

Date: _____

I, _____, am the owner of the property at _____
Name Address

in _____. The house located at _____
City/Town Address

in _____ will be my primary, legal residence. I will install the septic system
City/Town

for this property myself.

Signature

This form must be notarized and returned to the Uncas Health District before a permit to install the septic system will be issued.