



# QUALIFYING CESSPOOL CERTIFICATION FORM

Name of Taxpayer(s) (Last, First, Middle Initial):

\_\_\_\_\_

\*Note: Taxpayer(s) name(s) must match the name of the legal owner(s) of the property.

Social Security Number (SSN) or Federal Employer Identification Number (FEIN): \_\_\_\_\_

Tax Map Key Number: \_\_\_\_\_ Island \_\_\_\_\_

Property Address: (Number and street, including apartment number or rural route, city, state and postal/zip code):

\_\_\_\_\_

The cesspool on this property is located within 500' from a (please circle one):

Shoreline    Perennial Stream    Wetland    Distance to a shoreline/perennial stream/wetland: \_\_\_\_\_ feet

The cesspool is a large capacity cesspool and serves (please circle one):

Multiple dwellings            20 or more persons per day

**As the licensed engineer/contractor performing the site inspection, I certify that the cesspool is located within 500' of a shoreline, perennial stream, wetland or is a large capacity cesspool.**

Licensed Contractor/Engineer (Print Name): \_\_\_\_\_

Licensed Contractor/Engineer (Signature): \_\_\_\_\_

License Number \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

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## PROVIDE PLOT PLAN IN SPACE PROVIDED BELOW:

Plot plan should include the dwelling structure and cesspool distance to a shoreline/perennial stream/wetland.

FOR DEPARTMENT USE ONLY:

Date Received: \_\_\_\_\_ Reviewed By: \_\_\_\_\_ Certification Accepted: Yes No

Date Certification Decision Letter Sent: \_\_\_\_\_