

## **Board of Health**

TOWN HALL • 19 WASHINGTON ST. • SHERBORN, MASSACHUSETTS 01770 508-651-7852 • FAX 508-651-7868

## CERTIFICATE OF COMPLIANCE Repair Subsurface Sewage Disposal System

SEPTIC TANK & DISTRIBUTION BOX REPLACEMENT ONLY

Pool Calana Pump

16-43 Pool Calana Pump

LOCATION 16 10 a 500 1-11 dage PERMIT #17-107 Barn with Part

with new septice.

BUILDING TYPE AND SIZE Barn with One Bodroom Apartment + Pool Calana

# OF BEDROOMS (for residential dwelling) One (1)

SEPTIC

SEPTIC

This is to advise that the individual sewage disposal system components — septic tank/distribution box - installed at the above location has been constructed to the satisfaction of the Board of Health, and is substantially in compliance with the terms of the Permit, Title 5 of the Department of Environmental Protection, and the regulations of the Town of Sherborn, Board of Health. This approval is based on conditions at the time of inspection as well as Design Plans, As-Built Plan and Sketches, and other data submitted by the applicant, his engineer, and installer.

No liability is incurred by the Town of Sherborn or it's Agent by reason of this approval. No guarantee is intended or implied.

NOTE: SSIVENTS, HER REQUIRES ANNUAL MAINTENANCE

October 28 2018-Activated

BOARD OF HEALTH AGENT

cc: Building Inspector

cc: Permit File

Forms/CertComp -Final-Tank/D-BoxRepl.doc