

Division of Environmental Health Subsurface Wastewater Unit



*Maine Center for Disease
Control and Prevention*

*An Office of the
Department of Health and Human Services*

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

VOLUNTARY INSPECTOR CERTIFICATION TRAINING

Subsurface Wastewater Disposal System
Voluntary Inspector Certification Training

WHAT YOU WILL RECEIVE TODAY

- Training in Techniques Needed to Complete Inspections
- Copies of the Minimum Report Form and Instructions for Completion
- A Description of the Voluntary Inspection Program Process

Subsurface Wastewater Disposal System
Voluntary Inspector Certification Training
PROGRAM GOALS & OBJECTIVES

- Provide Home Buyers & Sellers With Accurate Information
- Bring Minimum System Deficiencies to Their Attention
- Assure EPA That State Has Adequate Administrative Controls

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

WHAT THE PROGRAM IS NOT

- An Invasive Evaluation of the Disposal Area
- An Attempt to Predict the Future Performance of the Disposal System
- Providing a Replacement System Design

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KEY POINTS OF INSPECTION PROGRAM

- Voluntary Inspection of System at Property Transfer – Report to Buyer & Seller
- Voluntary Certification of Inspectors Through Attendance at Training
- Standardized Report Form Setting Minimum Inspection Criteria

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HOW THE PROGRAM WILL OPERATE

- Client (Buyer or Seller) Contacts Inspector
- Inspector Collects Data & Prepares Report
- Report is Sent to Client Only
- Annually, Inspector Reports Number of Inspections to DHE

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Voluntary Inspector Certification Training
THE REPORT PROCESS

- Collect Data From Client, Municipality, and State as Appropriate
- Visit Site & Evaluate System Components
- Complete Report Form Adding Attachments as Deemed Necessary
- Note System Deficiencies if Present

**Subsurface Wastewater Disposal System
Voluntary Inspector Certification Training**
SYSTEM DEFICIENCIES

- Conditions That Pose an Immediate or Potential Threat to Public Health if not Corrected
- Conditions That Are Preprinted on Page 3 of the Minimum Report Form
- Differences Between Observed Conditions & Those Shown on The Design
- Other Conditions Identified by the Inspector

**Subsurface Wastewater Disposal System
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DEFINITION OF A MALFUNCTION**

A system that is not operating or is not functioning properly. Indications of a malfunctioning system include, but are not limited to, any of the following:

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DEFINITION OF A MALFUNCTION



Seepage of effluent into parts of buildings below ground or back-up of wastewater into the building.

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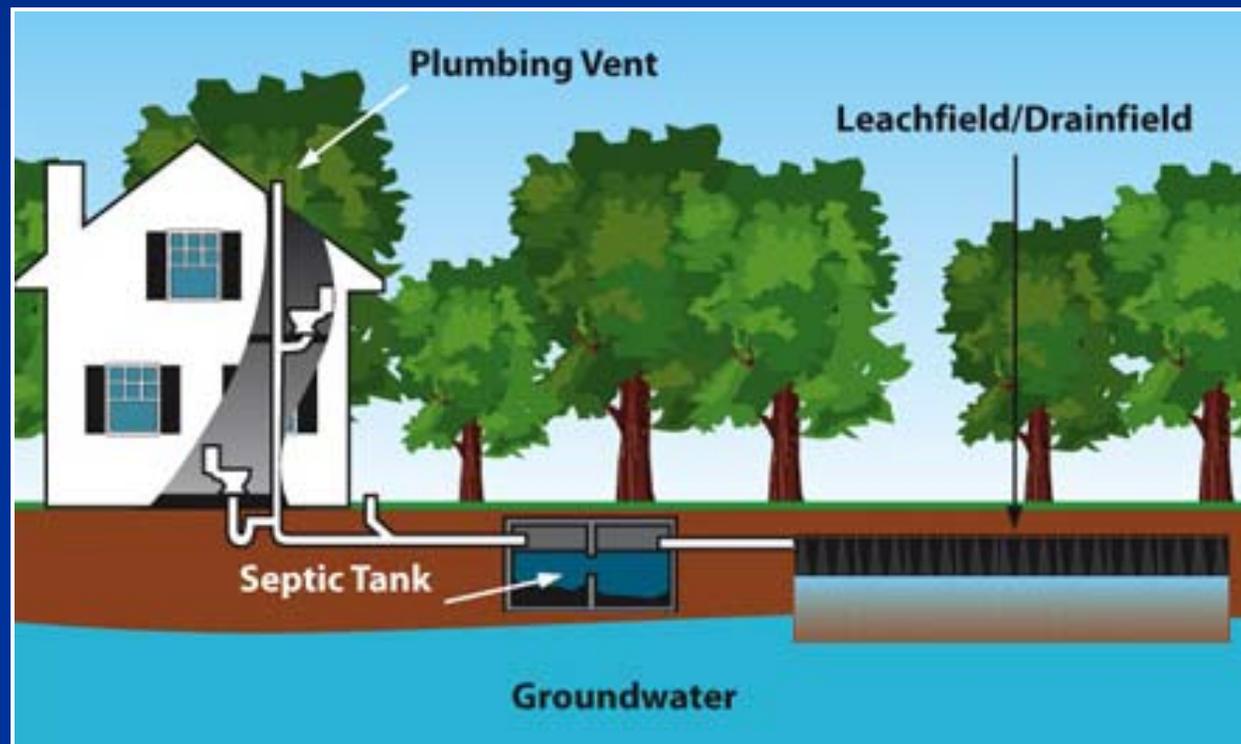
DEFINITION OF A MALFUNCTION



Ponding or outbreak of wastewater or septic tank effluent onto the surface of the ground.

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DEFINITION OF A MALFUNCTION



Contamination of nearby water wells, groundwater, waterbodies/courses.

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DEFINITION OF A MALFUNCTION



Is a straight pipe a malfunctioning system?

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THE REPORT FORM

- Designed to Present Information Useful to the Client
- Checklist Style Format with Supporting Narrative
- Can be Supplemented With Photos, Sketches, or Other Information
- Client Can Use Information in Report as They See Fit

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COMPLETING THE REPORT FORM

PAGE 1 – PROPERTY INFORMATION

PROPERTY INFORMATION		<i>Obtained from Client</i>	
Address:		Lot Size:	_____
Municipality:		Tax Map No.:	_____
County:		Lot No.:	_____
Current Owner:	Last Name: _____	First Name:	_____

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COMPLETING THE REPORT FORM

PAGE 1 – SYSTEM INFORMATION

SYSTEM INFORMATION		<i>Collected During Records Search and Site Visit</i>				
Type:	<input type="checkbox"/> Pre June 1974	<input type="checkbox"/> Post June 1974		Design Capacity	GPD	
Dates:	Designed	/ /	Permitted	/ /	Permit No.	
Current Use:	<input type="checkbox"/> Single Family Dwelling - BDRMS	<input type="checkbox"/> Multiple Family Dwelling - UNITS ____		<input type="checkbox"/> Commercial	<input type="checkbox"/> Other	
Treatment Tank:	GAL	<input type="checkbox"/> Steel	<input type="checkbox"/> Concrete	<input type="checkbox"/> Plastic	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> UNK
Disposal Area:	<input type="checkbox"/> Cesspool	<input type="checkbox"/> Trench	<input type="checkbox"/> Stone Bed	<input type="checkbox"/> Proprietary Device _____	<input type="checkbox"/> UNK	
Designer:				License No.		
Installer:				Vol. Cert. No.		

