



Westport Weston  
Health District

Fee: \$825.00

## Application for Irrigation Well

Property Address: \_\_\_\_\_  
\_\_\_\_\_

Distance from Septic System: \_\_\_\_\_

Distance from Potable Drinking Well: \_\_\_\_\_

Licensed Well Driller: \_\_\_\_\_

Approved:

Rejected:

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sanitarian: \_\_\_\_\_

Date: \_\_\_\_\_

Well completion report received: \_\_\_\_\_

Note: 75' radius from the well must remain on property served unless area served by the town's sanitary sewer system to prevent the reduction of the neighboring properties ability to preserve and maintain a 100% Code Complying Septic System Area.