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## Board of Health

### Application for Small Component Repair/Replacement and/or Ejector Pump

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Fee: \$

Permit: 2022-

Location:

Bldg Type: residence

Owner/Applicant:

Phone:

Installer:

MBOH Permit #: IN202-

Cell:

Explanation of Repair or Replacement:

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The undersigned acknowledges that he/she must, before commencing construction for use of the system which is the subject matter of this application, secure any and all other permits which may be required by the laws of the Town of Medfield, and the Commonwealth of Massachusetts, including wherever applicable, an Order of Conditions from the Conservation Commission, a building permit, a plumbing or gas permit, any variances or special permits from the ZBA, any Planning Board approvals, or as well as approval from the Board of Health upon completion. It is also acknowledged that the system must be installed by a person or firm having a permit to install such systems in the Town of Medfield.

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**Owner/Applicant**

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**Application Approval Recommended by:**

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**Environmental Agent to Medfield BOH**

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**Approval Date**

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