



Town of Sturbridge — Board of Health



Public Health
Prevent. Promote. Protect.

Application for a Sewage Disposal Works Construction Permit

SEPTIC SYSTEM PLAN REVIEW: \$220

\$_____ -Application & Plan Review

PERMIT AND ALL REQUIRED INSPECTIONS: \$275
\$_____

SINGLE COMPONENT REPLACEMENT: \$75

\$_____ -Permit for Septic Tank, Sewer Line, Distribution Box, or Pump Repair or Replacement

*Please note any electrical work needs to be completed by a licensed electrician.

OTHER: See Fee Schedule

\$_____ -Tight Tank, Commercial, I/A System, Recirculating Sand Filter, etc.

TOTAL: _____

Assessor's Map Number _____ Parcel Number _____

Street Location _____ Lot# _____

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

Number of Bedrooms: _____

Garbage Disposal: ____yes ____no

Number of Employees: _____

Square Feet of Floor Space: _____

Describe (Business): _____ Food Service? ____yes ____no

Number of Seats: _____

Lot Size: _____

Water Supply: ____ private well ____town ____ community water supply

Name of Engineer: _____ Telephone: _____

Name of Owner: _____ Telephone: _____

Address: _____

Installer: _____ Permitted in Sturbridge? ____yes ____no

Address _____ Telephone _____

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

Date: _____ Signature of Applicant: _____