



TOWN OF DEERING
762 Deering Center Road

**SEPTIC SYSTEM REPLACEMENT
APPLICATION**

Appl. #
Fee paid

OWNER INFORMATION

Name of landowner		Phone
Address	State	Zip

APPLICANT INFORMATION

Name of applicant		Phone
Address	State	Zip

PROPERTY INFORMATION

Location	Tax map	Lot number
Subdivision name	Approval number	Date lot created

DESCRIPTION OF WORK

Reason(s) for replacement:	
System type	System size
Estimated start date	

CONTRACTOR INFORMATION

	Name	Address	License #	Telephone
Septic designer				
Septic installer				

The undersigned hereby agrees that the proposed work will be done in accordance with the foregoing statement and with the plans and specifications submitted; and that the work connected therewith will conform to the building laws and zoning regulations of the Town of Deering. All work to be subject to inspection as required by the Building Inspector /Code Enforcement Officer.

Four (4) copies of the proposed design must be submitted along with a check for each design made out to the Town of Deering. Once approved, three copies will be returned to the Applicant/Owner as specified for final approval by the State of NH.

Owner's/Applicant signature		Date
Return address	State	Zip

FOR OFFICE USE ONLY

Application Received (date)	By	Application accepted (date)	By
Approved by Code Enforcement Officer			Approval date