



**Town of Harwich  
Board of Health**

732 Main Street Harwich, MA 02645  
508-430-7509 – Fax 508-430-7531  
E-mail: health@town.harwich.ma.us

Office Use Only	
Filing Fee Paid/Amount:	_____
Check #/Cash:	_____
Date App Received:	_____
Meeting Date:	_____
Date Approved:	_____
Date Denied:	_____
Reason for Denial:	_____
	_____
	_____

**Application for Board of Health Variances**

Date: 12/28/23

Property Address: 4 Salt River Lane West Harwich MA

Map: 4 Parcel: A1-B2

Book: \_\_\_\_\_ Page: \_\_\_\_\_ Land Court No: \_\_\_\_\_

Name of Applicant: Sand Dollar Customs LLC

Applicant Mailing Address: 259 Great Western Rd. Unit B

South Dennis MA 02660

City State Zip Code

Applicant Telephone Number: 508-694-5618

Applicant E-Mail Address: Randi@sanddollarcustoms.com

Owner(s) of Record: Stephen Bonica

Owner(s) Mailing Address: 4 Salt River Lane West

West Harwich MA

City State Zip Code

Design Engineer/Sanitarian: N/A

Firm/Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

City State Zip Code

Telephone Number: \_\_\_\_\_

Design Engineer/Sanitarian E-Mail Address: \_\_\_\_\_

**Please Choose Application Type:**

Voluntary Upgrade: \_\_\_\_ Addition/Alteration:  Failed System: \_\_\_\_ EIR: \_\_\_\_  
 Other: \_\_\_\_\_

Conservation Commission Approval Required: No: \_\_\_\_ Yes: \_\_\_\_ Date of CC Hearing: \_\_\_\_\_

**List All Variances from State & Local Codes**

Title 5, Section #	Description of Variance(s):
	Request for reconsideration of Variance Approval Condition
	imposed in 1993 to allow for finishing of basement
Harwich Reg. #	Description of Variance(s):

In addition to this form, 8 packets of the following must be submitted by 4:00 p.m. on the filing deadline date:

- Letter to Board of Health
- Letter to abutters (bring certified mail receipts to the meeting)
- Copy of certified abutter list
- Existing variance letter (if applicable)
- Floor plans (all floors/existing & proposed)
- Site plan
- Filing Fee \$125.00 (Variance)/\$300.00 (EIR)

TOWN OF HARWICH, MA  
 BOARD OF ASSESSORS  
 732 Main Street, Harwich, MA 02645

Town of HARWICH Abutters Within 50 feet of Parcel 4/A1-B2/0



Key	Parcel ID	Owner	Location	Mailing Street	Mailing City	ST	ZipCd/Country
1212	11-P3-A-0-R	MEINCKE ASHMORE VICTORIA TR SAO FAMILY TRUST	141 RIVERSIDE DR	139 RIVERSIDE DR	W HARWICH	MA	02671
289	4-A1-B1-0-R	WEINTRAUB SCOTT & WEINTRAUB BETSEY	133 RIVERSIDE DR	25 MARSHAL RD	WELLESLEY	MA	02482
301	4-A1-B2-0-R	BONICA STEPHEN TRS ET AL BONICA LINDA TRS	4 SALT RIVER LN	2025 WASHINGTON ST	CANTON	MA	02021
337	4-D1-10-0-R	ESTON SCOTT E & ESTON PATRICIA J	8 SHOAL HOPE DR	PO BOX 297	W HARWICH	MA	02671
7760	4-A1-B3-0-R	RUSSO MARK X TRS ET AL RUSSO ELIZABETH F TRS	5 SALT RIVER LN	8 BUGLI LN	WAKEFIELD	MA	01880

