



Prevent • Promote • Protect

Environmental Health Division

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Operation and Maintenance: Site Assessment

O&M Site Assessment is designed to capture general site conditions at time of each service/inspection.

PROPERTY INFORMATION	
Property Address	ON#:
City, State, Zip	
Structure Type:	<input type="checkbox"/> Main Residence <input type="checkbox"/> Secondary Living Structure <input type="checkbox"/> Auxiliary Structure
Inspection Type:	<input type="checkbox"/> Initial Inspection <input type="checkbox"/> Annual Inspection <input type="checkbox"/> Other:

SYSTEM INFORMATION	
System Design Flow:	
Distribution Type:	<input type="checkbox"/> Pressure Distribution <input type="checkbox"/> Drip Dispersal <input type="checkbox"/> Low-pressure <input type="checkbox"/> Other:
Treatment Component:	<input type="checkbox"/> Mound <input type="checkbox"/> Sand filter <input type="checkbox"/> Media Filter: <input type="checkbox"/> Other:
	<input type="checkbox"/> Aerobic Treatment Unit: Type of Unit:
Pump/Siphon	<input type="checkbox"/> Pump: <input type="checkbox"/> Siphon:
Pump: Dose Type	<input type="checkbox"/> Demand Dose <input type="checkbox"/> Timed Dose

O&M SITE EVALUATION	
Date of Service:	Time of Service:
Presence of Odor: (general site odor)	<input type="checkbox"/> None <input type="checkbox"/> Mild <input type="checkbox"/> Strong <input type="checkbox"/> Chemical <input type="checkbox"/> Sour Source if present:
All components present and not modified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Components are accessible with lids at grade?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any evidence of traffic or livestock on OWTS:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Any construction, utility work, or changes in drainage:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Additional Comments:

Site Address:

ON:

Service Provider Signature:

Date: