Benzie Leelanau District Health Department

Existing Septic System Evaluation

Property Information

Parcel No.: 02-024-031-02
County: Benzie County
Township: Benzonia Township
Section: 24
Address: 8505 FAIRWAY DRIVE
City: Beulah
State: MI
Zip: 49617
Subdivision:
Lot:
System Type:

Owner Information

Owner Name: BELL, LAWRENCE D. TRUST

APPLICATION

Application Information

Time of Transfer (POS): Yes
Evaluation Number: B26-273E
Evaluate Existing Sewage Treatment System: Yes
Evaluate Existing Well: Yes

Building Information

Number of Bedrooms: 3
Number of Bathrooms: 3.5
Garbage Disposal: Yes

Applicant Information

Applicant Name: Jon Zickert
Applicant Person: Agent
Company Name: JON ZICKERT GROUP-REAL ESTATE ONE

SEPTIC TANKS

Permit Number: 3757
Type: Septic
Installed By: Bonney Bros
Approved By: Tom Fountain
Approved Date: 05/31/1996
Capacity Gallons: 2000
Compartments: 2
Manufacturer:
Material: Concrete
Riser(s):
Tank Outlet:
Effluent Filter:
Comments:

DRAIN FIELDS

Permit Number: 3757

Installed By: Boney Brothers Excavating

Approved By: Tom Fountain

Approved Date: 05/31/1996

Drain Field Type: Gravity Bed

Aggregate: Stone

Pump Type:

Distribution Area Width (ft): 21

Distribution Area Length (ft): 50

Square Area (sqft): 1050

Drywell Total Capacity (gallons):

Comments:

OPERATIONS / MAINTENANCE

SEWAGE SYSTEM INFORMATION

Inspection Purpose: Time of Transfer

Date of Visit: 10/06/2026

Permit on File: Yes

At Time of Inspection House was: Vacant

Date Tanks Last Pumped: MM/DD/YYYY

Recommend tank(s) to be pumped: Yes

Tank Requires Pumping:

Evidence of Leaking:

Inspection Result: Satisfactory with Recommendations (see comments)

SEWAGE SYSTEM EVALUATION SUMMARY

The Sewage System was inspected on **10/06/2026** . The inspection has determined the system's construction, location, and condition to be **Satisfactory with Recommendations (see comments)** .

SEWAGE SYSTEM EVALUATION COMMENTS:

The home is served by a 2000 – D gallon septic tank and 1050 square feet of drainfield installed in 1996. A boring into the drainfield revealed no signs of sewage ponding or black stone. However, the drainfield is showing signs of tree rooting, which may lead to system failure at some point in the future. The system appears to be functioning at this time. If and when the drainfield fails, suitable soils and area appear to be available for a replacement system. To help prolong the life of the system, routine pumping of the septic tank is recommended. The realtor indicates the septic tank is scheduled to be pumped. This office recommends pumping every 3 - 5 years.

Maintenance practices include diverting surface water drainage away from the system, keeping the area mowed, not driving heavy vehicles or plowing snow over the drainfield, limiting water usage, diverting water softener discharge out of system, spreading clothes washing loads over long periods, checking for leaking fixtures, and routine pumping of the tank (i.e., every 3-5 yrs).

Evaluation Conducted By: Marc Grossnickle, R.S.

Inspector Signature:



Report Issued Date: 10/07/2026

Benzie Leelanau District Health Department

Existing Water Well Evaluation

Property Information

Parcel No.: 02-024-031-02
County: Benzie County
Township: Benzonia Township
Section: 24
Address: 8505 FAIRWAY DRIVE
City: Beluah
State: MI
Zip Code: 49617

Owner Information

Owner Name: BELL, LAWRENCE D. TRUST

APPLICATION

Application Information

Time of Transfer (POS): Yes
Evaluation Number: B26-273E
Evaluate Existing Sewage Treatment System: Yes
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Building Information

Number of Bedrooms: 3
Number of Bathrooms: 3.5
Garbage Disposal: Yes

Applicant Information

Applicant Name: Jon Zickert
Applicant Person: Owner
Company Name: JON ZICKERT GROUP-REAL ESTATE ONE

Well Information

Welllogic ID:
System Type: Residential
Install Date: 11/19/1995
Installed By: Shoebridge Well Drilling
Well Depth: 92
Well Location Type:
Main Casing Diameter (in): 5
Casing Material: Plastic
Flowing:
Flowing Well Controlled:
Pump Type:
Pump Location:
Other Pump Location:

WELL INSPECTION

WATER WELL SYSTEM INFORMATION

Inspection Type: Time of Transfer
Date of Visit: 10/07/2026
Wellhead minimum 12in above grade: No
Proper well cap/seal and secure: Yes
Any wellhead damage: No

Properly isolated from contamination sources: Yes

WATER SAMPLE RESULTS

Water Sample Bacteria: Absent or Non-Detect

Bacteria Sample Date: 10/07/2026

Nitrate (mg/L): 52

Nitrate Sample Date: 10/07/2026

Water samples collected and satisfactory results: Yes

Well construction approved: Yes

Inspection Result:
Satisfactory with Recommendations (see comments)

WATER WELL EVALUATION SUMMARY

The Water Well System was inspected on **10/07/2026** . The inspection has determined the system's construction, location, and condition to be **Satisfactory with Recommendations (see comments)** .

WELL EVALUATION COMMENTS:

The home is served by a 5 inch diameter well with a pitless adaptor and submersible pump. The well depth is 92 feet and was installed in 1995, according to the well log on file.

Water samples collected on 10/7/26 indicated satisfactory water quality for the parameters tested. Periodic water testing is recommended, especially if the well is not used during long periods of time.

Evaluation Conducted By: Marc Grossnickle

Sanitarian Signature:



Report Issued Date: 10/07/2026

SOS ANALYTICAL

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www.sosanalytical.com

COMPANY:	BENZIE LEELANAU DISTRICT HEALTH DEPT	SOS PROJECT NO:	268140 - 1
NAME:	BELL LAWRENCE TRUST	SAMPLED BY::	MG
PROJECT NO:			
WSSN:		DATE RECEIVED:	10/7/2026
WELL PERMIT:	B26-273E	TIME RECEIVED:	2:37 PM
TAX ID:	100202403102	SAMPLE ID:	BATH TAP
LOCATION:	8505 FAIRWAY DR	DATE SAMPLED:	10/6/2026
		TIME SAMPLED:	11:50 AM
	MI	SAMPLE MATRIX:	DRINKING WATER
COUNTY:	BENZIE		
TWP:	BENZONIA		

INORGANICS

Analysis	Concentration	LOD	Units	Analyst	Date Completed	Drinking Water Reg Limit(MCL)
NITROGEN, NITRATE - EPA 353.2	0.52	0.10	mg/L (PPM)	KMJ	10/7/2026	10

SM9223 COLIFORM BACTERIA - PRESENCE/ABSENCE

	SAMPLE RESULT	Drinking Water Reg Limit(MCL)
TOTAL COLIFORM BACTERIA	ABSENT	ABSENT
E. coli BACTERIA	ABSENT	ABSENT

ND = NOT DETECTED
LOD = LIMIT OF DETECTION
SMCL = FEDERAL NON-ENFORCEABLE LIMIT
MCL = MAXIMUM CONTAMINANT LEVEL

APPROVED BY: Cynthia Gerhard
CYNTHIA GERHARD
MANAGER, DRINKING WATER COMPLIANCE

SOS ANALYTICAL, INC. IS CERTIFIED FOR COMPLIANCE MONITORING UNDER THE SAFE DRINKING WATER ACT.
LABORATORY ID# MI9506