

**REQUEST FOR EVALUATION REPORT OF AN INDIVIDUAL  
WASTEWATER DISPOSAL SYSTEM AND POTABLE WATER SUPPLY**

WEBER-MORGAN HEALTH DEPARTMENT

477 23rd Street, Ogden, UT 84401, Phone: (801) 399-7160 Fax: (801) 399-7170

**Fee required at time application is submitted - \$132**

Prior to issuance of an Evaluation Report, the following information must be **completely** filled out, accompanied by the appropriate fee(s) Please provide complete address of the system to be evaluated.

PROPERTY ADDRESS: \_\_\_\_\_ Land Serial #: \_\_\_\_\_ County: \_\_\_\_\_

SUBDIVISION NAME: \_\_\_\_\_ LOT No.: \_\_\_\_\_ No. OF BEDROOMS: \_\_\_\_\_

Person/Agency Making Request: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
CITY STATE ZIP CODE

Original Owner: \_\_\_\_\_

Present Owner/Occupant: \_\_\_\_\_ Phone: \_\_\_\_\_ Work #: \_\_\_\_\_

Approximate Age of Home: \_\_\_\_\_ Age of current septic system: \_\_\_\_\_

Please provide copies of records or documentation of maintenance or alterations to the system ..

Is the home vacant: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how long? \_\_\_\_\_

Is access around property available; (i.e., locked gates, dogs restrained, etc.?) Yes \_\_\_\_\_ No \_\_\_\_\_

Reason for certification: selling \_\_\_\_\_ buying \_\_\_\_\_ refinancing \_\_\_\_\_ adding addition \_\_\_\_\_ change of use \_\_\_\_\_

**WATER SUPPLY:** Public \_\_\_\_\_ Private Well \_\_\_\_\_ Spring \_\_\_\_\_ If Well: Age: \_\_\_\_\_ Depth: \_\_\_\_\_

If a water sample is required: hours home: \_\_\_\_\_ or appointment needed: \_\_\_\_\_

**SEPTIC TANK AND ABSORPTION LINES MUST BE EXPOSED FOR INSPECTION WHEN:**

" The home is 30 or more years old or;

" When a file search shows no record of the wastewater system.

The top end of septic tank must be uncovered and baffles exposed and the ends of the absorption field lines must be exposed for inspection.

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A septic system evaluation provides lending institutions, homeowners or prospective buyers with information about the system and when requested a bacteriological report of the culinary water supply.

**A wastewater system evaluation report is not:**

a warranty or guarantee that the system will properly function for any period of time in the future.  
an assurance that the soil is adequately treating effluent or that it will continue to do so in the future.

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**FOR OFFICE USE ONLY**

\_\_\_ Paid \$132.00 Wastewater \_\_\_ Paid \$35.00 Water \_\_\_ Hold for Pick Up \_\_\_ Mail to Requester

Wastewater Permit No.: \_\_\_\_\_ Date Ordered: \_\_\_\_\_ Date Inspected: \_\_\_\_\_