## Needham Health Department

1471 Highland Avenue, Needham, MA 02492 e-mail: BOH@town.needham.ma.us

781-455-7523 (tel) 781-455-0892 (fax) web: www.town.needham.ma.us/BOH

## **NEW FEE: \$60.00**

## Application for an Addition to a House on a Septic System

(please print)

1. Address:	[\$60.00 fee paid			]
Name of Owner:	Phone			
Owner's Address	(if different)			
2. Builder's Name			Phone	
3. Current Septic	System (check all that	t apply):		
	Cesspool	Septic Tank size_	Leach Pit	
	Leach Line	Leach Trench	Unknown	
	Ever Inspected?	☐Yes ☐ No	Date Inspected?	
	Inspected by		Phone	
	(Total number of room	s excludes bathrooms, hallw	Number of Rooms vays and unheated storage rooms.)	
7. Signature of O	wner or Contractor _		Date	
		=	Ith Department at 781-455-7523.	
	nent use only: Date con			• •
\$60.00 check mad	le out to Town of Needhar	m		
$\square$ Copy of proposed	building plans			
Opy of plot plan	clearly showing location of	system	Foot: Y N Sewer: Y N	
Change in	footprint? 310 CMR 15.30 number of bedrooms 310 v for current system		→ bedrooms	
T: Forms → Application A	Addition House on Septic		☐ with grinder?	