

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 35 yrs Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 2 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CLEAROUT IN FRONT YARD.

NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JHR 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JENNIFER & KEVIN TATE PHONE: \_\_\_\_\_  
ADDRESS: 305 CUM CREEK LANE  
TAX PARCEL #: 30-22-019  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining  
Heavy Medium Light  
Last rain event: 8/15/09  
General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy  
Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO  
Other areas of dampness noted in yard: NO Location: \_\_\_\_\_  
Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 5

How large is your lot? 1.3 A.C.

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 1-1.5 years Last time? last year

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

SLIGHT WETNESS ABOVE DRAIN FIELD OCCASIONALLY. CAREFUL  
WITH LAUNDRY. IN FAVOR OF PUBLIC SEWER.  
CAN BECOME EXCESSIVELY WET ABOVE DRAIN FIELD.  
LAUNDRY TAKEN OFF SITE WHEN WETNESS OBSERVED.

COMMENTS OF SURVEYOR:

OBSERVED ONE PLANT CLEANOUT IN REAR YARD.  
NO odor or malfunction observed.

SURVEYOR SIGNATURE:

Jh R. 8/18/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JOHN & DIANE BARTUSIAK PHONE: \_\_\_\_\_

ADDRESS: 307 CUM CREEK LANE

TAX PARCEL #: 30-22-018

SURVEYORS NAME: JOHN RENTO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y/N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y/N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y/N

Was your system ever repaired? Y/N When? \_\_\_\_\_

By permit? Y/N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO PLASTIC CLEANOUTS IN FRONT YARD.  
NO ODOR OR MALFUNCTION OBSERVED.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Joseph & Barbara Bollen PHONE: \_\_\_\_\_

ADDRESS: 308 Crum Creek Lane

TAX PARCEL #: 30-22-048

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/03

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED SEPTIC & PUMP TANK LIDS IN FRONT YARD AS WELL  
AS CUEAUNT FOR IN GROUND BED.  
NO COR OR MALFUNCTIONS OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/14/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Mark & Mary Ripper PHONE: \_\_\_\_\_

ADDRESS: 316 Crum Creek Lane

TAX PARCEL #: 30-22-044

SURVEYORS NAME: John Benzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT & METAL VENT IN FRONT YARD.  
NO MALFUNCTION OBSERVED

SURVEYOR SIGNATURE:

*J. K. R.* 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Sandra Rosenblum PHONE: \_\_\_\_\_

ADDRESS: 318 Cawn Creek Lane

TAX PARCEL #: 30-22-043

SURVEYORS NAME: Jan Rocco

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY).

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO CEMENT OUTS AND ONE CONCRETE CLO IN  
FRONT YARD.

SURVEYOR SIGNATURE:

*[Signature]* 8/14/02

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Ms. Sandra Rasenbloom PHONE: 610-353-6423  
ADDRESS: 318 Cram Creek Lane, Newtown Sp, PA  
TAX PARCEL #: \_\_\_\_\_  
SURVEYORS NAME: \_\_\_\_\_

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: \_\_\_\_\_  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1 1/2 acres irregular

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? 25 yrs. Was it permitted? (Y) N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) N

How often? every other Last time? May 2008  
year

If your system was pumped, was it inspected for cracks or broken baffles? Y/N

Was your system ever repaired? (Y) N When? 1984

By permit? (Y) N

What part was repaired or replaced?

TANK REPAIRED / REPLACED LINE REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

There is also a concrete distribution box bet. the tank & new drain field. It makes certain way to both Frenches & the new drain field.

COMMENTS OF PROPERTY OWNER:

When the ground gets soggy in the lower left front yard it's after a rain from the sump pump in my basement not the septic

COMMENTS OF SURVEYOR:

SURVEYOR SIGNATURE:

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Daniel & Gail Fiedelman PHONE: \_\_\_\_\_

ADDRESS: 319 Cam Crest Lane

TAX PARCEL #: 30-22-012

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: ☒ Sunny ☐ Partly Cloudy ☐ Cloudy

☐ Raining Last rain event: 8/15/09

☐ Heavy ☐ Medium ☐ Light

General condition of non-septic area grounds: ☒ Dry ☐ Damp ☐ Wet ☐ Spongy ☐ Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

☒ SEPTIC TANK

☒ CESSPOOL

☐ ELEV. SAND MOUND

☐ OTHER \_\_\_\_\_

☐ INGROUND BED

☐ INGROUND TRENCH

☐ HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? YEARLY Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SYSTEM.

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND PLASTIC CLEANOUT IN FRONT  
YARD. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JLD 8/18/09



NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: LINDA & WARD BOWEN PHONE: \_\_\_\_\_

ADDRESS: 321 CROWN CREEK CANE

TAX PARCEL #: 30-22-011

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) N

How often? Every Year Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? (Y) / N When? 10 yrs

By permit? (Y) / N

What part was repaired or replaced?

TANK: REPAIRED (REPLACED) LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED (REPLACED)

What kind of water system do you have? WELL (PUBLIC) OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

Run pump system prior to large gatherings to alleviate  
POTENTIAL STRAIN / FAILURE OF SYSTEM

COMMENTS OF SURVEYOR:

OBSERVED 4 CLEANOUTS IN FRONT YARD.  
NO OPEN OR MALFUNCTION OBSERVED

SURVEYOR SIGNATURE:

JHP 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: ADELE CARUSO

PHONE: \_\_\_\_\_

ADDRESS: 323 Crimi Creek Lane

TAX PARCEL #: 30-22-010

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/13/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO CLEANSATS IN CENTER OF FRONT YARD AND  
ONE CLEANSAT ADJACENT TO DRIVEWAYS NO ODOR OR  
AMBIENTATION OBSERVED.

SURVEYOR SIGNATURE:

*[Signature]* 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: FRANK TORIN & ILENE CHESTER PHONE: \_\_\_\_\_

ADDRESS: 324 CROWN CREEK LANE

TAX PARCEL #: 30-21-026

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 2 ACRES

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK.

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

~~CESSPOOL~~

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED (2)

~~INGROUND TRENCH~~

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every Year Last time? Sept 2008

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SYSTEM

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT, MANHOLE COVERING DISTRIBUTION BOX, AND  
AREA ABOVE DRAIN FIELDS. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JHP 8/14/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Joseph Nask PHONE: \_\_\_\_\_

ADDRESS: 326 CUM CREEK LANE

TAX PARCEL #: 30-21-025

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND-BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*JHTR* 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: NEVILLE & LINDA HEASLIP PHONE: \_\_\_\_\_

ADDRESS: 328 GRIN CREEK LANE

TAX PARCEL #: 30-21-024

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED 4 CLEANOUTS IN REAR YARD-  
NO ODDOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

AKR 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: CASANDRA MADISON PHONE: \_\_\_\_\_  
ADDRESS: 381 CROWN CREEK CANYON  
TAX PARCEL #: 30-21-012  
SURVEYORS NAME: JOHN BONZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: YES Raw sewage surfacing: NO

Other areas of dampness noted in yard: YES Location: FRONT / SIDE YARD ; SIDE YARD  
ADJACENT TO DRIVEWAY

Photographs taken: YES Water Sample taken: YES Parcel # on container: YES

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND CONCRETE LID IN REAR YARD.  
VERY WET AREA / SMALL PUDDLES OBSERVED 15 FEET BEHIND  
CONCRETE LID, EMBLEM SLIGHT SHEEN / ONLY COLOR POSSIBLE  
DETERGENT.

SURVEYOR SIGNATURE:

*Jh By* 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Joseph Graham PHONE: \_\_\_\_\_  
ADDRESS: 332 Crown Creek Lane  
TAX PARCEL #: 30-21-022  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/07  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 5

How large is your lot? 1.75

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

NEW OWNER - TO BE PUMPED IN NEXT WEEK OR TWO

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? 11

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CONCRETE CLOSURE IN REAR YARD.

NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

JhTB 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: CRAIG & LAURA TOERLEN PHONE: \_\_\_\_\_

ADDRESS: 334 CROWN CREEK LANE

TAX PARCEL #: 30-21-021

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL

ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every 2 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N SECOND TANK / PIT ADDED FOR ADDITION

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SYSTEM. SECOND TANK ADDED BY PREVIOUS  
OWNER FOR BUILDING ADDITION.

COMMENTS OF SURVEYOR:

OBSERVED CEMENTS & CONCRETE LID IN FRONT YARD.  
NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JLR 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Philippe Girard PHONE: \_\_\_\_\_

ADDRESS: 335 Crum Creek Lane

TAX PARCEL #: 30-21-014

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED.

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM-OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CLEARED & CONCRETE LID IN FRONT YARD

NO ODOM OR MALFUNCTION OBSERVED

SURVEYOR SIGNATURE:

*J. B.* 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: MARC & THERSE DOLTA PHONE: \_\_\_\_\_  
ADDRESS: 336 CROWN CREEK LANE  
TAX PARCEL #: 30-21-020  
SURVEYORS NAME: JOHN BEND

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND CONCRETE CO IN FRONT GARDEN.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Angelo & Caroline DiPasqua PHONE: \_\_\_\_\_

ADDRESS: 337 Crum Creek

TAX PARCEL #: 30-21-015

SURVEYORS NAME: John Benzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: no Wet above or near system: no Raw sewage surfacing: no

Other areas of dampness noted in yard: no Location: \_\_\_\_\_

Photographs taken: yes Water Sample taken: no Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL

ELEV. SAND MOUND  
OTHER \_\_\_\_\_

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 44 Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every 6 Last time? \_\_\_\_\_  
MONTHS

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? 10+

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED.

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? 11

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND ACCESS TO CESSPOOL IN FRONT YARD.  
RISER TO CESSPOOL OPEN TO GROUNDWATER - NO WATER TIGHT LID.  
RISER IS COVERED BY 2 FLAGSTONES.  
NO ODOR OBSERVED.

SURVEYOR SIGNATURE:

Jh Ry 8/14/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: PAUL ADONIZZO PHONE: \_\_\_\_\_

ADDRESS: 303 Echo Valley Lane

TAX PARCEL #: 30-22-032

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/9/09  
Heavy Medium Light

General condition of non-septic area grounds Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: Yes Location: Front - Creek

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM.

SURVEYOR SIGNATURE:

*[Signature]* 8/11/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: LEE & DIANE KIRKLAND

PHONE: \_\_\_\_\_

ADDRESS: 304 Echo Valley Lane

TAX PARCEL #: 30-22-026

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining.

Last rain event: 8/7/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? ☒ Y / ☐ N

How often? Every Yr Last time? Last Year

If your system was pumped, was it inspected for cracks or broken baffles? Y / ☒ N

Was your system ever repaired? ☒ Y / ☐ N When? \_\_\_\_\_

By permit? ☒ Y / ☐ N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL ☒ PUBLIC ☐ OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SYSTEM

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND CONCRETE CIP IN REAR OF  
PROPERTY. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JH Ry 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Michael Sweeney PHONE: \_\_\_\_\_  
ADDRESS: 305 Echo Valley Lane  
TAX PARCEL #: 30-22-033  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/07  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 5

How large is your lot? 1.67

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 6 months Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND LID IN REAR YARD  
NO ODOM OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

J. R. D. 8/2/0

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: William Stolar PHONE: \_\_\_\_\_  
ADDRESS: 309 Echo Valley Lane  
TAX PARCEL #: 30-22-031  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/7/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 5

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL (PUBLIC) OTHER

How far from the well from the drain field? \_\_\_\_\_ ft

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NEW HOMEOWNER. SYSTEM WAS PUMPED PRIOR TO SALE OF  
THE PROPERTY. SERVICE HISTORY UNKNOWN.

COMMENTS OF SURVEYOR:

OBSERVED MAIN VENT IN REAR OF PROPERTY. NO ODOR  
OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

John D. 8/11/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Ann McDevitt

PHONE: \_\_\_\_\_

ADDRESS: 320 Echo Valley Lane

TAX PARCEL #: 30-15-040

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND:

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED ONE METAL VENT AND TWO PLASTIC CIDS IN REAR YARD.  
NO ODOOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*J.R.* 8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Anthony & Sina STEVENSON PHONE: \_\_\_\_\_

ADDRESS: 321 Echo Valley Lane

TAX PARCEL #: 30-15-014

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining

Last rain event: 8/7/02

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 6

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 10-15 yrs Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 1.5 yrs Last time? 1 MONTH AGO

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

System Repaired By Previous Homeowner Approx 10-15 yrs  
AGO. Two Tanks.

COMMENTS OF SURVEYOR:

Observed Concrete Lids & Plastic Cleanouts For Both Tanks In  
Front / Side Yard. No odor or malfunction observed.

SURVEYOR SIGNATURE:

JhRy 8/12/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: CHRISTOPHER & VICTORIA Mc CONAGHY PHONE: \_\_\_\_\_

ADDRESS: 323 Echo Valley Lane

TAX PARCEL #: 30-15-013

SURVEYORS NAME: JOAN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining  
Heavy Medium Light

Last rain event: 8/9/07

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED ONE PLASTIC 8" LID / CLEANOUT IN SIDE YARD.  
NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*JTB* 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: William & Nancy Munley PHONE: \_\_\_\_\_  
ADDRESS: 329 Echo Valley Lane  
TAX PARCEL #: 30-15-010  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/9/07  
Heavy Medium Light

General condition of non-septic area grounds: Dr Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK	INGROUND BED
CESSPOOL	INGROUND TRENCH
ELEV. SAND MOUND	HOLDING TANK
PIPE TO SURFACE	OTHER _____

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS	WETNESS OR SPONGY AREAS
ODORS	WATER PONDING OR SURFACING
SLUGGISH DRAINS	WASTEWATER BACKING INTO HOME
SYSTEM OVERFLOW	OTHER _____

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM. UNABLE TO  
ACCESS REAR YARD. NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*JLR* 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DAVID & ERIN DUBOY

PHONE: \_\_\_\_\_

ADDRESS: 330 Echo Valley Lane

TAX PARCEL #: 30-15-021

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 6

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER w/ DRAIN FIELD

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 30+ Was it permitted? Y/N When? UNKNOWN

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) N

How often? Every 9 DAYS Last time? TODAY

If your system was pumped, was it inspected for cracks or broken baffles? Y/N

Was your system ever repaired? Y/N When? \_\_\_\_\_

By permit? Y/N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

IN FAVOR OF PUBLIC SEWER. MUST PUMP SYSTEM EVERY 9 DAYS  
OR SEWAGE MAY SURFACE IN YARD ABOVE SYSTEM. DRAIN FIELD  
RUNS UNDER STONE WALL.

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT & CONCRETE LID IN REAR/SIDE YARD.  
NO ODOR OR SEWAGE OBSERVED. SYSTEM PUMPED 7 HOURS  
PRIOR TO SURVEY.

SURVEYOR SIGNATURE:

JHDS 8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: ROGER & JUDITH KENT

PHONE: \_\_\_\_\_

ADDRESS: 332 Echo Valley Lane

TAX PARCEL #: 30-15-020

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO CLEANOUTS IN REAR YARD. NO OPOR. OR  
MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*Jh Dwy* 8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: FRANCIS & JOANNE McCULLOUGH PHONE: \_\_\_\_\_

ADDRESS: 338 Echo Valley Lane

TAX PARCEL #: 30-14-038

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining

Last rain event: 8/9/11

Heavy

Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_


Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CONCRETE CUS & PLASTIC CLEANOUT IN REAR YARD.  
NO OPEN OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Robert & JoAnn McAndrew PHONE: \_\_\_\_\_

ADDRESS: 341 Echo Valley Lane

TAX PARCEL #: 30-15-004

SURVEYORS NAME: John Renda

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system? .

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM.  
NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*John Dwyer* 8/20/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: RICHARD & DOROTHY POOR PHONE: \_\_\_\_\_  
ADDRESS: 348 ECHO VALLEY LANE  
TAX PARCEL #: 80-15-003  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining  
Heavy Medium Light  
Last rain event: 8/9/07  
General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy  
Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO  
Other areas of dampness noted in yard: NO Location: \_\_\_\_\_  
Photographs taken: Yes Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1 2/3 ACRES

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every Year Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? 2-3 yrs

By permit? Y / N

What part was repaired or replaced?

TANK REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED CESS POOL REPAIRED AFTER

What kind of water system do you have? WELL PUBLIC OTHER COLLAPSE

How far from the well from the drain field? 11

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

IN FAVOR OF PUBLIC SEWER. OWNER CONCERNED WITH POTENTIAL  
FOR FAILURE OF CESSPOOLS ON SITE.

COMMENTS OF SURVEYOR:

OBSERVED PLASTIC CLEANOUT AND CONCRETE LID IN FRONT YARD.

SURVEYOR SIGNATURE:

JH D 8/6/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Paul & Kara Evans

PHONE: \_\_\_\_\_

ADDRESS: 346 Echo Valley Lane

TAX PARCEL #: 30-14-042

SURVEYORS NAME: John Reno

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TANK LID AND DISTRIBUTION BOX IN REAR YARD.  
SYSTEM - IN GROUND BED OR TRENCHES.  
NO ODOR OR M.M. FUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*JLR* 8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: THOMAS & JEAN FALKIE PHONE: \_\_\_\_\_  
ADDRESS: 347 ECHO VALLEY LANE  
TAX PARCEL #: 30-14-029  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining  
Heavy Medium Light  
Last rain event: 8/9/09

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1.2 Acre

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

UNKNOWN - DOUBLE DRAINFIELD



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every Yr Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y (N) When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

INDICATED MINOR PROBLEMS w/ SYSTEM APPROX 8-9 YRS. ONE BACKUP

INTO 1ST FLOOR BATHROOM. NO PROBLEMS SINCE. ROUTINE

MAINTENANCE SEEM TO HAVE ALLEVIATED THE PROBLEM.

STRONGLY IN FAVOR OF PUBLIC SEWER.

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT IN REAR YARD. NO ODOM OR

MALFUNCTIONS OBSERVED.

SURVEYOR SIGNATURE:

Jh. Ry 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DOUGLAS & CARA YEAKLE

PHONE: \_\_\_\_\_

ADDRESS: 351 Echo Valley Lane

TAX PARCEL #: 30-14-031

SURVEYORS NAME: John Penzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED PLASTIC LID IN REAR YARD. NO ODOR OR  
MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Jim Bruden PHONE: \_\_\_\_\_  
ADDRESS: 353 Echo Valley Lane  
TAX PARCEL #: 30-14-032  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/7/4  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED.

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

APPARENT 2 SEPARATE SYSTEMS, FRONT & REAR.  
OBSERVED VENT AND TWO CONCRETE LIDS IN FRONT YARD AND  
CONCRETE LID AND PLASTIC CLEANOUT IN REAR.  
NO ODOMETER OR MANHOLE OBSERVED.

SURVEYOR SIGNATURE:

*JL Ry* 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DAVID & JOANN STEPHENS

PHONE: \_\_\_\_\_

ADDRESS: 355 ECHO VALLEY LANE

TAX PARCEL #: 30-14-033

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/9/11

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO CONCRETE LIDS AND TWO PLASTIC CLEANOUTS  
IN FRONT YARD. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*JhRy* 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Bradley Risch

PHONE: \_\_\_\_\_

ADDRESS: 357 Echo Valley Lane

TAX PARCEL #: 30-14-034

SURVEYORS NAME: Bridget Gillen

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 9/9/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1.5

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? 1999 Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) / N

How often? 1-2 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL (PUBLIC) OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED ONE TANK 3 PLASTIC CLEANOUTS ONE METAL

CLEANOUT IN SIDE YARD NO ODOR OR MALFUNCTION

OBSERVED

SURVEYOR SIGNATURE:

Bridget H. Miller  
9/10/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: STEVEN & LYNN RHODES PHONE: \_\_\_\_\_  
ADDRESS: 359 Echo Valley Lane  
TAX PARCEL #: 30-14-035  
SURVEYORS NAME: JOHN RENZI

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL

ELEV. SAND-MOUND  
OTHER \_\_\_\_\_

INGROUND-PEE  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLEARWATER, CONCRETE TANK LID, AND ALGAE IN  
REAR YARD. NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

AKR 8/18/89

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JOHN & ANN LEAR PHONE: \_\_\_\_\_

ADDRESS: 363 FORD VALLEY LANE

TAX PARCEL #: 30-14-037

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 2/3 ACRE

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 40+ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every Year Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER \_\_\_\_\_

How far from the well from the drain field? ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

REPLACED DISTRIBUTION PIPE FROM TANK TO CESSPOOL.

COMMENTS OF SURVEYOR:

OBSERVED TANK LID & CLEANOUT IN FRONT YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JWP 8/12/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Joseph Long & Susan Mease

PHONE: \_\_\_\_\_

ADDRESS: 367 Echo Valley Lane

TAX PARCEL #: 30-21-007

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/1/07

Heavy

Medium

Light

General condition of non-septic area grounds Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No

Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes

Water Sample taken: No

Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

In Favor of Public Sewer

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND SMALL CONCRETE LID IN FRONT YARD.  
ALSO OBSERVED NOTICABLE DISCOLORATION OF GRASS ABOVE AREA LIKELY  
FOR CESSPOOL. NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

[Signature] 8/14/08  
8/11/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: William & Ruth Davis PHONE: \_\_\_\_\_

ADDRESS: 367 Echo Valley Lane

TAX PARCEL #: 30-21-008

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/7/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND PLASTIC CLEANOUT REAR YARD.  
NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/11/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: BOB JACKSON & CATHY CORBURN PHONE: \_\_\_\_\_

ADDRESS: 4119 ECHO VALLEY LANE

TAX PARCEL #: 30-14-036

SURVEYORS NAME: JOHN BONZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1.5 acres

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 2 yrs Last time? 2 yrs

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? Approx. 20 yrs

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SYSTEM.

COMMENTS OF SURVEYOR:

OBSERVED CLEANSOUT IN FRONT YARD. NO ODOM OR  
MAINTENANCE OBSERVED.

SURVEYOR SIGNATURE:

Jh Rj 8/20/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Nancy Kauffman PHONE: \_\_\_\_\_

ADDRESS: 4016 Fox Hill Lane

TAX PARCEL #: 30-22-036

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 1.3 Acres

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? original Was it permitted? Y / N When? 10 years

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) N

How often? 2 yrs Last time? 2 yrs Ago

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y (N) When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL (PUBLIC) OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO PLASTIC CLEANOUTS IN FRONT YARD.  
NO ODOM OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

JP 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Gennaro & Nancy MAFFIA PHONE: \_\_\_\_\_

ADDRESS: 4018 Fox Hill Lane

TAX PARCEL #: 30-22-037

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND PLASTIC CLEANOUT IN SIDE YARD  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*J. P. [Signature]* 8/18/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: John & Pamela Cairneson

PHONE: \_\_\_\_\_

ADDRESS: 4019 FoxHill Lane

TAX PARCEL #: 30-000-104-201

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/29/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? 1.8 Acres

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every 2 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y N When? 12-13 yrs

By permit? Y / N

What part was repaired or replaced?

TANK REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

TANK ADDED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NOT IN FAVOR OF PUBLIC SEWER,

COMMENTS OF SURVEYOR:

OBSERVED TWO PLASTIC CLEANOUTS AND CONCRETE TANK  
LID IN REAR OF PROPERTY. NO CORROSION OR MALFUNCTION  
OBSERVED.

SURVEYOR SIGNATURE:

JLR 9/9/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: GEORGE WOOD

PHONE: \_\_\_\_\_

ADDRESS: 4018 GOSHEN ROAD

TAX PARCEL #: 30-000-108

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/29/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 0.6 ACRES

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

~~INGROUND TRENCH~~

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 15 Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? 2 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER \_\_\_\_\_

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEM WITH SEPTIC SYSTEM.

COMMENTS OF SURVEYOR:

OBSERVED THREE CLEANOUTS IN REAR YARD.

NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

Jh Ry 9/9/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: 4020 GOSHEN ROAD

TAX PARCEL #: \_\_\_\_\_

SURVEYORS NAME: JOHN PENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 4

How large is your lot? 2 ACRES

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 11-12 yrs Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Yearly Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? 11 yrs

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TANK CLOS AND ALLEN ABOVE DRAIN FIELD  
IN REAR YARD. NO MAINTENANCE OBSERVED.

SURVEYOR SIGNATURE:

JHTR 8/20/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Anthony & Cynthia DeRita PHONE: \_\_\_\_\_

ADDRESS: 4100 BOSHEN ROAD

TAX PARCEL #: 80-22-067

SURVEYORS NAME: John Pento

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: M Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey).

Number of Residents: 3

How large is your lot? 5.24

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N.

How often? yearly Last time? LAST WEEK  
WEEK OF 8/10/09

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y/N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLEANOUT AND CONCRETE C/L IN FRONT YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

John D. Skelton

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: William & Jeanne McCarthy PHONE: \_\_\_\_\_

ADDRESS: 4105 Goshen Road

TAX PARCEL #: 30-22-053

SURVEYORS NAME: John Benzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CLOGGERS IN SIDE YARD.  
NO CLOG OR MALFUNCTION OBSERVED.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*J. P. [Signature]* 8/20/02

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Thomas & Anna Kreuzberger PHONE: \_\_\_\_\_

ADDRESS: 4109 Goshen Road

TAX PARCEL #: 20-22-055

SURVEYORS NAME: John Penzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: no Wet above or near system: no Raw sewage surfacing: no

Other areas of dampness noted in yard: no Location: \_\_\_\_\_

Photographs taken: yes Water Sample taken: no Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO CONCRETE CLOS AND CLEANOUT IN FRONT OF  
HOUSE, ADJACENT TO DRIVEWAY.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*JHRS* 5/20/21

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Gwynne Rhodes PHONE: \_\_\_\_\_  
ADDRESS: 4111 GOWEN ROAD  
TAX PARCEL #: 30-22-056  
SURVEYORS NAME: John Bender

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: \_\_\_\_\_ Water Sample taken: \_\_\_\_\_ Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM IN FRONT OR  
SIDE YARDS. UNABLE TO ACCESS REAR YARD DUE TO GATE  
AND DOG.  
NO ODORS OBSERVED.

SURVEYOR SIGNATURE:

*Jh. R.* 8/20/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Gwynne McDevitt PHONE: \_\_\_\_\_  
ADDRESS: 4111 Goshen Road  
TAX PARCEL #: 30-22-056  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/22/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 1

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL

ELEV. SAND MOUND  
OTHER \_\_\_\_\_

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 50+ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every other Last time? July 2008  
year

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? 100+ ft.

