WIESER
SEPTIC & EXCAVATING

507-895-8213 **A Division of; Jake Wieser Construction, Inc.** **LIC #L2929**

INSPECTION ORDER FORM

TYPE OF INSPECTION (SELECT ALL THAT APPLY)

____ SEPTIC INSPECTION ____ WELL INSPECTION ____ WATER TEST

___ Bacteria ____ Arsenic

___ Nitrate

___ Lead

___Radon

PROPERTY OWNERS NAME**:** _____

ADDRESS**:** _____

_____

TELEPHONE: _____**Cell#**_____

DIRECTIONS: _____

_____

_____

HOUSE INFORMATION NEEDED FOR INSPECTION:

DATE SYSTEM WAS CONSTRUCTED: _____

REASON FOR INSPECTION: _____

NUMBER OF BEDROOMS: _____

NUMBER OF BATHROOMS: _____

DISHWASHER: _____

GARBAGE DISPOSAL: **(YES OR NO)**_____SEWAGE PUMPED TO TANK; **(YES OR NO)**_____

HAS THERE EVER BEEN ANY PAST LEACHING OF SEWAGE TO THE SURFACE OF THE GROUND (YES OR NO)_____

I have read and agreed to all the terms in the On-Site Wastewater Treatment System Inspection Agreement, all sections 1. – 8.

COMPANY AND AGENT ORDERING THE INSPECTION;

COMPANY: _____ **AGENT:** _____

TELEPHONE #'S:_____**FAX#**_____**EMAIL:**_____

DATE ORDERED: _____ **TIME ORDERED**_____

REQUESTED COMPLETION DATE: _____

SIGNATURE: _____**PRINTED NAME**_____

Fax or Email this for to: Fax# 507-896-7460 or Email: holly@wieserseptic.com