



Connecticut River Area Health District
455 Boston Post Rd. Suite 7
Old Saybrook, CT 06475

Old Saybrook, Clinton, Deep River, Haddam, Chester, Killingworth, Durham

ENGINEERED PLAN REVIEW



☐ B100A ☐ New ☐ Repair

(\$200.00/Residential - \$300.00/Commercial)

Scan & Pay or Check payable to: CRAHD

ENGINEER: _____ LICENSE # _____

PHONE: _____

EMAIL: _____

PROPERTY ADDRESS: _____

TOWN: _____

OWNER NAME: _____ OWNER PHONE # _____

I attest that the plan submitted for Health District approval is compliant with the CT Public Health Code.

When applicable a copy of the building plans/floor layout must accompany the septic plan.

DATE: _____

PRINT: _____ SIGNATURE: _____

Office Use.....

FEE _____ ☐ Check # _____ ☐ Cash ☐ Credit/Debit

Date Approved: _____ Signature: _____

Date of Plan: _____ Last Revision Date: _____

notes: _____