

# ONLINE RENEWAL INSTRUCTIONS

- Go to [www.foxboroughma.gov/departments/health/online\\_applications](http://www.foxboroughma.gov/departments/health/online_applications)  
(This is not a live link, please copy and paste this link into your web browser)
- Click on the "CLICK HERE" button under "Board of Health Permit Applications"
- Under "Applicant Name" enter the "Installer Name on Record"

**If this is a RENEWAL, it is likely that you will see the Installer's Name (aka *Applicant Name*) in the drop down list as you begin typing. The software operates case sensitive.**

- Click "Go" once the correct name is inputted
- Once in the portal (if you plugged in the correct name), scroll down. Under "Septic Installer Permit Application" you'll see your Applicant and Company name
- Next to your establishment, click "Edit/Renew Application"

**\*\*\*If you do not see your establishment name/application record, don't panic, just call us at 508-543-1207 and we can help\*\*\***

- **REVIEW ALL INFORMATION WITHIN THE APPLICATION**
  - The information you see on the application was the information submitted last year, this also includes many of the attachments you see (as applicable).
- **CONFIRM ALL INFORMATION IS CURRENT and ACCURATE**
  - If you need to change something, simply delete what's there and input the current information (this INCLUDES attachments). EDIT and/or UPLOAD documents as needed.

**Upload a completed "Worker's Compensation Affidavit"**  
**This Affidavit is required for ALL applications**

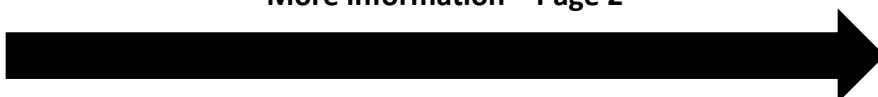
- Upload a current Worker's Compensation Affidavit (as stated above)
- Upload a current Certificate of Insurance (COI) (as applicable).
- Check off "Applicant's Digital Signature" accordingly, confirming all information in the application is accurate.
- Check off "Applicant's Certification" accordingly
- Click "Update" when finished

## **THE SOFTWARE DOES NOT CONFIRM WHETHER YOUR APPLICATION HAS BEEN SUCCESSFULLY SUBMITTED OR NOT**

- After clicking "Update", it will take you back to the main portal page.
- If it doesn't or if there is any question on whether we received your renewal or not, please call the Office at 508-543-1207 to confirm.
- You are done for now – Simply close out ("X" out) of the browser.

## **PAYMENT WILL NOT OCCUR UNTIL AFTER THE HEALTH DEPARTMENT REVIEWS YOUR APPLICATION**

**More information – Page 2**



## **WHAT HAPPENS NEXT...**

*(Please allow a few days for processing and review of applications...)*

If there are no issues with your application, you will receive a notification from the email ***do\_not\_reply@peoplegis.com*** notifying you that you can now pay.

*To pay:*

- \*Follow the link in the email.*
- \*Enter your establishment's address*
- \*Click "Go"*
- \*Find your establishment*
- \*Click "Add to Cart"*
- \*Scroll down to the bottom of the page and "Complete your Purchase".*

**OR**

If additional information is needed, you will receive a notification from the email ***do\_not\_reply@peoplegis.com*** detailing what information is needed.

*To input/submit the requested information:*

- \*Follow the link in the email*
- \*Enter your establishment's address*
- \*Click "Go"*
- \*Find your establishment*
- \*Click "Edit Application"*
- \*Provide the requested information*
- \*When all information has been provided, "check off" the **red statement** that states "Check this box and updated this record if you have provided the requested additional information"*

**Once an application has been approved and paid for, you will receive an email from *do\_not\_reply@peoplegis.com* with your permit(s) attached.**

***Any questions???***

***Reach out to the Foxborough Health Department  
508-543-1207***