11-P3-A-0-R

MEINCKE ASHMORE VICTORIA TR  
SAO FAMILY TRUST  
139 RIVERSIDE DR  
W HARWICH, MA 02671

WEINTRAUB SCOTT &  
WEINTRAUB BETSEY  
25 MARSHAL RD  
WELLESLEY, MA 02482

4-A1-B1-0-R

BONICA STEPHEN TRS ET AL  
BONICA LINDA TRS  
2025 WASHINGTON ST  
CANTON, MA 02021

4-A1-B2-0-R

4-D1-10-0-R

ESTON SCOTT E &  
ESTON PATRICIA J  
PO BOX 297  
W HARWICH, MA 02671

RUSSO MARK X TRS ET AL  
RUSSO ELIZABETH F TRS  
8 BUGLI LN  
WAKEFIELD, MA 01880

4-A1-B3-0-R



12/28/23

Board of Health  
723 Main St.  
Harwich MA

Re: 4 Salt River Lane - Reconsideration of the variance approval condition imposed in 1993 to allow for an expansion of the floor plan and finish the basement

To Whom it may concern,

On behalf of property owner, Stephen Bonica, of the above-mentioned property, Sand Dollar Customs would like to request that the Board of Health reconsiders the variance approval condition imposed in 1993 to allow for the expansion of the floor plan to create a finished basement.

