

EXISTING HOLDING TANK EVALUATION

I. SITE INFORMATION

A. Property Owner: Department of Transportation
 Name: Kansas SWCF 21
 Mailing Address: Hwy I-94, MP 349.8, 0.25 mile N. of Illinois Line, Kansas 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: Kansas

II. STRUCTURE SERVED BY POWTS

A. Type & Use:
 Residential: YES
 Commercial: YES
 Business Type: Safety and weight enforcement facility inspection building
 Number of Bedrooms: NO
 Design Wastewater Flow: NO
 Design Wastewater Flow: gpd

B. Comments:

Trench drawn → oil/water separator → holding tanks

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.

DAY OF EVALUATION

IV.

A. Date of Field Work:

9-3-2007

B. Occupancy:

Occupied: ☒ YES ☐ NO
Occupants Home at Time of Inspection: ☒ YES ☐ NO

INTERVIEW INFORMATION

A. Interview Conducted:

☒ YES ☐ NO

B. Person(s) Interviewed:

Name(s): Tom Polcard
Relationship to Site: ☐ OWNER ☐ RENTER ☐ REALTOR

C. General System Information:

1. Are you the original owner of the system?

☒ YES ☐ NO

2. Is occupancy year round, seasonal or sporadic?

☒ YES ☐ NO

4. Parcel size and property line location?

☒ YES ☐ NO

5. Tank(s) located on property?

☒ YES ☐ NO

Are there easements for those that are not?

☒ YES ☐ NO

6. What is the typical tank pumping frequency?

☒ YES ☐ NO

7. When was the tank last pumped?

☒ YES ☐ NO

8. Have there been any problems or repairs? (describe)

☒ YES ☐ NO

9. Does all sewage flow into the holding tank?

☒ YES ☐ NO

10. Where does the graywater discharge go?

☒ YES ☐ NO

11. Are you aware of any leaking fixtures?

☒ YES ☐ NO

12. Where do the following discharges go?

☒ YES ☐ NO

water conditioner:

☒ YES ☐ NO

furnace:

☒ YES ☐ NO

sump pit:

☒ YES ☐ NO

13. Do you have a water meter?

☒ YES ☐ NO

D. Fixtures & Appliances:

Do the following discharge to the holding tank?

Water Conditioner: ☒ YES ☐ NO

Whirlpool or Oversize Tub: ☒ YES ☐ NO

Hot Tub: ☒ YES ☐ NO

Clothes Washer: ☒ YES ☐ NO

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

Date

9-3-07

VI.

HOLDING TANK

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

Evaluator Initials _____

Date _____

***Tank to be evaluated prior to pumping.

A. Capacity: _____ gallons

B. Tankage Description: _____

C. Construction Material: _____

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

Warning Label Present: YES

Appear to be Watertight: YES

Root Infiltration: NO

Structurally Sound: YES

Covers Replaced & Secured: YES

Initial here

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 not 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
Is a suction port for the holding tank within 25' of an all-weather access? YES
Is there evidence of routine servicing? YES
If so, what? Records
Truck Tracks NO
Spillage NO
Unlocked Cover(s) NO

L. Setbacks:

Separation Distance from:

Well(s): 50' +

Structures: 20' +

Property Lines: 20' +

Other: _____

M. Location:

Area Subject to Receiving Runoff: YES

Tank is located in or under a structure: NO

N. Comments:

VII.

DETERMINATION OF FUNCTION:

A. Discharge:

Does the holding tank have a discharge pipe? NO

B. Backup:

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

D. Comments:

VIII.

OBSERVATIONS & COMMENTS

Two pipe tanks installed in corners. Numerous rust stained areas inside of tanks that may be indicators of groundwater infiltration. Seal appears to be in good shape. All users appear sealed with no leakage apparent (pest or present)

IX.

RECOMMENDATIONS

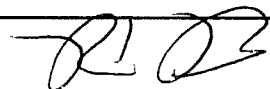
EVALUATOR

X.

Name: Eric Rahr
Business: Agas Associates
Address: 1802 Punkeritz Street
Madison, WI 53724
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

Date

9-3-09

ATTACHMENTS

XI.

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 _____