Maryland On-Site Sewage Disposal System Inspection Report

** For this inspection to be considered a proper inspection, all sections must be completed**

Pre-Inspection Information

Property Information			
Address:			
City:	State: MD	Zip Code:	
Permitted # of Bedrooms:	Build Year:	Water Supply: ☐ Well ☐ Public Water ☐ Shared Well ☐ Spring	
Property Type: ☐ Single Family Home ☐ Multi-Family Home ☐ Commercial ☐ Other		If Other:	
Comments:			

Owner Information/ Interview	
Last Name:	First Name:
Number of Occupants:	Number of Years Occupied:
If Vacant, Date Vacated (mm/dd/yyyy):	
In-Home Business: ☐ No ☐ Yes	Type:
Has the Property Recently had a Septic Inspection: ☐ No ☐ Yes	Date:
Any Septic System Issues: ☐ No ☐ Yes	Type:
Comments:	

Document Search Information		
Document Request Date:	Septic Permit Reviewed: ☐ Yes ☐ No-Explain in Comments	
Permitted Septic System Components:		
Septic Tank: ☐ Yes ☐ No	Install Year:	Size: gal
BAT Unit: ☐ Yes ☐ No	Install Year:	
Manufacturer: ☐ AquaKlear ☐ Aqua-Safe ☐ Bio-Microbics ☐ BioNest ☐ ClearStream ☐ EcoPod ☐ Fuji Clean ☐ Hoot ☐ Hydro-Action ☐ Jet ☐ Norweco ☐ Orenco ☐ SeptiTech ☐ Waterloo ☐ Other		
Distribution Box: ☐ Yes ☐ No	Pumping Chamber: ☐ Yes ☐ No	
Absorption Type: ☐ Single Trench ☐ Trenches ☐ Drywell ☐ Absorption Bed ☐ At-Grade ☐ Sandmound ☐ Drip ☐ Cesspool ☐ Other (explain)		
Total Trench Length/ Width: Ft	Bed Size (L/W): Ft	Absorption Component Depth: Ft
Comments:		

On-site Inspection

Start Date:	Completion Date:

Crawl Space/ Basement Evaluation

Number of Drain Pipes Exiting Foundation Wall

Describe Each Pipe and Source:

Does Plumbing Evaluation Confirm all Wastewater is Directed into the Septic System: ☐ Yes ☐ No

Water Treatment

Does the House have any Water Treatment Devices: ☐ Yes ☐ No | If Yes, Number:

Describe each Water Treatment Device:

If any, where is the Water Treatment Discharge Directed: ☐ Septic Tank ☐ Separate Drainfield ☐ Surface ☐ Other

Sewer Line Outside of Foundation

Pipe Material: ☐ PVC ☐ Cast Iron ☐ Terra Cotta ☐ Asbestos-Cement ☐ Orangeburg ☐ Lead ☐ Other

Cracks/ Breaks: ☐ Yes ☐ No | Blockage: ☐ No ☐ Yes 10% ☐ Yes 25% ☐ Yes 50% ☐ Yes 75% ☐ Yes 90% ☐ Yes 100%

Comments:

Grease Trap

Grease Trap: ☐ Yes ☐ No | Size: (Gal) | Construction: ☐ Concrete ☐ Fiberglass ☐ Polyethylene ☐ Metal ☐ Other

Liquid Level: ☐ Normal ☐ Above Normal ☐ Below Normal | Proper Baffle: ☐ Yes ☐ No

Comments:

Septic Tank

Septic Tank: ☐ Yes ☐ No | Number of Tanks: | Total Size of Tank(s): (Gal)

Type of Tank(s): ☐ Single Compartment ☐ Two Compartment | Construction: ☐ Concrete ☐ Fiberglass ☐ Polyethylene ☐ Metal ☐ Block ☐ Other

Liquid Level: ☐ Normal ☐ Above Normal ☐ Below Normal | Evidence of High Water Staining: ☐ Yes ☐ No | Effluent Filter: ☐ Yes ☐ No

Inlet Baffle: ☐ Yes ☐ No | Outlet Baffle: ☐ Yes ☐ No | Baffle Condition: ☐ Excellent ☐ Good ☐ Poor

Access: ☐ Riser Above Grade ☐ Riser At Grade ☐ Below Grade | Evidence of Ground or Surface Water Intrusion: ☐ Yes-Riser ☐ Yes-Seam ☐ Yes-Crack ☐ Yes-I/O Pipe Seal ☐ Yes-Other ☐ No

Comments:

