



***Town of Erving***  
***Application for Septage Hauler Permit***

Fee: \$50.00

Permit #:

In accordance with M.G.L. c. 111, Section 31B and 310 CMR 15.402 (Title 5) the undersigned makes application to the Erving Board of Health for permission to remove and transport septage and the content of privies and cesspools as set forth below.

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

List the number and type of equipment, their gallonage capacity and date of vehicle inspection (use back of page if needed):

Which disposal facility will you be using to dispose of the septage?

( ) Erving Center Waste Water Treatment Plant, East Main St., Erving Center

( ) Erving Waste Water Treatment Plant, Public Works Blvd., Ervingside

I certify that the information I have provided above is true and accurate. I recognize that it is a violation of this permit to dispose of septage anywhere other than the identified disposal locations or others approved of by the Erving Board of Health in writing as an amendment to this permit.

Signature of Applicant: \_\_\_\_\_

**Board of Health USE ONLY**

Year: \_\_\_\_\_ Permit #: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Check Number: \_\_\_\_\_ Amount Received: \_\_\_\_\_

B.O.H. Signature (or authorized official): \_\_\_\_\_

*Please make checks payable to the Town of Erving*