

\$60 Fee Paid: _____
 Permit Number _____
 Issue Date _____
 Block, Lot, Map # _____
 If Map 15 Or 16, Unit # _____

*Application must be accompanied with required \$60 fee.
 Check made be made payable to "Town of Sheffield".*

Town of Sheffield Board of Health

Town Hall, 21 Depot Square, 2nd Floor; PO Box 325, Sheffield, MA 01257-0325
 413-229-7000 Ext 157 Fax: 413-229-7010 Email: boh@sheffieldma.gov

Application for Well Construction Permit (revised 2/12)

Please submit 4 weeks prior to construction with a copy of the well driller's Massachusetts License.

Name of Applicant / Owner: _____ Phone #: _____

Full Address: _____

Proposed well address: _____

Block, lot & Map # _____ Check one: ___ New Building ___ Existing Building

Name of Engineer/Sanitarian: _____ License #: _____

Address: _____

Phone #: _____ Fax #: _____

Name of Well Driller: _____ License #: _____

Address: _____

Phone #: _____ Fax #: _____

Please Check:

Electrical work will be performed by a licensed electrician.

This application must be accompanied by a map of the proposed well location; the plan submitted is in accordance with Title 5 requirements for septic systems will be acceptable for this purpose. Map must include a scaled, extended plot plan and be produced by a registered engineer or sanitarian. All items listed below must be indicated on plans:

(A) Required minimum lateral distances between Well and possible sources of contamination: (fill in all blanks)

Potential Source of Contamination	<u>DEEP WELL</u>		<u>SHALLOW WELL</u>	
	Required Minimum	Actual Distance	Required Minimum	Actual Distance
Subsurface sewage disposal field	100 feet	_____	150 feet	_____
Cesspool or seepage pit	150 feet	_____	150 feet	_____
Septic Tank	50 feet	_____	100 feet	_____
Sewer Lines	50 feet	_____	50 feet	_____
Property Lines	30 feet	_____	30 feet	_____
Public way	25 feet	_____	50 feet	_____
Driveways	20 feet	_____	20 feet	_____
Stables, pastures, feedlots, manure	150 feet	_____	150 feet	_____
Underground Fuel Storage Tanks	200 feet	_____	200 feet	_____

(B) The Existence of Any of the Following Within 200 Feet of Proposed Well:

Existing and proposed structures: _____

Subsurface water and subsurface drainage courses: _____

Any other recognizable sources of pollution, including roads: _____

Signed: _____ **(Applicant/Owner) Date:** _____