

ONSITE SEWAGE DISPOSAL SYSTEM(OSDS)

Time of Transfer Evaluation Checklist

complete page for each system onsite

System Type:

Residential Commercial
 Other: _____

Number of tanks: _____

Municipal sewer available: Yes No

Municipal water available: Yes No

Total capacity: _____ gallons

Number of systems present: _____

System services: _____

Type of Septic System:

<input type="checkbox"/> Stone and Tile	<input type="checkbox"/> Chambers
<input type="checkbox"/> Elevated/Mounded	<input type="checkbox"/> Pressure Mound
<input type="checkbox"/> Holding Tank(s)	<input type="checkbox"/> Trenched System
<input type="checkbox"/> Deep Trench	<input type="checkbox"/> Block Trench
<input type="checkbox"/> Drywell/Cesspool	
<input type="checkbox"/> Geotextile Sand Filter	
<input type="checkbox"/> Alternative Treatment System (ATS)	
<input type="checkbox"/> Other: _____	

Baffle/sanitary T present: Yes No

Baffle/sanitary T in good condition: Yes No

If no, explain: _____

Effluent Filter: Yes No

Tank in good condition: Yes No

Tank lid(s) present: Yes No

Risers present: Yes No

Lids/Risers in good condition: Yes No

Access to tank secure: Yes No

Tree roots in tank: Yes No

Structure over tank: Yes No

Wastewater above baffle: Yes No

Thickness of Scum: _____ in.

Thickness of Sludge: _____ in.

Thickness of Effluent: _____ in.

Illicit Discharge Observed: Yes No

If yes, discharged to: _____

All plumbing routes to septic: Yes No

Backing up into home: Yes No

Slow Drainage: Yes No

Tank Isolation distances:

Surface Water: _____ ft.

Well: _____ ft.

Lot line: _____ ft

Foundation: _____ ft.

Pump Chamber:

Pump Chamber present: Yes No

If yes:

Pump Operational: Yes No

Accessible for service: Yes No

Alarm present: Yes No

Alarm functional: Yes No

CONTINUE TO NEXT PAGE FOR DISPOSAL AREAS

Septic tank(s):

Disposal Area:

Number of disposal area(s): _____
Approx. bottom area: _____ sq ft.

Size of bed: _____ sq. ft.
(_____ ft. X _____ ft.)

Number of trenches: _____
Trench width: _____ ft. Trench length: _____ ft.

Drainfield Mounded:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Standing water in stone:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>If yes, above lateral:</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Signs of wastewater surfacing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Tree roots in drainfield:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Signs of heavy traffic on field:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Structure over field:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Depth of cover: _____ in.
Distance between groundwater and bottom of
field: _____ in.

Field Isolation distances:

Surface Water: _____ ft.

Well: _____ ft.

Lot line: _____ ft

Foundation: _____ ft.

NOTES ON SEWAGE SYSTEM: _____

SITE PLAN

The site plan must be an accurate, top-down representation of the entire property. The plan must include building footprints and all relevant site features, including but not limited to driveways, pools, ponds, streams, and similar features.

The site plan **must**:

- Be drawn to scale or include exact measurements.
- North arrow
- Clearly show either the scale of the drawing or distances to specific relevant points.

Required Measurements

All site plans must include, at a minimum, the following measurements from a dwelling corner or parcel corner (see example drawings):

- Distance to surface water for:
 - All wells
 - All septic tanks
 - All drainfields
- Distance to the closest lot line for:
 - All wells (if applicable)
 - All septic tanks
 - All drainfields
- Measurements shall be taken **in plan view**, with one measurement parallel and the other **perpendicular (90°)** to the dwelling or property corner (see example drawings).
 - All wells
 - All septic tanks
 - All drainfields

Sewage System Evaluation Requirements

- A minimum number of test holes is required.
- At least one (1) auger outside of the drainfield footprint to determine depth of groundwater.
- At least two (2) augers are required within the drainfield, demonstrating wetness, biomat, or sludge.

The site plan must clearly show the location and conditions of all test holes completed.

Evaluator Observations / Comments / Recommendations

- Based on the information provided in this evaluation report, the Grand Traverse County Environmental Health Division will issue a letter stating whether the onsite sewage disposal system(s) (OSDS) meet the minimum standards for property transfer.
- If significant deficiencies are identified, the property transfer may only occur after required repairs are completed or after a corrective action plan has been approved by the Environmental Health Division and proof of escrow, in an amount equal to one and one-half (1½) times the estimated repair cost, has been submitted.

The observations and recommendations listed above are provided by a Certified Evaluator. The final evaluation determination will be made by the Grand Traverse County Health Department.

Example Site Plans:

