Septic Inspection Checklist: Tank, Drainfield, and Fixtures

Blank copy

Property

INSPECTION DATE

INSPECTED BY

PROPERTY ADDRESS

OCCUPANCY

SYSTEM TYPE

YEAR INSTALLED OR SYSTEM AGE IF KNOWN

BEDROOMS OR OCCUPANTS IF KNOWN

AS-BUILT DRAWING OR PERMIT ON FILE

WEATHER DURING THE WALK

☐ Owner or agent present

Pumping and service record

DATE LAST PUMPED

PUMPER OR SERVICE COMPANY

NEXT PUMP OR INSPECTION DUE

LAST PROFESSIONAL INSPECTION DATE

EFFLUENT FILTER NOTED IN RECORDS

SERVICE CONTRACT FOR PUMPS OR ALTERNATIVE SYSTEM

RECORD NOTES

Tank access and lids

Item	OK	Defect	N/A	Notes
Tank location identified	☐	☐	☐	
Lids, risers, or manhole covers found	☐	☐	☐	
Lids intact, seated, and secure	☐	☐	☐	
Access clear enough for a pumper to reach the tank	☐	☐	☐	
No parking or driving on the tank	☐	☐	☐	
No sewage, standing water, or damp spots at the tank	☐	☐	☐	
No strong sewage odor at the tank	☐	☐	☐	
Ground and lid over the tank look stable	☐	☐	☐	
No straight pipe discharging untreated wastewater to the ground	☐	☐	☐	

Drainfield

Item	OK	Defect	N/A	Notes
Drainfield location identified	☐	☐	☐	
No standing water, muddy soil, or damp spots over the field	☐	☐	☐	
No bright green, spongy grass over the field in dry weather	☐	☐	☐	
No sewage odor at the drainfield	☐	☐	☐	
No vehicles, equipment, or livestock on the field	☐	☐	☐	
No sheds, decks, patios, pools, or play equipment on the field	☐	☐	☐	
No concrete, asphalt, or other impermeable cover on the field	☐	☐	☐	
Trees and large shrubs not planted on the field	☐	☐	☐	
No vegetable garden on the field	☐	☐	☐	
Roof drains, sump pumps, and surface water directed away from the field	☐	☐	☐	
Grass or native cover, not plastic sheeting or heavy fill	☐	☐	☐	

Pumps and alarms

Item	OK	Defect	N/A	Notes
Pump, float, alarm, or alternative unit identified, or N/A if gravity only	☐	☐	☐	
Alarm panel or warning light visible and not in alarm	☐	☐	☐	
Pump tank lid present, secure, and not driven on	☐	☐	☐	
Visible electrical boxes and wiring not broken or sitting in water	☐	☐	☐	
Annual professional service or a current contract for pumped or alternative systems	☐	☐	☐	
Occupant reports no unexplained recent alarms	☐	☐	☐	

Household fixtures

Item	OK	Defect	N/A	Notes
Toilets flush without wastewater backing up	☐	☐	☐	
Sinks, tubs, and showers drain without backing up	☐	☐	☐	
Fixtures are not draining very slowly throughout the house	☐	☐	☐	
No gurgling in drains when other fixtures run	☐	☐	☐	
No sewage odor at indoor drains	☐	☐	☐	
Toilets not running or leaking into the bowl	☐	☐	☐	
No dripping faucets or showerheads adding constant flow	☐	☐	☐	
No pooling wastewater in a basement near the system	☐	☐	☐	

Findings and sign-off

FINDINGS

ACTION

INSPECTOR SIGNATURE

OWNER OR AGENT SIGNATURE

TIME SIGNED

Reference only. Verify against local codes, a licensed inspector or a qualified contractor.