

Town of Plympton
Application for Percolation Test

Date: _____

Fee: _____

Raw Land _____
\$ 250 (4 Hours)
EACH ADDITIONAL HOUR \$75

Repair _____
\$75.00

- 1.) Name of Land Owner: _____
- 2.) Location: A) Street Address (if no street number available let us know what number the land is near) _____
- B) Assessor's Map # _____ Lot # _____
- C) Is the lot identified with a sign with lot or house number? Yes _____ No _____
- 3.) Are the lot or property lines defined and marked? Yes _____ No _____
- 4.) If the answer to Questions 3 is No, please describe: _____

- 5.) Name of the certified Soil Evaluator who will be supervising test:

Name: _____ Certification # _____

Name of Engineering Firm: _____

Address & Phone #: _____

"I understand that as the soil evaluator it is my responsibility to notify the Plympton Conservation Commission for regulatory review of any field work to be done within the 100' buffer zones from a delineated wetland as designated by the Plympton Conservation Commission or any other known wetlands as defined in MGL c. 131, §40, the Wetlands Protection Act.

(signature of Certified Soil Evaluator)

(date)

- 6.) Attach a copy of the assessor's map with the lot marked. Sketch any unusual site conditions, which may affect the proposed sub surface disposal system, such as wetlands, bedrock outcrop, etc., on the map.
- 7.) Is this test being conducted for a subsurface sewerage disposal system for this job? _____
If No, explain: _____
- 8.) Note: Systems designed on the basis of inadequate percolation tests and insufficient data may require re-application for a new perc test. (This will be determined by the Board of Health.)
- 9.) Name and address of applicant: _____

Scheduled Test Date: _____

Time: _____

For office use only.

Cc: Conservation Committee