



BOARD OF HEALTH

CHARLES E. SHEPARD MUNICIPAL BUILDING

48 High Street • P.O. Box 478 • Warren MA 01083-0609 • Tel. 413- 436-5701 ext:112 • Fax 413- 436-9754

WELL PERMIT REQUIREMENTS

Well Permit Fee \$75.00, make check payable to Town of Warren.

- ❖ When applying for a well permit, applicants must supply a plot plan with the house, septic, and well location clearly marked on the plan.

Guidelines to follow:

1. Private water supply wells should be located at least ten feet from all property lines.
2. A well should be located a minimum of 15 feet from a gas line or overhead electric distribution line.
3. All private water supply wells should be located a minimum of 25-feet from the normal driving surface of any roadway or a minimum of 15 feet from the road right-of-way, whichever is greater.
4. Under Title 5, (sewage disposal systems that discharge less than 15,000 per day), the well must be located a minimum of:
 - a. 50 feet from a septic tank
 - b. 100feet from a leaching field
 - c. 100 feet from a privy
5. Locations/distances not mandatory, however, may want to consider in relation to contamination:
 - a. Petroleum storage tanks: 20 feet to 50 feet.
 - b. Stables, barnyards, feedlots, manure piles and manure storage tanks; 100 feet.

Upon completion, please submit a copy of the Well Completion Report to the Board of Health.

Please see next page for Application.



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The Commonwealth of Massachusetts
Town of Warren

APPLICATION FOR WELL PERMIT

Permit number: _____

Date

To the Licensing Authorities:

In accordance with the provisions of the Statutes relating thereto, application for a permit is hereby made by:

Name _____

Location _____

Well Driller _____

State clearly the purpose for which a permit is requested.

Signature of applicant _____

Address of applicant _____

Date Permit issued _____