Westport Weston
Health District

Inspection Fee $100.00

TO: ☐ **Building Department, Weston**
☐ **Building Department, Westport**
☐ **Department of Public Works, Westport**

FROM: **Westport Weston Health District**

RE: **EXISTING SEPTIC TANK ABANDONMENT**

DATE: _____

On _____, an inspection of the existing septic tank located at
(Date)

_____ revealed that the tank had been
(Address)

properly disconnected and abandoned. The reason for tank abandonment is:

☐ **Connection to public sewer.**
☐ **Demolition of a structure.**

This property has:

☐ **Public water**
☐ **Private well water**

cc: File

_____
(Sanitarian)

☐ **Septic Tank Abandonment verified by Westport Public Works**

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