

TIGHT TANK NOTIFICATION and DEED RESTRICTION

We, _____, as owners of _____, in the Town of Phillipston, Worcester County, Massachusetts, herewith provide notice that said property is served by a tight tank subsurface wastewater disposal system as shown on a plan entitled "Site Plan", Plan No. _____, prepared by _____ (name of engineering firm), dated _____, and on file at the Board of Health office at the Phillipston Town Hall. This notification is provided to satisfy the requirements of Title 5 of the State Environmental Code 310 CMR 15.260.

And further

We herewith grant a restriction on said property to be enforced by the Phillipston Board of Health. The restriction shall limit the above-mentioned property to seasonal residential use. Seasonal use is defined as being used 6 months or less during the calendar year. This restriction is granted to satisfy the requirements of Title 5 of the State Environmental Code 310 CMR 15.260(8).

And further

We herewith grant a restriction on said property to be enforced by the Phillipston Board of Health. The restriction shall limit the house located on the above-mentioned property to _____ bedroom with a maximum net living area of _____ sq. ft. This restriction is granted to satisfy the requirements of Title 5 of the State Environmental Code 310 CMR 15.002 (Definitions) and specifically the definition of "Bedroom".

This notification and restriction shall be null and void upon the reasonable availability of a connection to a municipal sewer system or upon the connection to an approved leaching facility in compliance with Title 5 of the State Environment Code and the Regulations of the Phillipston Board of Health.

For our title see Deed Book _____ Page _____ found in the Worcester District Registry of Deeds.

Witness our hands and seals this _____ day of _____, _____.

Signed,

COMMONWEALTH OF MASSACHUSETTS WORCESTER, SS

On this _____ day of _____, _____, before me, the undersigned notary public, personally appeared _____ and _____, proved to me through satisfactory evidence of identification, which were e _____, to be the persons whose names are signed above and acknowledged to me that they signed the aforementioned voluntarily and as their free act and deed, before me.

_____ My Commission expires: _____

(Name of Notary Public)