



TOWN OF NORTHBRIDGE
BOARD OF HEALTH
Aldrich School Town Hall Annex - 14 Hill Street
Whitinsville, MA 01588
Phone# (508) 234-3272 Fax# (508) 234-0821

Northbridge Permit # _____
(Issued by the Northbridge BOH)

APPLICATION FOR PERCOLATION & DEEPHOLE SOILS EVALUATION - COMMERCIAL

FEE: *Please contact BOH office for Fee*

DATE: _____

Check made payable to the Town of Northbridge
APPLICATION FEES ARE NON-REFUNDABLE

MAP: _____ **PARCEL:** _____ (Obtain from Assessors Office)

TESTING LOCATION: _____
(Include Lot Number or Street number – if unknown put closest utility pole number to test site)

Type of Building Proposed: Commercial Facility (please explain) _____

Name of Applicant: _____ Phone #: _____

Address of Applicant: _____

Name & Address of Owner: _____

Name of Engineer/Soils Evaluator: _____ Phone #: _____

Soils Evaluator License #: SE _____ Expiration Date: _____

Address of Engineer/Soils Evaluator: _____

Proposed Water Supply to Lot: () Municipal () Well

Signature of Applicant: _____

By my signature I certify that I have the authority or have gained the authority to access the above-mentioned property for the purpose of Title 5 soils testing.

- Appointments are scheduled by having the Engineer/Soils Evaluator listed above contact the Board of Health Engineer, **SD Septic Inspections, LLC - Steve Donatelli**, via email at sdsoiltesting@gmail.com or by calling 774-545-0909 (**email preferred**)
- Your email **MUST** include the following:
 1. Permit Number (issued by BOH)
 2. Location of Testing (Street number and/or utility pole number)
 3. Return contact information including name, engineering firm and phone number.
- This application will be valid for a period of one (1) year from the date listed above.
- A completed soils test will be valid for a period of two (2) years.
- **Percolation/soils evaluation results are due in this office no later than 60 days from date of testing. All results must be submitted on DEP approved soils data forms.**