



ON-SITE SEWAGE TREATMENT AS-BUILT DRAWING

Date: _____ Brand of Tank: _____
Address: _____ Tank Size: _____
Permit #: _____ S.F. of Area: _____
Contractor: _____ Amount of Rock (Ton): _____

SHOW WELL LOCATION AND DISTANCE FROM SEPTIC SYSTEM

N
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Indicate depths or elevations

A. Benchmark (elev.): _____

B. Septic Tank: _____

C. Periodically saturated soil/bedrock: _____

D. Bottom of distribution media: _____

E. Contractor's Signature: _____