFLE OK. TANK IS STRUCTURALLY SOUND, LIQUID LEVELS ARE AT THE INVERT. NO LEAKAGE

Grease Trap (locate on site plan):

Depth below grade: _____

feet

Material of construction:

concrete

metal

fiberglass

polyethylene

other (explain): _____

Dimensions: _____

Scum thickness _____

Distance from top of scum to top of outlet tee or baffle _____

Distance from bottom of scum to bottom of outlet tee or baffle _____

Date of last pumping: _____

Date



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC VALLEY ROAD

MAIN SYSTEM

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MASS

01036

MAY 30, 2012

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Owner information is required for every page.

D. System Information (cont.)

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):

SEPTIC TANK IS STRUCTURALLY SOUND

Tight or Holding Tank (tank must be pumped at time of inspection) (locate on site plan):

Depth below grade: _____

Material of construction:

concrete

metal

fiberglass

polyethylene

other (explain):

Dimensions: _____

Capacity: _____

gallons

Design Flow: _____

gallons per day

Alarm present:

Yes

No

Alarm level: _____

Alarm in working order:

Yes

No

Date of last pumping: _____

Date

Comments (condition of alarm and float switches, etc.):

* Attach copy of current pumping contract (required). Is copy attached?

Yes

No



Commonwealth of Massachusetts

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D. System Information (cont.)

Distribution Box (if present must be opened) (locate on site plan):

Depth of liquid level above outlet invert

0", D -BOX IS APPROXIMATELY 3' DEEP

Comments (note if box is level and distribution to outlets equal, any evidence of solids carryover, any evidence of leakage into or out of box, etc.):

D -BOX IS EQUAL AND LEVEL NO LEAKS, NO CARRY OVER

Pump Chamber (locate on site plan):

Pumps in working order:

Yes

No

Alarms in working order:

Yes

No

Comments (note condition of pump chamber, condition of pumps and appurtenances, etc.):

Soil Absorption System (SAS) (locate on site plan, excavation not required):

If SAS not located, explain why:



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169 SCANTIC VALLEY ROAD

MAIN SYSTEM

Property Address

JOE TROSKY

Owner's Name

HAMPDEN

MASS

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Owner information is required for every page.

D. System Information (cont.)

Type:

- leaching pits number: _____
- leaching chambers number: _____
- leaching galleries number: _____
- leaching trenches number, length: 3 LINES OUT OF BOX 150' OF 2' X 2' TRENCHES
- leaching fields number, dimensions: _____
- overflow cesspool number: _____
- innovative/alternative system

Type/name of technology: _____

Comments (note condition of soil, signs of hydraulic failure, level of ponding, damp soil, condition of vegetation, etc.):

SOIL AND VEGETATION ARE OK, NO SIGNS OF HYDRAULIC FAILURE

Cesspools (cesspool must be pumped as part of inspection) (locate on site plan):

Number and configuration _____

Depth - top of liquid to inlet invert _____

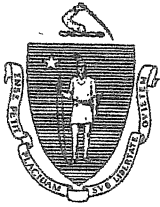
Depth of solids layer _____

Depth of scum layer _____

Dimensions of cesspool _____

Materials of construction _____

Indication of groundwater inflow Yes No



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D. System Information (cont.)

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):

Privy (locate on site plan):

Materials of construction: _____

Dimensions _____

Depth of solids _____

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):



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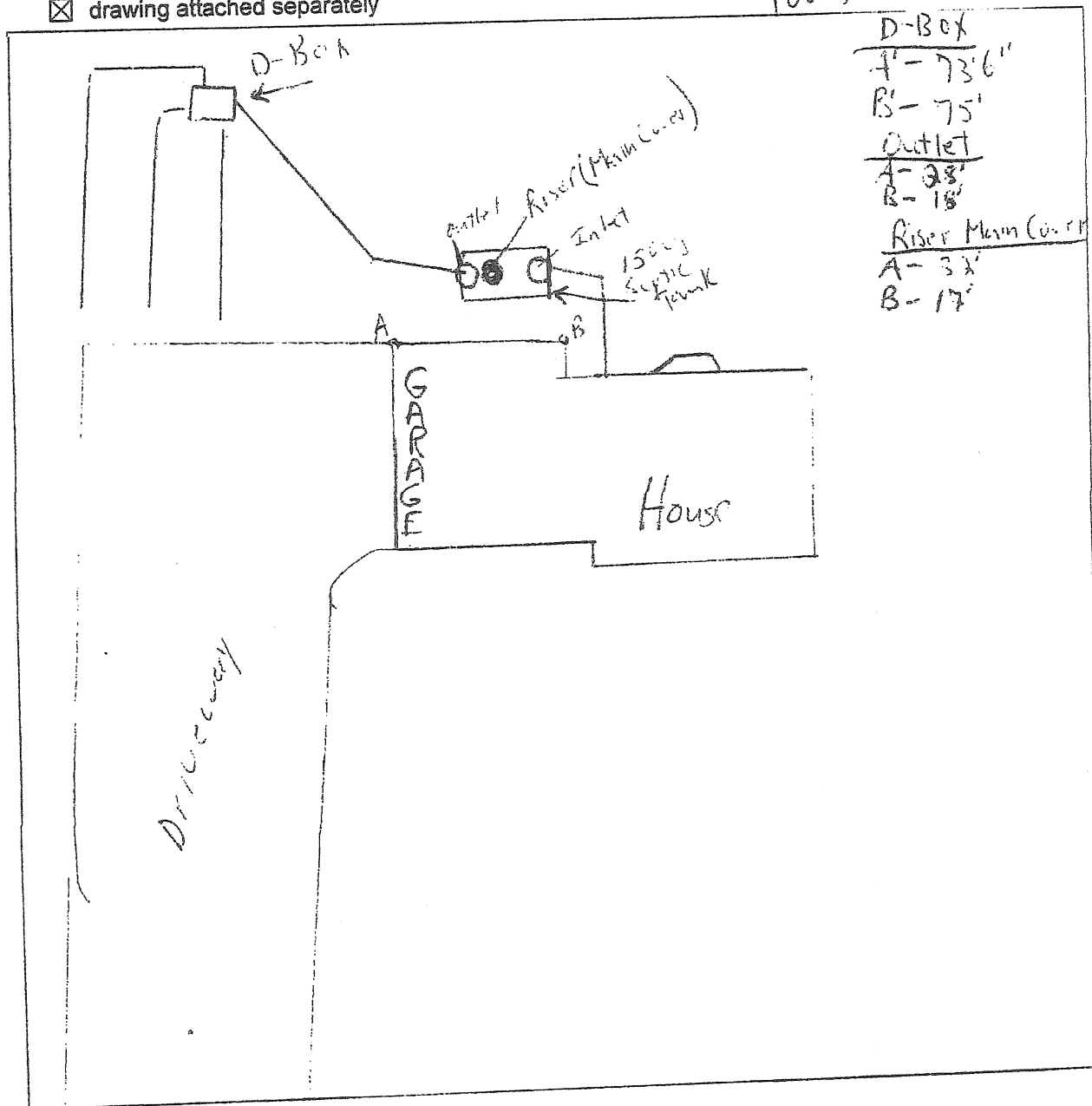
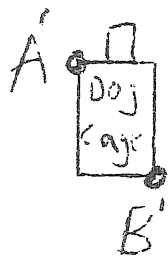
Owner information is required for every page.

