



TOWN OF DANVILLE

Mark Tolman, Septic/Health & Well Inspector—cell (978) 994-1938

Town Hall: 210 Main Street, Danville, NH 03819

Office Tel: (603) 382-8253, ext. 4 Fax (603) 382-3363

Subsurface Septic System Permit

Date: _____

Location Information

Property Owner: _____

Address: _____ Map and Lot Number: _____

Applicant/Contractor Information

Installer: _____ License#: _____

Designer: _____ License#: _____

Address: _____

Phone: _____

\$50.00 for each inspection

Type of Inspection (check all that apply):

☐ Plan Review

☐ Test Pit

☐ Health Inspection

☐ Sand/Bed Bottom

☐ Re-Inspection/Final

☐ Well Inspection

Payment total: \$ _____

Check ☐ Check #: _____

Cash ☐

Applicant signature: _____

Town Hall signature: _____

Please return this form and payment to the Selectmen's Office during normal business hours: Monday through Thursday, 8am to 4pm. Please contact Mark to schedule inspections.

