OLD VALUES - NEW HORIZONS



BOARD OF HEALTH

3 North Lowell Road, Windham, New Hampshire 03087 (603) 432-3806 / Fax (603) 432-7362 www.WindhamNH.gov

Well Waiver Application

Name of Applicant				
Mailing Address				
Phone #	F	ax #		
Email				
Name of Property Owner				
Mailing Address				
Phone #	F	ax #		
Email				
Property Address				
Map/LotNumber	Zoniı	ngDistrict		
	WAIVER REQU	ESTED		
A waiver is requested from sec	tion(s)			of
the Well Ordinance to permit _				
				_
	Staff Use O	nly		
Received by:	Date	Date of	Hearing	
\$25 Application Fee + \$30 Le				

The following Sections of the Well Ordinance can be waived by the Board of Health.

- **2.5** All wells shall be situated a minimum of 75 feet from any septic system leach field.
 - **2.5.1** If placement of a well is necessary within 74-50 feet of the owners septic system leach field, a waiver from NH DES must be granted and provided to the Community Development Department as part of the application
 - **2.5.2** If placement of a well is necessary within 74-50 feet of any abutting properties septic system leach field, a "standard release form" is required to be approved by NH DES, recorded with the registry of deeds (see RSA 485-A:30-b), and provided to the Community Development as part of the application.
 - **2.5.3** If placement of a well is necessary within 74-50 feet of any abutting properties septic system leach field and there is an existing NH DES waiver to the abutter's well, this must be provided to the Community Development Department as part of the application.
 - **2.5.4** Well easement on adjacent land or dedicated open space can be substituted for a well release. The easement must be recorded at the Registry of Deeds and a recorded copy provided to the Community Development Department as part of the application.
- **2.6** The well location shall be shown on a sketch plan, which shall show the distance from at least two permanent landmark and 50' from the edge of pavement from any State or Town Road.

APPLICATION DIRECTIONS

- 1. All supporting materials for consideration by the Board of Health should be supplied to the Community Development Department with the submission of this application. Applicants are responsible for providing 7 copies of their application and supporting materials to the Community Development Department in advance of the scheduled hearing.
- 2. The a public hearing before the Board of Health with be scheduled within 30 calendar days of receipt of a completed application. Public notice of the hearing will be posted at the Town Hall and Community Development Department, and printed in a local newspaper. Notices will be mailed to those listed on the abutters list as provided by the applicant, at least 7 calendar days prior to the hearing.
- 3. Owner/owners must supply written authorization to allow agents and/or other representatives, to apply and appear on the owner/owners behalf.
- 4. Owner/owner's representative is strongly encouraged to attend the scheduled meeting to present the application before the Board of Health.
- 5. Please note that the Board of Health may conduct a Site Walk of the property that is the subject of this application when properly posted in accordance with RSA 91-A.

Abutter List

INSTRUCTIONS

- 1. Please print the names and legal mailing addresses of all abutters. Visit the Town Assessor's website at http://www.windhamnewhampshire.com/updated/assessing.htm to access GIS to determine which parcels are abutting and for the most up-to-date Ownership Information.
- 2. An abutter means any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration. *See* RSA 672:3.
- 3. Also include the names and legal mailing addresses of the applicant, property owner (if different), and any professionals (engineers, lawyers, etc.) involved with the application.
- 4. TWO SETS OF MAILING LABELS FOR EACH LISTING MUST ALSO BE SUBMITTED.

	T			
Map	Block	Lot	Name	Mailing Address
			Do Not Write in Shaded Areas	
			Do Not Write in Shaded Areas	
			Do Not Write in Shaded Areas	
			Do Not Write in Shaded Areas	
			201100 11110 111 2111100 111100	
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