



App No. _____
Check No. _____
Receipt No. _____

TESTING FEE: \$150.00 per lot
Make check to LLHD or pay online
at www.LLHD.org

Application for Soil Testing

Notes:

1. *If available, please provide a site plan of the property to be tested.*
2. *Please have a post hole digger and water on site for perc testing.*
3. *A transit level/laser may be needed for determining the ground elevation at test holes.*

Date: _____ Property Address: _____ Town: _____

Applicant Name: _____ Phone: _____

Email: _____

Septic Installer or Engineer Name: _____ Phone: _____

Property Water Supply: _____ Well _____ Public Water

Reason for soil testing:

- Septic Repair
- New Septic System (undeveloped single lot)
- Subdivision (creation of more than one lot). Number of lots: _____
- B100a (building addition, lot split) Note: Fee is included with \$50 B100a Application fee

Additional Information:

Signed: _____

Assigned to: _____ Title: _____

Soil Testing Date: _____ Time: _____