



ROXBURY-355-2985

## NEWTOWN DISTRICT DEPARTMENT OF HEALTH

### REQUEST FOR SOIL TEST

Application Date: \_\_\_\_\_ No. of lots to be tested: \_\_\_\_\_

Number of holes: New Lots: 3 Deep Holes, 2 Percs minimum  
Repair & Code Complying Area: 1 Deep Hole, 1 Perc minimum

New (\$100.00) \_\_\_\_\_ Code Complying Area (\$50.00) \_\_\_\_\_ Repair (\$50.00) \_\_\_\_\_  
Subdivision (\$200.00 per lot) \_\_\_\_\_

*Please make check payable to Newtown Health District. A plot plan indicating all lot boundaries shall be submitted with this application.*

Address/Street Location of Lot(s) to be tested: \_\_\_\_\_  
\_\_\_\_\_

Assessor's Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ LOT SIZE (acreage): \_\_\_\_\_

Property OWNER'S NAME: \_\_\_\_\_

Property OWNER'S ADDRESS: \_\_\_\_\_

Applicant (Person/Company making request) Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Tel. No.: \_\_\_\_\_

Engineer's Name & Address: \_\_\_\_\_  
\_\_\_\_\_

Directions (Please include house color, landmarks & specific directions):  
\_\_\_\_\_

Courtesy of: Arthur H. Howland & Associates, P.C., Civil Engineers, Land Surveyors, Soil Scientists & Land Use Permitting!  
Call Us! (860) 354-9346 or visit <http://ahhowland.com> For More Info! (This Text Will Not Print When You Print Document)

Depending upon the purpose of the soil testing, we recommend that you have a licensed septic installer and/or an engineer present during the soil testing. If you choose not to and site limitations indicate an engineer is needed, the testing may need to be repeated at your own expense. Deep holes are to be 2-1/2 to 3 feet wide, 7 feet deep and ramped for easy access.

The percolation holes should be 24-36" (inches) deep, dug and presoaked 2 hours before the scheduled test time. It is the responsibility of the owner/engineer to be sure an adequate number of test holes are dug in the proposed septic area for Health Department review. Depending on the final submitted septic design, more test holes may be requested. The more test hole information available, the better the site evaluation will be.

Fee Paid: \_\_\_\_\_ Check No. \_\_\_\_\_ Date test required: \_\_\_\_\_