

Town of Ludlow

PERC TEST/SOIL EVALUATION WITNESS REQUEST FORM

Street Address: \_\_\_\_\_ Lot No. (if applicable) \_\_\_\_\_

Assessor's Map No: \_\_\_\_\_ Parcel No: \_\_\_\_\_

Special instructions:

New Construction or Repair:

Applicant & Telephone Number:

Property Owner, Address, & Telephone Number:

Engineer/Sanitarian & Telephone Number:

Backhoe Operator & Telephone Number:

Fee: \$300 for a maximum of 2 hours and 15 minutes at any single site. Additional time shall be invoiced to the below signed individual at the rate of \$80 per hour or portion thereof.

**\*\*\* Note: If the site(s) contain any potential resource area and/or associated buffer, the applicant and/or Engineer/Sanitarian shall provide a scaled site sketch with indicated resource(s) and proposed testing area(s).**

Signature of Applicant, Property Owner or Other Person Responsible for Payment or any other payments pursuant to Section H of the Supplemental Regulations:

Signature:

Printed name:

**GENERAL CONDITIONS:**

- DIGSAFE IS TO BE NOTIFIED (888-DIG-SAFE)!!!!
  - Health Inspector will not witness on-site testing if site is not marked by digsafe and hourly fee will be assessed due to such cancelation.
- Any testing must be located a minimum of 50' from any identified resource area as defined under 310 CMR 10.00 – The Wetland Protection Act. Any design that illustrates the grading will be within the 50' buffer must be reviewed by the Ludlow Conservation Commission.
  - If the site has slopes in excess of 15% towards a identified resource area and testing is within 75' of that resource area; the area around the testing must has an approved siltation control measure installed

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**TO BE COMPLETED BY BOARD OF HEALTH**

Date of Perc:

Time: