



TOWN OF NORTHBRIDGE
BOARD OF HEALTH

7 Main Street
Whitinsville, MA 01588
Phone (508) 234-3272 Fax# (508) 234-0821

PERMIT # _____
(To be issued by BOH Office)

APPLICATION FOR PERCOLATION & DEEPHOLE SOILS EVALUATION

FEE: \$375.00 New Construction
\$275.00 Repair

DATE: _____

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

MAP: _____ **PARCEL:** _____ *(Obtain from Assessor's Office)*

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

Type of Building Proposed: Residential () Commercial () Other ()

Name of Applicant: _____ Phone #: _____

Address of Applicant: _____

Name & Address of Owner: _____

Name of Soils Evaluator: _____ Phone #: _____

Soils Evaluator License #: SE _____ Expiration Date: _____

Address of Soils Evaluator: _____

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

Previous Testing of Lot: Date: _____ Engineer: _____

Test Results: Percolation Rate _____ MPI Groundwater Level: _____

Signature of Applicant: _____

By my signature above, 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 Soils Evaluator listed above contact the Board of Health Agent, James Malley, via email at malleyeng@charter.net or by calling (508) 832-0118 (email preferred) **You must include the Permit # issued by this office with your request.**
- 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. Extensions are required.
- **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.**