

Do-It-Yourself Septic System Inspection Program

Clallam County Environmental Health Services
Physical Address: 223 E 4th Street, Room 130 Courthouse to drop off paper report forms
Mailing Address: 111 E 3rd Street, Port Angeles, WA 98362
Email: Send Fillable PDF DIY Report Forms to EnviroHealth@ClallamCountyWA.gov



DO-IT-YOURSELF SEPTIC INSPECTION CHECKLIST: Sandfilter Drainfield

Assemble tools and materials needed for inspection (pg. 7-9 in the field guide)

Name: _____

Review Safety Rules (pg. 10 of field guide or on website)

Address: _____

Wear Protective Clothing. Do NOT Inspect Alone

Remember, if you encounter problems, please STOP and Call a Professional

Inspection Date: _____

SEPTIC TANK QUESTIONS (pages 11-18 in the field guide)

SOM or USER ID: _____

- | | | | |
|---|---|--------------------------------|--------------------------------------|
| Are the risers watertight with no visible leaks? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Are the risers free of cracks or visible damage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Is the tank free of strong, overpowering odor? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Where is the liquid level in the tank? | <input type="checkbox"/> At Base of Outlet Pipe | <input type="checkbox"/> Above | <input type="checkbox"/> Below |
| Does the scum layer look like living, healthy soil? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Can you clearly see baffles above the scum layer? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the scum layer well below lid opening? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are baffles free of clogs and leaks around the seals? (If concrete—Is it intact and not corroded?) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

Scum and Sludge Measurements

Inlet

Outlet

Scum = _____"

Scum = _____"

Sludge = _____"

Sludge = _____"

Total = _____"

Total = _____"

- | | | |
|---|------------------------------|-----------------------------|
| Did you clean the outlet baffle filter? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does your tank need pumping? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

PUMP TANK QUESTIONS (pages 19-20 in the field guide)

- | | | | |
|--|------------------------------|-----------------------------|--------------------------------------|
| Is the riser water tight and free of cracks and damage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Is the pump tank free of solids? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the pump tank free from corrosion or damage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the electrical junction box intact and free of corrosion and damage to the wires? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are the floats attached to the float tree and not hung up on anything? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| If there's a basket screen present, is it intact and not collapsed? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Does the alarm sound when the alarm float is lifted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Is the control panel free of leaks, corrosion or loose wires? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Did you change the battery in the control panel? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |

DO-IT-YOURSELF SEPTIC INSPECTION CHECKLIST: Sandfilter Drainfield

SANDFILTER QUESTIONS (pages 21-23 in the field guide)

| | | | |
|--|------------------------------|-----------------------------|--------------------------------------|
| Is the liquid level below the top float (alarm float) and underdrain? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the electrical junction box intact and free from corrosion and damage to the wires? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the pump tank free from corrosion or damage? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are the floats attached to the float tree and not hung up on anything? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Does the alarm sound when the alarm float is lifted? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Is there surfacing effluent over the sand filter? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| If inspection ports are present, is there standing water in the ports that is still present 2 hours later? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |

PRESSURIZED DRAINFIELD QUESTIONS (page 24 in the field guide)

If you have a pressurized drainfield or a mound system drainfield, answer the following questions.

| | | | |
|--|------------------------------|-----------------------------|--------------------------------------|
| Are there any strong odors? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are there any mushy or swampy areas or surfacing effluent? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| If inspection ports are present, is there standing water in the ports that is still present 2 hours later? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |

GRAVITY DRAINFIELD QUESTIONS (pages 25-28 in the field guide)

If you have a gravity drainfield, answer the following questions.

| | | | |
|---|------------------------------|-----------------------------|--------------------------------------|
| Are there any strong odors? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are there any mushy or swampy areas or surfacing effluent? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is there standing water inside the inspection port(s)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| If the system has a distribution box, is it accessible? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is the distribution box free of solid waste, scum and clogs? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Is the distribution box free from cracks and leaks? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |
| Does the effluent appear to be flowing evenly into all drain pipes? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not Present |

Close up and Clean-up (page 29 in the field guide)
 All openings covered and lids secured
 Wash and sanitize all tools
 Wash your hands

Submit inspection report (page 30 in the field guide)
 Add comments below: