



Billerica Health Department

**Town Hall
365 Boston Road
Billerica, MA 01821
Telephone (978) 671-0931
Web Site www.town.billerica.ma.us**

APPLICATION FOR DEEPHOLE TESTING FOR UPGRADE OF AN EXISTING SYSTEM

Fee _____

THE FOLLOWING REQUIREMENTS ARE MANDATORY PRIOR TO BEING PLACED ON THE DEEPHOLE TESTING LIST:

Name of Owner _____ Telephone Number _____
Mailing Address _____ Best Time to Contact _____
Address of Property to be tested _____
Assessor's Map _____ Parcel _____
Purpose of test _____
Design Engineer/Firm Name _____
Address _____
Contact Person _____ Telephone Number _____
Backhoe Operator _____ Telephone Number _____

ADDITIONAL REQUIREMENTS

1. Plot plan to be submitted with application.
2. Dig Safe Number _____
3. Prior to scheduled appointment:
 - a) A minimum of two (2) deep observation holes shall be excavated, each having a minimum depth of ten (10) feet.
 - b) A minimum of two (2) test holes shall be prepared for the purpose of conducting percolation tests. Each test hole shall have a diameter of twelve (12) inches and a depth of eighteen (18) inches. A minimum of twenty-four (24) gallons of water for each hole shall be on site at the time of the appointment.

The owner shall be responsible for all equipment, supplies and labor necessary for the performance of these tests at the time of the scheduled appointment. Failure to comply with these requirements will result in delays that may necessitate rescheduling.

INCOMPLETE APPLICATIONS WILL DELAY FURTHER REVIEW AND PROCESSING

Signature of Owner _____
Date of Application _____
Date/Time of Appointment _____

RECEIVED

Contact this office and the design engineer if there are any questions or problems.