D. System Information (cont.)

Sketch Of Sewage Disposal System: Provide a view of the sewage disposal system, including ties to at least two permanent reference landmarks or benchmarks. Locate all wells within 100 feet. Locate where public water supply enters the building. Check one of the boxes below:

- hand-sketch in the area below
- drawing attached separately

Well 100'+



D-Box
A - 73'6"
B - 75'
Outlet
A - 23'
B - 18'
Riser Main Cover
A - 32'
B - 17'



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D. System Information (cont.)

Site Exam:

- Check Slope
- Surface water
- Check cellar
- Shallow wells

Estimated depth to high ground water:

NONE AT NONE
feet

Please indicate all methods used to determine the high ground water elevation:

- Obtained from system design plans on record
If checked, date of design plan reviewed: 5 / 19 / 1994
Date
- Observed site (abutting property/observation hole within 150 feet of SAS)
- Checked with local Board of Health - explain:

- Checked with local excavators, installers - (attach documentation)
- Accessed USGS database - explain:

You **must** describe how you established the high ground water elevation:

SLOPE AND CHECKED CELLAR. PLANS AT THE BOARD OF HEALTH

Before filing this Inspection Report, please see Report Completeness Checklist on next page.



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E. Report Completeness Checklist

- Inspection Summary: A, B, C, D, or E checked
- Inspection Summary D (System Failure Criteria Applicable to All Systems) completed
- System Information – Estimated depth to high groundwater
- Sketch of Sewage Disposal System either drawn on page 15 or attached in separate file



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SECOND SYSTEM

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Inspection results must be submitted on this form. Inspection forms may not be altered in any way. Please see completeness checklist at the end of the form.

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



A. General Information

1. Inspector:

NICK TORRETTI

Name of Inspector

CLEAN SEPTICS

Company Name

P O BOX 394 252 WEST ST

Company Address

LUDLOW

City/Town

413 583 2138

Telephone Number

MASS

State

01056

Zip Code

S I 4496

License Number

B. Certification

I certify that I have personally inspected the sewage disposal system at this address and that the information reported below is true, accurate and complete as of the time of the inspection. The inspection was performed based on my training and experience in the proper function and maintenance of on site sewage disposal systems. I am a DEP approved system inspector pursuant to Section 15.340 of Title 5 (310 CMR 15.000). The system:

Passes

Conditionally Passes

Fails

Needs Further Evaluation by the Local Approving Authority

Nick Torretti

Inspector's Signature

MAY 30, 2012

Date

The system inspector shall submit a copy of this inspection report to the Approving Authority (Board of Health or DEP) within 30 days of completing this inspection. If the system is a shared system or has a design flow of 10,000 gpd or greater, the inspector and the system owner shall submit the report to the appropriate regional office of the DEP. The original should be sent to the system owner and copies sent to the buyer, if applicable, and the approving authority.

****This report only describes conditions at the time of inspection and under the conditions of use at that time. This inspection does not address how the system will perform in the future under the same or different conditions of use.



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B. Certification (cont.)

Inspection Summary: Check A,B,C,D or E / *always* complete all of Section D

A) System Passes:

- I have not found any information which indicates that any of the failure criteria described in 310 CMR 15.303 or in 310 CMR 15.304 exist. Any failure criteria not evaluated are indicated below.

Comments:

B) System Conditionally Passes:

- One or more system components as described in the "Conditional Pass" section need to be replaced or repaired. The system, upon completion of the replacement or repair, as approved by the Board of Health, will pass.

Check the box for "yes", "no" or "not determined" (Y, N, ND) for the following statements. If "not determined," please explain.

The septic tank is metal and over 20 years old* or the septic tank (whether metal or not) is structurally unsound, exhibits substantial infiltration or exfiltration or tank failure is imminent. System will pass inspection if the existing tank is replaced with a complying septic tank as approved by the Board of Health.

* A metal septic tank will pass inspection if it is structurally sound, not leaking and if a Certificate of Compliance indicating that the tank is less than 20 years old is available.

- Y
- N
- ND (Explain below):



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B. Certification (cont.)

2. System will fail unless the Board of Health (and Public Water Supplier, if any) determines that the system is functioning in a manner that protects the public health, safety and environment:

- Four checkbox options regarding SAS location relative to surface water, public water supply, and private water supply wells.

** This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered.

3. Other:

Four horizontal lines for additional information.

D) System Failure Criteria Applicable to All Systems:

You must indicate "Yes" or "No" to each of the following for all inspections:

Table with 2 columns: Yes, No. Rows describe failure criteria like 'Backup of sewage into facility', 'Discharge or ponding of effluent', etc.



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B. Certification (cont.)

B) System Conditionally Passes (cont.):

Observation of sewage backup or break out or high static water level in the distribution box due to broken or obstructed pipe(s) or due to a broken, settled or uneven distribution box. System will pass inspection if (with approval of Board of Health):

- broken pipe(s) are replaced Y N ND (Explain below):
- obstruction is removed Y N ND (Explain below):
- distribution box is leveled or replaced Y N ND (Explain below):

The system required pumping more than 4 times a year due to broken or obstructed pipe(s). The system will pass inspection if (with approval of the Board of Health):

- broken pipe(s) are replaced Y N ND (Explain below):
- obstruction is removed Y N ND (Explain below):

C) Further Evaluation is Required by the Board of Health:

Conditions exist which require further evaluation by the Board of Health in order to determine if the system is failing to protect public health, safety or the environment.

