

AMES ASSOCIATES

Fact Sheet For Septic System Design Please Complete and Return

Client: _____ Home phone: _____
Mailing Address: _____ Work phone: _____

Phone or fax: _____

cell phone: _____

email: _____

Name(s) as to appear on plan: _____

Town & road location: _____

Tax Map # _____ Tax Lot # _____ Lot size: _____ acres/square feet

Subdivision Name: _____ Approval # _____

Residence Occupied full time? Yes No Structure Usable Year-round? Yes No

Foundation Size: _____ Full Basement Crawl Space Slab

Number of Existing Bedrooms: _____ Number of Bedrooms Proposed: _____

Toilet desired in basement? Yes No Do you want Garbage grinder? Yes No

Water Supply? Dug Well Drilled Well Community or Town Lake

Special Considerations? _____

If applicable: please provide a sketch showing: location of existing structures, wells and septic system(s) including septic tank(s) on reverse side of this form or separate attachment(s).

PLEASE FORWARD COPY OF DEED (required) and LAND SURVEY (if available)

Book # _____ Page # _____ Required by the State of New Hampshire

* Balance due must be received in full prior to submission of plans for approval.

* Finance Charge of 1.5%, 18% per annum, on all accounts over 30 days.

* Ames Associates has not been retained to perform a boundary survey and assumes no responsibility for boundary line delineation.

I/We authorize Ames Associates and its agents to enter the above described property to perform all necessary tasks to complete a design of a sewage disposal system for the property. I/We also accept the fees noted on attached quotation (sheet 1 of 2) as a reasonable estimate of costs.

SIGNED (client): _____ DATE: _____

circle one: owner / agent

Ames Associates - 164 NH Route 25, Meredith, NH 03253 - 603.279.5705 / fax 603.279.7878