

**APPLICATION FOR SEPTIC PERMIT**  
**Town of Westmoreland**

**Permit #** \_\_\_\_\_ **Tax Map #** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Applicant** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**Address of Site Evaluation** \_\_\_\_\_

**Name of Property owner** (if different than applicant) \_\_\_\_\_

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

**Phone #** \_\_\_\_\_

**Details of Site:** Included land marks etc. \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

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

**CHARGES FOR FOLLOWING SERVICES**

**INSTALLATION INSPECTION PRIOR TO COVERING** ----- **\$45.00**

**DYE TEST** ----- **\$45.00**

**Total Payment \$** \_\_\_\_\_ **Received By** \_\_\_\_\_

**CHARGES PAYABLE IN ADVANCE TO TOWN OF WESTMORELAND**

**SEWAGE CODES ENFORCEMENT OFFICER**

**Terry Williamson:** \_\_\_\_\_