1. System will pass unless Board of Health determines in accordance with 310 CMR 15.303(1)(b) that the system is not functioning in a manner which will protect public health, safety and the environment:

- Cesspool or privy is within 50 feet of a surface water
- Cesspool or privy is within 50 feet of a bordering vegetated wetland or a salt marsh



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B. Certification (cont.)

2. System will fail unless the Board of Health (and Public Water Supplier, if any) determines that the system is functioning in a manner that protects the public health, safety and environment:

- Four checkbox options regarding SAS location relative to surface water supply, public water supply, and private water supply well.

Method used to determine distance:

** This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis must be attached to this form.

3. Other:

Three horizontal lines for additional information.

D) System Failure Criteria Applicable to All Systems:

You must indicate "Yes" or "No" to each of the following for all inspections:

- Table with columns 'Yes' and 'No' and four rows of failure criteria, each with a checked 'No' box.



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B. Certification (cont.)

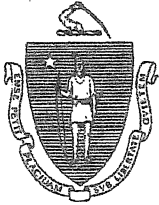
- Yes No Required pumping more than 4 times in the last year NOT due to clogged or obstructed pipe(s). Number of times pumped: Any portion of the SAS, cesspool or privy is below high ground water elevation. Any portion of cesspool or privy is within 100 feet of a surface water supply or tributary to a surface water supply. Any portion of a cesspool or privy is within a Zone 1 of a public well. Any portion of a cesspool or privy is within 50 feet of a private water supply well. Any portion of a cesspool or privy is less than 100 feet but greater than 50 feet from a private water supply well with no acceptable water quality analysis. [This system passes if the well water analysis, performed at a DEP certified laboratory, for fecal coliform bacteria indicates absent and the presence of ammonia nitrogen and nitrate nitrogen is equal to or less than 5 ppm, provided that no other failure criteria are triggered. A copy of the analysis and chain of custody must be attached to this form.] The system is a cesspool serving a facility with a design flow of 2000gpd-10,000gpd. The system fails. I have determined that one or more of the above failure criteria exist as described in 310 CMR 15.303, therefore the system fails. The system owner should contact the Board of Health to determine what will be necessary to correct the failure.

E) Large Systems: To be considered a large system the system must serve a facility with a design flow of 10,000 gpd to 15,000 gpd.

For large systems, you must indicate either "yes" or "no" to each of the following, in addition to the questions in Section D.

- Yes No the system is within 400 feet of a surface drinking water supply the system is within 200 feet of a tributary to a surface drinking water supply the system is located in a nitrogen sensitive area (Interim Wellhead Protection Area - IWPA) or a mapped Zone II of a public water supply well

If you have answered "yes" to any question in Section E the system is considered a significant threat, or answered "yes" in Section D above the large system has failed. The owner or operator of any large system considered a significant threat under Section E or failed under Section D shall upgrade the system in accordance with 310 CMR 15.304. The system owner should contact the appropriate regional office of the Department.



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C. Checklist

Check if the following have been done. You must indicate "yes" or "no" as to each of the following:

- | Yes | No | |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pumping information was provided by the owner, occupant, or Board of Health |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Were any of the system components pumped out in the previous two weeks? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Has the system received normal flows in the previous two week period? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Have large volumes of water been introduced to the system recently or as part of this inspection? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Were as built plans of the system obtained and examined? (If they were not available note as N/A) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Was the facility or dwelling inspected for signs of sewage back up? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Was the site inspected for signs of break out? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Were all system components, excluding the SAS, located on site? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Were the septic tank manholes uncovered, opened, and the interior of the tank inspected for the condition of the baffles or tees, material of construction, dimensions, depth of liquid, depth of sludge and depth of scum? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Was the facility owner (and occupants if different from owner) provided with information on the proper maintenance of subsurface sewage disposal systems? The size and location of the Soil Absorption System (SAS) on the site has been determined based on: |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Existing information. For example, a plan at the Board of Health. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Determined in the field (if any of the failure criteria related to Part C is at issue approximation of distance is unacceptable) [310 CMR 15.302(5)] |

D. System Information

Residential Flow Conditions:

Number of bedrooms (design): FLOW BASEMENT Number of bedrooms (actual): ONLY BASEMENT

DESIGN flow based on 310 CMR 15.203 (for example: 110 gpd x # of bedrooms): 126 GPD



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D. System Information

Description:

Number of current residents: 4

Does residence have a garbage grinder? Yes No

Is laundry on a separate sewage system? [if yes separate inspection required] Yes No

Laundry system inspected? Yes No

Seasonal use? Yes No

Water meter readings, if available (last 2 years usage (gpd)): WELL 100' +

Detail:

Sump pump? Yes No

Last date of occupancy: PRESENT
Date

Commercial/Industrial Flow Conditions:

Type of Establishment: _____

Design flow (based on 310 CMR 15.203): _____
Gallons per day (gpd)

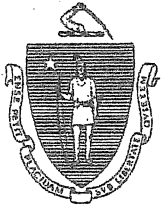
Basis of design flow (seats/persons/sq.ft., etc.): _____

Grease trap present? Yes No

Industrial waste holding tank present? Yes No

Non-sanitary waste discharged to the Title 5 system? Yes No

Water meter readings, if available: _____



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D. System Information (cont.)

Last date of occupancy/use:

Date

Other (describe below):

General Information

Pumping Records:

Source of information:

PUMPED N/A

Was system pumped as part of the inspection?

Yes No

If yes, volume pumped:

gallons

How was quantity pumped determined?

Reason for pumping:

Type of System:

- Septic tank, distribution box, soil absorption system
- Single cesspool
- Overflow cesspool
- Privy
- Shared system (yes or no) (if yes, attach previous inspection records, if any)
- Innovative/Alternative technology. Attach a copy of the current operation and maintenance contract (to be obtained from system owner) and a copy of latest inspection of the I/A system by system operator under contract
- Tight tank. Attach a copy of the DEP approval.
- Other (describe):



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D. System Information (cont.)

