SANITARY SURVEY INFORMATION

A sanitary survey will include both a water and septic system evaluation and inspection.

The sanitary survey fee of $290.00 includes the record search, a maximum of two site visits and a maximum of two coliform water samples. After the initial two site visits have been performed each additional site visit will incur a charge of $85.00 per hour. After two coliform samples have been collected a fee of $35.00 will be charged for each additional coliform water sample used for the sanitary survey.

Sewer system requirements:
- Have the septic tank pumped out and submit a copy of the pumper’s report to Okanogan County Public Health. Leave the septic tank lid uncovered and accessible (the lid should cover the tank, however keep soil, rocks etc. off of the lid) until the site inspection has been completed by the inspector.
- If a system was installed prior to 1985 the name of the owner at the time of installation must be provided.
- A copy of the Assessor’s tax sheet must accompany the sanitary survey application.

Water system requirements:
- The Okanogan County Public Health employee must have access to the inside of the house to take the water sample.
- If the well casing or well house is not easily visible, please give the location of the well. If the well is enclosed in a well house, please make sure it is accessible for the inspection.
Sanitary Survey

Assessor’s Parcel #_________________________________  Date: ___________________________
Receipt #: ___________________________

Present Owner’s Name: ____________________________  Buyer’s Name: ____________________________
Send report to: ____________________________  Real Estate Firm: ____________________________
Address: ____________________________  Address: ____________________________
Phone Number: ____________________________  Phone Number: ____________________________
Directions for locating residence: ____________________________

**Information Required For Septic System Survey:**

- Year Installed: ____________________________
- Original Permit Applicant: ____________________________
- Last Owner: ____________________________

**Information Required For Water System Survey:**

- Type of water supply system: (circle one) Drilled  Dug  Spring  Public
- # of Homes served by System: ____________________________
- Water treatment, if any: ____________________________

**Sewage Disposal**

- Septic tank volume adequate? Yes ☐  No ☐  Unknown ☐
- Gallons ____________________________ Unknown ☐
- Constructed of approved materials? Yes ☐  No ☐  Unknown ☐
- Baffles in acceptable condition? Yes ☐  No ☐  Unknown ☐
- Signs of failing drain field? Yes ☐  No ☐  Unknown ☐
- House: ☐Occupied  ☐Vacant  Unknown ☐
- Date of on-site inspection: ____________________________

**Water Supply**

- Water sample taken? Yes ☐  No ☐  Results ____________________________
- Public water system? Yes ☐  No ☐  System ID #: ____________________________
- Well casing and/or house above ground? Yes ☐  No ☐
- Well cap adequately sealed? Yes ☐  No ☐
- Possible source of contamination within 100 ft of well? Yes ☐  No ☐
- Date of on-site inspection: ____________________________

**COMMENTS TO INTERESTED AGENCY**

- Sewage Disposal
  - Sewage disposal system appeared to be functioning adequately at time of survey: Yes ☐  No ☐
  - Sewage disposal system appeared to meet applicable state and county health codes: Yes ☐  No ☐
  - Valid on-site sewage disposal permit on file: Yes ☐  No ☐

- Water Supply
  - Water sample results satisfactory on date shown below: Yes ☐  No ☐
  - Water system appeared to be a satisfactory source of potable water at time of inspection: Yes ☐  No ☐

**See reverse side for notes or comments on deficiencies**

The above statements reflect observed conditions as they existed, and/or laboratory results of samples collected, on the day the evaluation was performed. Observations recorded and statements made are presented here by request and make absolutely no claim, either expressed or implied, for future success or failure of the systems evaluated.
Sewage Disposal Comments:__________________________________________________________________________________________

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Water Supply Comments:____________________________________________________________________________________________

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