



TOWN OF MILLIS

OFFICE OF THE BOARD OF HEALTH

900 Main Street #213 • Millis, MA 02054

Phone: 508-376-7042 Fax: 508-376-7053

Application for Renewal of Septic System Installer License FEE - \$ 291.00

Installer's Name: _____

Company Name: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Work Telephone #: _____

Email: _____

Pager/Cell Phone: _____

Names of Employees: _____

The following items are required before a septic installer's license will be issued:

1. Completed Application and check payable to the **Town of Millis** for \$291.00.
2. Evidence of worker's compensation insurance or affidavit if sole proprietor.
3. Town of Millis property owners must obtain a Certificate of Good Standing from the Treasurer's Office

Pursuant to the MGL Ch. 62C, sec. 49A, I certify under penalties that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required by law.

Social Security Number or Federal ID: _____

Signature: _____ Date: _____