TOWN OF DOUGLAS
BOARD OF HEALTH
29 DEPOT STREET
DOUGLAS, MA 01516

508-476-4000 Ext. 352
508-476-4012 FAX
508-476-1619 TTY

APPROVAL TO ABANDON SEPTIC SYSTEM

Pursuant to 310 CMR 15.354

Location:_____

Type of system: ☐ Septic tank/soil absorption system

☐ Cesspool

Reason for abandonment:_____

Contractor performing work

Name: _____

Address: _____

Phone: _____

Please describe how system was abandoned:_____

_____

_____

Attach copy of sewer connection permit or Disposal works construction permit

Pursuant to all above documentation the Douglas Board of Health APPROVES
The abandonment of the septic system at the mentioned location