Fo	rm 8-3	Operational Checklist: Low-pressure	e drainfield (LPD)				
		vided on: Date: Time:	Reference #:				
Ser	vice pro	vided by: Company:	Employee:				
		service:					
Da	te of last	inspection:	_				
1.	Effluen	t quality: \square Aerobic \square Septic tank efflue	nt (anaerobic)				
	Type of	f low-pressure drainfield: \Box Low-pressure pipe	e Shallow narrow drain	field <i>NOTES</i>			
2.	Conditi	ons at the LPD					
	a.	Topography: ☐ Level ☐ Sloping: _	% slope	2. ☐ Acceptable			
	b.	Evaluate presence of odor within 10 ft of perim		☐ Unacceptable			
		□ None □ Mild □ Strong □ Chemical	•				
	c.	Source of odor, if present:					
	d.	Indications of leaks around/above system.	YesNo				
	e.	Vegetation appropriate.	YesNo				
	f.	Excessive vegetative growth.	YesNo				
	g.	Vegetation adequately maintained.	YesNo				
	ĥ.	Preventing accessibility for maintenance.	YesNo				
3.	Supply	line		3. □ Acceptable			
	a.	Line drains freely.	YesNo	☐ Unacceptable			
	b.	r		_ опассератоге			
		parts of the supply line. N/A	YesNo				
	c.	Air relief(s) valve operating. N/A	YesNo				
4.	Switch	ing valves		4. ☐ Acceptable			
	a.	Switching valve present.	YesNo	☐ Unacceptable			
	b.	Type of valve:		_ спассератоге			
	c.	- F	YesNo				
	d.	Action taken if not:					
	e.	Laterals/zones in operation:					

5. Soil treatment area information:

		Distal I	Head		Surfacing	g Effluent	La	teral E	nds	Root	Other
Zone #	Lateral #	Operating at (in)	Adjusted to (in)	Ponding Yes - No (in)	(Yes – No)	Distance Traveled (in)	Intact	Protected	Accessible	Intrusion (Yes – No)	Obstruction (Specify)

		Reference #:			
6.	Orifices a. Position: ☐ 6 o'clock b. Orifices cleaned.	□ 12 o'clock YesNo	6. ☐ Acceptable ☐ Unacceptable		
	c. Method: ☐ Hydrojetted ☐ Flushed	☐ Bottlebrushed☐ Other:			
7.	Elevated system: a. Surfacing effluent present.	N/A Yes No	7. ☐ Acceptable ☐ Unacceptable		
8.	Lab samples collected for monitoring. Types of analysis:	YesNo			