



Town of West Tisbury

BOARD OF HEALTH

P. O. Box 278
West Tisbury, Massachusetts 02575
Telephone 508-696-0105
Email: boh@westtisbury-ma.gov

2020-0091

FEE: \$200.00

APPLICATION FOR ANNUAL 2020 DISPOSAL WORKS INSTALLERS PERMIT

Application is hereby made for an annual permit to install or repair septic systems in accordance with the provisions of the Town of West Tisbury Board of Health Regulations and 310 CMR 1500 of the State Environmental Code, Title 5.

Applicant's Name: AFRANIO MOREIRA (EARTHSCAPE)

Mailing Address: PO BOX 2803 EDGARTOWN MA 02539

Telephone # 774-521-5502 Fax # _____

E-mail EARTHSCAPEMV@gmail.com Cell Phone # 774-521-5502

AGREEMENT

I hereby agree to comply with the provisions contained in the Town of West Tisbury Disposal Works Regulations, policies and 310 CMR 1500 of the state code Title 5.

I understand that it is illegal to install or repair a septic system in the Town of west Tisbury unless the installer has in his possession, BEFORE excavating:

1. A current Annual Disposal Works INSTALLERS permit signed by the Board of Health.
2. A Disposal works CONSTRUCTION permit for the appropriate parcel signed by the Board of Health within the last 365 days, and
3. A Disposal Works ENGINEERING PLAN for the appropriate parcel signed by the board of Health.

APPLICANT SIGNATURE: _____

DATE: 3/13/2020

BOARD OF HEALTH APPROVAL: _____

DATE: _____

NOTE: Annual Disposal Works installer permits are valid through December 31, unless sooner revoked for cause.

MATT POLK (EDGARTOWN) 508-627-6122

MARINA (CHILMARK) 508-645-2143