# TORRINGTON AREA HEALTH DISTRICT

350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790
Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail info@tahd.org ♦ Web www.tahd.org


***"Promoting Health & Preventing Disease Since 1967"***

## AS-BUILT OF SEWAGE DISPOSAL SYSTEM

Street Number _____ Lot # _____ Address: _____

Installer: _____ License Number: _____

Tank Size: _____ System Size and Type: _____ Permit # _____

Number of Bedrooms: _____ If Commercial – Design Flow _____ G.P.D.

Fill Source: _____ Fill Depth: _____

Inspected By: _____ Date: _____

I certify that the system has been installed in conformance with the plan of design.

Installer Signature: _____

---

### TO BE COMPLETED BY TAHD SANITARIAN

**Inspection Details**

Curtain Drain ☐ Pump System ☐ Grease Trap ☐ Scarification Inspection ☐

Survey or stakeout ☐ Inspection & As-Built by Engineer ☐ Water Meter Installed ☐

| **Inspected Components** | **Satisfactory** |
|---|---|
| Septic tank size (gallons) | |
| Septic tank baffles | |
| Piping Materials | |
| Stone | |
| Filter Fabric | |
| Curtain drain | |
| System type/size | |
| Separation distances | |
| Pump chamber/pump/alarm | |
| Select fill sieve test | |
| **Curtain drain depth (plan)** | |
| **Curtain drain depth (field)** | |

| | **Plan Elevation** | **Diff** | **Field Elevation** | **Diff** |
|---|---|---|---|---|
| **Bench Mark** | | △ | | △ |
| **House Out (top)** | | | | |
| **Tank In (top)** | | | | |
| **Tank Out (top)** | | | | |
| **System Bot. (Row 1)** | | | | |
| **System Bot. (Row 2)** | | | | |
| **System Bot. (Row 3)** | | | | |

**System elevations meet design plan / health code requirements:**

**Yes** _____ **No** _____

TORRINGTON AREA HEALTH DISTRICT
350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790
Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail info@tahd.org ♦ Web www.tahd.org
*"Promoting Health & Preventing Disease Since 1967"*

# Sketch of System

If drawing is to scale, please indicate scale used. If not drawn to scale, please provide the outside dimensions of the house. **Identify at least two-house points (A,B) and use the section below to show separation distances from the identified building sides to the septic tank (all covers), distribution boxes, and ends of the system. Indicate lengths of system each side of a distribution box. Provide north arrow and indicate street side of home.**

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| A | | | | | | | | | | | |
| B | | | | | | | | | | | |
| C | | | | | | | | | | | |
| D | | | | | | | | | | | |
| E | | | | | | | | | | | |