



Town of Mashpee
BOARD OF HEALTH
16 GREAT NECK ROAD NORTH
MASHPEE, MASSACHUSETTS 02649
(508) 539-1426 * Fax (508) 477-0496



Public Health
Prevent. Promote. Protect.

Mashpee Board of Health Engineer's Certification

Disposal Works Construction Permit #DWC _____

Property Address: _____ Mashpee, MA

Name and Address of Engineering Firm:

Date of Inspection: _____

Comments:

My signature below certifies that I conducted an inspection of the on-site septic system at the above-referenced property prior to it being backfilled, and found the system to be installed in compliance with the approved design plan.

With this Certification, I have provided a certified as-built plan with swing ties showing the location of the covers on each of the components, relative to two fixed locations on the dwelling, and also showing the elevation of the pipe at the inverts of the tank, distribution box and SAS.

PRINTED NAME OF ENGINEER/DESIGNER

SIGNATURE

DATE

STAMP: