

**TOWN OF WENHAM
BOARD OF HEALTH
138 MAIN STREET
WENHAM, MA 01984
978-468-5520 Ext. 4**

***SEPTAGE HAULER
APPLICATION***

Date: _____

NAME:

FIRM:

EMAIL:

STREET ADDRESS:

CITY/TOWN:

TELEPHONE:

FED. ID/SS#:

Total Number of Trucks:

License Numbers:

List Disposal Sites currently used by Name and Complete Address:

Please be advised, you must submit a monthly list of accounts serviced and/or held in the Town of Wenham

Fee: \$ 100.00

Payable to: **TOWN OF WENHAM**
138 Main Street
Wenham, MA 01984