



AS-BUILT PLAN for a SANITARY SYSTEM

Installation Date _____ Permit # _____ Parcel Tax # _____

Owner _____ Site Address _____

Description of benchmark _____ Elevation _____

Alternate benchmark _____ Elevation _____

**** NOTE:** Use field elevation readings and include benchmark reading for each group.

SEPTIC – PUMP TANK – HOLDING TANK INFORMATION:

Manufacturer _____ Size ST/PC _____

Pump manufacturer _____ Model _____

Setbacks: House _____ Well _____ P/L _____ Vent to fresh air intake _____

Setbacks: Service Road/Road _____ Alarm location _____

SOIL ABSORPTION SYSTEM:

Type of system _____ Width _____ Length _____ # of cells/trenches _____

Setbacks: House _____ Well _____ P/L _____ Vent to fresh air intake _____

ELEVATIONS:

Bldg Sewer _____ St/Ht Inlet _____ St/Ht Outlet _____ Dt Inlet _____ Dt Bottom _____

Contour _____ Pump off _____ Distribution Box _____ Header/Manifold _____

Dist. Pipe _____ Bottom System _____ Final Grade _____ Manhole ST/PC _____

NOTICE: Please provide the following:

- A plan view sketch showing everything within 100 of the system **ON THE REVERSE OF THIS FORM.**
- Two horizontal reference points to center of septic tank manhole cover.

Plumber signature _____ License number _____ Date _____

PIERCE COUNTY
AS-BUILT PLAN for a SANITARY SYSTEM

Draw a PLAN VIEW sketch below and provide the following:

- Sketch everything within 100 ft of the system.
- Have 2 horizontal reference points to center of septic tank manhole cover.
- Indicate North Arrow.

