



*Rajit Gupta, MPH, RS, CP-FS*  
*Director of Public Health*

## *Board of Health*

Town Hall  
101 Main Street  
Ashland, MA 01721  
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[www.ashlandmass.com](http://www.ashlandmass.com)

### **Well Permit Application**

Fee: \$285.00 per Lot      Payment is due with application.

Date: \_\_\_\_\_

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

To install a well at: \_\_\_\_\_

Well Driller Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email: \_\_\_\_\_

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.

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