

# Report of System Status Application



O&M Record ( <i>Office Use</i> ) _____ <b>Mail to Information:</b> Name _____ Address _____ City _____ State _____ Zip _____ Phone _____ Lot Number _____ Subdivision _____ <b>Building Type:</b> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Mobile Home Park <input type="checkbox"/> Food Service <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/>	RSS Application ( <i>Office Use</i> ) _____ <b>Site Information:</b> Owner Name _____ Parcel Number _____ Site Address _____ City _____ State _____ Zip _____ Number of Buildings _____ Lot Size in Sq Ft _____	Closing Date _____ Validation
<b>Water Supply:</b> <input type="checkbox"/> Public Water Company _____ ID _____ <input type="checkbox"/> Individual Well <input type="checkbox"/> Spring		

**System Information:**

- 1. Number of Occupants \_\_\_\_\_
- 2. Vacant?  Yes, If vacant how long? \_\_\_\_\_  No
- 3. Garbage Disposal?  Yes  No
- 4. Number of Bedrooms \_\_\_\_\_
- 5. Have any septic system malfunctions occurred during your ownership of this property?  Yes  No
- 6. Have any alterations or repairs been made to the septic system during your ownership?  Yes  No

**If you answered 'Yes' to either question 5 or 6 you must provide a brief description below.**

I certify that the information on this application is true and correct to the best of my knowledge, and I understand I can be held liable for making false statements. I am authorized by the legal property owner to request inspection for this location and grant consent to employees of the Tacoma-Pierce County Health Department to allow access to this property for inspection related to this application.

Signature _____	Date _____
Fax Number _____	Attention _____
Email Address _____	

**Additional Information:** Dogs?  Yes  No Locked Gates?  Yes Gate Code \_\_\_\_\_  No

**Directions/Comments** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Microfilm Records** **Please allow 10 working days for inspection of the property to be completed.** **TPCHD Bar Code**