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COMPLETING THE REPORT FORM

PAGE 1 – INSPECTION INFORMATION

INSPECTION INFORMATION	<i>Conclusions Drawn from Records Search and Site Visit</i>			
Findings:	Malfunction per Rules Identified:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> See Pgs 3 & 4
	System Deficiencies Identified:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> See Pgs 3 & 4
	Further Investigation Recommended:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> See Page 4
Conclusion:	<input type="checkbox"/> No Corrective Action Needed	<input type="checkbox"/> Corrective Action Recommended-See Page 4		
<p>On the date noted below I completed an inspection of the subsurface wastewater disposal system serving the subject property. The inspection included a review of property owner, municipal and state records as appropriate and a visit to the property. This report was completed in accordance with minimum reporting criteria established by the Maine Department of Human Services and adapted in part from the "Maine Septic System Inspection Guidelines" prepared by the Maine Association of Site Evaluators. The information contained in this document accurately describes the conditions observed relative to the specific items referenced in this report that existed on the inspection date. No warranty is made or implied that the conditions described herein are representative of past conditions; will continue beyond the inspection date; or that the subsurface wastewater disposal system will function in compliance with the Maine Subsurface Wastewater Disposal Rules. No inference can be made regarding the condition, status, or functionality of any system characteristic not specifically described in this report.</p>				
/ /				
Subsurface Wastewater Disposal System Inspector			Vol. Cert. No.	Date

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COMPLETING THE REPORT FORM

PAGE 2 – SYSTEM RECORD SEARCH

INSPECTION ITEM	OBSERVATION				COMMENT
	YES	NO*	UNKN*	N/A	
1 System Records Search Done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Design Plan Exists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Permit Exists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. System Inspection Record Exists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Maintenance Records Exist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Water Use Records Exist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

* - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.

**UNKN = Unknown - N/A = Not
Applicable**

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COMPLETING THE REPORT FORM

PAGE 2 – INTERNAL PLUMBING REVIEW

	INSPECTION ITEM	OBSERVATION				COMMENT
		YES	NO*	UNKN*	N/A	
2	Internal Plumbing Review Done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a.	Structure Currently Occupied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Garbage Disposal Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Water Treatment Unit Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Clothes Washer Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	All Fixtures Connected to System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f.	Plumbing Fixture Leaks OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.						

UNKN = Unknown - N/A = Not Applicable

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COMPLETING THE REPORT FORM

PAGE 2 – TREATMENT TANK

INSPECTION ITEM	OBSERVATION				COMMENT
	YES	NO*	UNKN*	N/A	
3 Treatment Tank Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Size OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Access for Pumping OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Baffles OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Liquid Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Solids Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.					

UNKN = Unknown - N/A = Not Applicable

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COMPLETING THE REPORT FORM

PAGE 2 – TREATMENT TANK

a.	General Condition OK	No visible cracks or holes in observable portion of tank
b.	Size OK	Adequate for the number of bedrooms.
c.	Access for Pumping OK	Covers can be located and removed.
d.	Baffles OK	Baffles are present and functional.
e.	Liquid Level OK	Liquid level at or below outlet invert.
f.	Solids Level OK	Scum & sludge occupy 1/3 or less of tank capacity.

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COMPLETING THE REPORT FORM

PAGE 2 – TREATMENT TANK



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COMPLETING THE REPORT FORM

PAGE 2 – PUMP & WETWELL

	INSPECTION ITEM	OBSERVATION				COMMENT
		YES	NO*	UNKN*	N/A	
4	Pump & Wetwell Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a.	General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Alarm & Circuit OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Access for Service OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Float Switches OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.						

UNKN = Unknown - N/A = Not Applicable

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COMPLETING THE REPORT FORM

PAGE 2 – PUMP & WETWELL

a.	General Condition OK	No visible cracks or holes in observable portion of tank					
b.	Alarm & Circuit OK	Separate electrical circuits exist for pump & alarm.					
c.	Access for Service OK	Covers can be located and removed.					
d.	Float Switches OK	Float switches are present and functional.					

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COMPLETING THE REPORT FORM

PAGE 2 – DISPOSAL AREA

INSPECTION ITEM	OBSERVATION				COMMENT
	YES	NO*	UNKN*	N/A	
5 Disposal Area Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Effluent Contained Below Surface	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ground Cover OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Water Supply Setback OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Major Waterbody Setback OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*** - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.**

UNKN = Unknown - N/A = Not Applicable

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COMPLETING THE REPORT FORM

PAGE 2 – DISPOSAL AREA

a.	General Condition OK	No components visible; no trees or immovable objects on system.					
b.	Effluent Contained Below Surface	No malfunction per definition.					
c.	Ground Cover OK	No visible evidence of surface erosion.					
d.	Water Supply Setback OK	System meets setback on design plan or current rule minimum.					
e.	Major Waterbody Setback OK	System meets setback on design plan or current rule minimum.					

**Subsurface Wastewater Disposal System
Voluntary Inspector Certification Training**

COMPLETING THE REPORT FORM

PAGE 2 – DISPOSAL AREA



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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #1

Inspection Item	Specific System Deficiencies <small>Preprinted Items Represent Minimum Deficiency Conditions Set by DHS Checked Items Represent Deficiencies Identified During this Inspection</small>	Corrective Action Recommended <small>See Page 4</small>
1 Records	No System Deficiencies Noted.	NO
1.a	System plan unable to be located.	
1.b	Plan with permit sticker unable to be located.	
1.c	Certificate of inspection unable to be located	

Relates to Inspection Item 1 – System
Records Search

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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #2

Inspection Item	Specific System Deficiencies <small>Preprinted Items Represent Minimum Deficiency Conditions Set by DHS Checked Items Represent Deficiencies Identified During this Inspection</small>	Corrective Action Recommended <small>See Page 4</small>
2 Internal	No System Deficiencies Noted.	NO
2.e	Plumbing fixture(s) not connected to a system.	YES
2.f	Plumbing fixture(s) with water supply leaks.	

Relates to Inspection Item 2 - Internal
Plumbing Review

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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #2



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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #3

Inspection Item	Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Set by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
3 Tank	No System Deficiencies Noted.	NO
3.a	Cracks visible in observed portion of tank wall.	
3.b	Tank undersized for current use.	
3.c	> 12" excavation needed to pump tank.	
3.d	Baffles damaged or missing.	
3.e	Liquid level above inlet invert.	
3.f	Solids and/or scum exceed 1/3 of tank capacity.	

Relates to Inspection Item 3 - Treatment Tank

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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #4

Inspection Item	Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Set by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
4 Pump	No System Deficiencies Noted.	
4.a	Cracks visible in observed portion of tank wall.	
4.a	Pump inoperable.	
4.b	Pump and alarm on common circuit.	
4.c	> 12" excavation needed to service pump.	
4.d	Float switches inoperable or missing.	

Relates to Inspection Item 4 - Pump & Wetwell

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COMPLETING THE REPORT FORM

PAGE 3 – INSPECTION ITEM #5

Inspection Item	Specific System Deficiencies <small>Preprinted Items Represent Minimum Deficiency Conditions Set by DHS Checked Items Represent Deficiencies Identified During this Inspection</small>	Corrective Action Recommended <small>See Page 4</small>
5 Field	No System Deficiencies Noted.	NO
5.a	Pipe, stone, or proprietary device exposed.	
5.b	Malfunction per Chapter 3 Definition.	YES
5.c	Disposal area subject to visible surface erosion.	
5.d	Setback requires variance; no approval found.	
5.e	Setback requires variance; no approval found.	

