



TOWN OF CHARLTON

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

BOARD OF HEALTH

Permit #: _____

Malley Engineering Co. Inc. file #: _____

REQUEST FOR SEPTIC INSPECTION

FEE: Residential: \$ 200.00 / Commercial: \$300.00

Includes Bottom, Component Placement, Final Grading, & Stabilization Inspection)
(Check made payable to the Town of Charlton)

FEE: \$ 75.00 per inspection

Additional Inspection Fee for Inspection of Retaining Wall/Interceptor Trench/Clay Barrier
(Check made payable to the Town of Charlton)

DATE: _____

I HEREBY MAKE REQUEST TO THE CHARLTON BOARD OF HEALTH FOR AN INSPECTION
OF THE INSTALLATION OF A SUBSURFACE SEWAGE DISPOSAL SYSTEM LOCATED AT:

THE CURRENT OWNER OF THIS PROPERTY IS _____

NAME OF INSTALLER _____

Signature of Installer

Inspection Process: The installer shall contact the design engineer and the Board of Health office to request an inspection. The Board of Health Agent will have **48** hours to conduct his inspection and notify the installer of his findings. ALL REQUESTS FOR INSPECTIONS MUST GO THROUGH THE BOARD OF HEALTH OFFICE.

For Office Use Only

Bottom Inspection Date: _____

Component Placement Inspection Date: _____

Final Grading Inspection Date: _____

Stabilization Inspection Date: _____