## VISUAL INSPECTION REQUEST FORM

This is a request for a visual inspection of a septic tank system. The fee is \$100.00 if copy of original approval is in the Shelby County Health Department files or \$200.00 if no copy of approval can be found in the files. Checks should be made payable to the Shelby County Health Department. Mail or bring this form and payment to the Shelby County Health Department, Attention: Environmental Office, 2000 County Services Drive, PO Box 846, Pelham, Alabama 35124.

If the original approval of the septic tank system cannot be located in the Shelby County Health Department files, a corner of the septic tank must be <u>uncovered</u> by the owner or agent before the inspection. The <u>uncovered</u> area should be 18 inches wide and 18 inches deep. Please mark the septic tank by means of flagging or in some manner especially if the septic tank cannot be easily located.

Year System Installed	
Name System Installed Under (usual	ly original owner)
Name of Subdivision, Sector and/or l	Phase and Lot Number (if applicable)
5	
Street Address	
-	ntact Person
Is There a Gate or Dogs on the Prope	rty
	g
Directions to Property or Map	
Reason for Request	
Date	