



Property Information

PLEASE FILL FORM OUT COMPLETELY

Address: _____

Please indicate your answer by circling or writing in the appropriate response.

Property occupied: ____ Yes ____ No **Length of vacancy:** _____

Systems to inspect: ____ Water Well ____ Wastewater

Sample drinking water well regardless of construction: ____ Yes ____ No

Samples to collect: ____ Coliform Bacteria ____ Nitrates ____ Nitrites ____ Lead ____ Other (specify)

Lab charges will be added to the inspection fee to determine your final cost

Special Instructions: _____

Buyer's Name: _____
Buyer's Email _____ Buyer's Phone _____

Seller's Name: _____
Seller's Email _____ Seller's Phone _____

For Access to Property Contact: _____ **Phone:** _____

Additional Contacts: _____ **Phone:** _____

- A domestic water well system inspection shall include a report on the above grade condition of the well, sample collection of the water for contaminants requested for analysis, and required corrective action for conditions not in compliance with current state and local code.
- A private wastewater system inspection shall identify the type of system and any permit history, if ascertainable, and any sanitation code violations observed.
- It is a violation of the Sanitation Code to sell, use, lease or rent any property located in the unincorporated areas of Reno County with a private well or wastewater systems which does not comply with the Code.

- **Company or individual requesting the inspection is responsible for payment of inspection and lab fees within 30 days of receiving billing statement.**
- **Original report will go to requesting party. If copies of reports are needed, please specify who receives copies.**

Additional copies to: Name: _____

Fax: _____ **Email:** _____

Inspection of Wastewater System Only	\$200
Inspection of Water Well Only	\$200
Inspection of Both Systems	\$200

*Additional lab fees apply per water test
 A \$50 trip charge will be applied on the
 3rd visit & each visit thereafter*

Inspection fees as of September 1st, 2012

REQUESTED BY

Please indicate your preference to receive reports and bills ____ Fax ____ Email ____ Mail
different from Company Address

Company/Individual Requesting Inspection Fax Number Email Address

Address City State Zip Code

Mailing Address, if different from Company Address City State Zip Code

Signature of Company /Individual Requesting Inspection Date Phone Number of Requesting Party