Relates to Inspection Item 5 - Disposal Area

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COMPLETING THE REPORT FORM

PAGE 4 – NARRATIVES

- Provides Opportunity to Describe Observations in Detail
- Can Reference Comments Made on Page 2
- Note Unusual Conditions and Recommendations
- Should Not be Left Blank – Use “**No Specific Comments for This Item**” or Similar Statement

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Voluntary Inspector Certification Training
VOLUNTARY INSPECTOR CERTIFICATION

- Earned by Attending Today's Session
- Qualifies You to Conduct **Minimum System Inspection** as Defined by DHS
- Maintained by Responding to Annual Request for Information
- Good for Five Years

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

**Wastewater and Plumbing Control Program
Division of Health Engineering
Bureau of Health
Maine Department of Human Services**

**Onsite Subsurface Wastewater Disposal System
Inspector Certification**

This document certifies that

«FirstName» «LastName»

has successfully met the training requirements for recognition as a
Certified Onsite Subsurface Wastewater Disposal System Inspector
for the period from **November 01, 2003** to **June 01, 2008**.

Certification Number: **«Certificate»**

Date

Director

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Voluntary Certification Program
Subsurface Wastewater Disposal System Inspectors
Address Correction Form

The following is information from our records relative to your certification as a Subsurface Wastewater Disposal System Inspector. Please note any changes and return this form if necessary.

Existing Data		Revised Data	
First Name:	«FirstName»	First Name:	
Last Name:	«LastName»	Last Name:	
Company:	«Company»	Company:	
Address:	«Address1»	Address:	
Address:	«Address2»	Address:	
Municipality:	«Town»	Municipality:	
State:	«State»	State:	
Zip code:	«ZipCode»	Zip code:	
Telephone:	«Telephone»	Telephone:	
Certification#:	«Certificate»		

- Please make the noted changes to my name/address.
- I do not wish to be included as a Certified Subsurface Wastewater Disposal System Inspector on any lists distributed by the Department of Human Services. Please keep my name in the master database.
- I do not wish to be part of the Department of Human Services' database of Certified Subsurface Wastewater Disposal System Inspectors. Please remove my name.

Please return to:

**Wastewater & Plumbing Control Program
Division of Health Engineering
11 State House Station
Augusta, Maine 04333-0011**

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PARTIAL LIST OF RESOURCES

- Maine Subsurface Wastewater Disposal Rules – 144 CMR 241
- “Maine Septic System Inspection Guidelines “–
Maine Association of Site Evaluators
- “Septic System Checkup: The Rhode Island Handbook for Inspection” by James Riordan

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

SUMMARY OF PART ONE

- Need for Inspection at Property Transfer is Voluntary
- Inspectors are Certified to Conduct Minimum Inspection as Defined by DHS
- Program Can Only Be Improved With Your “Real World” Suggestions

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Part Two: Examples



*Maine Center for Disease
Control and Prevention*

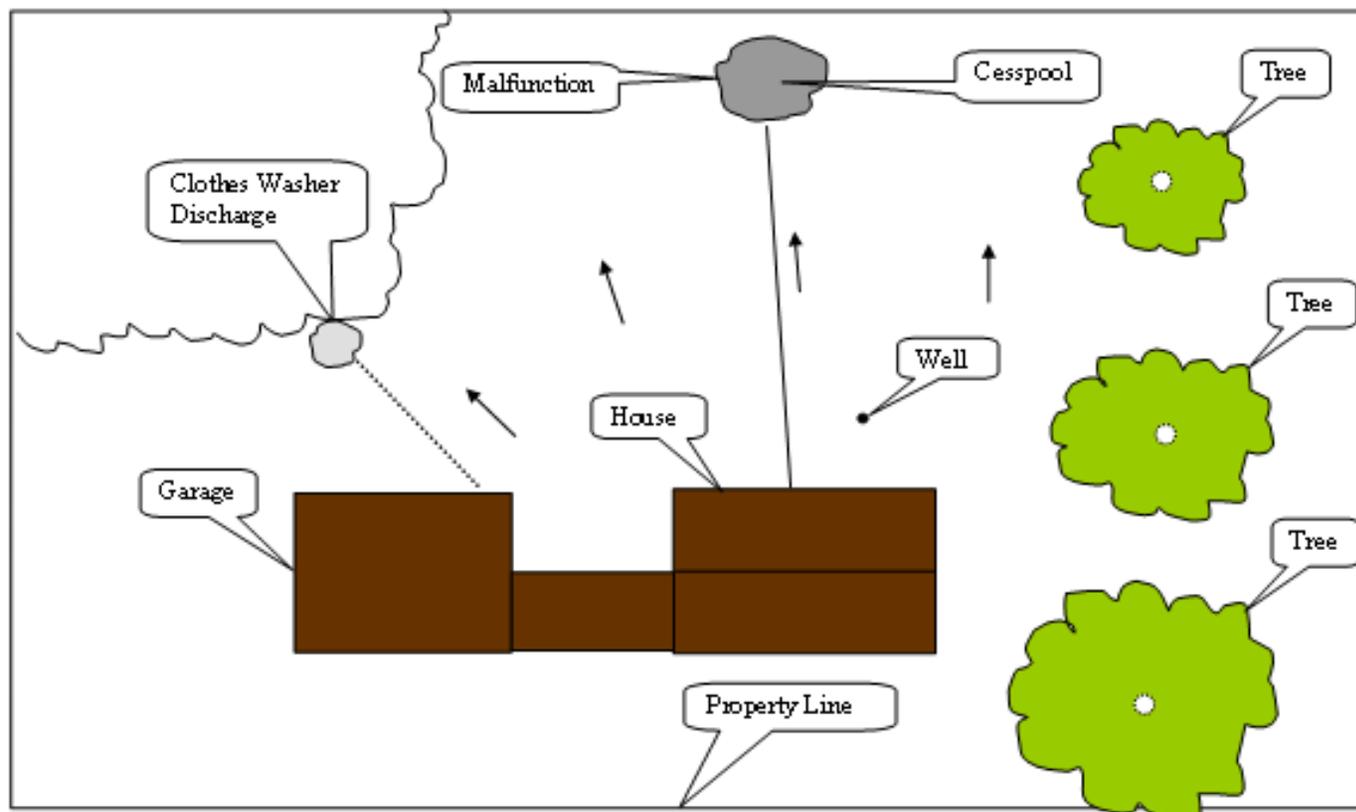
*An Office of the
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EXAMPLE No. 1 Pre 1974 System – Malfunction Identified.
Installation Date: Exact Date Unknown – Assumed Prior to 1960.
System Type: Cesspool Only – No Septic Tank
Serving: Three Bedroom Single Family Dwelling – Year Round.
Unusual Conditions: Malfunction; No Septic Tank; Well Setback < 100 Feet.



Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 1

Page 1

PROPERTY INFORMATION		Obtained from Client				
Address:	999 Middle Street	Lot Size:	60,000 SF			
Municipality:	Anytown	Tax Map No.:	15			
County:	Sagadahoc	Lot No.:	35A			
Current Owner:	Last Name: Public	First Name:	John Q.			
SYSTEM INFORMATION		Collected During Records Search and Site Visit				
Type:	<input checked="" type="checkbox"/> Pre June 1974	<input type="checkbox"/> Post June 1974	Design Capacity	300 GPD		
Dates:	Designed: UNK	Permitted: UNK	Permit No.:	UNK		
Current Use:	<input checked="" type="checkbox"/> Single Family Dwelling - BDRMS - 3	<input type="checkbox"/> Multiple Family Dwelling - UNITS	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other		
Treatment Tank:	<input type="checkbox"/> None GAL	<input type="checkbox"/> Steel	<input type="checkbox"/> Concrete	<input type="checkbox"/> Plastic	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> UNKN
Disposal Area:	<input checked="" type="checkbox"/> Cesspool	<input type="checkbox"/> Trench	<input type="checkbox"/> Stone Bed	<input type="checkbox"/> Proprietary Device _____	<input type="checkbox"/> UNKN	
Designer:	UNK		License No.:	N/A		
Installer:	UNK		Vol. Cert. No.:	N/A		
INSPECTION INFORMATION		Conclusions Drawn from Records Search and Site Visit				
Findings:	Malfunction per Rules Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4		
	System Deficiencies Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4		
	Further Investigation Suggested:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Page 4		
Conclusion:	<input type="checkbox"/> No Corrective Action Needed		<input checked="" type="checkbox"/> Corrective Action Recommended-See Page 4			
Disclaimer:	<p>On the date noted below I completed an inspection of the subsurface wastewater disposal system serving the subject property. The inspection included a review of property owner, municipal and state records as appropriate and a visit to the property. This report was completed in accordance with minimum reporting criteria established by the Maine Department of Human Services and adapted in part from the "Maine Septic System Inspection Guidelines" prepared by the Maine Association of Site Evaluators. The information contained in this document accurately describes the conditions observed relative to the specific items referenced in this report that existed on the inspection date. No warranty is made or implied that the conditions described herein are representative of past conditions; will continue beyond the inspection date; or that the subsurface wastewater disposal system will function in compliance with the Maine Subsurface Wastewater Disposal Rules. No inference can be made regarding the condition, status, or functionality of any system characteristic not specifically described in this report.</p> <p>SEE REVERSE SIDE OF THIS PAGE FOR GENERAL INFORMATION REGARDING THE INSPECTION PROCESS</p>					
	 Subsurface Wastewater Disposal System Inspector		233	10/1/2003		
			Vol. Cert. No.	Date		

