

Town of Wendell Board of Health

9 Morse Village Road Wendell, MA 01379 *Phone:* (978) 544-3395, ext. 106 *Email:* BOH@wendellmass.us

SOIL/PERC TEST APPLICATION

FOR FLOWS OF UNDER 15,000 Gallon Per Day

SINGLE FAMILY HOME **\$125.00**, up to 2 hours (\$20 for each additional hour) COMMERCIAL/MULTIPLE-UNIT BUILDING **\$125.00**, up to 2 hours (\$25 for each additional hour)

Directions for submitting perc/soil test application:

A. The Board of Health STRONGLY SUGGESTS that PRIOR to performing perc and soil testing, all applicants contact the *Wendell Building Inspector* for a determination of a project's compliance with respect to building laws.
B. Soil test dates can be set with one of the Health Agents only by the person performing the soil test.

1. Owner of property:	
2. Applicant:	
Address:	
Phone:	(Work/Cell)
3. Location of the land to be tested:	Street Address (if assigned)
4. Parcel ID: Map #	Lot # Size of lot/parcel:
5. Give brief directions to the locati	ion of the property:
7. Proposed construction will be:	a. Residentialc. Industrialb. Commerciald. Other
8. Number of Bedrooms:	Please Circle: Proposed Actual
9. Water supply: a. Private well	b. Town water <i>Please circle:</i> Proposed Actual
10. Has this lot been previously teste	ed? Yes No, If yes, attach plan, date and results of testing.
Engineer/Soil Evaluator: Print name	Phone:
Signature	Cell Phone:
Firm Name:	Date