



TOWN OF DEERFIELD

Board of Health
8 Conway Street
South Deerfield, MA 01373
Voice: 413.665.1400
Facsimile: 413.665.1411

Application for Perc Test

Name: _____ Date _____
Mailing Address: _____
Telephone # _____ Map _____ Lot _____
Perc Address: _____
Nearest Telephone Pole: _____
Has this lot been perced before? _____ When: _____
Has this parcel been filled? _____ Date _____
Name of Engineer: _____
Owner/Applicant Signature: _____ Date: _____

Perc tests may be completed at any time of the year weather permitting.

1. Application must be completed with a check for the fee payable to the Town of Deerfield.
2. The owner/applicant shall arrange with an approved Soil evaluation, Sanitarian engineer to perform the test.
3. The owner/applicant will make arrangements for the contractor, equipment, land clearing, etc necessary to perform the test.
4. The engineer will coordinate the scheduling of the percolation test with the Board of Health Agent.
5. If more than perc test has to be done or the Board of Health Agent must take extra visits to the site due to fault of the applicant, engineer and or contractor will pay an additional fee for each incident.
6. If the contractor or the equipment does not perform excavation in the prescribed time, the Agent may call off a test and the applicant will be liable for the fee.
7. A new application fee will be charged for cancellation or rescheduling percolation tests if 48 hour notice is not given.
8. Only two perc tests will be done on any site during a single calendar year without permission of the Board of Health Agent.
9. Perc tests may be cancelled at any time by the Health Agent due to weather or site conditions
10. Cancelled tests will be rescheduled at the Health Agents next available time but no more than thirty day later.

Requested Date: _____ **Time:** _____
Fee: _____

For Inspections Department Use Only

- Approved _____
Richard Calisewski, Board of Health Agent
- Denied Reason: _____
- _____