

Nashoba Associated Boards of Health

30 Central Avenue Ayer, MA 01432

(978) 772-3335 (800) 427-9762

- \$150.00-Application & Plan Review (note: fee depends on system size)
- \$175.00-Application & Plan Review (if I/A technology use)
(note: fee depends on system size)
- \$250.00-Application & Plan Review/Perc Rate Exceeds 30 min/inch
(unless \$100 retesting fee previously paid)
- \$200.00-Permit Issue & System Inspection (note: size dependent)
- \$250.00-I/A Permit Issue & System Inspection (note: size dependent)
- \$75.00-Permit for Septic Tank, Sewer Line or D-box replacement

Application for a Sewage Disposal Works Construction Permit

Town _____ Assessor's Map# _____ Parcel # _____

Street Location _____ Lot# _____

Directions to Property _____

New	Existing
<input type="checkbox"/>	<input type="checkbox"/> Dwelling
<input type="checkbox"/>	<input type="checkbox"/> Business
<input type="checkbox"/>	<input type="checkbox"/> Industrial
<input type="checkbox"/>	<input type="checkbox"/> Other
<input type="checkbox"/>	<input type="checkbox"/> Restaurant

Number of Bedrooms _____

Number of Employees _____ Square Feet of Floor Space _____

Describe (Business) _____ Food Service yes no

Number of Seats _____ Food Service _____

Lot Size _____ Water Supply Town Well on Property Community Water Supply

Name of Engineer _____ Telephone _____

Please Submit 2 Copies of the Engineered Plan for This Lot

Name of Owner _____ Telephone _____

Address _____ Town _____

***Applicant's Name (must be owner or prospective owner)** _____

Address _____ Town _____ Telephone _____

Daytime Telephone Number _____ Business Residence

Email Address: _____ (for use by this office/BOH offices for correspondence)

THE INFORMATION GIVEN ABOVE IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT

Date _____ Signature of Applicant _____

Rev. 8/29/09

***NAME TO APPEAR ON PERMIT**