



Naugatuck Valley Health District

98 Bank Street Seymour, CT 06483

T: 203-881-3255 F: 203-881-3259 W: www.nvhd.org

Ansonia Beacon Falls Derby Naugatuck Seymour Shelton

REQUEST FOR SOIL TESTING/SITE EVALUATION

FEES: NEW \$250 Res/ \$350 Comm REPAIR \$200 Res / \$300 Comm B100 \$150

SUBDIVISION: \$250 per lot #of Lots _____ WTW \$50 ADDITIONAL TESTING \$75

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.
 - Percs Presoaked 2 hours before the scheduled site visit.

New lot: 3deep test pits, 2 perc minimum. **Repair:** 2 deep test pits, 1 perc minimum.

B100: 1deep test pit, 1 perc minimum. **Subdv:** 3 deep test pits, 2 perc minimum, **WTW Disposal:** 1deep test pit.

Please be aware that depending on site conditions, more test pits may be requested.

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: _____ Phone #: _____

Applicant Email Address: _____

Engineer Name & Contact Info: _____

- ❖ A licensed septic installer must 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

Office Use Only:

Fee Paid: Credit Card Cash Check #: _____ Receipt #: _____

DATE SCHEDULED/ TIME: _____ NVHD SANITARIAN: _____