Best,  
Stephen Bobola  
Sand Dollar Customs  
259 Great Western Rd. Unit B  
South Dennis MA



**Public Hearing Notice**

Date: \_\_\_\_\_

Abutter's Name: \_\_\_\_\_

Abutter's Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

**CERTIFIED MAIL**

**RETURN RECEIPT REQUESTED**

Re: 4 Salt River Lane West Harwich AM

No. Street

Property Owner: Stephen Bonica

Dear Abutter:

A public hearing has been scheduled for the Harwich Board of Health to take action on an application for variances from the regulations of the Harwich Board of Health and/or Title 5 for Subsurface Disposal of Sewage. The following variances are requested:

**List All Variances from State & Local Codes**

Title 5, Section #	Description of Variance(s):

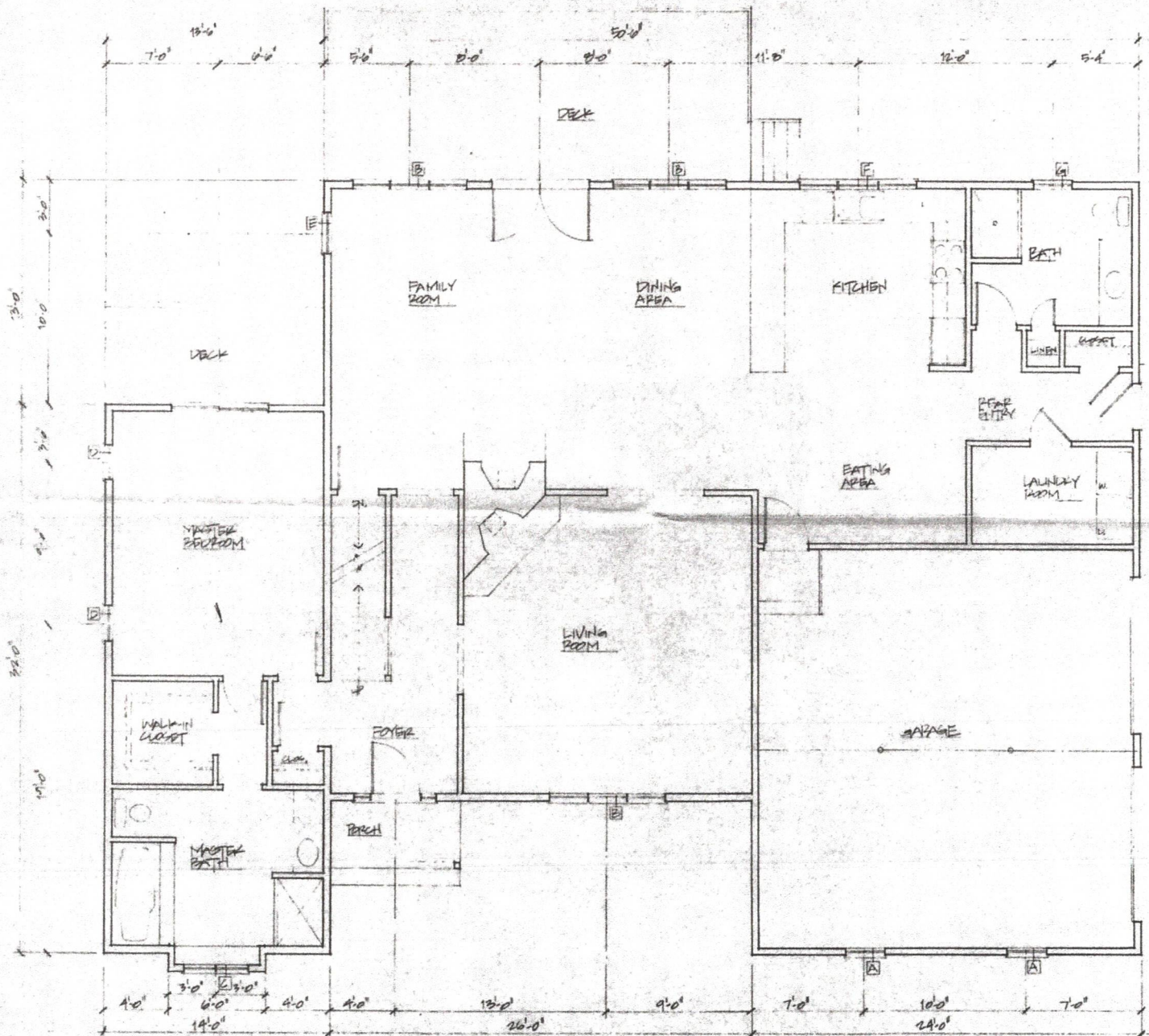
Harwich Reg. #	Description of Variance(s):

