

APPENDIX E

FORMAT CONSTRUCTION PERMIT
NEIGHBOR NOTIFICATION LETTER

Date:

To:

Re: Department of Health Review of Proposed
Sewage Treatment System for Property

Name:
Address:
Town:
Tax Map #:

Dear

Please be advised that an application for a Construction Permit relative to the construction of a sewage system and/or well proposed for the captioned property has been made to the Putnam County Department of Health. Attached please find a copy of the latest site plan.

If you have any questions, concerns or information which may bear on the Health Department's review of this application, you may call the Health Department at 278-6130.

Very truly yours,

By: _____

Title: _____

Received by: _____

Address: _____

Tax Map #: _____