

**TOWN OF NORTH ANDOVER**  
**Office of COMMUNITY DEVELOPMENT AND SERVICES**  
**HEALTH DEPARTMENT**  
**1600 OSGOOD STREET; BUILDING 20; SUITE 2-36**  
**NORTH ANDOVER, MASSACHUSETTS 01845**



**Susan Y. Sawyer, REHS/RS**  
**Public Health Director**

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**Application for Septic System Inspector**

**Date:**

*I certify that the information I have provided is true and accurate. I agree to comply with M.G. L. Chapter 111, Sections 31, and any rules, regulations or policy of the Town of North Andover. The undersigned hereby makes application to the Board of Health for permission to conduct Title 5 inspections in the Town of North Andover.*

Name of Applicant: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Business Fax #: \_\_\_\_\_

Name of Owner/Corporation Name: \_\_\_\_\_

**\*\*\* Enclose a copy of your picture identification, and your D.E.P. Title 5 Inspector certification. \*\*\***

Pursuant to M.G.L. Ch. 62C, Sec. 49, I certify under the pains and penalties of perjury, that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Excerpt from the North Andover Septic Regulations:

**1. INSPECTIONS OF EXISTING ONSITE WASTEWATER SYSTEMS (“TITLE 5 INSPECTIONS”)**

1.1 When identified in the course of a Title 5 inspection, cesspools and privies are deemed failed systems and shall be replaced with a new onsite wastewater system.

1.2 Any Title 5 inspection that identifies a tank or distribution box at an elevation of greater than 36 inches below grade, without an access riser, shall have a riser and cover installed within 9 inches to grade by a North Andover licensed onsite wastewater system installer.

**7.4 TITLE 5 SYSTEM INSPECTORS**

7.4.1 Title 5 system inspectors certified by Massachusetts Department of Environmental Protection (DEP) shall be licensed to work in the Town of North Andover. Inspections performed by inspectors not licensed by the Health Department will be prohibited.

7.4.2 Application for licensing shall include a copy of Massachusetts Department of Environmental Protection (DEP)’s Title 5 System Inspector certification.

\_\_\_\_\_  
Social Security Number or  
Federal Identification Number

\_\_\_\_\_  
Signature of Company or Corporate Officer

**FEES: \$35 for Each Inspector License**  
**Make Check Payable to: Town of North Andover**

**Note: \$50 – At time of Each Report Submission**