

**BOARD OF HEALTH
TOWN OF TOPSFIELD**

APPLICATION FOR PERCOLATION AND DEEP HOLE TESTING

Address _____

Map and Lot # _____ (Include a copy of Assessors' map or locus)

Water Supply _____ Well _____ Town Water _____

Applicant Name _____

Address _____

Telephone _____ e-mail _____

Property Owner _____

Address _____

Telephone _____ e-mail _____

Engineering Company _____

Address _____

Telephone _____ e-mail _____

Soil Evaluator _____

Date of Soil Evaluator Certification in Massachusetts _____

Wetland Delineator (if wetlands present)*

Wetlands must be flagged and ConCom sign off obtained before testing can occur.

*Wetlands Conservation Commission approval _____

Lot has been tested previously _____ Date _____

Lot has not been tested _____

It is the responsibility of the applicant to hire an engineer/soil evaluator to conduct the soil testing and a back hoe operator. Boundaries of the lot and wetlands must be flagged before testing is conducted. Dig Safe number must be provided if requested.

New Construction: Fee for soil testing is \$200/lot (4 hours max)

Repair to existing septic system: Fee for soil testing is \$75/lot

Fee for soil testing over 4 hours/lot is \$50/hour

Check payable to the Town of Topsfield in the correct amount must accompany application.

Excess time will be billed at \$50 per hour for Health Agent's time.

No testing will be scheduled until the application form has been completed, received at the Board of Health office and a check, for the correct amount, submitted.

Conservation Commission must sign off on wetland delineation, if applicable, before testing.

Date _____ Applicant signature _____



Board of Health office use

Perc/deep hole testing done _____

Fee paid _____ Date _____

Taxes paid _____

Conservation Commission approval _____