Is the well uphill or downhill from the drain field? up

Was the water ever tested? Y / N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED 2 CLEANOUTS AND TWO TANK LINES IN REAR  
YARD. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

JLR 8/27/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Kerr & Sally Farnen PHONE: \_\_\_\_\_  
ADDRESS: 4205 Goshen Road  
TAX PARCEL #: 30-21-027  
SURVEYORS NAME: John Penzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: \_\_\_\_\_ Wet above or near system: \_\_\_\_\_ Raw sewage surfacing: \_\_\_\_\_

Other areas of dampness noted in yard: \_\_\_\_\_ Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND CONCRETE (10' ADJACENT TO  
DRIVEWAY. NO DAM OR MALFUNCTION OBSERVED.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*Jh Ry* 8/24/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JOHN CUSTER PHONE: \_\_\_\_\_  
ADDRESS: 4022 GOSHEN ROAD  
TAX PARCEL #: 30-22-028  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/22/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

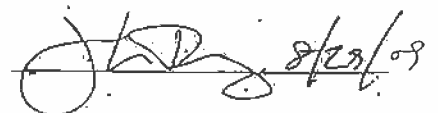
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

UNABLE TO VISUALLY LOCATE SEPTIC SYSTEM.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/23/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Ray Acciavatti PHONE: \_\_\_\_\_

ADDRESS: 4207 GOSHEN ROAD

TAX PARCEL #: 30-21-018

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) N

How often? 3 TIMES PER YEAR Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

WINTER TIME - WHEN NOTICE WETNESS ABOVE AREA OF  
DRAIN FIELD.  
IN FRONT OF PUBLIC SOWER.

COMMENTS OF SURVEYOR:

OBSERVED CEMENT AND CONCRETE LID IN FRONT YARD.  
NO ODOOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

J. R. [Signature] 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: John & Karen Murray PHONE: \_\_\_\_\_  
ADDRESS: 4100 MEADOWS LAINE  
TAX PARCEL #: 30-15-037  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/2/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: YES Raw sewage surfacing: YES

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_  
INSUFFICIENT LIQUID

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

Small wet area observed 8 feet from white plastic clean out  
in the front / side yard. Slightly black / grey in color,  
indicative of sewage. No odor.

SURVEYOR SIGNATURE:

*J. R. G.* 8/5/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Raymond & Elizabeth Euler PHONE: \_\_\_\_\_

ADDRESS: 4102 MEADOW LANE

TAX PARCEL #: 30-18-036

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/2/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N. When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

(GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED ONE SMALL CONCRETE CUP IN REAR / SIDE YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*Jh R* 8/5/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JACK TOMARCHIO / GAIL FISHER PHONE: \_\_\_\_\_

ADDRESS: 4103 MEADOW LANE

TAX PARCEL #: 30-15-023

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/2/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: no Wet above or near system: no

Raw sewage surfacing: no

Other areas of dampness noted in yard: no Location: \_\_\_\_\_

Photographs taken: yes Water Sample taken: no Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CONCRETE LID AND PLASTIC CLEANOUT IN FRONT  
YARD. NO ODOM OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*J. R. [Signature]* 8/5/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: KENNETH & MARGARET BURNS PHONE: \_\_\_\_\_

ADDRESS: 4105 MEADOW LANE

TAX PARCEL #: 30-15-024

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining: \_\_\_\_\_ Last rain event: 8/2/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

INGROUND BED

CESSPOOL

INGROUND TRENCH

ELEV. SAND MOUND

HOLDING TANK

PIPE TO SURFACE

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

WETNESS OR SPONGY AREAS

ODORS

WATER PONDING OR SURFACING

SLUGGISH DRAINS

WASTEWATER BACKING INTO HOME

SYSTEM OVERFLOW

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED THREE CONCRETE LIDS AND TWO PLASTIC CLEANOUTS  
IN FRONT YARD. NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

*JhT* 8/5/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: JAMES & PHILomena WOLFINGTON PHONE: \_\_\_\_\_

ADDRESS: 4106 MEADOW LANE

TAX PARCEL #: 30-15-034

SURVEYORS NAME: JOHN PENN

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
OTHER \_\_\_\_\_  
INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO CLEANOUTS IN REAR YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*J. D. [Signature]* 8/28/05

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: ARNOLD & RITA GRAF

PHONE: \_\_\_\_\_

ADDRESS: 4107 Meadow Lane

TAX PARCEL #: 30-15-025

SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/2/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED THREE CLEANOUTS IN FRONT YARD - NO ODOR OR  
MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/5/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DELORES JUDG PHONE: \_\_\_\_\_  
ADDRESS: 4108 MEADOW LANE  
TAX PARCEL #: 30-15-037  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Wage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 3

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Yearly Last time? LAST YEAR

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? 1994

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

NO PROBLEMS WITH SEPTIC SYSTEM.  
System Recently Repaired

COMMENTS OF SURVEYOR:

OBSERVED AREA ABOVE SYSTEM.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

Jh Dg 8/18/00

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: MICHAEL & CAROL ANN SHUMACHER PHONE: \_\_\_\_\_

ADDRESS: 4110 MEADOW LANE

TAX PARCEL #: 30-15-032

SURVEYORS NAME: JOHN BENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/2/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey).

Number of Residents: 5

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER

INGROUND BED

INGROUND TRENCH

HOLDING TANK

UNKNOWN - TANK AND CESSPOOL / SEEPAGE PIT ?

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? ? Was it permitted? Y/N When? ?

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y N

How often? Every Year Last time? Sept. 08

If your system was pumped, was it inspected for cracks or broken baffles? Y/N

Was your system ever repaired? Y N When? \_\_\_\_\_

By permit? Y/N UNKNOWN

What part was repaired or replaced? Additional Tank / TRENCH ADDED TO THE RIGH  
TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED OF DRIVEWAY  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? 0

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

IN FAVOR OF JEWEL. OWNER OF RESIDENCE FOR TWO  
YEARS. NO PROBLEMS WITH SEPTIC SYSTEM.

COMMENTS OF SURVEYOR:

OBSERVED PLASTIC CLEANOUT AND CONCRETE LID IN FRONT YARD.  
VARIATION IN GREEN GRASS COLOR OBSERVED AROUND SEPTIC  
LOCATION. NO CLEANOUTS / LIDS, ETC. OBSERVED TO THE  
RIGHT OF THE DRIVEWAY.

SURVEYOR SIGNATURE:

JhRy 8/5/08

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: GREGORY & GINGER ROWAN

PHONE: \_\_\_\_\_

ADDRESS: 4111 MEADOW LANE

TAX PARCEL #: 30-15-027

SURVEYORS NAME: JOHN PENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/2/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO

Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: Yes

Water Sample taken: No

Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED TWO PLASTIC AND ONE METAL CLEANOUT IN SIDE YARD.  
METAL CLEANOUT WAS NOT CAPPED NO ODOR OR MALFUNCTION  
OBSERVED.

SURVEYOR SIGNATURE:

*Jh Dy* 8/5/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: GIUSTO & Wiana PRINZ PHONE: \_\_\_\_\_  
ADDRESS: 4114 Meadow Lane  
TAX PARCEL #: 30-15-030  
SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/22/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy  
Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No  
Other areas of dampness noted in yard: No Location: \_\_\_\_\_  
Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 1

How large is your lot? 2 acres

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

☒ SEPTIC TANK

☒ CESSPOOL

☐ ELEV. SAND MOUND

☐ PIPE TO SURFACE

☐ INGROUND BED

☒ INGROUND TRENCH

☐ HOLDING TANK

☐ OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

☐ GREEN LUSH GRASS

☐ ODORS

☐ SLUGGISH DRAINS

☐ SYSTEM OVERFLOW

☐ WETNESS OR SPONGY AREAS

☐ WATER PONDING OR SURFACING

☐ WASTEWATER BACKING INTO HOME

☐ OTHER \_\_\_\_\_

Was your system ever pumped out? ☒ Y ☐ N

How often? 2 yrs Last time? Last Year

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? ☒ Y ☐ N When? 15 yrs Ago

By permit? Y ☒ N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL ☒ PUBLIC ☐ OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED CUEANOUT AND TANK LID IN REAR YARD AS  
WAS AS AREA ABOVE TRENCH.  
NO ODD OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

John Doy 8/29/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: MARK & MARIA TOGLIA PHONE: \_\_\_\_\_

ADDRESS: 4115 MEADOW LANE

TAX PARCEL #: 30-15-027

SURVEYORS NAME: JOHN L. RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/2/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

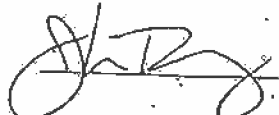
Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

(INABLE TO VISUALLY LOCATE SEPTIC SYSTEM ON THE PROPERTY.  
NO EVIDENCE OF MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

 8/5/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Thomas & Lisa McCarthy PHONE: \_\_\_\_\_

ADDRESS: 4117 MEADOW LANE

TAX PARCEL #: 30-14-045

SURVEYORS NAME: JOHN BENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED. LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED 4 PLASTIC CLEANOUTS AND CONCRETE LID IN  
REAR YARD. NO ODDS OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*JhR* 8/18/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: NIKOLAOS & RESPINA TSIRAKOGLOU PHONE: \_\_\_\_\_

ADDRESS: 800 PLEASANT LANE

TAX PARCEL #: 80-21-010

SURVEYORS NAME: JOHN PENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED 3 CLEANOUTS IN FRONT YARD.  
NO ODOM OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/18/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: RICHARD & DONNA MOSCHETTI PHONE: \_\_\_\_\_

ADDRESS: 301 PHEASANT LANE

TAX PARCEL #: 30-21-011

SURVEYORS NAME: JOHN PONES

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/18/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK INGROUND BED  
CESSPOOL INGROUND TRENCH  
ELEV. SAND MOUND HOLDING TANK  
OTHER \_\_\_\_\_



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

COMMENTS OF SURVEYOR:

OBSERVED CLEANS & TANK CAPS IN S.O.E. YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

Jh Pj 8/20/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Edward & Ruth DIFPIN

PHONE: \_\_\_\_\_

ADDRESS: 6 Plamps Lane

TAX PARCEL #: 32-24-084

SURVEYORS NAME: John Bonzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: ..

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/13/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No

Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes

Water Sample taken: No

Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND-BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 10 yrs Was it permitted? Y/N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y/N

How often? 1-5 yrs Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y/N

Was your system ever repaired? Y/N When? 10 yrs

By permit? Y/N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y/N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO CONCRETE LIDS AND PLASTIC CURBOUT IN  
REAR / SIDE YARD.  
NO COR OR MALFUNCTION OBSERVED.

SURVEYOR SIGNATURE:

Jh Rg 5/18/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Scot, Roy & Debra Carrick PHONE: \_\_\_\_\_

ADDRESS: 12 Philips Lane

TAX PARCEL #: 30-28-001

SURVEYORS NAME: John Renzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/12/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS . WETNESS OR SPONGY AREAS  
ODORS . WATER PONDING OR SURFACING  
SLUGGISH DRAINS . WASTEWATER BACKING INTO HOME  
SYSTEM OVERFLOW . OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N .

COMMENTS OF PROPERTY OWNER:


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND TWO TANK LIDS IN REAR  
YARD. NO ODOM OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DAVID BLOCK PHONE: \_\_\_\_\_  
ADDRESS: 101 SPRINGHOUSE LANE  
TAX PARCEL #: 80-22-067-002  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/07

Heavy Medium Light

General condition of non-septic area grounds: DRY Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TANK LID AND 4 CLEANOUTS IN REAR YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

*Jh Py* 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Andrew Kain

PHONE: \_\_\_\_\_

ADDRESS: 108 Springhouse Lane

TAX PARCEL #: 30-22-067-006

SURVEYORS NAME: John Penzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

☒ Sunny

☐ Partly Cloudy

☐ Cloudy

☐ Raining

Last rain event: 8/13/09

☐ Heavy

☐ Medium

☐ Light

General condition of non-septic area grounds: ☒ Dry ☐ Damp ☐ Wet ☐ Spongy ☐ Soggy

Sewage Odor: No Wet above or near system: No Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes Water Sample taken: No Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 6

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

☒ SEPTIC TANK

☐ CESSPOOL

☐ ELEV. SAND MOUND

☐ OTHER \_\_\_\_\_

☒ INGROUND BED

☐ INGROUND TRENCH

☐ HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? (Y) / N

How often? Every Year Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y (N) When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TANK LIDS AND CLEANOUTS IN REAR YARD  
NO ODOM OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

JLH 8/18/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: DOUGLAS SIBERSKI PHONE: \_\_\_\_\_  
ADDRESS: 1 WOOLMAN DRIVE  
TAX PARCEL #: 30-22-060  
SURVEYORS NAME: JOHN RENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/13/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO CLEANNOUTS AND ONE CONCRETE TANK GO IN  
SIDE YARD - NO ODOR OR MALFUNCTION OBSERVED

\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: MAUREEN ERBSTEIN

PHONE: \_\_\_\_\_

ADDRESS: 2 WOODMAN DRIVE

TAX PARCEL #: 30-22-057

SURVEYORS NAME: JOHN RENZI

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/13/07

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No Wet above or near system: No

Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes

Water Sample taken: No

Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y (N)

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? (WELL) PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or (N)

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED TWO PLASTIC LIDS AND ONE CONCRETE LID IN  
FRONT YARD. NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

 8/18/07

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: FRANK GARNER PHONE: \_\_\_\_\_  
ADDRESS: S. WOODMAN DRIVE  
TAX PARCEL #: 30-22-062  
SURVEYORS NAME: John Benzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/22/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 2

How large is your lot? 2 ACRES

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK

OTHER Stone Field Area. to D/W.

How old is your system? 34 Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? Every other Last time? \_\_\_\_\_  
year

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? 100+ ft.

Is the well uphill or downhill from the drain field? Down

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

REPAIRED PIT / CISTERN AFTER D-BOX NOT RECEIVING FLOW.  
DRAIN FIELD RECEIVE MAJORITY OF EFFLUENT.

COMMENTS OF SURVEYOR:

OBSERVED CONCRETE TANK AND DISTRIBUTION BOX (10 AND  
QUANT IN REAR YARD.

SURVEYOR SIGNATURE:

[Signature] 8/10/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: RICHARD & KATHLEEN CROWE PHONE: \_\_\_\_\_

ADDRESS: 8 WOOLMAN DRIVE

TAX PARCEL #: 30-22-058

SURVEYORS NAME: JOHN PENZO

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/12/07

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK



Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED METAL VENT AND PLASTIC LID IN FRONT / SIDE  
YARD. NO ODOR OR MALFUNCTION OBSERVED.  
PLASTIC LID LOCATED APPROXIMATELY 4.5 FEET FROM  
WELL.

SURVEYOR SIGNATURE:

John R. 8/18/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: John & Rita Shannon

PHONE: \_\_\_\_\_

ADDRESS: 16 Warriner Drive

TAX PARCEL #: 30-22-058

SURVEYORS NAME: John Rento

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey:

Sunny

Partly Cloudy

Cloudy

Raining

Last rain event: 8/13/09

Heavy

Medium

Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: No

Wet above or near system: No

Raw sewage surfacing: No

Other areas of dampness noted in yard: No Location: \_\_\_\_\_

Photographs taken: Yes

Water Sample taken: No

Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? 3.00

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED SINCE PLASTIC CLEANOUT IN REAR YARD.  
NO ODOR OR INFILTRATION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

John D. G. 8/18/09

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: George Penz PHONE: \_\_\_\_\_

ADDRESS: 19 Wainman Drive

TAX PARCEL #: 30-22-065

SURVEYORS NAME: John Penz

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy

Raining Last rain event: 8/13/09

Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy

Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: 1

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

PIPE TO SURFACE

INGROUND BED

INGROUND TRENCH

HOLDING TANK

OTHER \_\_\_\_\_

How old is your system? 8 Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS

ODORS

SLUGGISH DRAINS

SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO HOME

OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? 2001

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED

DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL ~~PUBLIC~~ OTHER

How far from the well from the drain field? 100 ft

Is the well uphill or downhill from the drain field? UP

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED SYSTEM LOCATION IN FRONT YARD.  
NO ODOR OR MALFUNCTION OBSERVED.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE:

J. D. 8/18/03

NEWTOWN TOWNSHIP  
DOOR-TO-DOOR  
VISUAL INSPECTION

Section 1. Preliminary Information

NAME: Margaret Beronius PHONE: \_\_\_\_\_

ADDRESS: 24 Warner Drive

TAX PARCEL #: 30-22-072

SURVEYORS NAME: John Penzo

Section 2. Observed Conditions Via Visual Survey

Weather conditions at time of survey: Sunny Partly Cloudy Cloudy  
Raining Last rain event: 8/18/09  
Heavy Medium Light

General condition of non-septic area grounds: Dry Damp Wet Spongy Soggy  
Sewage Odor: NO Wet above or near system: NO Raw sewage surfacing: NO

Other areas of dampness noted in yard: NO Location: \_\_\_\_\_

Photographs taken: YES Water Sample taken: NO Parcel # on container: \_\_\_\_\_

Section 3. Questions for Homeowner (only if available at time of survey)

Number of Residents: \_\_\_\_\_

How large is your lot? \_\_\_\_\_

What kind of sewage system do you have? (CIRCLE ALL THAT APPLY)

SEPTIC TANK

CESSPOOL

ELEV. SAND MOUND

OTHER \_\_\_\_\_

INGROUND BED

INGROUND TRENCH

HOLDING TANK

Where does your laundry and/or sink water go? (CIRCLE ALL THAT APPLY)

SEPTIC TANK  
CESSPOOL  
ELEV. SAND MOUND  
PIPE TO SURFACE

INGROUND BED  
INGROUND TRENCH  
HOLDING TANK  
OTHER \_\_\_\_\_

How old is your system? \_\_\_\_\_ Was it permitted? Y / N When? \_\_\_\_\_

Have you ever noticed any of the following near your septic system?

GREEN LUSH GRASS  
ODORS  
SLUGGISH DRAINS  
SYSTEM OVERFLOW

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO HOME  
OTHER \_\_\_\_\_

Was your system ever pumped out? Y / N

How often? \_\_\_\_\_ Last time? \_\_\_\_\_

If your system was pumped, was it inspected for cracks or broken baffles? Y / N

Was your system ever repaired? Y / N When? \_\_\_\_\_

By permit? Y / N

What part was repaired or replaced?

TANK: REPAIRED / REPLACED LINE: REPAIRED / REPLACED  
DRAIN FIELD: REPAIRED / REPLACED

What kind of water system do you have? WELL PUBLIC OTHER

How far from the well from the drain field? \_\_\_\_\_ ft.

Is the well uphill or downhill from the drain field? \_\_\_\_\_

Was the water ever tested? Y or N

COMMENTS OF PROPERTY OWNER: .

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COMMENTS OF SURVEYOR:

OBSERVED RECTANGULAR PLASTIC AND ROUND CONCRETE LIDS  
IN SIDE YARD NO ODOOR OR MALFUNCTION OBSERVED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SURVEYOR SIGNATURE

*JH By* 8/2/08

APPENDIX F

PHOTOGRAPHS OF PROPERTIES

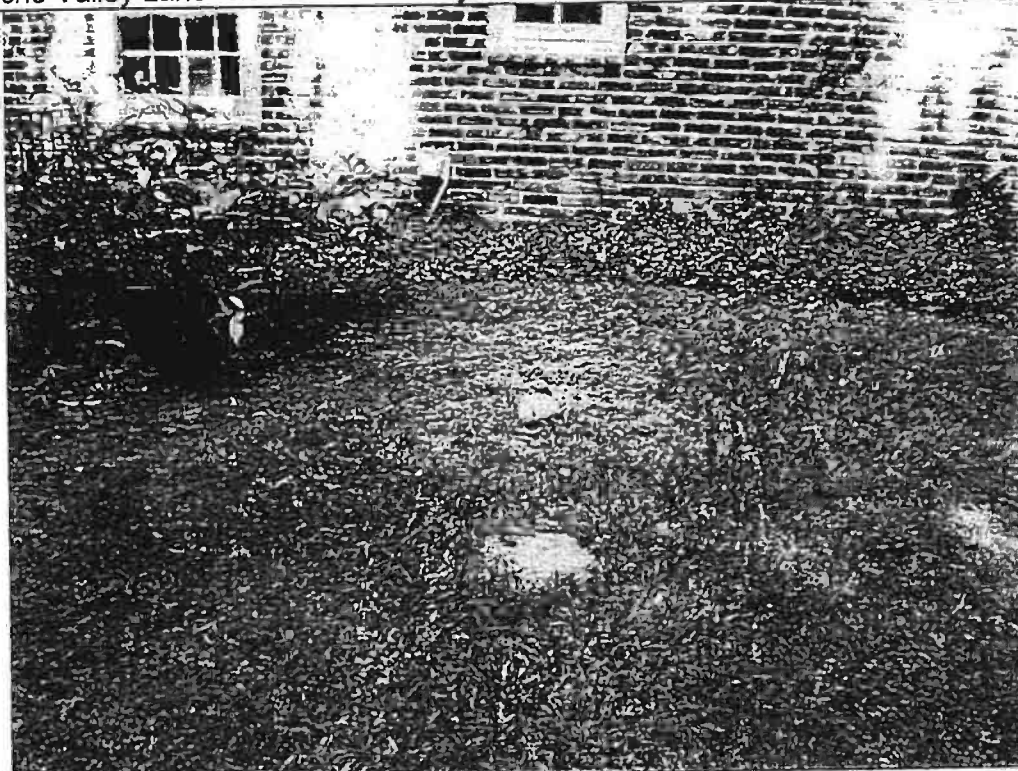


**Echo Valley Neighborhood  
On-Lot Visual Inspections**



1

Echo Valley Lane- clean outs in rear yard



2

Battles Lane- system in rear yard

**Echo Valley Neighborhood  
On-Lot Visual Inspections**



**3** Boot Road- tank lids and clean outs in front yard



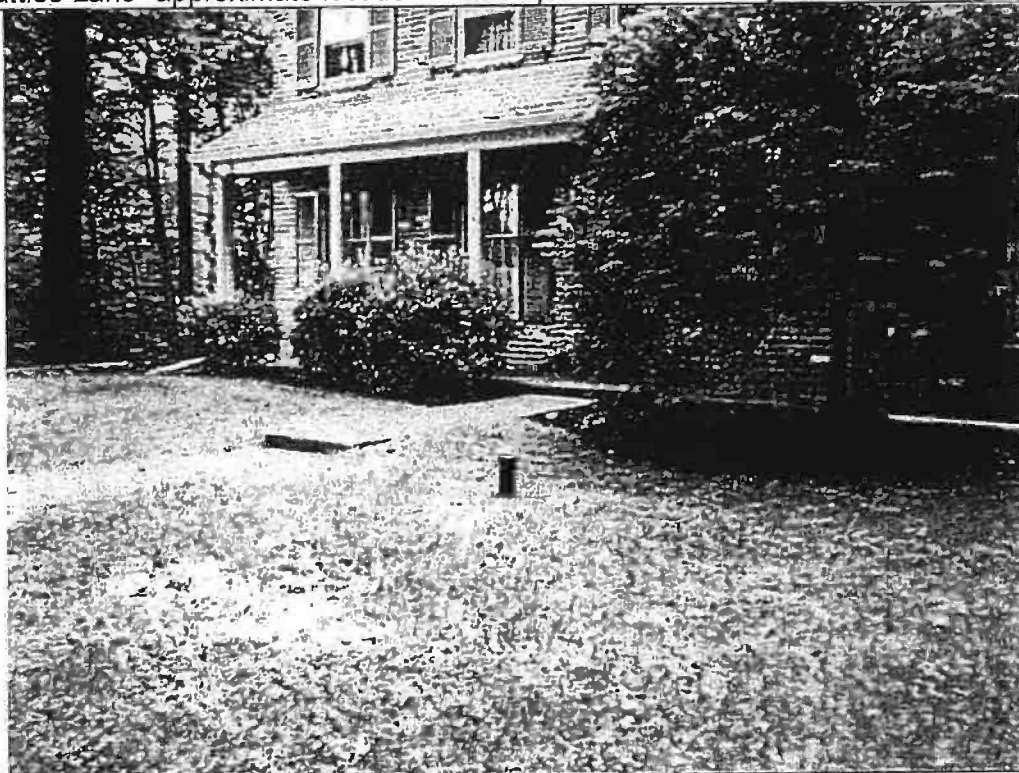
**4** Boot Road- malfunctioning system

**Echo Valley Neighborhood  
On-Lot Visual Inspections**



5

Battles Lane- approximate location of absorption area in rear yard



6

Crum Creek Lane- clean out and tank lid in front yard

**Echo Valley Neighborhood  
On-Lot Visual Inspections**



**7** Woolman Drive- system in front yard



**8** Carriage Lane- tank lids and clean outs in front yard

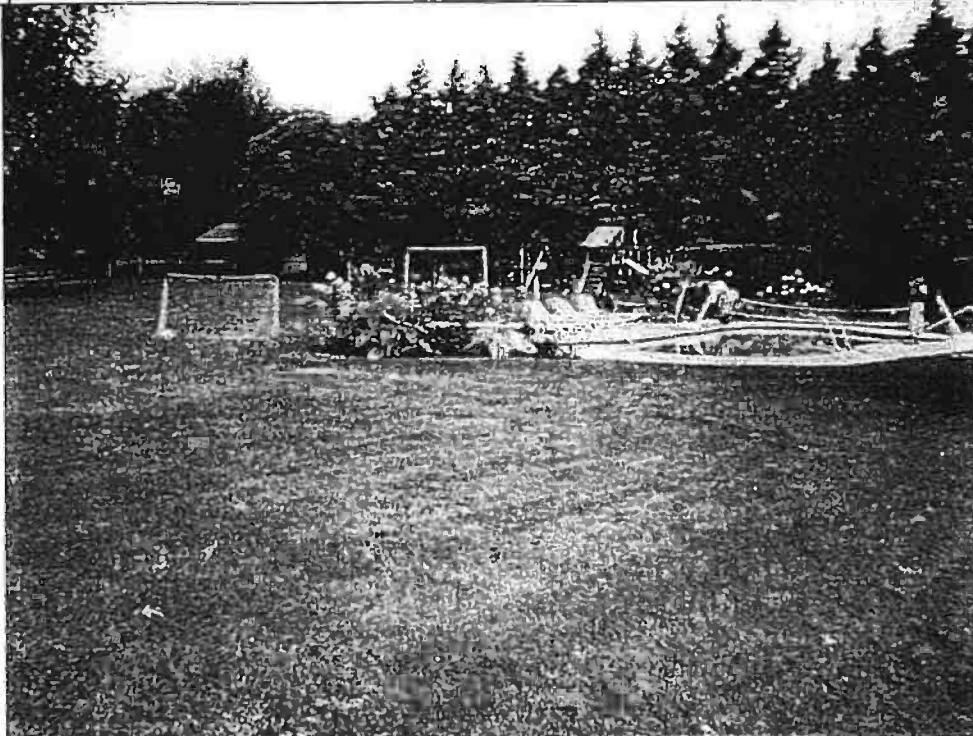


Echo Valley Neighborhood  
On-Lot Visual Inspections



9

Philips Lane- tank lids and clean outs in rear yard



10

Crum Creek Lane- system in rear yard

**APPENDIX BB**

**ACT 537 SEWAGE DISPOSAL NEEDS SURVEYS / PUBLIC COMMENTS  
AND RESPONSES**

**ACT 537 UPDATE REVISION  
SEWAGE DISPOSAL NEEDS IDENTIFICATION SURVEY REPORT**

**FOR**

**NEWTOWN TOWNSHIP  
DELAWARE COUNTY, PA**

**SEPTEMBER 2012**

Prepared by:  
HERBERT E. MACCOMBIE, J.R., P.E.  
CONSULTING ENGINEERS AND SURVEYORS, INC.  
P. O. BOX 118  
BROOMALL, PA 19008  
610-356-9550

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Newtown Township  
Act 537 Plan Update 2012

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**ACT 537 UPDATE REVISION  
SEWAGE DISPOSAL NEEDS IDENTIFICATION SURVEY REPORT  
FOR  
NEWTOWN TOWNSHIP, DELAWARE COUNTY, PA**

**EXECUTIVE SUMMARY**

In order to identify and document the sewage disposal needs within the Study Area of the Act 537 Plan Update for Newtown Township, a Sewage Disposal Needs Identification Survey was conducted in accordance with the PA DEP Guidelines for *Act 537 Sewage Disposal Needs Identification*. According to the DEP Guidelines the survey is a requisite component of the Township's Act 537 Official Plan Update and may be conducted in two (2) tiers depending upon the scope of the Act 537 Official Plan revision being prepared. In this case, a general "tier one" approach is appropriate since this is considered a large area plan. However, in an effort to more accurately define and document suspected problem areas and prioritize the severity of problems found in several areas, this survey was conducted in two tiers: (1) a questionnaire survey was mailed to property owners with on-lot disposal systems and requested to be completed and returned and (2) a visual survey was conducted to field-verify and validate the results of the mail survey. In addition, existing sanitary surveys are considered an acceptable method of obtaining public health needs information. In this case a previous survey entitled *Echo Valley Area Door-to-Door Needs Survey for On-Lot Sewage Systems*, prepared by Pennoni Associates, Inc., Consulting Engineers, dated October 2, 2009 was used to document the sewage disposal needs for the Echo Valley Area of the Act 537 Plan Study Area.

