

# System Specifications

Property ID: \_\_\_\_\_

<b>Applicant Information</b>	
Name _____ Address _____ _____	Phone _____
<b>Location Information</b>	
Tax Map No. _____ GPIN No. _____ Directions _____ _____	Property address _____ _____ Subdivision _____ Section _____ Block _____ Lot _____
<b>General Information</b>	
System Type _____ (e.g. septic tank, drainfield) Type of property _____ (e.g. commercial, residential, etc.) Conditions _____	Number of bedrooms ____ Daily flow _____ (gpd)
<b>Sewer Line</b>	<b>Septic Tank – Inlet/Outlet Structure</b>
Schedule 40 PVC, 4" _____ or equivalent (add check or describe equivalent below) _____	Capacity: _____ gallons 2 <sup>nd</sup> septic tank _____ gallons Per the <i>2000 Sewage Handling &amp; Disposal Regulations</i> , Check which option chosen: Septic tank with inspection port ____ Septic tank with effluent filter ____ Reduced maintenance septic tank
<b>Conveyance line/force main Information</b>	<b>Distribution box Information</b>
Method _____ (e.g. gravity, pumping, dosing siphon) If pumping, attach Pump Spec Sheet Material _____ Pipe diameter _____ Slope of pipe _____ (in inches)	No. of boxes ____ No. of outlets ____ Surge or splitter box required: Yes No
<b>Header line Information</b>	<b>Percolation line Information/Absorption Area</b>
1500 pound crush strength Yes ____ Minimum slope is 2"/100 ft. Yes ____	Center to center spacing ____ ft. Required spacing ____ ft. Installation depth ____ inches Aggregate depth ____ inches No. of Laterals ____ Lateral length ____ ft. Lateral bottom slope ____ inches Lateral width ____ inches

OSE \_\_\_\_\_ Date \_\_\_\_\_