



**INVENTORY REPORT FOR CLASS V WELL(S)
 RECEIVING ONLY SANITARY WASTES**

Note: Sanitary wastes are wastes originating primarily from kitchen, bathroom, and laundry sources; including wastes from food preparation, dishwashing, garbage grinding, toilets, baths, showers, and sinks.

FACILITY NAME:		
MAILNG ADDRESS:	LOCATION OF CLASS V WELL(S) (Street address or legal description):	
	COUNTY:	
CONTACT PERSON:	TELEPHONE NO.:	
	E-MAIL ADDRESS:	
CLASS V WELL(S) DESIGN AND NUMBER OF EACH WELL DESIGN:		
<input type="checkbox"/> Septic tank connected to leachfield	<input type="checkbox"/> Leachfield only	<input type="checkbox"/> Well only
<input type="checkbox"/> Septic tank connected to drywell	<input type="checkbox"/> Drywell only	<input type="checkbox"/> Other
<input type="checkbox"/> Septic tank connected to seepage pit	<input type="checkbox"/> Cesspool	
<input type="checkbox"/> Septic tank connected to well		
TOTAL DEPTH BELOW GROUND SURFACE OF SEEPAGE PIT, DRYWELL, CESSPOOL OR WELL (Does not apply to septic tank or leachfield):		
DIAMETER OF SEEPAGE PIT, DRYWELL CESSPOOL OR WELL (Does not apply to septic tank or leachfield):		
TYPE OF CASING OR LINING MATERIAL IN THE SEEPAGE PIT, DRYWELL, CESSPOOL OR WELL (Does not apply to septic tank of leachfield):		

(Over)

NUMBER OF YEARS THE CLASS V WELL(S) HAVE BEEN IN OPERATION:		
ESTIMATED GALLONS PER DAY OF SANITARY WASTE DIRECTED TO THE CLASS V WELL(S):		
PROVIDE THE ESTIMATED NUMBER OF PEOPLE SERVED BY THE CLASS V WELL PER DAY:		
IS THERE A WATER WELL LOCATED AT THIS FACILITY? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Distance and direction of water well from the Class V well is:		
COMMENTS:		
PRINTED NAME OF PERSON SIGNING:		
SIGNATURE:	TITLE:	DATE:

db/2008

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