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 1

Page 2

INSPECTION ITEM	OBSERVATION*				COMMENT
	YES	NO**	UNKN**	N/A	
1 System Records Search Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prior to 1960-See Pg 4
a. Design Plan Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Permit Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. System Inspection Record Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Maintenance Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Water Use Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Internal Plumbing Review Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Structure Currently Occupied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Garbage Disposal Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Water Treatment Unit Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Clothes Washer Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. All Fixtures Connected to System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CW Discharge-See Pg 4
f. Plumbing Fixture Leaks OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Treatment Tank Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Tank Present
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Size OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Access for Pumping OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d. Baffles OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
e. Liquid Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
f. Solids Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
4 Pump & Wetwell Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Pump Present
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Alarm & Circuit OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Access for Service OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d. Float Switches OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5 Disposal Area Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cesspool-See Pg 4
a. General Condition OK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Malfunction-See Pg 4
b. Effluent Contained Below Surface	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ground Cover OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Water Supply Setback OK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	< 100 Feet-See Pg 4
e. Major Waterbody Setback OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* - Explanation of Observation Items Listed in Supplement to this Report Form (HHE-240).					
** - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.					

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 1

Page 3

		Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Established by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
1	Records	No System Deficiencies Noted.	NO
	1.a	System plan unable to be located.	
	1.b	Plan with permit sticker unable to be located.	
	1.c	Certificate of inspection unable to be located	
2	Internal	No System Deficiencies Noted.	NO
	2.e	Plumbing fixture(s) not connected to a system.	YES
	2.f	Plumbing fixture(s) with water supply leaks.	
3	Tank	No System Deficiencies Noted.	NO
	3.a	Cracks visible in observed portion of tank wall.	
	3.b	Tank undersized for current use.	
	3.c	> 12" excavation needed to pump tank.	
	3.d	Baffles damaged or missing.	
	3.e	Liquid level above inlet invert.	
	3.f	Solids and/or scum exceed 1/3 of tank capacity.	
		x No Tank Present - Pre 1960 Cesspool	Yes-See Pg 4
4	Pump	No System Deficiencies Noted.	
	4.a	Cracks visible in observed portion of tank wall.	
	4.a	Pump inoperable.	
	4.b	Pump and alarm on common circuit.	
	4.c	> 12" excavation needed to service pump.	
	4.d	Float switches inoperable or missing.	
		x No Pump Present	NO
5	Field	No System Deficiencies Noted.	NO
	5.a	Pipe, stone, or proprietary device exposed.	
	5.b	x Malfunction per Chapter 3 Definition. <small>malfunctioning system: A system that is not operating or is not functioning properly. Indications of a malfunctioning system include, but are not limited to, any of the following: ponding or outbreak of waste water or septic tank effluent onto the surface of the ground; seepage of waste water or septic tank effluent into parts of buildings below ground; back-up of waste water into the building served that is not caused by a physical blockage of the internal plumbing; or contamination of nearby water wells or water bodies/courses.</small>	YES
	5.c	Disposal area subject to visible surface erosion.	
	5.d	Observed setback differs from design plan.	
	5.e	Observed setback differs from design plan.	
		x Well to system setback less than 100 feet.	YES

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 1
Page 4

1. System Records Narrative:	
	Contact with current owner, Municipality, and State made. Due to age of system; prior to 1960, no records could be located.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
2. Internal Plumbing Narrative:	
	Access to interior of structure gained. Clothes washer not connected to system; surface discharge identified.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
3. Treatment Tank Narrative:	
	No treatment tank is present on the property. Replacement design will require tank.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
4. Pump & Wetwell Narrative:	
	No wastewater pump or wetwell is present on the property.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
5. Disposal Area Narrative:	
	Disposal area consists of a cesspool with domestic wastewater visible on the ground surface. Condition is a malfunction as defined in Section 3 of 10 144 CMR 241 Maine Subsurface Wastewater Disposal Rules. Well to system setback is less than 100 feet; measured at 52 feet.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
6. Findings Narrative:	
	Recommend owner contact a licensed site evaluator to design replacement for the existing malfunction, including clothes washer discharge. Owner may also wish to contact the local plumbing inspector for the town of Anytown for further information.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

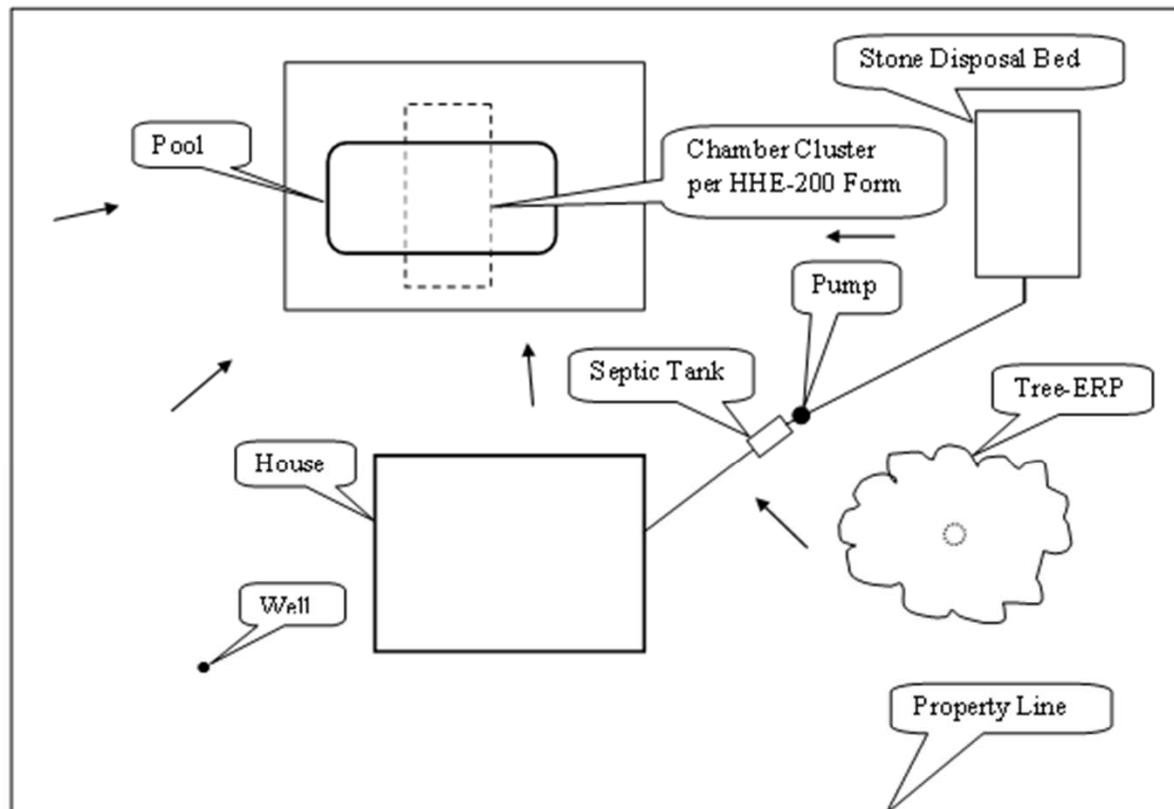
EXAMPLE No. 2 Post 1974 System – No Malfunction Identified.

