



REQUEST FOR HOME LOAN EVALUATION OF WELL AND/OR SEWAGE SYSTEM

TO BE COMPLETED BY THE APPLICANT

Property Address to be Tested:	Lender: _____ County Tax Map: _____ Parcel Number: _____
Purchaser:	Property Owner:
Real Estate Agent: Phone:	Mailing Address: City: _____ State: _____ Zip Code: _____
FAX or e-mail:	Phone:
Directions to the property:	
Subdivision Name: _____ Section: _____ Lot No.: _____	

Multi-living units	Number of Bedrooms	Water Supply	Sewage Disposal	Dwelling occupied for last 30 days?	Basement	Dwelling
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Public <input type="checkbox"/> Private*	<input type="checkbox"/> Public <input type="checkbox"/> Private*	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> New <input type="checkbox"/> Existing Year Built _____

*If private well, permit number: _____, and approximate date well was drilled: _____
 If private septic system, permit number: _____ and approximate date system was installed: _____

TO BE COMPLETED BY THE HEALTH DEPARTMENT SANITARIAN

Water Supply: Drilled Well Dug Well Cistern Spring Other: _____ Public Water

Installed under permit: Yes No Disinfection system: Yes No Type: _____

Permit Number: _____ Meets minimum physical design requirements: Yes No Cannot be determined

Bacteriological sample collected: Yes No Date inspected / sampled: _____

Bacteriological sample results: Satisfactory Unsatisfactory Laboratory sample number: _____

NOTE: Inspection and sampling does not address chemical contamination, mineral concerns, or yield of the supply.

The water supply was found to be: Satisfactory Unsatisfactory as a potable water supply.

Sewage Disposal System: Type: _____

Sewage system installed under a permit: Yes No Permit Number: _____

For Surface Discharge Systems permitted since January 1, 1999, is the WV DEP Registration current: Yes No N/Ap

Note: Surface Discharge System cannot be approved without a current registration. Registration cannot be transferred to new owner. New owner must register with West Virginia Department of Environmental Protection (WVDEP).

System met the minimum design standards at the time of installation: Yes No

Date of installation inspection: _____ Date of dye test: _____ Dye observed: Positive Negative

The design loading (bedrooms) of the facility remains within the minimum standards as originally sized: Yes No

The sewage disposal system: Appears to be Functioning Appears to be Not Functioning Could not be determined satisfactorily at the time of the evaluation.

REMARKS: _____

Date: _____

Sanitarian: _____