



Town of Southborough
Board of Health
9 Cordaville Road, Lower Level
Southborough, MA 01772-1662

Phone: (508) 481-3013

APPLICATION FOR INSTALLATION OF PRIVATE WELL

FEE: \$100

Driller's Name _____

Driller's Company Name _____

Company Address _____

Company Phone _____

Driller's Registration # _____

Property Owner Name and Address _____

Well Information:

Street Address _____ Assessors Map and Parcel # _____

Building: ☐ New ☐ Existing Number of Bedrooms _____

Use: ☐ Residential ☐ Commercial ☐ Irrigation* ☐ Geo-Thermal

Designer Name and License # _____

(Must be a Registered Sanitarian or Professional Engineer)

* Irrigation wells do not need to submit water quality analysis, but must affix a permanent plaque or marker on the well head, indicating that this well is not to be used for human drinking water purposes and is for irrigation only.

Two copies of the engineer's design plan showing the proposed well location in relation to the on-site sewage disposal system and any adjoining/adjacent sewage disposal system must be drawn by above individual and must be approved and on file with the Board of Health office.

Signature _____ Date _____

Printed Name _____ ☐ Owner ☐ Agent for Owner

FOR OFFICE USE ONLY

Fee _____ Check # _____

Permit Number _____ Date Issued _____

Notes: _____