

Morgan County Environmental Health Services



2005 S. Main Street, Suite 200 • Madison, Georgia 30650 • 706.752.1266 phone • 706.752.0286 fax

REQUEST FOR EXISTING SYSTEM EVALUATION

Evaluation of Existing System (\$15	50) Regular Se	Regular Service: 1-3 Weeks		
Evaluation of Existing System (\$22	25) Priority Ser	Priority Service: Within 7 Business Days Permit Issued for Addition to Septic		
Final Inspection (\$150)	Permit Issu			
Owner:	Phone:	Fax:		
Applicant/Contact Person:	Phone:	Fax:		
Property Address:		City:	Zip:	
Subdivision:		Lot/Block:		
Year System Installed:Orig	<u>inal Property Owner (</u> i	f known):		
Directions to Property and Landmarks:				
	m Cr l	.•		
	Type of Evalua	ttion:		
Refinance/Purchase	Swimming P	ool*		
Garage/Shop/Deck Addition*	Adoption/Fo			
Renovation/Rebuild	Bedroom Ado	dition: Total # of Bedrooms A	fter Addition	
Other:				
Comments:				
NOTICE- Proof that septic tanks have been pumped satisfactory existing system evaluation letter can be p review has begun.				
☐ Proof of pumping attached				
*PLEASE COMPLE	TE BACK OF FORM FO	OR ALL ADDITIONS/POOL	<u>.s</u>	
	(Department Use C	only)		
Date of Evaluation	Inspector			
Fee Paid Amount	Received By			

Failure to provide adequate plans may result in a delay for your request. Any addition	n to the septic
system will require a Level III soil report and final inspection fee of \$100 prior to app	oroval.

order for this department to perform a complete existing system evaluation, the following information must provided by the applicant: (1) Lot sketch showing lot dimensions, easements and required setback Existing structures, driveway(s), patio(s) and any other paved areas (3) Projected location and dimensions oposed structure(s) and/or swimming pool, including side line distances and all finished areas of disturbandewalks, decks, fences/gates, etc. (4) Location of existing well, if applicable, as well as neighboring wells ligacent properties
–Sketch–
te above information as furnished is true and correct to the best of my knowledge; therefore, I hereby apply for an existing stem evaluation based on this information.
gnature of Owner or Applicant
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