INSTALLER'S AS-BUILT AND CERTIFICATION

SKETCH (**to include the driveway, well and or water line locations.**)

I _____CERTIFY THAT ON _____, 20_____ I INSTALLED
(Date)
THE ABOVE SEPTIC SYSTEM FOR _____AT_____,
(Owner's name) (Street name)

IN THE TOWN OF_____, ALSO KNOWN AS LOT_____, IN ACCORDANCE

WITH TITLE 5, 310 CMR 15.000, THE APPROVED PLAN(S) _____AND THE
(Plan #)
BOARD OF HEALTH REQUIREMENTS AND FURTHERMORE, I CERTIFY THAT THE SYSTEM HAS BEEN CONSTRUCTED IN COMPLIANCE WITH THE TERMS OF THE INNOVATIVE TECHNOLOGY SYSTEM APPROVAL, WHERE APPLICABLE.

[ ] I ALSO CERTIFY THAT I HAVE DECOMMISSIONED THE PRE-EXISITNG SUBSURFACE SEWAGE DISPOSAL SYSTEM IN ACCORDANCE WITH TITLE 5.

_____ _____
INSTALLER'S SIGNATURE & DATE LICENSE NUMBER

Rev. 11/2016