



**Nashoba Associated Boards of Health**  
**Environmental Health Service**  
 30 Central Avenue, Ayer, Ma. 01432

**Application For a Sewage Disposal Works Construction Permit**

\$25.00 – Transfer A Permit  
 \$25.00 – Renew An Issued Permit

There is a 15% processing charge on all refunds

Town \_\_\_\_\_ Assessor's Map# \_\_\_\_\_ Parcel # \_\_\_\_\_  
 Street Location \_\_\_\_\_ Lot# \_\_\_\_\_  
 Directions to Property \_\_\_\_\_

New	Existing
<input type="checkbox"/>	<input type="checkbox"/> Dwelling
<input type="checkbox"/>	<input type="checkbox"/> Business
<input type="checkbox"/>	<input type="checkbox"/> Industrial
<input type="checkbox"/>	<input type="checkbox"/> Other
<input type="checkbox"/>	<input type="checkbox"/> Restaurant

Number of Bedrooms \_\_\_\_\_  
 Number of Employees \_\_\_\_\_ Square Footage of Floor Area \_\_\_\_\_  
 Describe (Business) \_\_\_\_\_ Food Service  yes  no  
 Number of Seats \_\_\_\_\_ Food Service \_\_\_\_\_

Lot Size \_\_\_\_\_ Water Supply  Town  Well on Property  Community Water Supply

**PLEASE SUBMIT A COPY OF THE EXISTING PERMIT FOR THIS LOT**

Name Currently on Permit \_\_\_\_\_ Telephone \_\_\_\_\_  
 Address \_\_\_\_\_

Applicant's Name (**must be owner or prospective owner**) \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone \_\_\_\_\_  
 Daytime Telephone Number \_\_\_\_\_  Business  Residence

**PLEASE NOTE THAT PERMIT RENEWAL CONDITIONS AND DURATION MAY VARY BY TOWN. VERIFY THE TERMS AND CONDITIONS OF YOUR PERMIT AND ANY RENEWALS OR EXTENSIONS WITH BOTH THE LOCAL AND NASHOBA ASSOCIATED BOARD OF HEALTH OFFICES**

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**(978) 772-3335 (800) 427-9762 FAX (978) 772-4947**