



# TOWN OF DUXBURY

BOARD OF HEALTH  
TOWN OFFICES  
878 TREMONT STREET  
DUXBURY, MASSACHUSETTS 02332-4499

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## PRIVATE WELL REGISTRATION

The following property has a private well used for:

Drinking Water ( )

Irrigation Only ( )

Address of property: \_\_\_\_\_

Assessor's Parcel No: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Occupant (if other than owner) \_\_\_\_\_

Date Well Installed: \_\_\_\_\_

Name of Well Driller: \_\_\_\_\_

Do you have a Well Water Completion Report? \_\_\_\_\_  
(Department of Environmental Management/Division of Water Resources Form)

If yes, please attach a copy. If no, do you have any knowledge of water volume of well, its depth, its location, type? \_\_\_\_\_

How often do you test the water? \_\_\_\_\_

Date of last water testing? \_\_\_\_\_

Lab performing test: \_\_\_\_\_

*Note: Water testing should be done by a registered laboratory and a copy of the lab report filed with the Duxbury Board of Health by the owner. Commonwealth Massachusetts Drinking Water Standards should be met.*

Date registration filed: \_\_\_\_\_

Name of person filing: \_\_\_\_\_

**ATTENTION: DRINKING WATER WELLS MUST BE TESTED YEARLY.**

"The Mission of the Town of Duxbury is to deliver excellent services to the community in the most fiscally responsible and innovative manner while endeavoring to broaden our sense of community and preserve the unique character of our town."