



APPLICATION FOR SEPTIC SYSTEM REPAIR IN THE LAKE KEOWEE WATERSHEDS

I. Applicant Information

Applicant Name:

E-mail Address

Phone Number

Property Address (Address, City, State, Zip)

Do you own this property?

If no, Owner Name:

Owner Telephone:

Yes

No

II. Septic System Information

What year was your existing septic system installed?

Do you provide maintenance to your septic system?

Yes

No

When was the last time your system was pumped out?

Have you had any septic problems in the **past**?

Yes

No

If yes, what year?

What type(s) of septic problems have you had in the **past**? (Check all that apply)

Septic back-up in the house

Wet/mushy ground

Foul odors

Standing water in the yard

Other

What type(s) of septic problems do you **currently** have? (Check all that apply)

Septic back-up in the house

Wet/mushy ground

Foul odors

Standing water in the yard

Other

