



Prevent • Promote • Protect

Environmental Health Division

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Onsite Wastewater Treatment System Follow Up Certified Inspection

Date of Inspection: _____

For Property Sale Follow up: All comments entered should correspond directly to the items noted on the issued Conditional Acceptance Document (i.e., 1. 2. a. b. etc.) If this is a second initial inspection, please use the standard Property Sale Inspection form.

For Operation and Maintenance Follow up: Please be sure to identify the conditions clearly, for which you are providing follow up comments.

PROPERTY INFORMATION	
Property Address:	ON#:
City, State, Zip:	Tax Schedule #:
System Identifier:	
Inspection Type: <input type="checkbox"/> Follow Up Inspection Property Sale <input type="checkbox"/> Follow up Operation and Maintenance Inspection	
Date Form Completed:	Form Completed by:
Certified Inspector:	Professional License No.:
Follow Up Inspection Comments:	

Follow Up Inspection Comments (cont.):