# SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
**TCW Wastewater Management, Inc.**
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.283.2740
Fx. 704.283.2733

Date of Inspection: 7-30-2008
___ Initial ✓ 6 month ___ 12 month
___ Follow-up ___ Service call ___ Other

| County | System Type | Drainfield |
|---|---|---|
| IREDELL | PPBCS | ✓ On-site ___ Off-site |

Time: 9:33 Initials CL

Na
Bob Rose
107 Freshwater Lane
Mooresville, NC 28117

Location of System / Drainfield (off-site)
Lot # 267 Phase II Subdivision FARMS

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ___ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√= Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

**Septic Tank:** size: 1500 gallons 1000 = 53" LL 1500 = 43" LL

- Tank risers are accessible ✓
- No odors present ✓
- There are no Infiltration problems ✓
- Surface water is being diverted away ✓
- Tanks and accesses are structurally sound ✓
- Inlet pipe at proper angle N/A
- Inlet tee is in good condition N/A
- Inlet Tee is cleaned today N/A
- Effluent Filter clogging percentage 25%
- Effluent Filter was cleaned No ___ Yes ✓
- Effluent Filter is in good condition ✓
- Effluent Filter Canister is in good condition ✓
- Effluent Filter is snapped in place ✓
- Effluent Pipe at proper angle ✓
- Water level is at proper level ✓

▶ Buried ___ ___"
▶ Surface ___ Subsurface ___

| Scum Level | Sludge Level |
|---|---|
| 0" | 0" |

Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

**Bacteria:**

| | Added at inspection | Left with homeowner |
|---|---|---|
| Pulp | ___pks | ___pks |
| Regular | 0 pks | 0 pks |
| Bio-One | ___ | ___ |

**Effluent Dosing Station:** size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI

- Tank Riser is at proper height ✓
- No odors present ✓
- No infiltration issues: Surface ___ Subsurface ___ ✓
- Required pumps are present & operating properly ✓
- High water alarm is operating properly ✓
- Floats, pipes, valves, disconnects are in good condition ✓
- Pump float is not resting on top of pump ✓
- Control panel enclosure/components are in good condition ✓
- TCW sticker is placed on front door of Panel ✓
- Duct Seal is present in all conduit openings ✓
- Effluent appears clear and free of solids ✓
- Telemetry / Dialer is working properly ✓
- Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22"

Amp. Draw ___

| Scum Level | Sludge Level |
|---|---|
| 0" | 0" |

Tank Needs Pumping: yes ___ No ✓
Filter Cleaned today No ✓ Yes ___
Filter is in good condition ___

Elapsed Time Readings:
Pump #1- C 68.48 - P 59.52 = Usage 8.96 hrs
Usage 8.96 / days 140 = Use Per Day 0.064 hrs
Hrs 0.064 x60 = 3.84 min.x GPM = 153.6 GPD
Average ✓ (<275) Above average ___ (>275) very high ___ (>350)
Pump #1- CC 1004 - PC 879 = Useage 125

**Ground Absorption Fields:**

- No odors present ✓
- There is no evidence of effluent surfacing ✓
- Vegetative cover is maintained properly ✓
- Field Protected from traffic/destructive uses ✓
- Surface water is being diverted away ✓
- Lines are not ponding or holding water ✓
- No low areas or settling occurring ✓
- Line cover (soil) is adequate ✓

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓
▶ If ponding is occuring, how much? ___"
Repair area is properly reserved, maintained ___

**Pressure Manifold System:**

- Manifold vault, valves, piping are in good condition ✓ Corrected Today ___
- No evidence of leakage, blockage in discharge lines ✓ Corrected Today ___
- No evidence of effluent backing up into box ✓
- The Pressure head is properly adjusted ✓ Corrected Today ___

**Low Pressure Pipe System:**

- Turn-ups/cleanouts/valves are intact and accessible ✓ Corrected Today ___
- Laterals are free of excess solids ✓ Jetting necessary ___
- Laterals were flushed this inspection No ___ Yes ✓
- Zone valves are operating properly ✓ Corrected Today ___
- Pressure head is properly adjusted ✓ Corrected Today ___
- Turn-up buckets are dry inside ✓
- Valve box or buckets are dry inside ___

