



BOH Forms: #16 Title 5 Transfer Checklist

_____, Berkshire County, Massachusetts

Phone

Email

This **Checklist** can be used to track transfers of property with onsite septic systems that are subject to Title 5 regulations. This form should be completed and returned to the BOH as soon as possible. BOXES CAN BE CHECKED WITH the CURSOR.

State Law, 310 CMR 15.300, known as Title 5, and the Board of Health (BOH) policies (*where italicized*) require:

- Owners of most transferred properties with onsite septic systems, including those transferred by quit claim deed or cash, must have a valid Title 5 Inspection done by a licensed Title 5 System Inspector and witnessed by a BOH Agent.
- This inspection must be done within 2 years before the property transfers (3 if records show pumping in the 3rd year).
- The Title 5 System Inspector is required to provide the BOH and Owner with a signed Title 5 Inspection Report within 30 days of the inspection. This Report is subject to review by the Board of Health even if passing.
- The Seller is legally responsible for providing the Buyer with a copy of a valid Title 5 Inspection Report before the property transfers. If there is no Title 5 Report because of weather, the New Owner is responsible for obtaining one as soon as possible, but within 6 months. The New Owner is then responsible for resolving any septic problems.
- Title 5 Inspection Reports are not valid unless submitted to the BOH by the Inspector within 30 days of the Inspection.
- If the Title 5 could not take place prior to the time of transfer due to weather, the Seller is legally responsible for providing the Buyer with a written notice that a Title 5 inspection must be done by the Buyer within 6 months.

PROPERTY INFORMATION

Property Address:		City/Town/Zip	
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PROPERTY OWNER INFORMATION

Current Owner	Name:		Email:
Previous Owner	Name:		Email:
Date of Transfer		Date of Title 5 Report	

PROPERTY TRANSFER INFORMATION (if known)

Sellers' Agent	Name: Phone/Email:	Buyers' Agent	Name: Phone/Email:
Sellers' Lawyer	Name: Phone/Email:	Buyers' Lawyer	Name: Phone/Email:

TITLE 5 STATUS DECLARATION

This section must be completed to the best of your knowledge and belief. Must check at least one box.

<input type="checkbox"/> This Property has a current Title 5 Report dated within 2 years of the Transfer	<input type="checkbox"/> Title 5 Report Attached
<input type="checkbox"/> This Property has Title 5 Report within 3 years of Transfer with a pumping rpt.in 3 rd year	<input type="checkbox"/> Pumping Report Attached
<input type="checkbox"/> This Property does not require a Title 5 Report because of the following exemption: <input type="checkbox"/> Transfer is between current spouses, parents and children, or between full siblings. <input type="checkbox"/> The owner/grantor is transferring the property to a trust, where at least one of the beneficiaries is of the first degree of relationship to the grantor.	<input type="checkbox"/> Documentation of the relationship(s) attached. <input type="checkbox"/> Notarized Statements <input type="checkbox"/> Birth Certificates <input type="checkbox"/> Marriage Certificates <input type="checkbox"/> Other, explain

Other, please explain:

SIGNATURE

*I affirm and certify that the information provided above is true, I am 18, the owner of the property referenced above or an authorized representative/agent with authority to submit this form to the Board of Health as allowed by law.

*Name/Title		*Date	
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