

Commonwealth of Massachusetts City/Town of Certificate of Compliance for Shared Disposal System Form 10C

DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the Board of Health to determine the form they use.

Shared Systems must be approved by DEP prior to construction.

This is to Certif	y that the following work on	a shared on-site sewage disposal system:
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Construction of a new system

Repair or replacement of an existing system

Repair or replacement of an existing system component

has been constructed in accordance with the provisions of Title 5 and the Shared Disposal System Construction Permit (DSCP):

DSCP Number	DSCP Date			
Facility Information:				
Address				
City/Town	State	Zip Code		
Designer Information:				
Name				
Signature	Date			
Installer Information:				
Name				
Signature	Date			
Use of this system is conditioned on compliance with the provisions set forth below:				
The issuance of this certificate shall not be construe designed.	ed as a guarantee	that the system will function as		

Approving Authority

Signature

Date