



Town of Ashland, *Board of Health*

Septic Installer's Application

Fee: \$160.00 Payment is due with application

Date: _____

In accordance with the provisions of the Statutes relating thereto, application for a permit is made by:

Operator's Name: _____

Company Name: _____

Address: _____

City / Town / Zip: _____

Telephone: _____

Email Address: _____

to install septic systems within the Town of Ashland for the year 2022.

List references of three (3) active municipalities:

Pursuant to M.G.L. Ch. 62C, Section 49A, I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all State tax returns and paid all State and Local taxes.

Applicant's Signature