



Town of Dedham
Board of Health
26 Bryant St.
Dedham, MA 02026
(781) 751- 9220
F: (781) 751-9229
www.dedham-ma.gov



Private Well Construction

Fee: \$100.00

Type of Well: Drinking Irrigation

Property Owner:

Name: _____
Address: _____
 Dedham, MA 02026
Phone #: _____
Contact person: _____
Phone #: _____
Emergency #: _____

Well Driller Information:

Name: _____
Address: _____

Email: _____
Phone #: _____
Emergency #: _____
MA State License #: _____

Certified Lab:

Name: _____
Address: _____

Email: _____
Phone #: _____

Checklist completed and submitted with application.

*By signing you are confirming that you have read and understand the Town of Dedham Regulations pertaining to private wells. You also agree to abide by these regulations set forth by the Town of Dedham Board of Health. **If your establishment is in non-compliance of these regulations you may have your permit suspended indefinitely.***

Applicant/Owners Signature

Date

FID# or SS#