State of Illinois
Illinois Department of Public Health

Private Sewage Disposal System Evaluation Form

Date of Inspection: _____

To promote longevity within a private sewage disposal system, all components shall be inspected on a routine basis to determine proper function and performance. Please evaluate all components and/or systems that apply below, and describe conditions observed in the Comment Section at the end of the form. Evaluation for the evidence of discharge or saturation shall be done in the absence of precipitation 48 hours prior to the evaluation. Maintenance or repair may be needed, depending on what is observed. Maintenance and repair can only be done by a licensed Private Sewage Disposal Installation contractor or the homeowner, if it is their primary single family residence.

Owner:		Phone #:
Site Address:		
Individual conducting evaluation & title:		Phone #:
Septic/Holding Tank:		
☐ Check ground surface around tank for evidence of discharge or saturation.	☐ None	☐ Present
☐ Remove cover from inlet side of the septic tank and evaluate the condition of the inlet baffle.	☐ Good	☐ Damaged/Missing
☐ Remove cover from outlet side of the septic tank and evaluate the condition of the outlet baffle.	☐ Good	☐ Damaged/Missing
☐ Evaluate the water level within the septic tank.	☐ Good	☐ High ☐ Low
☐ Evaluate the sidewalls and ceiling of the tank for evidence of past failure or excessive water levels.	☐ None	☐ Present
☐ Determine the thickness of the waste accumulated in the sludge layer of the tank.		Inches
☐ Determine the thickness of the scum layer on the top of the tank.		Inches
☐ Combination of sludge layer and scum layer, less than 33% of the designed liquid level of the tank.		% >33%
☐ Date septic/holding tank was last pumped.		_____
Component Evaluation:		
☐ If a distribution box is being utilized, remove cover on the box and evaluate to ensure no debris or sludge is present in box.	☐ None	☐ Present
☐ Remove cover from pump/dosing tank and evaluate activation float/switch to ensure it is functioning properly for the pump.	☐ Good	☐ Damaged
☐ Evaluate visual and audible alarm by activating float/switch.	☐ Good	☐ Disrepair
☐ Check for debris or sludge in pump tank.	☐ None	☐ Present
☐ Evaluate the condition of the pump.	☐ Good	☐ Disrepair
Subsurface Seepage System:		
☐ Determine location and estimated size of subsurface seepage system.		linear feet
☐ Check ground surface around subsurface seepage field for evidence of a discharge and/or saturation.	☐ None	☐ Present
☐ Check for areas of dead vegetation or the lack of vegetation in the area of the system.	☐ None	☐ Present
☐ Check for encroachment of trees or other harmful vegetation.	☐ None	☐ Present
Buried and Re-circulating Sand Filters:		
☐ Check ground surface around filter for evidence of a discharge or saturation.	☐ None	☐ Present
☐ Evaluate point of discharge for the following:	☐ None	☐ Present
☐ Odor	☐ None	☐ Present
☐ Settable solids	☐ None	☐ Present
☐ Floating debris, visible oil, grease, scum or sludge solids	☐ None	☐ Present
☐ Check for encroachment of trees or other harmful vegetation.	☐ None	☐ Present
☐ Check the condition of the vent.	☐ Good	☐ Disrepair
☐ Disinfection device	☐ None	☐ Present
☐ Disinfection device functioning as designed, Chlorine present or UV light operating.	☐ Good	☐ Damaged/Empty

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Waste Stabilization Ponds:		
☐ Check ground surface around pond for evidence of a discharge or saturation.	☐ None	☐ Present
☐ Evaluate point of discharge for the following:	☐ None	☐ Present
☐ Odor	☐ None	☐ Present
☐ Settable solids	☐ None	☐ Present
☐ Floating debris, visible oil, grease, scum or sludge solids	☐ None	☐ Present
☐ Check for encroachment of trees or other harmful vegetation.	☐ None	☐ Present
☐ Evaluate outlet for disrepair and proper depth.	☐ None	☐ Present
☐ Evaluate Embankment and Freeboard area of pond for disrepair.	☐ Good	☐ Disrepair
☐ Evaluate ground surface to determine if surface water is diverted away from system.	☐ Draining	☐ Non-Draining
☐ Disinfection device	☐ None	☐ Present
☐ Disinfection device functioning as designed, Chlorine present or UV light operating.	☐ Good	☐ Damaged/Empty
Illinois Raised Filter Beds:		
☐ Check ground surface around mantle and bed for evidence of a discharge or saturation.	☐ None	☐ Present
☐ Check for encroachment of trees or other harmful vegetation.	☐ None	☐ Present
☐ Date of last service and maintenance of aeration batch treatment systems.	_____	
☐ Evaluate visual and audible alarm by activating float/switch.	☐ Good	☐ Disrepair
☐ Check for areas of dead vegetation or the lack of vegetation in the area of the system.	☐ None	☐ Present
☐ Remove cover from pump/dosing tank and evaluate activation float/switch to ensure it is functioning properly.	☐ Good	☐ Damaged/Missing
☐ Evaluate ground surface to determine if surface water is diverted away from system.	☐ Draining	☐ Non-Draining
☐ Check for debris or sludge in pump/dosing tank.	☐ None	☐ Present

If any of the boxes in the yellow column were marked the system and/or component may be in a state of failure and may need to be repaired or replaced, the Department recommends the system and/or component be inspected by a licensed Private Sewage Disposal Installation Contractor.

Comments:

The following systems shall not be evaluated with this form, but shall be evaluated per the manufacture's requirements or as established by the approval/certification requirements:

- ☐ NSF International/ANSI Standard 40 Systems
- ☐ NSF International/ANSI Standard 350 Systems
- ☐ Peat filter systems
- ☐ Re-circulating Toilets, Incinerator Toilets and Compost Toilets

Evaluator's Name (Print/Type)	Evaluator's Signature	Date