



TOWN OF PELHAM

351 Amherst Road, Pelham, MA 01002
Phone: 413-253-7129 Fax: 413-256-1061

No. _____

Board of Health

APPLICATION FOR PRIVATE DRINKING WATER WELL CONSTRUCTION PERMIT

Application is hereby made for a permit to construct a new () or replacement () private drinking water well in accordance with the attached plan at:

_____		_____	
Location/ Address		Tax Map and Lot Number	
_____		_____	
Applicant	Address	Email Address	
_____	_____	_____	
Well Driller	Address	Phone #	Reg. #
_____	_____	_____	_____

Type of Building: Dwelling _____ Number of bedrooms _____ Other ()
Number of Bathrooms _____ Number of persons _____ Square footage _____
Required daily volume of water _____ Gallons/day _____

AGREEMENT: The undersigned agrees to have installed a private well in accordance with the attached plans and the Town of Pelham regulations. The undersigned further agrees not to use the well for drinking or cooking purposes until a Water Supply Certificate is issued by the Board of Health. The applicant has read and is familiar with the Town of Pelham Private Well Regulations.

Signature: _____ Date: _____

APPLICATION APPROVED: _____ Date: _____

APPLICATION DISAPPROVED: _____ Date: _____

For the following reasons:

ATTACHED TO THIS PERMIT MUST BE A COMPLETE SET OF PLANS. SUBMISSIONS MUST BE IN QUADRUPPLICATE. A PERMIT FEE OF \$80.00 IS REQUIRED.