Residential Evaluation Survey

(In case you are having trouble with submitting the info, please contact Josef

Name: 
Street Address: 
City: 
State: 
Zipcode: 
Mailing Address (if different from above): 
Daytime Phone (Work or Cell): 
Evening Phone (Work or Cell): 
Email: 
Parcel #: 
Designer: 
Installer: 
City (of Installer): 
State (of Installer): 
Property Size (acres or sq ft): 

A. Home/Residents

Is this your first home with an on-site wastewater treatment system? O Yes O No
Did you receive any septic system user information? O Yes O No
Did you receive the as-built drawing for the system? O Yes O No
Any additions to home since septic system was built? 

Type of Use:

Permanent O

Number of people living in the home

Age Group (Years) Male Female
Adults (18-65) 0 0
Adults (>65) 0 0
Children (<13) 0 0
Teenagers (13-17) 0 0
Guests (Average per month): 0 0

Number of bedrooms: 0
Number of bathrooms: 0
Number of Pets: 0

Number of Pet Baths per month: 0
Number of showers per week: 0
Number of baths per week: 0

Water Supply: Private Well O

Do you have a in-home business? O Yes O No
If you what type? 

Do you use septic system additives? O Yes O No
If yes, what products? 

Frequency 

Type of pretreatment system:

Specific type of system 
Make and Model 
How old is the system? (years) 
Date of last pump out 
Has the system ever backed up? O Yes O No
Has the baffles ever been plugged? O Yes O No
Is there an effluent screen in septic tank outlet? O Yes O No
Has effluent screen ever plugged? O Yes O No
If yes, please mention date(s): 
Has the system ever been repaired? O Yes O No
Has effluent ever surfaced? O Yes O No
Has the alarm ever sounded? O Yes O No

Soil type - at drain field depth or lower: 
Type of distribution/dispersal system: Gravity O
If Other, type of distribution/dispersal system: 
Is water softer used? O Yes O No
Reverse osmosis? O Yes O No
Backwashing water filter (iron, sediment, etc)? O Yes O No
Other water treatment devices: 
Is there an outside power supply? O Yes O No
If yes, does the power supply have its own breaker? O Yes O No
How many amps? 
If there an outside water spigot? O Yes O No