



**TOWN OF GREENLAND, NH**  
**Building Inspector's Office**  
 11 Town Square – PO Box 100  
 Greenland, NH 03840.0100  
 Phone: 603.431.3070 x108 // Fax: 603.430.3761  
 Email: chussey@greenland-nh.com

**Permit: Install, Repair or Replace – Septic Tank and/or Absorption Field**

**Fee: \$25**

<b>Location of Installation</b>		<b>Map &amp; Lot</b>
<input type="checkbox"/> New System <input type="checkbox"/> Repair of System <input type="checkbox"/> Replacement		
<b>OWNER INFORMATION</b>		
<b>Name</b>		
<b>Address</b>		
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Work Phone</b>
<b>INSTALLER INFORMATION</b>		
<b>Name</b>		
<b>Address</b>		
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Work Phone</b>
<b>GENERAL INFORMATION</b>		
<b>Dig Safe Ticket Number</b>		
<b>State Approval Number</b>		
<b>Sketch of waste-water treatment required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Date of test pit</b>	<b>Distance to seasonal high water table</b>	
<b>THE FOLLOWING INSPECTIONS ARE REQUIRED PRIOR TO OPERATION OF THE SYSTEM</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> No    <b>Bed bottom of absorption field</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> No    <b>Location of absorption field and tank</b>		
<input type="checkbox"/> Yes <input type="checkbox"/> No    <b>Backfill and final grading complete</b>		
<i>It is the responsibility of the owner and/or installer to notify the Building Inspector when ready for each inspection. Inspections may be arranged by phone, in writing, in person or via email.</i>		
<b>SIGNATURES</b>		
<b>Applicant</b>	<b>Date</b>	
<b>Application Received By</b>	<b>Date</b>	
<b>Building Inspector</b>	<b>Date</b>	

**PERMIT NO.**

Amt \$ _____	Ck # _____
Date _____	Rec By _____
<input type="checkbox"/> MTHLY <input type="checkbox"/> VISION	