Approximate age of all components, date installed (if known) and source of information:

APPROXIMATELY N/A

Were sewage odors detected when arriving at the site?

Yes No

Building Sewer (locate on site plan):

Depth below grade:

3' 8"
feet

Material of construction:

cast iron 40 PVC other (explain):

Distance from private water supply well or suction line:

feet

Comments (on condition of joints, venting, evidence of leakage, etc.):

JOINTS AND VENTING OK, NO LEAKAGE

Septic Tank (locate on site plan):

Depth below grade:

3'
feet

Material of construction:

concrete metal fiberglass polyethylene other (explain)

If tank is metal, list age:

years

Is age confirmed by a Certificate of Compliance? (attach a copy of certificate)

Yes No

Dimensions:

L 10' 5' X W 5' X H 5'

Sludge depth:



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D. System Information (cont.)

Septic Tank (cont.)

Distance from top of sludge to bottom of outlet tee or baffle

Scum thickness

Distance from top of scum to top of outlet tee or baffle

Distance from bottom of scum to bottom of outlet tee or baffle

How were dimensions determined?

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):

PUMP SEPTIC TANK EVERY ONE - THREE YEARS, INLET AND OUTLET BAFFLE OK. TANK IS STRUCTURALLY SOUND, LIQUID LEVELS ARE AT THE INVERT. NO LEAKAGE

Grease Trap (locate on site plan):

Depth below grade:

feet

Material of construction:

concrete

metal

fiberglass

polyethylene

other (explain):

Dimensions:

Scum thickness

Distance from top of scum to top of outlet tee or baffle

Distance from bottom of scum to bottom of outlet tee or baffle

Date of last pumping:

Date



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D. System Information (cont.)

Comments (on pumping recommendations, inlet and outlet tee or baffle condition, structural integrity, liquid levels as related to outlet invert, evidence of leakage, etc.):
SEPTIC TANK IS STRUCTURALLY SOUND

Tight or Holding Tank (tank must be pumped at time of inspection) (locate on site plan):

Depth below grade: _____

Material of construction:

concrete

metal

fiberglass

polyethylene

other (explain):

Dimensions: _____

Capacity: _____

gallons

Design Flow: _____

gallons per day

Alarm present:

Yes No

Alarm level: _____

Alarm in working order: Yes No

Date of last pumping: _____

Date

Comments (condition of alarm and float switches, etc.):

* Attach copy of current pumping contract (required). Is copy attached?

Yes

No



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D. System Information (cont.)

Distribution Box (if present must be opened) (locate on site plan):

Depth of liquid level above outlet invert

0", D-BOX IS APPROXIMATELY 4' DEEP

Comments (note if box is level and distribution to outlets equal, any evidence of solids carryover, any evidence of leakage into or out of box, etc.):

D-BOX IS EQUAL AND LEVEL NO LEAKS, NO CARRY OVER

Pump Chamber (locate on site plan):

Pumps in working order:

Yes No

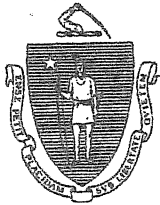
Alarms in working order:

Yes No

Comments (note condition of pump chamber, condition of pumps and appurtenances, etc.):

Soil Absorption System (SAS) (locate on site plan, excavation not required):

If SAS not located, explain why:



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D. System Information (cont.)

Type:

- leaching pits number: _____
- leaching chambers number: _____
- leaching galleries number: _____
- leaching trenches number, length: 1 TRENCHES @ 30' LENGTHS
- leaching fields number, dimensions: 2' X 2' TRENCH
- overflow cesspool number: _____
- innovative/alternative system

Type/name of technology: _____

Comments (note condition of soil, signs of hydraulic failure, level of ponding, damp soil, condition of vegetation, etc.):
SOIL AND VEGETATION ARE OK, NO SIGNS OF HYDRAULIC FAILURE

Cesspools (cesspool must be pumped as part of inspection) (locate on site plan):

Number and configuration _____

Depth – top of liquid to inlet invert _____

Depth of solids layer _____

Depth of scum layer _____

Dimensions of cesspool _____

Materials of construction _____

Indication of groundwater inflow

Yes No



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D. System Information (cont.)

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):

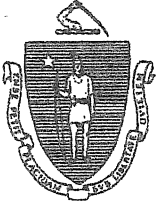
Privy (locate on site plan):

Materials of construction:

Dimensions

Depth of solids

Comments (note condition of soil, signs of hydraulic failure, level of ponding, condition of vegetation, etc.):