Installation Date: June 1990.

System Type: Concrete Septic Tank – Stone Disposal Bed.

Serving: Four Bedroom Single Family Dwelling – Year Round.

Unusual Conditions: Empty last 6 mo., System Type Different From Plan.



Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 2
Page 1

PROPERTY INFORMATION		Obtained from Client		
Address:	111 Main Street	Lot Size:	1.3 AC	
Municipality:	Big City	Tax Map No.:	28	
County:	Androscoggin	Lot No.:	15	
Current Owner:	Last Name: Public	First Name:	John Q.	
SYSTEM INFORMATION		Collected During Records Search and Site Visit		
Type:	<input type="checkbox"/> Pre June 1974	<input checked="" type="checkbox"/> Post June 1974	Design Capacity	360 GPD
Dates:	Designed: 4/1/1990	Permitted: 6/1/1990	Permit No.:	595
Current Use:	<input checked="" type="checkbox"/> Single Family Dwelling - BDRMS 4	<input type="checkbox"/> Multiple Family Dwelling - UHITS	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other
Treatment Tank:	1000 GAL	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> Plastic
		<input type="checkbox"/> Fiberglass	<input type="checkbox"/> UNKN	
Disposal Area:	<input type="checkbox"/> Cesspool	<input type="checkbox"/> Trench	<input checked="" type="checkbox"/> Stone Bed	<input type="checkbox"/> Proprietary Device _____
				<input type="checkbox"/> UNKN
Designer:	Joe Site Evaluator		License No.:	000
Installer:	Joe Contractor		Vol. Cert. No.:	N/A
INSPECTION INFORMATION		Conclusions Drawn from Records Search and Site Visit		
Findings:	Malfunction per Rules Identified:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Pgs 3 & 4
	System Deficiencies Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4
	Further Investigation Suggested:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Page 4
Conclusion:	<input checked="" type="checkbox"/> No Corrective Action Needed		<input type="checkbox"/> Corrective Action Recommended-See Page 4	
Disclaimer:	<p>On the date noted below I completed an inspection of the subsurface wastewater disposal system serving the subject property. The inspection included a review of property owner, municipal and state records as appropriate and a visit to the property. This report was completed in accordance with minimum reporting criteria established by the Maine Department of Human Services and adapted in part from the "Maine Septic System Inspection Guidelines" prepared by the Maine Association of Site Evaluators. The information contained in this document accurately describes the conditions observed relative to the specific items referenced in this report that existed on the inspection date. No warranty is made or implied that the conditions described herein are representative of past conditions; will continue beyond the inspection date; or that the subsurface wastewater disposal system will function in compliance with the Maine Subsurface Wastewater Disposal Rules. No inference can be made regarding the condition, status, or functionality of any system characteristic not specifically described in this report.</p> <p>SEE REVERSE SIDE OF THIS PAGE FOR GENERAL INFORMATION REGARDING THE INSPECTION PROCESS</p>			
		233	10/2/2003	
	Subsurface Wastewater Disposal System Inspector	Vol. Cert. No.	Date	

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 2
Page 2

INSPECTION ITEM	OBSERVATION*				COMMENT
	YES	NO**	UNKN**	N/A	
1 System Records Search Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	See Pg 4
a. Design Plan Exists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Permit Exists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. System Inspection Record Exists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Maintenance Records Exist	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Water Use Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Internal Plumbing Review Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Structure Currently Occupied	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Empty for 6 Mo -See Pg. 4
b. Garbage Disposal Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Water Treatment Unit Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Clothes Washer Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. All Fixtures Connected to System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Plumbing Fixture Leaks OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Treatment Tank Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. General Condition OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Size OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Access for Pumping OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Baffles OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Liquid Level OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Solids Level OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Pump & Wetwell Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pump Present
a. General Condition OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Alarm & Circuit OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Access for Service OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Float Switches OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Disposal Area Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stone Bed-See Pg 4
a. General Condition OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Effluent Contained Below Surface	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ground Cover OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Water Supply Setback OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Major Waterbody Setback OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
* - Explanation of Observation Items Listed in Supplement to this Report Form (HHE-240).					
** - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.					

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 2
Page 3

		Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Established by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
1	Records	No System Deficiencies Noted.	NO
	1.a	System plan unable to be located.	
	1.b	Plan with permit sticker unable to be located.	
	1.c	Certificate of inspection unable to be located	
2	Internal	No System Deficiencies Noted.	NO
	2.e	Plumbing fixture(s) not connected to a system.	YES
	2.f	Plumbing fixture(s) with water supply leaks.	
3	Tank	No System Deficiencies Noted.	NO
	3.a	Cracks visible in observed portion of tank wall.	
	3.b	Tank undersized for current use.	
	3.c	> 12" excavation needed to pump tank.	
	3.d	Baffles damaged or missing.	
	3.e	Liquid level above inlet invert.	
	3.f	Solids and/or scum exceed 1/3 of tank capacity.	
4	Pump	No System Deficiencies Noted.	
	4.a	Cracks visible in observed portion of tank wall.	
	4.a	Pump inoperable.	
	4.b	Pump and alarm on common circuit.	
	4.c	> 12" excavation needed to service pump.	
	4.d	Float switches inoperable or missing.	
5	Field	No System Deficiencies Noted.	NO
	5.a	Pipe, stone, or proprietary device exposed.	
	5.b	Malfunction per Chapter 3 Definition.	
		<small>malfunfunctioning system: A system that is not operating or is not functioning properly. Indications of a malfunctioning system include, but are not limited to, any of the following: ponding or outbreak of waste water or septic tank effluent onto the surface of the ground; seepage of waste water or septic tank effluent into parts of buildings below ground; back-up of waste water into the building served that is not caused by a physical blockage of the internal plumbing; or contamination of nearby water wells or water bodies/courses.</small>	
	5.c	Disposal area subject to visible surface erosion.	
	5.d	Observed setback differs from design plan.	
	5.e	Observed setback differs from design plan.	
		x Installed system differs from permitted plan.	NO

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 2
Page 4

1. System Records Narrative:	
	Contact with current owner, Municipality, and State made. Design plan and permit located; copy attached. Installed disposal area differs from that permitted in type and location on property.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
2. Internal Plumbing Narrative:	
	Access to interior of structure gained. No deficiencies relative to this inspection report identified.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
3. Treatment Tank Narrative:	
	Treatment tank is present on the property. No deficiencies relative to this inspection report identified.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
4. Pump & Wetwell Narrative:	
	A wastewater pump or wetwell is present on the property. No deficiencies relative to this inspection report identified.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
5. Disposal Area Narrative:	
	Disposal area consists of a stone bed. Permitted plan calls for concrete chambers in different location on property.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
6. Findings Narrative:	
	Existing system has not been used for 6 months and differs in design and location from permitted plan. Owner may also wish to contact the local plumbing inspector for the city of Big City for further information.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