Need replacing? yes ___ / ___

revised 6/24/07

Pump Tank Size (Gallons) : ✓ 1000 _____ 1500 | Design Pump Delivery Rate _____ GPM | Design Dose _________ Gallons

1000 Gallon = 50" = 20 GPI | 1500 Gallon = 52" = 28 GPI

Level End Dose __________ & __________ Level Begin Dose = Difference ________ Inches X ________ GPI = Current Dose ________ Gallons

Level (large #) 72 - 70 Level (small #) = 2 X 20 GPI = 40 ÷ 1 Min. Run Time = 40 GPM (CPDR)

Current GPM (CPDR) ___________ ÷ ___________ Design GPM (DPDR) = ___________ X 100 = ___________ % Efficiency

| Valves | Lines | Design | Observe | Adjusted | Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|---|---|---|---|---|
| | | 3' | 3' | 3' | | | | | |
| 1 | 1 | ↓ | ↓ | ↓ | | | | | |
| 2 | 2 | ↓ | ↓ | ↓ | | | | | |
| 3 | 3 | ↓ | ↓ | ↓ | | | | | |

## Recommendations to Owner:

- System Looks good At This Time

Thanks

Signature of "ORC" Brandon Long

Revised 6/24/07

# SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
**TCW Wastewater Management, Inc.**
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.821.8841
Fx. 704.821.8892

Date of Inspection: 3-12-08

___ Initial ___ 6 month ✓ 12 month
___ Follow-up ___ Service call ___ Other

| County | System Type | Drainfield |
|---|---|---|
| Iredell | ABBMS | ✓ On-site ___ Off-site |

Time: 12:55 Initials BL/DC

Name and Address of Owner:
Bob Rose
107 Freshwater Lane
Mooresville, NC 28117

Location of System / Drainfield (off-site)
Lot # 262 Phase II Subdivision Forms

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ✓ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

✓=Satisfactory M=Marginal X=Unsatisfactory N=Not Evaluated NA=Not Applicable

## Septic Tank: size: 1500 gallons

| | | | |
|---|---|---|---|
| Tank risers are accessible | ✓ | Buried ___ | ___" |
| No odors present | ✓ | | |
| There are no Infiltration problems | ✓ | Surface ___ | Subsurface ___ |
| Surface water is being diverted away | ✓ | | |
| Tanks and accesses are structurally sound | ✓ | | |
| Sanitary tee is in good condition | N/A | | |
| Inlet Tee is cleaned today | N/A | | |
| Effluent Filter was cleaned No ___ Yes ✓ | ✓ | clogged 100% | |
| Effluent Filter is in good condition | ✓ | | |
| Effluent Filter is snapped in place | ✓ | | |
| Water level is at proper level | ✓ | | |

Scum Level 0" Sludge Level 0"
Scum plus Sludge level 0" (SST)
SST ___"/ liquid Depth 43" x 100 = 0 %
**Tank Needs Pumping:** yes ___ No ✓
< 30 % = No > 30 % = Yes

**Bacteria:**
Added at inspection: Pulp ___pks; Regular ___pks; Bio-One ___
Left with homeowner: Pulp ___pks; Regular ___pks; Bio-One ___

## Effluent Dosing Station: size: 1000 gallons

| | |
|---|---|
| Tank Riser is at proper height | ✓ |
| No odors present | ✓ |
| No infiltration issues: Surface ___ Subsurface ___ | ✓ |
| Required pumps are present & operating properly | ✓ |
| High water alarm is operating properly | ✓ |
| Floats, pipes, valves, disconnects are in good condition | ✓ |
| Pump float is not resting on top of pump | ✓ |
| Control panel enclosure/components are in good condition | ✓ |
| TCW sticker is placed on front door of Panel | ✓ |
| Duct Seal is present in all conduit openings | ✓ |
| Effluent appears clear and free of solids | ✓ |
| Telemetry / Dialer is working properly | ✓ |
| Pressure Bell settings: Off 4", On 12"-15", Tele 16", Alarm 22" | |

