

## COUNTY OF SAN LUIS OBISPO DEPARTMENT OF PLANNING & BUILDING Septic Tank Inspection Report

BLD-1030 04/30/2018

## **Property Information**

Date of Service /			APN#						
Owner's Name:					Ph	Phone #:			
Address of Inspe	ection:								
Number of Bedrooms				Year Septic		Septic S	ystem Built:		
eptic System	Informatio	n							
•			Septic tank with Septic tan pump		c tank	ank with		☐ Other (describe)	
Tank capacity (gallons):				Number of compa			rtment	s:	
Number of			epth to access	Access risers pres		orese	ent?	Tank filter present?	
access lids:	diameter:	lic	ds:	□ No	□ Ye	es		□ No □ Yes	
Septic Tank Cons	Septic Tank Construction		□ Rectangular	□ Round			☐ Other shape:		
☐ Concrete	☐ Fiberglass		☐ Plastic	□ Brick			☐ Other material:		
Septic Tank Condition:			Lids deteriorated: ☐ No ☐ Yes			Baffle wall deteriorated:□ No □ Yes			
Tank deteriorated: ☐ No ☐ Yes			Inlet tee present: ☐ No ☐ Yes			Outlet tee present: ☐ No ☐ Yes			
House lateral open: ☐ No ☐ Yes			Tank filter clean: ☐ No ☐ Yes			Requires pumping □ No □ Yes			
Riser lids seal properly:			Heavy grease build up: Co			oncrete thickness at lids:			
□ No □ Yes		□ No □ Yes Me			ethod of measurement:				
Overall System Condition: Prior to pumping					was effluent above the outflow tee?   No  Yes				
While pumping d	id effluent re-e	nte	r tank from leach s	system? 🗆	No [	□ Ye	es (may	indicate system failure)	
Signs of surfacing	g effluent obser	vec	d? □ No □ Yes Lo	ocation:					
Any signs of past	drainage probl	em	s? □ No □ Yes L	ocation:					
System appears t	to be functionin	g s	atisfactorily? 🗆 No	⊃ ∐ Yes					
Septage Removal:			Volume pumped (gallons):						
Disposal date:			Septage disposal location: ☐ Paso Robles ☐ Santa Maria ☐ Other (describe)						

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## **Septic Tank Inspection Report**

Date of Service / Maintenance:				APN#					
Summary of Maintenance performed:									
Repairs or upgrades required: $\square$ No $\square$ Yes (If yes, summarize below)									
Comments or Recommendations:									
Sito Man:									
Site Map:									
Indicate locations of structures, wells, flatwork (driveways, patios, etc.), and pertinent natural features (creeks, large trees) in the vicinity of the system.									
Inspector Information		Name of company performing inspection:							
License Number:	□ C-42	Number:		□ NAW	T Number:				
Inspector Name:				☐ Other qualification (describe)					
The useful life of any septic system is determined by numerous factors, including but not limited to: soil									
characteristics, water usage and proper maintenance. This inspection report is based on observations by the inspector and information provided by the system owner. It is not a guarantee of system adequacy.									
			-						
Signature of qualified Inspector		tor	Date		Phone number:				
Return one copy of t		-							
County Department of Planning & Building, Attn: Septic Program 976 Osos St. Room 300, San Luis Obispo, CA 93408									
For questions about septic repair or maintenance visit our website at: <a href="http://www.slocounty.ca.gov/Departments/Planning-Building/Building.aspx">http://www.slocounty.ca.gov/Departments/Planning-Building/Building.aspx</a>									