Said hearing will be held in the \_\_\_\_\_ Room of the Harwich Town Offices, 732 Main Street, Harwich, on \_\_\_\_\_ at 6:30 p.m.

The application and plans are available for review at the Harwich Health Department, Harwich Town Hall, 732 Main Street, Harwich, MA; Monday through Friday (excluding holidays) from 8:30 a.m. to 4:00 p.m.

Sincerely,

CC: Harwich Health Department



**FIRST FLOOR PLAN**  
1/4"=1'-0"

DESIGNED BY: THOMAS A. MORSE DESIGN CO.  
52 WAGON WHEEL  
BREWSTER MA

ST #2  
W. HAZENET MA

NEW RESIDENCE FOR  
PAT & CARMEL McFARLAND  
SALT RIVER LANE

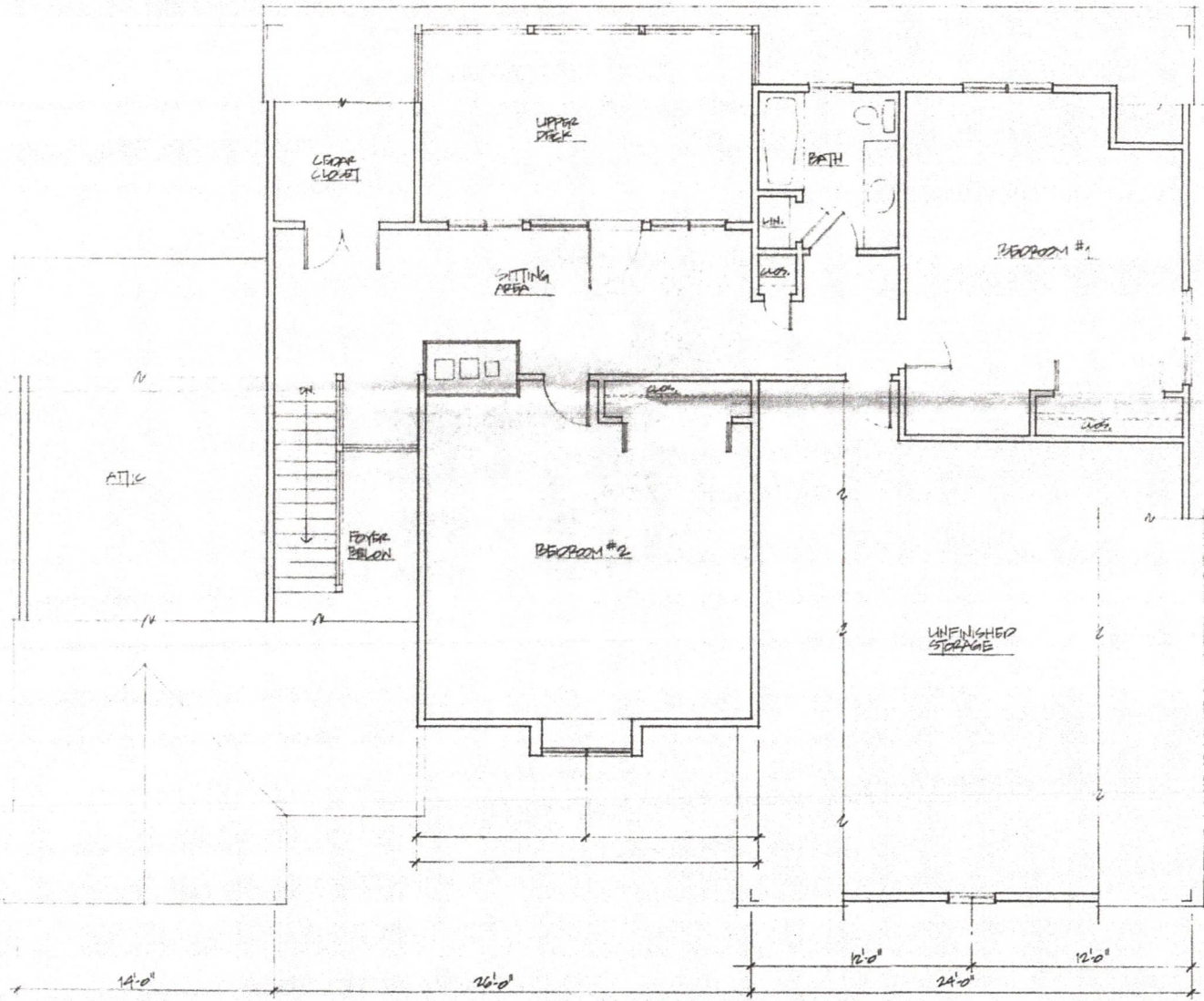
DATE TITLE  
FIRST FLOOR PLAN

SCALE:  
1/4"=1'-0"

DATE: PROJECT NO.  
92-19

DATE: DRAWING NO.  
A-1





**SECOND FLOOR PLAN**  
1/4" = 1'-0"

DESIGNED BY: THOMAS A. MOORE DESIGN CO.  
 92 MADON WHEEL LANE  
 BERNISTON, MA.

