



Town of Berkley
Massachusetts
Offices of
Board of Health
One North Main Street
Berkley, MA 02779

Phone: 508-822-7828
Fax: 508-386-2100
Email: Boardofhealth@berkleyma.us

Application for Minor Septic Repair

Date: _____

TYPE OF REPAIR: _____

Property Owner: _____

Address of Repair: _____

Engineer (if applicable): _____

Address: _____ Phone: _____

License: _____

Installer: _____

Berkley License: _____ Phone/Cell: _____

Signature of Applicant:

Applications must be submitted with fee.

Check or Money order made out to Town of Berkley.

Fees will vary depending on repair being made.

Replace D-Box \$150.00

Tank Replacement will require a newly engineered plan.

Applications must be completed in full- No Exceptions

**Office Hours: Mon – Wed
9:30 am -2:30 pm**