Scum Level 0" Sludge Level 0"
Tank Needs Pumping: yes ___ No ✓
Amp. Draw ___
Filter Cleaned today No ✓ Yes ___
Filter is in good condition ✓

**Elapsed Time Readings:**
Pump #1- C 59.52 - P 44.19 = Usage 15.33 hrs
Usage 15.33 / days 244 = Use Per Day 0.062 hrs
Hrs 0.062 x 60 = 3.72 min. x GPM = 141.36 GPD
Average ✓ Above average ___ Very high ___
Pump #1- CC 879

## Ground Absorption Fields:

| | | | |
|---|---|---|---|
| No odors present | ✓ | | |
| There is no evidence of effluent surfacing | ✓ | Drop boxes used in lieu of Distribution box | No ___ Yes ___ |
| Vegetative cover is maintained properly | ✓ | Distribution box(es) in good condition | ✓ |
| Field Protected from traffic/destructive uses | ✓ | Distribution box(es) in proper adjustment | ✓ |
| Surface water is being diverted away | ✓ | | |
| No low areas or settling occurring | ✓ | | |
| Line cover (soil) is adequate | ✓ | | |
| Repair area is properly reserved, maintained | ✓ | | |

## Pressure Manifold System:

| | | |
|---|---|---|
| Manifold vault, valves, piping are in good condition | ✓ | Corrected Today ___ |
| No evidence of leakage, blockage in discharge lines | ✓ | Corrected Today ___ |
| The Pressure head is properly adjusted | ✓ | Corrected Today ___ |

## Low Pressure Pipe System:

| | | | |
|---|---|---|---|
| Turn-ups/cleanouts/valves are intact and accessible | ✓ | Corrected Today | ___ |
| Laterals are free of excess solids | ✓ | Jetting necessary | ___ |
| Laterals were flushed this inspection No ✓ Yes ___ | ✓ | | |
| Zone valves are operating properly | ✓ | Corrected Today | ___ Need replacing? yes ___ / ___ |
| Pressure head is properly adjusted | ✓ | Corrected Today | ___ |
| Turn-up buckets are dry inside | ✓ | | |
| Valve box or buckets are dry inside | ✓ | | |

Pump Tank Size (Gallons) : ✓ 1000 ____ 1500 | Design Pump Delivery Rate ______ GPM Design Dose __________ Gallons

Level End Dose __________ - __________ Level Begin Dose = __________ Inches X ________ GPI = Current Dose __________ Gallons

Level (large #) 74 1/4 - 66 3/4 Level (small #) = 7.5 X 20 GPI = 150 ÷ 4 Min. Run Time = 37.5 GPM (CPDR)

Current GPM (CPDR) ___________ ÷ ___________ Design GPM (DPDR) = ___________ X 100 = ___________% Efficiency

| Valves | Lines | Design | Observe | Adjusted | Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|---|---|---|---|---|
| | N/A | | | | | | | | |

## Recommendations to Owner:

- Filter has been corrected
- Filter was clogged 100% Cleaned today
- All else looks ok at this time

Thanks

Signature of "ORC" [illegible signature]

Revised 6/24/07

# SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
**TCW Wastewater Management, Inc.**
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.821.8841
Fx. 704.821.8892

Date of Inspection: 7.16.07
___ Initial ✓ 6 month ___ 12 month
___ Follow-up ___ Service call ___ Other

| County | System Type | Drainfield |
|---|---|---|
| Iredell | PPBPS | ✓ On-site ___ Off-site |

Time: 2:16 Initials MH

Name and Address of Owner:
Bob Rose
107 Freshwater Lane
Mooresville NC 28117

Location of System / Drainfield (off-site)
Lot # 267 Phase II Subdivision FARMS

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ✓ Homeowner ✓ DEH ✓ Builder ___ Owner's Association ___ Developer

✓=Satisfactory M=Marginal X=Unsatisfactory N=Not Evaluated NA=Not Applicable

## Septic Tank: size: 1500 gallons

| | |
|---|---|
| Tank risers are accessible | ✓ |
| There are no Infiltration problems | ✓ |
| Surface water is being diverted away | ✓ |
| Tanks and accesses are structurally sound | ✓ |
| Sanitary tee is in good condition | NA |
| Inlet Tee is cleaned today | NA |
| Effluent Filter was cleaned No ___ Yes | ✓ |
| Effluent Filter is in good condition | ✓ |
| Effluent Filter is snapped in place | ✓ |
| Water level is at proper level | X |

