

Fee Paid:

## **CHESPROCOTT HEALTH DISTRICT**

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## **APPLICATION for SEPTIC ABANDONMENT**

Abandonment of subsurface sewage disposal system components (i.e. septic tank, hollow leaching structures) or cesspools shall be performed in such a manner as to eliminate the danger of the system components or structure inadvertently collapsing. The responsibility for abandonment lies with the property owner.

- Structures that are to be abandoned shall be empties of all sewage/wastewater prior to abandonment.
- A licensed Septic Pumper must pump out the septic tank and any hollow structures.
- Structures shall be filled with sand/gravel or crushed, and the, the area backfilled with clean soil.

Date:			
Owners Name:		Phone :	
Address:			
Reason for Sewage tank ak	oandonment (Check one):		
New tank being inst	alled under repair permit		
Residence connecte	ed to public sewer		
Structure being den	nolished/removed from pro	pperty	
Tank Abandoned (circle on	ne): Y / N		
Leaching type:		_ Abandoned ? (circle or	ne): Y / N
Licensed pumper:		Phone:	
Address:			
Abandonment performed	by:		
Address:		Phone:	
I CERTIFY THAT THE SEPTIC information submitted abo		TE ADDRESS LISTED ABOVE H	IAS BEEN ABANDONED. The
 Signature	Print		Date
	0	FFICE USE ONLY	
Appointment to verify: _			