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC ROAD BASEMENT BATHROOM

SECOND SYSTEM

Property Address

JOE TROSKEY

Owner's Name

HAMPDEN

City/Town

MASS

State

01036

Zip Code

MAY 30, 2012

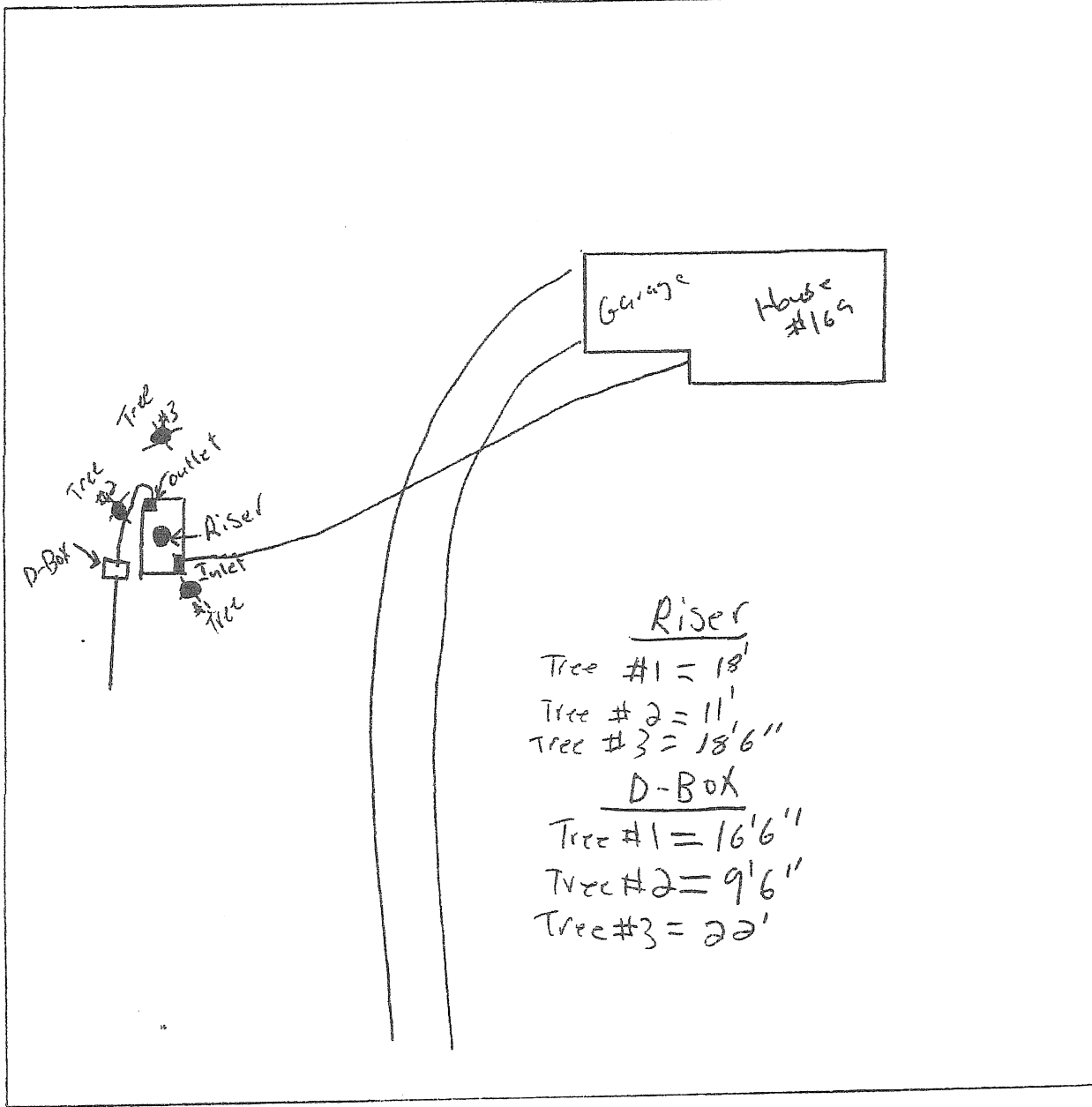
Date of Inspection

Owner information is required for every page.

D. System Information (cont.)

Sketch Of Sewage Disposal System: Provide a view of the sewage disposal system, including ties to at least two permanent reference landmarks or benchmarks. Locate all wells within 100 feet. Locate where public water supply enters the building. Check one of the boxes below:

- hand-sketch in the area below
- drawing attached separately





Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC ROAD BASEMENT BATHROOM SECOND SYSTEM

Property Address

JOE TROSKEY

Owner's Name

HAMPDEN

City/Town

MASS
State

01036
Zip Code

MAY 30, 2012
Date of Inspection

Owner information is required for every page.

D. System Information (cont.)

Site Exam:

- Check Slope
- Surface water
- Check cellar
- Shallow wells

Estimated depth to high ground water: NONE AT 111"
feet

Please indicate all methods used to determine the high ground water elevation:

- Obtained from system design plans on record
If checked, date of design plan reviewed: 4 / 16 / 1995
Date
- Observed site (abutting property/observation hole within 150 feet of SAS)
- Checked with local Board of Health - explain:

- Checked with local excavators, installers - (attach documentation)
- Accessed USGS database - explain:

You must describe how you established the high ground water elevation:

SLOPE AND CHECKED CELLAR. PERC PERFORMED BY ROBERT CAFERELLI

Before filing this Inspection Report, please see Report Completeness Checklist on next page.



