

For Office Use Only: Referred to DCDH:

Town of East Fishkill

Dutchess County, New York

330 Route 376, Hopewell Junction, New York 12533

SEPTIC SYSTEM DATA AND INSPECTION FORM

(To be filled out by a Licensed Inspector)

In accordance with Chapter 152. Sewers, Article III. Individual Subsurface Sewage Disposal Systems, §152-16 to §152-21 of the Town Code of East Fishkill, this form and a copy of the paid receipt for a pump-out and inspection service, shall be submitted within thirty (30) days of service to the Town of East Fishkill Stormwater Management Officer.

Contact person m	ust be indica	itea only if	customer servicea i	is otner tnan a sii	ngie Jamily res	siaence.			
Property Owner: Contact Person:									
Property Address	:								
Tax Grid I.D. #: _									
Service Provider/0	Company Na	me:							
Inspector Name:				NYSDEC License #:					
Property Type:	Single	Family	MultiFamily	Commercial	Industrial	Other:			
Indicate the numb	per of each t	ype of com	ponent evacuated	and the gallons e	vacuated fror	n each compo	nent.		
	<u>Number</u>			Slu % of Componer	udge Layer nt w/sludge la	yer (feet)			
		Septic Tank	s	_					
		Cesspools		. <u> </u>					
	:	Seepage Pit							
		Other		Describe:					
Is there any evide	nce of expos	sed or disch	narged septage ont	o the ground sur	face? Y	'es No			
Structural integrit	y of compor	nent, i.e. se	ptic tank, cesspool	, seepage pit, etc	.: Good	Fair	Poor		
Type of septic tan	k: Con	crete S	steel HDPE (Other				N/A	
Is there any waste	ewater or dr	ainback fro	m drainfield during	g pump-out?	Yes No)			
Describe									
If <u>all</u> questions are	e "No", then	: No	further investigati	on					
If any question is	"Yes", then:	Def	tailed investigation	needed					
Signature of Inspe	ector:				Date:				

Yes

Date of Referral: