



TOWN OF CHARLTON

37 MAIN STEET
CHARLTON, MA. 01507
508-248-2210

BOARD OF HEALTH

PERMIT # _____

APPLICATION FOR PERCOLATION & DEEPHOLE SOILS EVALUATION

FEES: (2 checks) Residential: \$75.00 & \$200.00
Commercial: \$75.00 & \$300.00

DATE: _____

Checks made payable to the Town of Charlton
APPLICATION FEES ARE NON-REFUNDABLE

MAP: _____ **PARCEL:** _____ (available at assessors 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 Engineer: _____ Phone #: _____

Address of Engineer: _____

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

Previous Testing of Lot: Date: _____ Engineer: _____
Test Results: Percolation Rate _____ MPI Groundwater Level: _____

Signature or Applicant: _____

- Appointments are scheduled by having the Engineer listed above contact the Board of Health Engineer, James Malley, via email at jfmal@charter.net or by calling 508-832-0118 (email preferred)
- Your email **MUST** include the following:
 1. Permit Number
 2. Location of Testing (Street number and/or utility pole number)
 3. Number of lots to be tested
 4. 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.**