SAS CONSTRUCTION PERMIT APPLICATION/CERTIFICATE OF COMPLIANCE

Property Location and Owner's Name (if not applicant)	Applicant's Name
Assessors Map and Parcel ID	Address
Builder's Lot Number AND Address (REQUIRED)	Telephone Number/Email

Engineer/Designer's Name	Telephone Number/Email
Address	PE Number

FEE – See FEE SCHEDULE

1. Fill out **ALL** sections below. Include any I/A Technology and Dig Safe Number if applicable.
2. Indicate what kind of permit is being applied for by checking the appropriate box.
3. Installer must sign and date application. Also, make note of the requirement that installer must provide an "As-Built" plan.
4. Submit application and payment to: Board of Health, 221 Main Street, Boylston MA 01505. Fee is non-refundable.

☐ Residential   ☐ Commercial

Property Location and Owner's Name:

Assessor's Map and Parcel ID:

Builder's Lot Number AND Address:

I/A Certification (if Applicable):

Dig Safe # (if Applicable):

IMPORTANT NOTES TO INSTALLER/ENGINEER

1. If there are any deviations between the site conditions and the approved plan, it is your responsibility to notify both the Sanitation Agent and the design engineer for approval to continue construction.

2. Inspection requires a minimum of 48-hour notice to the Sanitation Agent and certifying engineer.

3. **For a Certificate of Compliance,** you must provide the Board of Health with (1) a copy of an Installer's "As-Built" plan on a sheet of paper measuring at least 8½" x 11" bearing your letterhead, address, telephone number, and license number as well as the property location (street name & number) and the applicant's name. Measurements must include ties from 2 corners of the foundation to center of septic tank, center of d-box and end of trenches or bed; (2) Engineer's Stamped "As-Built" Plan (minimum of two copies); and (3) Certificate of Compliance (on DEP Approved Form 3) signed by Engineer and Installer.

Signature of Applicant/Agent Applying _____ Date _____

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