SAUK COUNTY SEPTIC VERIFICATION

SAUK COUNTY SEPTIC VERIFICATION							COUNTY Fees: Date App: Appr By:
Name	<u>:</u>						App:
Telepl	none:	Address:					OUNTY USE ONLY es: ate App: ppr By:
City,	State, Zip:		Parce	el#:			
Town	of:		, Sec	, T	N, R	E	
****	********	*******	******	*****	******	*****	*****
A plot Land I report	components: a plan must be prepared Resources & Environme , unless a new soil test/so stem conforming to Coun	nt Office and prepare eptic verification has	red after July 1, 1980 s been requested by t) may t he Dep	oe reviewed a partment for a	nd allowed ny reason to	for this portion of the verify any portion of
Syster	n elevation:	Pit	elevation:				
The so	oil pit was within 5' of th	e existing system, ar	nd the soils to 3' belo	w the s	system are des	scribed as fo	ollows:
Depth	<u>Color</u>	<u>Mottles</u>	<u>Texture</u>		Structure		Boundary
Does	of system:the septic system mainta? () yes () no Com	in at least 3 feet of	separation between	the bas	se of the dispo	ersal comp	onent and the limiting
****	led Soil Tester (CST) Sig	********			CST Lic. N		******
POW	TS Treatment Tank Co	emponents:				Yes	No
a. d.	Is there any evidence of All waste water from h	•		ainfiel	d?		
e.	Did pumping occur the	orugh the manhole?	ins system:				
f.	Was the filter serviced		ooks ota)?				
g. h.	Is the tank in good con Are the baffles in good		acks, etc.)?				
The ta	nk size is gall	ons. Have the baffle	es been replaced?				
Comm	ents:						
Pumpe	ers Signature and Lic. No).	·	Date	Pumped		