State of Oregon
Department of
Environmental
Quality

EXISTING SEPTIC SYSTEM DESCRIPTION

Please answer the following questions as completely as possible, and to the best of your knowledge.

1. Your existing septic system consists of (check all that apply):
   ☐ Septic Tank ☐ Disposal Trenches ☐ Capping Fill ☐ Sandfilter
   ☐ Seepage Bed ☐ Cesspool or Pit ☐ Unknown
   ☐ Other (Describe) _____

2. When was your septic system installed? _____ _____
   (Date) (Permit Number)

3. Tank material: ☐ Concrete ☐ Steel ☐ Plastic or Fiberglass ☐ Unknown

4. Septic tank volume (in gallons) _____

5. When was the septic tank last pumped? _____ Attach receipt if available.

6. Number of disposal trenches _____

7. Total length of disposal trenches (in feet) _____

8. Do you propose to use the existing septic system? Yes ☐ No ☐

9. Is your septic system currently in use? Yes ☐ No ☐ If no, date of last use _____

10. If the septic system currently serves a dwelling:
    How many bedrooms are in the dwelling? _____ How many people occupy the dwelling? _____

11. How many bedrooms will be in the proposed dwelling? _____ How many occupants ? _____

12. If the septic system serves a business:
    How many total employees are there? _____
    Type of business _____

13. Is there a proposed change of use of your structure (home or business)? Yes ☐ No ☐
    If yes, please explain _____

14. Provide a plot plan (sketch) on the reverse side of this form showing the best estimated or actual measurements that locate the existing septic tank and disposal trenches, property lines, easements, existing structures, driveways, and water supply. Indicate the direction of north. If you are proposing to replace the septic system, indicate the test hole location.

By my signature, I certify that the above information and the plot plan on the reverse side of this form are accurate and true to the best of my knowledge.

_____ _____
(Date) Signature of Property Owner or Legally Authorized Representative

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DEQ use only: Record of existing system: Yes ☐ No ☐ Attached ☐ Date Issued _____
Permit Number _____ Certificate of Satisfactory Completion Issued: Yes ☐ No ☐ Initials _____
Other file information: _____

Last Updated 10-30-02 by BJK

Print Form