

**NAUGATUCK VALLEY HEALTH DISTRICT**  
**98 Bank Street**  
**Seymour, CT. 06483**  
**Phone (203) 881-3255 Fax: (203) 881-3259**

**APPLICATION FOR SOIL TESTING/SITE EVALUATION**

\_\_\_\_\_NEW LOT (FEE \$195)      \_\_\_\_\_REPAIR (FEE \$145)      \_\_\_\_\_B100 (FEE \$120)

FEE IS NOT TRANSFERRABLE

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Location: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Installer/Contractor: \_\_\_\_\_ Engineer: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Water Supply: Public \_\_\_\_\_ Private \_\_\_\_\_ No. of Bedrooms \_\_\_\_\_ Employees/Occupants \_\_\_\_\_

**FOR REPAIR/B100's**

Is a plot plan available? \_\_\_\_\_ Does property have a water treatment system? \_\_\_\_\_

If yes, what type? \_\_\_\_\_ Where does system backwash to? \_\_\_\_\_

Are there any whirlpool or large capacity (>100 gallons) bathtubs? \_\_\_\_\_

When was septic tank last pump? \_\_\_\_\_

Please describe the problem(s) you are having with your system: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- \* The applicant agrees to hold NVHD and its agents harmless in the event of future problems or difficulties associated with any work done in conjunction with this site evaluation or subsequent septic system repair.
- \* The applicant understands that the results of any tests conducted by or on half of NVHD are public information. The responsibility for the proper maintenance and operation of this septic system is entirely the owner's.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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FOR OFFICE USE ONLY

FEE PAID DATE \_\_\_\_\_ DATE SCHEDULED \_\_\_\_\_ SANITARIAN \_\_\_\_\_