

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 - 0089

FEE: \$200.00

APPLICATION FOR ANNUAL 2020 DISPOSAL WORKS INSTALLERS PERMIT

| DISPOSAL WORKS INSTALLERS PERMIT |
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| 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: Code Code |
| Applicant's Name: Junes Jane Co. |
| Mailing Address: Po Box 1035, West Tiskury MA 02575 |
| Telephone # 505566 095 Fax # |
| E-mail Eastland Supergravo con Cell Phone # 508 566 0959 |
| 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: |
| 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: Jan Cent DATE: 3/13/20 |
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| BOARD OF HEALTH APPROVAL:DATE: |
| NOTE: Annual Disposal Works installer permits are valid through December 31 linless |

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