



APPLICATION FOR SEWAGE / WATER SYSTEM EVALUATION

I hereby request the following inspection, tests, and records check to be conducted by the Auglaize County Health Department.

Sewage:

_____ Private sewage system evaluation/report \$75.00

Water testing options:

_____ Private water system evaluation with standard Coliform bacterial test \$40.00

_____ New FHA water test package (Lead, Coliform, Nitrates, Nitrites, and combination) \$111.00

The home must be serviced by electricity in order to pull the water sample. Please make sure the electric has not been shut off.

The septic tank needs to have a lid(s) accessible so that the tank can be inspected. Do not schedule the inspection until lids are uncovered or accessible.

Signature of Owner / Agent _____ Date _____

Information on the home:

Owner's name _____ Phone _____

Property Address _____

Year the home was built _____ Owner when built _____

Results

Send by (please pick one): MAIL FAX EMAIL PICK UP

Name _____

Address _____

Telephone _____ Fax _____ Email _____