

# Example Mound Inspection Report\*



**SNOHOMISH  
HEALTH  
DISTRICT**

Parcel Tax Account Number (PTA)

**00433100001XXX**

Inspection Date

03/19/2015

Oss Report Date

03/20/2015

## Property Information

### Site Address

12345 N. Example Road  
SNOHOMISH WA 98296

### Owner Address

Septic Caretaker  
12345 N. Example Road  
SNOHOMISH WA 98296

## On-Site Sewage System

**Oss Source:** Residential  
**Commercial Type:**

**Oss Status:** Maintenance Needed

**Oss Type:** MOUND

### Septic Tank

Inlet baffle condition: **Satisfactory**

Outlet baffle condition: **Satisfactory**

Outlet baffle filter: **Clean**

Watertight (no visual leaks): **Yes**

Risers/lids in good condition--lids secure: **Yes**

Overall tank condition acceptable: **Yes**

Septic tank pumping recommended: **Yes**

Date last pumped (If last pump date is unknown, use the installation date): **3/19/2015**

### Pump Tank

Watertight (no visual leaks): **Yes**

Risers/lids in good condition--lids secure: **Yes**

Overall tank condition acceptable: **Yes**

Pump tank pumping recommended: **No**

Floats functioning properly: **Yes**

Pump draw down consistent with as-built: **NA**

Alarm working satisfactorily: **No**

System time dosed: **No**

On/Off run times consistent with as-built: **NA**

Elapsed time meter reading: **N/A**

### Mound

Appropriate vegetative cover: **Yes**

Monitoring ports accessible: **Yes**

Ponding in any of the ports: **No**

Ponding or saturation noted in bed or toe of mound: **No**

Evidence of physical damage or hydraulic overload: **No**

System appears to be dosing properly: **Yes**

System appears to be properly backfilled: **Yes**

Evidence of system malfunction: **No**

**\* NOTE:** All inspections should include assessment of the septic tank and drainfield/reserve areas. Inspections should also include assessment of pumps or advanced treatment features if present.

### Comment:

The septic tank was pumped the same day as the inspection. The pump tank does not need pumping at this time. Alarm is non-functional. Float does not activate alarm and buzzer doesn't work. No union on pump outlet line. No way to remove pump for service from inside riser. Control float is not attached to anything, freely floating. Redundant off is attached to outlet pipe. No signs of high water level in tank. Appears to be working correctly at this time. Mound is in good condition.

I certify that I have performed the required OSS evaluation on the above referenced property. The information submitted is true and correct to the best of my knowledge. Findings and determinations of this evaluation reflect conditions as they existed on the date the OSS was inspected. No claim is made, either expressed or implied, concerning future success or failure of the OSS.

## Inspector Information

**Business:** Septic Inspector  
**Inspector Name:** John Doe  
**Address 1:** 1234 Main St.  
**Address 2:** Lake Stevens WA 98258  
**Phone:** (425) 555-1234

**Inspector Type:** Monitor Specialist  
**License No:** 0000

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