



FOR OFFICE USE ONLY:

Date: _____ Fee: _____ Payment Type: _____ Receipt #: _____ Paid by: _____

REVIEW

**FOR PROPERTIES THAT DO NOT REQUIRE A B100 A APPROVAL
BUT REQUIRE A SIGN OFF FROM ESDHD**

NOTE: A SCALED DIAGRAM OF THE PROPOSED ADDITION OR ACCESSORY STRUCTURE IN RELATION TO EXISTING WELL AND/OR SEPTIC MUST BE SHOWN ON BACK OR ATTACH DETAILED PLOT PLAN.

Date: _____ Owner's Name: _____ Submitted By: _____

Property Address: _____ Telephone No: _____
(Street) (Town) (Submitter's phone number)

TYPE OF APPLICATION: Submitter's Email: _____

_____ Building Addition

_____ Accessory Structure, Attached or Detached Garage, Below or Above Ground Pool etc.

GIVE A BRIEF DESCRIPTION OF PROPOSED ADDITION. (performing winterization; type, size, and number of rooms being added; square footage of house addition; type and size of structures to be added, etc.)

IS PROPERTY ON? SEPTIC _____ SEWER _____
WELL _____ CITY WATER _____

IS the well above grade? Y _____ N _____

SEPARATION DISTANCE _____
(DISTANCE BETWEEN WELL/SEPTIC AND PROJECT)

Residential _____ Non-Residential _____ If non-Res. Describe _____

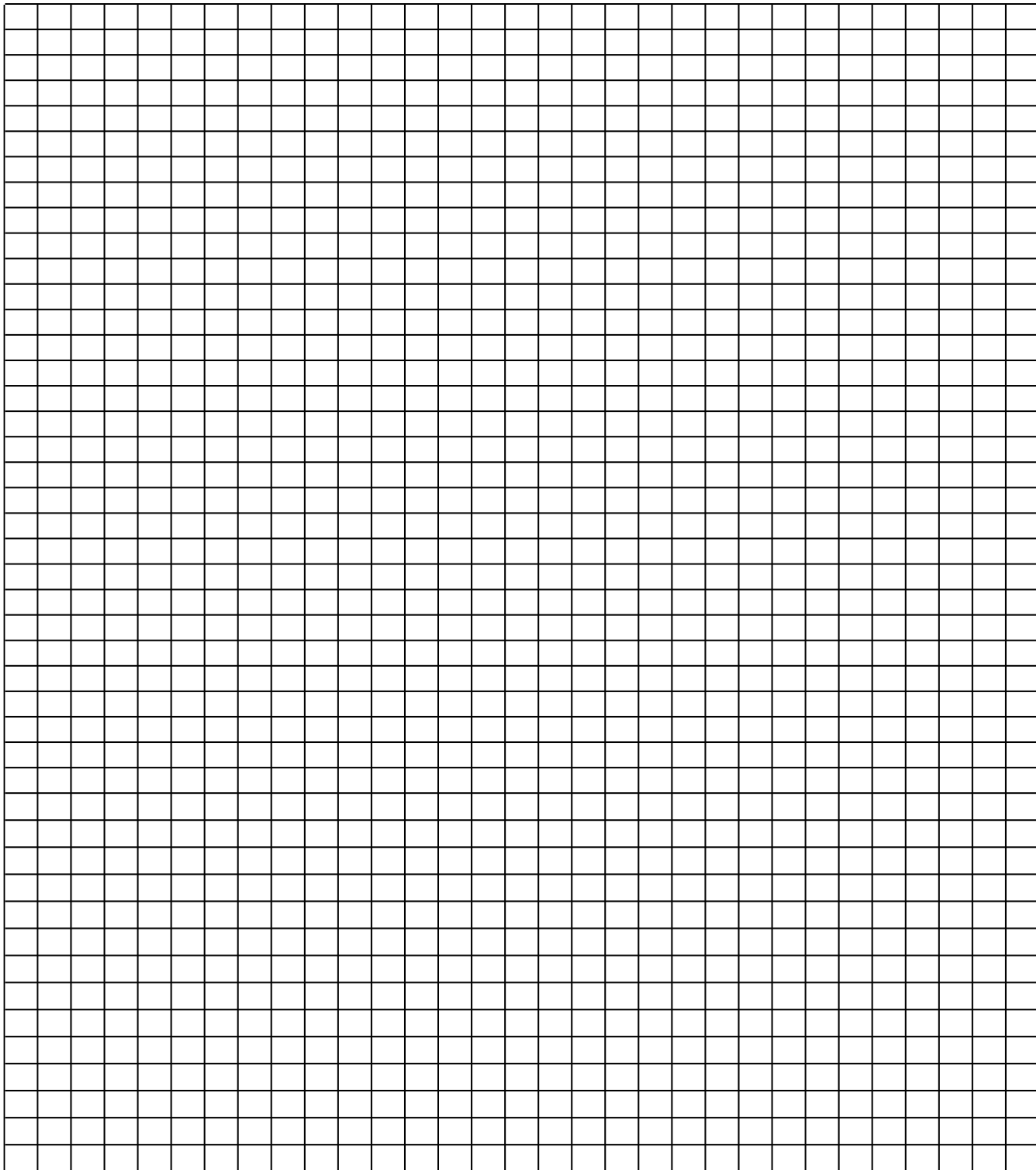
Signed _____ Date: _____
(Owner or Duly Authorized Representative)

SANITARIAN SIGNATURE _____ APPROVED _____ DENIED _____

Date: _____ Fee Amount (if applicable) _____
(approval valid 1 year from date signed) NO REFUNDS

(over)

Diagram of proposed addition: Show location of current septic system, and its distance from existing or proposed structure. Sketch and size the perimeter of the structure. Show reserve area, footing or ground water drains, easements, well location and lot dimensions, attached and detached buildings or other structures (pools decks, sheds, etc.) Indicate if areas of the lot will be regraded. *If proposal is for a pool, show method of backwash for filter.*



I attest that the above information is accurate to the best of my knowledge.

Signature of owner _____