



DEEP HOLE/PERC TEST Request for Town Engineer Review

Property Owner: _____ Phone: _____
Property Owner's
Address: _____

Location of Test: _____ Tax ID #: _____

*Applicant's Engineer: _____ Phone: _____

Applicant's Agent: _____ Phone: _____

Additional Notes: _____

1. Reason for Request? New Septic System Replacement Septic System Failed Septic System
 Subdivision Site Plan Review

2. Are Wetlands present? YES NO UNKNOWN

*Note: Applicant is required to engage an engineer for design and testing of the system. The Town Engineer's responsibility is to witness system testing only.

PLOT PLAN: Plot plan, to scale, to be submitted with application

FEE SCHEDULE:

- a. \$ 200 Flat Fee Date Paid: _____
Check No.: _____
- b. OR Fee to be determined during To Be Determined: _____
Site Plan / Subdivision review process

SIGNATURE:

In carrying out the provisions of Article IV, the Local Board of Health or the enforcement officer may engage the services of a qualified professional consultant for expert review and recommendation arising from the carrying out of the provisions of Art. IV, including but not limited to the review of plans, specifications and reports, attendance at inspections, dye tests, deep hole test pits, septic related deep hole and percolation tests, system installations, and any other aspect of any matter contained in this Art. IV, and any costs incurred in such review shall be paid to the Town by the owner of the property before any approval can be granted under this Art. IV shall become effective within 30 days of presentment of an invoice for same, whichever is sooner. Such costs shall not exceed \$1,500 without prior written notice to the party to be charged with same.

My signature below indicates I have thoroughly read and understand the instructions, agree to the submission requirements and have completed the application. I also fully understand that additional engineering fees may be necessary per Town of Queensbury Local Law 136-14D.

SIGNATURE OF APPLICANT: _____ Date: _____

SIGNATURE OF AGENT: _____ Date: _____