Buried ___ ___"
Surface ___ Subsurface ___

| Scum Level | Sludge Level |
|---|---|
| 0" | 0" |

Scum plus Sludge level 0"
Liquid Depth 43" (> 30%)
Tank Needs Pumping: yes ___ No ✓

**Bacteria:**

| Added at inspection | Left with homeowner |
|---|---|
| Pulp ___ pks | Pulp ___ pks |
| Regular 2 pks | Regular ___ pks |
| Bio-One ___ | Bio-One ___ |

## Effluent Dosing Station: size: 1000 gallons

| | |
|---|---|
| Tank Riser is at proper height | ✓ |
| No infiltration issues: Surface ___ Subsurface ___ | ✓ |
| Required pumps are present & operating properly | ✓ |
| High water alarm is operating properly | ✓ |
| Floats, pipes, valves, disconnects are in good condition | ✓ |
| Pump float is not resting on top of pump | ✓ |
| Control panel enclosure/components are in good condition | ✓ |
| TCW sticker is placed on front door of Panel | ✓ |
| Duct Seal is present in all conduit openings | ✓ |
| Effluent appears clear and free of solids | ✓ |
| Telemetry / Dialer is working properly | ✓ |

Amp. Draw ___

| Scum Level | Sludge Level |
|---|---|
| ___" | 0" |

Tank Needs Pumping: yes ___ No ✓

Filter Cleaned today No ✓ Yes ___
Filter is in good condition ✓

**Elapsed Time Readings:**
Pump #1- C 49.19 - P 31.19 = Usage 13
Usage 13 - days 149 = Use Per Day .122
Pump #1- CC 663

Pressure Bell settings: Off 4", On 12"-15", Tele 16", Alarm 22"

## Ground Absorption Fields:

| | |
|---|---|
| There is no evidence of effluent surfacing | ✓ |
| Vegetative cover is maintained properly | ✓ |
| Field Protected from traffic/destructive uses | ✓ |
| Surface water is being diverted away | ✓ |
| No low areas or settling occurring | ✓ |
| Line cover (soil) is adequate | ✓ |
| Repair area is properly reserved, maintained | ✓ |

Drop boxes used in lieu of Distribution box No ___ Yes ___
Distribution box(es) in good condition /
Distribution box(es) in proper adjustment /

## Pressure Manifold System:

| | | |
|---|---|---|
| Manifold vault, valves, piping are in good condition | / | Corrected Today ___ |
| No evidence of leakage, blockage in discharge lines | / | Corrected Today ___ |
| The Pressure head is properly adjusted | / | Corrected Today ___ |

## Low Pressure Pipe System:

| | | |
|---|---|---|
| Turn-ups/cleanouts/valves are intact and accessible | ✓ | Corrected Today ___ |
| Laterals are free of excess solids | ✓ | Jetting necessary ___ |
| Laterals were flushed this inspection No ✓ Yes ___ | | |
| Zone valves are operating properly | ✓ | Corrected Today ___ |
| Pressure head is properly adjusted | ✓ | Corrected Today ___ |
| Turn-up buckets are dry inside | ✓ | |
| Valve box or buckets are dry inside | ✓ | |

Need replacing? yes ___ ___

revised 6/8/06

Pump Tank Size (Gallons): ____1000 ____1500 | Design Pump Delivery Rate ____ GPM Design Dose ____ Gallons

Level End Dose ____ - ____ Level Begin Dose = ____ inches X ____ GPI = Current Dose ____ Gallons

Level (large #) 5.51 - 3.17 Level (small #) = 2.34 X 20 GPI = 46.8 ÷ 2 Min. Run Time = 23.4 GPM (CPDR)

Current GPM (CPDR) ____ ÷ ____ Design GPM (DPDR) = ____ X 100 = ____ % Efficiency

| Valves | Lines | Design | Observe | Adjusted | Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|---|---|---|---|---|
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## Recommendations to Owner:

Filter on A Angle. Needs to be corrected

All else looks good at this time.

