



## FULL CIRCLE ENVIRONMENTAL, LLC.

“ENVIRONMENTALLY CONSCIOUS TODAY FOR A CLEANER TOMORROW”

Client Name: Dwight Carson

Client Address: \_\_\_\_\_

Client Phone: \_\_\_\_\_

Property Address: 1345 Dry Crk Rd, Lillington

Client is:  Owner of Record  Realtor  Lender  Buyer  Seller  
 Other (Describe) \_\_\_\_\_

Certified Inspector Name: TIM WOODY

Company Name: FULL CIRCLE ENVIRONMENTAL

Company Address/Phone: Full Circle Env

Services provided shall include:  Inspection meeting minimum requirements  
 Pumping of Tank (recommended at time of inspection)  
 Other (Describe) \_\_\_\_\_

Cost of Services to be provided: (1) \$350 inspection only, (2) \$400/\$450 inspection and digging, (3) \$600 Inspection and pumping (1000 gal)

Client Signature per phone call Date 9/24/19

# On-site Wastewater Inspection

Date of Inspection: 9/24/19

   ? 3?     number of bedrooms

   ?     Gallons per day for designed system size or number of bedrooms as stated in available local health department information

Inspection shall include any part of the system located more than 5 feet from the primary structure that is a part of the operations permit

Copy of Operations permit from \_\_\_\_\_ County Environmental Health Attached

Operations permit not available

Most recent performance, operation and maintenance reports are  attached  not available

Type of water supply  Well  Public Water  Community Water  Spring

### Location of Septic Tank and septic tank details:

  +10'    ft from house or structure

  +100'    ft from well if applicable

  NA    ft from water line if applicable and readily visible (irrigation)

  NA    ft. from property line if said property lines are known

  6"    distance from finished grade to top of tank or access riser (inlet/outlet)

  N    Access riser(s) .... \_\_\_\_\_

  Y    Tank lids intact

  N    Tank has baffle wall .... Describe condition of baffle wall: \_\_\_\_\_

  NA    Inflow to tank is noted as sufficient with no blocked \_\_\_\_\_

  N    Water level in tank is relative to tank outlet HALF FULL-LEAKING

  Y    Outlet T is present..... Describe condition of Outlet T:   POOR

  N    Outlet has filter..... Describe condition of filter:   NEEDS ONE

  N    Effluent exiting the outlet?

  N    Roots present in tank Describe extent of roots: \_\_\_\_\_

  Y    Evidence of tank leakage Describe:   WATER LEVEL LOW

  Y    Evidence of non-permitted connections, such as downspouts or sump pumps

  Y    Connection present from house to tank

  NA    Connection present from tank to next component

  NA    Percentage of solids in tank

  NA    Unable to locate tank. System inspection cannot be completed until tank is located

Date tank was last pumped  unknown

Does system have pump tank?  yes (complete blanks below)  no

  NA    ft from house or structure

  NA    ft from well or spring if applicable

  NA    ft from water line if applicable

  NA    ft. from property line if property lines are known

  NA    ft from septic tank

  NA    Distance finished grade to tank TOP or access riser

  NA    Access riser in place? SHOULD BE AT LEAST 6" ABOVE GRADE

Describe type of access riser:   NA

Describe condition of tank lid   NA

Location of control panel:   ADJ-PIGGYBACK

Condition of control panel:   POOR

  NA    Audible & visible alarms work NOT OBSERVE4D

  NA    Pump turns on and DELIVERS to next component

  Unable to operate pump due to lack of electricity at site at

Dispersal field: Type of system:  Conventional  Accepted  Innovative  Experimental

Pretreatment; Type of Pretreatment \_\_\_\_\_

Brief Description of System Type \_\_\_\_\_

\_\_\_\_NA\_\_\_\_ ft. from property line if property lines are known

\_\_\_\_NA\_\_\_\_ ft from septic/pump tank

\_\_\_\_NA\_\_\_\_ # of lines

\_\_\_\_NA\_\_\_\_ length of lines

\_\_\_\_N\_\_\_\_ Evidence of past or current surfacing at time of inspection

Briefly Describe: \_\_\_\_\_

\_\_\_\_N\_\_\_\_ Evidence of heavy traffic over the dispersal field

\_\_\_\_N\_\_\_\_ Vegetation, grading OR drainage negatively impacting system? \_\_\_\_\_

\_\_\_\_NA\_\_\_\_ Effluent is reaching the dispersal field

Conditions present that prevented or hindered the inspection (NO PERMIT)

Adverse conditions present that require repair or subsequent observation or warrants further evaluation by the local health department. Description of adverse condition:

Client should contact HARNETT County Environmental Health and/or a certified on-site wastewater contractor

Other Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

No representation, warranties or opinions are hereby given, written or expressed otherwise, as to the future performance of onsite wastewater system described herein. This onsite wastewater system inspection is a presentation of system facts in place on date of inspection.

Inspector Signature: \_\_\_\_\_ *TWW* \_\_\_\_\_ Date 9/24/19

