

**FEE: PER INSPECTION \$75**

**Well permit #**



**Board of Health  
50 The Common  
Phillipston Ma. 01331  
Tel/fax 978-249-1735  
Health@Phillipston-ma.gov**

**APPLICATION FOR THE CONSTRUCTION/DESTRUCTION OF A WELL**

Proposed Well Address: \_\_\_\_\_

Owners Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

\_\_\_\_\_

- Permit requested for:       well construction       well destruction
- Type of well to be installed:     artesian       gravel       dug       spring
- Type of water service line:     pressure       suction       gravity
- Previous/current land use:       forest       agricultural       Commercial       industrial

Description and approximate distance to potential sources of contamination within 400 feet of the proposed well

\_\_\_\_\_  
\_\_\_\_\_

Driller name \_\_\_\_\_ Address: \_\_\_\_\_

Driller NO. \_\_\_\_\_

**Attach a plan of the location proposed for well**

In accordance with the Rules and Regulation of the Town of Phillipston Board of Health, I hereby apply for a permit to install a private water supply.

Owner's signature: \_\_\_\_\_

For Board use only      **per inspection \$75**     Fee Received \_\_\_\_\_ Check # \_\_\_\_\_

                                 Received Application \_\_\_\_\_     Approved

                                 Location Inspected by: \_\_\_\_\_     Not Approved      Date \_\_\_\_\_

Comments: \_\_\_\_\_

**Page Two: Well Destruction**

Well Destruction Requirements:

Attach written statement from the well owner that the well is abandoned.

Specific location of the well to be destroyed:

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The design and construction of the well to be destroyed (attach sketch if appropriate)

Well driller's/digger's name and Water Resources Commission registration number:

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Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Commonwealth of Massachusetts Water Resources Commission Certificate/Registration No. \_\_\_\_\_  
(If applicable)

Please indicate the location of the proposed well at this site on a sketch and attach. Include the lot to be served, with boundaries, any existing or proposed sewage disposal systems and reserve areas, and existing contours. SEWAGE DISPOSAL WORKS PLANS MY BE SUBSTITUTED AND ARE RECOMMENDED.