



**SUMMIT COUNTY PUBLIC HEALTH
ENVIRONMENTAL HEALTH DEPARTMENT**

"...promoting the community values of public health, environmental protection and disease prevention..."
P.O. Box 5660 * Frisco, CO 80443 * (970)668-4070 * (970)668-4255 FAX

USE PERMIT INSPECTION REPORT

To apply for a Use Permit, submit this completed form along with processing fee. Application will be processed within 7 - 10 working days of submitting completed form.

NOTES: Not all systems need an inspection. Inspections should not be performed on properties where:

- 1) The septic system was installed and approved within 5 years of closing date.
- 2) Owner has obtained a permit to repair the system.
- 3) Subject system was installed but has never been used.

For property transfers involving multiple systems: Each system on property must obtain a separate Use Permit and so must receive independent inspections.

Current owner:	
Buyer (if applicable):	
Applicant:	Appl. Phone:
Appl. E-mail:	
Site Address:	
Legal Description:	
Mail Copy to:	
Mailing Address:	
Size of the property: _____ acres	
Type of building or structure (if commercial, list all uses or tenants):	
Single Family/ Multi Family/ Commercial/ Outbuilding/ Not Yet Constructed	

I. GENERAL INFORMATION (to be completed by owner or owners agent)

1. Date Onsite Wastewater System installed _____ Date Unknown
2. Type of OWS Tank & Field Vault Incinerator Other _____
3. System Permitted Yes No Original Permit #: S-_____
4. Water Softener Yes No
5. Garbage Disposal Yes No
6. Grease Trap Yes No
7. In Home Business Yes No Type: _____
8. Flow Meter Yes No
9. Number of Bedrooms in House _____
 Number Listed on OWS Permit _____ No permit exists
 Number Listed in Assessor's Records _____
10. House Currently UNoccupied Yes No How Long: _____
11. Has a Sewage Backup Ever Occurred? Yes No

If yes, please explain: _____

12. List any known repairs to the system _____

	Year	Permit#	Company	Frequency
13. Is there a service contract for system components?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
14. Date septic tank last pumped				
15. Water supplied by a well:	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Potability test of well water analyzed within past 12 months	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Potability test results	<input type="checkbox"/> Pass	<input type="checkbox"/> Fail	<i>A pass or fail here does not indicate a pass or fail for the inspection</i>	

The above information is true to the best of the owner's knowledge.

Owner/Agent: _____ Date: ____/____/____



_____ (Legal description)

- d. Does the alarm work? Pass **FAIL**
- e. Type of alarm Audio Visual Both
- f. Do electrical connections appear satisfactory? Yes No NA
- g. Was the pump tank cleaned? Yes No

12. Was the soil treatment area probed to determine its location and to check for excessive moisture, odor, and/or effluent? Yes No **NO SOIL TREATMENT AREA**
- a. Any area subject to damaging erosion Yes No
 - b. Any part of field subject to compaction (Ex.: driveway) Yes No
 - c. Any indication of previous failure **YES** No
 - d. Seepage visible on the surface of the field **YES** No
 - e. Improper vegetation present (trees, large shrubs) Yes No
 - f. Heavy saturation observed in the distribution media **YES** No
 - g. Even distribution of effluent in the field Yes No Unknown
 - h. Snow cover over the absorption area Yes No
 - i. Irrigation present on absorption area Yes No

13. Distance between water well and soil treatment area _____ Feet

14. Inspection Results of OWS:

- Acceptable (No Repairs Needed)
- Acceptable (Repairs Needed- completed during inspection/visit)
Explain/Define Non Permit Repairs that were done

- UNACCEPTABLE** (Repairs Required)
Explain repair work required

- UNACCEPTABLE** (Further Exploratory Work Required)
Explain

Inspector:	Date of Inspection:	Cert. #:
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Inspector Signature: _____

Date: ____/____/____

IV. SKETCH OF SYSTEM (to be completed by Use Permit inspector)

Department Use Only	
Schedule #	EHS Assigned:
Is a service contract required for system? Yes No	Current contract? Yes No
Additional Comments for Permit:	
General Notes:	
<input type="checkbox"/> Use Permit Denied	Reason:
<input type="checkbox"/> Use Permit Approved By:	Date: