

P.O. Box 478  
48 HIGH STREET  
WARREN, MA 01083-0478

TEL: 413-436-5701

## WARREN BOARD OF HEALTH

Charles E. Shepard Municipal Building



### Septic Haulers Permit Application

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

Company Name: \_\_\_\_\_

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

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Contact Person \_\_\_\_\_

Hours of Operation \_\_\_\_\_ Fax number \_\_\_\_\_

The Town of Warren requires Private Septic Haulers, who conduct business in Warren, MA to obtain a permit to do so. Please include a check made out to the Town of Warren in the amount of \$200.00 (Two Hundred Dollars). If you have any questions please do not hesitate to call us at 413-436-5708 ext. 112.

***It is required that you send us a copy/record of each septic that is pumped and hauled to an end facility from our town. Failure to report these on a bi-monthly basis shall constitute a violation and your permit may be revoked. It is your responsibility to send these reports to us.*** Mail to: Warren BOH, PO Box 478, Warren, MA 01083.

To be completed by Board of Health:

Permit #: \_\_\_\_\_ Year: \_\_\_\_\_ Expires: \_\_\_\_\_  
Fee: \_\_\_\_\_ Paid by: Check# \_\_\_\_\_ or Cash \_\_\_\_\_