Total Number of Questionnaires Mailed to Property Owners with OLDS, exclusive of the Echo Valley Area, was 363. Of the questionnaires mailed out, 142 were completed and returned. The information was processed and 56 were randomly selected to send requests for access to their property to field verify the questionnaire responses. 37 permission forms were completed and returned and visual surveys were conducted at all 37 properties. Three (3) of the properties had multiple systems which resulted in visual surveys of 40 systems. For the entire study area surveyed the public health needs can be categorized as follows:

**SEWAGE DISPOSAL NEEDS IDENTIFICATION (CURRENT) SURVEY  
PUBLIC HEALTH NEEDS RESULTS SUMMARY**

<b>Public Health Needs</b>	<b>Number</b>	<b>Percentage</b>
Confirmed Malfunctions	1	1%
Suspected Malfunctions	33	23%
Potential Malfunctions	78	55%
No Malfunction	30	21%
<b>TOTAL</b>	<b>142</b>	<b>100%</b>

Table 1

Maps of the current Survey Area can be found in the Appendix depicting properties with confirmed malfunctions, suspected malfunctions, potential malfunctions, or no malfunctions as well as properties that were field surveyed for verification of questionnaire

responses. A Soils Map and map of Soil Limitations for On-Lot Disposal Systems are also included in the Appendix.

For the Echo Valley study area previously surveyed by Pennoni Associates in 2009 the public health needs were categorized as follows:

**ECHO VALLEY AREA (PREVIOUS) VISUAL SURVEY  
PUBLIC HEALTH NEEDS RESULTS SUMMARY<sup>1</sup>**

Public Health Needs	Number	Percentage
Confirmed Malfunctions	9	8%
Suspected Malfunctions	23	20%
Potential Malfunctions	67	57%
No Malfunction	18	15%
<b>TOTAL</b>	<b>117</b>	<b>100%</b>

Table 2

In addition to the 117 properties where a visual survey was conducted, there were 64 properties with OLDS that were sent permission forms, 59 of which were unresponsive and another 5 denied access to the property. Of the 64 additional properties with OLDS, 55 were categorized as "potential malfunctions."

Maps of the Echo Valley Survey Area and supplementary data are included in the appendices of the 2009 *Echo Valley Area Door-to-Door Needs Survey for On-Lot Sewage Systems*. Copies of the 2009 Study have been provided to supplement this survey and the current Act 537 Plan Update.

#### **PURPOSE**

Act 537, the Pennsylvania Sewage Facilities Act, requires that all municipalities develop, revise and implement Official Sewage Facility Plans ("Act 537 Plan" or simply "Official Plan"). A fundamental part of this Act 537 Plan is the identification and documentation of the sewage disposal needs in a municipality. The purpose of this survey is to clearly identify and document existing wastewater disposal needs and to summarize and present the identified needs for evaluation of alternatives for safe wastewater disposal from public health and environmental standpoint.

#### **ACT 537 SEWAGE DISPOSAL NEEDS IDENTIFICATION**

Section I.A (Public Health Needs) of the PA DEP Guidelines for *Act 537 Sewage Disposal Needs Identification* categorizes malfunctions as follows:

<sup>1</sup> *Echo Valley Area Door-to-Door Needs Survey for On-Lot Sewage Systems*, prepared by Pennoni Associates, Inc., Consulting Engineers, dated October 2, 2009. Percentages based upon properties where visual survey was conducted.

- **Confirmed Malfunctions:** Those malfunctions documented by dye testing, laboratory test results, observation by a certified Sewage Enforcement Officer, or a professional with experience in OLDS, "Best Technical Guidance" repair permits, and seasonally wet absorption areas. Also included are piped discharges from a single structure with direct evidence of sewage (i.e., direct observation of soap suds, food residue, solids, odors, etc.), reported system backups, malfunctions with photographic documentation or other similar evidence.
- **Suspected Malfunctions:** Those systems exhibiting some malfunction characteristics such as abnormally green grass in the vicinity of an absorption area, piped discharges from one (or more than one) dwelling without direct evidence of sewage (i.e., no observation of soap suds, food residue, solids, odors, etc.), absorption areas located in known unsuitable soils (observed wetlands, rock outcropping, etc.), cesspools (in high density development) and pit (not vault) privies.
- **Potential Malfunctions:** Those systems that appear to be operating satisfactorily but were constructed prior to system permitting requirements (i.e., preregulatory systems), systems located in areas extremely unlikely to receive permitting by current standards, systems constructed in areas having soils mapped as unsuitable or with severe limitations for OLDS and systems located on exceptionally steep slopes greater than 25 percent. Included as potential malfunctions are permits issued for OLDS repairs that meet Chapter 73 standards. While this needs category does not represent "stand alone" existing needs, the information may be utilized in a needs analysis to locate areas affected by poorly defined adverse circumstances. For example, clusters of legitimate repairs will often indicate areas requiring closer scrutiny.
- **No Malfunction:** Those systems that appear to be operating satisfactorily, were constructed since the implementation of system permitting requirements, and appear to have been constructed in accordance with the permitting requirements in effect at the time of construction. For the purpose of needs identification, OLDS permitting under Act 537 became effective on May 15, 1972.

#### TIER ONE

The first tier involved mailing questionnaires to property owners within the Act 537 Plan Study Area that have On-Lot Disposal Systems (OLDS). This included what was anticipated to be "Immediate Needs" and "Future Needs" Areas. Some areas were generally categorized as "Immediate Needs" or "Future Needs" based upon information garnered from the previous Act 537 Plan, results from a previous Door-to-Door Needs Survey, and past feedback from the residents of the Township. Step-by-step instructions can be found in Appendix B of the PA DEP Guidelines for *Act 537 Sewage Disposal Needs Identification*

and is included with this report. The minimum response rate necessary to use the mail-in survey data is 25% where between 101 and 500 OLDS are in the project area. Self-addressed, stamped return envelopes were included with the questionnaires in an effort to obtain the greatest number of responses possible.

The questionnaire surveys were mailed to 363 property owners with OLDS on July 23, 2012 and were requested to be returned by August 8, 2012 allowing for a two (2) week response time. Although the questionnaires were requested to be returned by August 8<sup>th</sup>, responses were accepted after that date. Responses were received from 142 property owners or their representatives or an approximately 39% return rate. This return rate meets the minimum criteria and the survey results may be used.

## TIER TWO

The second tier involved field verification of a required percentage of the questionnaires in which responses were received. According to the DEP guidance document "to validate mail-in survey results, a certain number of returned questionnaires selected at random must be field-verified. The percentage of field-verified questionnaires required to validate a survey will vary with the total size of the survey." For example, if there are between 101 and 500 OLDS in the project area then 25% of the OLDS, in which responses have been received, are required to be field verified. For the purposes of validating this survey a minimum of 25% of the 142 OLDS (36) in the project area, in which responses were received, were required to be field verified. Although there are 76 units in the Hunters Run community that are serviced by two (2) Community On-Lot Disposal Systems (COLDS) which is maintained by the home owners' association, only the two (2) community systems were counted as responses. In anticipation of having some non-responses, requests were sent to 56 property owners with OLDS to access their property, including one (1) to the Hunters Run Owners Association. 39 authorizations were received and 40 OLDS were field-verified.

## PROCEDURE FOR ON-LOT VISUAL SURVEYS (FIELD VERIFICATION)

The second step of the survey was initiated by randomly selecting returned questionnaires and sending those property owners a letter along with a permission form to grant permission for access to their property for field-verification of their responses to the questionnaires. A total of 56 permission forms were mailed on August 30<sup>th</sup>, including one (1) to the Hunters Run Owners Association, and were requested to be returned within five (5) days. Field verification surveys were not conducted prior to receipt of a signed permission form and/or contacting the property owner to advise when the survey would take place, if requested. 39 responses were received with permission granted for all. The on-lot surveys were conducted on September 10<sup>th</sup> through 13<sup>th</sup> 2012.

**WEATHER CONDITIONS DURING FIELD-VERIFICATION SURVEYS<sup>1</sup>**

DATE	CONDITIONS	TEMPERATURE
9/10/12	Sunny	75°F
9/11/12	Sunny	76°F
9/12/12	Sunny	79°F
9/13/12	Sunny	80°F

Table 1

The last rainfall event prior to the field-verification surveys occurred on Saturday, September 8, 2012, which was approximately 0.31 inches. The last significant rainfall (greater than one (1) inch) occurred on Tuesday, September 4, 2012, which was approximately 3.12 inches.

Two (2) representatives from Herbert E. MacCombie, Jr., P.E., Consulting Engineers and Surveyors, Inc. visited each respondent to conduct the field verification survey. If the property owner was not present, a business card was left to notify the owner that representatives visited the premises and completed the survey along with the date and time of the survey. If the property owner was present MacCombie representatives verified responses to the questionnaire that the property owner provided in addition to gathering additional more detailed information if necessary. The majority of the property owners were able to identify the location of their on-lot disposal system or at least components of the system. In some instances, however, the location of the system could not be determined from visual observation and was so noted.

**CONCLUSION**

The returned questionnaires completed by the property owners are included in the Appendix as well as the respective completed permission forms as applicable. In addition, notes taken during the field-verification surveys are included for reference. Results of the survey are provided in tabular form as well as graphically.

Results indicate that, based on percentages, the Echo Valley Area has the highest percentage, by survey area, of Confirmed Malfunctions with 8% (or 9 OLDS). The Florida Park Area has the second highest at 1% (or 1 OLDS) and was the only Confirmed Malfunction as part of this survey. OLDS were categorized as Suspected Malfunctions in 41% (or 21 OLDS) of the Florida Park Area and 30% (or 6 OLDS) in the Llangollen Area. The Echo Valley Area results indicated that 20% (or 23 OLDS) are Suspected Malfunctions. The Florida Park Area and Echo Valley Area survey results indicate the most immediate sewage disposal needs from a public health standpoint.

<sup>1</sup> Accuweather historical data for Newtown Square, PA, <http://www.accuweather.com/en/us/newtown-square-pa/19073/september-weather/2097509?view=table>

Although the Llangollen Area indicates a relatively high percentage of "suspected malfunctions" by survey area, the Llangollen Area only contains 6 of the total 33 "suspected malfunctions" of the survey. By comparison, the Florida Park Area contains 21 of the total 33 "suspected malfunctions" of the survey. In addition, no systems within the Llangollen Area were confirmed to be malfunctioning. Furthermore, results of the survey for communities adjacent to the Llangollen Area indicates a lower Public Health Need than the Llangollen Area and, therefore, does not warrant the need to provide public sewer to this portion of the Township. However, because of the limitations of the soils for OLDS in this area as well as the relatively steep topography, and limited lot sizes, this area should be considered a priority for public sewer in the future.

**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by **August 8, 2012**. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. **If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.**

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

**THIS SURVEY CONCERNS THE HOME LOCATED AT:**

Street Address: \_\_\_\_\_

1. How many people live in your House? \_\_\_\_\_
2. How large is your Lot: \_\_\_\_\_ S.F. / Ac
3. Do you have more than one sewage system? Y / N  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
**WELL SPRING PUBLIC OTHER** \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it **DRILLED** or **DUG**

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well **UP** / **DOWN** Slope of the drain field?  
Have you ever had your well tested? Y / N  
When? \_\_\_\_\_  
What were the results? **POTABLE/NON-POTABLE**  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

**CIRCLE ALL THAT APPLY**

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

**CIRCLE ALL THAT APPLY:**

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? \_\_\_\_\_

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS
WATER PONDING OR SURFACING
WASTEWATER BACKING INTO THE HOME
SLUGGISH DRAINS
GREEN LUSH GRASS
SYSTEM OVERFLOW
ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by **August 8, 2012**. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

**THIS SURVEY CONCERNS THE HOMES/PROPERTIES  
WITHIN THE HUNTERS RUN DEVELOPMENT:**

Our records indicate there are a total of 76 units within the Development: 16 Single Family Detached Dwellings and 60 Townhouses.

1. Is this correct? Y / N If not, please provide correct #.

2. How many people live in the Development? \_\_\_\_\_

3. What kind of water system do you have?

WELL      SPRING      PUBLIC      COMMUNITY

OTHER: \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How? \_\_\_\_\_

If you have a well:

Is it DRILLED or DUG?      How Deep? \_\_\_\_\_ Ft.

Cased? Y / N

4. Our records indicate that you have a Community Sewer System/Systems maintained by an Association or Property Manager:

a. What kind of sewage system/systems do you have? CIRCLE ALL THAT APPLY:

CESSPOOL                      INGROUND BED  
SEEPAGE PIT                  INGROUND TRENCH  
ELEVATED SANDMOUND      PIPE TO DITCH  
OTHER \_\_\_\_\_

b. Are there sewer problems in any of the homes?

Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. Are there any problems in any of the laterals?

Y / N

Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

d. Were the sewage systems ever pumped out? Y / N

How Often? \_\_\_\_\_ Last Time \_\_\_\_\_

5. Would you encourage the Township to plan for acquisition of the Community System by the Municipal Authority to be publically owned and maintained or connection to public sewer?

Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



BOARD OF SUPERVISORS

JOSEPH CATANIA, ESQ.  
CHAIRMAN

DR. H. ROSS LAMBERT  
VICE CHAIRPERSON

GEORGE WOOD, ESQ.  
EDWARD PARTRIDGE  
JOHN A. NAWN, P.E.



**Township of Newtown**

209 Bishop Hollow Road  
Newtown Square, PA 19073  
610-356-0200

[www.newtowntownship.org](http://www.newtowntownship.org)

MICHAEL TRIO, AICP  
TOWNSHIP MANAGER

RICH SOKORAI, ESQ.  
TOWNSHIP SOLICITOR

STANTEC, INC.  
TOWNSHIP ENGINEER

BUILDING INSPECTION  
UNDERWRITERS, INC.  
BUILDING INSPECTOR

August 28, 2012

Dear Resident:

The Township of Newtown is performing visual surveys of existing on-lot septic systems to field verify responses obtained from the Sewage Needs Surveys recently mailed to property owners. The visual surveys are necessary to validate the responses in order to complete the survey process. This survey will take place over the next week.

The Township has authorized the engineer, Herbert E. MacCombie, Jr., P.E., Consulting Engineers & Surveyors, Inc. to conduct this survey. Representatives from the engineer's office will be performing the visual observations and inquiries regarding septic system repairs, improvements and/or replacements.

The Township requires your permission to enter your property to conduct this survey. Please find enclosed two (2) copies of a permission form to be signed by you as the property owner. Please sign the form, indicating your street address in the space provided, and return it in the enclosed self-addressed stamped envelope. Keep one (1) copy for your records. If we have your authorization to conduct the visual inspection and you are not home, the engineer's representatives surveying your property will leave a card at the front door indicating they have completed your on-lot evaluation. All Herbert E. MacCombie, Jr., P.E., Consulting Engineers & Surveyors, Inc. representatives will be wearing a highly visible reflective vest and will have appropriate identification. They will not need to enter your home.

Should you have any questions, please contact the Township at 610-356-0200 Monday-Friday, from 8:30 AM to 4:30 PM. Thank you for your cooperation.

Very truly yours,

Michael Trio, AICP  
Township Manager

**NEWTOWN TOWNSHIP**

**Permission to Enter Property**

**To Field Verify Sewage Needs Survey Responses for Survey Validation**

I/WE HAVE READ THE TOWNSHIP'S LETTER DATED AUGUST 28, 2012 AND HEREBY GRANT PERMISSION TO NEWTOWN TOWNSHIP AND REPRESENTATIVES FROM HERBERT E. MacCOMBIE, JR., P.E., CONSULTING ENGINEERS & SURVEYORS, INC. TO ENTER THE PROPERTY TO CONDUCT A SURVEY OF THE ON-LOT SEPTIC SYSTEM.

\_\_\_\_\_  
(Signature)

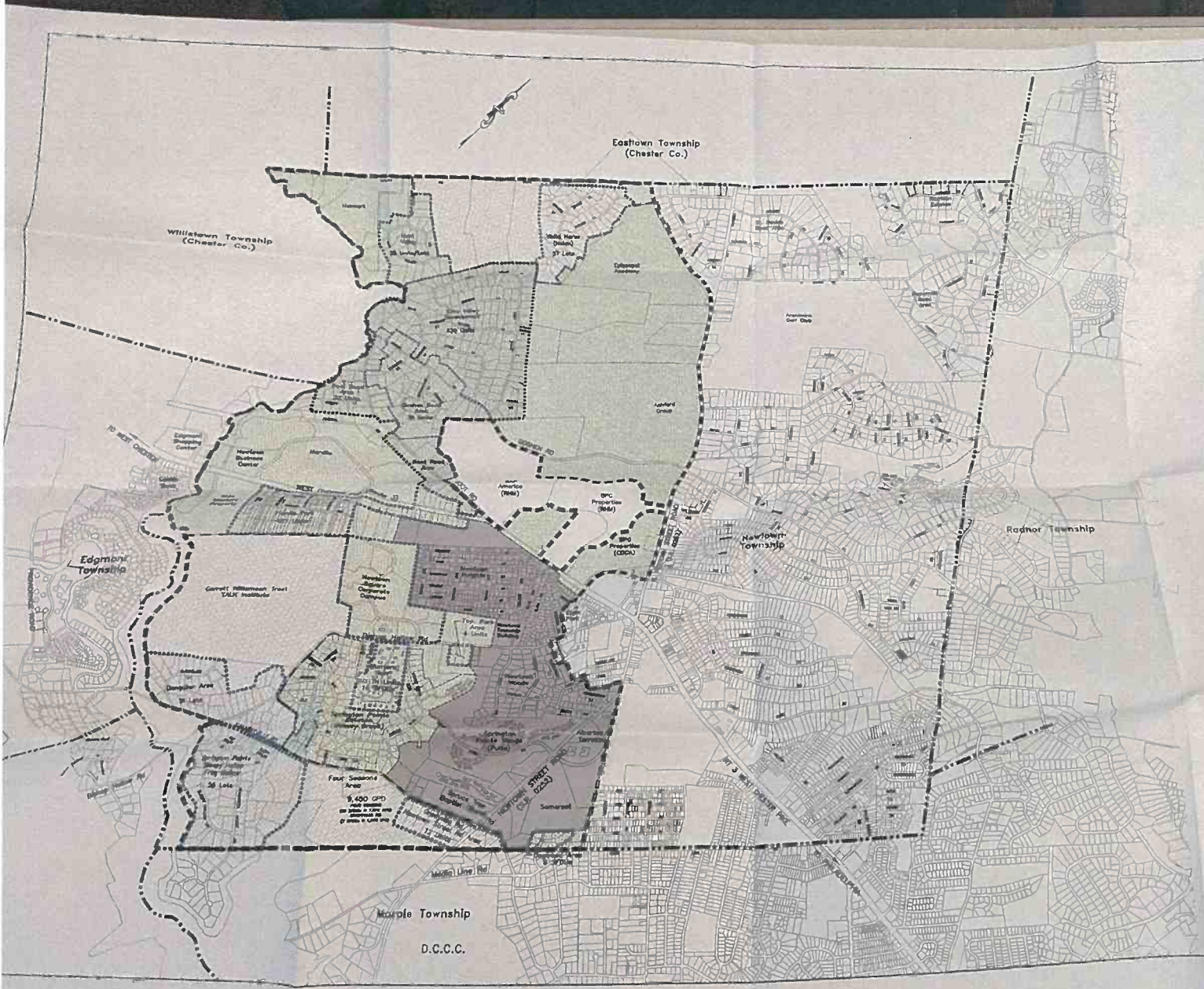
\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Street Address)

PLEASE RETAIN ONE (1) COPY OF THIS PERMISSION FORM FOR YOUR RECORDS AND RETURN THE OTHER COPY BY MAIL IN THE ENCLOSED SELF-ADDRESSED STAMPED ENVELOPE, HAND DELIVERY TO OUR OFFICE, OR FAX TO 610-356-8722 NO LATER THAN (5) FIVE DAYS.

THANK YOU FOR YOUR PROMPT RESPONSE.

## APPENDIX A



**GENERAL NOTES:**

1. THIS PLAN WAS PREPARED FOR THE NEWTOWN TOWNSHIP BOARD OF SUPERVISORS BY HERBERT E. MCCORMACK, JR., P.E. CONSULTING ENGINEERS AND SURVEYORS, INC. BASED UPON A FIELD SURVEY CONDUCTED BY SAID ENGINEER AND SURVEYOR IN 2012.
2. THE TOWNSHIP BOARD OF SUPERVISORS HAS REVIEWED AND APPROVED THIS PLAN FOR THE PURPOSES OF THE ACT 537 PLAN UPDATE.
3. THE TOWNSHIP BOARD OF SUPERVISORS HAS REVIEWED AND APPROVED THIS PLAN FOR THE PURPOSES OF THE ACT 537 PLAN UPDATE.
4. THE TOWNSHIP BOARD OF SUPERVISORS HAS REVIEWED AND APPROVED THIS PLAN FOR THE PURPOSES OF THE ACT 537 PLAN UPDATE.

- LEGEND:**
- MUNICIPAL BOUNDARY
  - ACT 537 PLAN UPDATE STUDY BOUNDARY
  - EXISTING CCDA PUBLIC SOWER SERVICE AREA
  - BASELINE NEEDS AREA (CHANGING)
  - PROPOSED NEEDS IDENTIFICATION SURVEY AREAS
  - PREVIOUS PERKINS NEEDS I.D. SURVEY AREA



**NOTES:**  
THIS PLAN SHALL BE A BLUELINE OR BLACKLINE PRINT WITH A RED OR GREEN REGISTRATION MARK. TO BE CONSIDERED A VALID PLAN, REPRODUCTION OF THIS PLAN FOR ANY PURPOSE WITHOUT THE APPROVAL OF HERBERT E. MCCORMACK, JR., P.E. CONSULTING ENGINEERS AND SURVEYORS, INC. IS STRICTLY PROHIBITED.

**NEEDS IDENTIFICATION SURVEY AREAS**  
FOR  
**ACT 537 PLAN UPDATE**  
NEWTOWN TOWNSHIP

DELAWARE COUNTY, PA.  
OCTOBER 8, 2012

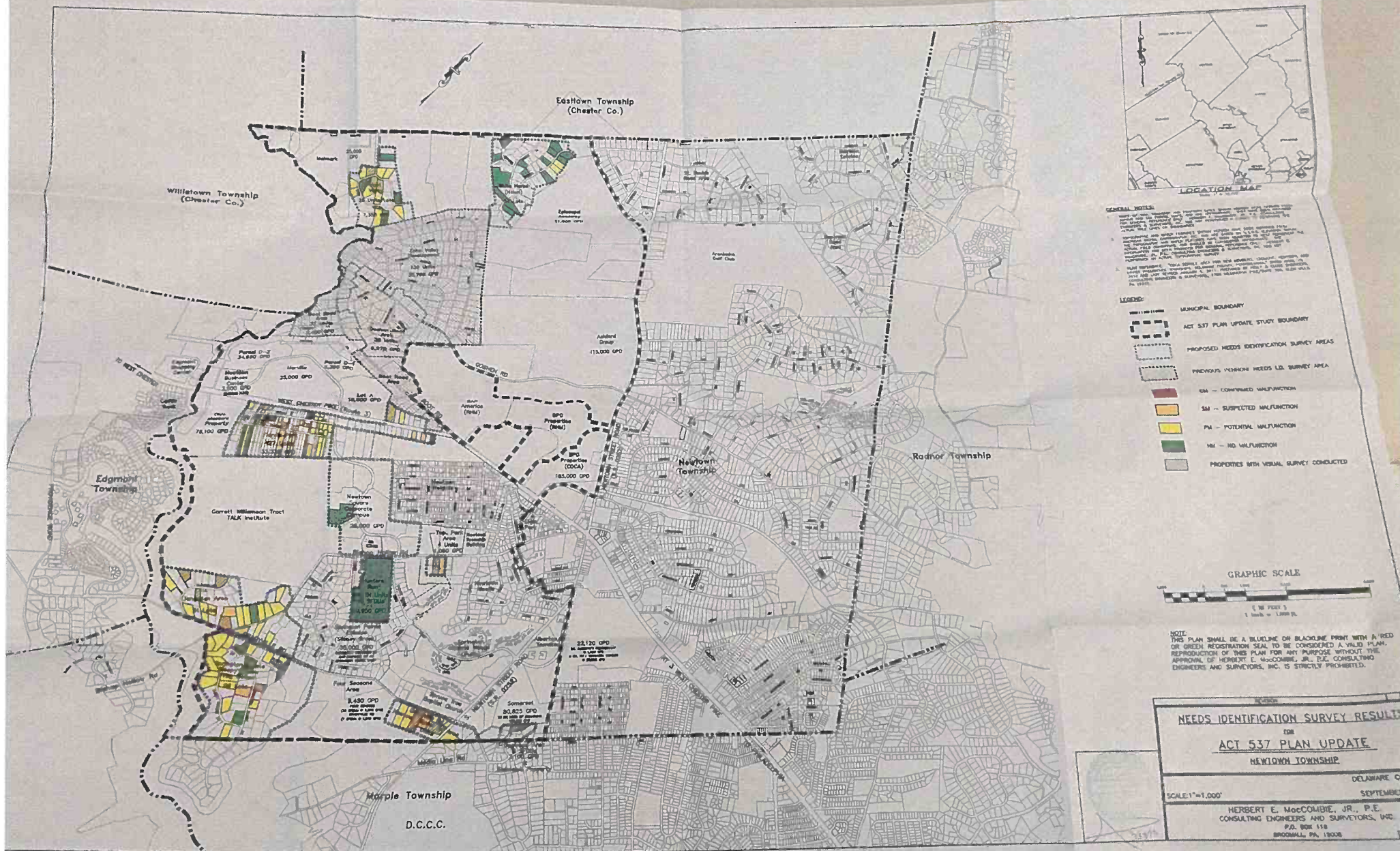
SCALE: 1"=1,000'

HERBERT E. MCCORMACK, JR., P.E.  
CONSULTING ENGINEERS AND SURVEYORS, INC.  
P.O. BOX 110  
BROOKLYN, PA. 19008

ATTENTION ALL CLIENTS!!!

