



TOWN OF CHARLTON

37 MAIN STREET
CHARLTON, MA. 01507
508-248-2210

BOARD OF HEALTH

SEPTIC SYSTEM INSPECTION PROCEDURES

Prior to any construction on the septic system, the installer must sign the Disposal Works Construction Permit and receive a copy of the stamped and signed approved plan.

The following procedures are required for septic system inspections:

1. Installation Permit:

- a. No inspections will be performed unless a permit to install has been applied for at the Board of health office. All fees and proof of insurance must be submitted at that time.
- b. The Board of Health may close the installation season at any time due to freezing temperatures and frost. It is the Installers responsibility to check with the Board of Health for the closing date prior to beginning installation.

2. Inspection Frequency:

(to be performed by the design engineer & the Board of Health) Installers must work from a stamped "Approved" Plan.

THE LICENSED INSTALLER IS THE PERSON TO CALL IN INSPECTONS

- a. Excavation Inspection (bottom)
- b. Component Inspection (tanks, d-box, pipe, stone, etc.)
- c. Final Grading
- d. Stabilization (hay, mulch, environmental matting)
- e. Any need for re-inspection will require an additional fee(\$50.00 per)

3. Requests for Inspection:

- a. All requests for inspections are to be made after the Installer has secured a permit through the BOH office. All requests for inspections are to be made by calling Malley Engineering at 508-414-8493.

YOU MUST SUPPLY THE PERMIT NUMBER OF THE APPROVED PLAN TO MALLEY ENGINEERING.

- b. All inspection requests require a 48-hour notice. However it is usually performed within 24 hours. Plan ahead.

- c. In the case of inclement weather the following will apply:
Inspections will not be performed until the rain/snow has stopped and the leachfield area has dried. For excavation inspections the installer shall re-scarify the bottom area and call for re-inspection. The installer should take care in working around the leachfield area until the area has dried out and is stable/firm enough to work on.
- d. Upon inspection you will be notified by Malley Engineering with the results of the inspection. It is important that you give up to date contact information to the Board of Health and Malley Engineering.
- e. Any installer who proceeds with installation of the system at any stage without notice from Malley Engineering (along with approval from the design engineer) risks re-installing that portion of the project along with possible license revocation.

4. Certificate of Compliance:

- a. The permitted installer is required to submit the Installer As-built certification form (4 page document) to the Board of Health along with copies of the sand & stone slips used in the installation of the system.
- b. The company providing the sand fill is required to fill out page 3 of the Installers As-built certification form and provide a copy of the sieve test analysis from that pit that is not more than 2 months old prior to the date of installation. This information must be attached to the Installers As-built Certification form.
- c. The permitted installer is required to sign the Certificate of Compliance (COC), cover page in the Board of Health office in the presence of the Board of Health Administrative Assistant.
- d. The installer is to sign the same Certificate of Compliance page along with the design engineer and the Board of Health. Separate copies of the certificate (installers on one and engineer on another) will not be allowed. The Board of Health will sign last after review of all submitted data.
- e. If an alternative system is being used the installer must supply a copy of the certificate stating that he/she is certified to perform the installation of said systems.
- f. If a pump system is being used, the model and model number of the pump along with a copy of the electrical permit is required with the COC.

*******The permitted installer is not allowed to make any changes to the system design without direction and approval of the design engineer and the Board of Health Agent.**

By my signature below I am certifying that I have read, understand and agree to follow the above procedures for installing septic systems in the TOWN OF CHARLTON. I also understand the Board of Health has the right to amend these policies and procedures at any time.

Signature of Installer

Date