



**City of Worcester  
Department of Inspectional Services  
Worcester, Massachusetts**

**John R. Kelly**  
Commissioner

**Air, Water and Hazardous Materials Unit**

**Amanda M. Wilson, Director**  
Housing/Health Inspections

**APPLICATION TO ABANDON A SEPTIC SYSTEM**

**Permit Fee \$50.00**

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

**Applicant's Name:** \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

**Applicant's E-mail:** \_\_\_\_\_

**Address of system:** \_\_\_\_\_

**Reason for system abandonment (if connecting to City Sewer please attach a copy of the Sewer Connection Permit):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**System pumped by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant's signature:** \_\_\_\_\_

**For Official Use Only:**

**Date of Inspection:** \_\_\_\_\_

**Tank has been pumped/removed or ruptured and filled with clean sand: Yes      No**

**In accordance with 310 CMR 15.354, the Worcester Department of Inspectional Services approves the abandonment of the septic system located at:**

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

**Inspector:** \_\_\_\_\_ **Date:** \_\_\_\_\_