



SUBSURFACE WASTEWATER TREATMENT SYSTEM
For Certified Installer

Property Owners Name: Permit #

Property Address: County:

(Information needs to include location, size, slope, and depth of building sewer, location of cleanouts, location of septic tank, drainfield, and 100% replacement area, location of proposed wells, existing wells, cisterns, and water lines in the area of the system and any lots adjacent to it, lot boundaries, location of water course, irrigation ditches, lakes, ponds, including the 100-year floodplain in the immediate area, % slope of ground surface and direction of slope, location of soil profile holes and any percolation test holes, North point, and scale in feet)

Large empty rectangular box for site information and notes.

This report due back to CMHD within 10 days of completion of the installation of this septic system. Final Septic Permit cannot be issued without receipt of an Installer Report Form

1. Septic Tank

- a. Size: Gallons
b. Concrete/Poly
c. Approved Effluent Filter: Y/N
d. Baffles: Y/N
e. access Port w/in 1 ft. of surface: Y/N

2. Administration

- a. New or Replacement
b. Reason for Failure:
c. Street Address Obtained: Y/N
d. Non-Deg Addressed: Y/N

3. Drainfield

- a. Lineal Feet Installed:
b. Gravel or Gravelless Trenches
c. If Gravelless, Chamber Width: in.
d. If Gravel, Trench Width: in.
e. Inches of Gravel Under Pipes: in
f. Inches of Gravel Over Pipes in.
g. Trench Depth: ft.
h. % Grade of Land Slope: %
i. Dist. From water sources: ft.
j. Groundwater depth: ft.
k. Bedrock Depth: ft.

Installer Signature

Printed Name

Date