Holliston Board of Health

Application for Septic System or Upgrade

Application and plans shall not be considered submitted or stamped õReceivedö until this form is filled out completely; signed by the owner; the soil evaluation forms and 4 copies of the plan are submitted; and all fees paid.

Pump System \$	Date of Submittal Plan Revision \$	Permit #(to be completed by Office)
Pump System \$		
Variance/Local Unavade ©		Previously Approved Plan \$
variance/Local Opgrade \$	Bldg. Relocation \$_	Owner Transfer \$
If Innovative/Alternate System	, specify type:	
Plan Dated:	Revision Dates:	
Is system designed for garb :	age grinder? (circle one) Yes	No
	thin is 100' of wetlands or wonservation Commission.	ithin 200' of a perennial stream?
	a permit to locate and construct e plans annexed here at:	() or upgrade () an individual sewage disposa Assessorøs
Address of Property	Lo Stroot Namo Lot N	Assessorys Map # Block # Lot #
		Email
Address		Phone
Applicant: Name		Email
Address		Phone
Engineer: Name		Email
Address		Phone
Type of Facility: Residental	() Commercial () Other	er (specify):
If A Dwelling: Number of Be	edrooms Total	Number of Rooms
Design Flow (if not a dwelling	g):(GPD
Reason for upgrade or revisi	on	
subject matter of this application. Holliston and the Commonweat Conservation Commission, a bany Planning Board approvals	on, secure any and all other permits alth of Massachusetts, including who wilding permit, a plumbing or gas poas well as approval from the Board	ing construction or use of the system which is the which may be required by the laws of the Town of crever applicable, an Order of Conditions from the ermit, any variances or special permits from the ZBA, of Health upon completion. It is also acknowledged Town of Holliston must install the system.

Signature of Owner: _