

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: Pump to Gravity 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)

Wear Protective Clothing. Do NOT Inspect Alone

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

Address: _____

Inspection Date: _____

SOM or USER ID: _____

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

- | | | | |
|---|---|--------------------------------|--------------------------------------|
| 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

<u>Inlet</u>		<u>Outlet</u>
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 |

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DO-IT-YOURSELF SEPTIC INSPECTION CHECKLIST: Pump to Gravity Drainfield

GRAVITY DRAINFIELD QUESTIONS (pages 19-22 in the field guide)

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 23 in the field guide)

All openings covered and lids secured

Wash and sanitize all tools

Wash your hands

Submit inspection report (page 24 in the field guide)