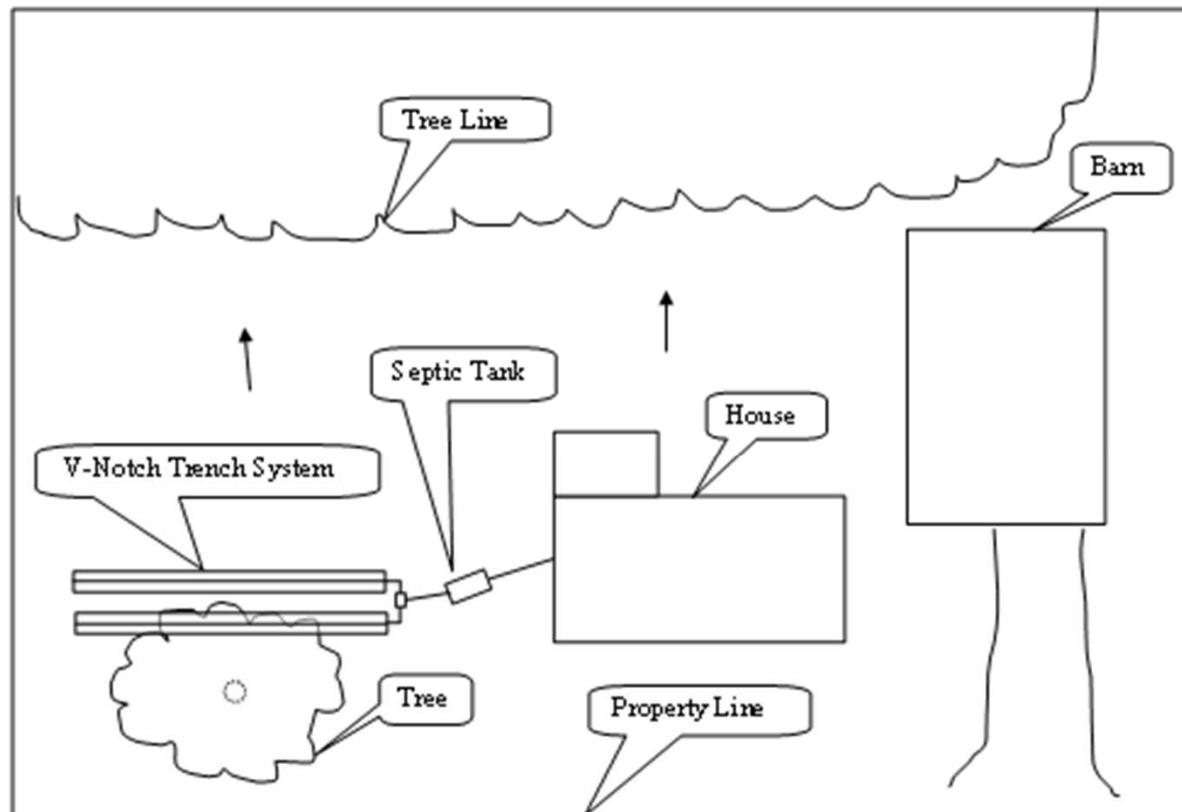
EXAMPLE No. 3 Pre 1974 System – No Malfunction Identified.

Installation Date: Exact Date Unknown – Assumed 1972.

System Type: Concrete Septic Tank – V-notch Disposal Trenches.

Serving: Three Bedroom Single Family Dwelling – Seasonal.

Unusual Conditions: Access to Structure Denied; Well Location Unknown.



Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 3
Page 1

PROPERTY INFORMATION		Obtained from Client			
Address:	1000 Wide Avenue	Lot Size:	48,000 SF		
Municipality:	Small Town	Tax Map No.:	10		
County:	Penobscot	Lot No.:	6		
Current Owner:	Last Name: Squarepants	First Name:	Sponge Bob		
SYSTEM INFORMATION		Collected During Records Search and Site Visit			
Type:	<input checked="" type="checkbox"/> Pre June 1974	<input type="checkbox"/> Post June 1974	Design Capacity:	300 GPD	
Dates:	Designed: 8/1/1972	Permitted: UNK	Permit No.:	UNK	
Current Use:	<input checked="" type="checkbox"/> Single Family Dwelling - BDRMs 3	<input type="checkbox"/> Multiple Family Dwelling - UNITS	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other	
Treatment Tank:	1000 Gal	<input type="checkbox"/> Steel	<input type="checkbox"/> Concrete	<input type="checkbox"/> Plastic	<input type="checkbox"/> Fiberglass
Disposal Area:	<input checked="" type="checkbox"/> Cesspool	<input type="checkbox"/> Trench	<input type="checkbox"/> Stone Bed	<input type="checkbox"/> Proprietary Device	<input type="checkbox"/> UNKN
Designer:	Joe Perc Test		License No.:	N/A	
Installer:	UNK		Vol. Cert. No.:	N/A	
INSPECTION INFORMATION		Conclusions Drawn from Records Search and Site Visit			
Findings:	Malfunction per Rules Identified:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Pgs 3 & 4	
	System Deficiencies Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4	
	Further Investigation Suggested:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Page 4	
Conclusion:	<input checked="" type="checkbox"/> No Corrective Action Needed	<input type="checkbox"/> Corrective Action Recommended-See Page 4			
Disclaimer:	On the date noted below I completed an inspection of the subsurface wastewater disposal system serving the subject property. The inspection included a review of property owner, municipal and state records as appropriate and a visit to the property. This report was completed in accordance with minimum reporting criteria established by the Maine Department of Human Services and adapted in part from the "Maine Septic System Inspection Guidelines" prepared by the Maine Association of Site Evaluators. The information contained in this document accurately describes the conditions observed relative to the specific items referenced in this report that existed on the inspection date. No warranty is made or implied that the conditions described herein are representative of past conditions; will continue beyond the inspection date; or that the subsurface wastewater disposal system will function in compliance with the Maine Subsurface Wastewater Disposal Rules. No inference can be made regarding the condition, status, or functionality of any system characteristic not specifically described in this report. SEE REVERSE SIDE OF THIS PAGE FOR GENERAL INFORMATION REGARDING THE INSPECTION PROCESS				
		233	10/3/2003		
	Subsurface Wastewater Disposal System Inspector	Vol. Cert. No.	Date		

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 3
Page 2

INSPECTION ITEM	OBSERVATION*				COMMENT
	YES	NO**	UNKN**	N/A	
1 System Records Search Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Prior to 1974-See Pg 4
a. Design Plan Exists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Permit Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. System Inspection Record Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Maintenance Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Water Use Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Internal Plumbing Review Done	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access Denied-See Pg 4
a. Structure Currently Occupied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Garbage Disposal Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Water Treatment Unit Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
d. Clothes Washer Present	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e. All Fixtures Connected to System	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Plumbing Fixture Leaks OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3 Treatment Tank Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. General Condition OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Size OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Access for Pumping OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Baffles OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Liquid Level OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Solids Level OK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pumping Needed-See Pg 4
4 Pump & Wetwell Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Pump Present
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Alarm & Circuit OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Access for Service OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d. Float Switches OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5 Disposal Area Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	V-Trench-See Pg 4
a. General Condition OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Effluent Contained Below Surface	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ground Cover OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Water Supply Setback OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Location Unknown-See Pg 4
e. Major Waterbody Setback OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* - Explanation of Observation Items Listed in Supplement to this Report Form (HHE-240).					
** - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.					

