



MONTAGUE HEALTH DEPARTMENT

ONE AVENUE A • TURNERS FALLS, MA 01376

TELEPHONE 413-863-3200 EXT. 205 • FAX 413-863-3225

APPLICATION FOR A VARIANCE

FEE \$50.00

Property Owner Information

Name of applicant: _____

Home/Office address of applicant: _____

Home/Office phone number of applicant: _____

Email: _____

Information regarding property where the variance to the perc season is sought

Street address of property _____

Name nearest cross street _____

Size of Lot for proposed new house construction _____

Assessors Map and Lot Numbers _____

Please make \$50.00 check payable to the Town of Montague and mail completed forms with check to the

**Montague Board of Health
1 Avenue A
Turners Falls, MA 01376**

Town of Montague is an Equal Opportunity Provider & Employer



MONTAGUE HEALTH DEPARTMENT

One Avenue A · Turners Falls, MA 01376

Telephone 413 - 863 - 3200 Ext 205 · Fax 413 - 863 - 3225

FEE DUE: <http://www.montague.net/>

APPLICATION FOR PERCOLATION & DEEP OBSERVATION HOLE TESTING

Instructions: Application full completed please submit original with fee to the health department. You may want to make a copy for your records.

Fee: See Current BOH Fee Schedule at <http://www.montague.net/>

Indicate: New house construction or Repair/expansion to an existing septic system

Application Date: _____ Requested Test Date: _____

Please Print

Applicant Information:

NAME _____

ADDRESS _____

CITY, ST ZIP _____

PHONE _____

APPLICANT or AGENT SIGNATURE: _____

Date: _____

PROPERTY OWNER Information:

NAME _____

MAILING ADDRESS _____

CITY, ST ZIP _____

PHONE _____

ENGINEER or SANITARIAN Information:

NAME _____

COMPANY _____

ADDRESS _____

CITY, ST ZIP _____

PHONE _____

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PARCEL INFORMATION required: Assessor's Map # _____ Lot # _____
Address of Parcel: _____
DRIVING DIRECTIONS to the parcel (nearest house #, intersection, etc)

DIG SAFE NUMBER: _____
Dig Safe must be called a minimum of seventy-two (72) hours in advance of excavating. This time frame excludes weekends and holidays. The landowner or the contractor will be held liable for damages if Dig Safe was not notified and a number issued.

310 CMR 15.214: (3)

It shall be the duty of the owner of the system or proposed system to ascertain whether or not the facility to be constructed will be in a nitrogen sensitive area. The Department will prepare and make available at locations generally accessible to the public maps portraying designated nitrogen sensitive areas within the Commonwealth.