## APPENDIX B





## APPENDIX C

# Results of Questionnaire Survey (Tier 1) and Visual Field Survey (Tier 2)

	Mail Surveys Sent	Survey Responses Received	Percent Returned
<b>IMMEDIATE NEEDS</b>			
Dogwood Area	9	2	22%
Township Park Area	4	2	50%
Hunters Run (2 COLDS for 76 Total Units)	1	2	100%
Campus Blvd	17	3	18%
Florida Park Area	131	51	39%
Hunt Valley Area	30	16	53%
<b>FUTURE NEEDS</b>			
Gradyville/Newtown Street Rd Area	12	7	58%
Llangollen Area	52	20	38%
Springton Pointe/Sleepy Hollow/Frog Hollow	54	23	43%
Whitehorse (Nolen)	53	16	30%
	<b>363</b>	<b>142</b>	<b>39%</b>

For Between 101 and 500 Surveys Sent 25% Return is Required and Verification of 25% of Received Questionnaires is Required (= 142 x 25%)

36

Percent Verification	Minimum Number to be Field Verified	Requests for Field Verification Sent	TOTAL Field Verified	TOTAL % Field Verified
25%	1	2	2	100%
25%	1	2	1	50%
25%	1	1	2	100%
25%	1	3	3	100%
25%	13	17	12	24%
25%	4	6	4	25%
25%	2	4	2	29%
25%	5	7	5	25%
25%	6	8	4	17%
25%	4	6	5	31%
	<b>36</b>	<b>56</b>	<b>40</b>	<b>28%</b>

40 OLDS Field Verified > 36 OLDS Required to be Verified  
(40 Field Verified / 142 Required to be Field Verified = 28%  
Therefore, Survey has been Validated.



## APPENDIX D

# Total of Questionnaire and Visual Survey Results Public Health Needs

Newtown Township

Act 537 Sewage Needs Identification Survey

Categorized by Area											
NEEDS AREAS	Mail Surveys Sent	TOTAL Responses	CM #	CM %	SM #	SM %	PM #	PM %	NM #	NM %	
<b>Immediate Needs</b>											
Dogwood Area	9	2	0	0%	1	50%	0	0%	1	50%	
Township Park Area	4	2	0	0%	2	100%	0	0%	0	0%	
Hunters Run (2 COLDS for 76 Total Units)	1	2	0	0%	0	0%	2	100%	0	0%	
Campus Boulevard	17	3	0	0%	0	0%	0	0%	3	100%	
Florida Park Area	131	51	1	2%	21	41%	27	53%	2	4%	
Hunt Valley Area	30	16	0	0%	1	6%	11	69%	4	25%	
<b>TOTAL IMMEDIATE NEEDS AREAS</b>	<b>192</b>	<b>76</b>	<b>1</b>	<b>1%</b>	<b>25</b>	<b>33%</b>	<b>40</b>	<b>53%</b>	<b>10</b>	<b>13%</b>	
<b>Future Needs</b>											
Gradyville/Newtown Street Road Area	12	7	0	0%	1	14%	6	86%	0	0%	
Llangollen Area	52	20	0	0%	6	30%	13	65%	1	5%	
Springton Pointe/Sleepy Hollow/Frog Hollow	54	23	0	0%	1	4%	17	74%	5	22%	
Whitehorse (Nolen)	53	16	0	0%	0	0%	2	13%	14	88%	
<b>TOTAL FUTURE NEEDS AREAS</b>	<b>171</b>	<b>66</b>	<b>0</b>	<b>0%</b>	<b>8</b>	<b>12%</b>	<b>38</b>	<b>58%</b>	<b>20</b>	<b>30%</b>	
<b>TOTAL ENTIRE STUDY AREA</b>	<b>363</b>	<b>142</b>	<b>1</b>	<b>1%</b>	<b>33</b>	<b>23%</b>	<b>78</b>	<b>55%</b>	<b>30</b>	<b>21%</b>	

CM - Confirmed Malfunctions

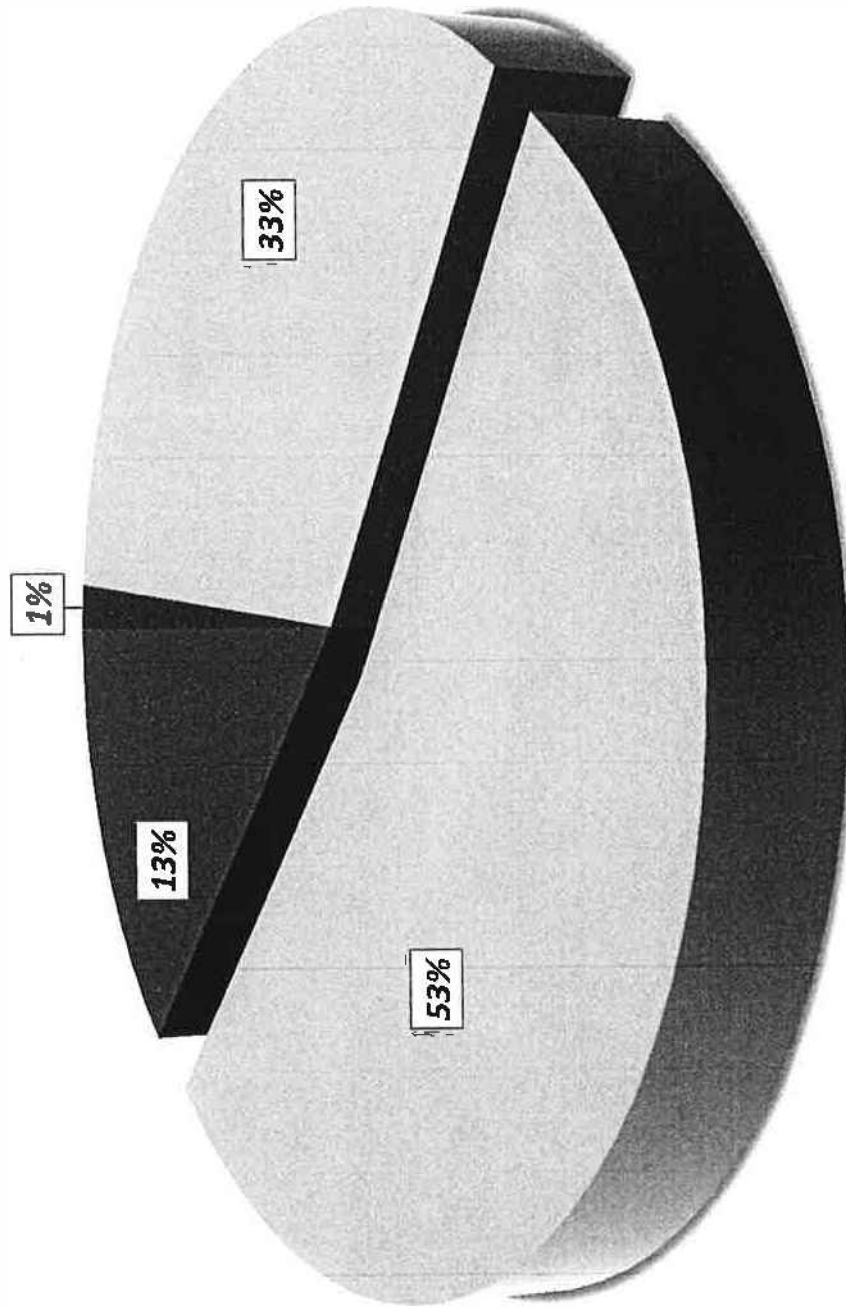
SM - Suspected Malfunctions

PM - Potential Malfunctions

NM - No Malfunction

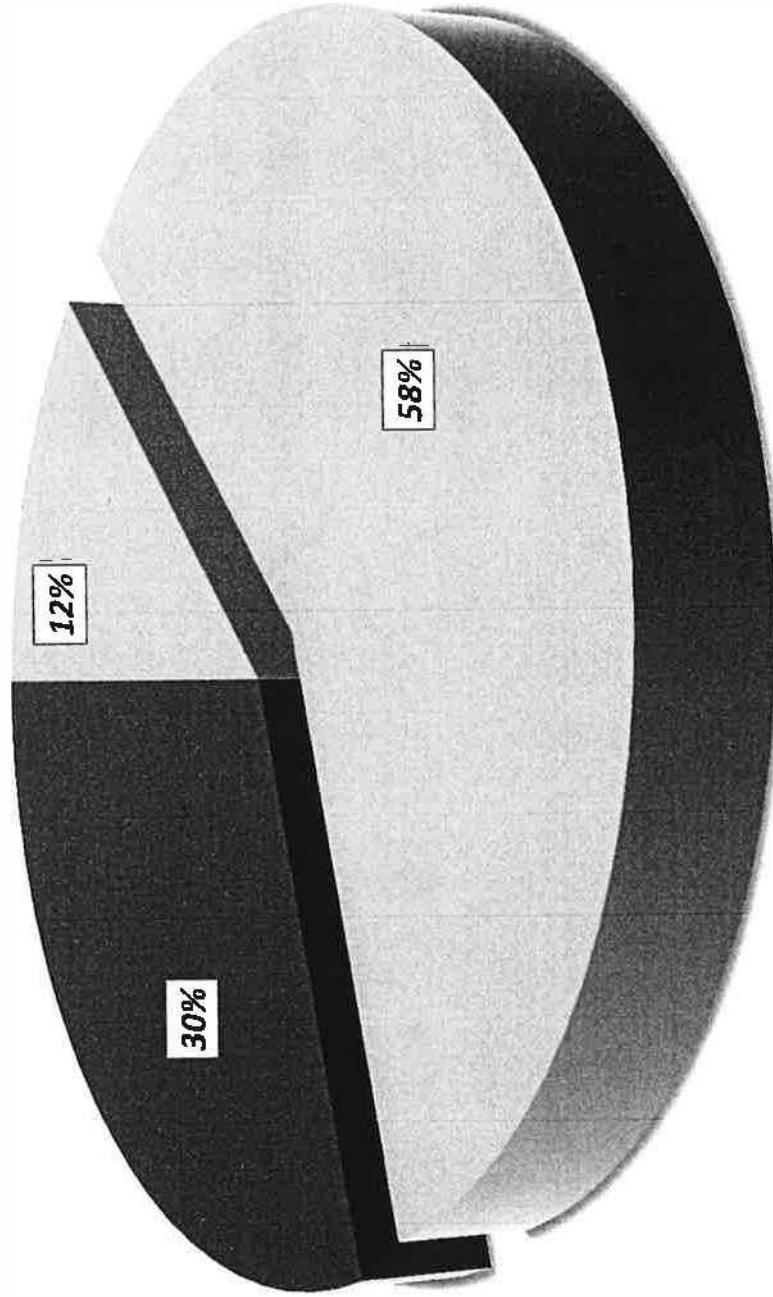
## TOTAL IMMEDIATE NEEDS AREAS

■ CM ■ SM ■ PM ■ NM



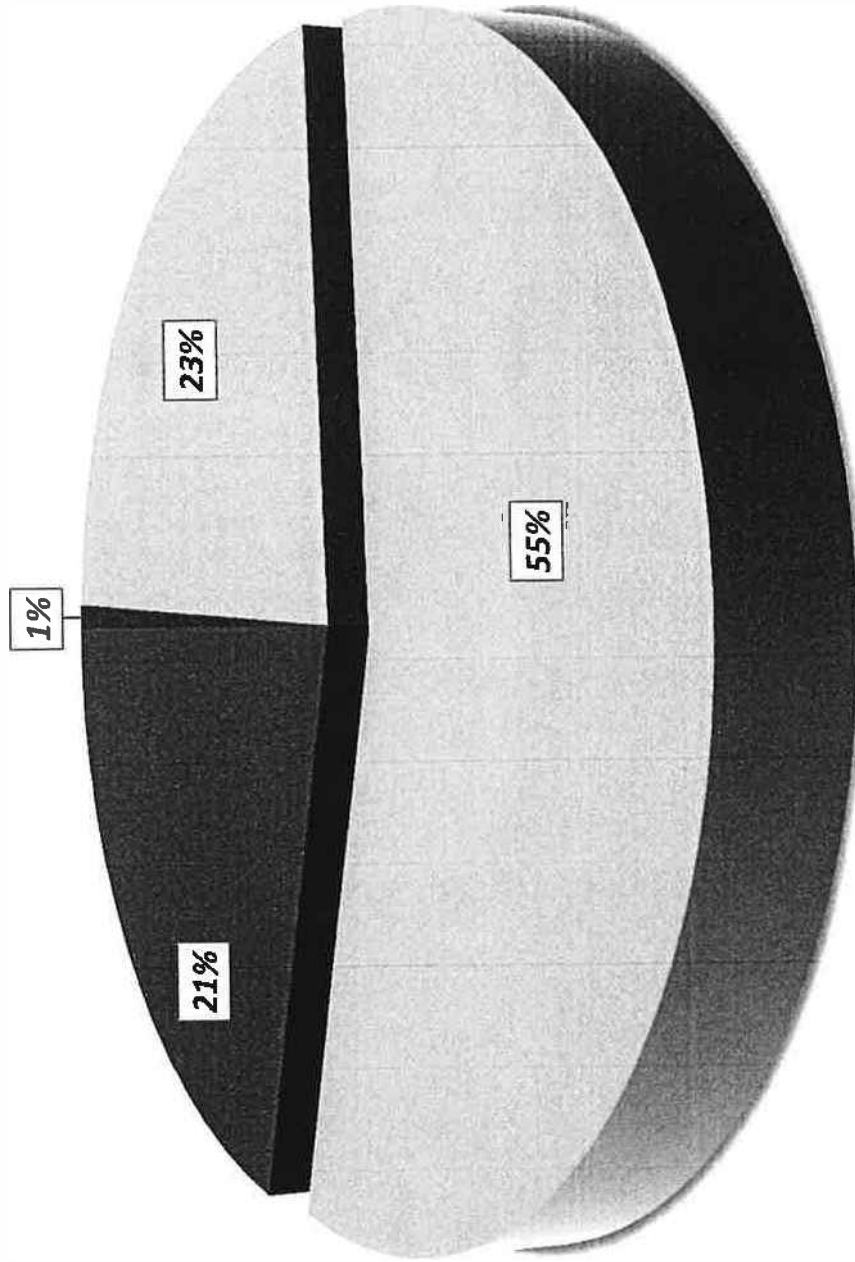
## TOTAL FUTURE NEEDS AREAS

■ CM ■ SM ■ PM ■ NM



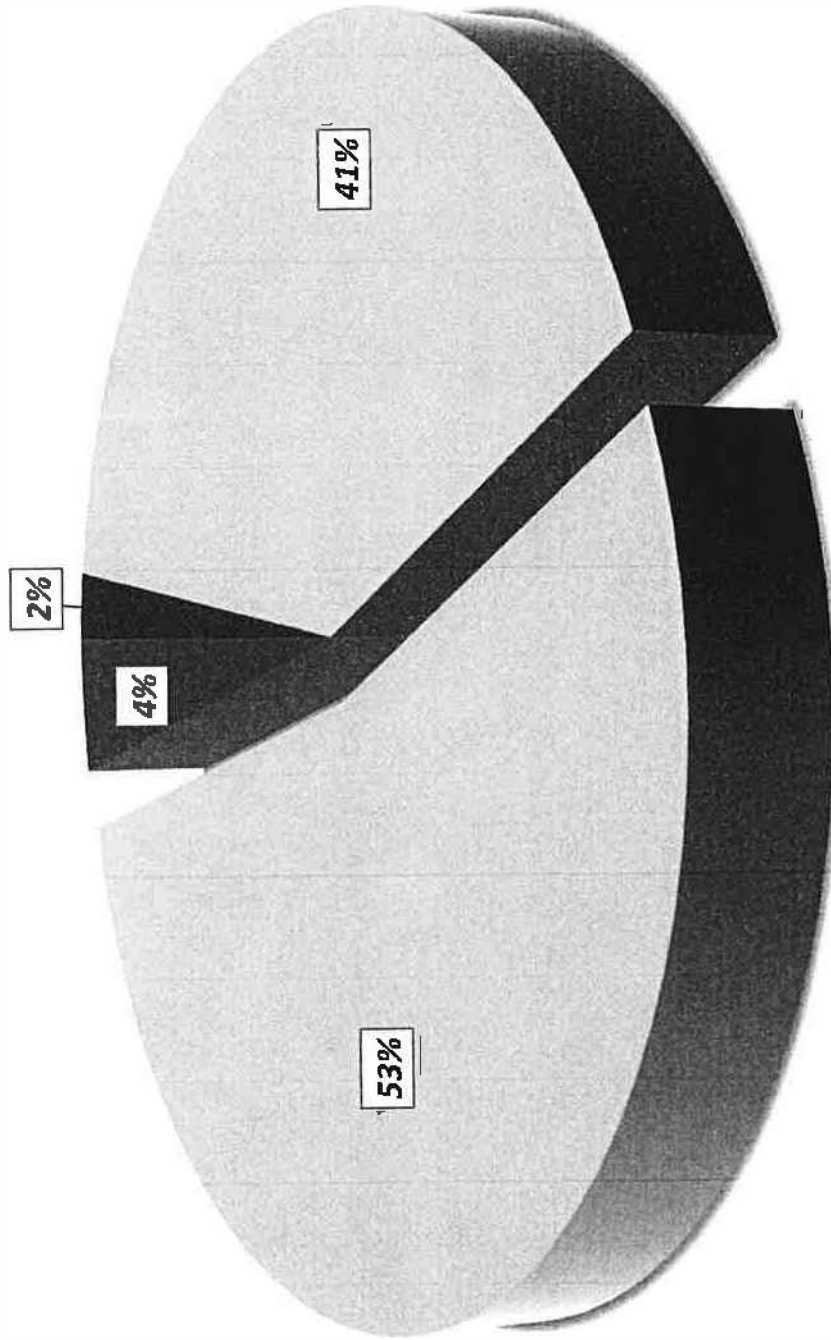
## RESULTS FOR ENTIRE ACT 537 PLAN STUDY AREA

■ CM ■ SM ■ PM ■ NM



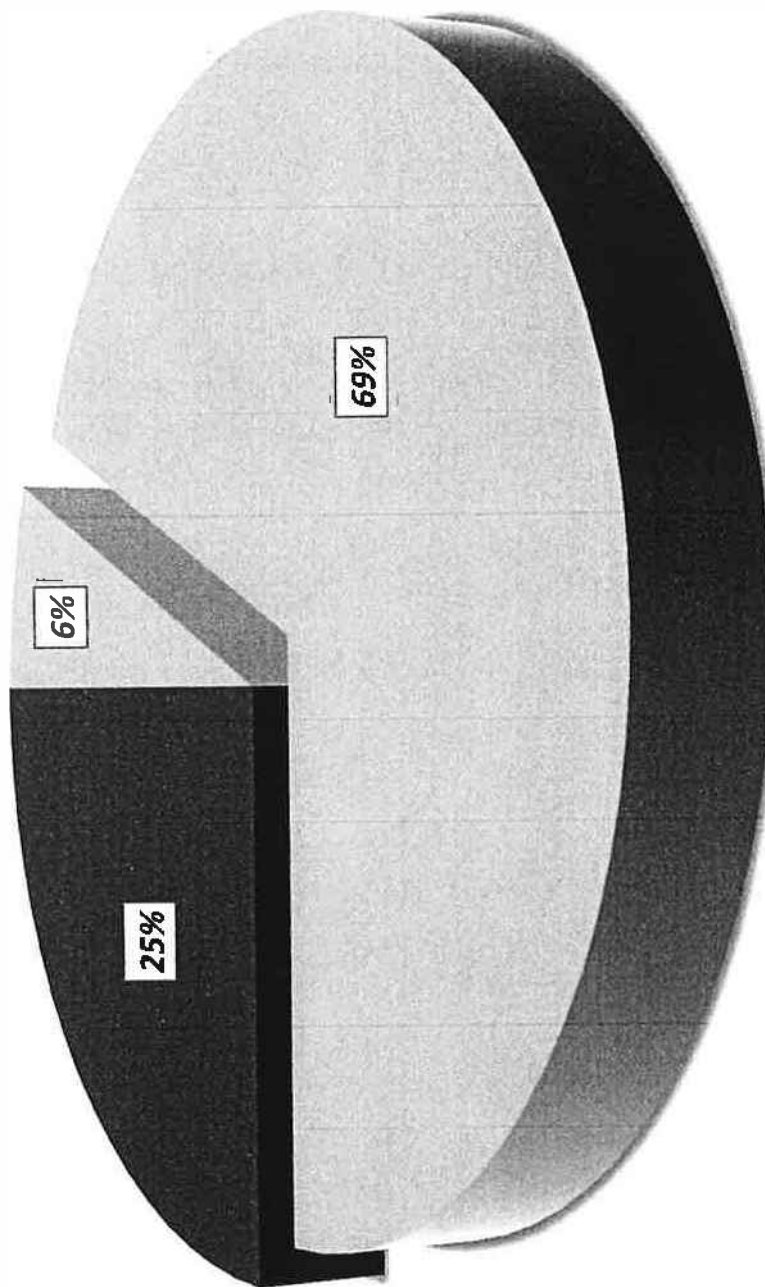
**TOTAL Florida Park Area**  
**51 Responses of 131 Questionnaires Mailed**

■ CM ■ SM ■ PM ■ NM



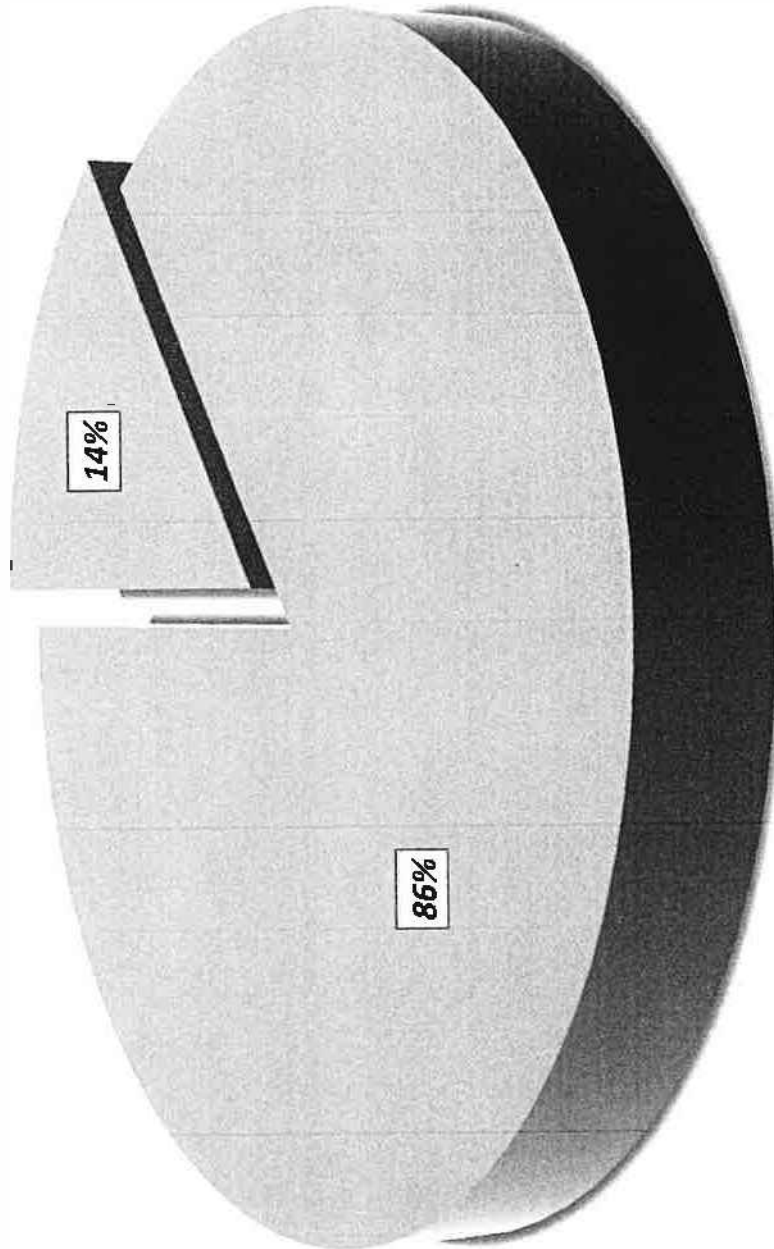
**TOTAL Hunt Valley Area**  
**16 Responses of 30 Questionnaires Mailed**

