



Commonwealth of Massachusetts
Town of Mansfield
Board of Health

Town of Mansfield
6 Park Row
Mansfield, MA02048

Application for Permit to Drill Well

Name of Owner:	Registered Well Driller:
Lot Address:	MA LIC #:
Town / State / Zip:	Business Town / State / Zip:
Telephone:	Email:

TYPE OF WELL:

- Domestic Potable (for household use)
- Domestic Auxiliary (for watering, pools, etc.)
- Industrial/Commercial Potable (for human consumption, including food processing)
- Industrial/Commercial Auxiliary (for manufacturing, etc.)
- Agricultural (for irrigation of land in the business of agriculture)

FEE: Domestic \$75.00 Industrial/Commercial \$75.00 Agricultural \$75.00

Submit application with payment, site plan, pumping test, and quality test to the Mansfield Health Department located at 6 Park Row, Mansfield, MA 02048.

The site plan must show the well location, property lines, sewer lines, septic systems, animal enclosures, fuel tanks, other potential contamination sources and features associated with a minimum separation distance.

Domestic Auxiliary (for watering, pools, etc.) and Agricultural (for irrigation of land in the business of agriculture) Wells do not require a Pumping Test and Quality Test to be submitted with application.

NOTE: Electrical permit required; underground cable trench must be inspected.

DATE: _____ APPLICANT SIGNATURE _____

Upon installation of well, call Department of Public Works at 508-261-7330 to schedule an inspection.