Commonwealth of Massachusetts

Title 5 Official Inspection Form

Subsurface Sewage Disposal System Form - Not for Voluntary Assessments

169 SCANTIC ROAD BASEMENT BATHROOM

SECOND SYSTEM

Property Address

JOE TROSKEY

Owner's Name

HAMPDEN

City/Town

MASS

State

01036

Zip Code

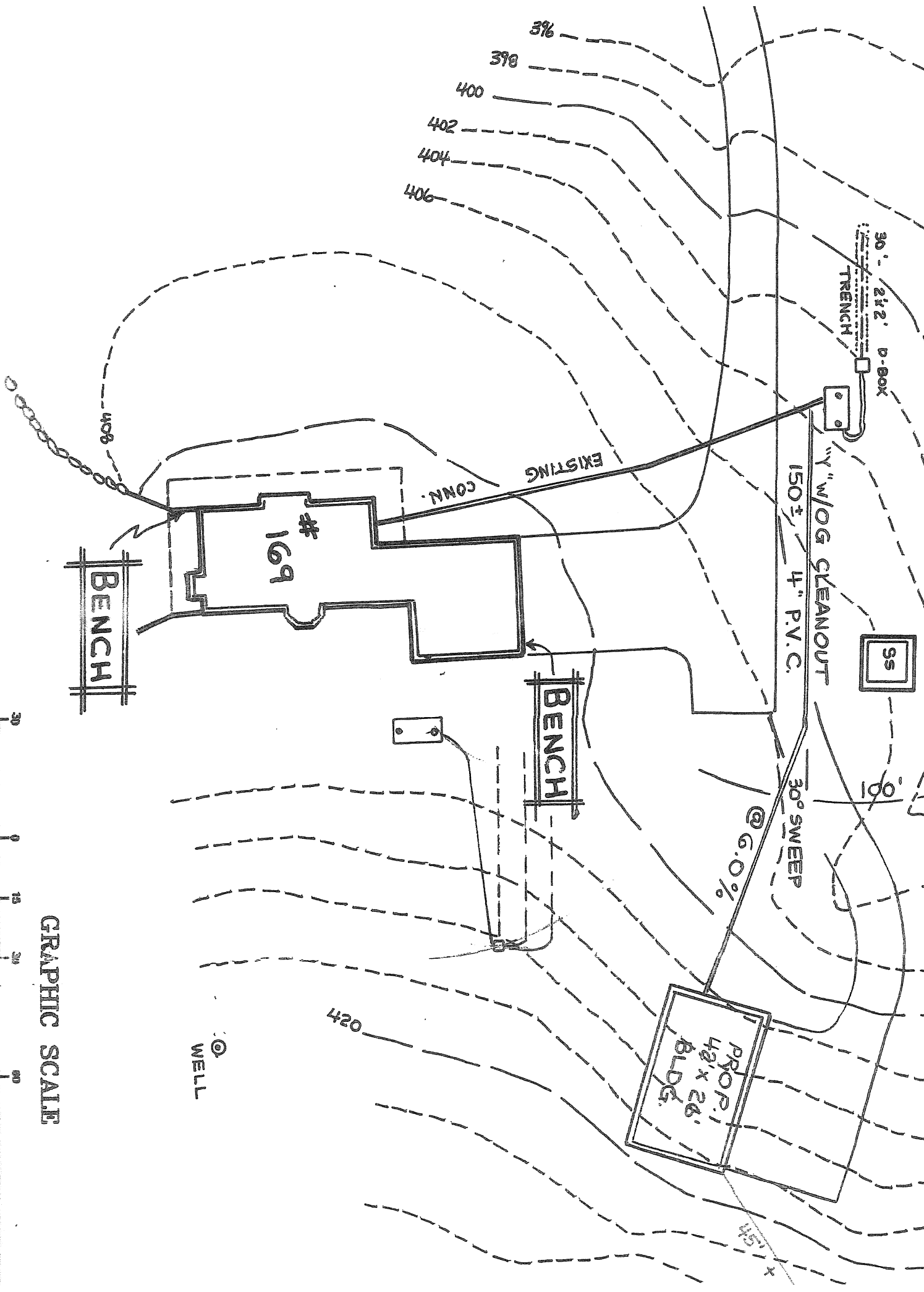
MAY 30, 2012

Date of Inspection

Owner information is required for every page.

E. Report Completeness Checklist

- Inspection Summary: A, B, C, D, or E checked
- Inspection Summary D (System Failure Criteria Applicable to All Systems) completed
- System Information – Estimated depth to high groundwater
- Sketch of Sewage Disposal System either drawn on page 15 or attached in separate file



GRAPHIC SCALE

Hampden

CLEAN-SEPTICS

P.O. Box 394, Ludlow, MA 01056 • office@cleanseptics.com
Ludlow 583-2138 • cleansepticsinc@gmail.com
Toll Free 833-583-2138 • FAX 413-589-1140

Name: *Joe Trojky*

Phone # *413-663-7772*

A. Facility Information

1. System Location:

164 Carter Rd
Address

Hampden City/Town **MASS** State _____ Zip Code

2. Pumping Fee *405/420* Open *Running* Dig Fee _____

3. CCLS Bacteria _____

4. Extra Labor _____

5. Comments *10.00 off each tank*

This is your bill, please remit.

Total Due *\$ 840.00*

Check # 110

B. Pumping Record

1. Date of Pumping: *4/13/2005* 2. Quantity Pumped: 1000 (gal.) 1500 (gal.)

3. Component: Cesspool(s) Septic Tank Tight Tank Two Compartment Tank
 Other (describe): _____

4. Effluent Tee Filter Present? Yes No If yes, was it cleaned? Yes No

5. Observed condition of component pumped *Solids Building Both tanks*

6. System Pumped By: *Rubio*
Name

WHITE **YELLOW/SILVER** **MACK**
HOSES _____ **DIFF 1 2 3 4 5**
1 Hoses
Both tanks

CLEAN SEPTICS, INC.
Company

7. Location where contents were disposed:
BONDI'S ISLAND, INDIAN ORCHARD, MASSACHUSETTS

Signature of Hauler *[Signature]*

Customer # _____

Signature of receiving Facility (or attached facility receipt) _____

Invoice # _____

Hampden

Joe Traskey

CLEAN-SEPTICS

P.O. Box 394, Ludlow, MA 01056 • office@cleanseptics.com

Ludlow 583-2138 • cleansepticsinc@gmail.com

Toll Free 833-583-2138 • FAX 413-589-1140

Name: _____

A. Facility Information

Phone # _____

1. System Location:

1169 Seantic Road

Address _____

City/Town _____

Hampden

MASS

State _____

Zip Code _____

01036

2. Pumping Fee _____

\$400 / 9425

Open _____

Dig Fee _____

3. CCLS Bacteria _____

2 CCLS Bacteria \$120.00

4. Extra Labor _____

5. Comments _____

This is your bill, please remit.

Total Due _____

\$970.00

B. Pumping Record

1. Date of Pumping: _____

June 10, 2020

2. Quantity Pumped:

1000 (gal.)

1500 (gal.)

3. Component:

Cesspool(s)

Septic Tank

Tight Tank

Two Compartment Tank

Other (describe): _____

2 TANKS INSITE

4. Effluent Tee Filter Present?

Yes

No

If yes, was it cleaned?

Yes

No

5. Observed condition of component pumped _____

Lots of Solids Needs to Pump every 4

6. System Pumped By:

Name _____

Richard V

ORANGE

YELLOW/SILVER

MACK

HOSES

DIFF 1 2 3 4 5

CLEAN SEPTICS, INC.