Best Available Technology Unit (BAT)			
BAT Unit: ☐ Yes ☐ No	Manufacturer: ☐ AquaKlear ☐ Aqua-Safe ☐ Bio-Microbics ☐ BioNest ☐ ClearStream ☐ EcoPod ☐ Fuji Clean ☐ Hoot ☐ Hydro-Action ☐ Jet ☐ Norweco ☐ Orenco ☐ SeptiTech ☐ Waterloo ☐ Other		
Model:	Power to Control Panel: ☐ Yes ☐ No	Control Panel: ☐ On ☐ Off	
Control Panel Alarm: ☐ Yes ☐ No	Last Service Date:	Was Last Service Date more than 365 days: ☐ Yes ☐ No	
Comments:			

Distribution Box		
Distribution Box: ☐ Yes ☐ No	Number of Drainlines leaving Box:	Distribution Box Level: ☐ Yes ☐ No
Is there Equal Distribution to Drainlines: ☐ Yes ☐ No	Liquid Level: ☐ Normal ☐ Above Normal ☐ Below Normal	
Comments:		

Pumping Chamber	
Pumping Chamber: ☐ Yes ☐ No	Access: ☐ Riser Above Grade ☐ Riser At Grade ☐ Below Grade
Liquid Level: ☐ Normal ☐ Above Normal ☐ Below Normal	High Water Alarm: ☐ Yes ☐ No
Alarm Properly Functioning: ☐ Yes ☐ No	Separate Float Tree: ☐ Yes ☐ No
Pump Elevated off the Bottom of the Tank: ☐ Yes ☐ No	Electrical Connections: ☐ Properly Sealed ☐ Not Sealed
Comments:	

Soil Absorption System		
Absorption Type: ☐ Single Trench ☐ Trenches ☐ Drywell ☐ Absorption Bed ☐ At-Grade ☐ Sandmound ☐ Other		
Observation Pipes (OP): ☐ Yes ☐ No	OP Water Depth: ☐ None ☐ 2 inches ☐ 5 inches ☐ 10 inches ☐ 20 inches ☐ >20 inches	
Trenches Probed: ☐ Yes ☐ No	Describe Observation:	
Evidence of Surfacing Effluent: ☐ Yes ☐ No	Describe:	
Comments:		

Other On-Site Disposal Systems (OSDS) Components and Systems
Detail all other OSDS components not covered in the above sections.
Comments:

OSDS Testing

Hydraulic Load Test		
Hydraulic Load Test Performed: ☐ Yes ☐ No	Testing Volume: Gal	Elapsed Time: Min
Comments:		

Dye Test	
Suspicious Liquid Discharge on or near the Property: ☐ Yes ☐ No	
Dye Test Performed: ☐ Yes ☐ No	Reason:
Comments:	

Tank Pump Out		
Tank(s) Pumped: ☐ Yes ☐ No	Number of Tanks Pumped:	Total Gallons Pumped:
Any Flow into Tank from Outlet Pipe: ☐ Yes ☐ No	Any Groundwater Entering the Tank: ☐ Yes ☐ No	
Does the Tank Appear to be Watertight: ☐ Yes ☐ No-Cracks ☐ No-Roots ☐ No-Other		
Comments:		

Summary/Conclusions

Wastewater Collection System Conveys all Wastewater to Sewer Line:	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Sewer Line	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Grease Trap	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Septic Tank	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
BAT Unit	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Distribution Box	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Pumping Chamber	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
Soil Absorption System	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns
All other OSDS components	☐ Satisfactory	☐ Unsatisfactory	☐ Satisfactory with Concerns

Does any component of the OSDS need to be repaired or replaced: ☐ Yes ☐ No

Explain:

In my professional opinion this OSDS is properly functioning based on permitted capacity: ☐ Yes ☐ No

My Inspection verifies the OSDS is consistent with the septic permit: ☐ Yes ☐ No-Attach Site Diagram of OSDS

If listed for sale, does the number of bedrooms advertised match what is legally permitted: ☐ Yes ☐ No

Comments:

****Check with the Approving Authority for permitting requirements before any repair is performed to the septic system.****

**ATTACH ALL DOCUMENTS PROVIDED BY THE APPROVING AUTHORITY

THIS INSPECTION REPORT DETAILS COMPONENTS AND THE PRESENT CONDITION OF THE ON-SITE SEWAGE DISPOSAL SYSTEM FOR THE ADDRESS LISTED IN THE PROPERTY INFORMATION SECTION OF THIS REPORT. THE CONCLUSIONS OF THIS REPORT DO NOT GUARANTEE OR WARRANTY THIS OSDS WILL FUNCTION IN THE FUTURE.

This inspection of the septic system is an evaluation of function and is not an evaluation that the system meets current State regulations. The owner should not assume future expansion of the home is possible without additional evaluation completed by the Approving Authority.

I attest that I have properly completed an inspection of the OSDS at this property. This inspection includes information obtained from the property owner, or representative, and a document search from the Approving Authority. I have completed all sections pertaining to components of this OSDS. The conclusions of this report are my professional opinions based on my training and experience inspecting OSDS.

First Name:	Last Name:
License Number:	
Signature:	Date: