



Town of Deering
Building Inspector 603-547-0437
Office: 603-464-3248

Map & Lot #: _____

Permit #: _____

Fee: \$100.00 Paid

SEPTIC PERMIT

Please print in ink or type all information.

Owner Name: _____

Owner Mailing Address: _____

Property Location (# & street): _____

Is this a rental property? Yes No

Is this property located on a Private or Class VI road? Yes* No

* If Yes, do you have an Acknowledgment & Consent form recorded at the Hillsborough County Registry of Deeds, as required by RSA 674:41? If not, please contact the Deering Town Hall to complete an Acknowledgement & Consent form.

Is this permit a conjunction with a building permit? Yes No

Type of work: New work Replacement Extension of old work

Permit must be obtained before work is started and notice given to Inspector when ready for inspection.

System Type: _____ System Size: _____

Describe work to be performed: _____

Designer/Contractor's Name: _____

Company Name: _____ Phone #: () - _____

Company Address: _____

Signature: _____ Date: _____
(Owner or Contractor)

Approval/Signature: _____ Date: _____
(Michael Borden, Building Inspector)