



# Naugatuck Valley Health District

98 Bank Street Seymour, CT 06483

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www.nvhd.org

## REQUEST FOR SOIL TESTING/SITE EVALUATION

**Reason for request:** NEW (\$250 Res) (\$350 Comm)  REPAIR (\$200 Res) (\$300 Comm)

B100 (\$150)  SUBDIVISION: (\$250 per lot)  #of Lots \_\_\_\_\_ WTW (\$50)

Location: \_\_\_\_\_  
Lot # / Street Address Town

Subdivision Name (if applicable): \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Property Owner's Address (if different from above): \_\_\_\_\_

Applicant's Name (Person or Company): \_\_\_\_\_

Applicant Address: \_\_\_\_\_ Applicant Phone #: \_\_\_\_\_

Engineer Name & Contact Info: \_\_\_\_\_

### REQUIREMENTS:

- Deep test pits must be dug prior to visit. Test pits should be 2 ½ - 3 feet wide and to a depth of 4 feet below the probable bottom of the leaching unit (generally 7 feet deep).
- Percolation holes must be 6-12 inches in diameter, 24-36 inches deep. Presoaked 2 hours before the scheduled site visit.
- **New lot:** 3 deep test pits, 2 perc minimum. **Repair:** 2 deep test pits, 1 perc minimum.  
**B100:** 1 deep test pit, 1 perc minimum. **Subdv:** 3 deep test pits, 2 perc minimum,  
**WTW Disposal:** 1 deep test pit.
- Please be aware that depending on site conditions, more test pits may be requested.

It is strongly recommended that a licensed septic installer be present to conduct the soil testing/site investigation with NVHD.

A licensed engineer **must** be present for new lot and/or subdivision requests.

It is agreed that NVHD and its agents be held harmless relative to any damage which might occur during these activities or in the event of future difficulties associated with any work done in conjunction with site evaluation or subsequent septic system repair.

\_\_\_\_\_  
Signature of Owner/ Applicant

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY** Fee Paid: \_\_\_\_\_ Receipt #: \_\_\_\_\_

DATE SCHEDULED/ TIME: \_\_\_\_\_ NVHD SANITARIAN: \_\_\_\_\_