



Central Office: 505 Silas Deane Highway, Wethersfield, CT 06109 Phone (860) 721-2822 Fax (860) 721-2823
Berlin: 240 Kensington Road, Berlin, CT 06037 Phone (860) 828-7017 Fax (860) 828-9248
Newington: 131 Cedar Street, Newington, CT 06111 Phone (860) 665-8586 Fax (860) 665-8533
Rocky Hill: 761 Old Main Street, Rocky Hill, CT 06067 Phone (860) 258-2770 Fax (860) 258-2767
www.ccthd.org

Application for Soil Testing / Addition Review

Owner of Property _____

Owner Address _____

Owner Telephone _____

Testing Location: _____

Testing with:

Engineer _____

Address _____ phone _____

Excavator _____

Address _____ phone _____

- Reason for Testing: New Septic System Septic System Repair
 New Lot Design Confirmation
 Addition Review

Fees: Soil Testing—New \$135.00 _____

Soil Testing—Repair \$110.00 _____

Soil Testing—Addition \$110.00 _____

Addition Review \$55.00 _____

TOTAL DUE _____

Signature of Health District Representative

Date