



TOWN OF FRAMINGHAM
Department of Public Health
150 Concord Street
Framingham, MA 01702



Public Health
Prevent. Promote. Protect.

Physical Office Location: 31 Flagg Drive, Door 14, Framingham, MA 01702

Board of Health

Laura T. Housman, MPH, Chair
Michael R. Hugo, Esq., Vice Chair
Tammy C. Harris, M.D., MPH, Secretary
David W. Moore, M.D.
Judith Wester, RN, BSN, MSN

Director of Public Health

Samuel S. Wong, Ph.D.

Tel: (508) 532-5470
Fax: (508) 532-5760
health@framinghamma.gov

APPLICATION TO CONSTRUCT A PRIVATE WELL

REQUIRED DOCUMENTS

A completed application for a permit to construct a well shall include:

See the Regulations for Town of Framingham Board of Health Private Well Regulations (December 18, 2013) for assistance with developing the following documents:

1. The Certified Well Driller's name and proof of valid Commonwealth of Massachusetts registration.
2. A plan with a specified scale that is signed by a registered surveyor, architect or engineer showing the location of the proposed Private Well in relation to existing or proposed above or below ground structures (setbacks).
3. A description and location of all existing and proposed structures as well as location of any potential source of pollution within the radii (in feet) (noted in Section 7.00 of the Private Well Regulation).
4. The permit fee required, as established by the Board, of \$100.
5. All private wells must conform to the minimum setback distances (noted in Section 7.03 of the Private Well Regulation). All associated setbacks shall be listed on the application in detail.

*Proof that the owner of any property abutting the Applicant's property has been notified of the Applicant's intention to install a Private Well (noted in Section 8.06(b) of the Private Well Regulation) shall be submitted at the Board of Health meeting regarding approval of your proposed well.

Be advised that the Health Department has thirty (30) days to review all completed applications and plans prior to a scheduled Board of Health meeting.

Date: _____

Permit Fee:\$100

APPLICATION FOR PERMIT TO CONSTRUCT A WELL

I hereby petition the Board of Health of Framingham, MA for a permit to construct a well.

Address of Property: _____

Name of Applicant: _____ Tel. #: _____

Name of Owner (if Different): _____ Tel. #: _____

Address of Owner: _____

Well Driller Name: _____ Tel. #: _____ MA Reg. #: _____

Driller Address: _____ Driller Email: _____

Type of Well: Potable _____ Irrigation Only _____ Monitoring _____ Other _____

A detailed and stamped plot plan from a registered professional engineer, surveyor or architect shall be submitted with this application as required by the Framingham Board of Health in the "Town of Framingham Board of Health Private Well Regulations" dated December 18, 2013.

The undersigned acknowledges that they must, before commencing construction or use of the system which is the subject matter of this application, secure any and all other permits which may be required by the Laws of the Town of Framingham and the Commonwealth of Massachusetts, and agrees to abide by all rules and regulations of the Town of Framingham and the Commonwealth of Massachusetts.

The undersigned also understands that under Regulation 2.2, NO CONSTRUCTION OF THE FACILITIES WHICH THE WELL IS TO SERVE MAY BE PERFORMED UNTIL THE WELL IS INSTALLED, COMPLETED, AND INSPECTED, AND HAS BEEN DEMONSTRATED TO SUPPLY WATER OF THE QUALITY AND QUANTITY SPECIFIED IN THE "Town of Framingham Board of Health Private Well Regulations" dated December 18, 2013.

Setbacks Observed (7.03) - include type of setback (property line, subsurface sewage disposal systems, other wells, etc.) and measured distance in feet and inches (see regulation):

1. _____
2. _____
3. _____
4. _____
5. _____

Abutter Notification (5.02 (7)) – required to obtain approval by the Board of Health.

Signature of Applicant/Owner: _____ Date: _____

SIGN OFF

Reviewed By:

Chief of Environmental Health: _____

Comments: _____

Environmental Site Assessment Officer (LSP): _____

Comments: _____

WELL DATA

Water Analysis:

Flow Data:

Received: _____ Received: _____

Approved: _____ Approved: _____