

# North Queensbury Wastewater District #1

Town of Queensbury, NY

## INSPECTION WORKSHEET – ONSITE WASTEWATER TREATMENT SYSTEMS (OWTS)

(Septic hauler to complete during pump out and inspection)

To receive 50 percent reimbursement (up to \$150), District #1 homeowners should return this hauler completed inspection worksheet and a copy of the pump out/inspection paid bill to: Town of Queensbury, Budget Officer, 742 Bay Road, Queensbury, NY 12804 (518-761-8200).

Date: \_\_\_\_\_ Septic Hauler: \_\_\_\_\_  
 Inspected by: \_\_\_\_\_ Certification #: \_\_\_\_\_  
 Homeowner: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Number of Bedrooms: \_\_\_\_\_  
 \_\_\_\_\_ Age of OWTS: \_\_\_\_\_

**Septic System Service** (Please circle **Yes** or **No**)

Tank Uncovered? *Yes/No*  
 Inlet/Outlet risers to grade? *Yes/No* If **No**, minutes required to locate tank \_\_\_\_\_  
 Inlet Sanitary Tee *Yes/No*  
 Outlet Baffle *Yes/No* If **Yes**, condition: Good \_\_\_\_\_ Failed: \_\_\_\_\_  
 Liquid Level Acceptable: \_\_\_\_\_ High: \_\_\_\_\_ Below outlet? *Yes/No*  
 Scum Depth Inches: \_\_\_\_\_  
 Sludge Depth Inches: \_\_\_\_\_  
 Toilet flushed? *Yes/No*  
 Other components (circle): Grinder Pump Effluent Pump Effluent Filter

**Evaluation Findings**

Septic system sewage flows into:	<u>Condition</u>
Concrete septic tank _____ gals (tank size)	_____
Plastic septic tank _____ gals (tank size)	_____
Metal septic tank _____ gals (tank size)	_____
Holding tank _____ gals (tank size)	_____
Cesspool _____ gals (tank size)	_____
Enhanced Treatment Unit (ETU): Type: _____ Bedroom Capacity: _____	

**Other Findings:**

Disposal Facility: \_\_\_\_\_ (Note: Waste cannot be disposed of at the Lake George Wastewater Facility.)

Signature of Hauler: \_\_\_\_\_

Signature of Homeowner: \_\_\_\_\_