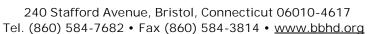




BRISTOL-BURLINGTON HEALTH DISTRICT





Approval is hereby given to (OWNER) of private well serving (Address) (Town) No. (Bedrooms) (Construction Permit No.) The private well water analysis attached as supplied to the Bristol Burlington Health District (BBHD) is approved in accordance with the BBHD Private Well Water Regulations, Section VIII.02.

 $S: Deptshared \verb|\Health| Sanitarians| FORM \#32A-Cert. Compliance private well$

Issuance date