Company _____

7. Location where contents were disposed:

BOND'S ISLAND, INDIAN ORCHARD, MASSACHUSETTS

Signature of Hauler _____

Customer # _____

Signature of receiving Facility (or attached facility receipt) _____

Invoice # _____

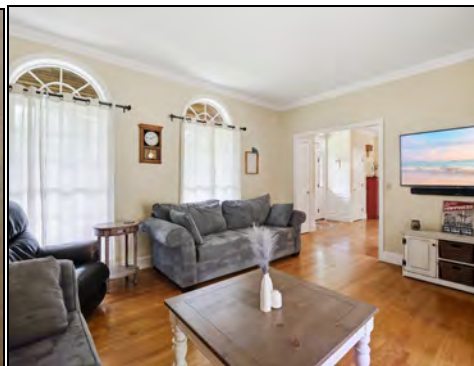
10/2020

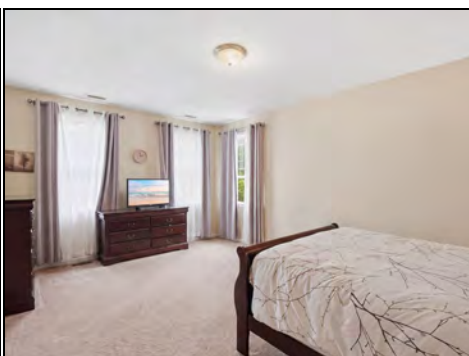
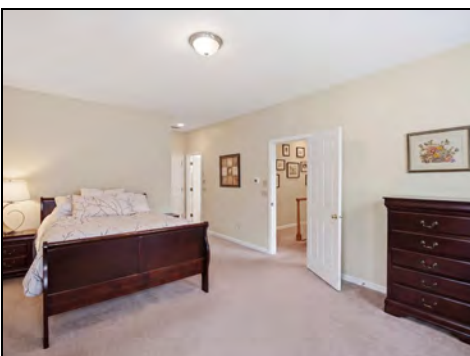
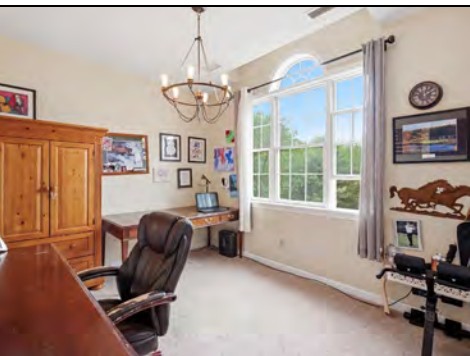
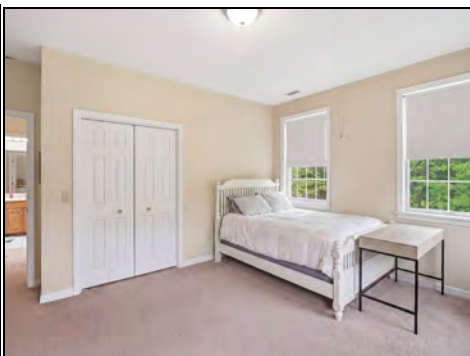
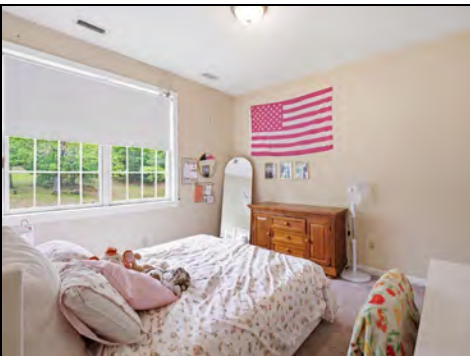
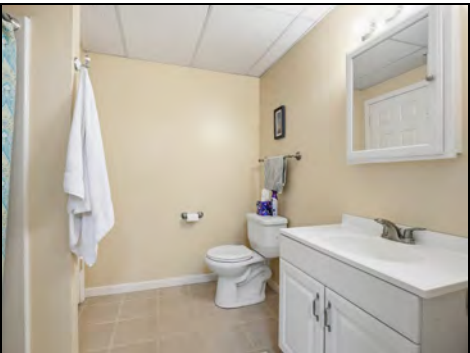
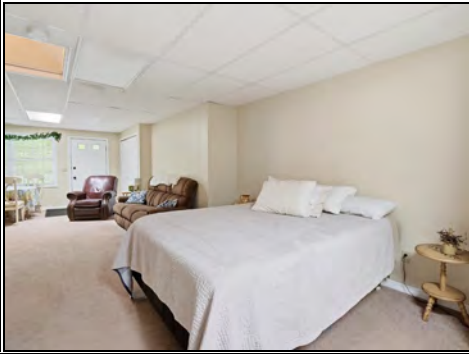
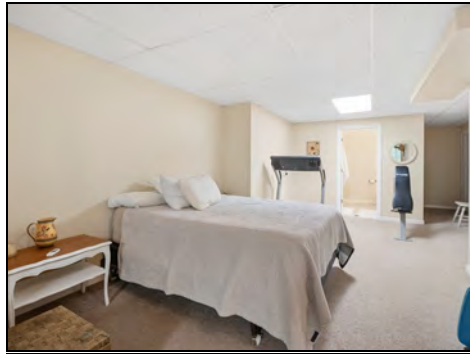
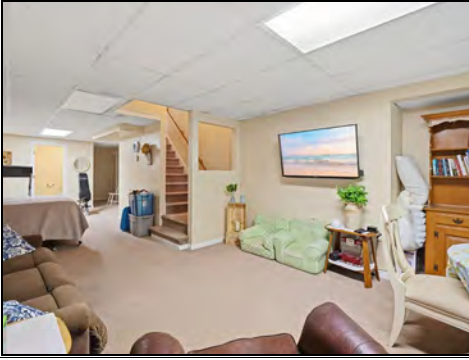
CUSTOMER COPY

