

HEALTH AND HUMAN SERVICES DEPARTMENT

Linda Walsh, Interim Commissioner 1000 Commonwealth Avenue Newton, MA 02459-1544



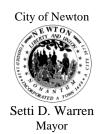
Telephone 617.796.1420 Fax 617.552.7063 TDD/TTY 617.796.1089

updated 3/12

COMMONWEALTH OF MASSACHUSETTS

Board of Health,	Newton	, MA.		
DISPOSAL SYSTEM CONSTRUCTION PERMIT				
Permission is hereby granted to: Construct and individual sewage disposal system at:		de (), Abandoned ()		
As described in the application for Dispos	sal System Construction	1.		
Permit No	, dated			
Provided : Construction shall be completed. All local conditions must be met.	ed within three years of	the date of this permit.		
Date:Boar	rd of Health Agent			
		John McNally, BS, RS		

Disposal system construction permit



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PLAN SPECIFICATION REVIEW APPLICATION

NAME:	TELEPHONE:			
ADDRESS:				
TYPE: POOL	SEPTIC SYSTEM	OTHER		
SPECIFY OTHER:				
OWNER:	TELEP	PHONE		
PERSON SUBMITTING PLAN	N:TELEP	PHONE		
	FOR OFFICE USE	E ONLY		
DATE SUBMITTED:				
FEE RECEIVED:				
CHECK #		CASH		
PERSON RECEIVING FEE:				
COPY TO APPLICANT:				