



TOWN OF FREMONT, NH  
TEST PITS & BED BOTTOM INSPECTIONS  
FREMONT PERMIT APPLICATION



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

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_

Applicant Address: \_\_\_\_\_

☐ SUBDIVISION OF LAND – Test Pits

Tax Map Number: \_\_\_\_\_

Number of Proposed Lots: \_\_\_\_\_ Number of Test Pits: \_\_\_\_\_

☐ Test Pit – Septic System Design

Site Address: \_\_\_\_\_

Tax Map Number: \_\_\_\_\_ Number of Test Pits: \_\_\_\_\_

☐ Bed Bottom Inspection – Septic System Installation

Site Location: \_\_\_\_\_

Tax Map Number: \_\_\_\_\_

\*\*\*\*\*

Scheduled Date and Time: \_\_\_\_\_

(date and times to be scheduled with Building Official – field work schedule generally between 11:00 AM to 3:00 PM)

Contractor/contact: \_\_\_\_\_ Phone \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Fees:

Subdivision Test Pits and Septic System Designs

\$50.00 for the each test pit up to and including four and \$30.00 per test pit thereafter.

Bed Bottom Inspection

\$30.00 and \$20.00 for each re-inspection

\*Fees Payable To: Town of Fremont