■ CM ■ SM ■ PM ■ NM



**TOTAL Gradyville Rd./Newtown Street Rd. Area**  
**7 Responses of 12 Questionnaires Mailed**

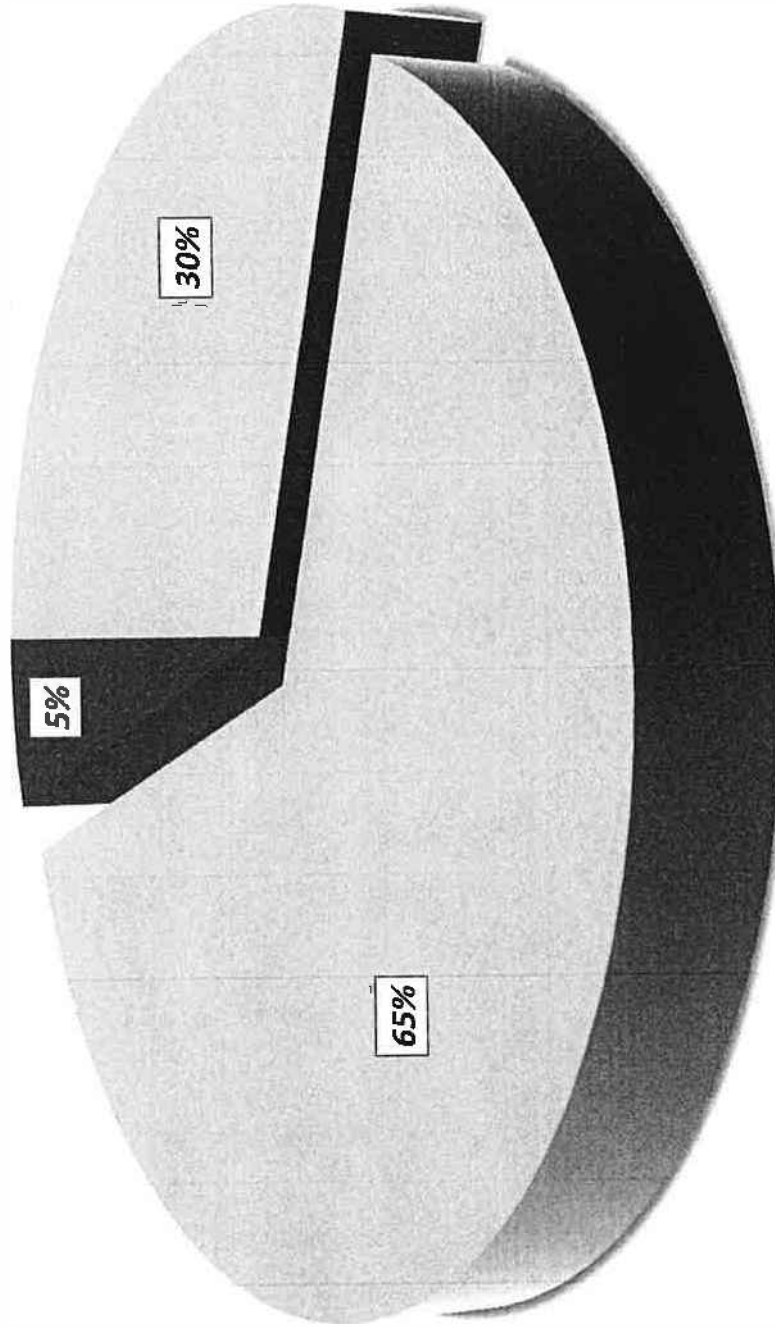
■ CM ■ SM ■ PM ■ NM





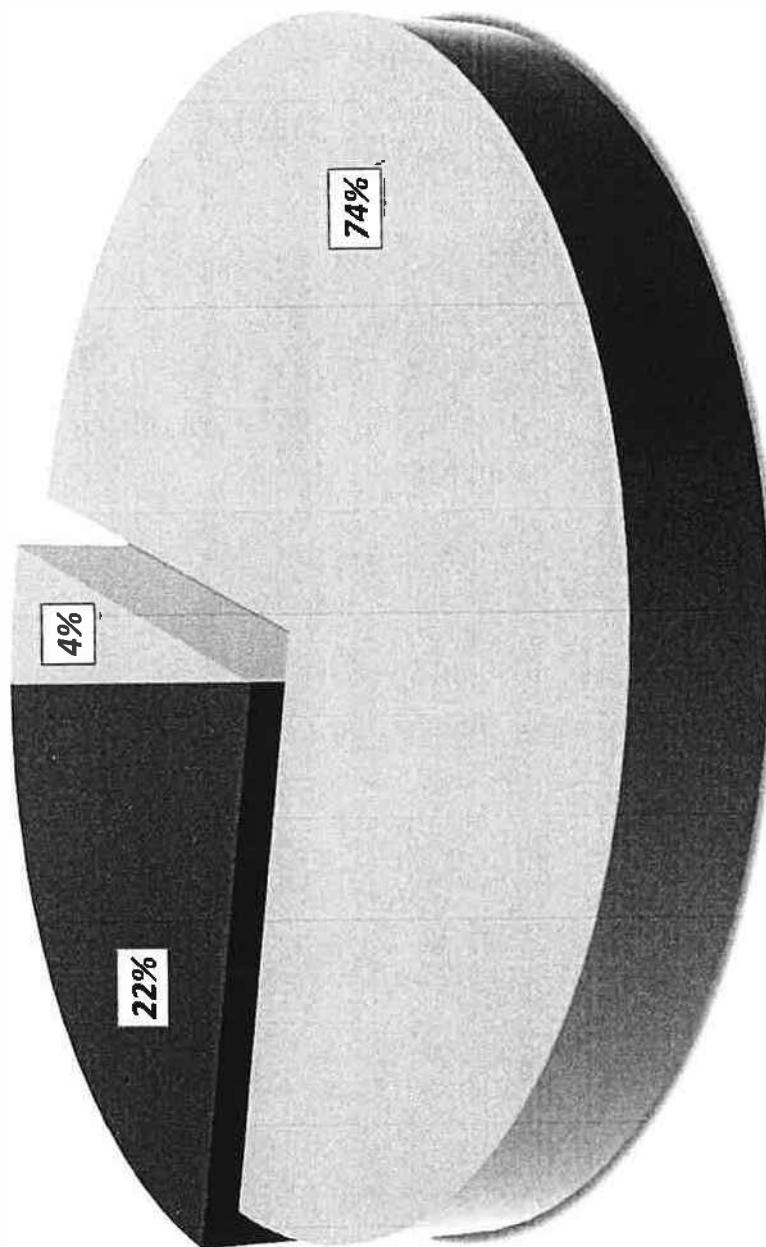
**TOTAL Llangollen Area**  
**20 Responses of 52 Questionnaires Mailed**

■ CM ■ SM ■ PM ■ NM



**TOTAL Springton Pointe/Sleepy Hollow/Frog Hollow Area**  
**23 Responses of 54 Questionnaires Mailed**

■ CM ■ SM ■ PM ■ NM

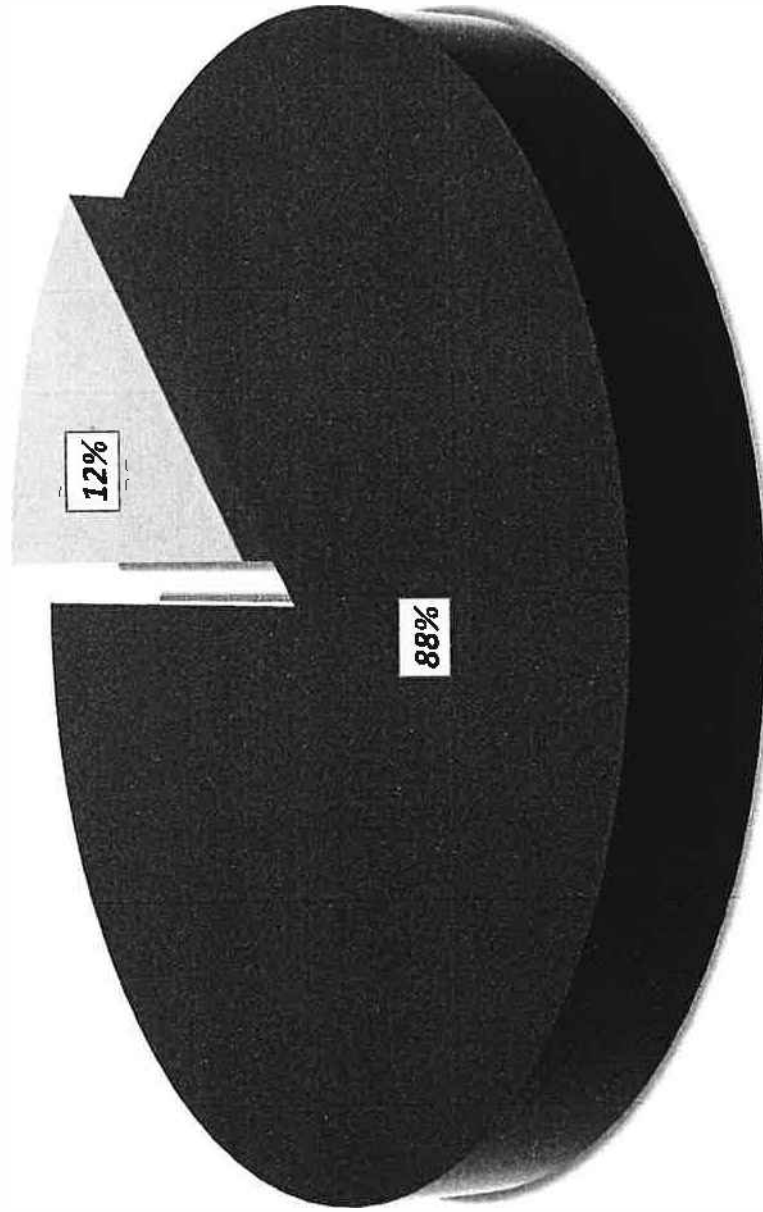


## **TOTAL Whitehorse (Nolen)**

**16 Responses of 53 Questionnaires Mailed**

**Note: 47 of the 57 total lots were built at the time of this survey**

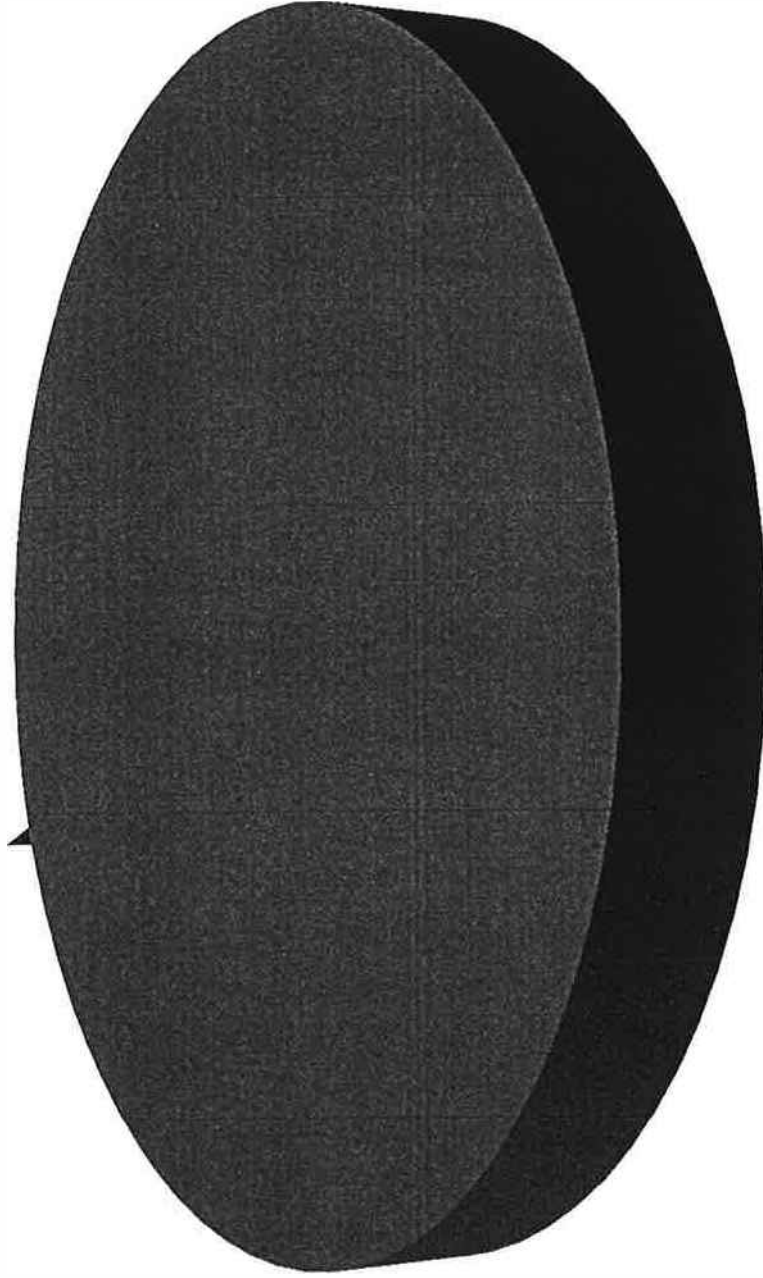
■ CM ■ SM ■ PM ■ NM



# TOTAL CONFIRMED MALFUNCTIONS (CM)

- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Liangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow

Florida Park Area  
100%



# Total of Questionnaire and Visual Survey Results Public Health Needs

Newtown Township

Act 537 Sewage Needs Identification Survey

Categorized by Malfunction										
	Mail Surveys Sent	TOTAL Responses	CM #	CM %	SM #	SM %	PM #	PM %	NM #	NM %
<b>NEEDS AREAS</b>										
<b>Immediate Needs</b>										
Dogwood Area	9	2	0	0%	1	3%	0	0%	1	3%
Township Park Area	4	2	0	0%	2	6%	0	0%	0	0%
Hunters Run (2 COLDS for 76 Total Units)	1	2	0	0%	0	0%	2	2%	0	0%
Campus Boulevard	17	3	0	0%	0	0%	0	0%	3	10%
Florida Park Area	131	51	1	100%	21	64%	27	34%	2	7%
Hunt Valley Area	30	16	0	0%	1	3%	11	14%	4	13%
<b>TOTAL IMMEDIATE NEEDS AREAS</b>	<b>192</b>	<b>76</b>	<b>1</b>	<b>100%</b>	<b>25</b>	<b>76%</b>	<b>40</b>	<b>51%</b>	<b>10</b>	<b>33%</b>
<b>Future Needs</b>										
Gradyville/Newtown Street Road Area	12	7	0	0%	1	3%	6	8%	0	0%
Llangollen Area	52	20	0	0%	6	18%	13	17%	1	3%
Springton Pointe/Sleepy Hollow/Frog Hollow	54	23	0	0%	1	3%	17	22%	5	17%
Whitehorse (Nolen)	53	16	0	0%	0	0%	2	3%	14	47%
<b>TOTAL FUTURE NEEDS AREAS</b>	<b>171</b>	<b>66</b>	<b>0</b>	<b>0%</b>	<b>8</b>	<b>24%</b>	<b>38</b>	<b>49%</b>	<b>20</b>	<b>67%</b>
<b>TOTAL ENTIRE STUDY AREA</b>	<b>363</b>	<b>142</b>	<b>1</b>	<b>100%</b>	<b>33</b>	<b>100%</b>	<b>78</b>	<b>100%</b>	<b>30</b>	<b>100%</b>

CM - Confirmed Malfunctions

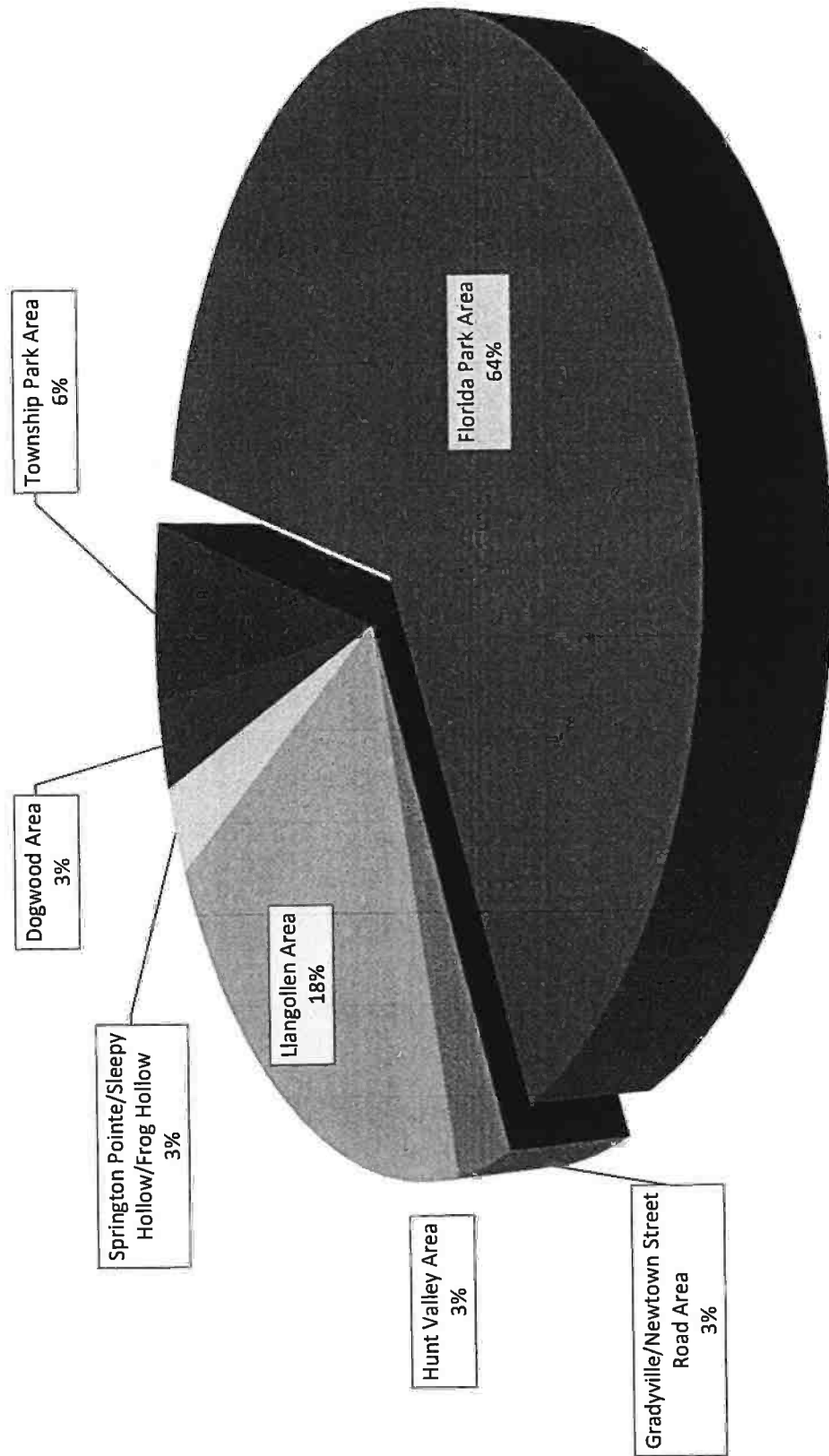
SM - Suspected Malfunctions

PM - Potential Malfunctions

NM - No Malfunction

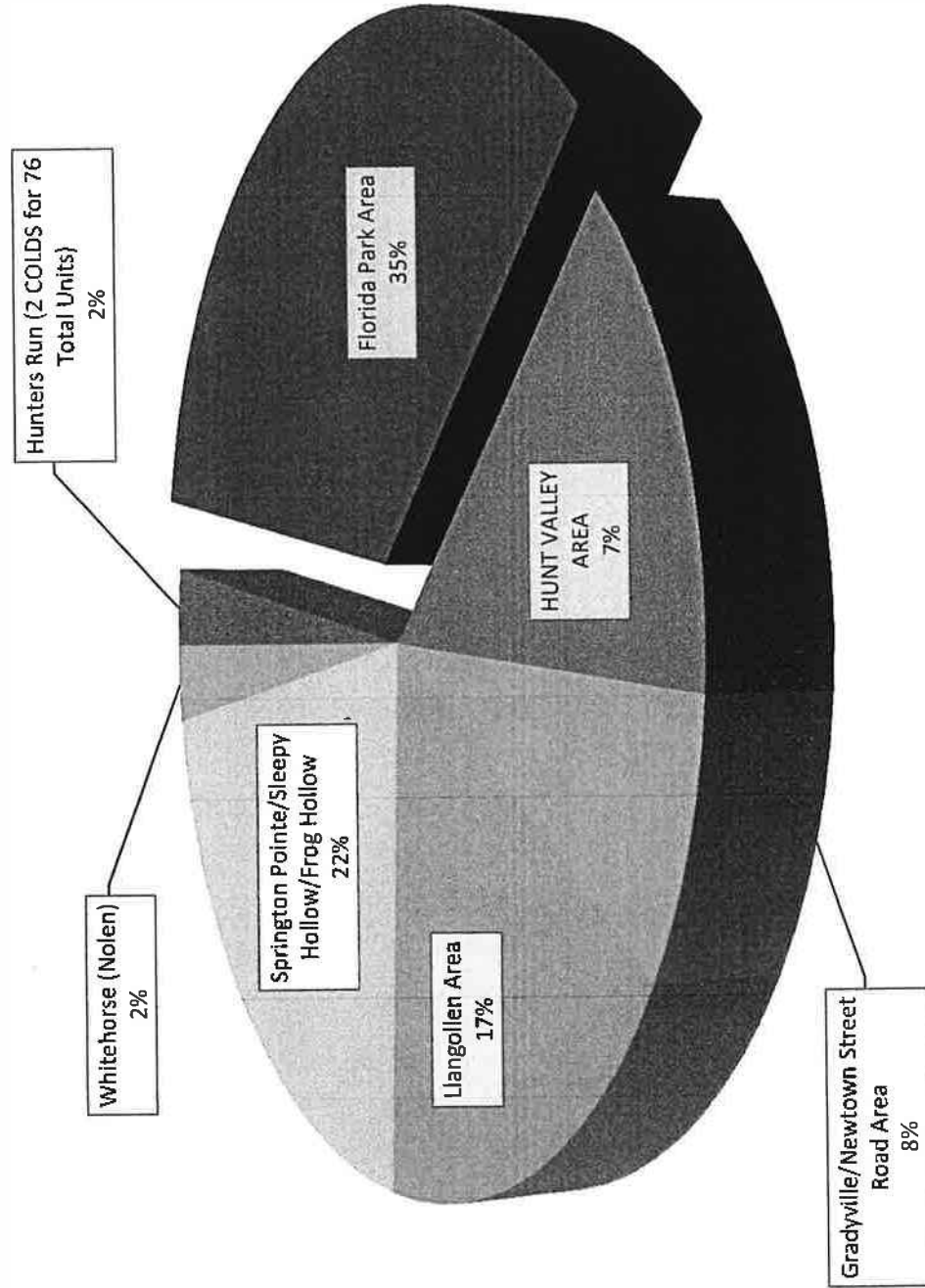
# TOTAL SUSPECTED MALFUNCTIONS (SM)

- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Llangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow



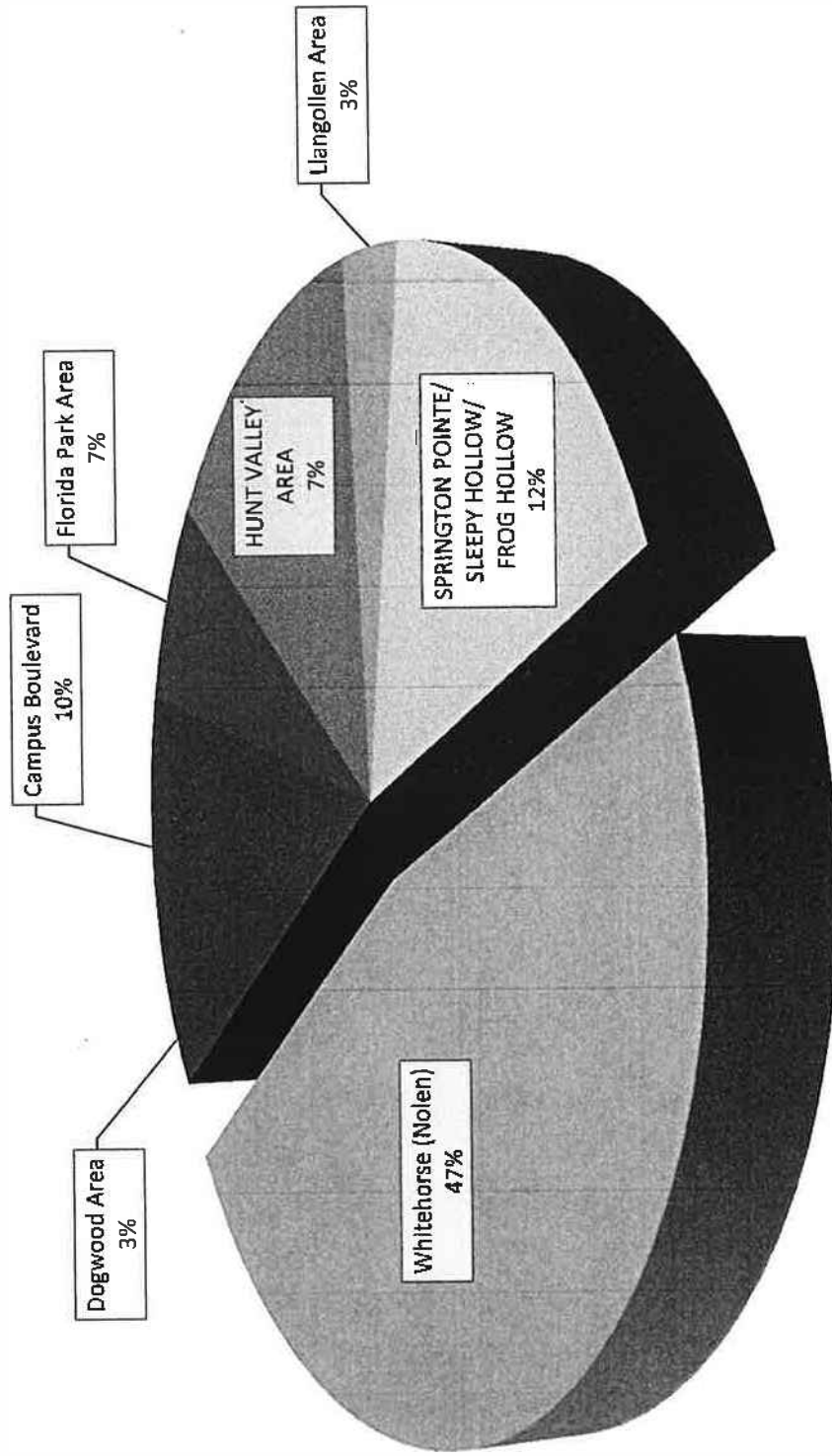
## TOTAL POTENTIAL MALFUNCTIONS (PM)

- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Llangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow



## TOTAL NO MALFUNCTION (NM)

- Dogwood Area
- Township Park Area
- Hunters Run (2 COLDS for 76 Total Units)
- Campus Boulevard
- Florida Park Area
- Hunt Valley Area
- Gradyville/Newtown Street Road Area
- Llangollen Area
- Springton Pointe/Sleepy Hollow/Frog Hollow
- Whitehorse (Nolen)





## APPENDIX E

# Visual Survey Public Health Needs

Newtown Township

Act 537 Sewage Needs Identification Survey

Categorized by Area											
NEEDS AREAS	Permission Request Sent	TOTAL Granted	CM #	CM %	SM #	SM %	PM #	PM %	NM #	NM %	
<b>Immediate Needs</b>											
Dogwood Area	2	2	0	0%	1	50%	0	0%	1	50%	
Township Park Area	2	1	0	0%	1	100%	0	0%	0	0%	
Hunters Run (2 COLDS for 76 Total Units)	1	2	0	0%	0	0%	0	0%	2	100%	
Campus Boulevard	3	3	0	0%	0	0%	0	0%	3	100%	
Florida Park Area	17	12	1	8%	7	58%	4	33%	0	0%	
Hunt Valley Area	6	4	0	0%	1	25%	2	50%	1	25%	
<b>TOTAL IMMEDIATE NEEDS AREAS</b>	<b>31</b>	<b>24</b>	<b>1</b>	<b>4%</b>	<b>10</b>	<b>42%</b>	<b>6</b>	<b>25%</b>	<b>7</b>	<b>29%</b>	
<b>Future Needs</b>											
Gradyville/Newtown Street Road Area	4	2	0	0%	0	0%	2	100%	0	0%	
Llangollen Area	7	5	0	0%	4	80%	0	0%	1	20%	
Springton Pointe/Sleepy Hollow/Frog Hollow	8	4	0	0%	1	25%	0	0%	3	75%	
Whitehorse (Nolen)	6	5	0	0%	0	0%	0	0%	5	100%	
<b>TOTAL FUTURE NEEDS AREAS</b>	<b>25</b>	<b>16</b>	<b>0</b>	<b>0%</b>	<b>5</b>	<b>31%</b>	<b>2</b>	<b>13%</b>	<b>9</b>	<b>56%</b>	
<b>TOTAL ENTIRE STUDY AREA</b>	<b>56</b>	<b>40</b>	<b>1</b>	<b>3%</b>	<b>15</b>	<b>38%</b>	<b>8</b>	<b>20%</b>	<b>16</b>	<b>40%</b>	

