



Demolition/Abandonment Inspection Application Requirements

Phone (856) 218-4170 Fax (856) 218-4161

Please complete the attached well abandonment/decommissioning application and submit to the Gloucester County Department of Health located at:

Gloucester County Department of Health
204 East Holly Ave
Sewell NJ 08080

Checks made payable to “The County of Gloucester” money orders are accepted at this time. The fee for a single septic or well abandonment is \$75.00. If the septic and well are both being abandoned on the same property, both applications can be submitted at the same time for \$100.00.

Provide the Municipality, Block, Lot, Property Address, Mailing Address, Contact Person’s Name and Contact Person’s Phone Number.

Provide a sketch of the property showing the road, location of all existing structures, location of the well and sewage system to be abandoned and any other information which may be helpful.

Septic system abandonment

- Pumping receipts from a licensed septic pumper will be needed for sewage disposal systems.
- If the septic system is to be removed from the site then receipts from an appropriate disposal facility will be required.
- For commercial sites the material must be tested prior to removal to determine waste classification and appropriate disposal facility.

Once you have provided the above information you will then need to call this department at (856) 218-4170 to arrange a date for an inspector to meet the contact person on site to show us the abandonment has been completed.

**GLOUCESTER COUNTY DEPARTMENT OF HEALTH
SEPTIC SYSTEM ABANDONMENT INSPECTION REQUEST**

NAME OF PROPERTY OWNER _____

MAILING ADDRESS _____

PROPERTY LOCATION (Street Address) _____

NAME and ADDRESS OF CONTACT PERSON (If different than property owner)

CONTACT PERSON'S PHONE NUMBER: _____

MUNICIPALITY: _____ BLOCK _____ LOT _____

SEWAGE DISPOSAL SYSTEM DETAILS (Attach sketch of property if available)

NUMBER OF SEPTIC SYSTEMS ON THE PROPERTY: _____.

YEAR WHEN EACH SEPTIC SYSTEM INSTALLED: (Indicate unknown if you do not know the date of installation)

_____.

WHAT TYPE OF SEWAGE DISPOSAL METHOD IS USED AT THE PROPERTY? (Circle the appropriate method).

MUNICIPAL SEWAGE

CESSPOOL(S)

SEPTIC TANK WITH:

DISPOSAL TRENCHES

DISPOSAL BED

SEEPAGE PIT

LOCATION OF SEPTIC SYSTEM RELATIVE TO BUILDING (e.g. front of house, behind house etc.):

REASON FOR SEPTIC SYSTEM ABANDONMENT :(e.g. new septic system installed, connected to municipal sewer, etc.)

SIGNATURE OF PROPERTY OWNER: _____ Date signed: _____

Office Use Only

Septic system abandonment completed to the satisfaction of the GCHD: Yes / No

Date of Septic system abandonment inspection: _____.

Signature of inspector: _____.

ADDITIONAL COMMENTS: _____

_____.