### INVENTORY REPORT FOR CLASS V WELL(S)
#### RECEIVING MOTOR VEHICLE AND/OR SANITARY WASTES

<table>
<thead>
<tr>
<th>FACILITY NAME:</th>
<th>LOCATION OF CLASS V WELL(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAILING ADDRESS:</td>
<td>(Street address or latitude and longitude)</td>
</tr>
<tr>
<td>LOCATION OF CLASS V WELL(S)</td>
<td>COUNTY:</td>
</tr>
<tr>
<td>CONTACT PERSON:</td>
<td>TELEPHONE NO.:</td>
</tr>
<tr>
<td>CONTACT PERSON:</td>
<td>E-MAIL ADDRESS:</td>
</tr>
<tr>
<td>CLASS V WELL(S) DESIGN AND NUMBER OF EACH WELL DESIGN:</td>
<td></td>
</tr>
<tr>
<td>☐ Septic tank connected to leachfield</td>
<td>☐ Leachfield only</td>
</tr>
<tr>
<td>☐ Septic tank connected to drywell</td>
<td>☐ Drywell only</td>
</tr>
<tr>
<td>☐ Septic tank connected to seepage pit</td>
<td>☐ Cesspool</td>
</tr>
<tr>
<td>☐ Septic tank connected to well</td>
<td>☐ Other</td>
</tr>
</tbody>
</table>

#### 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):

#### NUMBER OF YEARS THE CLASS V WELL(S) HAVE BEEN IN OPERATION:

#### TYPE OF WASTES DIRECTED TO CLASS V WELL(S):

- ☐ Sanitary wastes only (these are wastes originating primarily from kitchen, bathroom, and laundry sources, including wastes from food preparation, dishwashing, garbage grinding, toilets, baths, showers and sinks).
- ☐ Motor vehicle waste only. This includes floor drains, sinks, etc. receiving or having the potential to receive industrial wastes.
- ☐ Sanitary and motor vehicle wastes.
<table>
<thead>
<tr>
<th>Gallons – Sanitary</th>
<th>Gallons – Motor Vehicle Waste</th>
</tr>
</thead>
</table>

**ESTIMATED GALLONS PER DAY OF WASTE DIRECTED TO THE CLASS V WELL(S):**

**DESCRIBE ALL OF THE WASTES DIRECTED TO THE CLASS V WELL(S):** (for motor vehicle wastes, describe the work and/or service activities conducted at the facility, provide MSDS for chemicals used and analyses of the wastes if available.)

**ARE THERE FLOOR DRAINS, SINKS, ETC. THAT DIRECT OR HAVE THE POTENTIAL TO DIRECT MOTOR VEHICLE WASTES, INCLUDING ANY SPILLAGE OR LEAKAGE, TO THE CLASS V WELL?**

- [ ] Yes
- [ ] No

Explain and describe location in building:

**IF THE CLASS V WELL RECEIVES SANITARY WASTE, PROVIDE THE ESTIMATED NUMBER OF PEOPLE SERVED BY THE CLASS V WELL PER DAY:**

**IS THERE A WATER WELL LOCATED AT THIS FACILITY?**

- [ ] Yes
- [ ] No

Distance and direction of water well from the Class V well is:

**COMMENTS:**

**PRINTED NAME OF PERSON SIGNING:**

**SIGNATURE:**

**TITLE:**

**DATE:**

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e/uic forms/ INV_REPT_CLV_MOTOR_VEH_SANITARY_WASTES_2012
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