



## Request for Septic/Street Files

Acton Board of Health  
Health Dept. Phone: 978-929-6632  
[www.acton-ma.gov](http://www.acton-ma.gov)  
[health@acton-ma.gov](mailto:health@acton-ma.gov)

*Requested information will be ready for pickup or delivery in 72 hours*

**Date:** \_\_\_\_\_

**Site Address:** \_\_\_\_\_

### Information Requested:

- Soil testing data
- As-built
- Title 5 inspection report
- Pumping records
- Other: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

**Phone:** \_\_\_\_\_

### How would you like to obtain this information?

- Email  
Email address: \_\_\_\_\_
- Mail  
Address: \_\_\_\_\_
- Pick up in person