



**Town of Harwich**  
**Board of Health**  
732 Main Street Harwich, MA 02645  
508-430-7509 – Fax 508-430-7531  
E-mail: health@town.harwich.ma.us

**TITLE 5 INSPECTION OR SYSTEM UPGRADE WAIVER FORM**  
**PROPERTIES IN AREAS TO BE SEWERED**

Waiver – The parties involved acknowledge that the sewage disposal system at the property being transferred has either not been inspected or is not in compliance with current Title 5 and or Harwich Board of Health regulations, i.e. a cesspool system or failed system. In lieu of expenditure to upgrade the disposal system the parties desire to seek a waiver from the Harwich Health Department and agree to connect to the municipal sewer system once available.

**LOCATION** \_\_\_\_\_

**DATE OF TRANSFER** \_\_\_\_\_

**SELLER** Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Attorney \_\_\_\_\_

**BUYER** Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Attorney \_\_\_\_\_

Waiver Type (*please check one*)   ☐ Title 5 Inspection                      ☐ Septic System Upgrade

Which Sewer Connection Phase is the property in? \_\_\_\_\_

**OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Date Connection notice sent: \_\_\_\_\_

☐ Approved   ☐ Denied

Reason if denied \_\_\_\_\_

Signed by: \_\_\_\_\_

*This is a notarized statement signed by all involved parties indicating financial responsibility for the connection to sewer. The Timeframe for connection shall comply with the original order letter to connect. Upgrade of the septic shall be required if it has been determined that it has become a threat to public health.*

I have read and fully understand the terms and conditions of the statement above.

Signature(s) of Owner (Seller) and Legal Address

\_\_\_\_\_

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

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**COMMONWEALTH OF MASSACHUSETTS**

Barnstable, ss.

\_\_\_\_\_ Date

On this \_\_\_\_\_ day of \_\_\_\_\_, the above named appeared before me, the undersigned notary public, and acknowledged the foregoing instrument to be their free act and deed.

Notary Public \_\_\_\_\_

My commission expires \_\_\_\_\_

Signature(s) of Buyer and Legal Address

\_\_\_\_\_

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

\_\_\_\_\_

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Barnstable, ss.

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