

**PRIVATE SEWAGE SYSTEM
INSPECTION REPORT
(ATTACH TO PERMIT)**

County:	Shirburn
Sanitary Permit No.:	SL 40 CTY / 210740
State Plan ID No.:	
Parcel Tax No.:	251280
	19-6-1-04

GENERAL INFORMATION

Permit Holder's Name:	NASSB S.T.H. 67	☐ City ☐ Village ☒ Town of:
	Kevin Casper	Rhine
CST BM Elev.:	100.00	BM Description:
	100.00	Top of 2" PVC Pipe

TANK INFORMATION

TYPE	MANUFACTURER	CAPACITY
Septic	LIDREVIEW	1000
Dosing	COMBO	500
Aeration		
Holding		

ELEVATION DATA

STATION	BS	HI	FS	ELEV.
Benchmark				
Bldg. Sewer				85.92
St/Ht Inlet				85.10
St/Ht Outlet				
Dt Inlet				
Dt Bottom				81.52
Header / Man.				95.06
Dist. Pipe				95.00
Bot. System				94.14
Final Grade				96.73 min
Top Stone				95.23

TANK SETBACK INFORMATION

TANK TO	P/L	WELL	BLDG.	Vent to Air Intake	ROAD
Septic	-	61	17'	-	NA
Dosing					NA
Aeration					NA
Holding					

PUMP / SIPHON INFORMATION

Manufacturer	ZOEUE	Demand		
Model Number	137	GPM		
TDH	Lift 13.54	Friction Loss 3.54	System Head -	TDH 17.0 Ft
Forcemain	Length 173	Dia. 2"	Dist. To Well 61'	

SOIL ABSORPTION SYSTEM

BED / TRENCH DIMENSIONS	Width 5	Length 100	No. Of Trenches 3	PIT DIMENSIONS	No. Of Pits	Inside Dia.	Liquid Depth
SETBACK INFORMATION	SYSTEM TO	P/L	BLDG	WELL	LAKE / STREAM	LEACHING CHAMBER OR UNIT	Manufacturer:
	Type Of System: Com	14'	102'	200'	-		Model Number:

DISTRIBUTION SYSTEM

Header / Manifold	Distribution Pipe(s)	x Hole Size	x Hole Spacing	Vent To Air Intake
Length 10' Dia. 4"	Length 100' Dia. 4" Spacing 11'			25'

SOIL COVER

x Pressure Systems Only

xx Mound Or At-Grade Systems Only

Depth Over Bed / Trench Center 96.73 min	Depth Over Bed / Trench Edges 98.73 / max	xx Depth Of Topsoil	xx Seeded / Sodded ☐ Yes ☐ No	xx Mulched ☐ Yes ☐ No
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COMMENTS: (Include code discrepancies, persons present, etc.)

onsite on 8-1-94; observed piping to Tank Tank Forcemain of 3 Trench lay out size as built. Suchan not a job site

Plan revision required? ☐ Yes ☐ No
Use other side for additional information.

SBD-6710 (R 05/91)

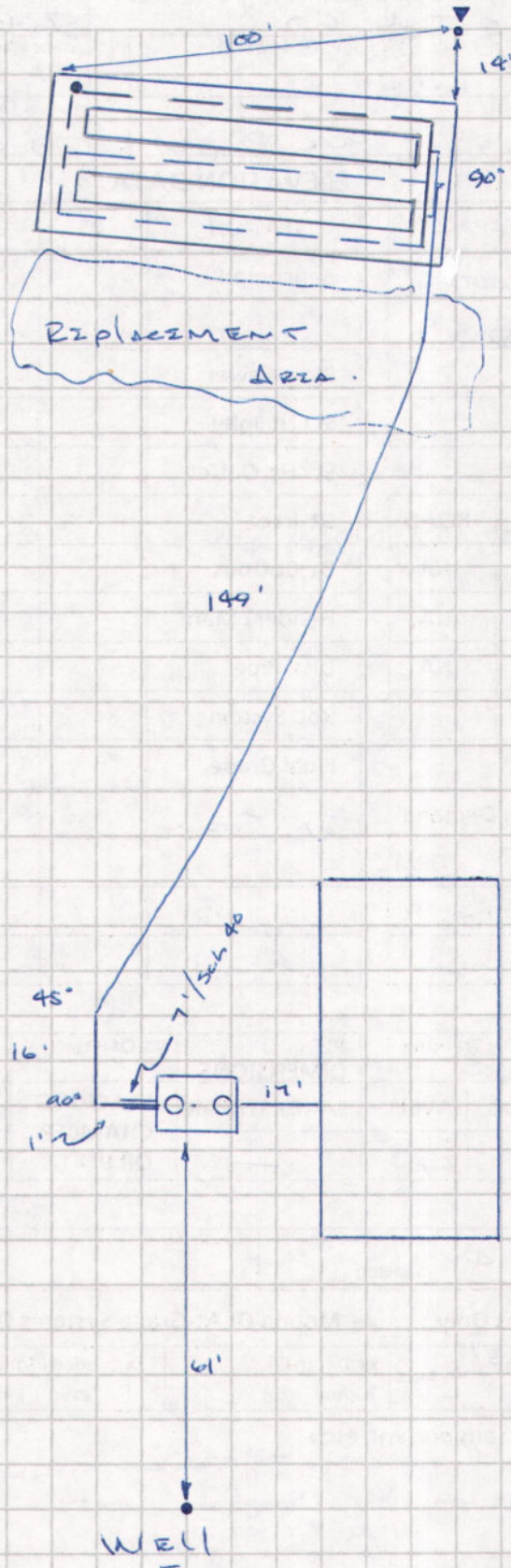
8 1 94
Date

M. J. DeMott
Inspector's Signature

1822
Cert. No.

ADDITIONAL COMMENTS AND SKETCH

SANITARY PERMIT NUMBER: B.M. Top of P.V.C. Pipe



SCALE 1: _____