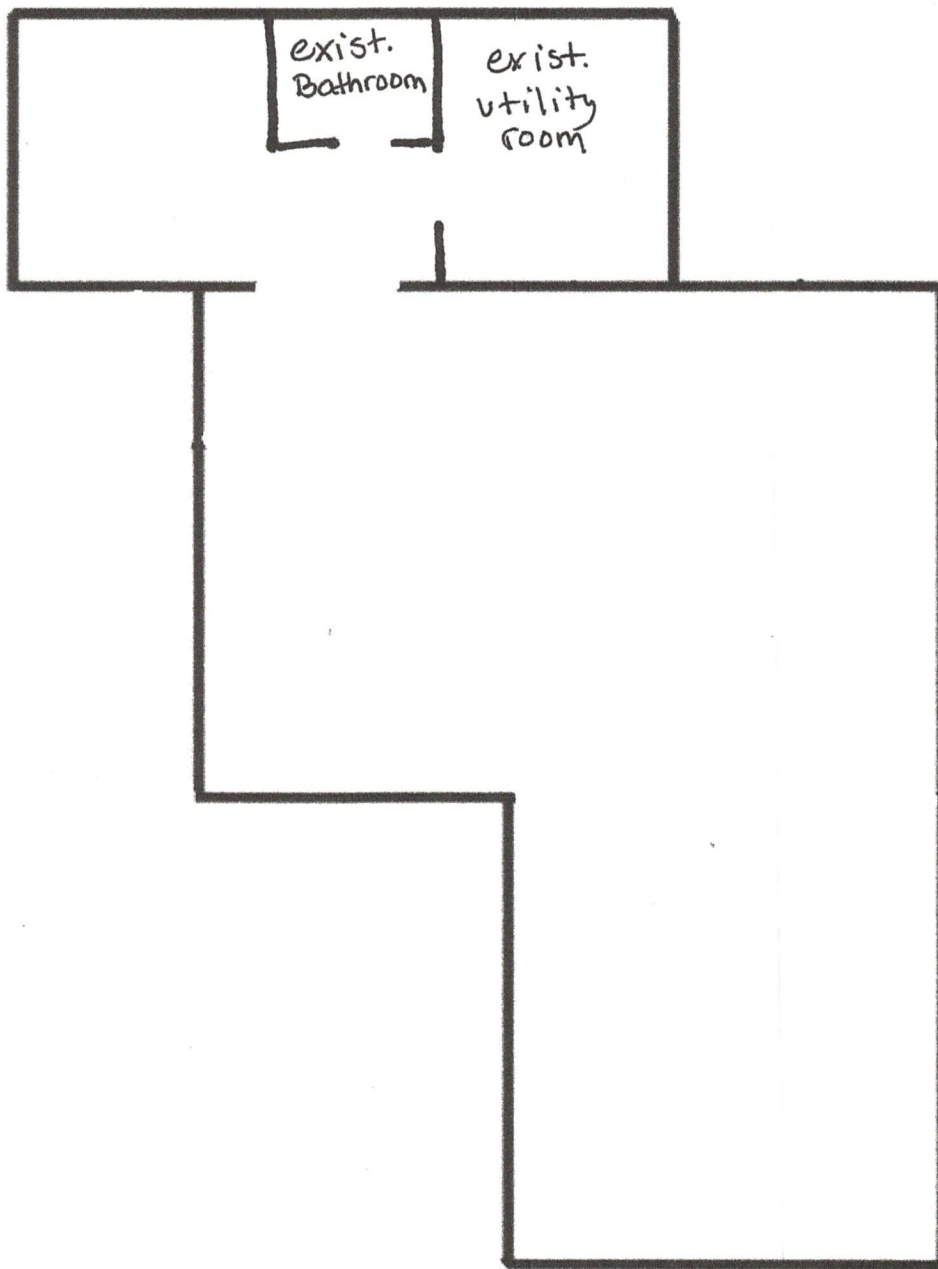
FOR: NEN RESIDENCE FOR  
 MRS. + CAROL V. DEAMOTT  
 SALT RIVER AVE  
 W. HARTWICH, MA.

