



Commonwealth of Massachusetts
City/Town of
Percolation Test
Form 12

Percolation test results must be submitted with the Soil Suitability Assessment for On-site Sewage Disposal. DEP has provided this form for use by local Boards of Health. Other forms may be used, but the information must be substantially the same as that provided here. Before using this form, check with the local Board of Health to determine the form they use.

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



A. Site Information

Owner Name

Street Address or Lot #

City/Town

State

Zip Code

Contact Person (if different from Owner)

Telephone Number

B. Test Results

Observation Hole #

Depth of Perc

Start Pre-Soak

End Pre-Soak

Time at 12"

Time at 9"

Time at 6"

Time (9"-6")

Rate (Min./Inch)

Date

Time

Date

Time

8/6/20
4-1
30"-48"

9:09

9:24

9:24

9:46

10:29

43 min

15 min

8/6/20

4-2

28"-54"

9:30

9:45

9:45

10:12

10:52

40 min

13 min

Test Passed:

Test Failed:

☒
☐

Test Passed:

Test Failed:

☒
☐

Test Performed By:

Witnessed By:

Comments:



Commonwealth of Massachusetts
City/Town of
Percolation Test
Form 12

W1

7/29/20

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Depth of Perc

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End Pre-Soak

Time at 12"

Time at 9"

Time at 6"

Time (9"-6")

Rate (Min./Inch)

Date

Time

7/29/20

PT 1-1

34"-52"

10:57

11:12

11:12

11:35

12:04

29

10 mPI

Test Passed:
Test Failed:



Date

Time

7/29/20

PT 1-2

34"-52"

10:51

11:06

11:06

11:37

12:26

43

15 mPI

Test Passed:
Test Failed:



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7/29/20

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Time at 12"

Time at 9"

Time at 6"

Time (9"-6")

Rate (Min./Inch)

Date

Time

Date

Time

7/29/20

PT 5-1

30" - 48"

12:25

12:40

12:40

2:03

3:30

87 min

29

Test Passed:

Test Failed:



7/29/20

PT 5-2

12:27

12:42

12:42

2:05

3:32

87 min

29

Test Passed:

Test Failed:



Test Performed By:

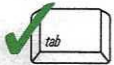
Witnessed By:

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Telephone Number _____

B. Test Results

Observation Hole # _____

Depth of Perc _____

Start Pre-Soak _____

End Pre-Soak _____

Time at 12" _____

Time at 9" _____

Time at 6" _____

Time (9"-6") _____

Rate (Min./Inch) _____

Test Passed: ☐

Test Failed: ☒

Test Passed: ☐

Test Failed: ☐

Test Performed By: _____

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B. Test Results

Observation Hole #

Depth of Perc

Start Pre-Soak

End Pre-Soak

Time at 12"

Time at 9"

Time at 6"

Time (9"-6")

Rate (Min./Inch)

Date

Time

Date

Time

7/30/20
PT 2-1
42"-60"

7:45

8:00

8:00

8:17

8:38

21 min

7 min/in

Test Passed:

Test Failed:

☒
☐

Test Passed:

Test Failed:

☐
☒

Test Performed By:

Witnessed By:

Comments:

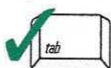


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7/31/20

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Observation Hole #

Depth of Perc

Start Pre-Soak

End Pre-Soak

Time at 12"

Time at 9"

Time at 6"

Time (9"-6")

Rate (Min./Inch)

Date

Time

Date

Time

7/31/20
7-1
24" - 42"

8:22

8:37

8:37

8:59

9:30

31 min

10 mPI

Test Passed:

Test Failed:

☒
☐

7/31/20

Date

Time

7-2
32" - 50"

8:40

8:55

8:55

9:03

9:24

21 min

7 mPI

Test Passed:

Test Failed:

☒
☐

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B. Test Results

Observation Hole # _____

Depth of Perc _____

Start Pre-Soak _____

End Pre-Soak _____

Time at 12" _____

Time at 9" _____

Time at 6" _____

Time (9"-6") _____

Rate (Min./Inch) _____

8/6/20
Date PT 2:4
30"-48"
8:42
8:57
8:57
9:16
9:40
23
8 mpt

Test Passed: ☒

Test Failed: ☐

8/6/20
Date PT 5:3
34"-52"
9:46
10:01
10:01
10:46
12:10
84 mpt
28 mpt

Test Passed: ☐

Test Failed: ☐

Test Performed By: _____

Witnessed By: _____

Comments: _____
84 mpt
7 1/2" : 11:28