



Town of Norfolk Board of Health

1 Liberty Lane
Norfolk, MA 02056

Upgrade & New Const:
\$250 (each site
location & site visit
max. 4 hours), plus
\$25 Non-Refund.
Admin. Fee (payable
by separate check)

Received: _____
Permit#: _____

APPLICATION FOR SITE EVALUATION**

Deep Hole[], GW[], and/or Percolation Tests[]
(Check all that apply)

Applicant Name: _____

Applicant Address: _____

Applicant Telephone No: (____) _____ - _____

Engineer and/or Firm to be contacted to arrange test date:

Name: _____ Telephone No: (____) _____ - _____

LOCATION OF TESTING:

Street Address: _____ Lot No: _____

Assessor's Map No: _____ Block No: _____ Lot No: _____

Reason for testing: Upgrade _____ New Construction _____

Attached is a **PLOT PLAN** showing:

1. Plot plan of property drawn to scale (8 1/2 x 11) _____
2. Proposed location of testing _____
3. Wetlands, watercourses, and drains within 150' * _____
4. Distance to nearest intersecting street _____
5. Any wells within 150' * _____

(*Indicate N/A if none)

Signed: _____
(Owner of Property)

Name: _____
(Type or Print)

Address: _____ Zip: _____

Date: _____

Test Date: _____