Bacteria has been added in attempt to reduce scum level in Septic. Refer to Do&Don't hints to see how you can help control the build-up. If "pulp" bacteria was added, this indicates there was a lot of paper product. Only 1-ply white toilet paper with no additives is recommended.

Advising builder - Sending Copy of report

Thank You

Signature of "ORC"

Revised 6/8/06

# SUBSURFACE WASTEWATER INSPECTION FORM

| System Manager: | Date of Inspection | ___ Initial ___ 6 month ✓ 12 month |
|---|---|---|
| **TCW Wastewater Management, Inc.** | 2-13-07 | ___ Follow-up ___ Service call ___ Other |
| P.O. Box 1830, Indian Trail, NC 28079 | **County** | **System Type** / **Drainfield** |
| Tele. 704.821.8841 | Iredell | PPBBS / ✓ On-site ___ Off-site |
| Fx. 704.821.8892 | Time: 4:00 | Initials BL |

Name and Address of Owner:
Bob Rose
107 Freshwater Lane
Mooresville NC 28117

Location of System / Drainfield (off-site)

Lot # 267 Phase II Subdivision Farms

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ___ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

✓=Satisfactory M=Marginal X=Unsatisfactory N=Not Evaluated NA=Not Applicable

**Septic Tank:** size: 1500 gallons

| | | | |
|---|---|---|---|
| Tank risers are accessible | ✓ | Buried ___ | ___" |
| There are no Infiltration problems | X | Surface ___ | Subsurface ✓ |
| Surface water is being diverted away | ✓ | | |
| Tanks and accesses are structurally sound | X | | |
| Sanitary tee is in good condition | N/A | | |
| Inlet Tee is cleaned today | N/A | | |
| Effluent Filter was cleaned | No ___ Yes ✓ | | |
| Effluent Filter is in good condition | ✓ | | |
| Effluent Filter is snapped in place | ✓ | | |
| Water level is at proper level | X | | |

| Scum Level | Sludge Level |
|---|---|
| 0" | ___" |

Scum plus Sludge level ___"
Liquid Depth ___" (> 30%)
Tank Needs Pumping: yes ___ No ✓

**Bacteria:**

| Added at inspection | Left with homeowner |
|---|---|
| Pulp ___pks | Pulp ___pks |
| Regular ___pks | Regular ___pks |
| Bio-One ___ | Bio-One ___ |

**Effluent Dosing Station:** size: 1000 gallons

| | |
|---|---|
| Tank Riser is at proper height | ✓ |
| No infiltration issues: Surface ___ Subsurface ___ | ✓ |
| Required pumps are present & operating properly | ✓ |
| High water alarm is operating properly | ✓ |
| Floats, pipes, valves, disconnects are in good condition | ✓ |
| Pump float is not resting on top of pump | ✓ |
| Control panel enclosure/components are in good condition | ✓ |
| TCW sticker is placed on front door of Panel | ✓ |
| Duct Seal is present in all conduit openings | ✓ |
| Effluent appears clear and free of solids | ✓ |
| Telemetry / Dialer is working properly | ✓ |

Amp. Draw ___

| Scum Level | Sludge Level |
|---|---|
| 0" | ___" |

Tank Needs Pumping: yes ___ No ✓

Filter Cleaned today No ✓ Yes ___
Filter is in good condition ✓

**Elapsed Time Readings:**
Pump #1- C 31.19 - P 16.43 = Usage 14.76
Usage 14.76 - days 8 = Use Per Day 1.84
Pump #1- CC 504 good

Pressure Bell settings: Off 4", On 12"-15", Tele 16", Alarm 22"

**Ground Absorption Fields:**

| | |
|---|---|
| There is no evidence of effluent surfacing | ✓ |
| Vegetative cover is maintained properly | ✓ |
| Field Protected from traffic/destructive uses | ✓ |
| Surface water is being diverted away | ✓ |
| No low areas or settling occurring | ✓ |
| Line cover (soil) is adequate | ✓ |
| Repair area is properly reserved, maintained | ✓ |