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 3
Page 3

		Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Established by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
1	Records	No System Deficiencies Noted.	NO
	1.a	System plan unable to be located.	
	1.b	Plan with permit sticker unable to be located.	
	1.c	Certificate of inspection unable to be located	
2	Internal	No System Deficiencies Noted.	NO
	2.e	Plumbing fixture(s) not connected to a system.	YES
	2.f	Plumbing fixture(s) with water supply leaks.	
	x	Access to structure denied - unable to verify internal plumbing	NO
3	Tank	No System Deficiencies Noted.	NO
	3.a	Cracks visible in observed portion of tank wall.	
	3.b	Tank undersized for current use.	
	3.c	> 12" excavation needed to pump tank.	
	3.d	Baffles damaged or missing.	
	3.e	Liquid level above inlet invert.	
	3.f	x Solids and/or scum exceed 1/3 of tank capacity.	YES
4	Pump	No System Deficiencies Noted.	
	4.a	Cracks visible in observed portion of tank wall.	
	4.a	Pump inoperable.	
	4.b	Pump and alarm on common circuit.	
	4.c	> 12" excavation needed to service pump.	
	4.d	Float switches inoperable or missing.	
	x	No Pump Present	NO
5	Field	No System Deficiencies Noted.	NO
	5.a	Pipe, stone, or proprietary device exposed.	
	5.b	Malfunction per Chapter 3 Definition. <small>malfunctioning system: A system that is not operating or is not functioning properly. Indications of a malfunctioning system include, but are not limited to, any of the following: ponding or outbreak of waste water or septic tank effluent onto the surface of the ground; seepage of waste water or septic tank effluent into parts of buildings below ground; back-up of waste water into the building served that is not caused by a physical blockage of the internal plumbing; or contamination of nearby water wells or water bodies/courses.</small>	
	5.c	Disposal area subject to visible surface erosion.	
	5.d	x Observed setback differs from design plan.	NO
	5.e	Observed setback differs from design plan.	

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 3
Page 4

1. System Records Narrative:	
	Contact with current owner, Municipality, and State made. Due to age of system; prior to 1974, only design records could be located.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
2. Internal Plumbing Narrative:	
	Access to interior of structure denied. Unable to verify items relative to this section of the report.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
3. Treatment Tank Narrative:	
	Treatment tank is present on the property. Solids level indicates need to pump tank.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
4. Pump & Wetwell Narrative:	
	No wastewater pump or wetwell is present on the property.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
5. Disposal Area Narrative:	
	Disposal area consists of v-notch plank trenches according to plan.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)
6. Findings Narrative:	
	Recommend owner contact a licensed septic tank pumper to service tank. Owner may also wish to contact the local plumbing inspector for the town of Smalltown for further information.
	(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

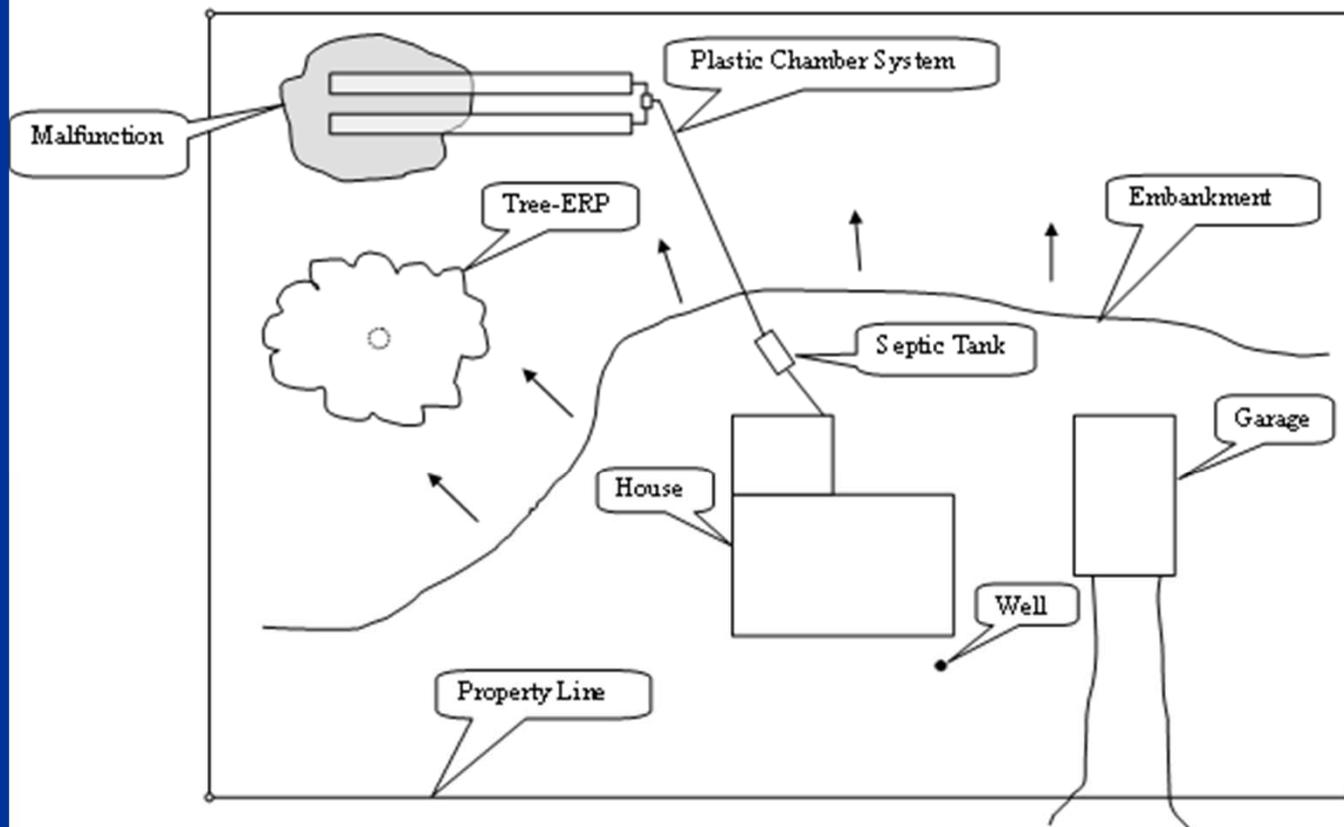
EXAMPLE No. 4 Post 1974 System – Malfunction Identified.

Installation Date: October 1988.

System Type: Concrete Septic Tank – Plastic Chambers.

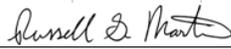
Serving: Two Bedroom Single Family Dwelling – Year Round.

Unusual Conditions: No Permit or Inspection Record; No Access to Tank



Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 4
Page 1

PROPERTY INFORMATION		Obtained from Client			
Address:	35 Septic Road	Lot Size:	1.0 AC		
Municipality:	Hamlet	Tax Map No.:	12		
County:	York	Lot No.:	47		
Current Owner:	Last Name: Doe	First Name:	John		
SYSTEM INFORMATION		Collected During Records Search and Site Visit			
Type:	<input type="checkbox"/> Pre June 1974	<input checked="" type="checkbox"/> Post June 1974	Design Capacity:	180 GPD	
Dates:	Designed: 6/1/1988	Permitted: UNK	Permit No.:	UNK	
Current Use:	<input checked="" type="checkbox"/> Single Family Dwelling - BDRMs 2	<input type="checkbox"/> Multiple Family Dwelling - UNITS	<input type="checkbox"/> Commercial	<input type="checkbox"/> Other	
Treatment Tank:	1000 GAL	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> Plastic	<input type="checkbox"/> Fiberglass
Disposal Area:	<input type="checkbox"/> Cesspool	<input type="checkbox"/> Trench	<input type="checkbox"/> Stone Bed	<input checked="" type="checkbox"/> Proprietary Device Chamber	<input type="checkbox"/> UNKN
Designer:	Jane Site Evaluator		License No.:	200	
Installer:	UNK		Vol. Cert. No.:	N/A	
INSPECTION INFORMATION		Conclusions Drawn from Records Search and Site Visit			
Findings:	Malfunction per Rules Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4	
	System Deficiencies Identified:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> See Pgs 3 & 4	
	Further Investigation Suggested:	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> See Page 4	
Conclusion:	<input type="checkbox"/> No Corrective Action Needed	<input checked="" type="checkbox"/> Corrective Action Recommended-See Page 4			
Disclaimer:	On the date noted below I completed an inspection of the subsurface wastewater disposal system serving the subject property. The inspection included a review of property owner, municipal and state records as appropriate and a visit to the property. This report was completed in accordance with minimum reporting criteria established by the Maine Department of Human Services and adapted in part from the "Maine Septic System Inspection Guidelines" prepared by the Maine Association of Site Evaluators. The information contained in this document accurately describes the conditions observed relative to the specific items referenced in this report that existed on the inspection date. No warranty is made or implied that the conditions described herein are representative of past conditions; will continue beyond the inspection date; or that the subsurface wastewater disposal system will function in compliance with the Maine Subsurface Wastewater Disposal Rules. No inference can be made regarding the condition, status, or functionality of any system characteristic not specifically described in this report. SEE REVERSE SIDE OF THIS PAGE FOR GENERAL INFORMATION REGARDING THE INSPECTION PROCESS				
		233	10/4/2003		
	Subsurface Wastewater Disposal System Inspector	Vol. Cert. No.	Date		

