



Town of Holbrook
Board of Health
50 North Franklin Street
Holbrook, Massachusetts 02343

Tel: 781-767-3030
Fax: 781-767-9562

Application for Septic Haulers Permit

Fee: \$200 ---- Checks payable to Town of Holbrook

In accordance with M.G.L. c.111, Section 31B and 310 CMR 15.402 (Title V), he undersigned makes application to the Board of Health for permission to remove and replace on site sewer treatment system as well as the provisions of 310 CMR 15.500- 15.505 are intended to provide for safe, efficient and economical means of collecting, transporting and disposing of septage.

Date: _____

Name of Applicant: _____ Tel. Number: _____

Address: _____

Business Name: _____ Tel. Number: _____

Business Address: _____

List number and type of equipment, their capacity- volume and tonnage, and the date of the last vehicle inspection: _____

Please attach copies of driver's licenses and all endorsements as well as disposal sites

I certify that the information I have provided above is true and accurate. I recognize that it is a violation of this permit to dispose of septage anywhere other than an approved facility, in the removal or replacement of an onsite sewage disposal system.

Furthermore, pursuant to M.G.L. Chapter 62C, Section 49, I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all State tax returns and paid all State taxes required under the law.

Please sign below,