DATE: 10-1-82

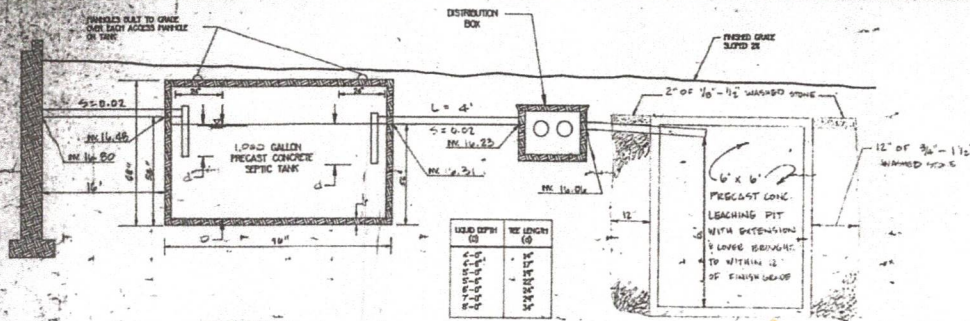
PROJECT NO: 92-14

DRG. NO: A2

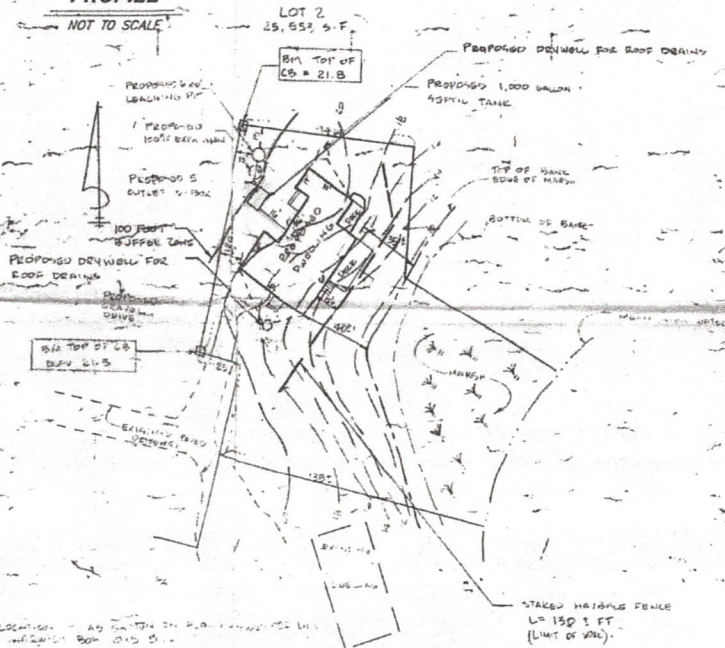




Existing + Proposed Basement  
4 Salt River Lane W. Harwich  
Stephen Bonica



**PROFILE**  
NOT TO SCALE



**NOTES:**

1. THE LEACHING PIT LOCATION SHALL BE AS SHOWN ON PLAN AND APPROVED BY THE BOARD OF HEALTH.
2. THE LEACHING PIT SHALL BE 100 FEET FROM THE EDGE OF MARCH. THE EXPANSION AREA SHALL BE 100 FEET FROM THE MARCH.
3. A ROW OF STAKED HAIRpins SHALL BE PLACED PER TO THE COMMENCEMENT OF ANY WORK. THE LINE SHALL BE PLACED BETWEEN THE TANK AREA AND THE MARCH.
4. ALL DISTURBED AREA SHALL BE RESTORED TO ORIGINAL CONDITION.
5. ALL ROOF RUN-OFF SHALL BE DESIGNED TO BE COLLECTED BY GUTTERS & DOWNSPOUTS & DISCHARGED ON THE PLAN.

SCANNED

**LOCUS MAP**

**SCHEDULE OF ELEVATIONS**

INV. @ FOUNDATION	10.45
INV. @ SEPTIC TANK INLET	10.40
INV. @ SEPTIC TANK OUTLET	10.35
INV. @ DISTRIBUTION BOX INLET	10.25
INV. @ DISTRIBUTION BOX OUTLET	10.20
INV. @ LEACHING PIT INLET	10.00
INV. @ LEACHING PIT BOTTOM	10.00

**SOIL TEST DATA:**



**PERCOLATION TEST DATA**

PERC. NO.	DATE	DEPTH	STABILIZED RATE	WITNESSED BY

**DESIGN INFORMATION**

DESIGN FLOW	0.00	G.P.D.
DESIGN PERCOLATION RATE		M.P.I.
DESIGN LOAD FACTORS		CAL./SF
SIDEWALL		CAL./SF
BOTTOM		CAL./SF
LEACHING AREA REQUIRED		SF.
SIDEWALL AREA		SF.
BOTTOM AREA		SF.
TOTAL		SF.
SYSTEM CAPACITY		G.P.D.
SEPTIC TANK CAPACITY REQUIRED		G.P.D.
SEPTIC TANK CAPACITY PROVIDED		G.P.D.

