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BOARD OF HEALTH

Sutton Permit # _____

Malley Engineering Co. Inc. file # _____

INSTALLER AS-BUILT CERTIFICATION FORM

LOCATION: _____

NAME OF APPLICANT/OWNER: _____

NAME OF DESIGN ENGINEER: _____

DATE OF DESIGN: _____ DATE OF LATEST REVISION: _____

B.O. H. APPROVAL DATE: _____

EXCAVATION :

Date : _____ Length & Width: _____

COMPONENTS:

SEPTIC TANK

Size of concrete septic tank installed : _____ gallons Origin of tank: _____

If utilizing existing, tank was tank structurally sound: _____ Baffles/Tees/gas traps installed: _____

DISTRIBUTION BOX

No. of outlets: _____ Additional unused outlets cemented? _____

Tee required? _____ Tee installed? _____ Origin of d-box: _____

PUMP CHAMBER (if applicable)

SIZE: _____ GALLON WAS DESIGN PUMP INSTALLED? _____

ARE THERE SEPARATE AUDIO & VISUAL ALARMS? _____

(Attach electrical permit and approval from Town electrical inspector)

TOWN OF SUTTON – INSTALLER AS-BUILT FORM – PAGE 2

STONE DATA: (if applicable)

Amount of 1 1/2" stone installed: _____ Origin of Stone: _____

Amount of 3/8" stone installed: _____ Origin of Stone: _____

Was all stone installed double washed: _____ Attach copy of slip showing type & origin.

SEWER SAND (SEPTIC SAND): (if applicable)

Amount of sand installed: _____ Origin of sand: _____

Was sand free from rocks and other debris: _____ Attach copy of slip showing type & origin

CERTIFICATION OF SEPTIC SYSTEM FILL MATERIAL

(to be filled in by sand company representative)

Name of company providing material: _____

Address of Company: _____ - Phone: _____

I, _____ as a representative of the above-mentioned company do
PRINT NAME

hereby certify that the material provided the installer of this certificate met the requirements of 310CMR 15.025 (3) Title 5. regarding sand fill. Furthermore I certify that the material sold has been tested on a regular on-going basis to provide the most current up-to-date results.

Signature of Company representative: _____

Title: _____ Date: _____

(attach copy of the most recent Title 5 testing – no later than 3 months)

TOWN OF SUTTON – INSTALLER AS-BUILT FORM – PAGE 3

SKETCH PLAN:

Show swing ties from corners of house to all components: Show all underground utilities, bury areas, and/or stump dumps where applicable or state none exists.

I CERTIFY THAT THE ABOVE INSTALLED SEPTIC SYSTEM HAS BEEN INSTALLED IN ACCORDANCE WITH THE APPROVED DESIGN PLAN . ANY CHANGES FROM THE DESIGN PLAN HAVE BEEN REFLECTED IN THE AS-BUILT DOCUMENT SUBMITTED BY THE DESIGN ENGINEER.

Signature of Installer

Date

