



Town of Berkley
Massachusetts
Offices of
Board of Health
One North Main Street
Berkley, MA 02779

Phone: 508-822-7828
Fax: 508-386-2100
Email: Boardofhealth@berkleyma.us

Application for Minor Septic Repair

Date: _____

TYPE OF REPAIR: _____

Property Owner: _____

Address of Repair: _____

Phone/Cell: _____

Engineer (if applicable): _____

Address: _____ Phone: _____

License: _____

Installer: _____

Berkley License: _____

Phone: _____

Applications must be submitted with fee. Check or Money order made out to Town of Berkley.

Fees will vary depending on repair being made. Replace D-Box \$125, Tank Replacement \$125.

Tank Replacement will require a newly engineered plan.

Applications must be completed in full- No Exceptions

James Romano, Chairman

Steve Rapoza, Member

Dan Fournier, Clerk