DESIGN	DATE

**NOTES:**

1. EXISTING DATA TO BE REVIEWED.
2. ALL CONSTRUCTION TO CONFORM TO THE REQUIREMENTS OF 242 R.S. 2 OF THE MASSACHUSETTS STATE GOVERNMENT CODE AND THE BOARD OF HEALTH REGULATIONS OF THE STATE OF MASSACHUSETTS.
3. FRESH CONCRETE SHALL BE DONE IN ACCORDANCE WITH THE RULES AS SET FORTH ON 242 R.S. 2.
4. HEAVY CONSTRUCTION MATERIAL SHALL NOT BE ALLOWED TO REMAIN OVER THE LEACHING PIT.
5. ALL WOOD STUDS SHALL BE CORDED VALUES.
6. ALL ROOF RUN-OFF SHALL BE COLLECTED BY GUTTERS & DOWNSPOUTS & DISCHARGED ON THE PLAN.
7. THE SEPTIC TANK SHALL BE INSPECTED ANNUALLY AND SHALL BE RATED WITH THE DEPTH OF SOIL EXPOSED TO THE LEACHING PIT OF THE TANK.
8. LIFE OF SEPTIC TANK - ALL SEPTIC TANKS SHALL BE DESIGNED TO LAST FOR A MINIMUM OF 10 YEARS. THE PERCENT OF SOIL AREA TO BE COVERED BY THE SEPTIC TANK SHALL BE AS SHOWN ON THE PLAN.
9. ALL PERCOLATION TESTS SHALL BE CONDUCTED IN ACCORDANCE WITH THE RULES AS SET FORTH ON 242 R.S. 2. THE TESTS SHALL BE CONDUCTED BY A REGISTERED PROFESSIONAL ENGINEER OR A REGISTERED PROFESSIONAL LAND SURVEYOR. THE TESTS SHALL BE CONDUCTED AT THE LOCATION OF THE SEPTIC TANK AND THE LOCATION OF THE TEST POINTS SHALL BE APPROVED BY THE BOARD OF HEALTH.
10. ANY ALTERATION TO THE APPROVED DESIGN SHALL BE APPROVED BY THE BOARD OF HEALTH.
11. THE SYSTEM SHALL BE INSPECTED BEFORE COMMENCEMENT OF A RECONSTRUCTION OF THE SEPTIC TANK AND THE AGENT FOR THE MASSACHUSETTS BOARD OF HEALTH SHALL BE ADVISED OF ALL CHANGES TO THE DESIGN OF THE SEPTIC TANK. THE SEPTIC TANK SHALL BE RECONSTRUCTED WITH THE SEPTIC TANK PLAN AND THE SEPTIC TANK SHALL BE RECONSTRUCTED WITH THE SEPTIC TANK PLAN AND THE SEPTIC TANK SHALL BE RECONSTRUCTED WITH THE SEPTIC TANK PLAN.
12. NO RECONSTRUCTION OR ALTERATION SHALL BE PERMITTED WITHOUT THE APPROVAL OF THE BOARD OF HEALTH.
13. THE FIRST TWO FEET OF READY PILES TO THE SEPTIC TANK SHALL BE AS SHOWN ON THE PLAN.
14. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING THE LOCATION AND DEPTH OF ALL EXISTING UTILITY LINES AND FOR THE PROTECTION OF THE SAME. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING THE LOCATION AND DEPTH OF ALL EXISTING UTILITY LINES AND FOR THE PROTECTION OF THE SAME. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING THE LOCATION AND DEPTH OF ALL EXISTING UTILITY LINES AND FOR THE PROTECTION OF THE SAME.
15. THE OWNER SHALL BE RESPONSIBLE FOR OBTAINING THE LOCATION AND DEPTH OF ALL EXISTING UTILITY LINES AND FOR THE PROTECTION OF THE SAME. THE OWNER SHALL BE RESPONSIBLE FOR OBTAINING THE LOCATION AND DEPTH OF ALL EXISTING UTILITY LINES AND FOR THE PROTECTION OF THE SAME.
16. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE RULES AS SET FORTH ON 242 R.S. 2.
17. ALL PERCOLATION TESTS SHALL BE CONDUCTED IN ACCORDANCE WITH THE RULES AS SET FORTH ON 242 R.S. 2.
18. ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE RULES AS SET FORTH ON 242 R.S. 2.
19. THE PERCOLATION TEST DATA SHALL BE AS SHOWN ON THE PLAN.
20. THE PERCOLATION TEST DATA SHALL BE AS SHOWN ON THE PLAN.

