

Public Hearing Notice

Date: _____

Abutter's Name: _____

Abutter's Mailing Address: _____

Re: _____

No. Street

Property Owner: _____

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Dear Abutter:

A public hearing has been scheduled for the Harwich Board of Health to take action on an application for variances from the regulations of the Harwich Board of Health and/or Title 5 for Subsurface Disposal of Sewage. The following variances are requested:

List All Variances from State & Local Codes

| Title 5, Section # | Description of Variance(s): |
|---------------------------|------------------------------------|
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| Harwich Reg. # | Description of Variance(s): |
|-----------------------|------------------------------------|
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Said hearing will be held in the _____ Room of the Harwich Town Offices, 732 Main Street, Harwich, on _____ at 6:30 p.m.

The application and plans are available for review at the Harwich Health Department, Harwich Town Hall, 732 Main Street, Harwich, MA; Monday through Friday (excluding holidays) from 8:30 a.m. to 4:00 p.m.

Sincerely,

CC: Harwich Health Department