

FORM 3 A-E REPAIR PROPOSAL – REV 13.03.07 – Previous Versions are Obsolete.

Failure Information Sheet

System Type (circle one) Gravity, Pump to Gravity, PD, Mound, Sand Filter-_____ Sand Bed,
Other _____

Underneath each box that is checked, fill out the information which applies

☐ **Septic Tank:**

Single _____ Double _____ Size (Volume) _____
 Outlet baffle in place Yes _____ No _____
 Filter baffle Yes _____ No _____
 Does tank have high water mark Yes _____ No _____
 Sludge and Scum levels ____/_____
 Outlet in relation to ground water _____
 Ground or Surface water Intrusion _____

☐ **Pump Tank:**

Sludge level _____
 Dose volume _____
 Timer settings On _____ Off _____ time
 Pump draw down _____
 DO level _____
 Ground or Surface water Intrusion _____

☐ **PD System:** Age _____

Is the effluent surfacing _____ where _____
 When was the system last in use _____
 Water use figures avg. daily flow _____ Peak _____
 Is pump tank lower or higher than DF _____
 Is the site sloping Yes _____ No _____
 Appropriate % slope _____
 Manifold fed from top or bottom _____
 Check valves on the manifold Yes _____ No _____
 Are all laterals failed Yes _____ No _____
 which laterals _____ (Attach drawing)
 Depth of drainfield _____ Depth of soil _____

☐ **Gravity DF:** Age _____

Is the effluent surfacing _____ where _____
 When was the system last in use _____
 Water use figures avg. daily flow _____ Peak _____
 Sloping or level site _____
 Serial distribution _____ Interconnected loop _____
 Equal distribution _____
 D-box condition _____
 Depth of drain field _____ Depth of Soil _____
 Vertical Separation _____ Water table _____
 Drain tiles Yes _____ No _____ condition _____
 Other _____ describe _____

☐ **Mound:** Age _____

Is the effluent surfacing _____ where _____
 When was the system last in use _____
 Water use figures avg. daily flow _____ Peak _____
 Sloping or level site _____
 Ground water on upper and lower edge of mound _____
 Is the bed level Yes _____ No _____ If no how far off end to end _____
 Is there a timer Yes _____ No _____ Settings _____
 Dose volume _____ Draw down on pump _____ How thick is the bio-mat _____
 Is the gravel black Yes _____ No _____ Is the mound ponding water Yes _____ No _____ Depth _____ Inspection Port

Subsurface Mound Yes _____ No _____

Check for soil type _____

☐ **Sand Filter:** Age _____

Is the effluent surfacing _____ where _____ When was the system last in use _____
 Water use figures avg. daily flow _____ Peak _____
 Is there a timer Yes _____ No _____ Settings: "ON" time _____ min. _____ sec. "OFF" time _____ hours
 Dose volume _____
 Draw down on pump to sand filter _____
 Float levels in pump basin _____
 Is entire bed flooded Yes _____ No _____ Depth _____ Inspection Port
 How thick is the bio mat _____
 Is gravel black Yes _____ No _____
 Elevation of bed compared to ground water on out side of bed _____
 Sand quality _____ Sieve test results attached Yes _____ No _____
 Does the pump out run the return flow from the under drain Yes _____ No _____

Failure Information Sheet (cont.)

Adequate soil absorption areas available for repair? Yes _____ No _____

Soil depth and type determined by:

_____ Current soil logs (information attached)

_____ Other _____

_____ Sand based system with sealed bed → _____ Sieve analysis results attached

Waste Strength Analysis

Analysis was conducted because there is evidence of:

_____ Excessive mass loading or effluent applied to soil at wrong soil application rate.

_____ Clogged orifices

_____ System abuse (e.g. septic tank not biologically operating as needed, clogged filter baffle, etc.)

_____ Other _____

_____ Laboratory results attached

Note:

Proper procedures should be used in collecting effluent samples to be analyzed by a certified laboratory. Ground water intrusion problems if present, should be corrected prior to collecting certain effluent samples.

Use of Aerobic Treatment Units (ATU's) to Repair/Recover Sand Based Systems

1. The repair proposal must identify the cause of the failure
2. ATU's do not replace the requirement for a sand based system
3. ATU's should not be proposed when the system has construction or design errors which cannot be corrected and these errors are the cause of the Failure
4. Ground and surface water issues must be addressed and corrected.
5. Water usage must be addressed in the repair proposal. Flows should not exceed the design capacity of the system.
6. ATU's can be helpful in dealing with high waste strengths such as recovering sealed beds when the cause of sealing is related to waste strength.
7. ATU's may not always be the best method to deal with a sealed bed.

COMMENTS / CONCLUSIONS REGARDING FAILURE

Failure linked to OSS performance:

Failure linked to OSS operation and maintenance:

PLOT PLAN – PROPOSED OSS REPAIR**PROPERTY ADDRESS:** _____**PLOT PLAN CHECKLIST**

	North Arrow Indicated	Plot Plan Shows Distances Between OSS and
	Dimensional Diagram or Draw to Scale (1:20 or 1:30)	Water Supply/Supplies
	Property Lines Shown	Water Lines(s)
	Plot Plan Includes All Known OSS Components and Components to be Installed	Property Lines
Other		Buildings
		Surface Water
		Seasonal Water
		Cuts/Banks
		Footing Drains, Interceptor Drains, Etc.

PLOT PLAN