

*It is the responsibility of the applicant to record the required deed restriction per 310 CMR 15.000 Title 5. The following is a suggested format, but the final document should be approved by your attorney prior to recording.*

**NOTICE OF VARIANCE / DEED RESTRICTION**

*Pursuant to 310 CMR 15.000 Title 5, and as a condition of septic plan approval by the North Andover Board of Health, notice is hereby given that real estate located*

*at: \_\_\_\_\_, North Andover, Massachusetts, (aka Assessor's Map \_\_\_\_\_ / Lot \_\_\_\_\_), as described in a deed from*

*\_\_\_\_\_ to \_\_\_\_\_, dated \_\_\_\_\_, 20\_\_\_\_ and recorded in the Essex County Registry of Deeds in Book \_\_\_\_\_ and Page \_\_\_\_\_, and as Document # \_\_\_\_\_,*

*is the subject of a variance from the Town of North Andover Minimum Requirements for the Subsurface Disposal of Sanitary Sewage A1.05 and C9.01(4). Said variance limits the maximum number of bedrooms at this dwelling to \_\_\_\_\_ bedrooms. This variance is within the jurisdiction of the North Andover Board of Health.*

*Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.*

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*Property Owner(s) Signatures*

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**COMMONWEALTH OF MASSACHUSETTS**

*Essex, s.s.*

*Date: \_\_\_\_\_, 20\_\_\_\_*

*Then personally appeared the above-named \_\_\_\_\_ and acknowledged the foregoing instrument to be his/her/their free act and deed, before me.*

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*Name*

*Notary Public*