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓

**Pressure Manifold System:**

| | | |
|---|---|---|
| Manifold vault, valves, piping are in good condition | ✓ | Corrected Today ___ |
| No evidence of leakage, blockage in discharge lines | ✓ | Corrected Today ___ |
| The Pressure head is properly adjusted | ✓ | Corrected Today ___ |

**Low Pressure Pipe System:**

| | | |
|---|---|---|
| Turn-ups/cleanouts/valves are intact and accessible | ✓ | Corrected Today ___ |
| Laterals are free of excess solids | ✓ | Jetting necessary ___ |
| Laterals were flushed this inspection No ✓ Yes ___ | | |
| Zone valves are operating properly | ✓ | Corrected Today ___ Need replacing? yes ___ ___ |
| Pressure head is properly adjusted | ✓ | Corrected Today ___ |
| Turn-up buckets are dry inside | ✓ | |
| Valve box or buckets are dry inside | ✓ | |

Pump Tank Size (Gallons): ✓ 1000 ____ 1500 | Design Pump Delivery Rate ____ GPM Design Dose ____ Gallons

Level End Dose ____ - ____ Level Begin Dose = ____ Inches X ____ GPI = Current Dose ____ Gallons

Level (large #) 13.67 - 5.14 Level (small #) = 8.53 X 20 GPI = 170.6 ÷ 5 Min. Run Time = 34.12 GPM (CPDR)

Current GPM (CPDR) ____ ÷ ____ Design GPM (DPDR) = ____ X 100 = ____ % Efficiency

| Valves | Lines | Design | Observe | Adjusted | Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|---|---|---|---|---|
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**Recommendations to Owner:**

- Still need to replace 12" X 20" E2 riser (cracked) (We are advising your builder and installer)
- Filter in angle causing water level to be high needs to be corrected. (Advising builder & installer)

**Signature of "ORC"** Doug B Thomas

Revised 6/8/06

# SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
**TCW Wastewater Management, Inc.**
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.283.2740
Fx. 704.283.2733

Date of Inspection: 10-7-09
___ Initial ✓ 6 month ___ 12 month
___ Follow-up ___ Service call ___ Other

| County | System Type | Drainfield |
|---|---|---|
| Iredell | PBBS | ✓ On-site ___ Off-site |

Time: 10:25 Initials BL

Bob Rose
107 Freshwater Lane
Mooresville, NC 28117

Location of System / Drainfield (off-site)

Lot # 267 Phase II Subdivision Farms

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ✓ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

## Septic Tank: size: 1500 gallons 1000 = 53" LL 1500 = 43" LL

| | |
|---|---|
| Tank risers are accessible | M |
| No odors present | ✓ |
| There are no Infiltration problems | ✓ |
| Surface water is being diverted away | ✓ |
| Tanks and accesses are structurally sound | ✓ |
| Inlet pipe at proper angle | ✓ |
| Inlet tee is in good condition | N/A |
| Inlet Tee is cleaned today | N/A |
| Effluent Filter clogging percentage | 75 % |
| Effluent Filter was cleaned | No ___ Yes ✓ |
| Effluent Filter is in good condition | ✓ |
| Effluent Filter Canister is in good condition | ✓ |
| Effluent Filter is snapped in place | ✓ |
| Effluent Pipe at proper angle | ✓ |
| Water level is at proper level | ✓ |

▶ Buried ___ ___"
▶ Surface ___ Subsurface ___

Filter End of Tank: Scum Level 0" Sludge Level 1"

Inlet End of Tank: Scum Level ½" Sludge Level 6"
Scum plus Sludge level 6½" (SST)
SST 6½" / liquid Depth 43" x 100 = 15.11 %
Tank Needs Pumping: yes ___ No ✓
< 30 % = No > 30 % = Yes

**Sample of total water depth**
Three distinct zones: good ✓ medium ___ murky ___

**Bacteria:**

| | Added at inspection | Left with homeowner |
|---|---|---|
| Pulp | ___ pks | ___ pks |
| Regular | ___ pks | ___ pks |
| Bio-One | ___ | ___ |

