



**FEE: \$ 100.00 per Lot**

## **REQUEST for SOIL TEST OBSERVATION**

In order to make an appointment with a BBHD staff person, the following application must be filled out and submitted with the appropriate fee. It should be noted that all soil testing, deep pit observations and percolation tests on new lots must be conducted by a professional engineer and coordinated with the BBHD staff. Soil Testing for repairs of existing septic systems can be conducted without a professional engineer. Based on the findings from a repair investigation a professional engineer may be required to further evaluate the property. It is the applicant's responsibility to secure the services of the engineer and any necessary equipment, such as a backhoe.

**APPLICANT MUST COMPLY with BBHD SOIL TESTING POLICY/ SITE PREPARATION**

**Applicant (please print):** \_\_\_\_\_

**Location of soil testing** \_\_\_\_\_  
(street address) (town)

**Applicant Phone #:** \_\_\_\_\_

**Applicant Email** \_\_\_\_\_

**Owner of Property:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Owners' Address** \_\_\_\_\_

**# of lots to be tested:** \_\_\_\_\_ **of \$100.00 per lot = \$** \_\_\_\_\_

**Assessors Map No** \_\_\_\_\_ **Block No.** \_\_\_\_\_ **Lot No.** \_\_\_\_\_

**Engineer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Water Supply Public** \_\_\_\_\_ **Well** \_\_\_\_\_ **Is this lot approved by Zoning** \_\_\_\_\_

**As the owner or owner's representative, I certify that the Bristol-Burlington Health District will be held harmless from any potential damages associated with soil testing and that permission is hereby granted to conduct all required tests.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Below For Office Use only**

- **Date Request Received:** \_\_\_\_\_ **Project Assigned to:** \_\_\_\_\_

**Date Soil Testing has been Scheduled for:** \_\_\_\_\_

Updated 11/22/2023 Form # 24A-Soil Testing Im 11/2018C:\Users\LouiseMcglone\Desktop\Form #24-A\_Investigation for Sewage Disposal System.xls