



SEPTIC EVALUATION/REPAIR PERC APPLICATION

DATE: \_\_\_\_\_

SMHD No: \_\_\_\_\_

Is this application associated with a BRF funding request? \_\_\_\_ Yes \_\_\_\_ No

**Location:** Property Address: \_\_\_\_\_  
Tax Map \_\_\_\_\_ Block \_\_\_\_\_ Parcel No. \_\_\_\_\_  
Subdivision \_\_\_\_\_  
Lot \_\_\_\_\_ Section \_\_\_\_\_ Critical Area [ ] Yes [ ] No

**Residential:** No. of Bedrooms \_\_\_\_\_  
Total Square Footage Including Basement \_\_\_\_\_  
Future additions contemplated? \_\_\_\_\_

**Commercial:** Specify use \_\_\_\_\_  
Proposed building area in sq. ft. including all floors \_\_\_\_\_  
Does this proposal involve wastewater disposal other than domestic sewage?  
Specify \_\_\_\_\_

**Property Owner:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email: \_\_\_\_\_

**Contact Person:**  
Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_