

MARION COUNTY BUILDING INSPECTION 5155 Silverton Rd NE SALEM OR 97305 503-588-5147

http://www.co.marion.or.us/PW/BuildingInspection

INDIVIDUAL ON-SITE SEWAGE SYSTEM RECORD (to be completed by system installer)

PERMIT NO	 	 	
SITE ADDRESS:_	 		

AS-BUILT PLAN OF CONSTRUCTED SYSTEM:			
Scale: 1" ='	<u> </u>		
	North		
(show all details and dimensions necessary to locate	e all components of the system in the future)		
SYSTEM MATERIALS AND SPECIFICATIONS:	INSTALLERS CERTIFICATION:		
System Design Sewage Flow Gallons/Day	I HEREBY CERTIFY THAT THE ON-SITE SEWAGE SYSTEM IN- STALLED AT THE ABOVE ADDRESS WAS CONSTRUCTED IN ACCOR- DANCE WITH THE REQUIREMENTS OF THE PERMIT AND THE RULES		
TANK Size: total gallons [] single compartment			
Manufacturer: [] double compartment	OF THE ENVIRONMENTAL QUALITY COMMISSION.		
Material: [] flow-through	[] I have tested the septic tank and certify it to be watertight.		
Effluent Sewer: Header Pipe: Size/Mat'l Size/Mat'l	The system was installed by: [] Property Owner (permittee)		
DRAINFIELD rock depth (inches) Box(es)	[] Licensed Sewage Disposal Service		
Rock and under pipe [] Drop [] Concrete	DEQ License Number:		
Pipe total depth [] Distribution [] Plastic			
Drainfield Material (Alternative or perf. pipe)	DEQ Certification Number:		
Total Drainfield Footage Trench Depth Minimum Maximum			
Curtain Drain Depth	Signed:		
Effluent Pump: Pump Model Pump cycle			
times in minutes: on off Gallons per Cycle	Company name:		
ATT Make and Model	(please print)		
Attach an additional sheet for components and materials not listed above.	Date:		
(For Marion County Use Only) The above septic system has been inspected			
and the system is: [] Approved [] Approved with corrections: so	ee inspection report [] Denied		
Signed: Title:	Date:		