CM - Confirmed Malfunctions

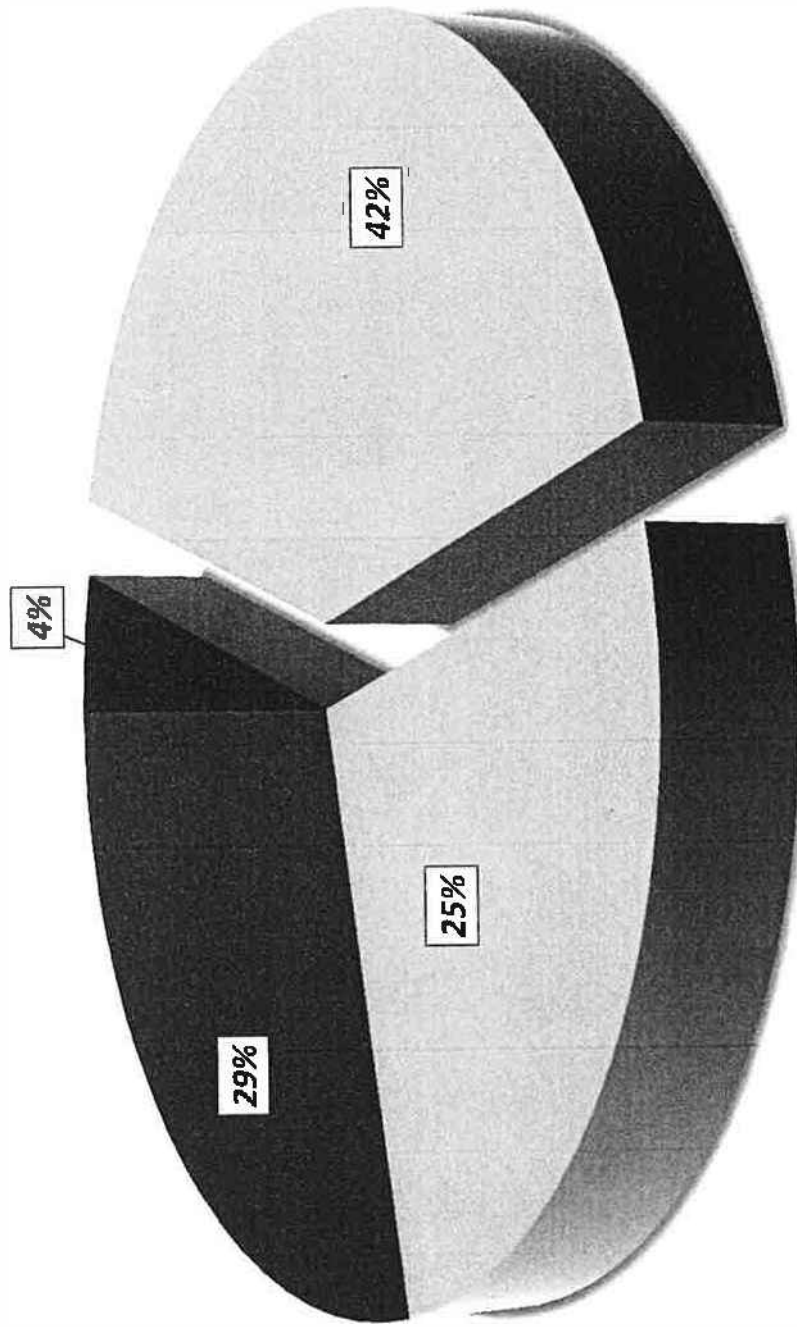
SM - Suspected Malfunctions

PM - Potential Malfunctions

NM - No Malfunction

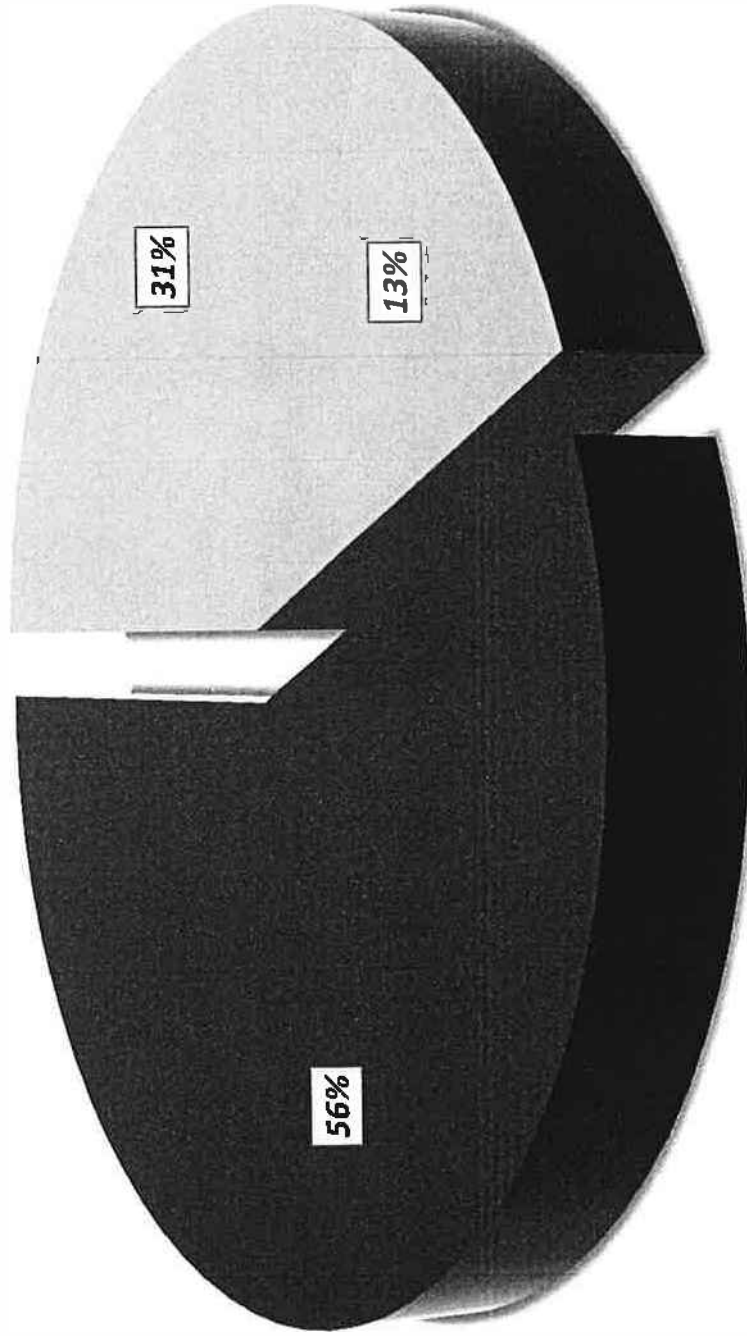
**VISUAL SURVEY TOTAL  
IMMEDIATE NEEDS AREAS**

■ CM ■ SM ■ PM ■ NM



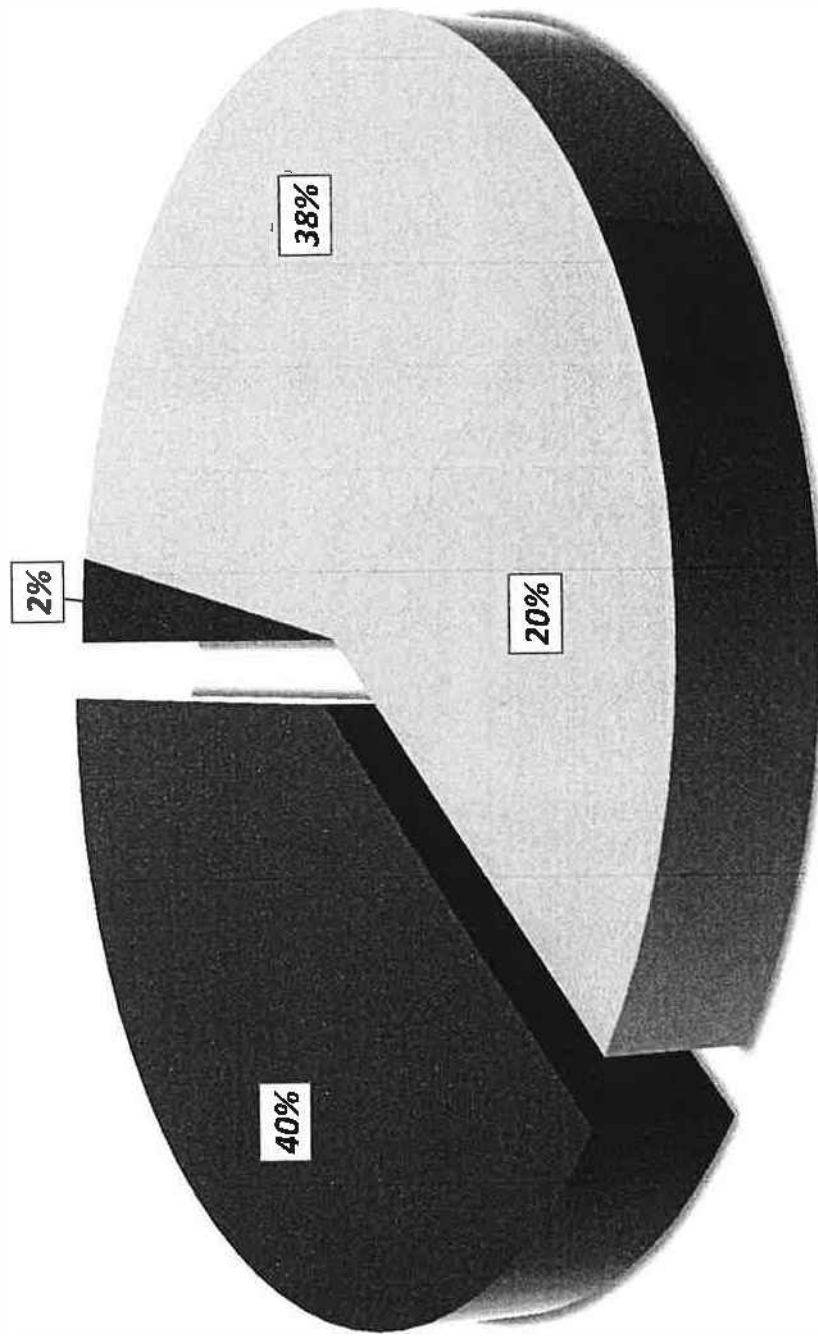
**VISUAL SURVEY TOTAL  
FUTURE NEEDS AREAS**

■ CM ■ SM ■ PM ■ NM



**VISUAL SURVEY  
RESULTS FOR ENTIRE ACT 537 PLAN STUDY AREA**

■ CM ■ SM ■ PM ■ NM

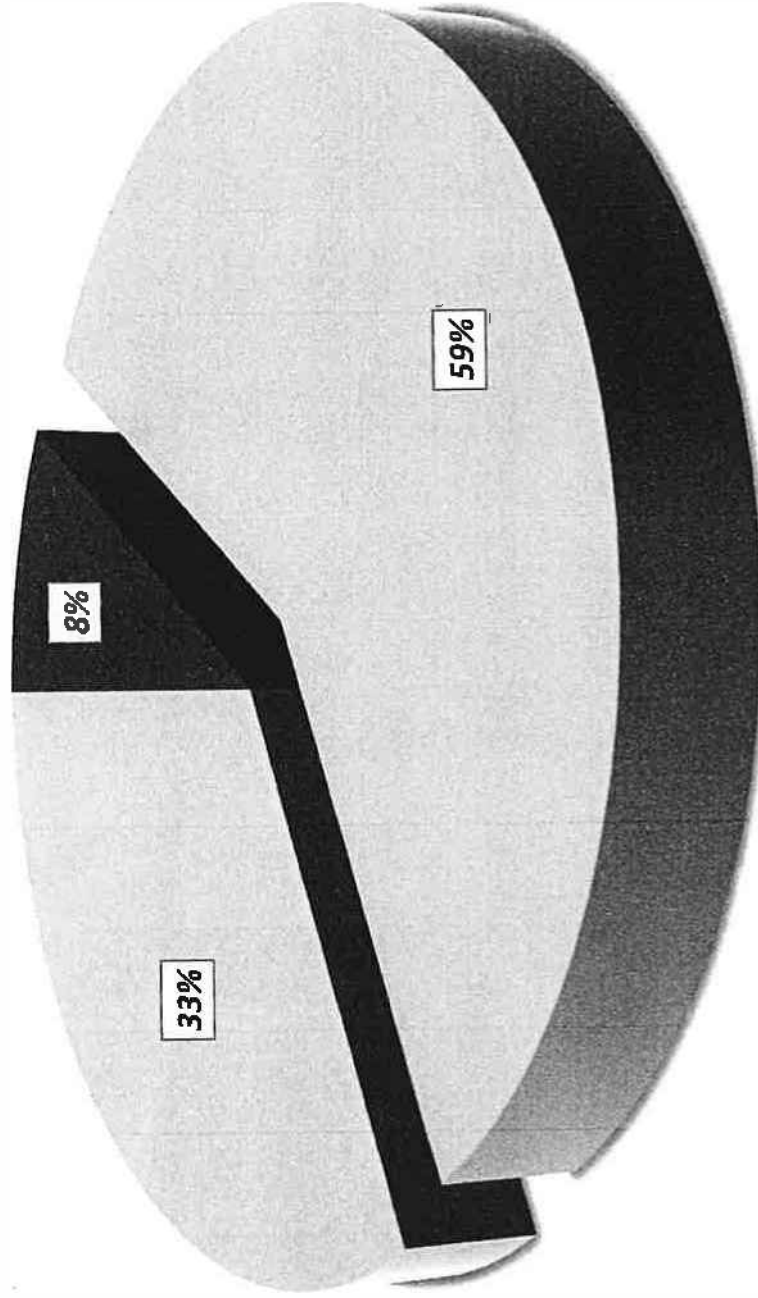


## VISUAL SURVEY TOTAL

### Florida Park Area

Permission Granted to 12 Responses of 17 Requests to Access Property

■ CM ■ SM ■ PM ■ NM

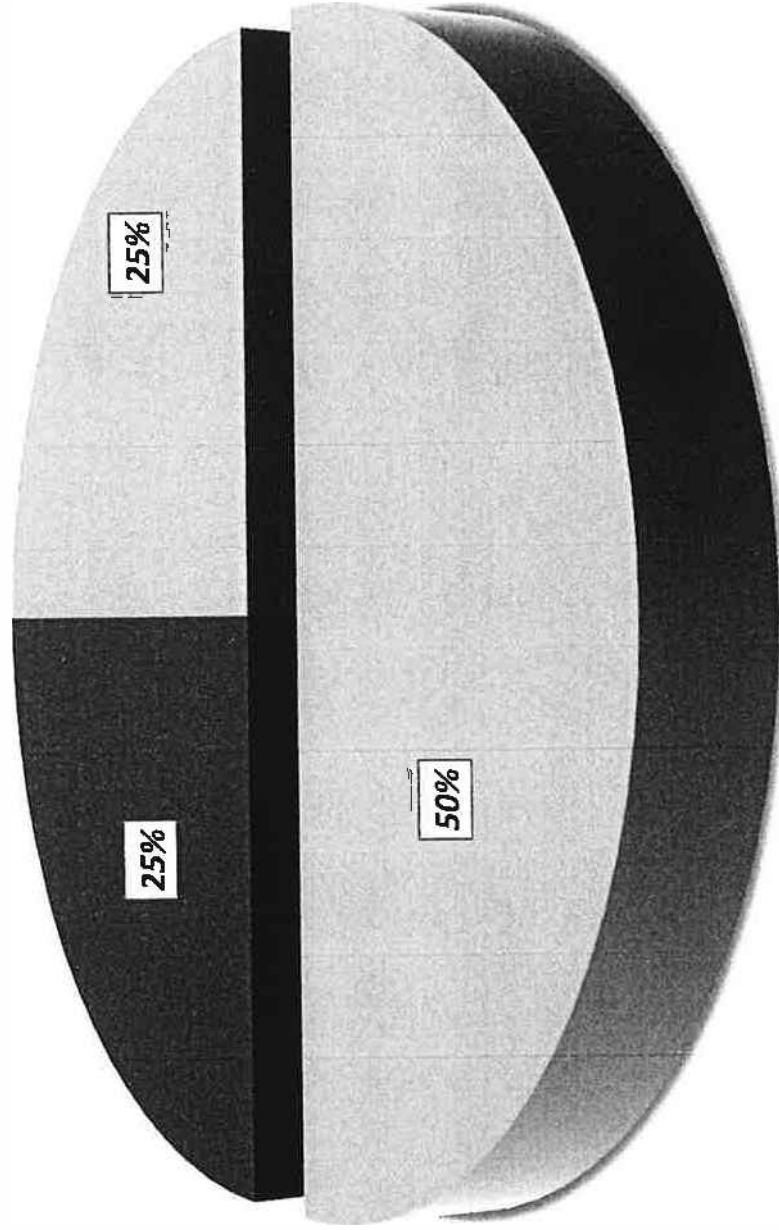


## **VISUAL SURVEY TOTAL**

### **Hunt Valley Area**

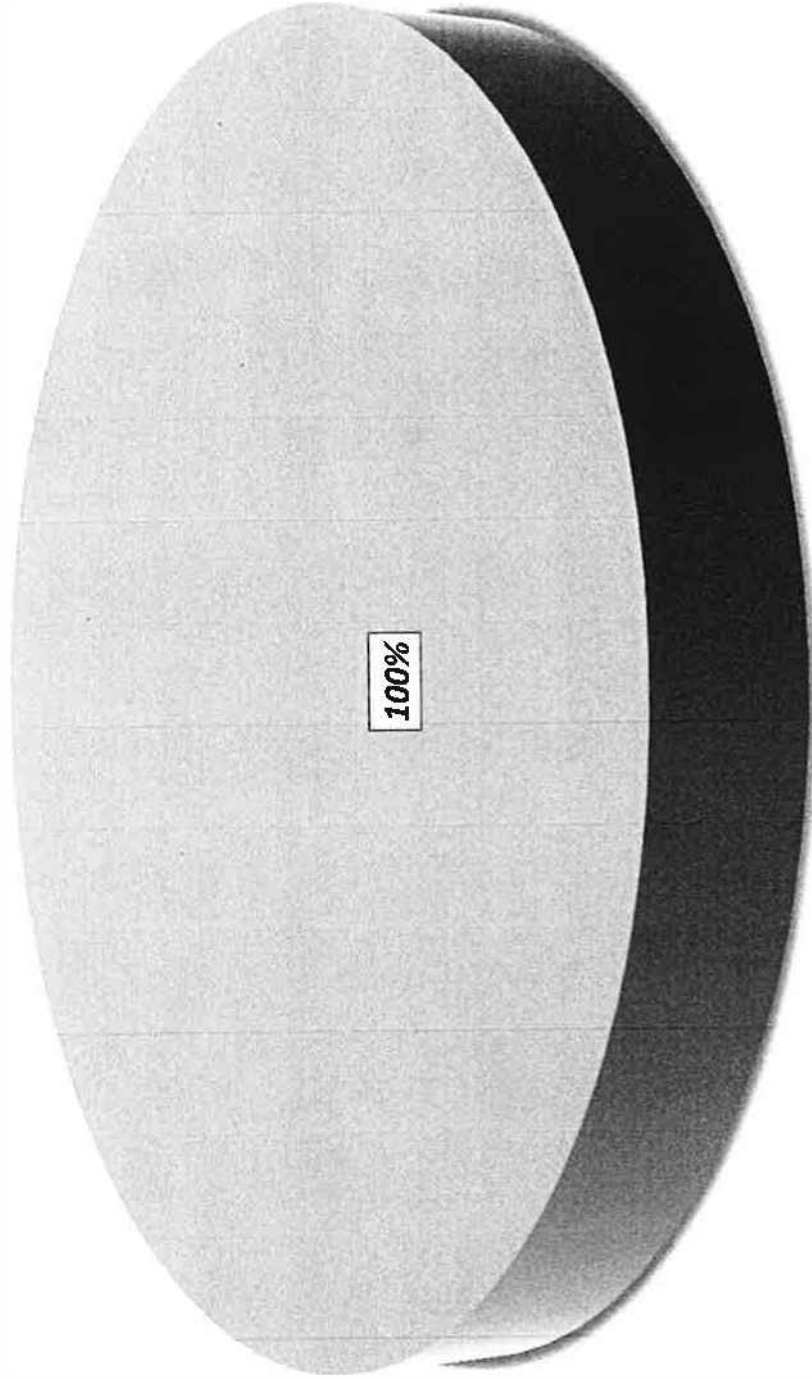
*Permission Granted to 4 Responses of 6 Requests to Access Property*

■ CM ■ SM ■ PM ■ NM



**VISUAL SURVEY TOTAL**  
**Gradyville Rd./Newtown Street Rd. Area**  
**Permission Granted to 2 Responses of 4 Requests to Access Property**

■ CM ■ SM ■ PM ■ NM



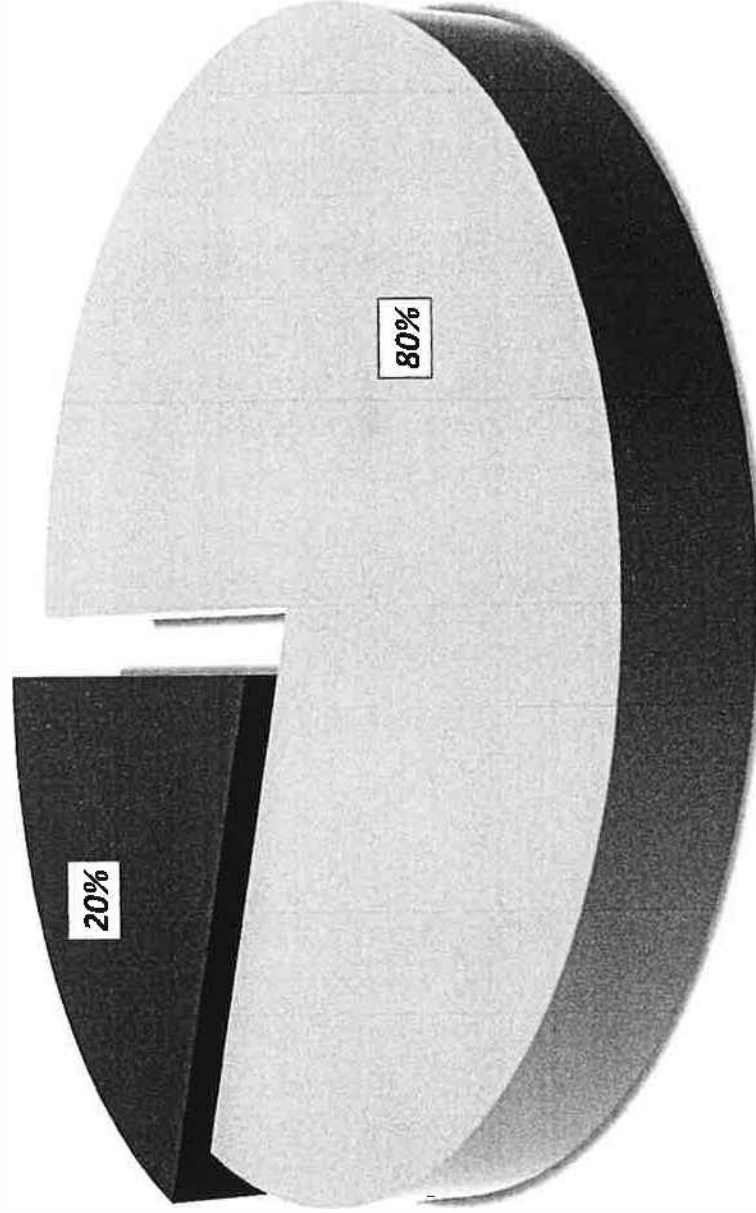


## VISUAL SURVEY TOTAL

### Llangollen Area

Permission Granted to 5 Responses of 7 Requests to Access Property

■ CM ■ SM ■ PM ■ NM



**VISUAL SURVEY TOTAL**  
**Springton Pointe/Sleepy Hollow/Frog Hollow Area**  
**Permission Granted to 4 Responses of 8 Requests to Access Property**

■ CM ■ SM ■ PM ■ NM



## **VISUAL SURVEY TOTAL**

### **Whitehorse (Nolen)**

**Permission Granted to 5 Responses of 6 Requests to Access Property**

**Note: 47 of the 57 total lots were built at the time of this survey**

■ CM   SM   PM   NM



# Visual Survey Public Health Needs

Newtown Township

Act 537 Sewage Needs Identification Survey

Categorized by Malfunction											
NEEDS AREAS	Permission Request Sent	TOTAL Granted	CM #	CM %	SM #	SM %	PM #	PM %	NM #	NM %	
<b>Immediate Needs</b>											
Dogwood Area	2	2	0	0%	1	7%	0	0%	1	6%	
Township Park Area	2	1	0	0%	1	7%	0	0%	0	0%	
Hunters Run (2 COLDS for 76 Total Units)	1	2	0	0%	0	0%	0	0%	2	13%	
Campus Boulevard	3	3	0	0%	0	0%	0	0%	3	19%	
Florida Park Area	17	12	1	8%	7	50%	4	50%	0	0%	
Hunt Valley Area	6	4	0	0%	1	7%	2	25%	1	6%	
<b>TOTAL IMMEDIATE NEEDS AREAS</b>	<b>31</b>	<b>24</b>	<b>1</b>	<b>100%</b>	<b>10</b>	<b>67%</b>	<b>6</b>	<b>75%</b>	<b>7</b>	<b>44%</b>	
<b>Future Needs</b>											
Gradyville/Newtown Street Road Area	4	2	0	0%	0	0%	2	25%	0	0%	
Llangollen Area	7	5	0	0%	4	27%	0	0%	1	6%	
Springton Pointe/Sleepy Hollow/Frog Hollow	8	4	0	0%	1	7%	0	0%	3	19%	
Whitehorse (Nolen)	6	5	0	0%	0	0%	0	0%	5	31%	
<b>TOTAL FUTURE NEEDS AREAS</b>	<b>25</b>	<b>16</b>	<b>0</b>	<b>0%</b>	<b>5</b>	<b>33%</b>	<b>2</b>	<b>25%</b>	<b>9</b>	<b>56%</b>	
<b>TOTAL ENTIRE STUDY AREA</b>	<b>56</b>	<b>40</b>	<b>1</b>	<b>100%</b>	<b>15</b>	<b>100%</b>	<b>8</b>	<b>100%</b>	<b>16</b>	<b>100%</b>	

