## Commonwealth of Massachusetts Town of Warren

## Certificate of Compliance WBOH Form 6

		PERC #
This form is based on the DEP Form 3 that was	s developed on 0	6/03
This is to Certify that the following work on a	n On-Site Sewag	e Disposal System
Construction of a new system Repair or replacement of an existing sy Repair or replacement of an existing sy		
Has been done in accordance with Title 5 and t	he Disposal Syst	em Construction Permit (DSCP):
DSCP Number	DSCP Date	
Facility Owner		
Street Address or Lot #		
City/Town	State	Zip Code
Designer Information:		
Name	Name of Company	
Signature	Date	
Installer Information:		
Name	Name of Company	
Signature	Date	
Use of this system is conditioned on compliance with the provision	s set forth below:	
The issuance of this certificate shall not be construed as a guarantee	e that the system will	function as designed.
Approving Authority		
Signature	Date	