



Schuyler County Watershed Protection Agency

910 S. Decatur St
Watkins Glen, NY 14891
Phone: 607-535-6868 Fax: 535-6867
<http://schuylercounty.us/wpa.htm>

Certificate of Compliance

for an evaluation of an individual wastewater treatment system and/or water supply

Purpose of Report: Conversion

Municipality: Catharine, Town of

Property Address: 2655 COOL LEA CAMP RD
Parcel ID Number: 79.09-1-36
Owners Name: Roy E Craver Phone: 607-594-2338
Owners Mailing: 1646 Fitzpatrick Hill Rd Montour Falls, NY 14865
Interviewee: Owner
Requested By: Owner

Wastewater Treatment System Information


Install Date: 08/13/2003
Contractor: States Farm Construction
Last Pumped: n/a
System Type: Absorption Bed
Tank Size: 1000 gallons
Pump/dose Tank Present: No
Enhanced Treatment Unit Present: No
Design Flow: 220 gallons per day
No. of Bedrooms: 2

Result of Evaluation: Not Applicable

Notes: The system installed at this address does not meet current NYS Department of Health new construction standards for a one bedroom or greater size home. Prior to re-establishing a dwelling unit on this lot a construction permit must be received from this Agency. As discussed with the owner, a proposed two bedroom dwelling (discharging no greater than 220 gpd) could be approved to utilize the existing system with the installation of an aerobic bacterial generator/microbic inoculator into the existing septic tank. Any proposal of greater than two bedrooms or greater anticipated discharges would at a minimum require a private engineer design for a new system and NYS DOH specific waiver approval. Additional Town of Catharine building and zoning requirements may apply.

Water Supply Information

Supply Type: drilled well Depth: 60 ft* Casing: unknown
Date Sampled: n/a Parameters Tested: Results:
Notes: none


Tim Hicks, Watershed Inspector

Report Generated: 7/28/2010

For all reports: A satisfactory determination above in no way implies the continued satisfactory use of any component piece(s) of the aforementioned wastewater treatment system. It merely indicates that at the time of evaluation, the system appeared to be achieving minimum local standards. Any increase in wastewater generation may cause system failure. This report shall act as the Certificate of Compliance pursuant to the Schuyler County Watershed Protection Law.

* denotes information supplied by others, therefore unable to verify.

UTILITY ELECTRIC SERVICE AVAILABILITY/SURCHARGE DISCLOSURE

Subject Property Address

2657 Cooley Camp Road

Circle what applies

The above subject property does / does not have
utility electric service available to it.

~~This property is subject to an electric and / or gas
utility surcharge.~~

~~The type of surcharge is _____~~

~~The purpose of the surcharge is _____~~

~~The amount of the surcharge is \$ _____~~

~~The surcharge is payable: Monthly / Yearly / other basis _____~~

Buyer

Date

Seller

Date

Ray S. Brown 08-11-10
Dwight N. Knorr

Buyer

Date

Seller

Date

08-11-10



*This disclosure must be given to prospective purchasers or their agent prior to acceptance of a purchase offer.
This disclosure is pursuant to Chapter 216 of the Laws of 1992. Effective 1/2/1994.*

