



Darke County General Health District
300 Garst Ave.
Greenville, OH 45331

Monday through Friday
Hours: 8:00 a.m. – 4:00 p.m.
Phone: (937) 548-4196
Fax: (937) 548-9654

SEWAGE INSTALLATION COVER SHEET

This sheet **MUST** be completed in its entirety and left in the outlet riser or submitted to this department, in person, **BEFORE** inspection.

PROPERTY ADDRESS: _____ TOWNSHIP: _____

OWNER(S) NAME: _____ DATE OF DRAWING: _____

OWNER ADDRESS: _____ OWNER PHONE: _____

INSTALLER / COMPANY NAME: _____ INSTALLER PHONE: _____

LOCATION OF SYSTEM (*circle one*): *Front Rear Left Side Right Side* Type of Septic System _____

Manufacturer of Septic Tank: _____ Septic Tank Size: _____

Effluent Filter (*circle one*): *Yes No* Manufacturer of Effluent Filter: _____

Lift Station Size: _____ Manufacturer of Pump: _____

Baseline Pressure (*inches*) _____ Distance from Dwelling to Tank: _____

Distance from Well to Tank: _____ Distance from Tank to Distribution Box: _____

Distances to Addition Boxes: _____, _____, _____, _____ Split Field (*circle one*) *Yes No*

Distance from Splitter to D-Box: _____ Treatment Capacity (*GPD*): _____

Lineal Footage: _____ Gravel-less or Chamber (*circle one*) *Yes No*

Type of Gravel Used: _____ Manufacturer of Gravel: _____

Type of Sand Used: _____ Manufacturer of Sand: _____

Curtain Drain (*circle one*) *Yes No* Inspection Port (*circle one*) *Yes No*

Curtain Drain goes to: _____ (*tile, creek*) Distance from inspection port to that point: _____

Manufacturer of National Pollutant Discharge Elimination Systems (NPDES) _____

Type of Disinfection: _____ (*UV light, chlorination*) Date of Installation: _____

Weather conditions at time of installation: _____

Workers Present: _____

Changes from System Design: _____

COMMENTS: _____

A final as built drawing must be submitted, if necessary, use design sheet on back.

I certify that the sewage treatment system has been installed in accordance with all applicable rules and design specifications of OAC 3701-29

(Signature of installer)

(Date)