



AMHERST Massachusetts

TOWN HALL
4 Boltwood Avenue
Amherst, MA 01002-2351

INSPECTION SERVICES DEPARTMENT
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APPLICATION FOR A WELL CONSTRUCTION PERMIT

I hereby petition the Board of Health of the Town of Amherst for a Well Construction Permit (WCP) to install a private well in the Town of Amherst. Attached is a plan showing the proposed location of the well with original date, stamp and signature of an Engineer, Registered Sanitarian or Registered Land Surveyor, and all other requirements of the *Amherst Board of Health Regulations for Private Wells*.

1. Address of Property: _____

2. Assessor of Parcel Number: _____

3. Name of Owner: _____ Telephone Number: _____

Address of Owner: _____

4. Name of Well Driller: _____ Reg. # _____
(Must be registered with Massachusetts Water Resources Commission)

5. Purpose of Well: Drinking () Agricultural Only () Ground Source Heat Pump ()
\$100.00 \$50.00 \$50.00

The undersigned acknowledges before commencing construction or use of the system which is the matter of this application, he/she must secure any and all other permits which may be required by the laws of the Town of Amherst and the Commonwealth of Massachusetts, and agree to abide by all regulations of the Town of Amherst and the Commonwealth of Massachusetts concerning private wells.

The undersigned also understands if a private well is to be used for drinking water, a **BUILDING PERMIT** affecting the structure the well will serve **WILL NOT BE ISSUED UNTIL** a Water Supply Certificate has been granted by the Amherst Board of Health.

Name of Applicant: _____

Applicant Signature: _____ Date: _____

For Office Use Only	
<input type="checkbox"/> Permit Issued By: _____ Permit Number: _____ Date Issued: _____	<input type="checkbox"/> Permit Denied By: _____ Reason: _____ Date Denied: _____
Inspected By: _____ Inspection Date: _____	Fee Paid: Yes ___ No ___ Amount _____ Cash/Check # _____ Date of Payment _____
MUNIS Application: _____	