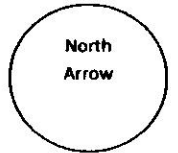


# Town of Wallingford

## SEPTIC SYSTEM AS-BUILT FORM

Owner: \_\_\_\_\_ Address: \_\_\_\_\_ Town: \_\_\_\_\_  
 Installer: \_\_\_\_\_ License#: \_\_\_\_\_ Date of installation: \_\_\_\_\_  
 Percolation rate: \_\_\_\_\_ #of bedrooms or (design flow): \_\_\_\_\_ Required ELA: \_\_\_\_\_ Provided ELA: \_\_\_\_\_  
 Leaching product used(size & type) \_\_\_\_\_ Linear feet: \_\_\_\_\_  
 New septic tank installed?(circle) YES (size) \_\_\_\_\_ NO MLSS required (ft.): \_\_\_\_\_ MLSS provided (ft.): \_\_\_\_\_  
 Minimum distance to well(s): \_\_\_\_\_ Water line(s): \_\_\_\_\_ Deviations from original plan?: YES NO List Health Code Exceptions: \_\_\_\_\_

Drawing: Include cross ties from house, length of leaching system, house sewer at house, septic tank cleanouts, nearby wells, street, driveway, other features, etc.



Tie	1	2	3	4	5	6	7	8	9	10	Tie	1	2	3	4	5	6	7	8	9	10	
A											C											
B											D											

The licensed installer certifies that the leaching system is covered with a minimum of 6 inches of soil and is finished in a condition that will prevent erosion over and adjacent to the leaching system and that the ground surface over the entire system is graded to lead surface water away from the area. The undersigned installer hereby certifies that this septic system conforms to all applicable state and local codes and ordinances and that the information supplied herein is substantially correct.

Licensed Installer: Print: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_ revised1192010

Number of bedrooms in dwelling: \_\_\_\_\_

1. Required square footage of licensed sewage system \_\_\_\_\_ square feet.
2. Actual square footage of installed leaching area \_\_\_\_\_ square feet.
3. Capacity of installed septic tank is \_\_\_\_\_ gallons.
4. Has suitable reserve area with required square footage been set aside for future use? \_\_\_\_\_ Show area on front - page drawing.
5. Minimum distance between building foundation and edge of leaching system \_\_\_\_\_ feet.
6. Minimum distance between building foundation and septic tank \_\_\_\_\_ feet.
7. Is building connected to public water supply? \_\_\_\_\_
8. Minimum distance between sewage system and nearest well \_\_\_\_\_ feet.
9. Minimum distance between edge of leaching system and property borders \_\_\_\_\_ feet.
10. Are all sections of the sewage system at least 25 feet away from any neighboring dwellings? \_\_\_\_\_
11. Were all distribution box outlets level or set as required by approved plans, according to water test? \_\_\_\_\_
12. Was leaching system surrounded with required amount of stone? \_\_\_\_\_
13. Was cast iron pipe used from building foundation to septic tank? \_\_\_\_\_
14. Was there a deviation from original planned system? \_\_\_\_\_ If so, please explain why below.

The undersigned installer hereby certifies that this private sub-surface sewage disposal system conforms to all applicable state and local codes and ordinances and that the information supplied is substantially correct.

Signed: \_\_\_\_\_ License # \_\_\_\_\_ Date \_\_\_\_\_  
(Installer)

Inspected by: \_\_\_\_\_

Name of contractor erecting building: \_\_\_\_\_

Name of Property owner: \_\_\_\_\_