# EXISTING HOLDING TANK EVALUATION

## I. SITE INFORMATION

**A. Property Owner:**

Name: Department of Transportation
Kenosha SWEF 21
Mailing Address: Hwy I-94, MP 349.8, 0.25 mile N. of
Illinois Line, Kenosha County
Phone: 262-857-7360

**B. Holding Tank Location:**

Mailing Address: Same as above

Tax Parcel ID:
Legal Description: 1/4 1/4 Sec T N R E
Township:
County: Kenosha

## II. STRUCTURE SERVED BY POWTS

**A. Type & Use:**

Residential: YES (NO) Number of Bedrooms: _____
Design Wastewater Flow: _____ gpd

Commercial: (YES) NO Design Wastewater Flow: _____
Business Type: Safety and weight enforcement facility inspection building

**B. Comments:**

Trench drain → oil/water seperator → holding tank

## III. CONSTRUCTION MAINTENANCE HISTORY

**A. Date of Construction:** 2004

**B. Sanitary Permit No.:**

**C. Repair / Modification Permits:**

**D. Tank Last Pumped:** 9-3-2009

**E. Service Provider:** PATS Sanitary

**F. Additional Information:**

Pumped approximately 200 gallons on 9-3-09 at 8:00 am.

## IV. DAY OF EVALUATION

**A. Date of Field Work:** 9-3-2009

**B. Occupancy:**

Occupied: (YES) NO
Occupants Home at Time of Inspection: (YES) NO

## V. INTERVIEW INFORMATION

**A. Interview Conducted:** (YES) NO

**B. Person(s) Interviewed:**

Name(s): Tom Packard
Relationship to Site: OWNER RENTER REALTOR
(OTHER) (explain): RFW - Management Company

**C. General System Information:**

1. Are you the original owner of the system? (YES) NO
2. Is occupancy year round, seasonal or sporadic? Year round truck inspection
4. Parcel size and property line location? NA
5. Tank(s) located on property? (YES) NO
   Are there easements for those that are not? YES NO (N/A)
6. What is the typical tank pumping frequency? As needed, approx. 3 week to a month
7. When was the tank last pumped? 9-3-2009
8. Have there been any problems or repairs? (describe) (YES) NO
   Pumping frequency increase in spring/summer
9. Does all sewage flow into the holding tank? YES (NO)
10. Where does the graywater discharge go? NA
11. Are you aware of any leaking fixtures? YES (NO)
12. Where do the following discharges go?
    water conditioner: Seale building holding tank
    furnace: Seale building holding tank
    sump pit: Storm sewer
13. Do you have a water meter? (YES) NO

**D. Fixtures & Appliances:**

Do the following discharge to the holding tank?

| | | | |
|---|---|---|---|
| Water Conditioner: | YES | (NO) | TIMED or DEMAND |
| Whirpool or Oversize Tub: | YES | (NO) | |
| Hot Tub: | YES | (NO) | |
| Clothes Washer: | YES | NO | (n/a) |
| Low Flow Shower Heads: | YES | (NO) | |
| Low Flow Flush Toilets: | YES | (NO) | |

**E. Interviewee Comments:**

Increased pumping capacity when unexpected

**F. The information provided in Section V. is accurate to the best of my knowledge.**

Signature

9-3-09
Date

**G. The above information was verbally communicated to me, however, the interviewee has declined to sign this section.**

Evaluator Initials _____ Date _____

## VI. HOLDING TANK

*****Tank to be evaluated prior to pumping.**

**A. Capacity:** 3000 gallons

**B. Tankage Description:** 2 piece concrete precast, mastic centerline seal

**C. Construction Material:** Concrete

**D. Manhole Risers & Covers:**

Located & Opened: (YES) NO

Manhole Location(s): Over Inlet X Center _____ Over Outlet _____

Depth Above or Below Grade: ~6' below grade

Locking Devices Present: (YES) NO

Warning Label Present: (YES) NO

Appear to be Watertight: (YES) NO

Root Infiltration: YES (NO)

Structurally Sound: (YES) NO

**Covers Replaced & Secured:** EWR ***initial here***

**E. Overall Tank Condition:** POOR FAIR (GOOD)

Appears to be Watertight: (YES) NO

Root Infiltration: YES (NO)

**F. Inlet:**

Water Flow Not Caused by Fixture Use: DRIP STEADY FLOW (NONE)

**G. Outlet:**

Does holding tank system have an outlet pipe? YES (NO)

**H. Vent:**

Tank is Vented: (YES) NO

Approved Vent Cap: (YES) NO

**I. Alarm:**

Operational: YES (NO)

**J. Electrical Connections:**

Location: INSIDE (OUTSIDE) of manhole riser

Weatherproof Junction: (YES) NO

Junction is Dry: (YES) NO

Condition of Connections: CORRODED (GOOD)

***** The electrical connections have <u>not</u> been evaluated for electrical code compliance. Only general condition is noted.**

**K. Service Access:**

Is a service opening on the holding tank within 25' of an all-weather access? (YES) NO
Is a suction port for the holding tank within 25' of an all-weather access? YES (NO)
Is there evidence of routine servicing? (YES) NO
If so, what? Truck Tracks Spillage Unlocked Cover(s)
(Records)

**L. Setbacks:**

Separation Distance from:
Well(s): 50' +
Structures: 70' +
Property Lines: ok
Other: _____

**M. Location:**

Area Subject to Receiving Runoff: YES (NO)
Tank is located in or under a structure: YES (NO)

**N. Comments:**

## VII. DETERMINATION OF FUNCTION:

**A. Discharge:**

Does the holding tank have a discharge pipe? YES (NO)

**B. Backup:**

Is there sewage backup into the structure served by the holding tank? YES (NO)

**D. Comments:**

## VIII. OBSERVATIONS & COMMENTS

Two piece tank, reinforced corners. Numerous rust stained areas inside of tank that may be indicative of groundwater infiltration. Seal appears to be in good shape. All risers appear sealed with no leakage apparent (past or present).

## IX. RECOMMENDATIONS

## X. EVALUATOR

Name: Erik Rehr
Business: Ayres Associates
Address: 1802 Pankratz Street
Madison, WI 53704

Phone: 608-443-1271

The information contained herein is true and correct to the best of my knowledge as observed on the date of evaluation. All information reported is based on the condition of the system at the time of evaluation. This report shall not be construed as a warranty, either expressed or implied, that the system will function properly for any particular user or for any period of time in the future.

Signature

Credential & ID Number

9-3-09
Date

## XI. ATTACHMENTS

**A. Records:**

_____ Sanitary Permit(s)
_____ Approved Plan
_____ **Original** Soil Test
_____ Site Diagram
_____ Maintenance Record(s)
_____ Servicing Contract(s)
_____ Deed Affidavit(s)

**B. Additional Materials Included:**

_____ Operation & Maintenance / User's Manual
_____ Informational Guides (list): _____

## XII. CC:

_____ Owner
_____ Buyer
_____ County
_____ Realtor
_____ Lender
_____ Other _____