



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

**BOARD OF HEALTH**

Charlton Permit # \_\_\_\_\_  
(Obtain from Application for soils testing)

**Request for System Inspection**

**FEE: Residential: \$ 250.00 / Commercial: \$350.00**

Includes Bottom, Component Placement, Final Grading, & Stabilization Inspection)  
(Check made payable to the Town of Charlton – **FEES ARE NON REFUNDABLE**)

**FEE: \$ 75.00 per inspection**

Component Inspection: Septic Tank  
SAS not included                  D-Box  
   Pump Chamber  
   Other

explain \_\_\_\_\_

(Check made payable to the Town of Charlton – **FEES ARE NON REFUNDABLE**)

**FEE: \$ 75.00 per inspection**

Additional Inspection Fee for Inspection of Retaining Wall/Interceptor Trench/Clay Barrier  
(Check made payable to the Town of Charlton – **FEES ARE NON REFUNDABLE**)

I hereby make a request to the Charlton Board of Health for an inspection of the installation of a subsurface sewage disposal system located at:

Address \_\_\_\_\_

The current owner of the property is \_\_\_\_\_

Name of Installer \_\_\_\_\_

(Please print legibly)

\_\_\_\_\_  
Signature of Installer

***This form is to be signed in the presence of a Charlton Board of Health Board member, Agent, Staff member – Valid Drivers Lic. required prior to any construction of the system.***

***Inspection Process:*** The installer shall contact the Board of Health to request an inspection. The Board of Health Agent will have **48** hours to conduct his inspection and notify the installer of his findings. To schedule an inspection contact The Board of Health at 508-248-2210. Installer must follow The Town of Charlton Septic System Inspection Procedures.

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