CM - Confirmed Malfunctions

SM - Suspected Malfunctions

PM - Potential Malfunctions

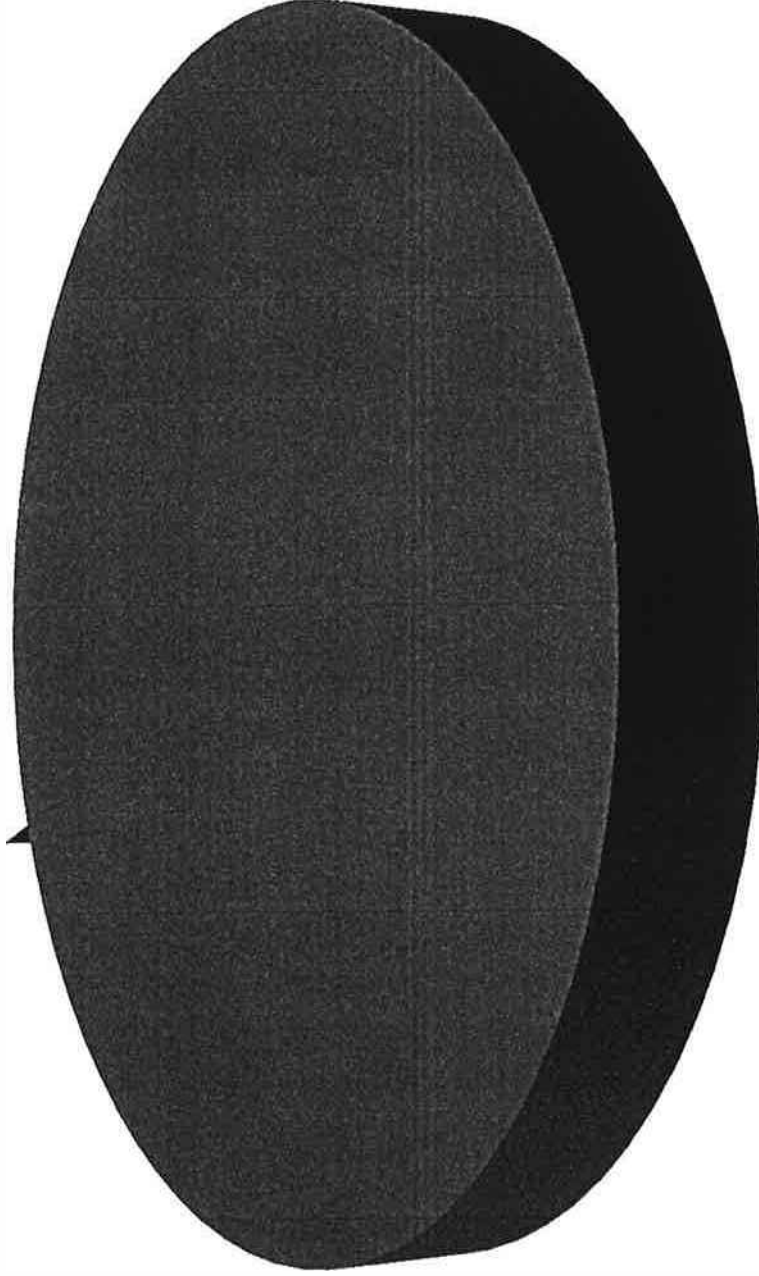
NM - No Malfunction

# VISUAL SURVEY

## TOTAL CONFIRMED MALFUNCTIONS (CM)

- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Llangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow

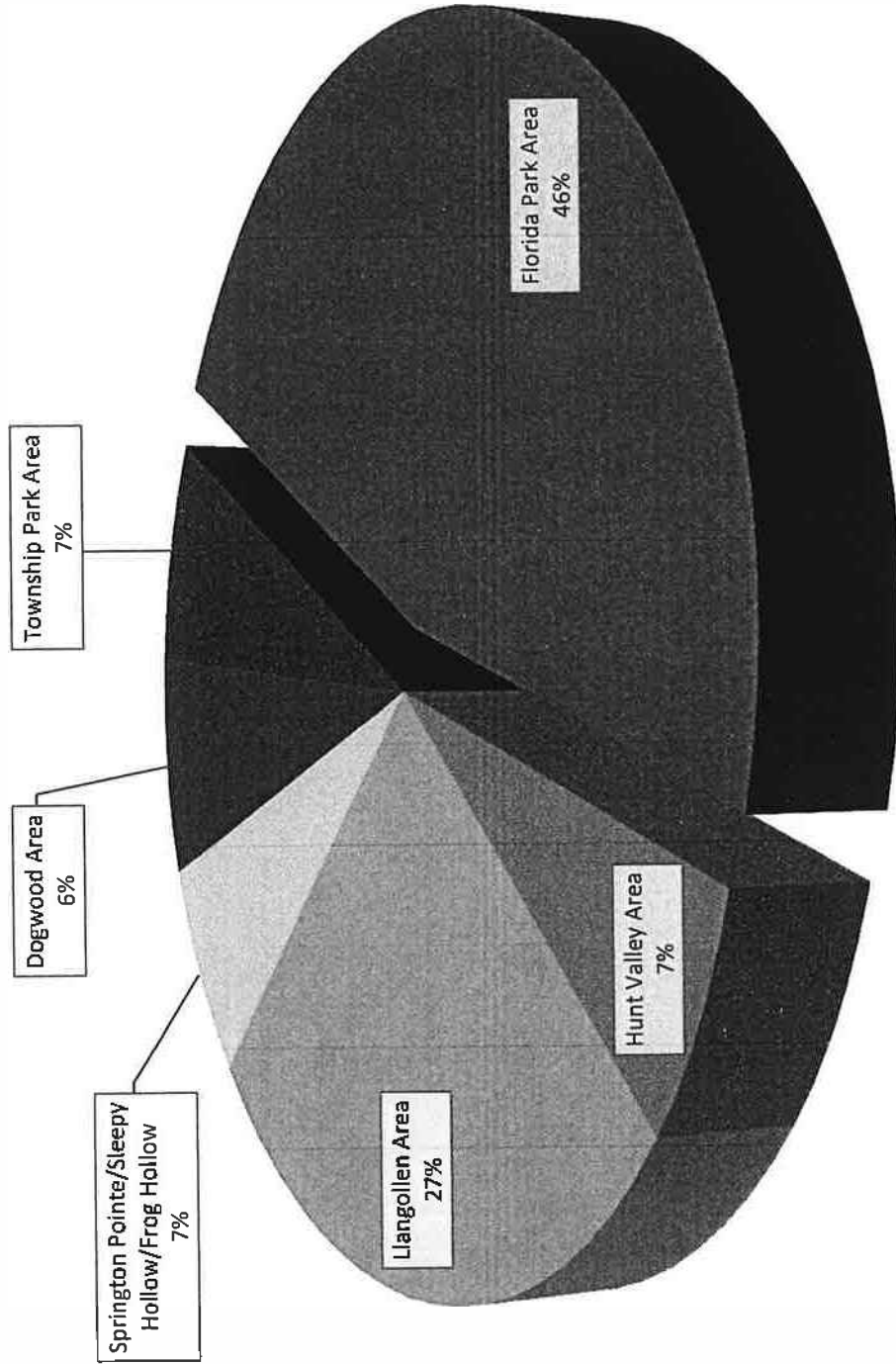
Florida Park Area  
100%



# VISUAL SURVEY

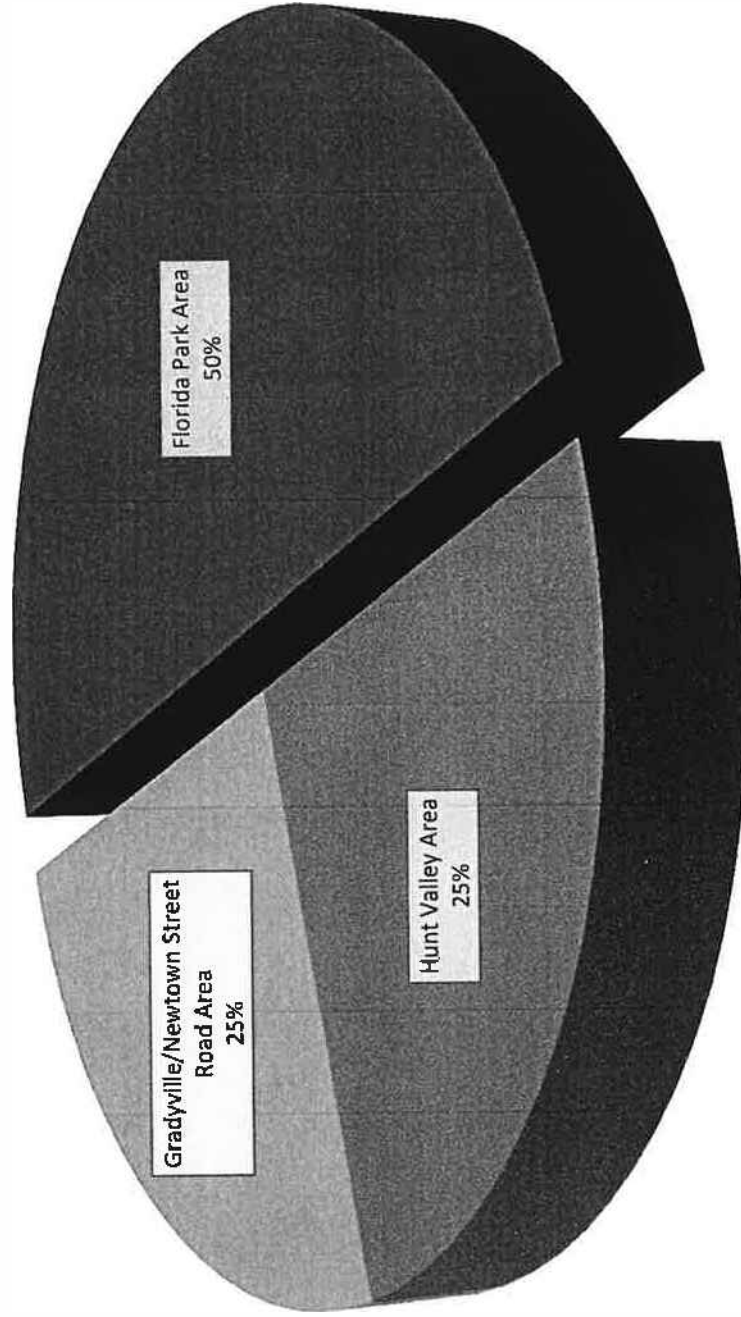
## TOTAL SUSPECTED MALFUNCTIONS (SM)

- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Liangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow



# **VISUAL SURVEY** **TOTAL POTENTIAL MALFUNCTIONS (PM)**

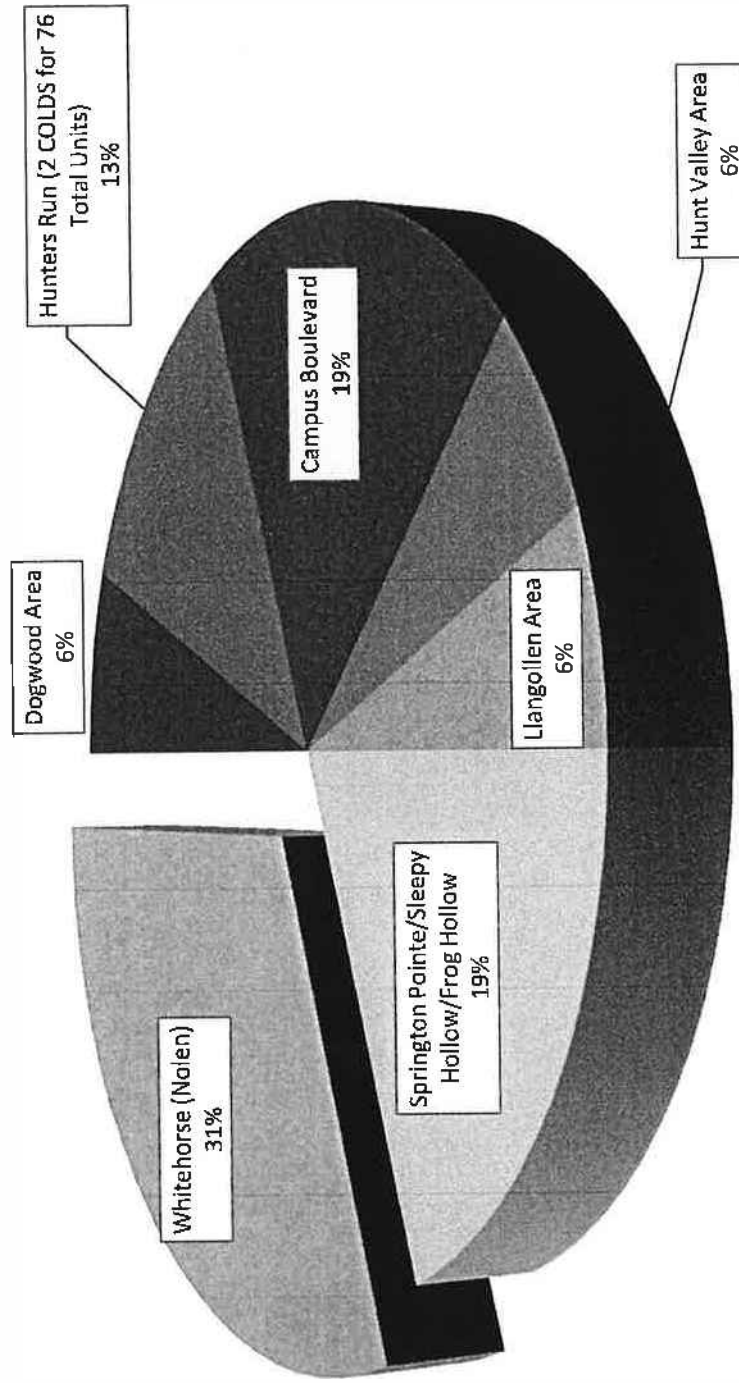
- Dogwood Area
- Campus Boulevard
- Gradyville/Newtown Street Road Area
- Whitehorse (Nolen)
- Township Park Area
- Florida Park Area
- Llangollen Area
- Hunters Run (2 COLDS for 76 Total Units)
- Hunt Valley Area
- Springton Pointe/Sleepy Hollow/Frog Hollow



# VISUAL SURVEY

## TOTAL NO MALFUNCTION (NM)

- Dogwood Area
- Township Park Area
- Hunters Run (2 COLDS for 76 Total Units)
- Campus Boulevard
- Florida Park Area
- Hunt Valley Area
- Gradyville/Newtown Street Road Area
- Llangollen Area
- Springton Pointe/Sleepy Hollow/Frog Hollow
- Whitehorse (Nolen)





## APPENDIX F

ATWTE  
JL 27 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by August 8, 2012. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4502 FLORIDA AVENUE

1. How many people live in your House? 3

2. How large is your Lot: 1675 (S.F.) Ac

3. Do you have more than one sewage system? Y (N)

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER

Do you treat your water? Y (N)

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y (N) When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y (N) How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

→ French Drain

10. How old is your system? unknown

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

GREEN LUSH GRASS

SYSTEM OVERFLOW

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
JUL 27 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

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Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4523 Florida Ave.

1. How many people live in your House? 4  
2. How large is your Lot: 100 X 100 (S.F.) Ac  
3. Do you have more than one sewage system? Y (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING (PUBLIC) OTHER \_\_\_\_\_  
Do you treat your water? Y (N)  
If, Yes, How: \_\_\_\_\_

If you have a well: Is it (DRILLED) or DUG  
How Deep: 285 Ft. Cased (Y) (N)

5. How far is the Well or Spring from your sewage system? Ft. 90 feet - Well is capped  
Is the Well UP / DOWN Slope of the drain field? not connected  
Have you ever had your well tested? (Y) (N)  
When? 1994

What were the results? POTABLE (NONPOTABLE)

Please List the Pollutants Hard water

Iron - owner poured bleach into well

6. Was your sewage system ever repaired? to purify water  
(Y) (N) When Feb 1994 By Permit (Y) (N)  
Explain: Purchased home Feb 1994  
New Cement 250 gallon septic  
tank installed on property

7. Was your sewage system ever pumped out?  
Y (N) How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

(SEPTIC TANK)	CESSPOOL
(INGROUND BED)	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
(SEEPAGE PIT)	PIPE TO DITCH
(PIPE TO SURFACE)	PIPE TO STREAM
(OLD WELL)	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

(SEPTIC TANK)	CESSPOOL
(INGROUND BED)	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 18 years old  
Was it permitted? (Y) (N)

11. Have you ever noticed any of the following near your sewage system? NONE

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
JUL 30 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

BY: .....

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4529 Florida Ave 15073

1. How many people live in your House? 1  
2. How large is your Lot: 0.6 S.F. (Ac)  
3. Do you have more than one sewage system? Y (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_  
Do you treat your water? Y (N)  
If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / N  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y (N) When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y (N) How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 2.0 yrs.  
Was it permitted? (Y) N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

AUG 01 2012

SEWAGE NEEDS SURVEY

JMF- Jeannette NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4312 FLORIDA AVENUE

1. How many people live in your House? 5

2. How large is your Lot: 16500 S.F. / Ac

3. Do you have more than one sewage system? Y ☒ N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING ☒ PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y ☒ N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NONPOTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

☒ Y / N When 94/95? By Permit ☒ Y / N

Explain: LEAK FIELD PUT

IN

7. Was your sewage system ever pumped out?

☒ Y / N How Often 243 Last Time 7.01.0

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<input checked="" type="checkbox"/> SEPTIC TANK	<input checked="" type="checkbox"/> CESSPOOL
<input checked="" type="checkbox"/> INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<input checked="" type="checkbox"/> SEPTIC TANK	<input checked="" type="checkbox"/> CESSPOOL
<input checked="" type="checkbox"/> INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 15 yrs.

Was it permitted? ☒ Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

AUG 01 2012

BY JMF Jeanne

SEWAGE NEEDS SURVEY

NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4605 Florida Av

1. How many people live in your House? 1
2. How large is your Lot: 14304 S.F. / Ac
3. Do you have more than one sewage system? Y ☒ N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING ☒ PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep: \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y ☒ N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

☒ Y / N How Often \_\_\_\_\_ Last Time 03/12

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK	<input checked="" type="radio"/> CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	<input checked="" type="radio"/> PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 2

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

AUG 01 2012

JMF Jeanne

SEWAGE NEEDS SURVEY

NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by August 8, 2012. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4518 Florida Ave

1. How many people live in your House? 5

2. How large is your Lot: app 5200 (S.F.) / Ac

3. Do you have more than one sewage system? Y / (N)

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING (PUBLIC) OTHER \_\_\_\_\_

Do you treat your water? Y / (N)

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE / NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / (N) When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

(Y) / N How Often every 1-2 yrs Last Time Sept 2011

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

(SEPTIC TANK)

CESSPOOL

(INGROUND BED)

INGROUND TRENCH

ELEVATED SAND MOUND

(HOLDING TANKS)

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

OLD WELL

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

CESSPOOL

INGROUND BED

INGROUND TRENCH

ELEVATED SAND MOUND

HOLDING TANK

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

(OLD WELL)

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 20 yrs

Was it permitted? (Y) / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
JUL 27 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4240 FAIRVIEW AVE

1. How many people live in your House? 1  
2. How large is your Lot: 0.8 S.F. 1/4c  
3. Do you have more than one sewage system? Y/N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y/N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep unknown Ft. Cased Y/N

5. How far is the Well or Spring from your sewage system? Ft. 100

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y/N

When? 2001  
What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired? Replaced  
Y/N When Dec 2000 By Permit Y/N  
Explain: out of code septic tank replaced prior to property sale

7. Was your sewage system ever pumped out?

Y/N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
<u>ELEVATED SAND MOUND</u>	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
<u>ELEVATED SAND MOUND</u>	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 11.5 yr  
Was it permitted? Y/N

11. Have you ever noticed any of the following near your sewage system? None

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



JUL 31 2012

by JMF Jeanne

SEWAGE NEEDS SURVEY

NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4406 Fairview Ave

1. How many people live in your House? 1

2. How large is your Lot: 3/4 Ac S.F. / Ac

3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N.

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

10. How old is your system? Unknown

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS NO

WATER PONDING OR SURFACING NO

WASTEWATER BACKING INTO THE HOME NO

SLUGGISH DRAINS NO SYSTEM OVERFLOW NO

GREEN LUSH GRASS NO ODORS NO

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

JUL 31 2012

BY: JMF Jeanne

SEWAGE NEEDS SURVEY

NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4246 Fairview Ave Newtown Square PA

1. How many people live in your House? 5

2. How large is your Lot: 1 1/4 S.F. 1/4 Ac

3. Do you have more than one sewage system? Y/N (N)

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING (PUBLIC) OTHER \_\_\_\_\_

Do you treat your water? Y (N)

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y/N

5. How far is the Well or Spring from your sewage system? Ft. N/A

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y/N

When? N/A

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants N/A

6. Was your sewage system ever repaired?

Y/(N) When \_\_\_\_\_ By Permit Y/N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y/N How Often every 1-3 years Last Time 2011

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

(SEPTIC TANK)

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

(SEPTIC TANK)

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

10. How old is your system? 17 years old

Was it permitted? (Y)/N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

GREEN LUSH GRASS

SYSTEM OVERFLOW

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

AUG 01 2012

SEWAGE NEEDS SURVEY

UMF-Jeanne NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4320 Fairview Ave.

1. How many people live in your House? (3)

2. How large is your Lot: ? S.F. / Ac

3. Do you have more than one sewage system? Y/N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y/N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y/N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y/N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y/N When \_\_\_\_\_ By Permit Y/N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y/N How Often \_\_\_\_\_ Last Time Yearly June Pr.

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER In Ground Concrete Tank

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 11 years

Was it permitted? Y/N

11. Have you ever noticed any of the following near your sewage system? No Problems!

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

I have a newer tile field which is maintained pr. out yearly & is in excellent condition. I do not need sewers!

AUG 01 2012

JMF Jeanne

SEWAGE NEEDS SURVEY

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4526 Fairview Avenue

1. How many people live in your House? \_\_\_\_\_
2. How large is your Lot: \_\_\_\_\_ S.F. / Ac
3. Do you have more than one sewage system? Y / N  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N  
If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N  
When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y / N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? \_\_\_\_\_  
Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

AUG 01 2012

JMF Jeanne

## SEWAGE NEEDS SURVEY

## NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4522 Farview Avenue

1. How many people live in your House? 1

2. How large is your Lot: \_\_\_\_\_ S.F. / Ac

3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have? WELL

WELL SPRING PUBLIC OTHER

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep: N/A Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. 50 ft est.

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

10. How old is your system? N/A

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
JUL 31 2012  
JIM Jeanne

SEWAGE NEEDS SURVEY

NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 203 Pomona Ave

1. How many people live in your House? 4
2. How large is your Lot: .40 S.F. / Ac
3. Do you have more than one sewage system? Y / N
- If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_
- Do you treat your water? Y / N
- If, Yes, How: \_\_\_\_\_
- If you have a well: Is it DRILLED or DUG
- How Deep \_\_\_\_\_ Ft. Cased Y / N
5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_
- Is the Well UP / DOWN Slope of the drain field?
- Have you ever had your well tested? Y / N
- When? \_\_\_\_\_
- What were the results? POTABLE/NON-POTABLE
- Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When July 2008 By Permit Y / N
- Explain: New multi-chamber septic tank plus new drain field were installed to replace old cesspool

7. Was your sewage system ever pumped out?  
Y / N How Often Yearly Last Time August 2011

8. What kind of sewage system do you have?
- CIRCLE ALL THAT APPLY
- |                     |                 |
|---------------------|-----------------|
| <u>SEPTIC TANK</u>  | CESSPOOL        |
| INGROUND BED        | INGROUND TRENCH |
| ELEVATED SAND MOUND | HOLDING TANK    |
| SEEPAGE PIT         | PIPE TO DITCH   |
| PIPE TO SURFACE     | PIPE TO STREAM  |
| OLD WELL            | BORE HOLE       |
| STORM SEWER         | PRIVY           |
| COMMUNITY SEWER     | PUBLIC SEWER    |
| OTHER _____         |                 |

9. Where does your laundry and/or sink water go?
- CIRCLE ALL THAT APPLY:
- |                     |                 |
|---------------------|-----------------|
| <u>SEPTIC TANK</u>  | CESSPOOL        |
| INGROUND BED        | INGROUND TRENCH |
| ELEVATED SAND MOUND | HOLDING TANK    |
| SEEPAGE PIT         | PIPE TO DITCH   |
| PIPE TO SURFACE     | PIPE TO STREAM  |
| OLD WELL            | BORE HOLE       |
| STORM SEWER         | PRIVY           |
| COMMUNITY SEWER     | PUBLIC SEWER    |
| OTHER _____         |                 |

10. How old is your system? 4 years
- Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?
- |                                  |                 |
|----------------------------------|-----------------|
| WETNESS OR SPONGY AREAS          |                 |
| WATER PONDING OR SURFACING       |                 |
| WASTEWATER BACKING INTO THE HOME |                 |
| SLUGGISH DRAINS                  | SYSTEM OVERFLOW |
| GREEN LUSH GRASS                 | ODORS           |

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
JUL 27 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

PT: \_\_\_\_\_  
Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

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Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4070 W. Chester Pk.

1. How many people live in your House? 5  
2. How large is your Lot: \_\_\_\_\_ S.F. / Ac  
3. Do you have more than one sewage system? Y / (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL (SPRING) (PUBLIC) OTHER \_\_\_\_\_  
Do you treat your water? Y / (N)  
If, Yes, How: \_\_\_\_\_

- If you have a well: Is it DRILLED or DUG  
How Deep: \_\_\_\_\_ Ft. Cased Y / N  
5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / (N)  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / (N) When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

(Y) / N How Often \_\_\_\_\_ Last Time 2012

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>(SEPTIC TANK)</u>	<u>(CESSPOOL)</u>
<u>(INGROUND BED)</u>	<u>(INGROUND TRENCH)</u>
<u>(ELEVATED SAND MOUND)</u>	<u>(HOLDING TANK)</u>
<u>(SEEPAGE PIT)</u>	<u>(PIPE TO DITCH)</u>
<u>(PIPE TO SURFACE)</u>	<u>(PIPE TO STREAM)</u>
<u>(OLD WELL)</u>	<u>(BORE HOLE)</u>
<u>(STORM SEWER)</u>	<u>(PRIVY)</u>
<u>(COMMUNITY SEWER)</u>	<u>(PUBLIC SEWER)</u>
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

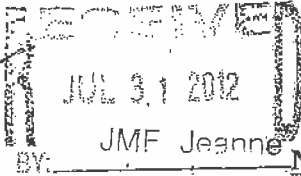
<u>(SEPTIC TANK)</u>	<u>(CESSPOOL)</u>
<u>(INGROUND BED)</u>	<u>(INGROUND TRENCH)</u>
<u>(ELEVATED SAND MOUND)</u>	<u>(HOLDING TANK)</u>
<u>(SEEPAGE PIT)</u>	<u>(PIPE TO DITCH)</u>
<u>(PIPE TO SURFACE)</u>	<u>(PIPE TO STREAM)</u>
<u>(OLD WELL)</u>	<u>(BORE HOLE)</u>
<u>(STORM SEWER)</u>	<u>(PRIVY)</u>
<u>(COMMUNITY SEWER)</u>	<u>(PUBLIC SEWER)</u>
OTHER _____	

10. How old is your system? 3  
Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

<u>(WETNESS OR SPONGY AREAS)</u>	
<u>(WATER PONDING OR SURFACING)</u>	
<u>(WASTEWATER BACKING INTO THE HOME)</u>	
<u>(SLUGGISH DRAINS)</u>	<u>(SYSTEM OVERFLOW)</u>
<u>(GREEN LUSH GRASS)</u>	<u>(ODORS)</u>

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



# SEWAGE NEEDS SURVEY

## NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by August 8, 2012. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 110 Columbia Ave N.E.

