



TOWN OF MILLBURY
127 ELM STREET
MILLBURY, MA. 01527
508-865-4721
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BOARD OF HEALTH

SEPTIC ABANDONMENT APPLICATION

Fee: NO COST

DATE:

ADDRESS OF SEPTIC SYSTEM TO BE ABANDONED: _____

MAP _____ PARCEL _____ LOT _____

A LICENSED INSTALLER MUST ABANDON THE SEPTIC SYSTEM AS PER TITLE 5 - 310 CMR 15:354

State Reason for Abandonment:

Connected to Municipal Sewer System: YES / NO (Attach copy of sewer connection permit).

Other: Explain: _____

Septic Tank must be pumped of its entire contents By a Licensed Septage Hauler: (Attach Pumping Slip)

The tank shall be excavated and removed from the site, or the bottom of the tank shall be opened or ruptured after being pumped of its content so as to prevent retainage of water and the tank shall be completely filled with clean sand or other approved suitable material. (Attach or Email Photograph)

I _____ certify that the above abandonment is to be completed as per Title 5.
(Print Name)

Signature _____ Company Name: _____

Telephone #: _____

Print Property Owner Name _____

Signature Property Owner _____

Property Owner Telephone #: _____

Office use Only:

PERMIT #: _____

Approved by BOH Signature: _____

Inspection Required: YES NO
(Visual Inspection required at the discretion of the BOH)

VALID FOR ONE YEAR FROM DATE OF ISSUANCE UNLESS REVOKED FOR CAUSE

ABANDONMENT PERMIT IS NON TRANSFERABLE