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

Example 4
Page 2

INSPECTION ITEM	OBSERVATION*				COMMENT
	YES	NO**	UNKN**	N/A	
1 System Records Search Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	See Pg 4
a. Design Plan Exists	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Permit Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. System Inspection Record Exists	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Maintenance Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Water Use Records Exist	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Internal Plumbing Review Done	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. Structure Currently Occupied	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Garbage Disposal Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Water Treatment Unit Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Clothes Washer Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. All Fixtures Connected to System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Plumbing Fixture Leaks OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Treatment Tank Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Access-See Pg 4
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Size OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Per Design Plan
c. Access for Pumping OK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Access-See Pg 4
d. Baffles OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
e. Liquid Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Solids Level OK	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4 Pump & Wetwell Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No Pump Present
a. General Condition OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
b. Alarm & Circuit OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Access for Service OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
d. Float Switches OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5 Disposal Area Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chambers-See Pg 4
a. General Condition OK	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Malfunction-See Pg 4
b. Effluent Contained Below Surface	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Ground Cover OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Water Supply Setback OK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Major Waterbody Setback OK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
* - Explanation of Observation Items Listed in Supplement to this Report Form (HHE-240).					
** - Listing of Specific Inspection Item System Deficiencies Noted on Page 3.					

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Example 4
Page 3

		Specific System Deficiencies Preprinted Items Represent Minimum Deficiency Conditions Established by DHS Checked Items Represent Deficiencies Identified During this Inspection	Corrective Action Recommended See Page 4
1	Records	No System Deficiencies Noted.	NO
	1.a	System plan unable to be located.	
	1.b	x Plan with permit sticker unable to be located.	NO
	1.c	x Certificate of inspection unable to be located	NO
2	Internal	No System Deficiencies Noted.	NO
	2.e	Plumbing fixture(s) not connected to a system.	YES
	2.f	Plumbing fixture(s) with water supply leaks.	
3	Tank	No System Deficiencies Noted.	NO
	3.a	Cracks visible in observed portion of tank wall.	
	3.b	Tank undersized for current use.	
	3.c	x > 12" excavation needed to pump tank.	NO
	3.d	Baffles damaged or missing.	
	3.e	Liquid level above inlet invert.	
	3.f	Solids and/or scum exceed 1/3 of tank capacity.	
4	Pump	No System Deficiencies Noted.	
	4.a	Cracks visible in observed portion of tank wall.	
	4.a	Pump inoperable.	
	4.b	Pump and alarm on common circuit.	
	4.c	> 12" excavation needed to service pump.	
	4.d	Float switches inoperable or missing.	
		x No Pump Present	NO
5	Field	No System Deficiencies Noted.	NO
	5.a	Pipe, stone, or proprietary device exposed.	
	5.b	x Malfunction per Chapter 3 Definition. <small>malfunctioning system: A system that is not operating or is not functioning properly. Indications of a malfunctioning system include, but are not limited to, any of the following: ponding or outbreak of waste water or septic tank effluent onto the surface of the ground; seepage of waste water or septic tank effluent into parts of buildings below ground; back-up of waste water into the building served that is not caused by a physical blockage of the internal plumbing; or contamination of nearby water wells or water bodies/courses.</small>	YES
	5.c	Disposal area subject to visible surface erosion.	
	5.d	Observed setback differs from design plan.	
	5.e	Observed setback differs from design plan.	

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Example 4
Page 4

1. System Records Narrative:	
Contact with current owner, Municipality, and State made. Design plan located, permitted copy not found. No record of permit or construction inspection.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	
2. Internal Plumbing Narrative:	
Access to interior of structure gained. No deficiencies relative to this inspection report identified.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	
3. Treatment Tank Narrative:	
Treatment tank is present on the property per the design plan. Access to tank could not be gained due to tank burial depth.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	
4. Pump & Wetwell Narrative:	
No wastewater pump or wetwell is present on the property.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	
5. Disposal Area Narrative:	
Disposal area consists of plastic chambers with domestic wastewater visible on the ground surface. Condition is a malfunction as defined in Section 3 of 10 144 CMR 241 Maine Subsurface Wastewater Disposal Rules.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	
6. Findings Narrative:	
Recommend owner contact a licensed site evaluator to design replacement for the existing malfunction. Owner may also wish to contact the local plumbing inspector for the town of Hamlet for further information.	
(Use additional sheets as necessary. Relate Noted System Deficiencies to Appropriate Rule Section.)	

WHEN DOING INSPECTIONS

BE PREPARED TO SEE
ANYTHING























Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

www.mainepublichealth.gov/septic-systems

The screenshot shows a Mozilla Firefox browser window displaying the website for the Maine Subsurface Wastewater Unit. The browser's address bar shows the URL: www.maine.gov/dhhs/mecdc/environmental-health/plumb/index.htm. The website header includes the Maine.gov logo, navigation links for Agencies, Online Services, and Help, and a search bar. The main content area features the title "Maine Subsurface Wastewater Unit" and a brief introduction: "Maine is a predominantly rural state, and relies heavily on decentralized sewage disposal facilities for disposal of human waste, i.e., septic systems. The State of Maine has regulated septic systems since 1926, to varying degrees. Over the years, the Maine State Plumbing Code, Subsurface Wastewater Disposal Rules (Rules) in their various versions have been administered by the Maine Center for Disease Control and Prevention (MeCDC) and its predecessors." Below this, it states: "The MeCDC has been and continues to be responsible for the Rules because they have historically been viewed as a public health code, rather than an environmental regulation." and "The Subsurface Wastewater Unit, within the MeCDC's Division of Environmental Health, promulgates and administers the Rules. Our mission is to minimize health and safety hazards associated with improperly installed subsurface waste water disposal systems." A "What's New at the Subsurface Wastewater Unit" section lists several items: "Family Burying Grounds", "Fillable Online HHE-200 Page One Available", "Elimination of Permit Labels", "Health Inspection Program Holding Tank Policy", and "Recently Approved Products". A sidebar on the left contains a "Maine Subsurface Wastewater Unit" menu with links for About Us, Forms, Links, Lists, Newsletters, Policies, Publications, and Training. A sidebar on the right titled "Featured Links" includes links for Online Rules, Variances, Site Evaluator Licensing, Frequently Asked Questions, Ten Tips for Systems, Cemeteries and Crematoria, Certifications, Public Swimming Pools, 2001 DHS & DEP Programs Review, and Online Services. The browser's taskbar at the bottom shows the Windows Start button, several application icons, and the system clock displaying 8:21 AM on Tuesday, January 3, 2012.

Subsurface Wastewater Disposal System Voluntary Inspector Certification Training

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