1. How many people live in your House? 5

2. How large is your Lot: 75 / 150 S.F. / Ac

3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep: \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE / NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often Bi-Yearly Last Time 2 yrs ago

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? Do Not Know

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



RECEIVED  
JUL 27 2012

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

BY: .....

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by August 8, 2012. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 210 Tuxedo Ave

1. How many people live in your House? 3
2. How large is your Lot: 2 S.F. 160
3. Do you have more than one sewage system? Y N
- If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_
- Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep: \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y N When \_\_\_\_\_ By Permit Y / N
- Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out? Septic Tank

Y / N How Often \_\_\_\_\_ Last Time 12-6-10

8. What kind of sewage system do you have?  
By David Hickman - He says Public  
Requires Septic Tank to be pumped  
CIRCLE ALL THAT APPLY every (don't remember) Time period

SEPTIC TANK CESSPOOL  
INGROUND BED INGROUND TRENCH  
ELEVATED SAND MOUND HOLDING TANK  
SEEPAGE PIT PIPE TO DITCH  
PIPE TO SURFACE PIPE TO STREAM  
OLD WELL BORE HOLE  
STORM SEWER PRIVY  
COMMUNITY SEWER PUBLIC SEWER  
OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK CESSPOOL  
INGROUND BED INGROUND TRENCH  
ELEVATED SAND MOUND HOLDING TANK  
SEEPAGE PIT PIPE TO DITCH  
PIPE TO SURFACE PIPE TO STREAM  
OLD WELL BORE HOLE  
STORM SEWER PRIVY  
COMMUNITY SEWER PUBLIC SEWER  
OTHER \_\_\_\_\_

10. How old is your system? \_\_\_\_\_

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO THE HOME  
SLUGGISH DRAINS SYSTEM OVERFLOW  
GREEN LUSH GRASS ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

Call 610 356 3438 with any questions

**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4518 FAIRVIEW AVE

1. How many people live in your House? 1
2. How large is your Lot: 75 X 900 S.F. / Ac
3. Do you have more than one sewage system? N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep 95 Ft. Cased Y N

5. How far is the Well or Spring from your sewage system? Ft. APPROX 400

Is the Well UP DOWN Slope of the drain field?

Have you ever had your well tested? Y N

When? \_\_\_\_\_

What were the results? POTABLE NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y N When 204/25 By Permit Y N

Explain: \_\_\_\_\_

New Septic tank

7. Was your sewage system ever pumped out?

Y N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

CESSPOOL

INGROUND BED

INGROUND TRENCH

ELEVATED SAND MOUND

HOLDING TANK

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

OLD WELL

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your ~~laundry~~ and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

CESSPOOL

INGROUND BED

INGROUND TRENCH

ELEVATED SAND MOUND

HOLDING TANK

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

OLD WELL

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER No working Washing Machine

10. How old is your system? \_\_\_\_\_

Was it permitted? Y N

11. Have you ever noticed any of the following near your sewage system? NONE

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4235 FARMVIEW AVE.

1. How many people live in your House? 6

2. How large is your Lot: 12,000 (S.F.) / Ac

3. Do you have more than one sewage system? Y (N)

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y (N)

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y (N) When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often ONCE Last Time MAR 12

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 2003

Was it permitted? Y (N)

11. Have you ever noticed any of the following near your sewage system? No

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

GREEN LUSH GRASS

SYSTEM OVERFLOW

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

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**THIS SURVEY CONCERNS THE HOME LOCATED AT:**

Street Address: 4411 Fairview Drive

1. How many people live in your House? 1  
2. How large is your Lot: 105x 130 S.F. / Ac  
3. Do you have more than one sewage system? Y ☒ N  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL ☒ SPRING ☒ PUBLIC ☒ OTHER \_\_\_\_\_  
Do you treat your water? Y ☒ N  
If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / N  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When \_\_\_\_\_ By Permit ☒ Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y / N How Often 2 yrs Last Time 2 yrs

8. What kind of sewage system do you have?

**CIRCLE ALL THAT APPLY**

SEPTIC TANK	<input checked="" type="radio"/> CESSPOOL
INGROUND BED	<input checked="" type="radio"/> INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

**CIRCLE ALL THAT APPLY:**

<input checked="" type="radio"/> SEPTIC TANK	<input checked="" type="radio"/> CESSPOOL
<input checked="" type="radio"/> INGROUND BED	<input checked="" type="radio"/> INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? Don't Know  
Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED

AUG 07 2012

**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4318 Fairview Ave

1. How many people live in your House? 4
2. How large is your Lot: 1.5 S.F. (Ac)
3. Do you have more than one sewage system? Y (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
(WELL) SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y (N)

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep unknown Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? (Y) / N

When? 2003

What were the results? POTABLE / NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When \_\_\_\_\_ By Permit Y / N  
Explain: unknown

7. Was your sewage system ever pumped out?

(Y) / N How Often \_\_\_\_\_ Last Time 2010

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK	<u>CESSPOOL</u>
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK	<u>CESSPOOL</u>
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? unknown

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? No

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

*See other side*

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 2500 FLORIDA AVE.

1. How many people live in your House? 3

2. How large is your Lot: 11,250 S.F. / Ac

3. Do you have more than one sewage system? Y/N

If, Yes, Please explain: SEPTIC TANK,

SEPTIC, AND NEW DRAIN FIELD

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y/N When 2009 By Permit Y / N

Explain: 4 ENGINEERS RE DESIGNED

MY SYSTEM BECAUSE MY TOWNSHIP

LET ME DOWN BY REFERRING ME

TO AN UNRELIABLE SOURCE... WAY OVER

PRICED...

7. Was your sewage system ever pumped out?

Y/N How Often MONTHLY Last Time 2009

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

CESSPOOL

INGROUND BED

INGROUND TRENCH 14 Feet

ELEVATED SAND MOUND

HOLDING TANK

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

OLD WELL

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER Custom Design

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

CESSPOOL

INGROUND BED

INGROUND TRENCH

ELEVATED SAND MOUND

HOLDING TANK

SEEPAGE PIT

PIPE TO DITCH

PIPE TO SURFACE

PIPE TO STREAM

OLD WELL

BORE HOLE

STORM SEWER

PRIVY

COMMUNITY SEWER

PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? 2 YEARS

Was it permitted? Y/N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

SLUGGISH DRAINS

SYSTEM OVERFLOW

GREEN LUSH GRASS

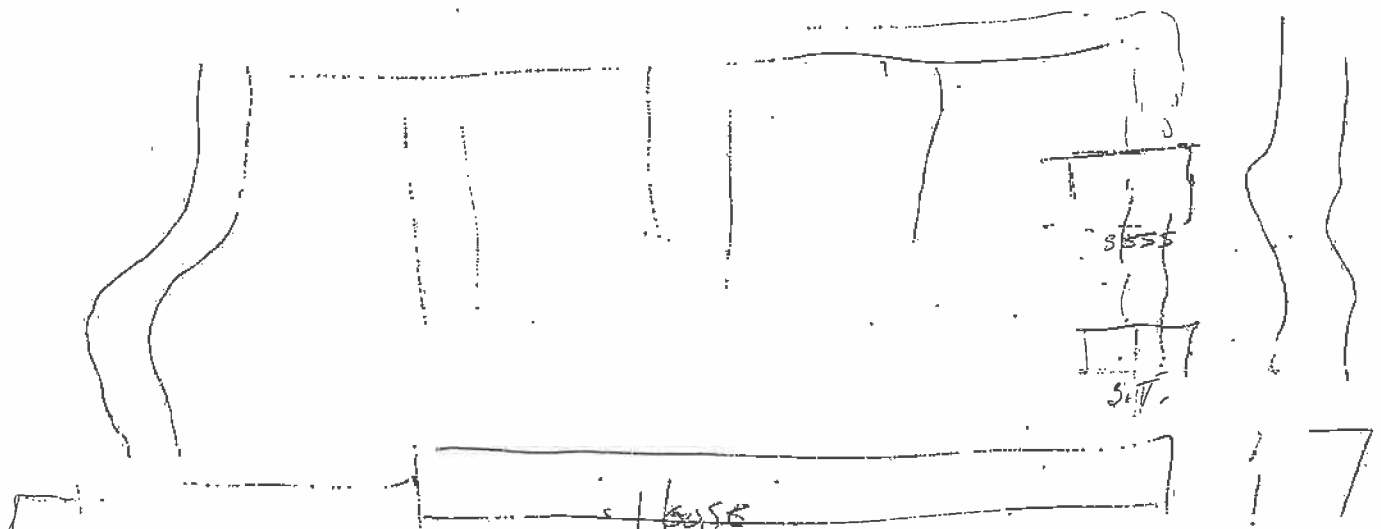
ODORS

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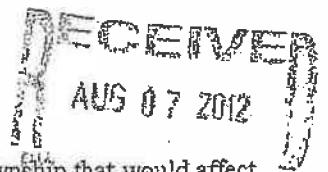
MY LOCAL TOWNSHIP PROVIDED ME WITH A NAME.  
I TALKED TO THE GENTLEMAN, WHO I THOUGHT  
A LONG TIME FRIEND, HE SAID IT WOULD BE  
\$8000.00 TO DO IT THE WAY THE TOWNSHIP WANTED  
IT DONE, GOD KNOWS HOW MUCH HE WAS GOING TO  
MAKE ON MY SEPTIC WOES, I WAS PUMPING OUT  
EVERY MONTH, ANY WAY WE GOT THE SPECS.  
FROM THIS GENTLEMAN, AND DID IT OURSELVES.  
FOR A LOT LESS, BUT STILL LEGAL AND SAFE...  
'NO MIDDLE MAN... IF YOU'RE GOING TO  
PUT SEWERS IN, PLEASE DON'T RIP THE PEOPLE  
OFF LIKE YOU DID WITH THE WATER...

45th Florida Ave

Frank  
Cape  
Randy Kelly



SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN



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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4514 FLORIDA AVE.

1. How many people live in your House? 2
2. How large is your Lot: 21,000 S.F. / Ac
3. Do you have more than one sewage system? ☒ Y ☐ N  
If, Yes, Please explain: 2ND SYST. FOR COTTAGE

4. What Kind of water system do you have?  
☒ WELL ☐ SPRING ☐ PUBLIC ☐ OTHER \_\_\_\_\_

Do you treat your water? Y ☒ N ☐

If, Yes, How: \_\_\_\_\_

If you have a well: Is it ☒ DRILLED or ☐ DUG

How Deep 160 FT. Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. 100

Is the Well ☒ UP / ☐ DOWN Slope of the drain field?

Have you ever had your well tested? ☒ Y ☐ N

When? 2011

What were the results? ☒ POTABLE ☐ NONPOTABLE

Please List the Pollutants NONE

6. Was your sewage system ever repaired?  
Y ☒ N ☐ When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

☒ Y ☐ N How Often EVERY 2 YRS Last Time 2011

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<input checked="" type="radio"/> SEPTIC TANK	<input checked="" type="radio"/> CESSPOOL
<input type="radio"/> INGROUND BED	<input type="radio"/> INGROUND TRENCH
<input type="radio"/> ELEVATED SAND MOUND	<input type="radio"/> HOLDING TANK
<input type="radio"/> SEEPAGE PIT	<input type="radio"/> PIPE TO DITCH
<input type="radio"/> PIPE TO SURFACE	<input type="radio"/> PIPE TO STREAM
<input type="radio"/> OLD WELL	<input type="radio"/> BORE HOLE
<input type="radio"/> STORM SEWER	<input type="radio"/> PRIVY
<input type="radio"/> COMMUNITY SEWER	<input type="radio"/> PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

WASH BY WRINGER WASHER

CIRCLE ALL THAT APPLY:

<input type="radio"/> SEPTIC TANK	<input type="radio"/> CESSPOOL
<input type="radio"/> INGROUND BED	<input type="radio"/> INGROUND TRENCH
<input type="radio"/> ELEVATED SAND MOUND	<input type="radio"/> HOLDING TANK
<input type="radio"/> SEEPAGE PIT	<input type="radio"/> PIPE TO DITCH
<input type="radio"/> PIPE TO SURFACE	<input type="radio"/> PIPE TO STREAM
<input type="radio"/> OLD WELL	<input type="radio"/> BORE HOLE
<input type="radio"/> STORM SEWER	<input type="radio"/> PRIVY
<input type="radio"/> COMMUNITY SEWER	<input type="radio"/> PUBLIC SEWER

OTHER LAUNDRY WATER USED FOR PLANTS

10. How old is your system? \_\_\_\_\_

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

☐ WETNESS OR SPONGY AREAS  
☐ WATER PONDING OR SURFACING  
☐ WASTEWATER BACKING INTO THE HOME  
☐ SLUGGISH DRAINS ☐ SYSTEM OVERFLOW  
☐ GREEN LUSH GRASS ☐ ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4608 FLORIDA AVE

- How many people live in your House? 1
- How large is your Lot: 1/2 S.F. (Ac)
- Do you have more than one sewage system? Y/N  
If, Yes, Please explain: \_\_\_\_\_

- What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? (Y) N

If, Yes, How: WHOLE HOUSE CHARCOAL FILTER

If you have a well: Is it DRILLED or DUG

How Deep UNKNOWN Ft. Cased Y / N

- How far is the Well or Spring from your sewage system? Ft. ± 80'

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? (Y) N

When? 1999

What were the results? POTABLE/NONPOTABLE

Please List the Pollutants NONE

- Was your sewage system ever repaired?  
Y (N) When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

- Was your sewage system ever pumped out?  
(Y) N How Often EVERY 3-5 years Last Time ± 3 years Ago
- What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	<u>CESSPOOL</u>
<u>INGROUND BED</u>	<u>INGROUND TRENCH</u>
<u>ELEVATED SAND MOUND</u>	<u>HOLDING TANK</u>
<u>SEEPAGE PIT</u>	<u>PIPE TO DITCH</u>
<u>PIPE TO SURFACE</u>	<u>PIPE TO STREAM</u>
<u>OLD WELL</u>	<u>BORE HOLE</u>
<u>STORM SEWER</u>	<u>PRIVY</u>
<u>COMMUNITY SEWER</u>	<u>PUBLIC SEWER</u>

- Where does your laundry and/or sink water go? WHICH IS  
I AM NOT SURE WHAT "INGROUND BED" CAN  
OTHER MY SYSTEM HAS 2 TANKS AND  
A DRAINAGE FIELD (LEACH FIELD?)  
IN-GROUND. IT

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	<u>CESSPOOL</u> <u>NOT AN</u>
<u>INGROUND BED</u>	<u>INGROUND TRENCH</u> <u>ELEVATED SAND</u>
<u>ELEVATED SAND MOUND</u>	<u>HOLDING TANK</u>
<u>SEEPAGE PIT</u>	<u>PIPE TO DITCH</u>
<u>PIPE TO SURFACE</u>	<u>PIPE TO STREAM</u>
<u>OLD WELL</u>	<u>BORE HOLE</u>
<u>STORM SEWER</u>	<u>PRIVY</u>
<u>COMMUNITY SEWER</u>	<u>PUBLIC SEWER</u>

OTHER \_\_\_\_\_

- How old is your system? ALL NEW IN 1999  
Was it permitted? (Y) N INCLUDING DRAINAGE  
FIELD
- Have you ever noticed any of the following near your sewage system? (NO)

<u>WETNESS OR SPONGY AREAS</u>	
<u>WATER PONDING OR SURFACING</u>	
<u>WASTEWATER BACKING INTO THE HOME</u>	
<u>SLUGGISH DRAINS</u>	<u>SYSTEM OVERFLOW</u>
<u>GREEN LUSH GRASS</u>	<u>ODORS</u>

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

**SEWAGE NEEDS SURVEY**  
**NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN**

AUG 07 2012

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 204 Pomona Ave

1. How many people live in your House? 2  
2. How large is your Lot: 100 x 150 S.F. / Ac  
3. Do you have more than one sewage system? Y / N  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_  
Do you treat your water? Y / N  
If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / N  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When: \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y / N How Often Twice Last Time after 1985 2002  
8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	<u>CESSPOOL</u>
<u>INGROUND BED</u>	INGROUND TRENCH
<u>ELEVATED SAND MOUND</u>	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?  
CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	<u>CESSPOOL</u>
<u>INGROUND BED</u>	INGROUND TRENCH
<u>ELEVATED SAND MOUND</u>	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 1969  
Was it permitted? Y / N  
11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

WNU

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 101 POMONA AVE. NEWTOWN Sq. PA.

1. How many people live in your House? 2  
2. How large is your Lot: 100 X 150 S.F. / Ac  
3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	CESSPOOL
INGROUND-BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? about 5 years

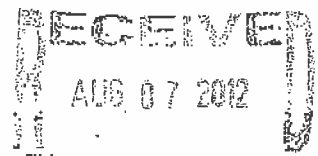
Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS
WATER PONDING OR SURFACING
WASTEWATER BACKING INTO THE HOME
SLUGGISH DRAINS
GREEN LUSH GRASS
SYSTEM OVERFLOW
ODORS

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 3404 B Horton Rd

1. How many people live in your House? 4  
2. How large is your Lot: 1 AC S.F. / Ac  
3. Do you have more than one sewage system? Y / (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? (Y) / N

If, Yes, How: Soda Ash

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? .Ft. 50

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? (Y) / N

When? 2 yrs ago

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / (N) When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y / (N) How Often \_\_\_\_\_ Last Time: \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	<u>PUBLIC SEWER</u>

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	<u>PUBLIC SEWER</u>

OTHER \_\_\_\_\_

10. How old is your system? 35 yrs

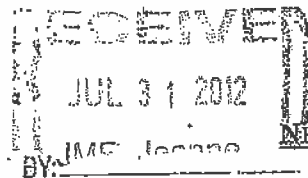
Was it permitted? (Y) / N

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

NB

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 20 Park Avenue

1. How many people live in your House? 2  
2. How large is your Lot: 0.75 S.F. (AC)  
3. Do you have more than one sewage system? Y (N)  
If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
(WELL) SPRING PUBLIC OTHER \_\_\_\_\_  
Do you treat your water? Y (N)  
If, Yes, How: \_\_\_\_\_

- If you have a well: Is it (DRILLED) or DUG 42'  
How Deep 150' Ft. Cased (Y) N steel casing  
5. How far is the Well or Spring from your sewage system? Ft. 75' to septic tank  
Is the Well (UP) 100' to inground bed DOWN Slope of the drain field?  
Have you ever had your well tested? (Y) N  
When? 3 years ago  
What were the results? (POTABLE) NONPOTABLE  
Please List the Pollutants None

6. Was your sewage system ever repaired?  
Y (N) When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y (N) How Often \_\_\_\_\_ Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>(SEPTIC TANK)</u>	CESSPOOL
<u>(INGROUND BED)</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>(SEPTIC TANK)</u>	CESSPOOL
INGROUND BED	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 26 years  
Was it permitted? (Y) N

11. Have you ever noticed any of the following near your sewage system? NO  
WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO THE HOME  
SLUGGISH DRAINS SYSTEM OVERFLOW  
GREEN LUSH GRASS ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

RECEIVED  
AUG 13 2012  
JMF Jeanne

SEWAGE NEEDS SURVEY  
NEWTOWN TOWNSHIP ACT 537 SEWAGE FACILITIES PLAN

Newtown-Township is gathering information to determine what sewage problems may exist in the Township that would affect the current quality and safety of our drinking water. The survey results will be used to determine if sewage problems exist, and the best and most economical way of planning for the future sewage needs of the Township.

In order to gather this information while respecting your privacy, we ask that you fill out and return this mail survey concerning your water supply and waste water disposal system by August 8, 2012. Your answers are very important. Part of the process of "validating the survey" depends on the return of a required number of survey forms. If our mail survey does not meet this requirement, we may have to do a "comprehensive door-to-door survey" to acquire the information which would result in an additional expense to the Township. Please complete the form to the best of your ability and return to the Township Building.

Please note that this survey may be followed by a random door-to-door verification. If your Property is selected for such a visit, we ask for your indulgence and cooperation. Thank You in advance for your help in this survey effort.

THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4302 FAIRVIEW AVE

1. How many people live in your House? 2  
2. How large is your Lot: 40 X 600 S.F. / Ac  
3. Do you have more than one sewage system? Y / (N)  
If Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING (PUBLIC) OTHER \_\_\_\_\_  
Do you treat your water? Y / (N)  
If Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / (N)  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / (N) When \_\_\_\_\_ By Permit Y / (N)  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
(Y) / N How Often ONCE A YEAR Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	<u>CESSPOOL</u>
<u>INGROUND BED</u>	<u>INGROUND TRENCH</u>
<u>ELEVATED SAND MOUND</u>	<u>HOLDING TANK</u>
<u>SEEPAGE PIT</u>	<u>PIPE TO DITCH</u>
<u>PIPE TO SURFACE</u>	<u>PIPE TO STREAM</u>
<u>OLD WELL</u>	<u>BORE HOLE</u>
<u>STORM SEWER</u>	<u>PRIVY</u>
<u>COMMUNITY SEWER</u>	<u>PUBLIC SEWER</u>
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	<u>CESSPOOL</u>
<u>INGROUND BED</u>	<u>INGROUND TRENCH</u>
<u>ELEVATED SAND MOUND</u>	<u>HOLDING TANK</u>
<u>SEEPAGE PIT</u>	<u>PIPE TO DITCH</u>
<u>PIPE TO SURFACE</u>	<u>PIPE TO STREAM</u>
<u>OLD WELL</u>	<u>BORE HOLE</u>
<u>STORM SEWER</u>	<u>PRIVY</u>
<u>COMMUNITY SEWER</u>	<u>PUBLIC SEWER</u>
OTHER _____	

10. How old is your system? 59 YEARS OLD  
Was it permitted? Y / (N)

11. Have you ever noticed any of the following near your sewage system?

WETNESS OR SPONGY AREAS  
WATER PONDING OR SURFACING  
WASTEWATER BACKING INTO THE HOME  
SLUGGISH DRAINS SYSTEM OVERFLOW  
GREEN LUSH GRASS ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.

MONA ROSS  
610-353-1575

we are interested in sewers



SEWAGE NEEDS SURVEY

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4236 Florida Avenue

1. How many people live in your House? 5

2. How large is your Lot: 17,000 S.F. / Ac

3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often every 2 yrs Last Time \_\_\_\_\_

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

SEPTIC TANK

INGROUND BED

ELEVATED SAND MOUND

SEEPAGE PIT

PIPE TO SURFACE

OLD WELL

STORM SEWER

COMMUNITY SEWER

OTHER \_\_\_\_\_

CESSPOOL

INGROUND TRENCH

HOLDING TANK

PIPE TO DITCH

PIPE TO STREAM

BORE HOLE

PRIVY

PUBLIC SEWER

10. How old is your system? old

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS

WATER PONDING OR SURFACING

WASTEWATER BACKING INTO THE HOME

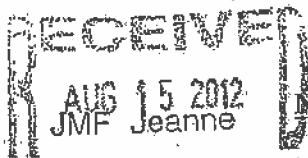
SLUGGISH DRAINS

GREEN LUSH GRASS

SYSTEM OVERFLOW

ODORS

Please list any other sewage problems you may be aware of or any comments you may have on the reverse side and return this form to the Township Office by August 8, 2012.



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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4540 FLORIDA AVE

1. How many people live in your House? 2  
2. How large is your Lot: 17,000 S.F. / Ac  
3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?  
WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG  
How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_  
Is the Well UP / DOWN Slope of the drain field?  
Have you ever had your well tested? Y / N  
When? \_\_\_\_\_  
What were the results? POTABLE/NON-POTABLE  
Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?  
Y / N When \_\_\_\_\_ By Permit Y / N  
Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?  
Y / N How Often 1 year Last Time 9-2011  
8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER
OTHER _____	

10. How old is your system? 5 yrs  
Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

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RECEIVED

AUG 15 2012

JMF Jeanne

SEWAGE NEEDS SURVEY

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THIS SURVEY CONCERNS THE HOME LOCATED AT:

Street Address: 4246 FLORIDA AVE

1. How many people live in your House? 3

2. How large is your Lot: \_\_\_\_\_ S.F. / Ac

3. Do you have more than one sewage system? Y / N

If, Yes, Please explain: \_\_\_\_\_

4. What Kind of water system do you have?

WELL SPRING PUBLIC OTHER \_\_\_\_\_

Do you treat your water? Y / N

If, Yes, How: \_\_\_\_\_

If you have a well: Is it DRILLED or DUG

How Deep \_\_\_\_\_ Ft. Cased Y / N

5. How far is the Well or Spring from your sewage system? Ft. \_\_\_\_\_

Is the Well UP / DOWN Slope of the drain field?

Have you ever had your well tested? Y / N

When? \_\_\_\_\_

What were the results? POTABLE/NON-POTABLE

Please List the Pollutants \_\_\_\_\_

6. Was your sewage system ever repaired?

Y / N When \_\_\_\_\_ By Permit Y / N

Explain: \_\_\_\_\_

7. Was your sewage system ever pumped out?

Y / N How Often 2 times Last Time 9-2010

8. What kind of sewage system do you have?

CIRCLE ALL THAT APPLY

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

9. Where does your laundry and/or sink water go?

CIRCLE ALL THAT APPLY:

<u>SEPTIC TANK</u>	CESSPOOL
<u>INGROUND BED</u>	INGROUND TRENCH
ELEVATED SAND MOUND	HOLDING TANK
SEEPAGE PIT	PIPE TO DITCH
PIPE TO SURFACE	PIPE TO STREAM
OLD WELL	BORE HOLE
STORM SEWER	PRIVY
COMMUNITY SEWER	PUBLIC SEWER

OTHER \_\_\_\_\_

10. How old is your system? old

Was it permitted? Y / N

11. Have you ever noticed any of the following near your sewage system? NO

WETNESS OR SPONGY AREAS	
WATER PONDING OR SURFACING	
WASTEWATER BACKING INTO THE HOME	
SLUGGISH DRAINS	SYSTEM OVERFLOW
GREEN LUSH GRASS	ODORS

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