## Effluent Dosing Station: size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI

| | |
|---|---|
| Tank Riser is at proper height | ✓ |
| No odors present | ✓ |
| No infiltration issues: Surface ___ Subsurface ___ | ___ |
| Required pumps are present & operating properly | ✓ |
| High water alarm is operating properly | ✓ |
| Floats, pipes, valves, disconnects are in good condition | ✓ |
| Pump is installed on block or raised platform (min. 6 inches) | ✓ |
| Pump float is not resting on top of pump | ✓ |
| Control panel enclosure/components are in good condition | ✓ |
| TCW sticker is placed on front door of Panel | ✓ |
| Duct Seal is present in all conduit openings | ✓ |
| Effluent appears clear and free of solids | ✓ |
| Telemetry / Dialer is working properly | ✓ |
| Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22" | ___ |

Amp. Draw ___

Scum Level 0" Sludge Level 0"
Tank Needs Pumping: yes ___ No ✓

Filter Cleaned today No ✓ Yes ___
Filter is in good condition ✓

GPM = 37

**Elapsed Time Readings:**
Pump #1- C 103.37 - P 89.31 = Usage 14.06 hrs
Usage 14.06 / days 181 = Use Per Day 0.077 hrs
Hrs 0.077 x 60 = 4.66 min.x GPM = 176.44 GPD
Average ___ (<275) Above average ___ (>275) Very high ___ (>350)
Pump #1- CC 1308 - PC 1319 = Useage 209

## Ground Absorption Fields:

| | |
|---|---|
| No odors present | ✓ |
| There is no evidence of effluent surfacing | ✓ |
| Vegetative cover is maintained properly | ✓ |
| Field Protected from traffic/destructive uses | ✓ |
| Surface water is being diverted away | ✓ |
| Lines are not ponding or holding water | ✓ |
| No low areas or settling occurring | ✓ |
| Line cover (soil) is adequate | ✓ |

▶ If ponding is occuring, how much? ___"

Drop boxes used in lieu of Distribution box: No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓

Repair area is properly reserved, maintained ___

## Pressure Manifold System:

| | | |
|---|---|---|
| Manifold vault, valves, piping are in good condition | ✓ | Corrected Today ___ |
| No evidence of leakage, blockage in discharge lines | ✓ | Corrected Today ___ |
| No evidence of effluent backing up into box | ✓ | |
| The Pressure head is properly adjusted | ✓ | Corrected Today ___ |

## Low Pressure Pipe System:

| | | |
|---|---|---|
| Turn-ups/cleanouts/valves are intact and accessible | ✓ | Corrected Today ___ |
| Laterals are free of excess solids | ✓ | Jetting necessary ___ |
| Laterals were flushed this inspection | No ___ Yes ✓ | |
| Zone valves are operating properly | ✓ | Corrected Today ___ Need replacing? yes ___ / ___ |
| Pressure head is properly adjusted | ✓ | Corrected Today ___ |
| Turn-up buckets are dry inside | ✓ | |
| Valve box or buckets are dry inside | ✓ | |

revised 6/27/09

Pump Tank Size (Gallons) : ____1000 1500 | Design Pump Delivery Rate ____ GPM Design Dose ____ Gallons

1000 Gallon = 50" = 20 GPI 1500 Gallon = 52" = 28 GPI

Level End Dose ____ & ____ Level Begin Dose = Difference ____ Inches X ____ GPI = Current Dose ____ Gallons

Level (large #) ____ - ____ Level (small #) = ____ X ____ GPI = ____ ÷ ____ Min. Run Time = ____ GPM (CPDR)

Current GPM (CPDR) ____ ÷ ____ Design GPM (DPDR) = ____ X 100 = ____ % Efficiency

| Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|
| 1 | 1 | 3' | W | 3' |
| | | ↓ | ↓ | ↓ |
| 2 | 2 | ↓ | ↓ | ↓ |
| | | ↓ | ↓ | ↓ |
| 3 | 3 | ↓ | ↓ | ↓ |

| Valves | Lines | Design | Observe | Adjusted |
|---|---|---|---|---|
| | | | | |

## Recommendations to Owner:

- Please trim bushes away from tank access. 2nd Request
- Flushed lines and set pressure
- All looks ok at this time.

Thanks

Signature of "ORC" Brandon Long

Revised 6/24/07