**LEGEND:**

- FINISH GROUND
- EXISTING GROUND
- PROPOSED SEPTIC GRADE
- EXISTING SPOT GRADE
- EDGE OF RETIARD
- PERCOLATION TEST
- TEST HOLE
- WATER
- ELECTRIC
- GAS
- LIMIT OF EXCAVATION

**SUBSURFACE SEWAGE DISPOSAL SYSTEM**

4 SALT TOWER LANE  
HAZELHURST, MASS.  
PREPARED FOR:  
PAT & CAROL MCDEEMOTT  
WOODRIDGE 211 WATLAND JUNGLE DRIVE  
OCTOBER 9, 1992

GRAPHIC SCALE 1 INCH = 20 FEET

VTH NORTHEAST, INC.  
186 LITTLETON ROAD  
WESTFORD, MA 01086

*Bob Variando*  
TOWN OF WINDHAM  
10/10/92  
Stamp: *Stamp*  
FOR THE BOARD OF HEALTH





Town of Harwich  
Health Department  
732 Main Street, Harwich MA 02645  
Telephone: 508-430-7509 Fax: 508-430-7531

RECEIVED  
SEP 26 2019  
BY: \_\_\_\_\_

**TITLE 5 STATE ENVIRONMENTAL CODE**

**310 CMR 15.000 – Deed Restriction  
Property Limited to Three Bedrooms**

**CERTIFICATE OF TITLE: 189192**  
**PROPERTY ADDRESS: 4 SALT RIVER LANE, HARWICH, MA**  
**HARWICH ASSESSORS: MAP 4 PARCEL A1-B2**  
**OWNER OF RECORD: PATRICK AND CARMEL MCDERMOTT**

On April 30, 1993, the Health Department approved a disposal system construction permit to install a Title 5 septic system. The three bedroom design plan by VTN Northeast, Inc is dated October 9, 1992. The submitted floor plan included an unfinished basement, first floor containing a master suite, living room, combination family/dining room, kitchen, laundry room and bathroom. The second floor included two bedrooms a full bath and unfinished storage.

The second floor unfinished storage shall remain unfinished and not to be used as habitable space. The basement now contains a bathroom and storage room open to the hallway.

**FINDINGS**

The Board of Health approved variances to Title 5 to install the 3 bedroom septic system on February 24, 1993. In approving the variances, a condition of "no expansion beyond the current floor plan" was imposed.

Subject property is therefore restricted in perpetuity to the existing three bedroom dwelling as outlined on the plans submitted to the Building Department on 9/19/19.

For the Harwich Board of Health,

Meggan Eldredge  
Meggan Eldredge, R.S., C.H.O.  
Health Director

PATRICK J. MCDERMOTT  
Signature(s) of Owner and Legal Address

Carmel H. McDermott  
CARMEL H. MCDERMOTT

9-24-19  
Date

9/26/19  
Date



CAROL B BRADLEY  
Notary Public  
Commonwealth of Massachusetts  
My Commission Expires May 28, 2021

SCANNED



LOT-2 PLAN 11783-C



TRUSTEE CERTIFICATE

I, We PATRICK J. McDERMOTT + CAROL H. McDERMOTT  
trustee(s) of the PCA McDERMOTT NOMINEE TRUST  
under a Declaration of Trust dated JULY 23, 2009  
and registered as Document No. 1120647

hereby certify that:

1. Said trust is in full force and effect.
2. All the beneficiaries are of full age.
3. All the beneficiaries are competent.
4. All the beneficiaries of said trust have consented to ~~the transfer of the property to~~

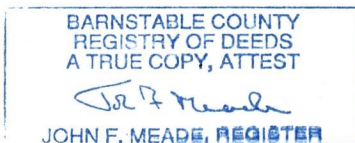
RESTRICTION DOCUMENT DATED 9/24/19

~~for nominal consideration~~

Signed under the pain and penalties of perjury this 26 day of  
SEPTEMBER 2019

Patrick J. McDermott  
Trustee

PATRICK J. McDERMOTT



BARNSTABLE REGISTRY OF DEEDS  
John F. Meade, Register