PHOTO GALLERY

169 SCANTIC RD., HAMPDEN, MA





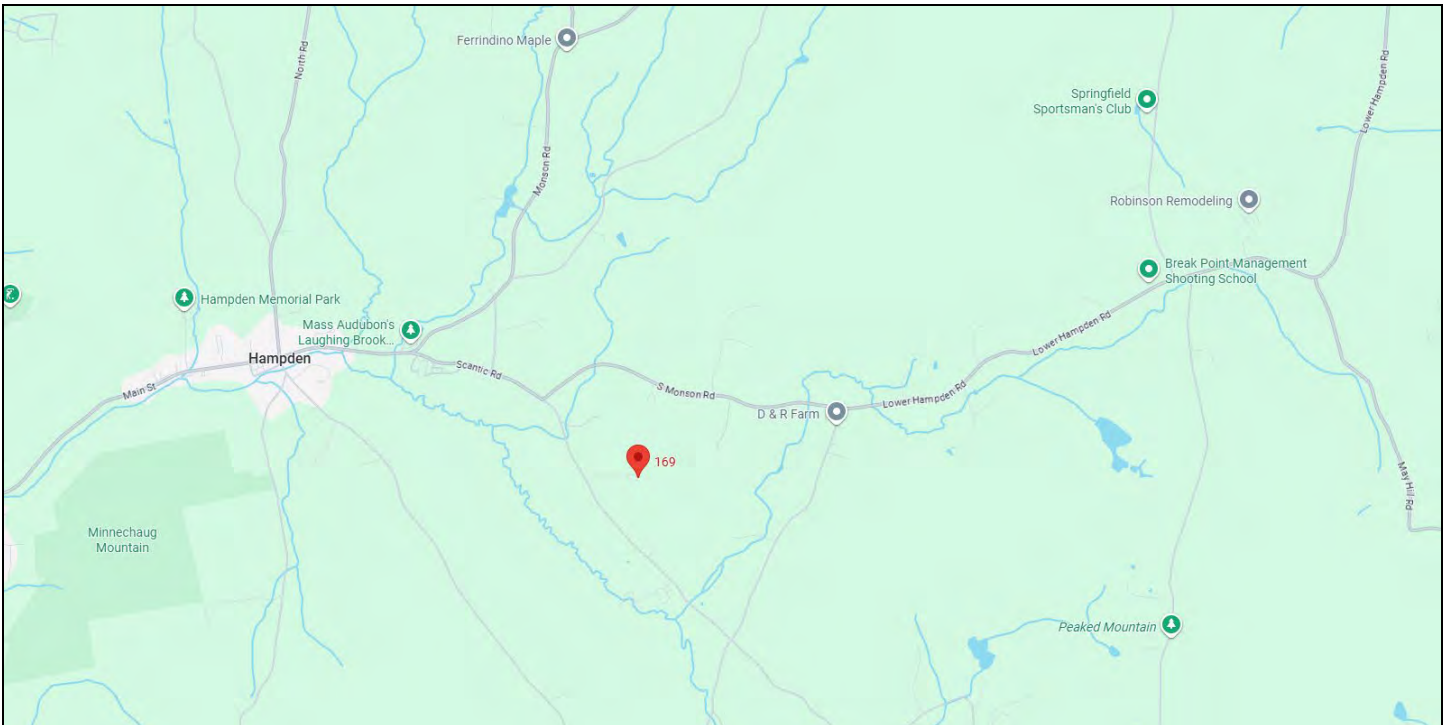
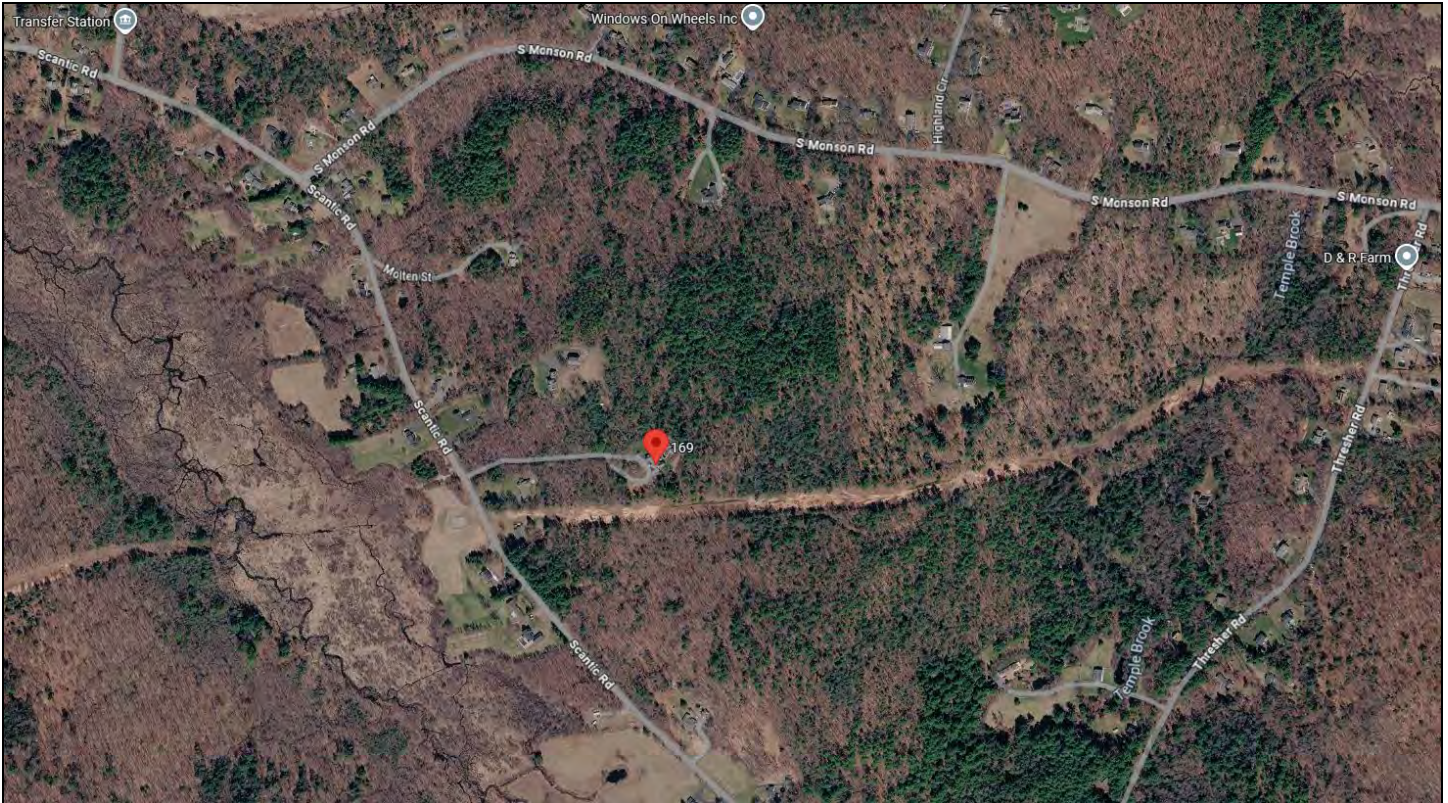






MAP

169 SCANTIC RD., HAMPDEN, MA





**THANK YOU FOR REVIEWING THE ENTIRE
PROPERTY INFORMATION PACKAGE. WE
LOOK FORWARD TO SEEING YOU AT THE
AUCTION. IF YOU HAVE ANY QUESTIONS
PLEASE DON'T HESITATE TO CONTACT US.**



**Justin Manning, CAI, AARE
President**

Phone: 800-521-0111

Fax: 508-362-1073

**JJManning.com
auctions@JJManning.com**

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